

Table 6.1 Demographic and Socioeconomic Characteristics of Medicare Beneficiaries, 1992-2007

All Medicare Beneficiaries

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
All Beneficiaries (in 1,000s)	36,785	41,808	43,877	44,982	2.52	1.47	1.29
	62	117	138	121			
Beneficiaries as a Percentage of Column Total							
Medicare Status							
65 years and older	90.00	85.89	84.05	83.95	-0.12	-0.46	-0.47
	0.10	0.27	0.35	0.33			
64 years and younger	10.00	14.11	15.95	16.05	0.63	2.61	3.50
	0.10	0.27	0.35	0.33			
Gender							
Male	42.92	43.93	44.39	44.64	0.56	0.32	0.23
	0.25	0.27	0.31	0.31			
Female	57.08	56.07	55.61	55.36	-0.45	-0.25	-0.18
	0.25	0.27	0.31	0.31			
Race/Ethnicity							
White Non-Hispanic	84.21	79.18	78.53	78.42	-0.14	-0.19	-0.61
	0.55	0.44	0.52	0.48			
All others	15.79	20.82	21.47	21.58	0.51	0.72	2.80
	0.55	0.44	0.52	0.48			
Functional Limitation							
None	52.13	53.08	55.62	55.11	-0.92	0.75	0.18
	0.62	0.53	0.64	0.66			
IADL only ¹	21.96	22.21	21.48	22.51	4.80	0.27	0.11
	0.41	0.47	0.44	0.45			
One to two ADLs ²	14.51	13.80	13.19	12.94	-1.90	-1.28	-0.50
	0.35	0.36	0.37	0.38			
Three to five ADLs	11.40	10.91	9.72	9.43	-2.98	-2.87	-0.44
	0.33	0.30	0.28	0.33			

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	62	117	138	121			
Beneficiaries as a Percentage of Column Total							
Usual Source of Care							
No usual source of care	9.55	4.80	5.01	4.75	-5.19	-0.21	-6.65
	0.35	0.24	0.22	0.25			
Has usual source of care	90.45	95.20	94.99	95.25	0.27	0.01	0.51
	0.35	0.24	0.22	0.25			
Living Arrangement							
Community							
Alone	27.00	29.40	28.37	28.67	1.06	-0.50	0.86
	0.36	0.48	0.43	0.47			
With spouse	51.17	49.28	49.29	49.25	-0.08	-0.01	-0.38
	0.39	0.49	0.46	0.42			
With children/others	16.74	16.46	17.92	17.79	-0.73	1.57	-0.17
	0.36	0.38	0.40	0.40			
Long-Term Care Facility	5.09	4.87	4.42	4.29	-2.94	-2.50	-0.44
	0.18	0.17	0.17	0.16			
Health Insurance							
Medicare fee-for-service only	11.88	9.44	8.63	8.25	-4.40	-2.66	-2.27
	0.37	0.31	0.34	0.31			
Medicaid	16.27	19.13	20.42	20.06	-1.76	0.95	1.63
	0.45	0.39	0.46	0.40			
Private health insurance	65.82	58.42	55.22	53.30	-3.48	-1.82	-1.19
	0.59	0.62	0.48	0.64			
Medicare HMO ³	6.03	13.01	15.73	18.39	16.91	7.17	7.99
	0.30	0.36	0.40	0.50			

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All Beneficiaries (in 1,000s)	36,785	41,808	43,877	44,982	2.52	1.47	1.29
	<i>62</i>	<i>117</i>	<i>138</i>	<i>121</i>			
Beneficiaries as a Percentage of Column Total							
Share of Income							
Lowest income quartile	6.66	6.47	6.51	5.98	-8.14	-1.56	-0.29
	<i>0.22</i>	<i>0.19</i>	<i>0.22</i>	<i>0.34</i>			
Second income quartile	13.29	13.90	12.92	13.30	2.94	-0.88	0.45
	<i>0.41</i>	<i>0.44</i>	<i>0.45</i>	<i>0.84</i>			
Third income quartile	24.47	21.93	22.48	21.10	-6.14	-0.77	-1.09
	<i>0.66</i>	<i>0.71</i>	<i>0.72</i>	<i>1.33</i>			
Highest income quartile	55.58	57.69	58.10	59.62	2.62	0.66	0.37
	<i>1.05</i>	<i>1.22</i>	<i>1.23</i>	<i>2.40</i>			

Source: Medicare Current Beneficiary Survey, Cost and Use Public Use Files, and Access to Care Public Use Files: CY 1992, CY 2002, CY 2006, and CY 2007.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

1 *IADL* stands for Instrumental Activity of Daily Living.2 *ADL* stands for Activity of Daily Living.3 *HMO* stands for Health Maintenance Organization.

Table 6.2 Personal Health Care Expenditures for Medicare Beneficiaries by Type of Medical Service, 1992-2007
(Total expenditures in millions of nominal dollars)

All Medicare Beneficiaries

Medical Service	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Total Medical Services							
All beneficiaries	\$247,037	\$500,298	\$653,636	\$693,385	6.08	6.75	7.31
	4,091	8,667	9,496	8,638			
Beneficiaries 65 years and older	213,755	419,324	544,057	569,957	4.76	6.33	6.97
	3,608	7,542	9,404	7,942			
Beneficiaries 64 years and younger	33,282	80,975	109,579	123,429	12.64	8.80	9.30
	2,029	3,856	5,132	5,524			
Inpatient Hospital Services							
All beneficiaries	81,061	136,159	159,464	161,711	1.41	3.50	5.32
	2,145	5,089	4,228	4,253			
Beneficiaries 65 years and older	71,036	114,422	132,734	132,998	0.20	3.05	4.88
	2,045	3,923	4,176	4,091			
Beneficiaries 64 years and younger	10,025	21,737	26,730	28,713	7.42	5.72	8.05
	788	2,534	1,969	2,139			
Outpatient Hospital Services							
All beneficiaries	19,294	45,363	61,400	67,597	10.09	8.30	8.93
	623	1,235	2,028	2,501			
Beneficiaries 65 years and older	15,756	35,586	47,167	54,518	15.59	8.91	8.49
	534	1,108	1,675	2,224			
Beneficiaries 64 years and younger	3,538	9,777	14,233	13,079	-8.11	5.99	10.70
	286	828	1,113	1,081			
Physician/Supplier Services							
All beneficiaries	57,367	126,142	173,145	171,693	-0.84	6.36	8.20
	1,022	2,580	5,191	2,636			
Beneficiaries 65 years and older	51,593	108,068	148,989	145,842	-2.11	6.18	7.67
	1,010	2,306	5,269	2,622			
Beneficiaries 64 years and younger	5,774	18,074	24,156	25,851	7.02	7.42	12.09
	286	988	1,220	1,376			

Table 6.2 Personal Health Care Expenditures for Medicare Beneficiaries by Type of Medical Service, 1992-2007
(Total expenditures in millions of nominal dollars)

All Medicare Beneficiaries

Medical Service	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Dental Services							
All beneficiaries	\$4,882	\$10,117	\$13,706	\$15,077	10.00	8.31	7.56
	152	310	411	571			
Beneficiaries 65 years and older	4,469	9,073	12,124	13,779	13.65	8.72	7.34
	138	291	371	536			
Beneficiaries 64 years and younger	413	1,044	1,581	1,298	-17.90	4.45	9.72
	51	112	192	127			
Prescription Medicines							
All beneficiaries	16,231	59,469	102,917	119,151	15.77	14.91	13.87
	231	827	1,342	1,418			
Beneficiaries 65 years and older	13,934	47,029	77,850	88,212	13.31	13.41	12.94
	229	643	1,041	1,194			
Beneficiaries 64 years and younger	2,297	12,440	25,068	30,939	23.42	19.99	18.40
	102	622	1,126	1,233			
Medicare Hospice Services							
All beneficiaries	868	4,541	9,023	8,795	-2.53	14.13	17.99
	137	532	857	792			
Beneficiaries 65 years and older	831	4,476	8,621	8,203	-4.85	12.88	18.34
	135	530	831	760			
Beneficiaries 64 years and younger	37	65	402	592	47.26	55.55	5.80
	23	37	252	283			
Medicare Home Health Services							
All beneficiaries	9,189	13,631	18,770	20,856	11.11	8.88	4.02
	638	957	1,054	1,171			
Beneficiaries 65 years and older	8,540	12,485	16,600	18,632	12.24	8.34	3.87
	611	905	985	1,120			
Beneficiaries 64 years and younger	649	1,146	2,170	2,224	2.49	14.18	5.85
	108	172	330	349			

Table 6.2 Personal Health Care Expenditures for Medicare Beneficiaries by Type of Medical Service, 1992-2007
(Total expenditures in millions of nominal dollars)

All Medicare Beneficiaries

Medical Service	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Long-Term Facility Care¹							
All beneficiaries	\$58,146	\$104,878	\$115,212	\$128,505	11.54	4.15	6.08
	<i>2,909</i>	<i>3,687</i>	<i>3,872</i>	<i>4,801</i>			
Beneficiaries 65 years and older	47,596	88,185	99,972	107,772	7.80	4.09	6.36
	<i>1,916</i>	<i>2,939</i>	<i>3,312</i>	<i>3,696</i>			
Beneficiaries 64 years and younger	10,550	16,693	15,240	20,732	36.04	4.43	4.70
	<i>1,634</i>	<i>1,935</i>	<i>2,131</i>	<i>2,624</i>			

Source: Medicare Current Beneficiary Survey, Cost and Use Public Use Files: CY 1992, CY 2002, CY 2006, and CY 2007.

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- 1 Expenditures for long-term care in facilities include facility room and board expenses for beneficiaries who resided in a facility for the full year; facility room and board expenses for beneficiaries who resided in a facility for part of the year and in the community for part of the year; and expenditures for short-term facility stays (institutional events), primarily in skilled nursing facilities, for full-year or part-year community residents, which were reported during a community interview or created through Medicare claims data. See Appendix B for additional information.

Table 6.3 Personal Health Care Expenditures, Share of Personal Health Care Expenditures, and Payer Sources for Medicare Beneficiaries by Type of Medical Service, 1992-2007

All Medicare Beneficiaries

Medical Service	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Total Personal Health Care Expenditures (millions of \$)	\$247,037 4,091	\$500,298 8,667	\$653,636 9,496	\$693,385 8,638	6.08	6.75	7.31
Source of Payment (percent)							
Medicare	53.28 0.83	52.65 0.62	58.58 0.74	61.05 0.66	4.22	3.00	-0.12
Medicaid	13.99 0.81	11.35 0.49	8.56 0.38	8.28 0.36	-3.27	-6.11	-2.07
Private insurance	9.88 0.38	13.33 0.55	13.45 0.69	11.35 0.35	-15.61	-3.16	3.04
Out of pocket	19.73 0.41	18.58 0.36	17.02 0.37	16.66 0.42	-2.12	-2.16	-0.60
Other source	3.11 0.26	4.09 0.36	2.39 0.14	2.66 0.19	11.30	-8.24	2.78
Total Inpatient Hospital Expenditures (millions of \$)	\$81,061 2,145	\$136,159 5,089	\$159,464 4,228	\$161,711 4,253	1.41	3.50	5.32
Percentage of Total Health Care Expenditures	32.81 0.66	27.22 0.67	24.40 0.58	23.32 0.46	-4.43	-3.05	-1.85
Source of Payment (percent)							
Medicare	87.08 0.85	86.78 1.32	85.92 1.36	88.15 0.78	2.60	0.31	-0.03
Medicaid	1.44 0.10	1.17 0.07	1.12 0.08	1.20 0.07	7.14	0.51	-2.05
Private insurance	7.47 0.79	8.15 1.41	8.60 1.05	7.13 0.60	-17.09	-2.64	0.88
Out of pocket	1.93 0.23	2.81 0.29	3.85 0.76	2.81 0.38	-27.01	0.00	3.83
Other source	2.07 0.30	1.10 0.21	0.52 0.10	0.70 0.28	34.62	-8.64	-6.13

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Total Personal Health Care Expenditures (millions of \$)	\$247,037	\$500,298	\$653,636	\$693,385	6.08	6.75	7.31
	4,091	8,667	9,496	8,638			
Total Outpatient Hospital Expenditures (millions of \$)	\$19,294	\$45,363	\$61,400	\$67,597	10.09	8.30	8.93
	623	1,235	2,028	2,501			
Percentage of Total Health Care Expenditures	7.81	9.07	9.39	9.75	3.83	1.46	1.51
	0.22	0.23	0.26	0.34			
Source of Payment (percent)							
Medicare	62.05	62.77	71.17	68.56	-3.67	1.78	0.12
	0.77	1.06	1.12	2.33			
Medicaid	3.90	2.53	2.63	2.15	-18.25	-3.20	-4.24
	0.28	0.20	0.18	0.19			
Private insurance	20.29	21.90	17.26	18.23	5.62	-3.60	0.77
	0.69	1.10	1.20	2.06			
Out of pocket	9.63	9.93	7.72	9.75	26.30	-0.37	0.31
	0.40	0.70	0.36	1.48			
Other source	4.13	2.86	1.23	1.31	6.50	-14.46	-3.61
	0.41	0.38	0.29	0.27			
Total Physician/Supplier Services Expenditures (millions of \$)	\$57,367	\$126,142	\$173,145	\$171,693	-0.84	6.36	8.20
	1,022	2,580	5,191	2,636			
Percentage of Total Health Care Expenditures	23.22	25.21	26.49	24.76	-6.53	-0.36	0.83
	0.39	0.45	0.56	0.35			

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Total Personal Health Care Expenditures (millions of \$)	\$247,037 4,091	\$500,298 8,667	\$653,636 9,496	\$693,385 8,638	6.08	6.75	7.31
Source of Payment (percent)							
Medicare	63.44 0.40	65.09 0.97	64.92 1.66	68.15 0.66	4.98	0.92	0.26
Medicaid	2.86 0.15	2.52 0.16	2.35 0.15	2.18 0.14	-7.23	-2.86	-1.26
Private insurance	14.87 0.35	15.68 1.17	16.06 1.83	12.88 0.24	-19.80	-3.86	0.53
Out of pocket	17.79 0.32	15.70 0.44	16.19 0.47	16.22 0.64	0.19	0.65	-1.24
Other source	1.05 0.11	1.01 0.09	0.49 0.07	0.56 0.06	14.29	-11.13	-0.39
Total Dental Services Expenditures (millions of \$)	\$4,882 152	\$10,117 310	\$13,706 411	\$15,077 571	10.00	8.31	7.56
Percentage of Total Health Care Expenditures	1.98 0.07	2.02 0.07	2.10 0.07	2.17 0.08	3.33	1.44	0.20
Source of Payment (percent)							
Medicare	0.11 0.03	0.81 0.06	1.94 0.09	2.01 0.10	3.61	19.93	22.10
Medicaid	2.18 0.24	1.22 0.25	1.59 0.35	0.94 0.17	-40.88	-5.08	-5.64
Private insurance	11.87 0.64	17.84 0.85	17.60 0.81	18.87 1.04	7.22	1.13	4.16
Out of pocket	82.92 0.82	78.05 0.94	77.67 0.90	77.47 1.10	-0.26	-0.15	-0.60
Other source	2.92 0.49	2.08 0.41	1.21 0.32	0.71 0.17	-41.32	-19.34	-3.34

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All Medicare Beneficiaries

Medical Service	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Total Personal Health Care Expenditures (millions of \$)	\$247,037	\$500,298	\$653,636	\$693,385	6.08	6.75	7.31
	4,091	8,667	9,496	8,638			
Total Prescription Medicine Expenditures (millions of \$)	\$16,231	\$59,469	\$102,917	\$119,151	15.77	14.91	13.87
	231	827	1,342	1,418			
Percentage of Total Health Care Expenditures	6.57	11.89	15.75	17.18	9.08	7.64	6.11
	0.13	0.22	0.27	0.24			
Source of Payment (percent)							
Medicare	0.32	3.27	39.46	52.76	33.71	74.40	26.17
	0.06	0.13	0.74	0.79			
Medicaid	10.25	14.80	3.51	0.64	-81.77	-46.64	3.74
	0.39	0.65	0.21	0.08			
Private insurance	25.45	35.87	28.48	21.03	-26.16	-10.13	3.49
	0.69	0.70	0.67	0.61			
Out of pocket	57.48	34.78	21.43	19.61	-8.49	-10.83	-4.90
	0.71	0.55	0.30	0.24			
Other source	6.51	11.27	7.11	5.97	-16.03	-11.93	5.64
	0.44	0.45	0.36	0.32			
Total Hospice Services Expenditures (millions of \$)	\$868	\$4,541	\$9,023	\$8,795	-2.53	14.13	17.99
	137	532	857	792			
Percentage of Total Health Care Expenditures	0.35	0.91	1.38	1.27	-7.97	6.89	10.03
	0.06	0.10	0.13	0.12			

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Total Personal Health Care Expenditures (millions of \$)	\$247,037	\$500,298	\$653,636	\$693,385	6.08	6.75	7.31
	4,091	8,667	9,496	8,638			
Source of Payment (percent)							
Medicare	99.98	100.00	100.00	100.00	0.00	0.00	0.00
	0.02	0.00	0.00	0.00			
Medicaid	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00			
Private insurance	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00			
Out of pocket	0.02	0.00	0.00	0.00	0.00	0.00	-100.00
	0.02	0.00	0.00	0.00			
Other source	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00			
Total Home Health Services Expenditures (millions of \$)	\$9,189	\$13,631	\$18,770	\$20,856	11.11	8.88	4.02
	638	957	1,054	1,171			
Percentage of Total Health Care Expenditures	3.72	2.72	2.87	3.01	4.88	2.05	-3.08
	0.24	0.18	0.15	0.16			
Source of Payment (percent)							
Medicare	89.94	84.48	90.71	92.09	1.52	1.74	-0.62
	1.90	4.79	1.85	2.33			
Medicaid	0.96	1.95	0.98	0.77	-21.43	-16.96	7.34
	0.32	0.70	0.22	0.12			
Private insurance	1.19	4.41	1.35	0.48	-64.44	-35.83	14.00
	0.67	3.62	0.46	0.16			
Out of pocket	5.82	7.77	6.00	6.53	8.83	-3.42	2.93
	1.49	1.80	1.64	2.41			
Other source	2.08	1.39	0.95	0.14	-85.26	-36.81	-3.95
	1.15	0.46	0.57	0.06			

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All Medicare Beneficiaries

Medical Service	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Total Personal Health Care Expenditures (millions of \$)	\$247,037	\$500,298	\$653,636	\$693,385	6.08	6.75	7.31
	<i>4,091</i>	<i>8,667</i>	<i>9,496</i>	<i>8,638</i>			
Total Long-Term Facility Care¹ Expenditures (millions of \$)	\$58,146	\$104,878	\$115,212	\$128,505	11.54	4.15	6.08
	<i>2,909</i>	<i>3,687</i>	<i>3,872</i>	<i>4,801</i>			
Percentage of Total Health Care Expenditures	23.54	20.96	17.63	18.53	5.10	-2.43	-1.15
	<i>1.02</i>	<i>0.66</i>	<i>0.53</i>	<i>0.59</i>			
Source of Payment (percent)							
Medicare	6.00	15.82	19.84	20.41	2.87	5.23	10.18
	<i>0.47</i>	<i>0.84</i>	<i>0.91</i>	<i>1.05</i>			
Medicaid	50.14	39.72	38.61	38.28	-0.85	-0.74	-2.30
	<i>2.02</i>	<i>1.60</i>	<i>1.66</i>	<i>1.43</i>			
Private insurance	1.87	2.03	3.33	3.69	10.81	12.70	0.82
	<i>0.30</i>	<i>0.28</i>	<i>0.34</i>	<i>0.42</i>			
Out of pocket	36.46	33.55	33.44	31.23	-6.61	-1.42	-0.83
	<i>1.73</i>	<i>1.35</i>	<i>1.39</i>	<i>1.25</i>			
Other source	5.53	8.87	4.79	6.39	33.40	-6.35	4.84
	<i>0.90</i>	<i>1.56</i>	<i>0.50</i>	<i>0.77</i>			

Source: Medicare Current Beneficiary Survey, Cost and Use Public Use Files: CY 1992, CY 2002, CY 2006, and CY 2007.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

¹ Expenditures for long-term care in facilities include facility room and board expenses for beneficiaries who resided in a facility for the full year; facility room and board expenses for beneficiaries who resided in a facility for part of the year and in the community for part of the year; and expenditures for short-term facility stays (institutional events), primarily in skilled nursing facilities, for full-year or part-year community residents, which were reported during a community interview or created through Medicare claims data. See Appendix B for additional information.

Table 6.4 Personal Health Care Expenditures for Medicare Beneficiaries by Demographic and Socioeconomic Characteristics, 1992-2007

All Medicare Beneficiaries

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Personal Health Care Expenditures (millions of \$)	\$247,037 4,091	\$500,298 8,667	\$653,636 9,496	\$693,385 8,638	6.08	6.75	7.31
Percentage of Personal Health Care Expenditures¹							
Medicare Status							
65 years and older	86.53 0.74	83.81 0.68	83.24 0.75	82.20 0.73	-1.25	-0.39	-0.32
64 years and younger	13.47 0.74	16.19 0.68	16.76 0.75	17.80 0.73	6.21	1.91	1.86
Race/Ethnicity							
White non-Hispanic	84.51 0.87	78.77 0.98	77.87 0.98	77.46 0.74	-0.53	-0.33	-0.70
All others	15.49 0.87	21.23 0.98	22.13 0.98	22.54 0.74	1.85	1.20	3.20
Living Arrangement							
Community							
Alone	22.18 0.69	25.03 0.79	25.50 0.72	26.58 0.73	4.24	1.21	1.22
With spouse	38.02 0.98	39.74 0.92	38.82 0.73	38.99 0.70	0.44	-0.38	0.44
With children/others	16.45 0.90	15.75 0.63	19.24 0.77	17.94 0.63	-6.76	2.64	-0.43
Long-Term Care Facility	23.35 1.06	19.49 0.87	16.45 0.70	16.49 0.71	0.24	-3.29	-1.79

Table 6.4 Personal Health Care Expenditures for Medicare Beneficiaries by Demographic and Socioeconomic Characteristics, 1992-2007

All Medicare Beneficiaries

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Personal Health Care Expenditures (millions of \$)	\$247,037	\$500,298	\$653,636	\$693,385	6.08	6.75	7.31
	4,091	8,667	9,496	8,638			
Percentage of Personal Health Care Expenditures¹							
Functional Limitation							
None	25.85	30.43	33.70	33.87	0.50	2.17	1.64
	0.85	0.85	0.89	0.78			
IADL only ²	20.09	22.87	22.58	23.20	2.75	0.29	1.30
	0.87	0.92	0.82	0.78			
One to two ADLs ³	20.23	17.96	16.90	17.29	2.31	-0.76	-1.18
	0.79	0.70	0.63	0.73			
Three to five ADLs	33.83	28.74	26.81	25.65	-4.33	-2.25	-1.62
	0.99	0.89	0.87	0.84			
Health Insurance⁴							
Medicare fee-for-service only	9.15	7.30	5.72	5.37	-6.12	-5.96	-2.23
	0.57	0.57	0.41	0.40			
Medicaid	33.83	31.47	33.04	32.65	-1.18	0.74	-0.72
	1.21	0.83	0.92	0.91			
Private health insurance	51.81	51.49	48.01	47.44	-1.19	-1.63	-0.06
	1.24	1.00	0.85	0.91			

Table 6.4 Personal Health Care Expenditures for Medicare Beneficiaries by Demographic and Socioeconomic Characteristics, 1992-2007

All Medicare Beneficiaries

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Personal Health Care Expenditures (millions of \$)	\$247,037 <i>4,091</i>	\$500,298 <i>8,667</i>	\$653,636 <i>9,496</i>	\$693,385 <i>8,638</i>	6.08	6.75	7.31
Percentage of Personal Health Care Expenditures¹							
Income							
Lowest income quartile	32.60 <i>0.98</i>	31.57 <i>1.02</i>	32.82 <i>0.82</i>	32.72 <i>0.80</i>	-0.30	0.72	-0.32
Second income quartile	26.57 <i>0.85</i>	25.26 <i>0.75</i>	25.86 <i>0.85</i>	27.60 <i>0.80</i>	6.73	1.79	-0.50
Third income quartile	22.47 <i>0.75</i>	21.74 <i>0.71</i>	21.13 <i>0.66</i>	20.30 <i>0.78</i>	-3.93	-1.36	-0.33
Highest income quartile	18.36 <i>0.81</i>	21.43 <i>0.78</i>	20.19 <i>0.67</i>	19.38 <i>0.72</i>	-4.01	-1.99	1.56

Source: Medicare Current Beneficiary Survey, Cost and Use Public Use Files: CY 1992, CY 2002, CY 2006, and CY 2007.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 Column percentages in longitudinal tables add up to 100 percent because expenditures for survey persons with missing values are assumed to be distributed the same as expenditures for those with nonmissing values.
- 2 *IADL* stands for Instrumental Activity of Daily Living.
- 3 *ADL* stands for Activity of Daily Living.
- 4 Health insurance will not add up to 100 percent because beneficiaries with Medicare Health Maintenance Organization coverage are not included.

Table 6.5 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Total Inpatient Hospital Expenditures (millions of \$)	\$72,063	\$116,613	\$137,830	\$140,312	1.80	3.77	4.93
	2,095	4,455	4,188	3,842			
Percentage of Total Inpatient Hospital Expenditures²							
Medicare Status							
65 years and older	86.92	83.63	82.64	81.35	-1.56	-0.55	-0.39
	1.01	1.76	1.31	1.37			
64 years and younger	13.08	16.37	17.36	18.65	7.43	2.64	2.27
	1.01	1.76	1.31	1.37			
Race/Ethnicity							
White non-Hispanic	82.19	76.71	76.06	74.81	-1.64	-0.50	-0.69
	1.59	1.70	1.65	1.43			
All others	17.81	23.29	23.94	25.19	5.22	1.58	2.72
	1.59	1.70	1.65	1.43			
Functional Limitation							
None	30.60	35.51	38.16	38.02	-0.37	1.38	1.50
	1.43	1.65	1.87	1.49			
IADL only ³	26.22	30.76	28.75	27.61	-3.97	-2.14	1.61
	1.59	2.04	1.61	1.31			
One to two ADLs ⁴	23.33	20.50	17.80	19.84	11.46	-0.65	-1.28
	1.49	1.40	1.09	1.60			
Three to five ADLs	19.84	13.23	15.28	14.53	-4.91	1.89	-3.97
	1.39	1.07	1.25	1.32			

Table 6.5 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Total Inpatient Hospital Expenditures (millions of \$)	\$72,063	\$116,613	\$137,830	\$140,312	1.80	3.77	4.93
	<i>2,095</i>	<i>4,455</i>	<i>4,188</i>	<i>3,842</i>			
Percentage of Total Inpatient Hospital Expenditures²							
Health Insurance⁵							
Medicare fee-for-service only	9.26	7.91	6.45	5.23	-18.91	-7.94	-1.56
	<i>0.96</i>	<i>1.00</i>	<i>0.92</i>	<i>0.70</i>			
Medicaid	19.67	20.96	24.95	25.18	0.92	3.74	0.64
	<i>1.58</i>	<i>1.26</i>	<i>1.76</i>	<i>1.50</i>			
Private health insurance	62.81	58.44	53.21	53.04	-0.32	-1.92	-0.72
	<i>1.89</i>	<i>1.72</i>	<i>1.74</i>	<i>1.66</i>			
Income							
Lowest income quartile	26.54	29.53	29.65	32.79	10.59	2.12	1.07
	<i>1.52</i>	<i>1.97</i>	<i>1.68</i>	<i>1.46</i>			
Second income quartile	29.87	23.74	29.18	26.43	-9.42	2.17	-2.27
	<i>1.59</i>	<i>1.47</i>	<i>1.53</i>	<i>1.39</i>			
Third income quartile	22.35	25.47	20.44	21.02	2.84	-3.77	1.32
	<i>1.37</i>	<i>1.46</i>	<i>1.28</i>	<i>1.50</i>			
Highest income quartile	21.24	21.27	20.74	19.76	-4.73	-1.46	0.01
	<i>1.63</i>	<i>1.85</i>	<i>1.57</i>	<i>1.37</i>			

Source: Medicare Current Beneficiary Survey, Cost and Use Public Use Files: CY 1992, CY 2002, CY 2006, and CY 2007.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Column percentages in longitudinal tables add up to 100 percent because expenditures for survey persons with missing values are assumed to be distributed the same as expenditures for those with nonmissing values.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.
- 5 Health insurance will not add up to 100 percent because beneficiaries with Medicare Health Maintenance Organization coverage are not included.

Table 6.6 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Total Outpatient Hospital Expenditures (millions of \$)	\$17,324	\$41,361	\$56,315	\$61,324	8.89	8.20	9.09
	628	1,226	2,085	2,500			
Percentage of Total Outpatient Hospital Expenditures²							
Medicare Status							
65 years and older	81.80	77.74	77.13	79.98	3.70	0.57	-0.51
	1.32	1.78	1.72	1.48			
64 years and younger	18.20	22.26	22.87	20.02	-12.46	-2.10	2.03
	1.32	1.78	1.72	1.48			
Race/Ethnicity							
White non-Hispanic	79.39	74.78	75.56	72.67	-3.82	-0.57	-0.60
	1.86	1.79	1.78	3.05			
All others	20.61	25.22	24.44	27.33	11.82	1.62	2.04
	1.86	1.79	1.78	3.05			
Functional Limitation							
None	41.71	45.93	46.09	45.78	-0.67	-0.07	0.97
	1.86	1.64	2.16	2.29			
IADL only ³	27.74	27.69	27.86	27.57	-1.04	-0.09	-0.02
	1.72	1.56	1.57	1.95			
One to two ADLs ⁴	19.30	18.09	14.88	18.25	22.65	0.18	-0.65
	1.48	1.44	1.12	2.97			
Three to five ADLs	11.25	8.29	11.17	8.40	-24.80	0.26	-3.01
	1.22	0.91	1.81	1.00			

Table 6.6 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Total Outpatient Hospital Expenditures (millions of \$)	\$17,324	\$41,361	\$56,315	\$61,324	8.89	8.20	9.09
	628	1,226	2,085	2,500			
Percentage of Total Outpatient Hospital Expenditures²							
Health Insurance⁵							
Medicare fee-for-service only	9.06	6.98	6.87	5.77	-16.01	-3.74	-2.57
	0.83	0.86	0.76	0.72			
Medicaid	19.50	18.45	25.36	20.79	-18.02	2.42	-0.55
	1.76	1.61	1.98	1.47			
Private health insurance	64.90	63.02	54.49	58.24	6.88	-1.57	-0.29
	1.95	1.71	2.01	1.92			
Income							
Lowest income quartile	24.72	26.02	28.92	26.25	-9.23	0.18	0.51
	1.63	1.61	1.68	1.55			
Second income quartile	27.59	24.93	28.23	25.80	-8.61	0.69	-1.01
	1.86	1.41	1.59	1.65			
Third income quartile	24.83	24.73	22.04	25.62	16.24	0.71	-0.04
	1.55	1.46	1.17	2.57			
Highest income quartile	22.86	24.31	20.81	22.33	7.30	-1.68	0.62
	1.31	1.47	1.50	1.36			

Source: Medicare Current Beneficiary Survey, Cost and Use Public Use Files: CY 1992, CY 2002, CY 2006, and CY 2007.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.

2 Column percentages in longitudinal tables add up to 100 percent because expenditures for survey persons with missing values are assumed to be distributed the same as expenditures for those with nonmissing values.

3 *IADL* stands for Instrumental Activity of Daily Living.

4 *ADL* stands for Activity of Daily Living.

5 Health insurance will not add up to 100 percent because beneficiaries with Medicare Health Maintenance Organization coverage are not included.

Table 6.7 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Total Physician/Supplier Expenditures (millions of \$)	\$52,350 <i>1,018</i>	\$115,757 <i>2,589</i>	\$162,067 <i>5,172</i>	\$159,567 <i>2,588</i>	-1.54	6.63	8.26
Percentage of Total Physician/Supplier Services Expenditures²							
Medicare Status							
65 years and older	89.68 <i>0.53</i>	85.42 <i>0.77</i>	86.05 <i>0.85</i>	84.85 <i>0.80</i>	-1.39	-0.13	-0.49
64 years and younger	10.32 <i>0.53</i>	14.58 <i>0.77</i>	13.95 <i>0.85</i>	15.15 <i>0.80</i>	8.60	0.77	3.52
Race/Ethnicity							
White non-Hispanic	83.90 <i>0.86</i>	78.23 <i>1.47</i>	77.43 <i>1.81</i>	77.99 <i>0.85</i>	0.72	-0.06	-0.70
All others	16.10 <i>0.86</i>	21.77 <i>1.47</i>	22.57 <i>1.81</i>	22.01 <i>0.85</i>	-2.48	0.22	3.06
Functional Limitation							
None	40.49 <i>1.15</i>	42.76 <i>1.30</i>	43.84 <i>1.54</i>	46.29 <i>0.94</i>	5.59	1.60	0.55
IADL only ³	26.19 <i>1.05</i>	28.79 <i>1.37</i>	27.64 <i>1.67</i>	27.06 <i>0.91</i>	-2.10	-1.23	0.95
One to two ADLs ⁴	19.31 <i>0.94</i>	17.41 <i>0.88</i>	15.97 <i>1.04</i>	16.92 <i>0.82</i>	5.95	-0.57	-1.03
Three to five ADLs	14.01 <i>0.87</i>	11.05 <i>0.58</i>	12.54 <i>1.85</i>	9.73 <i>0.61</i>	-22.41	-2.51	-2.35

Table 6.7 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Total Physician/Supplier Expenditures (millions of \$)	\$52,350 <i>1,018</i>	\$115,757 <i>2,589</i>	\$162,067 <i>5,172</i>	\$159,567 <i>2,588</i>	-1.54	6.63	8.26
Percentage of Total Physician/Supplier Services Expenditures²							
Health Insurance⁵							
Medicare fee-for-service only	6.90 <i>0.41</i>	5.64 <i>0.44</i>	4.17 <i>0.36</i>	4.38 <i>0.34</i>	5.04	-4.93	-2.00
Medicaid	15.66 <i>0.85</i>	17.47 <i>0.76</i>	19.97 <i>1.11</i>	18.69 <i>0.67</i>	-6.41	1.36	1.10
Private health insurance	71.57 <i>1.01</i>	63.97 <i>1.02</i>	60.26 <i>1.54</i>	58.78 <i>0.98</i>	-2.46	-1.68	-1.12
Income							
Lowest income quartile	22.57 <i>0.91</i>	25.10 <i>1.53</i>	26.36 <i>1.40</i>	25.37 <i>0.73</i>	-3.76	0.21	1.07
Second income quartile	27.53 <i>0.96</i>	24.20 <i>0.82</i>	28.66 <i>1.66</i>	25.35 <i>0.94</i>	-11.55	0.93	-1.28
Third income quartile	24.59 <i>0.84</i>	26.32 <i>1.08</i>	22.77 <i>0.93</i>	23.94 <i>0.86</i>	5.14	-1.88	0.68
Highest income quartile	25.31 <i>0.99</i>	24.39 <i>0.95</i>	22.21 <i>0.98</i>	25.34 <i>1.05</i>	14.09	0.77	-0.37

Source: Medicare Current Beneficiary Survey, Cost and Use Public Use Files: CY 1992, CY 2002, CY 2006, and CY 2007.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.

2 Column percentages in longitudinal tables add up to 100 percent because expenditures for survey persons with missing values are assumed to be distributed the same as expenditures for those with nonmissing values.

3 *IADL* stands for Instrumental Activity of Daily Living.

4 *ADL* stands for Activity of Daily Living.

5 Health insurance will not add up to 100 percent because beneficiaries with Medicare Health Maintenance Organization coverage are not included.

Table 6.8 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Total Prescription Medicine Expenditures (millions of \$)	\$16,070	\$58,655	\$101,809	\$117,416	15.33	14.89	13.82
	228	828	1,351	1,404			
Percentage of Total Prescription Medicine Expenditures²							
Medicare Status							
65 years and older	85.74	78.95	75.47	73.99	-1.96	-1.29	-0.82
	0.62	0.89	0.92	0.88			
64 years and younger	14.26	21.05	24.53	26.01	6.03	4.32	3.97
	0.62	0.89	0.92	0.88			
Race/Ethnicity							
White non-Hispanic	86.25	80.59	75.94	75.96	0.03	-1.18	-0.68
	0.58	0.69	1.00	0.78			
All others	13.75	19.41	24.06	24.04	-0.08	4.37	3.51
	0.58	0.69	1.00	0.78			
Functional Limitation							
None	41.04	44.97	46.86	45.50	-2.90	0.23	0.92
	0.93	0.87	1.01	1.04			
IADL only ³	28.19	28.45	27.50	29.65	7.82	0.83	0.09
	0.74	0.86	0.76	0.84			
One to two ADLs ⁴	18.76	16.83	15.83	16.21	2.40	-0.75	-1.08
	0.66	0.71	0.70	0.71			
Three to five ADLs	12.01	9.74	9.80	8.64	-11.84	-2.37	-2.07
	0.61	0.61	0.70	0.58			

Table 6.8 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Total Prescription Medicine Expenditures (millions of \$)	\$16,070	\$58,655	\$101,809	\$117,416	15.33	14.89	13.82
	<i>228</i>	<i>828</i>	<i>1,351</i>	<i>1,404</i>			
Percentage of Total Prescription Medicine Expenditures²							
Health Insurance⁵							
Medicare fee-for-service only	8.62	5.42	5.47	5.63	2.93	0.76	-4.53
	<i>0.46</i>	<i>0.37</i>	<i>0.38</i>	<i>0.43</i>			
Medicaid	14.75	20.75	29.15	28.36	-2.71	6.45	3.47
	<i>0.59</i>	<i>0.76</i>	<i>0.99</i>	<i>1.02</i>			
Private health insurance	72.75	64.65	49.82	47.89	-3.87	-5.83	-1.17
	<i>0.73</i>	<i>0.86</i>	<i>0.84</i>	<i>0.96</i>			
Income							
Lowest income quartile	23.47	26.53	30.89	32.25	4.40	3.98	1.23
	<i>0.73</i>	<i>0.79</i>	<i>0.67</i>	<i>0.88</i>			
Second income quartile	25.64	23.70	26.52	24.13	-9.01	0.36	-0.78
	<i>0.75</i>	<i>0.68</i>	<i>0.68</i>	<i>0.82</i>			
Third income quartile	26.64	25.91	21.42	22.45	4.81	-2.83	-0.28
	<i>0.80</i>	<i>0.78</i>	<i>0.55</i>	<i>0.80</i>			
Highest income quartile	24.25	23.86	21.17	21.17	0.00	-2.36	-0.16
	<i>0.78</i>	<i>0.69</i>	<i>0.67</i>	<i>0.71</i>			

Source: Medicare Current Beneficiary Survey, Cost and Use Public Use Files: CY 1992, CY 2002, CY 2006, and CY 2007.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Column percentages in longitudinal tables add up to 100 percent because expenditures for survey persons with missing values are assumed to be distributed the same as expenditures for those with nonmissing values.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.
- 5 Health insurance will not add up to 100 percent because beneficiaries with Medicare Health Maintenance Organization coverage are not included.

Table 6.9 Long-Term Facility Care Expenditures for Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Long-Term Care Facility Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Total Long-Term Facility Care Expenditures (millions of \$)	\$56,280	\$96,297	\$101,709	\$110,301	8.45	2.75	5.52
	2,903	3,762	3,924	4,799			
Percentage of Total Long-Term Facility Care Expenditures²							
Medicare Status							
65 years and older	81.65	83.07	86.01	82.67	-3.88	-0.10	0.17
	2.22	1.71	1.87	1.94			
64 years and younger	18.35	16.93	13.99	17.33	23.87	0.47	-0.80
	2.22	1.71	1.87	1.94			
Race/Ethnicity							
White non-Hispanic	89.45	82.76	83.10	83.44	0.41	0.16	-0.77
	1.28	1.52	1.64	1.44			
All others	10.55	17.24	16.90	16.56	-2.01	-0.80	5.03
	1.28	1.52	1.64	1.44			
Functional Limitation							
None	2.52*	4.00	3.63	3.48*	-4.13	-2.75	4.73
	0.67	0.68	0.76	0.77			
IADL only ³	7.05	6.85	5.51	6.02	9.26	-2.55	-0.29
	1.28	1.53	0.70	0.87			
One to two ADLs ⁴	17.89	15.60	16.45	15.61	-5.11	0.01	-1.36
	1.48	1.32	1.35	1.39			
Three to five ADLs	72.54	73.55	74.41	74.89	0.65	0.36	0.14
	1.97	1.86	1.45	1.77			

Table 6.9 Long-Term Facility Care Expenditures for Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Long-Term Care Facility Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Total Long-Term Facility Care Expenditures (millions of \$)	\$56,280	\$96,297	\$101,709	\$110,301	8.45	2.75	5.52
	2,903	3,762	3,924	4,799			
Percentage of Total Long-Term Facility Care Expenditures²							
Health Insurance⁵							
Medicare fee-for-service only	11.44	9.92	6.74	6.99	3.71	-6.76	-1.42
	1.27	1.55	0.93	1.13			
Medicaid	73.26	66.24	65.51	68.49	4.55	0.67	-1.00
	1.95	1.96	1.95	1.90			
Private health insurance	14.55	21.03	23.06	19.93	-13.57	-1.07	3.75
	1.39	1.55	1.71	1.54			
Income							
Lowest income quartile	56.09	49.66	51.97	53.64	3.21	1.55	-1.21
	1.96	2.07	2.10	2.35			
Second income quartile	23.17	26.54	25.50	27.26	6.90	0.54	1.37
	1.58	1.44	1.98	2.05			
Third income quartile	13.26	13.43	13.92	10.87	-21.91	-4.14	0.13
	1.21	1.30	1.47	1.27			
Highest income quartile	7.49	10.36	8.61	8.23	-4.41	-4.50	3.30
	1.14	1.62	1.27	1.08			

Source: Medicare Current Beneficiary Survey, Cost and Use Public Use Files: CY 1992, CY 2002, CY 2006, and CY 2007.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 1 The term *long-term care facility residents* includes beneficiaries who resided only in a long-term care facility during the year, and beneficiaries who resided part of the year in a long-term care facility and part of the year in the community. It excludes beneficiaries who resided only in the community during the year.
- 2 Column percentages in longitudinal tables add up to 100 percent because expenditures for survey persons with missing values are assumed to be distributed the same as expenditures for those with nonmissing values.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.
- 5 Health insurance will not add up to 100 percent because beneficiaries with Medicare Health Maintenance Organization coverage are not included.

Table 6.10 Inpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Percentage of Beneficiaries with at Least One Inpatient Hospital Stay							
All Beneficiaries	17.94	20.15	18.73	18.66	-0.37	-1.52	1.17
	0.33	0.43	0.34	0.36			
Medicare Status							
65 years and older	17.70	19.99	18.42	18.28	-0.76	-1.77	1.22
	0.37	0.41	0.35	0.41			
64 years and younger	20.15	21.09	20.32	20.64	1.57	-0.43	0.46
	0.93	1.16	1.10	1.06			
Race/Ethnicity							
White non-Hispanic	18.07	20.24	18.41	18.72	1.68	-1.55	1.14
	0.36	0.50	0.41	0.41			
All others	17.39	19.59	19.88	18.53	-6.79	-1.11	1.20
	0.98	0.87	0.90	0.83			
Functional Limitation							
None	11.28	13.63	12.60	13.18	4.60	-0.67	1.91
	0.39	0.51	0.46	0.46			
IADL only ²	22.36	24.87	23.41	22.56	-3.63	-1.93	1.07
	0.82	0.90	0.83	0.84			
One to two ADLs ³	27.46	30.54	28.44	28.29	-0.53	-1.52	1.07
	1.15	1.37	1.31	1.32			
Three to five ADLs	35.75	36.73	39.58	36.19	-8.56	-0.30	0.27
	1.40	1.71	1.99	1.95			
Health Insurance							
Medicare fee-for-service only	16.85	18.72	15.34	14.18	-7.56	-5.40	1.06
	1.06	1.51	1.73	1.48			
Medicaid	24.67	24.12	24.07	24.61	2.24	0.40	-0.23
	1.28	1.06	1.01	1.08			
Private health insurance	17.06	20.01	19.16	19.21	0.26	-0.81	1.61
	0.42	0.49	0.51	0.52			
Medicare HMO ⁴	16.23	17.03	13.15	13.58	3.27	-4.43	0.48
	1.37	1.06	0.77	0.84			

Table 6.10 Inpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Percentage of Beneficiaries with at Least One Inpatient Hospital Stay							
All Beneficiaries	17.94	20.15	18.73	18.66	-0.37	-1.52	1.17
	<i>0.33</i>	<i>0.43</i>	<i>0.34</i>	<i>0.36</i>			
Income							
Lowest income quartile	18.78	21.75	21.43	22.81	6.44	0.96	1.48
	<i>0.67</i>	<i>0.89</i>	<i>0.84</i>	<i>0.78</i>			
Second income quartile	20.95	21.76	20.60	19.87	-3.54	-1.80	0.38
	<i>0.88</i>	<i>0.88</i>	<i>0.72</i>	<i>0.66</i>			
Third income quartile	16.47	19.71	16.34	16.31	-0.18	-3.72	1.81
	<i>0.64</i>	<i>0.84</i>	<i>0.77</i>	<i>0.79</i>			
Highest income quartile	15.40	17.23	16.11	15.58	-3.29	-1.99	1.13
	<i>0.59</i>	<i>0.79</i>	<i>0.76</i>	<i>0.66</i>			

Source: Medicare Current Beneficiary Survey, Cost and Use Public Use Files: CY 1992, CY 2002, CY 2006, and CY 2007.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 *IADL* stands for Instrumental Activity of Daily Living.
- 3 *ADL* stands for Activity of Daily Living.
- 4 *HMO* stands for Health Maintenance Organization.

Table 6.11 Outpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Percentage of Beneficiaries with at Least One Outpatient Hospital Visit							
All Beneficiaries	57.90	71.71	71.86	71.30	-0.78	-0.11	2.16
	0.77	0.44	0.60	0.62			
Medicare Status							
65 years and older	57.40	71.23	70.97	70.06	-1.28	-0.33	2.18
	0.81	0.49	0.64	0.68			
64 years and younger	62.48	74.63	76.50	77.76	1.65	0.83	1.79
	1.30	1.12	1.18	1.32			
Race/Ethnicity							
White non-Hispanic	57.81	72.79	72.12	72.13	0.01	-0.18	2.33
	0.86	0.50	0.70	0.64			
All others	58.28	67.99	70.80	68.38	-3.42	0.11	1.55
	1.32	0.93	0.95	1.35			
Functional Limitation							
None	52.23	67.68	67.67	67.03	-0.95	-0.19	2.63
	0.88	0.67	0.85	0.85			
IADL only ²	62.52	76.72	77.17	76.72	-0.58	0.00	2.07
	1.15	0.93	1.05	1.02			
One to two ADLs ³	66.13	76.68	78.47	77.91	-0.71	0.32	1.49
	1.22	1.08	1.38	1.21			
Three to five ADLs	70.31	78.17	79.39	76.84	-3.21	-0.34	1.07
	1.50	1.43	1.97	2.15			
Health Insurance							
Medicare fee-for-service only	50.58	64.79	62.14	61.96	-0.29	-0.89	2.51
	1.53	1.44	1.69	2.23			
Medicaid	65.89	76.29	77.08	76.04	-1.35	-0.07	1.48
	1.54	1.21	0.95	1.19			
Private health insurance	57.77	74.12	73.88	74.56	0.92	0.12	2.52
	0.92	0.67	0.77	0.78			
Medicare HMO ⁴	57.05	60.25	64.19	61.57	-4.08	0.43	0.55
	2.14	1.18	1.26	1.69			

Table 6.11 Outpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Percentage of Beneficiaries with at Least One Outpatient Hospital Visit							
All Beneficiaries	57.90	71.71	71.86	71.30	-0.78	-0.11	2.16
	<i>0.77</i>	<i>0.44</i>	<i>0.60</i>	<i>0.62</i>			
Income							
Lowest income quartile	56.64	73.06	71.96	70.56	-1.95	-0.69	2.58
	<i>1.12</i>	<i>0.86</i>	<i>0.86</i>	<i>1.00</i>			
Second income quartile	59.64	71.78	72.42	70.98	-1.99	-0.22	1.87
	<i>1.15</i>	<i>1.00</i>	<i>0.94</i>	<i>1.02</i>			
Third income quartile	56.78	70.63	72.04	71.64	-0.56	0.28	2.21
	<i>1.32</i>	<i>0.89</i>	<i>1.05</i>	<i>1.07</i>			
Highest income quartile	58.54	71.42	70.87	72.03	1.64	0.17	2.01
	<i>1.28</i>	<i>1.02</i>	<i>1.05</i>	<i>1.14</i>			

Source: Medicare Current Beneficiary Survey, Cost and Use Public Use Files: CY 1992, CY 2002, CY 2006, and CY 2007.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 *IADL* stands for Instrumental Activity of Daily Living.
- 3 *ADL* stands for Activity of Daily Living.
- 4 *HMO* stands for Health Maintenance Organization.

Table 6.12 Physician/Supplier Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Percentage of Beneficiaries with at Least One Physician/Supplier Service							
All Beneficiaries	92.36	95.58	95.59	96.02	0.45	0.09	0.34
	0.27	0.20	0.23	0.23			
Medicare Status							
65 years and older	92.69	95.94	95.93	96.32	0.41	0.08	0.35
	0.26	0.23	0.25	0.25			
64 years and younger	89.34	93.38	93.85	94.44	0.63	0.23	0.44
	0.73	0.64	0.61	0.63			
Race/Ethnicity							
White non-Hispanic	92.99	96.50	95.95	96.47	0.54	-0.01	0.37
	0.25	0.20	0.24	0.24			
All others	89.13	92.36	94.38	94.44	0.06	0.45	0.36
	0.97	0.74	0.55	0.54			
Functional Limitation							
None	90.13	94.62	94.69	95.43	0.78	0.17	0.49
	0.42	0.31	0.36	0.35			
IADL only ²	94.55	96.61	96.19	96.88	0.72	0.06	0.22
	0.44	0.38	0.49	0.39			
One to two ADLs ³	95.43	96.92	97.26	97.15	-0.11	0.05	0.16
	0.54	0.53	0.54	0.56			
Three to five ADLs	96.34	97.21	98.82	96.08	-2.77	-0.23	0.09
	0.52	0.62	0.41	1.13			
Health Insurance							
Medicare fee-for-service only	83.25	88.79	85.66	85.79	0.15	-0.69	0.65
	1.23	1.00	1.41	1.50			
Medicaid	92.42	94.47	95.76	94.88	-0.92	0.09	0.22
	0.74	0.67	0.44	0.56			
Private health insurance	93.86	96.69	97.05	97.63	0.60	0.19	0.30
	0.31	0.24	0.27	0.25			
Medicare HMO ⁴	92.76	96.53	95.55	96.79	1.30	0.05	0.40
	0.97	0.47	0.48	0.45			

Table 6.12 Physician/Supplier Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Percentage of Beneficiaries with at Least One Physician/Supplier Service							
All Beneficiaries	92.36	95.58	95.59	96.02	0.45	0.09	0.34
	<i>0.27</i>	<i>0.20</i>	<i>0.23</i>	<i>0.23</i>			
Income							
Lowest income quartile	88.83	93.63	93.64	93.85	0.22	0.05	0.53
	<i>0.65</i>	<i>0.45</i>	<i>0.50</i>	<i>0.54</i>			
Second income quartile	93.19	95.27	95.66	95.99	0.34	0.15	0.22
	<i>0.49</i>	<i>0.49</i>	<i>0.42</i>	<i>0.49</i>			
Third income quartile	92.46	96.06	96.54	96.88	0.35	0.17	0.38
	<i>0.52</i>	<i>0.46</i>	<i>0.46</i>	<i>0.47</i>			
Highest income quartile	95.04	97.42	96.64	97.41	0.80	0.00	0.25
	<i>0.42</i>	<i>0.40</i>	<i>0.45</i>	<i>0.47</i>			

Source: Medicare Current Beneficiary Survey, Cost and Use Public Use Files: CY 1992, CY 2002, CY 2006, and CY 2007.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 *IADL* stands for Instrumental Activity of Daily Living.
- 3 *ADL* stands for Activity of Daily Living.
- 4 *HMO* stands for Health Maintenance Organization.

Table 6.13 Prescription Medicine User Rates for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Percentage of Beneficiaries with at Least One Prescribed Medicine							
All Beneficiaries	85.20	91.58	93.10	93.93	0.89	0.51	0.72
	0.36	0.29	0.28	0.28			
Medicare Status							
65 years and older	85.31	91.63	93.54	94.11	0.61	0.54	0.72
	0.38	0.32	0.33	0.29			
64 years and younger	84.14	91.24	90.78	92.99	2.43	0.38	0.81
	0.86	0.82	0.72	0.80			
Race/Ethnicity							
White non-Hispanic	85.52	92.21	93.25	94.03	0.84	0.39	0.76
	0.41	0.32	0.30	0.32			
All others	83.54	89.23	92.59	93.57	1.06	0.95	0.66
	1.00	0.81	0.61	0.64			
Functional Limitation							
None	80.67	89.12	91.59	92.14	0.60	0.67	1.00
	0.59	0.41	0.45	0.38			
IADL only ²	90.33	94.29	94.76	96.83	2.18	0.53	0.43
	0.55	0.50	0.55	0.35			
One to two ADLs ³	91.16	95.21	95.62	96.63	1.06	0.30	0.44
	0.64	0.57	0.63	0.62			
Three to five ADLs	91.90	95.51	96.39	94.45	-2.01	-0.22	0.39
	0.86	0.82	0.75	1.16			
Health Insurance							
Medicare fee-for-service only	76.58	80.68	79.92	81.76	2.30	0.27	0.52
	1.26	1.28	1.54	1.49			
Medicaid	86.72	91.48	94.10	94.14	0.04	0.57	0.54
	0.91	0.68	0.54	0.63			
Private health insurance	86.39	93.15	94.56	95.11	0.58	0.42	0.76
	0.46	0.36	0.33	0.35			
Medicare HMO ⁴	85.04	92.12	93.81	95.55	1.85	0.73	0.80
	1.67	0.63	0.64	0.53			

Table 6.13 Prescription Medicine User Rates for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Percentage of Beneficiaries with at Least One Prescribed Medicine							
All Beneficiaries	85.20	91.58	93.10	93.93	0.89	0.51	0.72
	<i>0.36</i>	<i>0.29</i>	<i>0.28</i>	<i>0.28</i>			
Income							
Lowest income quartile	82.74	90.24	92.21	93.03	0.89	0.61	0.87
	<i>0.69</i>	<i>0.55</i>	<i>0.54</i>	<i>0.57</i>			
Second income quartile	85.70	91.68	93.01	93.07	0.06	0.30	0.68
	<i>0.70</i>	<i>0.62</i>	<i>0.59</i>	<i>0.55</i>			
Third income quartile	85.51	91.24	93.73	94.45	0.77	0.69	0.65
	<i>0.78</i>	<i>0.61</i>	<i>0.56</i>	<i>0.59</i>			
Highest income quartile	86.88	93.27	93.50	95.17	1.79	0.40	0.71
	<i>0.78</i>	<i>0.59</i>	<i>0.63</i>	<i>0.44</i>			

Source: Medicare Current Beneficiary Survey, Cost and Use Public Use Files: CY 1992, CY 2002, CY 2006, and CY 2007.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 *IADL* stands for Instrumental Activity of Daily Living.
- 3 *ADL* stands for Activity of Daily Living.
- 4 *HMO* stands for Health Maintenance Organization.

Table 6.14 Facility User Rates for Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007

All Medicare Beneficiaries

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Percentage of Beneficiaries with at Least One Short- or Long-Term Care Facility Stay							
All Beneficiaries	7.69	9.46	8.95	9.03	0.89	-0.93	2.09
	0.23	0.22	0.26	0.25			
Medicare Status							
65 years and older	7.58	9.71	9.28	9.34	0.65	-0.77	2.51
	0.23	0.25	0.26	0.29			
64 years and younger	8.67	7.90	7.20	7.37	2.36	-1.38	-0.93
	0.66	0.60	0.66	0.55			
Race/Ethnicity							
White non-Hispanic	8.02	10.19	9.62	9.73	1.14	-0.92	2.42
	0.26	0.26	0.30	0.29			
All others	5.47	6.65	6.57	6.52	-0.76	-0.39	1.97
	0.47	0.43	0.40	0.46			
Functional Limitation							
None	0.81	1.80	2.02	1.87	-7.43	0.77	8.31
	0.11	0.15	0.19	0.16			
IADL only ¹	3.95	6.17	6.48	6.83	5.40	2.05	4.56
	0.39	0.43	0.53	0.49			
One to two ADLs ²	11.54	14.38	14.04	15.31	9.05	1.26	2.22
	0.84	0.81	0.98	1.00			
Three to five ADLs	41.18	47.28	47.07	47.55	1.02	0.11	1.39
	1.31	1.32	1.64	1.57			
Health Insurance							
Medicare fee-for-service only	8.74	9.99	7.83	8.48	8.30	-3.22	1.35
	0.62	0.94	0.80	0.89			
Medicaid	28.66	24.33	21.52	22.07	2.56	-1.93	-1.62
	1.06	0.83	0.77	0.81			
Private health insurance	2.77	5.44	5.57	5.80	4.13	1.29	6.98
	0.16	0.26	0.30	0.26			
Medicare HMO ³	2.73*	5.24	5.10	4.40	-13.73	-3.43	6.74
	0.56	0.51	0.51	0.43			

Table 6.14 Facility User Rates for Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-2007

All Medicare Beneficiaries

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
Percentage of Beneficiaries with at Least One Short- or Long-Term Care Facility Stay							
All Beneficiaries	7.69	9.46	8.95	9.03	0.89	-0.93	2.09
	<i>0.23</i>	<i>0.22</i>	<i>0.26</i>	<i>0.25</i>			
Income							
Lowest income quartile	15.48	15.50	15.47	15.90	2.78	0.51	0.01
	<i>0.62</i>	<i>0.53</i>	<i>0.59</i>	<i>0.63</i>			
Second income quartile	7.75	10.75	9.74	10.02	2.87	-1.40	3.33
	<i>0.43</i>	<i>0.51</i>	<i>0.54</i>	<i>0.49</i>			
Third income quartile	4.56	6.64	6.26	5.73	-8.47	-2.90	3.83
	<i>0.34</i>	<i>0.47</i>	<i>0.54</i>	<i>0.44</i>			
Highest income quartile	2.67	4.76	4.20	4.09	-2.62	-2.99	5.95
	<i>0.31</i>	<i>0.41</i>	<i>0.34</i>	<i>0.33</i>			

Source: Medicare Current Beneficiary Survey, Cost and Use Public Use Files: CY 1992, CY 2002, CY 2006, and CY 2007.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

1 IADL stands for Instrumental Activity of Daily Living.

2 ADL stands for Activity of Daily Living.

3 HMO stands for Health Maintenance Organization.

Table 6.15 Percentage of Noninstitutionalized Medicare Beneficiaries Satisfied or Very Satisfied with Their General Health Care,¹ by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents²

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
All Beneficiaries	88.24	93.25	94.16	94.07	-0.10	0.18	0.55
	0.36	0.30	0.25	0.26			
Medicare Status							
64 years and younger	83.90	89.34	89.42	90.95	1.71	0.36	0.63
	0.94	1.02	0.90	0.79			
65 years and older	88.70	93.88	95.08	94.67	-0.43	0.17	0.57
	0.38	0.31	0.24	0.26			
Gender							
Male	86.43	92.26	93.58	93.32	-0.28	0.23	0.65
	0.49	0.49	0.34	0.39			
Female	89.63	94.04	94.64	94.70	0.06	0.14	0.48
	0.47	0.36	0.33	0.33			
Race/Ethnicity							
White non-Hispanic	88.87	93.61	94.47	94.28	-0.20	0.14	0.52
	0.37	0.32	0.29	0.29			
All others	84.92	91.88	93.01	93.26	0.27	0.30	0.79
	1.04	0.65	0.54	0.58			
Functional Limitation							
None	87.27	93.78	94.52	94.50	-0.02	0.15	0.72
	0.47	0.37	0.30	0.31			
IADL only ³	90.67	93.90	94.38	93.86	-0.55	-0.01	0.35
	0.60	0.50	0.51	0.48			
One to two ADLs ⁴	89.83	92.09	94.44	93.97	-0.50	0.41	0.25
	0.93	0.78	0.61	0.81			
Three to five ADLs	85.02	88.95	89.52	90.82	1.45	0.42	0.45
	1.31	1.41	1.36	1.27			

Table 6.15 Percentage of Noninstitutionalized Medicare Beneficiaries Satisfied or Very Satisfied with Their General Health Care,¹ by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents²

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
All Beneficiaries	88.24	93.25	94.16	94.07	-0.10	0.18	0.55
	0.36	0.30	0.25	0.26			
Usual Source of Care							
No usual source of care	55.17	56.44	59.95	57.63	-3.87	0.42	0.23
	1.77	2.59	2.25	3.05			
Has usual source of care	91.74	95.11	95.96	95.89	-0.07	0.16	0.36
	0.30	0.24	0.24	0.20			
Living Arrangement							
Alone	89.16	92.76	93.49	93.07	-0.45	0.07	0.40
	0.59	0.53	0.53	0.55			
With spouse	88.63	94.06	94.96	95.09	0.14	0.22	0.60
	0.47	0.36	0.33	0.37			
With children/others	85.49	91.62	93.01	92.82	-0.20	0.26	0.69
	0.90	0.65	0.68	0.62			
Health Insurance							
Medicare fee-for-service only	76.61	84.92	84.39	86.37	2.35	0.34	1.04
	1.23	1.36	1.28	1.35			
Medicaid	87.48	90.00	92.37	91.47	-0.97	0.32	0.28
	0.99	0.85	0.62	0.69			
Private health insurance	90.13	95.07	95.84	95.66	-0.19	0.12	0.54
	0.39	0.29	0.23	0.35			
Medicare HMO ⁵	90.41	94.61	95.39	95.12	-0.28	0.11	0.46
	1.13	0.55	0.55	0.49			

Table 6.15 Percentage of Noninstitutionalized Medicare Beneficiaries Satisfied or Very Satisfied with Their General Health Care,¹ by Demographic and Socioeconomic Characteristics, 1992-2007**Community-Only Residents²**

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
All Beneficiaries	88.24	93.25	94.16	94.07	-0.10	0.18	0.55
	<i>0.36</i>	<i>0.30</i>	<i>0.25</i>	<i>0.26</i>			
Income							
Lowest income quartile	85.99	90.41	91.59	92.29	0.76	0.41	0.50
	<i>0.75</i>	<i>0.61</i>	<i>0.72</i>	<i>0.58</i>			
Second income quartile	87.39	92.87	93.89	92.67	-1.30	-0.04	0.61
	<i>0.72</i>	<i>0.53</i>	<i>0.54</i>	<i>0.61</i>			
Third income quartile	87.52	93.58	95.46	95.28	-0.19	0.36	0.67
	<i>0.70</i>	<i>0.52</i>	<i>0.43</i>	<i>0.48</i>			
Highest income quartile	92.22	96.27	95.90	96.05	0.16	-0.05	0.43
	<i>0.57</i>	<i>0.34</i>	<i>0.49</i>	<i>0.48</i>			

Source: Medicare Current Beneficiary Survey, Access to Care Public Use Files: CY 1992, CY 2002, CY 2006, and CY 2007.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 Degree of satisfaction with general health care is measured by the variable, *mcquality*, which asks the beneficiary about satisfaction with the overall quality of medical care received during the year.
- 2 The term *community-only residents* includes beneficiaries who only resided in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who only resided in a long-term care facility during the year.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.
- 5 *HMO* stands for Health Maintenance Organization.

Table 6.16 Percentage of Noninstitutionalized Medicare Beneficiaries With a Usual Source of Health Care, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
All Beneficiaries	90.45	95.20	94.99	95.25	0.27	0.01	0.51
	0.35	0.24	0.22	0.25			
Medicare Status							
64 years and younger	88.46	92.97	92.66	92.55	-0.12	-0.09	0.50
	0.79	0.65	0.66	0.81			
65 years and older	90.66	95.56	95.44	95.77	0.35	0.04	0.53
	0.35	0.26	0.23	0.25			
Gender							
Male	88.14	94.32	93.96	94.22	0.28	-0.02	0.68
	0.52	0.37	0.38	0.38			
Female	92.24	95.90	95.84	96.12	0.29	0.05	0.39
	0.40	0.27	0.26	0.33			
Race/Ethnicity							
White non-Hispanic	90.96	95.52	95.26	95.30	0.04	-0.05	0.49
	0.35	0.25	0.27	0.30			
All others	87.64	94.02	94.05	95.06	1.07	0.22	0.71
	0.99	0.58	0.55	0.48			
Functional Limitation							
None	88.36	94.63	94.03	94.75	0.77	0.03	0.69
	0.52	0.32	0.35	0.34			
IADL only ²	93.03	96.37	96.11	95.88	-0.24	-0.10	0.35
	0.51	0.40	0.40	0.47			
One to two ADLs ³	92.95	95.07	97.15	96.35	-0.82	0.27	0.23
	0.57	0.62	0.38	0.55			
Three to five ADLs	93.39	96.22	95.74	95.47	-0.28	-0.16	0.30
	1.01	0.72	0.82	1.01			

Table 6.16 Percentage of Noninstitutionalized Medicare Beneficiaries With a Usual Source of Health Care, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
All Beneficiaries	90.45	95.20	94.99	95.25	0.27	0.01	0.51
	0.35	0.24	0.22	0.25			
Living Arrangement							
Alone	90.64	94.35	94.37	94.19	-0.19	-0.03	0.40
	0.49	0.46	0.51	0.51			
With spouse	90.94	96.25	95.86	96.30	0.46	0.01	0.57
	0.46	0.31	0.31	0.35			
With children/others	88.59	93.48	93.57	94.03	0.49	0.12	0.54
	0.72	0.58	0.61	0.59			
Health Insurance							
Medicare fee-for-service only	80.82	89.85	84.68	87.76	3.64	-0.47	1.06
	1.17	0.93	1.22	1.46			
Medicaid	89.61	92.84	93.39	93.68	0.31	0.18	0.35
	0.85	0.72	0.65	0.65			
Private health insurance	91.78	96.12	96.33	96.08	-0.26	-0.01	0.46
	0.37	0.30	0.23	0.30			
Medicare HMO ⁴	95.18	97.52	97.48	97.52	0.04	0.00	0.24
	0.99	0.44	0.48	0.40			

Table 6.16 Percentage of Noninstitutionalized Medicare Beneficiaries With a Usual Source of Health Care, by Demographic and Socioeconomic Characteristics, 1992-2007Community-Only Residents¹

Beneficiary Characteristic	1992	2002	2006	2007	Annual Rate of Change 2006-2007 (%)	Annual Rate of Change 2002-2007 (%)	Annual Rate of Change 1992-2002 (%)
All Beneficiaries	90.45 <i>0.35</i>	95.20 <i>0.24</i>	94.99 <i>0.22</i>	95.25 <i>0.25</i>	0.27	0.01	0.51
Income							
Lowest income quartile	88.61 <i>0.72</i>	92.83 <i>0.52</i>	92.76 <i>0.60</i>	93.57 <i>0.51</i>	0.87	0.16	0.47
Second income quartile	90.15 <i>0.58</i>	95.31 <i>0.44</i>	95.26 <i>0.47</i>	94.47 <i>0.60</i>	-0.83	-0.18	0.56
Third income quartile	91.22 <i>0.54</i>	95.83 <i>0.44</i>	95.77 <i>0.43</i>	96.62 <i>0.43</i>	0.89	0.16	0.49
Highest income quartile	91.85 <i>0.63</i>	96.88 <i>0.35</i>	96.30 <i>0.45</i>	96.37 <i>0.43</i>	0.07	-0.11	0.53

Source: Medicare Current Beneficiary Survey, Access to Care Public Use Files: CY 1992, CY 2002, CY 2006, and CY 2007.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who only resided in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and it excludes beneficiaries who only resided in a long-term care facility during the year.
- 2 *IADL* stands for Instrumental Activity of Daily Living.
- 3 *ADL* stands for Activity of Daily Living.
- 4 *HMO* stands for Health Maintenance Organization.