In some cases due to size or complexity, we were not able to make files fully accessible using assistive technology.

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MCBS Highlights

Prevalence of Select Psychiatric Diagnoses in Long-Term Care: 1997-2007

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The Medicare Current Beneficiary Survey (MCBS) is a longitudinal survey of a nationally representative sample of Medicare enrollees. The survey collects information on a variety of topics including beneficiaries' health status. This information is collected from two groups of beneficiaries: those living in the community and those living in facilities. Information is obtained on specific medical diagnoses and conditions for beneficiaries residing in a facility.

INTRODUCTION

A beneficiary is considered to be residing in a facility, for purposes of the MCBS, when that facility contains three or more beds and provides either personal care services to residents, or continuous supervision of residents, or provides long-term care services throughout the facility or in a separately identifiable unit. This broadly defined definition allows analysis beyond traditional views of long-term care, i.e., nursing homes and related care homes.

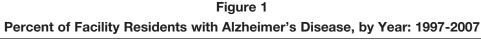
NOTE: Highlights are not peer reviewed.

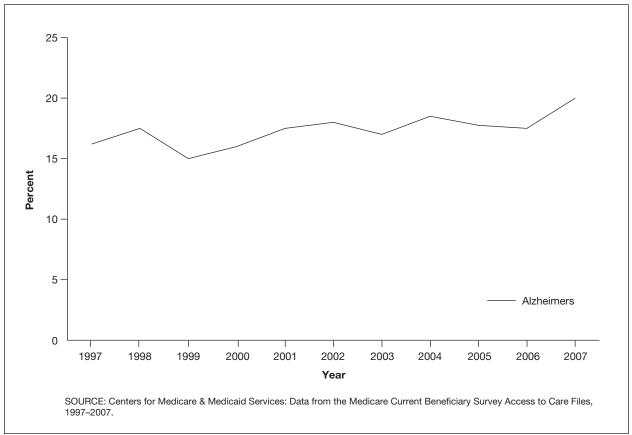
The author is with the Centers for Medicare & Medicaid Services (CMS). The statements expressed in this article are those of the author and do not necessarily reflect the views or policies of CMS.

The MCBS began collecting medical diagnoses of facility beneficiaries in 1997. Data in the following figures pertain to seven select psychological conditions: alzheimer's disease, anxiety, dementia (other than alzheimer's), depression, manic depression, mental illness, and schizophrenia. This highlight will look at the facility prevalence of these selected diagnoses for the 11-year period 1997-2007. This highlight will also look at the percentage of facility residents diagnosed with at least one of these conditions for the two types of facilities with the largest populations: nursing homes and assisted living facilities.

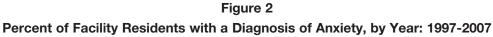
The overall trend is toward a gradual inclination for all psychologically related diagnoses with two exceptions: depression and mental illness. The percent of residents diagnosed with depression has seen a dramatic increase over the period, most appreciably since the year 2000. Conversely, the other exception, mental illness, has seen a considerable decline since 1997. Conjecture as to the cause of these two opposite trends is varied and lends itself toward further exploration.

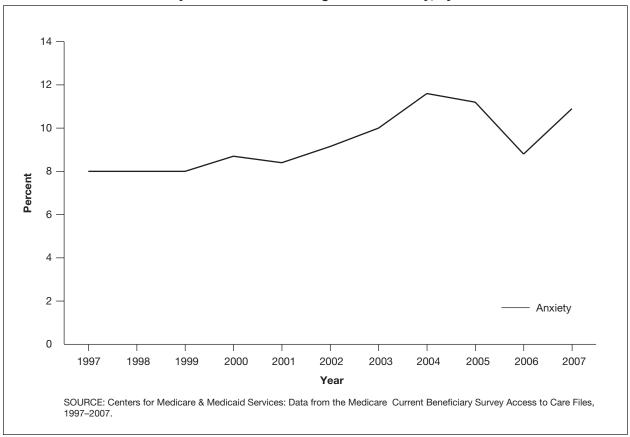
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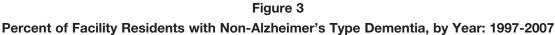


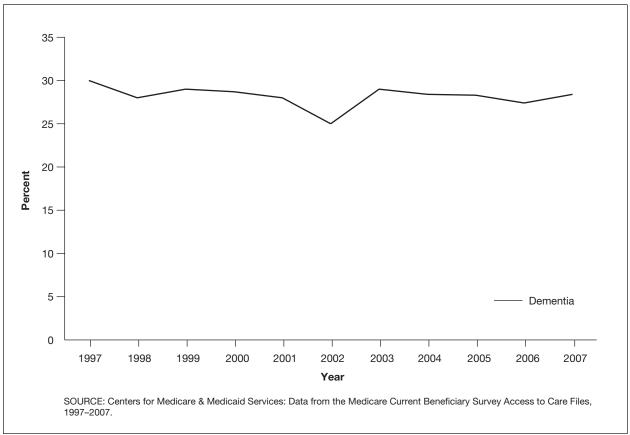
- From 1997-2007 the percent of facility residents with a diagnosis of Alzheimer's disease showed an increase of 22 percent (16.5 percent in 1997 to 20.1 percent in 2007).
- The average percent during the period 1997-2007 was 17.3 percent.
- The vast increase from 2006-2007 (17.6 percent in 2006 to 20.1 percent in 2007) may be due to an anomalous spike in 2007. However, the overall trend still points to an increase.



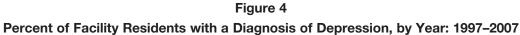


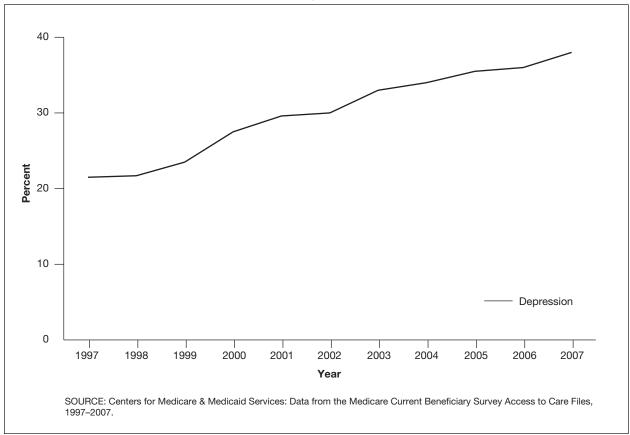
- There was a 38 percent increase in the percent of facility residents diagnosed with anxiety from 1997-2007 (8.1 percent to 11.2 percent). This increase is particularly pronounced after 2001.
- The percent of facility residents with anxiety averaged 8.3 percent for the period 1997-2001 and increased to an average of 10.4 percent for the period 2002–2007.



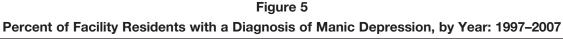


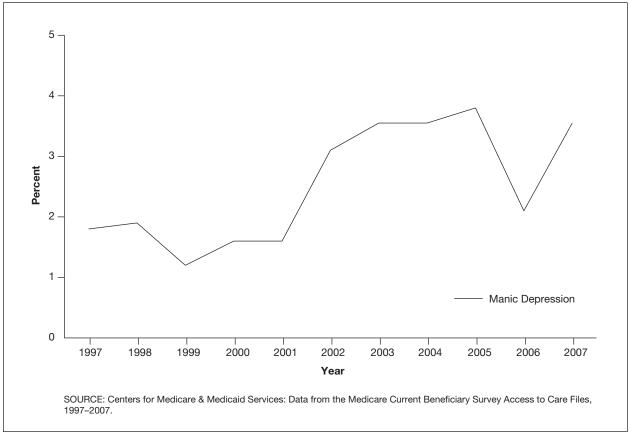
• The percent of residents with a diagnosis of dementia, other than Alzheimer's, was fairly consistent across the period, averaging 28.2 percent.



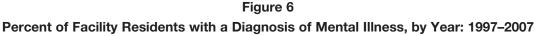


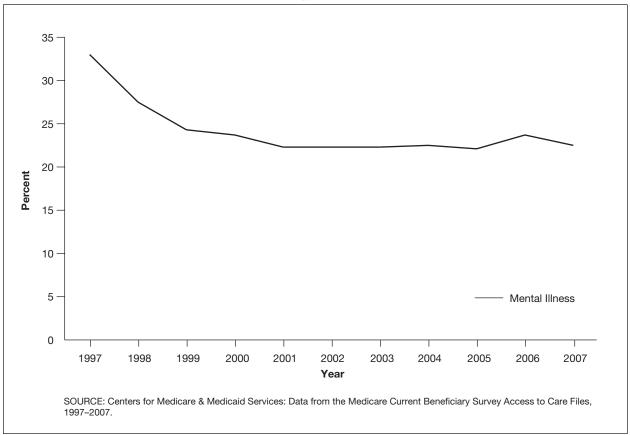
• There was a fairly consistent and dramatic increase in the percent of residents diagnosed with depression. From 1997-2007 there was a 74 percent increase in this diagnosis (21.9 percent of residents had a diagnosis of depression in 1997 compared to 38.0 percent in 2007).



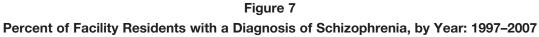


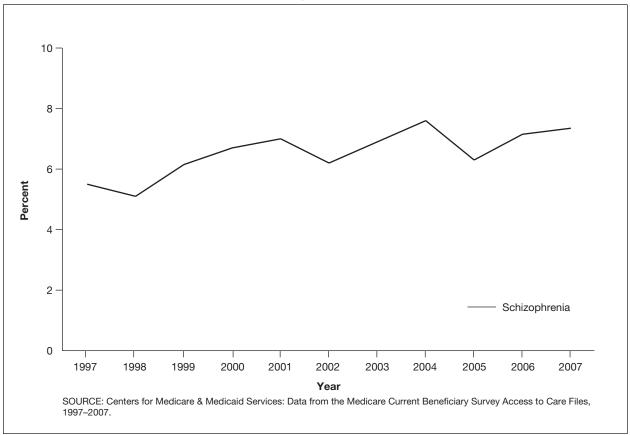
- Residents diagnosed with manic depression are a small percent of the facility population. However, the percentage of residents with manic depression has doubled since 2001.
- For the period 1997-2000 the facility population with manic depression averaged approximately 1.7 percent. From 2002-2007, excluding the anomalous year of 2006, the percent of the facility population with manic depression averaged 3.5 percent.





- Mental illness is defined in the MCBS as any history of mental retardation, mental illness, or developmental disability problems. Excluded are diagnoses of organic brain syndrome, Alzheimer's disease, and related dementia.
- From 1997-2001, the percent of facility residents with mental illness saw a decline, falling from 32.6 percent in 1997 to 21.9 percent in 2001.
- Since 2001 the percent has remained fairly stable, averaging about 22 percent.

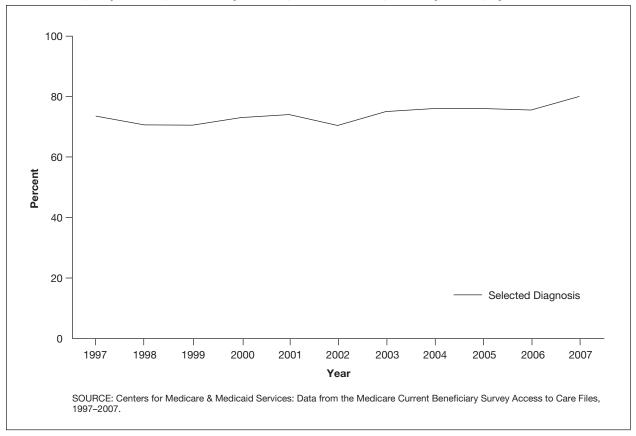




• The percent of residents with a diagnosis of schizophrenia rose above 6 percent in 1999. Since then the percent has vacillated slightly above and below an average of 6.9 percent.

Figure 8

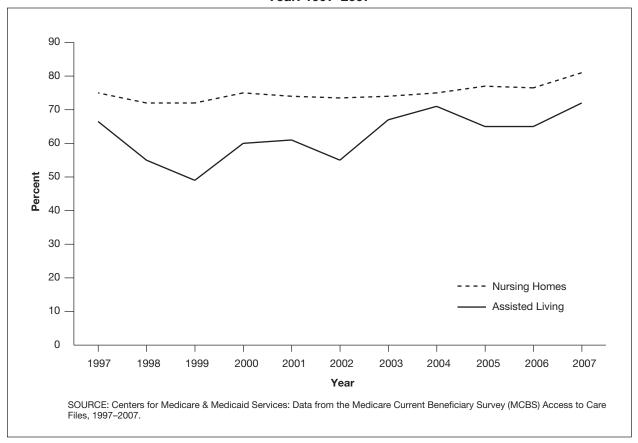
Percent of Facility Residents with at Least One of the Following Diagnoses: Alzheimer's, Anxiety, Dementia, Depression, Manic Depression, Mental Illness, Schizophrenia, by Year: 1997–2007



- The percent of the facility population with at least one of the selected diagnoses averaged 73.4 percent from 1997-2001. From 2002-2007 the percent averaged slightly higher at 75.2 percent.
- The year 2007 saw the percent reach 80 percent.

Figure 9

Percent of Facility Residents with at Least One of the Following Diagnoses: Alzheimer's, Anxiety, Dementia, Depression, Manic Depression, Mental Illness, Schizophrenia, by Facility Type, by Year: 1997–2007



- The definition of assisted living during this time varied widely from State to State. For purposes of the MCBS, facilities that are licensed as assisted living or identify themselves as assisted living are classified as assisted living.
- The percent of nursing home residents that have at least one of the selected diagnoses has seen an upward trend since 1997 and is now over 80 percent.
- Assisted living is following the trend of nursing homes with an increasing population of residents having at least one of these psychiatric related diagnoses.