

# COVID-19 Experiences Among the Medicare Population

Summer 2020

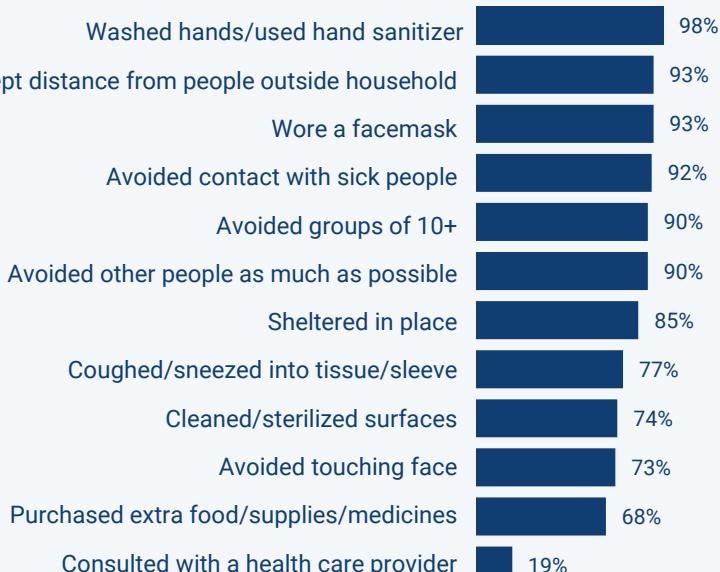
This infographic presents information related to Medicare beneficiaries' experiences with the COVID-19 pandemic. It uses preliminary data from the Medicare Current Beneficiary Survey (MCBS) COVID-19 Summer 2020 Supplement and preliminary 2019 MCBS data.

## COVID-19 PREVENTIVE HEALTH BEHAVIORS

The most commonly reported preventive health behavior was **washing hands or using hand sanitizer (98%)**

The least commonly reported preventive health behavior was **consulting with a health care provider (19%)**

### Many beneficiaries have taken preventive measures (% of beneficiaries)

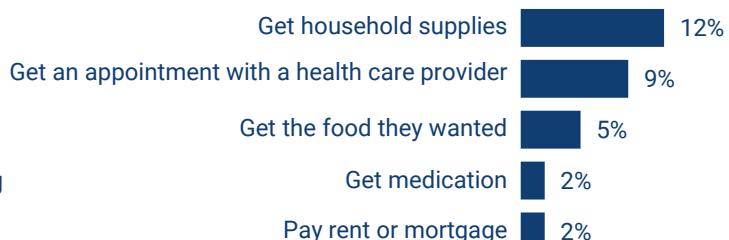


## IMPACT OF COVID-19 PANDEMIC ON DAILY LIFE

The most commonly reported impact on daily life was **not being able to get household supplies (12%)**

The least commonly reported impact on daily life was **not being able to pay rent or mortgage (2%)**

### Some beneficiaries were unable to do essential activities (% of beneficiaries)

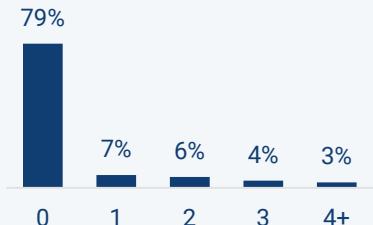


# EXPERIENCES WITH FOREGONE CARE DURING COVID-19 PANDEMIC



**21%** of beneficiaries reported **needing health care** for something other than COVID-19, **but not getting it because of the pandemic**

**Number of types of health care foregone<sup>1</sup>**  
(% of beneficiaries)



<sup>1</sup> Total does not sum to 100 percent because 1 percent of beneficiaries reported foregone health care but did not select a type

## Among beneficiaries who reported foregone care...



The most commonly reported type of foregone care was **dental care** (43%)



The most common reason the beneficiary decided to forego care was **not wanting to risk being at a medical facility** (45%)



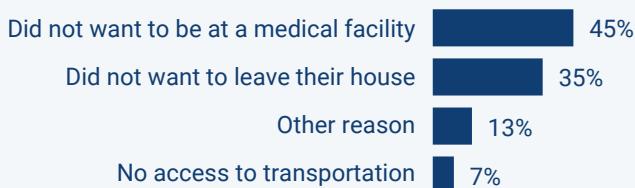
The most common reason the health care provider rescheduled the appointment was because their **medical office was closed** (38%)

**The type of foregone health care varied<sup>2</sup>**  
(% of beneficiaries)



<sup>2</sup> Respondents were able to select more than one type

**Beneficiaries decided to forego care for various reasons**  
(% of reasons)



**Health care providers rescheduled appointments for various reasons**  
(% of reasons)



# AVAILABILITY OF TELEMEDICINE APPOINTMENTS



Of beneficiaries who have a usual health care provider, **60%** reported that this **provider currently offers telephone or video appointments**

## Among beneficiaries whose usual health care provider offers telemedicine appointments...

**58%** reported that their provider offers **both telephone and video appointments**

**22%** reported that their provider offered telemedicine appointments **before the pandemic**

**57%** reported that their provider offered a telemedicine appointment to **replace an appointment during the pandemic**

Access to telemedicine appointments **increases with total household income**  
(% of beneficiaries)



# ACCESS TO TECHNOLOGY



**82%** of beneficiaries reported having **access to the Internet**



**92%** of beneficiaries with a total household income of \$25K or more have **access to the Internet** compared to **65%** of beneficiaries with a total household income of less than \$25K

**Smartphones** are the most commonly used type of technology among beneficiaries<sup>3</sup>  
(% of beneficiaries)



**52%** have ever participated in **video, voice calls, or conferencing over the Internet**

<sup>3</sup> Respondents were able to select more than one type

# INFORMATION ABOUT COVID-19 PANDEMIC

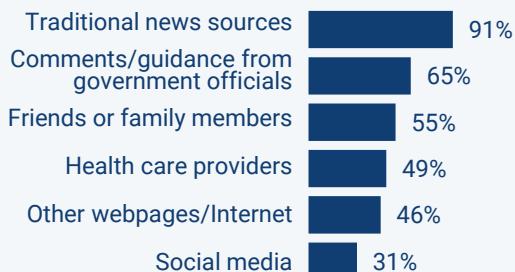


**56%** reported that **traditional news** (e.g., TV, radio, websites, newspapers) was their **primary source of COVID-19 information**



Only **2%** reported that **social media** was their **primary source of COVID-19 information**

## Beneficiaries relied on different sources of information about COVID-19<sup>4</sup> (% of beneficiaries)



<sup>4</sup> Respondents were able to select other sources in addition to their primary source

## IMPACT OF COVID-19 PANDEMIC ON WELL-BEING

**23%** reported **feeling more lonely or sad**



**29%** of female beneficiaries reported feeling more lonely or sad compared to **16%** of male beneficiaries

**46%** reported **feeling more stressed or anxious**



**51%** of female beneficiaries reported feeling more stressed or anxious compared to **39%** of male beneficiaries

**18%** reported **feeling less financially secure**



**19%** of female beneficiaries reported feeling less financially secure compared to **17%** of male beneficiaries

**37%** reported **feeling less socially connected to family and friends**



**41%** of female beneficiaries reported feeling less socially connected compared to **31%** of male beneficiaries

These preliminary estimates are based on data from the MCBS COVID-19 Summer 2020 Supplement, a nationally representative, cross-sectional telephone survey of Medicare beneficiaries living in the community that was administered from June 10, 2020 through July 15, 2020. These data are complemented by MCBS Community interview data collected in Fall 2019 on beneficiaries' health status and demographics as part of the in-person, nationally representative, longitudinal MCBS survey. The MCBS is sponsored by the Centers for Medicare & Medicaid Services (CMS) and directed by the Office of Enterprise Data and Analytics (OEDA).

Estimates represent the population of beneficiaries who were continuously enrolled in Medicare from the beginning of 2020 and were alive and living in the community in Summer 2020. The dataset included 11,114 beneficiaries (weighted N=56,094,955). Estimates use preliminary 2019 MCBS Survey File data and are produced prior to final data editing and final weighting to provide early access to the most recent information from the MCBS. See appendices for additional information.