

2017 Medicare Current Beneficiary Survey Early Look

The 2017 Medicare Current Beneficiary Survey (MCBS) Early Look presents key preliminaryⁱ estimates relevant to the community-dwelling Medicare population in advance of the upcoming MCBS Survey File release.

INTRODUCTION

Using preliminary data from the 2017 MCBS Survey File, the Early Look presents a demographic portrait of the Medicare population residing in the community. It also provides preliminary estimates pertaining to selected health status and functioning, access to care, and satisfaction with care measures.

The majority of community-dwelling Medicare beneficiaries are white non-Hispanic, between 65 and 84 years of age, and reside in English-speaking households.

HIGHLIGHTS

Preliminary Estimates from the 2017 MCBS Survey File

- 77% of beneficiaries report good, very good, or excellent health.
- 92% of beneficiaries report no trouble accessing health care.
- Most Medicare beneficiaries are satisfied with health care quality, ease of access, and cost.

Table 1. Selected demographic characteristics of Medicare beneficiaries residing in the community, 2017ⁱⁱ

Demographic Characteristic	Response	Weighted Percent (Standard Error)
Age	< 65 years	15.6 (0.3)
	65-74 years	48.9 (0.5)
	75-84 years	25.8 (0.4)
	85+ years	9.7 (0.2)
Sex	Female	54.1 (0.4)
	Male	45.9 (0.4)
Race/Ethnicity	White non-Hispanic	75.1 (0.8)
	Black non-Hispanic	9.7 (0.4)
	Hispanic	8.0 (0.6)
	Other race/ethnicity	6.4 (0.5)
Language Spoken at Home	English	87.8 (0.8)
	Language other than English	12.1 (0.8)
Educational Attainment	Less than a high school diploma	15.5 (0.6)
	High school graduate	26.2 (0.7)
	Some college/vocational school	30.9 (0.6)
	Bachelor's degree or beyond	27.1 (0.9)
Veteran	Yes	20.1 (0.5)
	No	79.9 (0.5)

SOURCE: Centers for Medicare & Medicaid Services, Medicare Current Beneficiary Survey, Preliminary Data from the Survey File, 2017.

ⁱ These preliminary estimates are produced prior to final data editing and final weighting to provide early access to the most recent information from the MCBS.

ⁱⁱ Totals may not sum to 100 percent due to rounding and/or missingness.

Approximately three-quarters of community-dwelling Medicare beneficiaries report good, very good, or excellent health. Eighty percent report the same or better health compared to one year ago.

Table 2. Self-reported health status of Medicare beneficiaries residing in the community, 2017ⁱⁱ

Health Status Characteristic	Response	Weighted Percent (Standard Error)
Current Overall Health Status	Excellent	16.7 (0.5)
	Very good	29.7 (0.5)
	Good	30.6 (0.5)
	Fair	16.0 (0.4)
	Poor	6.4 (0.3)
Overall Health Status Compared to One Year Ago	Much better than one year ago	6.8 (0.3)
	Somewhat better now than one year ago	11.5 (0.3)
	About the same	62.0 (0.5)
	Somewhat worse now than one year ago	16.4 (0.4)
	Much worse now than one year ago	3.0 (0.2)

SOURCE: Centers for Medicare & Medicaid Services, Medicare Current Beneficiary Survey, Preliminary Data from the Survey File, 2017.

Almost thirty percent of community-dwelling Medicare beneficiaries report serious difficulty walking or climbing stairs.

Table 3. Selected disabilities of Medicare beneficiaries residing in the community, 2017ⁱⁱ

Serious Difficulty Reported with...	Yes Weighted Percent (Standard Error)	No Weighted Percent (Standard Error)
Walking or Climbing Stairs	29.3 (0.6)	70.3 (0.6)
Concentrating, Remembering, or Making Decisions	18.2 (0.4)	81.4 (0.5)
Dressing or Bathing	11.0 (0.3)	88.8 (0.3)

SOURCE: Centers for Medicare & Medicaid Services, Medicare Current Beneficiary Survey, Preliminary Data from the Survey File, 2017.

The majority of community-dwelling Medicare beneficiaries report no trouble or delays in accessing health care. Community-dwelling Medicare beneficiaries are generally satisfied with health care quality, ease of access, and cost.

Table 4. Selected access to and satisfaction with care measures for Medicare beneficiaries residing in the community, 2017ⁱⁱ

Health Care Measure	Response	Weighted Percent (Standard Error)
Trouble Getting Care	Yes	7.5 (0.3)
	No	92.2 (0.3)
Delayed Care Due to Cost	Yes	10.9 (0.4)
	No	88.8 (0.4)
Satisfaction with General Care	Satisfied	92.7 (0.3)
	Dissatisfied	4.7 (0.3)
	No experience	2.1 (0.1)
Satisfaction with Ease of Access to Doctor	Satisfied	93.0 (0.3)
	Dissatisfied	5.0 (0.2)
	No experience	1.5 (0.2)
Satisfaction with Cost	Satisfied	79.9 (0.6)
	Dissatisfied	16.4 (0.5)
	No experience	2.8 (0.2)

SOURCE: Centers for Medicare & Medicaid Services, Medicare Current Beneficiary Survey, Preliminary Data from the Survey File, 2017.

DEFINITIONS

In addition to providing definitions of key terms, this section describes the construction of the analytic variables used to create the Early Look preliminary estimates. These analytic variables may differ from the variables in the MCBS Survey File (for example, as a result of recoding into new categories).

Access to care: This refers to indicators of having access to health care services and of how access may impact health behaviors, such as whether a beneficiary has difficulty obtaining needed care or has delayed health care due to cost.

Beneficiary: An individual selected from the MCBS sample about whom the MCBS collects information. Beneficiary may also refer to a person receiving Medicare services who may or may not be participating in the MCBS.

Community interview: Survey of beneficiaries residing in the community (i.e., not in a long-term care facility, such as a nursing home) during the reference period covered by the MCBS interview.

Education: Education categories are based on the highest school grade completed, as reported by the beneficiary.

Disabilities: Serious difficulty with 1) concentrating, remembering, or making decisions due to a physical, mental, or emotional condition, 2) walking or climbing stairs, and 3) dressing and bathing.

Health status: Self-rated general health compared to 1) other people of the same age and 2) his or her general health from one year prior.

Race/ethnicity: Responses to race and ethnicity questions are self-reported by the respondent. Respondents who reported they were white and not of Hispanic origin were coded as white non-Hispanic; those who reported they were black/African-American and not of Hispanic origin were coded as black non-Hispanic; persons who reported they were Hispanic, Latino/Latina, or of Spanish origin, regardless of their race, were coded as Hispanic; persons who reported they were American Indian or Alaska Native, Asian, Native Hawaiian or other Pacific Islander, or two or more races and not of Hispanic origin were coded as other race/ethnicity.

Satisfaction with care: The questions about satisfaction with care represent the respondent's general opinion of all medical care received in the year preceding the interview.

- General care refers to the beneficiary's rating of the overall quality of medical care received.
- Ease of access to doctor refers to the beneficiary's rating of the ease and convenience of getting to a doctor or other health professional from her or his residence.
- Cost refers to the beneficiary's rating of the out-of-pocket costs he or she paid for medical care.

The respondent rates satisfaction along a four-point satisfaction scale. "Very satisfied" and "Satisfied" are collapsed into a "Satisfied" response. "Dissatisfied" and "Very dissatisfied" are collapsed into "Dissatisfied." A response of "Not applicable" is presented as "No experience."

Veteran: A beneficiary who reports ever having served in the armed forces.

DATA SOURCES AND METHODS

These preliminary estimates are based on data from the 2017 MCBS, an in-person, nationally representative, longitudinal survey of Medicare beneficiaries sponsored by the Centers for Medicare & Medicaid Services (CMS) and directed by the Office of Enterprise Data and Analytics (OEDA). The MCBS is the most comprehensive and complete survey available on the Medicare population and is essential in capturing data not otherwise collected through operations and administration of the Medicare program.

MCBS Limited Data Sets (LDS) are available to researchers with a data use agreement. Information on ordering MCBS files from CMS can be obtained through CMS' LDS website at https://www.cms.gov/Research-Statistics-Data-and-Systems/Files-for-Order/Data-Disclosures-Data-Agreements/DUA_-_NewLDS.html. The MCBS Public Use File (PUF) is available to the public as a free download and can be found through CMS' PUF website at <https://www.cms.gov/Research-Statistics-Data-and-Systems/Downloadable-Public-Use-Files/MCBS-Public-Use-File/index.html>

For details about the MCBS sample design, survey operations, and data files, please see the most recent MCBS Methodology Report and Data User's Guide available on the CMS MCBS website at <https://www.cms.gov/Research-Statistics-Data-and-Systems/Research/MCBS/index.html>.

The universe for the 2017 MCBS Early Look included all community-dwelling Medicare beneficiaries who completed a Community interview in the fall 2017 round of data collection. The final dataset included 13,228 beneficiaries (weighted N=53,080,450). Balanced repeated replication survey weights were used to account for the complex sample design. SAS 9.4 was used to construct and analyze analytic datasets.

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