CMS Office of Minority Health

HEALTH EQUITY DATA BOOK

DECEMBER 2024

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

Table of Contents

BACKGROUND

One of the six pillars of the Centers for Medicare & Medicaid Services (CMS) 2023 Strategic Plan is to, "Advance health equity by addressing the health disparities that underlie our health system." The CMS Office of Minority Health (OMH) aims to advance health equity by providing broader access to data about the state of health equity across CMS' programs. This Data Book presents summary information on disparities within CMS programs as demonstrated by data related to prevalence.

This Data Book is intended to support internal and external partners, such as researchers, public health professionals, and the public to easily find, understand, and use up-to-date health disparities data to help inform policies, programs, and regulations. Information presented in this Data Book is sourced primarily from the CMS Mapping Medicare Disparities Tool (MMDT), CMS published data highlights, data snapshots, and research reports.

How to use this Data Book

This Data Book is intended for use as a readily-available information source on health disparities within the Medicare, Medicaid, and the Health Insurance Marketplace populations. This Data Book is organized into five key sections – CMS at a Glance, Demographics, Chronic Conditions, Behavioral Health, and Social Determinants of Health – so that Data Book users can jump to the section most relevant to their data needs. Within each section, data are presented by each population type.

This Data Book is divided into four chapters:

- **Demographics** – Includes CMS data on the demographics of individuals covered by CMS programs, including Medicare, Medicaid, CHIP, and Marketplace.
- **Populations** – Includes CMS data on subpopulations, by sex, race and ethnicity, geography (rurality), individuals with limited English proficiency, and individuals with disabilities.
- **Chronic Conditions** – Includes condition-specific data for the top chronic condition for CMS populations and includes overall prevalence and prevalence by state, sex, and race.
- **Behavioral Health Conditions** – Includes condition-specific data for the top behavioral health conditions for CMS populations and includes overall prevalence and prevalence by state, sex, and race.
- **Social Determinants of Health** – Includes CMS data on Social Determinants of Health.

Background

⚙ Methodology

Overview

This Data Book presents a series of data visualizations on stratified health equity data, and includes enrollment and prevalence data. Below are the various data sources used to create the Data Book. This Data Book contains information from data collected and analyzed between January 2019 and August 2024.

Each chart, table, and graphic denote the year the data were collected. The most recent data are presented where available.

Sources

The information in the Data Book come from various CMS sources and tools outlined below. The original data sources are linked throughout the Data Book. Users can also find links to additional resources, reports, and data tools on the CMS website that are useful for further exploring topics covered in this Data Book.

CMS Data Snapshots, Highlights, Reports, and Briefs

CMS regularly publishes Data Snapshots, Data Highlights, Data Reports, and other Briefs. This Data Book utilizes the most recent data from these publicly available sources. The data presented in this Data Book may vary in format based on the original source.

Mapping Medicare Disparities Tool (MMDT)

Where noted, the Medicare data statistics used in Data Book were generated using the CMS **Mapping Medicare Disparities Tool** (MMDT). The MMDT provides users with a useful dashboard for accessing and visualizing data for the Medicare population. With the MMDT, users can compare the Medicare population by multiple domains of interests (e.g., primary chronic conditions). These domains of interest can be further analyzed by state, race and ethnicity, sex, geography, and more. Visit **CMS's website** on the MMDT Tool for more information on the tool as well as useful links for how to use the tool.

The following criteria were used to generate the statistics using the MMDT.

- **Population:** Medicare Fee-for-Service
- **Year:** 2022
- **Geography:** State/Territory
- **Measure:** Prevalence
- **Adjustment:** Unsmoothed Age-Standardized
- **Analysis:** Difference from national average
- **Domain:** [select domain of interest]
- **Condition/Service:** [select condition of interest]
- **Dual Eligibility:** Dually eligible for Medicaid or not dually eligible
- **Race and Ethnicity:** [select race or ethnicity of interest]
- **Comparison Race and Ethnicity:** [select same race or ethnicity previously selected]
- All other fields remain unchanged
- Select **Download Data**; the comparison value is the national prevalence for the selected race or ethnicity

To extract sex data, a similar method was used, except that selections were made from Sex and Comparison Sex. Overall prevalence for disease conditions was found by selecting Unsmoothed Age Standardized in the Adjustment field. The maps included in this document that are generated from the MMDT were downloaded in August 2024.

Unless otherwise noted, the race and ethnicity categories presented are mutually exclusive (e.g. "White" indicates "White Non-Hispanic", "Black or African American" indicates "Black or African American Non-Hispanic").

Data Limitations

In some instances, data were not consistently available or uniform across all topic areas and between Medicare, Medicaid & CHIP, and Marketplace. Updates to data for these populations do not occur at the same time. It is noted throughout the Data Book where data are not available for certain populations.

Future Considerations

CMS looks forward to continuing to update this Data Book as new data become available. Future iterations may expand on existing topic areas aligned with CMS's Framework for Health Equity and National Quality Strategy, such as information on wellness, prevention, and cost.

CMS at a Glance

CMS Programs

Medicare

Medicare is the federal health insurance program that provides coverage for people over the age of 65, people under the age of 65 with disabilities, and people with End-Stage Renal Disease (ESRD).

For more information on Medicare, please visit the Medicare.gov website.

- **Fee-for-Service** – The Medicare Fee-for-Service program is also known as Original Medicare or Traditional Medicare. Fee-for-Service is offered through the federal government and includes Part A and Part B. Enrollees typically pay a portion of the costs for services as they are received.

- **Medicare Advantage** – Medicare Advantage plans are also known as Medicare Part C. This is a private health insurance plan approved by Medicare, and includes Part A (Hospital Insurance) and Part B (Medical Insurance). Medicare Advantage plans may offer additional benefits that Original Medicare does not offer.

Medicaid and The Children's Health Insurance Program

Medicaid and the Children's Health Insurance Program (CHIP) are joint federal and state programs that provide health coverage to children, pregnant women, parents, seniors, and individuals with disabilities. Low-income families, qualified pregnant women and children, and individuals receiving Supplemental Security Income (SSI) are examples of mandatory eligibility groups. Coverage may vary by state and Medicaid expansion.

For more information on Medicaid and CHIP, please visit the Medicaid.gov website.

- **Dually eligible individuals** – individuals dually eligible for both Medicare and Medicaid.

Marketplace

Marketplace health insurance was created through the Affordable Care Act to give individuals more access to health insurance. Marketplace health coverage is available to individuals who live in the United States (U.S.), are U.S. citizens or nationals, or lawfully present non-citizens in the U.S., and non-imprisoned individuals. Marketplace insurance plans offer coverage for medical care, dental care, and vision care.

For more information on Marketplace plans, please visit the HealthCare.gov website.

CMS at a Glance

Enrollment Statistics

Medicare

Total Enrollment, Medicare Advantage, Fee-for-Service

67.0 million
Total Enrollment as of January 2024

33.6 million
Medicare Advantage Enrollment as of January 2024
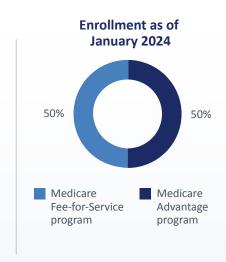
33.4 million
Medicare Fee-for-Service Enrollment as of January 2024

Enrollment as of January 2024

50%   50%

- Medicare Fee-for-Service program
- Medicare Advantage program

Source: Medicare Enrollment Dashboard (Accessed May 2024)

Medicaid

Total Enrollment, Medicaid Only, CHIP Only

79.4 million
Total Enrollment (Medicaid & CHIP) as of August 2024

72.2 million
Medicaid Only as of August 2024
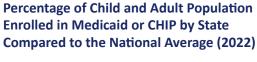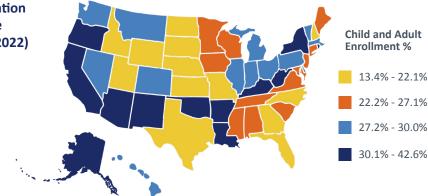
7.2 million
CHIP Only as of August 2024

Source: August 2024 Medicaid & CHIP Enrollment Data Highlights

Percentage of Child and Adult Population Enrolled in Medicaid or CHIP by State Compared to the National Average (2022)

Child and Adult Enrollment %

- 13.4% - 22.1%
- 22.2% - 27.1%
- 27.2% - 30.0%
- 30.1% - 42.6%

Source: 2023 Medicaid & CHIP Beneficiaries at a Glance

CMS at a Glance

✎ Enrollment Statistics

Dual Eligibility for Medicare and Medicaid

Total Enrollment

Dual Enrollment (2024)

👤

12.0
million

The total dual enrollment includes aged, disabled, and ESRD enrollees.

Source: Seniors & Medicare and Medicaid Enrollees

Marketplace

Total Enrollment

Total Enrollment (2024)

👤

21.4
million

This data includes new and returning Marketplace consumers.

Source: Health Insurance Marketplaces 2024 Open Enrollment Report

DEMOGRAPHICS

This section includes CMS data on the demographics of individuals covered by CMS programs, including Medicare, Medicaid, CHIP, and Marketplace.

Race and Ethnicity

Medicare

Medicare Enrollees by Race and Ethnicity (2021)

The chart shows the race and ethnicity of Medicare (Fee-for-Service and Medicare Advantage) enrollees.

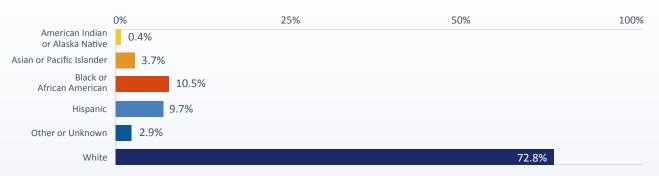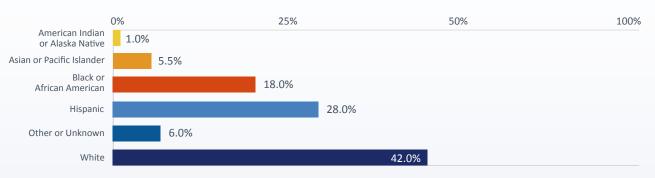| Race/Ethnicity	Percentage
American Indian or Alaska Native	0.4%
Asian or Pacific Islander	3.7%
Black or African American	10.5%
Hispanic	9.7%
Other or Unknown	2.9%
White	72.8%

Source: CMS Program Statistics – Medicare Total Enrollment

Medicaid

Medicaid & CHIP Enrollees by Race and Ethnicity (2021)

The chart shows the racial and ethnic makeup of Medicaid & CHIP enrollees.
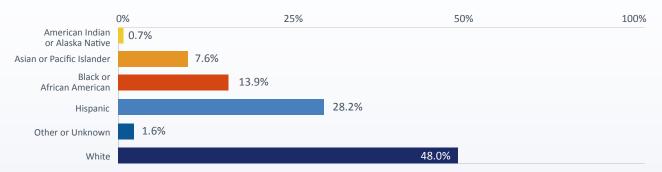
Race/Ethnicity	Percentage
American Indian or Alaska Native	1.0%
Asian or Pacific Islander	5.5%
Black or African American	18.0%
Hispanic	28.0%
Other or Unknown	6.0%
White	42.0%

Source: 2023 Medicaid & CHIP Beneficiaries at a Glance

Marketplace

Marketplace Enrollees by Race and Ethnicity (2023)

The chart shows the racial and ethnic makeup of Marketplace enrollees.

Race/Ethnicity	Percentage
American Indian or Alaska Native	0.7%
Asian or Pacific Islander	7.6%
Black or African American	13.9%
Hispanic	28.2%
Other or Unknown	1.6%
White	48.0%

Source: HealthCare.gov Enrollment by Race and Ethnicity, 2015-2023

Sex

Medicare
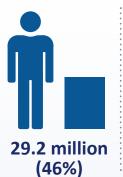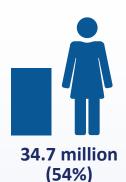
Medicare Enrollees by Sex (2021)

29.2 million (46%) Medicare enrollees are male and 34.7 million (54%) are female.

The data represent Part A and/or Part B Medicare enrollees.

29.2 million (46%)   **34.7 million (54%)**

Source: CMS Program Statistics – Medicare Total Enrollment

Medicaid

Medicaid & CHIP Enrollees by Sex (2021)

42.2 million (46%) enrollees are male and 49.8 million (54%) are female.

42.2 million (46%)   **49.8 million (54%)**

Source: 2023 Medicaid & CHIP Beneficiaries at a Glance

Marketplace

Marketplace Enrollees by Sex (2023)

47% of Marketplace enrollees are male and 53% are female.

The data reflects plan sections on HealthCare.gov and State-based Marketplaces.

47%   **53%**

Source: Health Insurance Marketplaces 2023 Open Enrollment Report

Medicaid

Medicaid & CHIP Enrollees' Primary Languages by Race and Ethnicity (2020)

The chart shows the primary language of Medicaid & CHIP enrollees by race and ethnicity.

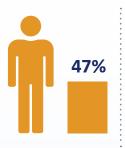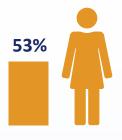|	American Indian or Alaska Native	Asian or Pacific Islander	Black or African American	Hispanic	Other or Unknown	White	
All enrollees	1.2%	2.9%	24%	19%	1.8%	51%	47M total enrollees
English	1.3%	2.7%	27%	11%	1.9%	56%	42M total enrollees
Other languages	0.20%	33%	26%	13%	2.1%	26%	0.61M total enrollees
Spanish	0.05%	0.27%	0.51%	94%	0.23%	4.6%	4.2M total enrollees

row sums to 100%

Data presented was reported by states to CMS as a part of the Transformed Medicaid Statistical Information System (T-MSIS).

Source: Primary Language Spoken by the Medicaid and CHIP Population in 2020

The Medicaid & CHIP data included in this table are based on data from 36 states therefore the total enrollment figure differs from the statistic found on page 6.

*Language data for the Medicare population will be updated in future Data Book releases

Did you know that in 2023 the Health and Human Services (HHS) Language Access Steering Committee has updated the Department's Language Access Plan for the first time since 2013? This plan will be useful in overcoming barriers to equitable access and care. For more information, please visit this link.
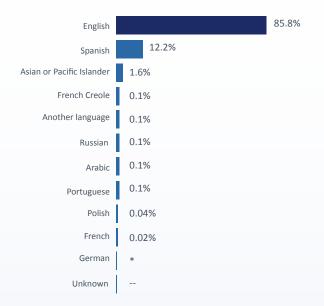
Return to TOC

Language*

Marketplace
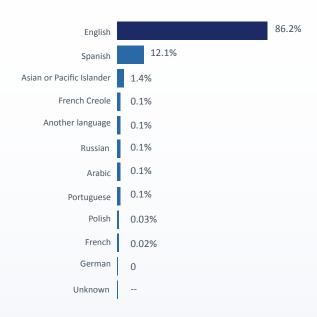
Preferred Spoken Language by Marketplace Enrollees (2021)

The chart shows the preferred spoken languages of Marketplace enrollees.

Language	Percentage
English	85.8%
Spanish	12.2%
Asian or Pacific Islander	1.6%
French Creole	0.1%
Another language	0.1%
Russian	0.1%
Arabic	0.1%
Portuguese	0.1%
Polish	0.04%
French	0.02%
German	*
Unknown	--

Preferred Written Language by Marketplace Enrollees (2021)

The chart shows the preferred written languages of Marketplace enrollees.

Language	Percentage
English	86.2%
Spanish	12.1%
Asian or Pacific Islander	1.4%
French Creole	0.1%
Another language	0.1%
Russian	0.1%
Arabic	0.1%
Portuguese	0.1%
Polish	0.03%
French	0.02%
German	0
Unknown	--

Source: Consumers' Race, Ethnicity and Language Preference Selections for the 2020 and 2021 Health Insurance Marketplace Open Enrollment Periods
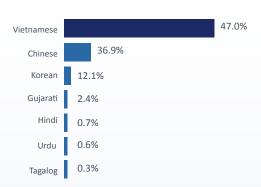
Preferred Spoken and Written Language of Asian and Pacific Islander Marketplace Enrollees (2021)

The chart shows the preferred spoken languages of Asian and Pacific Islander Marketplace enrollees.

Language	Percentage
Vietnamese	48.4%
Chinese	33.9%
Korean	11.1%
Gujarati	3.2%
Hindi	1.8%
Urdu	1.2%
Tagalog	0.5%

The chart shows the preferred written languages of Asian and Pacific Islander Marketplace enrollees.

Language	Percentage
Vietnamese	47.0%
Chinese	36.9%
Korean	12.1%
Gujarati	2.4%
Hindi	0.7%
Urdu	0.6%
Tagalog	0.3%

Source: Consumers' Race, Ethnicity and Language Preference Selections for the 2020 and 2021 Health Insurance Marketplace Open Enrollment Periods

*No language data are currently available for the Medicare population.

Geography (Rurality)

Medicare

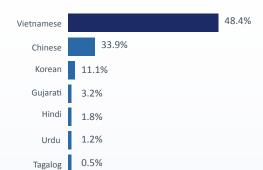**Prevalence of Individuals Residing in Rural Areas Enrolled in Medicare**

1/3

Based upon 2016 ACS data, 1 in 3 adults residing in rural areas were enrolled in Medicare.

Did you know there are Rural-Urban health care disparities (i.e., differences) in the Medicare population? Some rural Medicare enrollees have significantly higher rates of certain health conditions compared to their urban peers.

For more information, please visit this link.

Source: Access to Affordable Care in Rural America: Current Trends and Key Challenges

Medicaid

Prevalence of Individuals Residing in Rural Areas Enrolled in Medicaid

17.1%

In 2019, 17.1% of the rural population were Medicaid enrollees.

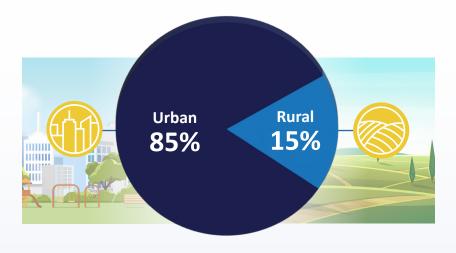Source: Access to Affordable Care in Rural America: Current Trends and Key Challenges

Marketplace

Prevalence of Marketplace (HealthCare.gov states) Enrollees Residing in Rural and Urban Areas (2021)

15% of Marketplace enrollees live in rural areas. In comparison, 85% live in urban places.

Urban 85%

Rural 15%

Source: Access to Affordable Care in Rural America: Current Trends and Key Challenges

Disability Status*

Medicare

Prevalence of Disability Among All Medicare Enrollees (2021)
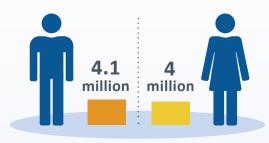
The prevalence of disability in Medicare enrollees is

8
million

Prevalence of Disability Among All Medicare Enrollees by Sex (2021)
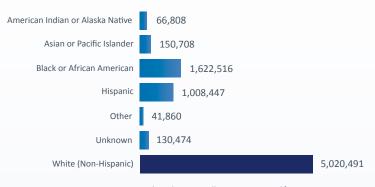
The prevalence of disability in Medicare enrollees is higher in males compared to females.

4.1 million   **4 million**

Source: CMS Program Statistics – Medicare Total Enrollment

Prevalence of Disability Among All Medicare Enrollees by Race and Ethnicity (2021)

Among Medicare enrollees, the prevalence of disability is highest (5.0 million) in White enrollees compared to other racial and ethnic groups.

Race/Ethnicity	Count
American Indian or Alaska Native	66,808
Asian or Pacific Islander	150,708
Black or African American	1,622,516
Hispanic	1,008,447
Other	41,860
Unknown	130,474
White (Non-Hispanic)	5,020,491

Source: Data.CMS.Gov Total Medicare Enrollment: Part A and/or Part B Enrollees, by Type of Entitlement and Demographic Characteristics

Prevalence of Intellectual Disabilities and Related Conditions Among Medicare Enrollees (2021)

1.1%

The prevalence of intellectual disabilities and related conditions in Medicare enrollees is 1.1%.

Related conditions are defined according to CMS' Chronic Conditions Data Warehouse Algorithm and include but are not limited to IDD-related genetic conditions, syndromes, and some specific chromosomal abnormalities

Source: Chronic Conditions Data Warehouse: Table B.2.b Medicare Beneficiary Prevalence for Other Chronic or Disabling Conditions

Disability prevalence reflects individuals eligible for Medicare due to a disability.

*No disability status data are currently available for the Marketplace population.

Disability Status*

Medicaid

Prevalence of Disability Among All Medicaid Enrollees (2020)

The prevalence of disability among Medicaid enrollees is

11%

Source: Medicaid Enrollees Who Qualify for Benefits Based on Disability in 2020

*No disability status data are currently available for the Marketplace population.

CHRONIC CONDITIONS

This section contains chronic condition prevalence and disparities data for the Medicare and Medicaid populations.*

*No data on chronic conditions for the Medicare Advantage or Marketplace populations are currently available; however, CMS will include this information in future Data Books when data are available.

Chronic Conditions

Arthritis

Medicare
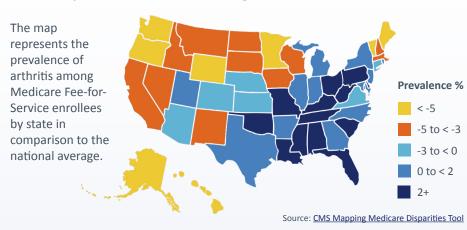
Arthritis data in this section represent the prevalence of osteoarthritis and rheumatoid arthritis in Medicare Fee-for-Service (dual and non-dual) enrollees.

Prevalence of Arthritis Among Medicare Fee-for-Service Enrollees (2022)

35%
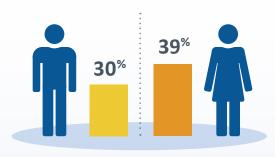
The national prevalence of arthritis in Medicare Fee-for-Service enrollees is 35%.

Prevalence of Arthritis Among Medicare Fee-for-Service Enrollees by State Compared to the National Average (2022)

The map represents the prevalence of arthritis among Medicare Fee-for-Service enrollees by state in comparison to the national average.

Prevalence %
- < -5
- -5 to < -3
- -3 to < 0
- 0 to < 2
- 2+

Source: CMS Mapping Medicare Disparities Tool

Prevalence of Arthritis Among Medicare Fee-for-Service Enrollees by Sex (2022)

Female Medicare Fee-for-Service enrollees have a higher prevalence (39%) of arthritis compared to males.

30%   39%

Source: CMS Mapping Medicare Disparities Tool

Prevalence of Arthritis Among Medicare Fee-for-Service Enrollees by Race and Ethnicity (2022)

Among Medicare Fee-for-Service enrollees, the prevalence of arthritis is highest (36%) for White enrollees compared to other racial and ethnic groups.

Race and Ethnicity	Prevalence
American Indian or Alaska Native	34%
Asian or Pacific Islander	25%
Black or African American	35%
Hispanic	30%
White	36%

Source: CMS Mapping Medicare Disparities Tool

Chronic Conditions

Arthritis

Medicaid

Arthritis data in this section represents the prevalence of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia in Medicaid enrollees.

Self-reported Arthritis, Rheumatoid Arthritis, Gout, Lupus, or Fibromyalgia in Adults Enrolled in Medicaid or CHIP in 2021

Data captures self-reported Medicaid or CHIP enrollees who have ever been told they had arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia.

Click the 'Source' link below for more information on enrollees included in the data.

The prevalence of arthritis among adults enrolled in Medicaid or CHIP is

19%

Source: 2023 Medicaid and CHIP Beneficiary Profile

Chronic Conditions

Asthma
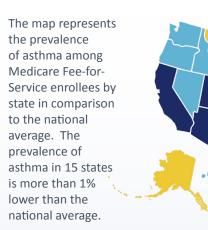
Medicare

Prevalence of Asthma Among Medicare Fee-for-Service Enrollees (2022)

9%

The national prevalence of asthma in Medicare Fee-for-Service enrollees is 9%.

Prevalence of Asthma Among Medicare Fee-for-Service Enrollees by State Compared to the National Average (2022)

The map represents the prevalence of asthma among Medicare Fee-for-Service enrollees by state in comparison to the national average. The prevalence of asthma in 15 states is more than 1% lower than the national average.

Prevalence %
- < -1
- -1 to < 0
- 0 to < 1
- 1+

Source: CMS Mapping Medicare Disparities Tool

Prevalence of Asthma Among Medicare Fee-for-Service Enrollees by Sex (2022)
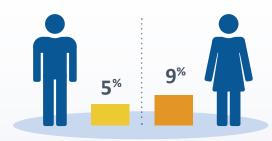
Female Medicare Fee-for-Service enrollees have a higher prevalence of asthma (9%) compared to male enrollees.
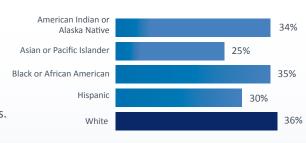
5%
9%

Source: CMS Mapping Medicare Disparities Tool

Prevalence of Asthma Among Medicare Fee-for-Service Enrollees by Race and Ethnicity (2022)

Among Medicare Fee-for-Service enrollees, the prevalence of asthma is highest in Black or African American enrollees (9%) compared to other racial and ethnic groups.

Race/Ethnicity	Prevalence
American Indian or Alaska Native	8%
Asian or Pacific Islander	6%
Black or African American	9%
Hispanic	7%
White	7%

Source: CMS Mapping Medicare Disparities Tool

Asthma

Medicaid

Self-reported Asthma in Adults Enrolled in Medicaid or CHIP (2021)

Data captures self-reported Medicaid or CHIP enrollees who have ever been told they have asthma.

Click the 'Source' link below for more information on enrollees included in the data.

The prevalence of asthma among adults enrolled in Medicaid or CHIP is

# 20%

Source: 2023 Medicaid and CHIP Beneficiary Profile

Chronic Conditions

Diabetes

Medicare

Prevalence of Diabetes Among Medicare Fee-for-Service Enrollees (2022)

26%
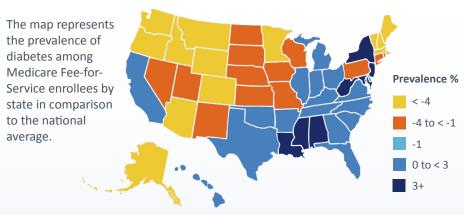
The national prevalence of diabetes in Medicare Fee-for-Service enrollees is 26%.
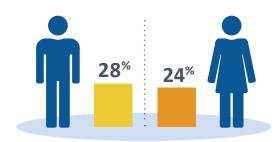
Prevalence of Diabetes Among Medicare Fee-for-Service Enrollees by State Compared to the National Average (2022)

The map represents the prevalence of diabetes among Medicare Fee-for-Service enrollees by state in comparison to the national average.

Prevalence %
- < -4
- -4 to < -1
- -1
- 0 to < 3
- 3+

Source: CMS Mapping Medicare Disparities Tool

Prevalence of Diabetes Among Medicare Fee-for-Service Enrollees by Sex (2022)

The prevalence of diabetes in Medicare Fee-for-Service enrollees is higher in males (28%) than females.
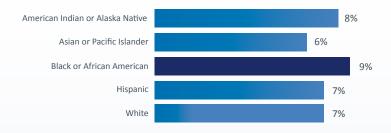
28%   **24%**

Source: CMS Mapping Medicare Disparities Tool

Prevalence of Diabetes Among Medicare Fee-for-Service by Race and Ethnicity (2022)
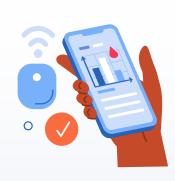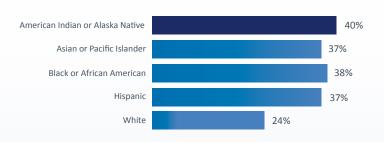
Among Medicare Fee-for-Service enrollees, the prevalence of diabetes is highest in American Indian or Alaska Native enrollees (40%) compared to other racial and ethnic groups.

Race/Ethnicity	Prevalence
American Indian or Alaska Native	40%
Asian or Pacific Islander	37%
Black or African American	38%
Hispanic	37%
White	24%

Source: CMS Mapping Medicare Disparities Tool

Diabetes

Medicaid

Self-reported Diabetes in Adults Enrolled in Medicaid or CHIP (2021)

Diabetes diagnosis has been self-reported by enrollees in Medicaid or CHIP. Enrollees were asked if they have ever been told that they have diabetes.
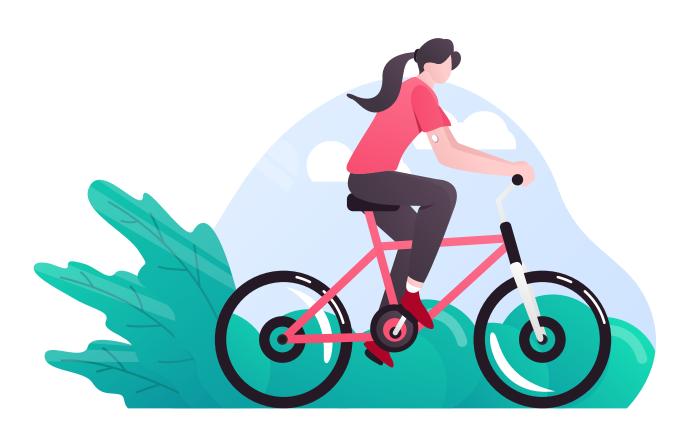
Click the 'Source' link for more information on enrollees included in the data.

The prevalence of diabetes among adults enrolled in Medicaid or CHIP is

10%

Source: 2023 Medicaid and CHIP Beneficiary Profile

Chronic Conditions

High Blood Pressure (Hypertension)
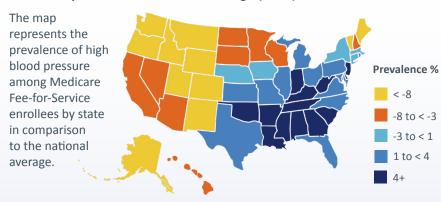
Medicare

Prevalence of High Blood Pressure Among Medicare Fee-for-Service Enrollees (2022)

65%

The national prevalence of high blood pressure in Medicare Fee-for-Service enrollees is 65%.

Prevalence of High Blood Pressure Among Medicare Fee-for-Service by State Compared to the National Average (2022)

The map represents the prevalence of high blood pressure among Medicare Fee-for-Service enrollees by state in comparison to the national average.

Prevalence %
- < -8
- -8 to < -3
- -3 to < 1
- 1 to < 4
- 4+

Source: CMS Mapping Medicare Disparities Tool

Prevalence of High Blood Pressure Among Medicare Fee-for-Service by Sex (2022)
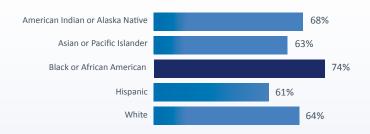
The prevalence of high blood pressure in Medicare Fee-for-Service enrollees is higher in males (66%) than females.

66%   64%

Prevalence of High Blood Pressure Among Medicare Fee-for-Service by Race and Ethnicity (2022)

Among Medicare Fee-for-Service enrollees, the prevalence of high blood pressure is highest for Black or African American (74%) enrollees compared to other racial and ethnic groups.

American Indian or Alaska Native	68%
Asian or Pacific Islander	63%
Black or African American	74%
Hispanic	61%
White	64%

Source: CMS Mapping Medicare Disparities Tool

Medicaid

Self-reported High Blood Pressure in Adults Enrolled in Medicaid or CHIP (2021)

Data captures self-reported Medicaid or CHIP enrollees who have ever been told they have high blood pressure.

Click the 'Source' link below for more information on enrollees included in the data.

The prevalence of high blood pressure among adults enrolled in Medicaid or CHIP is

28%

Source: 2023 Medicaid and CHIP Beneficiary Profile

Chronic Conditions

High Cholesterol (Hyperlipidemia)
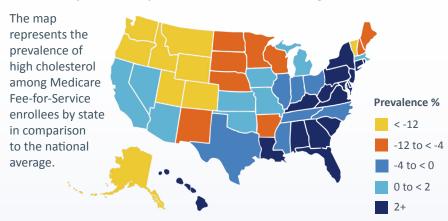
Medicare

Prevalence of High Cholesterol Among Medicare Fee-for-Service Enrollees (2022)

64%

The national prevalence of high cholesterol in Medicare Fee-for-Service enrollees is 64%.
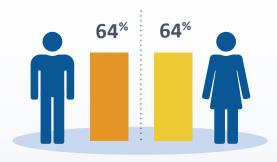
Prevalence of High Cholesterol Among Medicare Fee-for-Service Enrollees by State Compared to the National Average (2022)

The map represents the prevalence of high cholesterol among Medicare Fee-for-Service enrollees by state in comparison to the national average.

Prevalence %
- < -12
- -12 to < -4
- -4 to < 0
- 0 to < 2
- 2+

Source: CMS Mapping Medicare Disparities Tool

Prevalence of High Cholesterol Among Medicare Fee-for-Service Enrollees by Sex (2022)
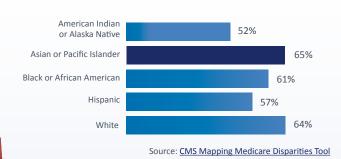
The prevalence of high cholesterol in Medicare Fee-for-Service enrollees is equal for males and females (64%).

64%   64%

Prevalence of High Cholesterol Among Medicare Fee-for-Service Enrollees by Race and Ethnicity (2022)

Among Medicare Fee-for-Service enrollees, the prevalence of high cholesterol is highest in Asian or Pacific Islander enrollees (65%) compared to other racial and ethnic groups.

Race and Ethnicity	Prevalence
American Indian or Alaska Native	52%
Asian or Pacific Islander	65%
Black or African American	61%
Hispanic	57%
White	64%

Source: CMS Mapping Medicare Disparities Tool

Medicaid

Self-reported High Cholesterol in Adults Enrolled in Medicaid or CHIP (2021)

Data captures self-reported Medicaid or CHIP enrollees who have ever been told they have high cholesterol.

Click the 'Source' link below for more information on enrollees included in the data.

The prevalence of high cholesterol among adults enrolled in Medicaid or CHIP is

20%

Source: 2023 Medicaid and CHIP Beneficiary Profile

Chronic Conditions

Ischemic Heart Disease*

Prevalence of Ischemic Heart Disease Among Medicare Fee-for-Service Enrollees (2022)

21%

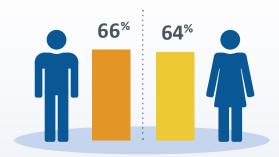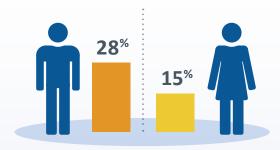The national prevalence of ischemic heart disease in Medicare Fee-for-Service enrollees is 21%.

Prevalence of Ischemic Heart Disease Among Medicare Fee-for-Service Enrollees by State Compared to the National Average (2022)

The map represents the prevalence of ischemic heart disease among Medicare Fee-for-Service enrollees by state in comparison to the national average.

Prevalence %
- < -6
- -6 to < -3
- -3 to < -1
- -1 to < 2
- 2+

Source: CMS Mapping Medicare Disparities Tool

Prevalence of Ischemic Heart Disease Among Medicare Fee-for-Service Enrollees by Sex (2022)

The prevalence of ischemic heart disease in Medicare Fee-for-Service enrollees is higher in males (28%) than females.

28%   **15%**

Source: CMS Mapping Medicare Disparities Tool

Prevalence of Ischemic Heart Disease Among Medicare Fee-for-Service Enrollees by Race and Ethnicity (2022)
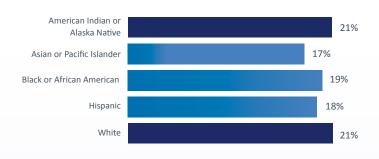
Among Medicare Fee-for-Service enrollees, the prevalence of ischemic heart disease is highest in American Indian or Alaska Natives and White enrollees (21%) compared to other racial and ethnic groups.

Race/Ethnicity	Prevalence
American Indian or Alaska Native	21%
Asian or Pacific Islander	17%
Black or African American	19%
Hispanic	18%
White	21%

Source: CMS Mapping Medicare Disparities Tool

*No ischemic heart disease data are currently available for the Medicaid population. CMS will include this data in future Data Books as it becomes available.

BEHAVIORAL HEALTH

This section contains data on prevalence of behavioral health conditions for the Medicare and Medicaid populations.*

*No data on behavioral health for the Marketplace population are currently available; however, CMS will include this information in future Data Books when data are available.

Alzheimer's Disease, Related Disorders, or Senile Dementia*

Medicare
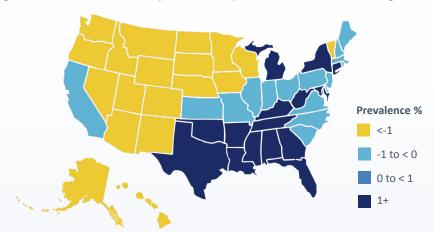
Prevalence of Alzheimer's Disease, Related Disorders, or Senile Dementia Among Medicare Fee-for-Service Enrollees (2022)

7%

The national prevalence of Alzheimer's disease, related disorders, or senile dementia in Medicare Fee-for-Service enrollees is 7%.

Prevalence of Alzheimer's Disease, Related Disorders, or Senile Dementia Among Medicare Fee-for-Service Enrollees by State Compared to the National Average (2022)
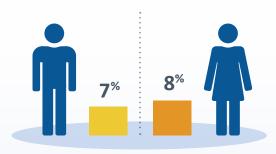
The map represents Alzheimer's, related disorders, or senile dementia prevalence among Medicare Fee-for-Service by state in comparison to the national average.

Prevalence %
- <-1
- -1 to < 0
- 0 to < 1
- 1+

Source: CMS Mapping Medicare Disparities Tool

Prevalence of Alzheimer's Disease, Related Disorders, or Senile Dementia Among Medicare Fee-for-Service by Sex (2022)

The prevalence of Alzheimer's disease, related disorders, or senile dementia in Medicare Fee-for-Service enrollees is nearly equal for males (7%) and females (8%).
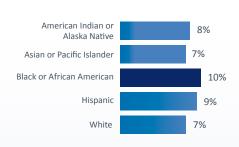
7%   8%

Source: CMS Mapping Medicare Disparities Tool

Prevalence of Alzheimer's Disease, Related Disorders, or Senile Dementia Among Medicare Fee-for-Service by Race and Ethnicity (2022)

Among Medicare Fee-for-Service enrollees, the prevalence of Alzheimer's disease, related disorders, or senile dementia is highest (10%) in Black enrollees compared to other racial and ethnic groups.

Race and Ethnicity	Prevalence
American Indian or Alaska Native	8%
Asian or Pacific Islander	7%
Black or African American	10%
Hispanic	9%
White	7%

Source: CMS Mapping Medicare Disparities Tool

*No Alzheimer's disease data are currently available for the Medicaid population. CMS will include this data in future Data Books as it becomes available.

Behavioral Health

Anxiety Disorders

| Medicare

Prevalence of Anxiety Disorder Among Medicare Fee-for-Service Enrollees (2022)

19%

The national prevalence of anxiety disorder in Medicare Fee-for-Service enrollees is 19%.
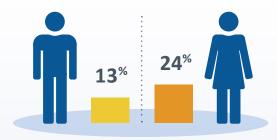
Prevalence of Anxiety Disorders Among Medicare Fee-for-Service by State Compared to the National Average (2022)

The map represents anxiety disorder prevalence among Medicare Fee-for-Service by state in comparison to the national average.

Prevalence %
- < -4
- -4 to < -1
- -1
- 0 to < 2
- 2+

Source: CMS Mapping Medicare Disparities Tool

Prevalence of Anxiety Disorder Among Medicare Fee-for-Service by Sex (2022)

The prevalence of anxiety disorder in Medicare Fee-for-Service enrollees is higher in females (24%) compared to male enrollees.

13%   24%

Source: CMS Mapping Medicare Disparities Tool

Prevalence of Anxiety Disorder Among Medicare Fee-for-Service by Race and Ethnicity (2022)
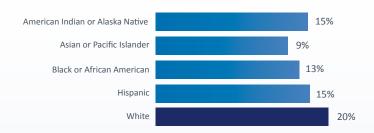
Among Medicare Fee-for-Service enrollees, the prevalence of anxiety disorder is highest (20%) in White enrollees compared to other racial and ethnic groups.

American Indian or Alaska Native	15%
Asian or Pacific Islander	9%
Black or African American	13%
Hispanic	15%
White	20%

Source: CMS Mapping Medicare Disparities Tool

Anxiety Disorders

Medicaid

Self-reported Anxiety in Adults Enrolled in Medicaid or CHIP (2021)

Data captures self-reported Medicaid or CHIP enrollees who have ever been told they have anxiety. Please click the 'Source' link for more information on enrollees included in the data.

The prevalence of anxiety disorder among adults enrolled in Medicaid or CHIP is

28%

Source: 2023 Medicaid and CHIP Beneficiary Profile

Depression

Medicare

Prevalence of Depression Among Medicare Fee-for-Service Enrollees (2022)

19%

The national prevalence of depression in Medicare Fee-for-Service enrollees is 19%.

Prevalence of Depression Among Medicare Fee-for-Service Enrollees by State Compared to the National Average (2022)

The map represents depression prevalence among Medicare Fee-for-Service by state in comparison to the national average.

Prevalence %
- < -3
- -3 to < -1
- -1 to < 0
- 0 to < 2
- 2+

Source: CMS Mapping Medicare Disparities Tool

Prevalence of Depression Among Medicare Fee-for-Service Enrollees by Sex (2022)

The prevalence of depression in Medicare Fee-for-Service enrollees is higher in females (24%) compared to male enrollees.

14%   **24%**

Prevalence of Depression Among Medicare Fee-for-Service Enrollees by Race and Ethnicity (2022)
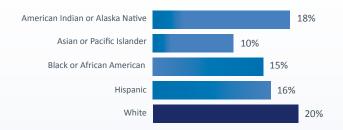
Among Medicare Fee-for-Service enrollees, the prevalence of depression is highest (20%) in White enrollees compared to other racial and ethnic groups.

Race/Ethnicity	Prevalence
American Indian or Alaska Native	18%
Asian or Pacific Islander	10%
Black or African American	15%
Hispanic	16%
White	20%

Source: CMS Mapping Medicare Disparities Tool

Medicaid

Self-reported Depression in Adults Enrolled in Medicaid or CHIP (2021)

Data captures self-reported Medicaid or CHIP enrollees who have ever been told they have depression. Please click the 'Source' link for more information on enrollees included in the data.

The prevalence of depression among adults enrolled in Medicaid or CHIP is

29%

Source: 2023 Medicaid and CHIP Beneficiary Profile

Behavioral Health

Substance Use Disorder (SUD)

The Substance Use Disorder (SUD) section includes data for subcategories of SUD conditions such as Alcohol Use Disorder (AUD) and Drug Use Disorder (DUD).

Medicaid

This section includes the percentages of Medicaid or CHIP enrollees, enrolled for at least 11 months, who received mental health or SUD services paid for by Medicaid or CHIP in 2020.
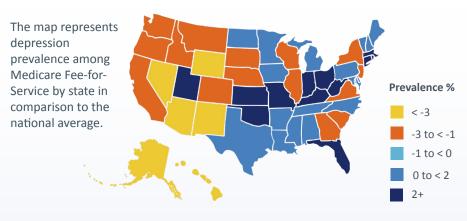
Percentage of Medicaid or CHIP Enrollees Who Received Mental Health or SUD Services (2020)

22%

The percentage of Medicaid or CHIP enrollees who received mental health or SUD services is 22%.

Percentage of Enrollees Who Received Mental Health or SUD Services by Age (2020)

The chart shows the percentage of Medicaid or CHIP enrollees, ages 12-64, who received mental health or SUD services by age.

	Received mental health or SUD services	Received mental health services	Received SUD services	
Ages 12-18	17%	17%	1%	10.4M total enrollees
Ages 19-39	22%	17%	10%	16.3M total enrollees
Ages 40-64	27%	19%	14%	10.9M total enrollees

Percentage of Enrollees Who Received Mental Health or SUD Services by Sex (2020)

The percentage of mental health or SUD services received in Medicaid or CHIP enrollees is slightly higher in females (23%) than males.

21% **23%**
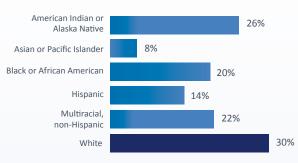
Substance Use Disorder (SUD)

The SUD section includes data for other subcategories of SUD conditions such as AUD and DUD.

Percentage of Enrollees Who Received Mental Health or SUD Services by Race and Ethnicity (2020)
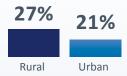
Among Medicaid or CHIP enrollees, the percentage of those who received mental health or SUD services is highest (30%) in White enrollees compared to other racial and ethnic groups.

Race/Ethnicity	Percentage
American Indian or Alaska Native	26%
Asian or Pacific Islander	8%
Black or African American	20%
Hispanic	14%
Multiracial, non-Hispanic	22%
White	30%

Source: Medicaid and CHIP Enrollees Who Received Mental Health or SUD Services in 2020

Percentage of Enrollees Who Received Mental Health or SUD Services by Geographic Area (Rural/Urban) (2020)

The percentage of mental health or SUD services received in Medicaid or CHIP enrollees is higher (27%) in enrollees living in rural areas.

27%
Rural

21%
Urban

Percentage of Enrollees Who Received Mental Health or SUD Services by Primary Language Spoken (2020)

Among Medicaid or CHIP enrollees, a higher percentage (27%) of those who received mental health or SUD services spoke English compared to Spanish.

27%
English

11%
Spanish

For additional information and data on mental health and SUD for the Medicaid & CHIP population, please refer to the Medicaid & CHIP Enrollees Who Received Mental Health or SUD Services in 2020 brief here.

Behavioral Health

Alcohol Use Disorder (AUD)
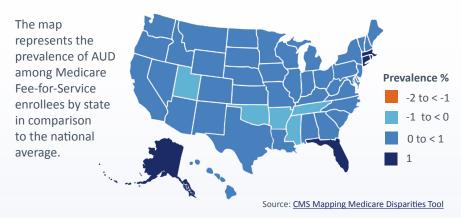
Medicare

Prevalence of Alcohol Use Disorder (AUD) Among Medicare Fee-for-Service Enrollees (2022)

2%
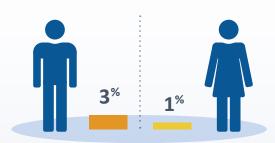
The national prevalence of AUD in Medicare Fee-for-Service enrollees is 2%.

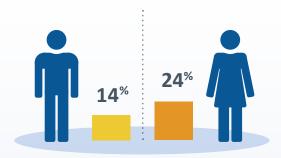**Prevalence of AUD Among Medicare Fee-for-Service Enrollees by State Compared to the National Average (2022)**

The map represents the prevalence of AUD among Medicare Fee-for-Service enrollees by state in comparison to the national average.

Prevalence %
- -2 to < -1
- -1 to < 0
- 0 to < 1
- 1

Source: CMS Mapping Medicare Disparities Tool

Prevalence of AUD Among Medicare Fee-for-Service Enrollees by Sex (2022)

The prevalence of AUD in Medicare Fee-for-Service enrollees is higher in males (3%) compared to female enrollees.
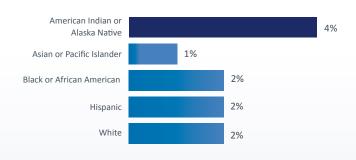
3% 1%

Source: CMS Mapping Medicare Disparities Tool

Prevalence of AUD Among Medicare Fee-for-Service Enrollees by Race and Ethnicity (2022)

Among Medicare Fee-for-Service enrollees, the prevalence of AUD is highest (4%) in American Indian or Alaska Native enrollees compared to other racial and ethnic groups.

American Indian or Alaska Native 4%
Asian or Pacific Islander 1%
Black or African American 2%
Hispanic 2%
White 2%

Source: CMS Mapping Medicare Disparities Tool

Alcohol Use Disorder (AUD)

Medicaid

The data included here for the Medicaid population were generated from Transformed Medicaid Statistical Information System (T-MSIS) data reporting on Medicaid & CHIP enrollees treated for SUD services.

The prevalence of Medicaid enrollees treated for AUD is
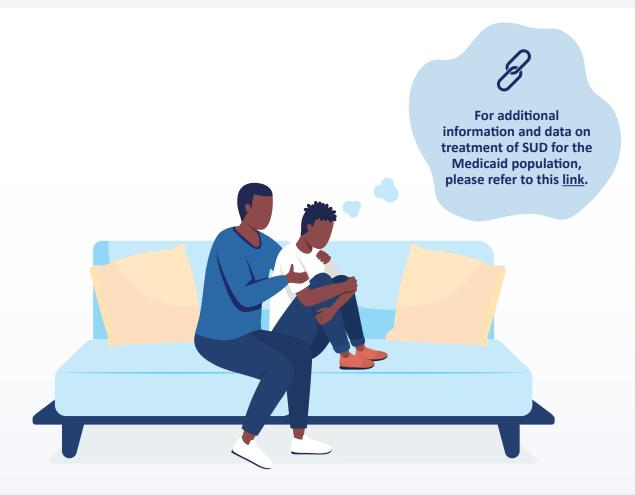
1.9%

The prevalence of Medicaid enrollees with a SUD treated for AUD is

23%

Source: 2020 T-MSIS Substance Use Disorder (SUD) Data Book

For additional information and data on treatment of SUD for the Medicaid population, please refer to this link.

Behavioral Health

Drug Use Disorder (DUD)
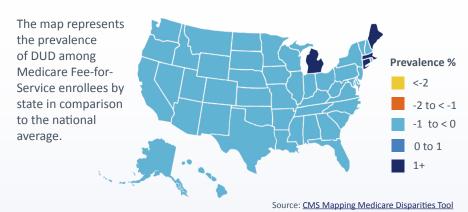
Medicare

Prevalence of Drug Use Disorder (DUD) Among Medicare Fee-for-Service Enrollees (2022)

3%
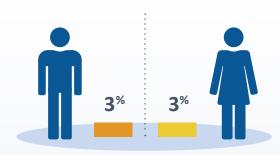
The national prevalence of DUD in Medicare Fee-for-Service enrollees is 3%.

Prevalence of DUD Among Medicare Fee-for-Service Enrollees by State Compared to the National Average (2022)

The map represents the prevalence of DUD among Medicare Fee-for-Service enrollees by state in comparison to the national average.

Prevalence %
- <-2
- -2 to < -1
- -1 to < 0
- 0 to 1
- 1+

Source: CMS Mapping Medicare Disparities Tool

Prevalence of DUD Among Medicare Fee-for-Service Enrollees by Sex (2022)

The prevalence of DUD in Medicare Fee-for-Service enrollees is equal for males and females (3%).

3% | 3%

Source: CMS Mapping Medicare Disparities Tool

Prevalence of DUD Among Medicare Fee-for-Service Enrollees by Race and Ethnicity (2022)
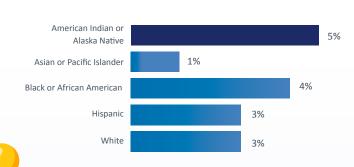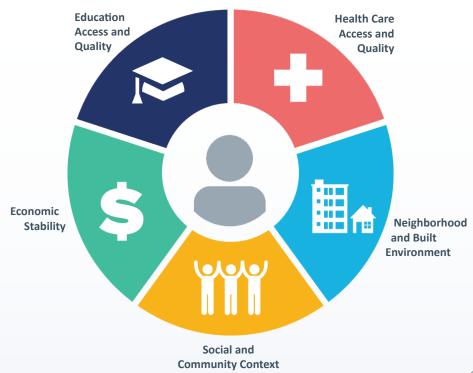
Among Medicare Fee-for-Service enrollees, the prevalence of DUD is highest (5%) in American Indian or Alaska Native enrollees compared to other racial and ethnic groups.

Race and Ethnicity	Prevalence
American Indian or Alaska Native	5%
Asian or Pacific Islander	1%
Black or African American	4%
Hispanic	3%
White	3%

Source: CMS Mapping Medicare Disparities Tool

SOCIAL DETERMINANTS OF HEALTH

Healthy People 2030 Social Determinants of Health Framework

Social determinants of health (SDOH) are the "conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks." These determinants impact health care and health outcomes, as well as overall well-being and quality of life.

The Healthy People 2030 Framework identifies public health priorities for individuals, organizations, and communities in the US to improve health and well-being across a ten-year time span. A major focus of Healthy People 2030 is the SDOH Framework, which groups SDOH into five domains, including economic stability, educational access and quality, health care access and quality, neighborhood and built environment, and social and community context.

Source: Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion.

Social Determinants of Health

Economic Stability
This pillar focuses on helping individuals and families afford needs such as housing, healthy food, and health care.

Education Access and Quality
This pillar focuses on providing opportunities to receive high-quality education for children and adolescents, with the understanding that individuals and families with higher levels of education are more likely to be healthier and live longer.

Health Care Access and Quality
This pillar focuses on providing high-quality and timely access to health care by increasing access to health insurance and the preventive health care.

Neighborhood and Built Environment
This pillar focuses on the impacts of neighborhoods on health and wellness. Alleviating health risks such as pollution, unsafe water, and violence, and improving physical surroundings, such as sidewalks and bike lanes, can improve long-term health outcomes.

Social and Community Context
This pillar focuses on the impacts that family, friends, colleagues, and the community can have on health and well-being. This includes a wide variety of objectives such as improving health communication, reducing anxiety and depression among caregivers of people with disabilities, reducing the proportion of children with parents in prison, and reducing bullying among adolescents.

Data on social and community context are not available for Medicare, Medicaid, and CHIP enrollees.

Source: Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion.

Economic Stability

This pillar of the SDOH framework focuses on helping individuals and families afford needs such as housing, healthy food, and health care.

Total Medicare Enrollment, by Federal Poverty Level (FPL) (2020)

Bar chart values:
- 0-100% FPL: 15.1
- 101-120% FPL: 5.8
- 121-135% FPL: 3.5
- 13-200% FPL: 16
- 201% FPL & Above: 59.5
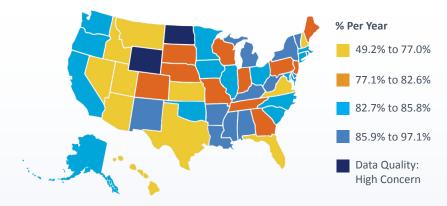
Note: Percentages may not sum to 100% due to rounding.
Source: 2020 CMS Medicare Current Beneficiary Survey Chartbook

Percentage of Adults Ages 18 to 64 Enrolled in Medicaid or CHIP with Family Income Below the FPL, by State Compared to the National Average (2021)

% Per Year
- 22.2% to 37.6%
- 37.7% to 50.3%
- 50.4% to 57.3%
- 57.4% to 67.6%

Source: 2023 Medicaid and CHIP Beneficiary Profile: Enrollment, Expenditures, Characteristics, Health Status, and Experience

Percentage of Children Ages 0 to 17 Enrolled in Medicaid or CHIP with Family Income Below the FPL, by State Compared to the National Average (2021)

% Per Year
- 49.2% to 77.0%
- 77.1% to 82.6%
- 82.7% to 85.8%
- 85.9% to 97.1%
- Data Quality: High Concern

Source: 2023 Medicaid and CHIP Beneficiary Profile: Enrollment, Expenditures, Characteristics, Health Status, and Experience

46%
of **adults enrolled in Medicaid or CHIP** reported that they had worked in the last week (2021).

45%
of **adults enrolled in Medicaid or CHIP** who were employed within the past 12 months reported that they have access to paid sick leave (2021).

Source: 2023 Medicaid and CHIP Beneficiary Profile: Enrollment, Expenditures, Characteristics, Health Status, and Experience

Education Access and Quality

This pillar of the SDOH framework focuses on providing opportunities to receive high-quality education for children and adolescents, with the understanding that individuals and families with higher levels of education are more likely to be healthier and live longer.

Educational Attainment of Medicare Enrollees (2021)

- Less than a high school diploma: 11.9
- High school graduate: 24.5
- Some college/vocational school: 29.6
- Bachelor's degree and beyond: 18.2
- Graduate or professional degree: 15.3

Source: 2021 CMS Medicare Current Beneficiary Survey Early Look
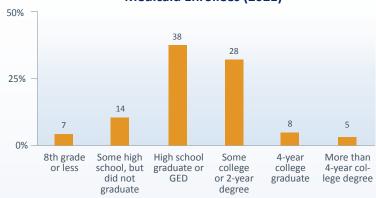
Educational Attainment of Medicaid Enrollees (2021)

- 8th grade or less: 7
- Some high school, but did not graduate: 14
- High school graduate or GED: 38
- Some college or 2-year degree: 28
- 4-year college graduate: 8
- More than 4-year college degree: 5
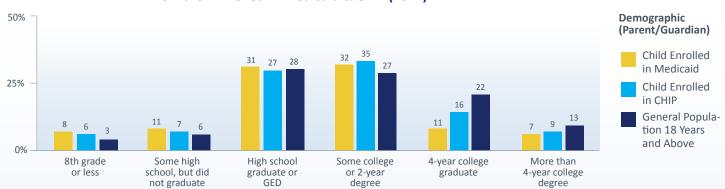
Source: CAHPS Health Plan Survey Database 2021 Medicaid and CHIP Chartbook

Educational Attainment of Parents or Caregivers of Children Enrolled in Medicaid & CHIP (2021)
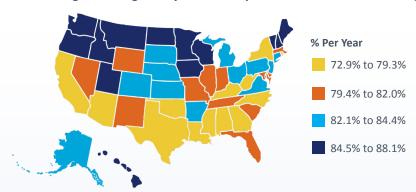
Demographic (Parent/Guardian)

Category	Child Enrolled in Medicaid	Child Enrolled in CHIP	General Population 18 Years and Above
8th grade or less	8	6	3
Some high school, but did not graduate	11	7	6
High school graduate or GED	31	27	28
Some college or 2-year degree	32	35	27
4-year college graduate	11	16	22
More than 4-year college degree	7	9	13

Source: CAHPS Health Plan Survey Database 2021 Medicaid and CHIP Chartbook; Table B-2; US Census Educational Attainment in the United States: 2021

Percentage of Adults Ages 25 to 64 Enrolled in Medicaid or CHIP with a High School Degree or Higher, by State Compared to the National Average (2021)

% Per Year
- 72.9% to 79.3%
- 79.4% to 82.0%
- 82.1% to 84.4%
- 84.5% to 88.1%

Source: 2023 Medicaid and CHIP Beneficiary Profile: Enrollment, Expenditures, Characteristics, Health Status, and Experience

Health Care Access and Quality

This pillar of the SDOH framework focuses on providing high-quality and timely access to health care by increasing access to health insurance and the preventive health care.

Rate of Uninsured Individuals, by Age (2011 – 2019)

Uninsured Rate

Year	Children (0-18)	Adults (19-64)	Adults 65+
2011	21.17	7.91	0.95
2012	20.81	7.48	0.95
2013	20.49	7.53	1.01
2014	16.39	6.31	0.93
2015	13.23	5.07	0.81
2016	12.10	4.67	0.76
2017	12.28	4.97	0.78
2018	12.47	5.14	0.77
2019	12.87	5.62	0.77

Children (0-18) ● Adults (19-64) ● Adults 65+

Includes all civilian non-institutionalized populations.

Source: 2021 CMS Data Brief Series the Unsubsidized Uninsured: The Impact of Premium Affordability on Insurance Coverage

Self-Reported Physician Appointment Wait Time for Medicare Enrollees Living in the Community (2020)

Wait Time	<65 years	65-74 years	75-84 years	85+ years
No wait	26.1	25.2	30.3	28.7
1-6 days	16.6	17.1	15.6	17.9
7-12 days	13.0	14.2	12.5	13.5
13-18 days	11.7	12.1	10.3	8.9
19+ days	32.7	31.4	31.2	31.0

Source: 2020 CMS Medicare Current Beneficiary Survey Chartbook

Health Care Access and Quality
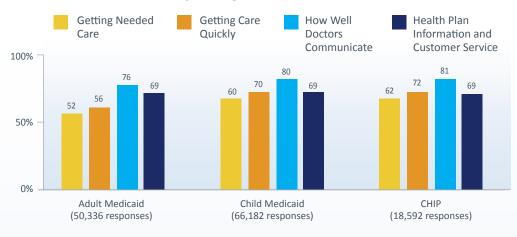
Health Care Quality Among Medicare Enrollees Living in the Community, by Age (2021)

Legend: < 65 Years | 65 Years or Older

Measure	< 65 Years	65 Years or Older
Trouble Getting Care	14.0	6.2
Delayed Care Due to Cost	16.4	4.9
Satisfaction with General Care	90.1	94.9
Satisfaction with Ease of Access to Doctor	90.6	96.0
Satisfaction with Cost	79.7	87.9

Source: 2021 CMS Medicare Current Beneficiary Survey Early Look

Health Care Quality Among All Medicaid & CHIP Enrollees (2022)

Legend: Getting Needed Care | Getting Care Quickly | How Well Doctors Communicate | Health Plan Information and Customer Service

Group	Getting Needed Care	Getting Care Quickly	How Well Doctors Communicate	Health Plan Information and Customer Service
Adult Medicaid (50,336 responses)	52	56	76	69
Child Medicaid (66,182 responses)	60	70	80	69
CHIP (18,592 responses)	62	72	81	69

Indicates the percentage of enrollees who selected "Always" for various measures of health care quality. (e.g., "Doctor listened carefully").

Source: 2022 AHRQ Medicaid and Children's Health Insurance Program (CHIP) Chartbook

Social Determinants of Health

Neighborhood and Built Environment

This pillar of the SDOH framework focuses on the impacts of neighborhoods on health and wellness. Alleviating health risks such as pollution, unsafe water, and violence, and improving physical surroundings, such as sidewalks and bike lanes, can improve long-term health outcomes.

Transportation Among Employed Adults Enrolled in Medicaid (2021)

Category	Percentage
Private vehicle or ride hailing	78
Worked at home	11
Public transportation	5
Bicycle or walked	4
Other method	2
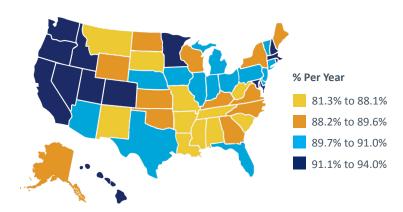
Source: 2022 AHRQ Medicaid and Children's Health Insurance Program (CHIP) Chartbook

Access to Transportation Among Medicare Enrollees Living in the Community (2022)

Category	Percentage
Has trouble getting places	14
Reduced day-to-day travel	24
Asks others for rides	23
Does not drive/has given up driving altogether	18
Limited driving to daytime	15
Use of taxi or special transportation	8

Source: 2022 MCBS PUF on Financial Well-Being of Medicare Beneficiaries
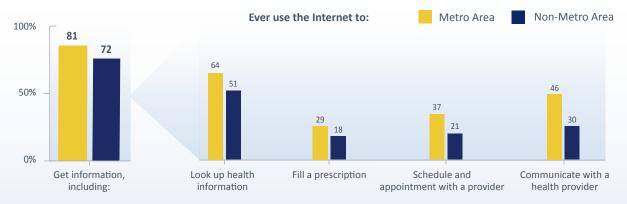
Internet Access in Households With At Least One Person Enrolled in Medicaid or CHIP, by State Compared to the National Average (2021)

% Per Year
- 81.3% to 88.1%
- 88.2% to 89.6%
- 89.7% to 91.0%
- 91.1% to 94.0%

Source: 2022 AHRQ Medicaid and Children's Health Insurance Program (CHIP) Chartbook

Internet Use Among All Medicare Enrollees Living in the Community, by Metropolitan Area (2022)

Ever use the Internet to: Metro Area / Non-Metro Area

Category	Metro Area	Non-Metro Area
Get information, including:	81	72
Look up health information	64	51
Fill a prescription	29	18
Schedule and appointment with a provider	37	21
Communicate with a health provider	46	30

Source: 2022 MCBS Early PUF on Internet Access and Use Among Medicare Beneficiaries

Social Determinants of Health

</> Z Codes

The collection of SDOH data in electronic health records (EHR) can enable clinicians and service providers to identify and track social issues such as food security, homelessness, and other economic burdens among their patients.

To capture SDOH data, providers use "Z codes," a set of standardized psychosocial and economic determinant-related codes from the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM). Z codes can identify a range of patient information including education, employment, housing, and access to food or safe drinking water.

No neighborhood or built environment data are currently available for the Medicaid or Marketplace population.

Top Five Medicare Fee-for-Service Z Codes (2019) (n=1,262,563)

Bar chart values:
- Z59.0: 22
- Z63.4: 12
- Z60.2: 12
- Z59.3: 5
- Z63.0: 5

Description
- Homelessness
- Disappearance and death of family member
- Problems related to living alone
- Problems related to living in a residential institution
- Problems in a relationship with spouse or partner

Source: 2021 CMS Data Highlight Utilization of Z Codes for Social Determinants of Health among Medicare Fee-for-Service Beneficiaries, 2019

Top Five Medicare Advantage Z Codes (2019) (n= 111,880)

Bar chart values:
- Z59.0: 9.8
- Z63.4: 15.5
- Z60.2: 23.7
- Z62.8: 5.7
- Z63.0: 5.8
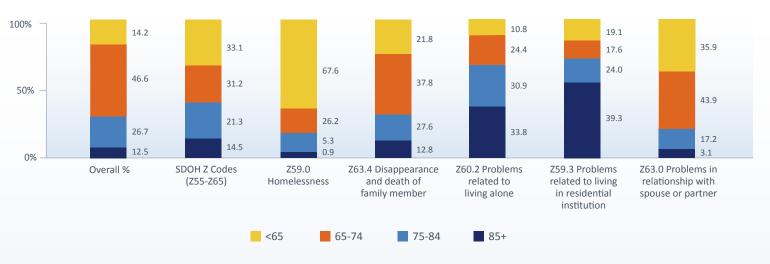
Description
- Homelessness
- Disappearance and death of family member
- Problems related to living alone
- Other specified problems related to upbringing
- Problems in a relationship with spouse or partner

Source: 2022 CMS Data Highlight Utilization of Z Codes for Social Determinants of Health among a Sample of Medicare Advantage Enrollees, 2017 and 2019

Social Determinants of Health

Percentage of Medicare Fee-for-Service Enrollees with Z Code Claims for All Claims and for the Top Five Most Utilized Codes, by Age (2019)

Chart (stacked bar, 0% to 100%), categories and values:

Category	<65	65-74	75-84	85+
Overall %	14.2	46.6	26.7	12.5
SDOH Z Codes (Z55-Z65)	33.1	31.2	21.3	14.5
Z59.0 Homelessness	67.6	26.2	5.3	0.9
Z63.4 Disappearance and death of family member	21.8	37.8	27.6	12.8
Z60.2 Problems related to living alone	10.8	24.4	30.9	33.8
Z59.3 Problems related to living in residential institution	19.1	17.6	24.0	39.3
Z63.0 Problems in relationship with spouse or partner	35.9	43.9	17.2	3.1

Legend: ■ <65 ■ 65-74 ■ 75-84 ■ 85+

Percentage of Medicare Advantage Enrollees with Z Code Claims for All Claims and for the Top Five Most Utilized Codes, by Age (2019)

Chart (stacked bar, 0% to 100%), categories and values:

Category	18-64 Years	65-74 Years	74-84 Years	85+ Years
Overall %	10.5	47.7	30.1	11.8
Any Z Code	24.0	34.0	26.5	15.5
Z60.2 Problems related to living alone	9.0	24.6	34.5	31.9
Z63.4 Disappearance/death of family member	19.2	39.5	29.1	12.2
Z59.0 Homelessness	64.5	26.8	7.1	1.6
Z63.0 Problems in relationship with spouse or partner	31.1	45.5	21.0	2.3
Z62.8 Other specified problems related to upbringing	65.2	26.6	6.8	1.4

Legend: ■ 18-64 Years ■ 65-74 Years ■ 74-84 Years ■ 85+ Years

Social Determinants of Health

Percentage of Medicare Fee-for-Service Enrollees with Z Code Claims for All Claims and for the Top Five Most Utilized Codes, by Race and Ethnicity (2019)

	Overall %	Any Z Code (Z55-Z65)	Z59.0 Homelessness	Z59.3 Problems related to living in residential institution	Z60.2 Problems related to living alone	Z63.0 Problems in relationship with spouse or partner	Z63.4 Disappearance and death of family member
American Indian or Alaska Natives and Other or Unknown	0.6	1.8	1.6	0.8	1.2	1.7	1.5
Asian	2.7	1.1	1.6	0.7	0.8	0.9	1.3
Hispanic	5.9	6.9	9.4	3.6	4.2	6.1	6.4
Black	8.8	13.2	24.8	8.3	9.6	6.6	9.7
White	79.5	75.2	60.9	85.8	83.0	81.9	79.4

Legend: White · Black · Hispanic · Asian · American Indian or Alaska Natives and Other or Unknown

Fee-for-Service enrollees with Hispanic ethnicity were of any race.
Source: 2021 CMS Data Highlight Utilization of Z Codes for Social Determinants of Health among Medicare Fee-for-Service Enrollees, 2019

Percentage of Medicare Advantage Enrollees with Z Code Claims for All Claims and for the Top Five Most Utilized Codes, by Race and Ethnicity (2019)

	Overall %	Any Z Code	Z60.2 Problems related to living alone	Z63.4 Disappearance/ death of family member	Z59.0 Homelessness	Z63.0 Problems in relationship with spouse or partner	Z62.8 Other specified problems related to upbringing
American Indian or Alaska Natives and Other or Unknown	2.5	1.7	1.4	1.6	1.7	2.5	2.0
Asian	2.2	1.3	1.3	1.1	1.3	1.2	0.6
Hispanic	7.5	6.7	4.9	6.7	7.1	5.0	6.0
Black	13.2	15.2	13.5	14.6	28.5	8.8	14.1
White	74.6	75.1	78.9	76.0	61.4	82.5	77.3

Legend: White · Black · Hispanic · Asian · American Indian or Alaska Natives and Other or Unknown
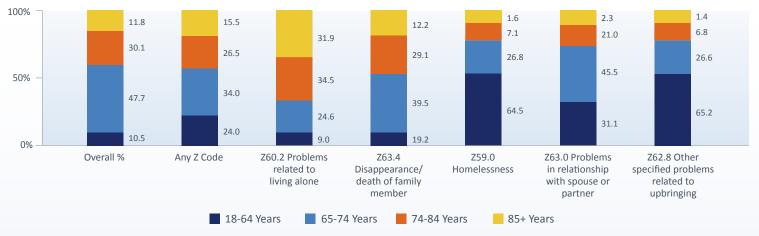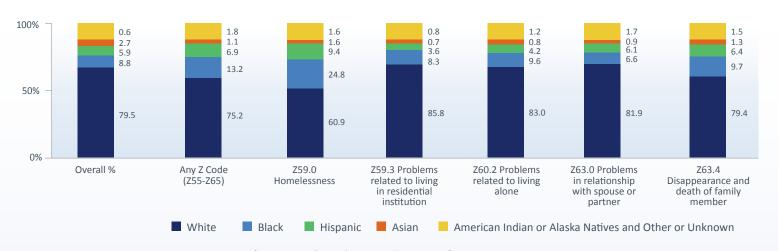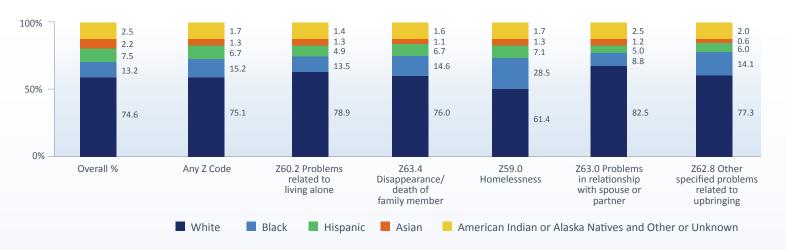
Source: 2022 CMS Data Highlight Utilization of Z Codes for Social Determinants of Health among a Sample of Medicare Advantage Enrollees, 2017 and 2019

Social Determinants of Health

Percentage of Medicare Fee-for-Service Enrollees with Z Code Claims for All Claims and for the Top Five Most Utilized Codes, by Geography (2019)

	Overall %	Any Z Code	Z59.0 Homelessness	Z59.3 Problems related to living in residential institution	Z60.2 Problems related to living alone	Z63.0 Problems in relationship with spouse or partner	Z63.4 Disappearance and death of family member
Urban	78.3	80.1	89.6	60.3	77.0	78.0	79.0
Rural	21.7	19.9	10.4	39.7	23.0	72.0	21.0

Enrollees categorized as rural live in non-metropolitan areas, that is, areas with a population of 50,000 or fewer.
Source: 2021 CMS Data Highlight Utilization of Z Codes for Social Determinants of Health among Medicare Fee-for-Service Enrollees, 2019

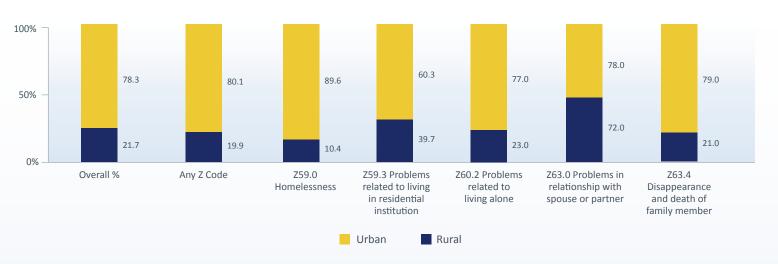## Percentage of Medicare Advantage Enrollees with Z Code Claims for All Claims and for the Top Five Most Utilized Codes, by Geography (2019)

	Overall %	Any Z Code	Z59.0 Homelessness	Z60.2 Problems related to living alone	Z62.8 Other specified problems related to upbringing	Z63.0 Problems in relationship with spouse or partner	Z63.4 Disappearance and death of family member
Metropolitan	19.1	19.3	11.9	19.5	22.0	19.9	20.4
Non-Metropolitan	80.9	80.7	88.1	80.5	78.0	80.1	79.6

Non-metropolitan includes micropolitan, small town and rural.
Source: 2022 CMS Data Highlight Utilization of Z Codes for Social Determinants of Health among a Sample of Medicare Advantage Enrollees, 2017 and 2019
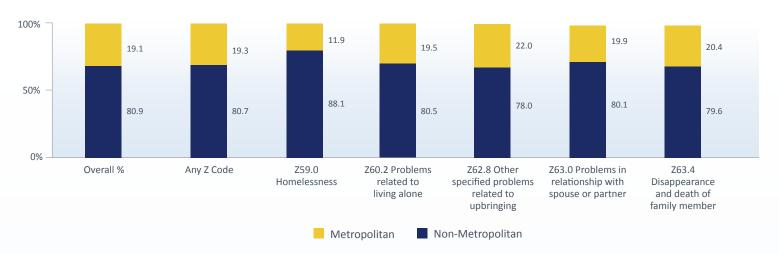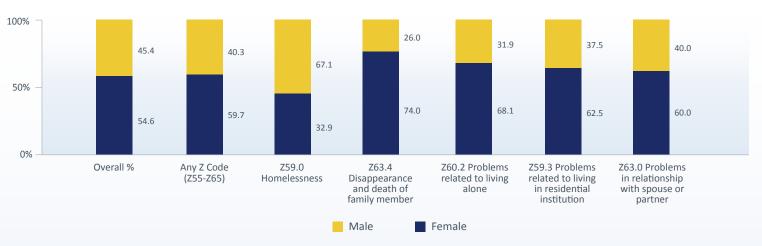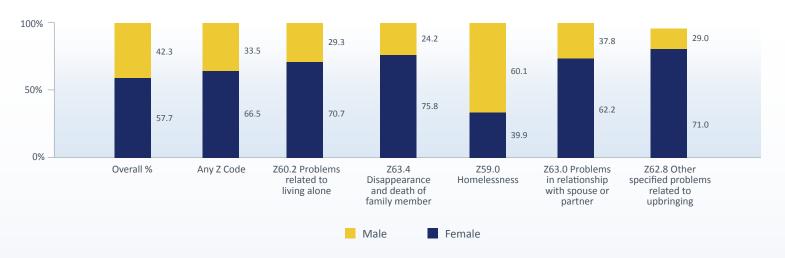
Social Determinants of Health

Percentage of Medicare Fee-for-Service Enrollees with Z Code Claims for all Claims and for the Top Five Most Utilized Codes, by Sex (2019)

	Overall %	Any Z Code (Z55-Z65)	Z59.0 Homelessness	Z63.4 Disappearance and death of family member	Z60.2 Problems related to living alone	Z59.3 Problems related to living in residential institution	Z63.0 Problems in relationship with spouse or partner
Male	45.4	40.3	67.1	26.0	31.9	37.5	40.0
Female	54.6	59.7	32.9	74.0	68.1	62.5	60.0

Legend: Male, Female

Percentage of Medicare Advantage Enrollees with Z Code Claims for all Claims and for the Top Five Most Utilized Codes, by Sex (2019)

	Overall %	Any Z Code	Z60.2 Problems related to living alone	Z63.4 Disappearance and death of family member	Z59.0 Homelessness	Z63.0 Problems in relationship with spouse or partner	Z62.8 Other specified problems related to upbringing
Male	42.3	33.5	29.3	24.2	60.1	37.8	29.0
Female	57.7	66.5	70.7	75.8	39.9	62.2	71.0

Legend: Male, Female