

Table 6.1 Demographic and Socioeconomic Characteristics of Medicare Beneficiaries, 1992-1995 (1 of 3)

All Medicare Beneficiaries

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
All Beneficiaries (in 000s)	36,785	37,601	38,267	38,781	514	1,996
	62	25	25	117	116	121
Beneficiaries as a Percent of Column Total				Change in Proportion of Beneficiaries		
Medicare Status						
65 years and older	90.00	89.45	88.89	88.36	-0.53	-1.63
	0.10	0.09	0.08	0.14	0.14	0.17
64 years and younger	10.00	10.55	11.11	11.64	0.53	1.63
	0.10	0.09	0.08	0.14	0.14	0.17
Gender						
Male	42.92	42.81	43.21	43.35	0.14	0.43
	0.25	0.12	0.12	0.23	0.23	0.32
Female	57.08	57.19	56.79	56.65	-0.14	-0.43
	0.25	0.12	0.12	0.23	0.23	0.32
Race/Ethnicity						
White non-Hispanic	84.21	83.73	83.43	83.06	-0.37	-1.15
	0.55	0.52	0.48	0.66	0.53	0.62
All others	15.79	16.27	16.57	16.94	0.37	1.15
	0.55	0.52	0.48	0.66	0.53	0.62
Functional Limitation						
None	52.13	52.92	53.04	54.10	1.06	1.96
	0.62	0.60	0.61	0.60	0.58	0.66
IADL only ¹	21.96	21.33	21.33	20.82	-0.51	-1.14
	0.41	0.45	0.42	0.43	0.50	0.56
One to two ADLs ²	14.51	14.30	14.11	13.55	-0.56	-0.96
	0.35	0.38	0.38	0.32	0.43	0.45
Three to five ADLs	11.40	11.45	11.52	11.54	0.02	0.14
	0.33	0.30	0.32	0.30	0.35	0.32
Usual Source of Care						
No usual source of care	9.55	8.90	8.27	7.22	-1.05	-2.33
	0.35	0.34	0.29	0.37	0.33	0.41
Has usual source of care	90.45	91.10	91.73	92.78	1.05	2.33
	0.35	0.34	0.29	0.37	0.33	0.41

Table 6.1 Demographic and Socioeconomic Characteristics of Medicare Beneficiaries, 1992-1995 (2 of 3)

All Medicare Beneficiaries

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
All Beneficiaries (in 000s)	36,785	37,601	38,267	38,781	514	1,996
	62	25	25	117	116	121
Beneficiaries as a Percent of Column Total				Change in Proportion of Beneficiaries		
Living Arrangement						
Community						
Alone	27.00	23.80	22.77	28.84	6.07	1.84
	0.36	0.38	0.43	0.49	0.39	0.50
With spouse	51.17	53.12	54.00	50.06	-3.94	-1.12
	0.39	0.41	0.42	0.54	0.41	0.57
With children/others	16.74	17.83	17.81	15.78	-2.03	-0.96
	0.36	0.39	0.37	0.40	0.33	0.38
Long-Term Care Facility	5.09	5.26	5.43	5.33	-0.10	0.24
	0.18	0.19	0.21	0.17	0.20	0.21
Health Insurance						
Medicare fee for service only	11.88	12.15	12.07	11.30	-0.78	-0.58
	0.37	0.40	0.36	0.37	0.31	0.40
Medicaid	16.28	16.56	17.24	18.02	0.77	1.74
	0.45	0.46	0.41	0.46	0.33	0.43
Private health insurance	65.85	64.39	63.50	61.11	-2.39	-4.74
	0.59	0.52	0.53	0.67	0.51	0.65
Medicare HMO ³	6.31	7.28	7.59	10.10	2.51	3.80
	0.32	0.27	0.32	0.36	0.29	0.36

Table 6.1 Demographic and Socioeconomic Characteristics of Medicare Beneficiaries, 1992-1995 (3 of 3)

All Medicare Beneficiaries

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
All Beneficiaries (in 000s)	36,785	37,601	38,267	38,781	514	1,996
	<i>62</i>	<i>25</i>	<i>25</i>	<i>117</i>	<i>116</i>	<i>121</i>
	Beneficiaries as a Percent of Column Total				Change in Proportion of Beneficiaries	
Share of Income						
Lowest income quartile	6.66	6.75	7.24	6.94	-0.31	0.27
	<i>0.23</i>	<i>0.26</i>	<i>0.22</i>	<i>0.20</i>	<i>0.21</i>	<i>0.27</i>
Second income quartile	13.29	13.01	13.66	14.01	0.35	0.72
	<i>0.41</i>	<i>0.50</i>	<i>0.42</i>	<i>0.40</i>	<i>0.37</i>	<i>0.45</i>
Third income quartile	24.47	23.50	23.43	22.85	-0.57	-1.62
	<i>0.66</i>	<i>0.83</i>	<i>0.57</i>	<i>0.63</i>	<i>0.66</i>	<i>0.85</i>
Highest income quartile	55.58	56.74	55.67	56.20	0.54	0.62
	<i>1.05</i>	<i>1.45</i>	<i>0.96</i>	<i>0.94</i>	<i>0.96</i>	<i>1.29</i>

Source: Medicare Current Beneficiary Survey; CY 1992, CY 1993, CY 1994, and CY 1995 Cost and Use Public-Use Files and Access to Care Public-Use Files.

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

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

2 *ADL* stands for Activity of Daily Living.

3 *HMO* stands for Health Maintenance Organization.

Table 6.2 Personal Health Care Expenditures for Medicare Beneficiaries by Type of Medical Service, 1992-1995 (1 of 3)
(Total expenditures in millions of nominal dollars)

All Medicare Beneficiaries

Medical Service	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Total Medical Services						
All beneficiaries	\$247,037	\$273,564	\$303,683	\$333,013	\$29,330	\$85,976
	4,091	6,181	6,809	7,622	7,318	7,951
Beneficiaries 65 years and older	213,755	234,533	260,679	284,177	23,498	70,422
	3,608	4,695	6,139	7,048	6,954	7,350
Beneficiaries 64 years and younger	33,282	39,031	43,004	48,836	5,832	15,554
	2,029	2,632	2,428	2,712	2,767	2,656
Inpatient Hospital Services						
All beneficiaries	81,061	86,653	93,581	98,871	5,289	17,809
	2,145	2,418	3,620	3,929	4,637	4,413
Beneficiaries 65 years and older	71,036	76,457	82,604	86,619	4,015	15,582
	2,045	2,31	3,572	3,952	4,620	4,391
Beneficiaries 64 years and younger	10,025	10,196	10,977	12,252	1,274	2,227
	788	701	875	1,085	1,162	1,296
Outpatient Hospital Services						
All beneficiaries	19,294	20,610	23,336	27,972	4,636	8,678
	623	673	815	933	958	1,075
Beneficiaries 65 years and older	15,756	16,989	19,122	22,632	3,510	6,876
	534	579	723	793	832	899
Beneficiaries 64 years and younger	3,538	3,621	4,214	5,340	1,126	1,802
	286	268	363	440	384	494
Physician/Supplier Services						
All beneficiaries	57,367	59,484	66,017	77,135	11,119	19,769
	1,022	1,144	1,371	1,613	1,754	1,755
Beneficiaries 65 years and older	51,593	52,509	58,279	67,581	9,302	15,988
	1,010	1,076	1,323	1,584	1,627	1,674
Beneficiaries 64 years and younger	5,774	6,974	7,738	9,555	1,817	3,781
	286	361	352	593	638	656

Table 6.2 Personal Health Care Expenditures for Medicare Beneficiaries by Type of Medical Service, 1992-1995 (2 of 3)
(Total expenditures in millions of nominal dollars)

All Medicare Beneficiaries

Medical Service	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Dental Services						
All beneficiaries	\$4,882	\$5,365	\$5,716	\$6,530	\$814	\$1,648
	152	219	187	279	311	273
Beneficiaries 65 years and older	4,469	4,998	5,240	5,863	622	1,394
	138	208	191	246	287	245
Beneficiaries 64 years and younger	413	368	476	667	191	254
	51	35	58	146	147	155
Prescription Medicines						
All beneficiaries	16,231	17,718	19,252	21,599	2,347	5,369
	231	272	321	419	352	418
Beneficiaries 65 years and older	13,934	15,058	16,455	18,102	1,647	4,168
	229	251	279	366	295	342
Beneficiaries 64 years and younger	2,297	2,660	2,797	3,497	699	1,200
	102	103	105	171	167	176
Medicare Hospice Services						
All beneficiaries	868	862	1,868	1,472	-396	604
	137	142	317	255	348	291
Beneficiaries 65 years and older	831	813	1,857	1,366	-491	535
	135	138	317	251	346	288
Beneficiaries 64 years and younger	37	49	10	106	95	69
	23	23	4	53	53	58
Medicare Home Health Services						
All beneficiaries	9,189	11,610	15,767	17,604	1,837	8,415
	638	918	1,275	1,078	1,089	973
Beneficiaries 65 years and older	8,540	10,801	13,938	15,947	2,008	7,407
	611	888	963	1,011	749	917
Beneficiaries 64 years and younger	649	809	1,829	1,657	-171	1,009
	108	150	777	247	803	258

Table 6.2 Personal Health Care Expenditures for Medicare Beneficiaries by Type of Medical Service, 1992-1995 (3 of 3)
(Total expenditures in millions of nominal dollars)

All Medicare Beneficiaries

Medical Service	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Long-Term Facility Care¹						
All beneficiaries	\$58,146	\$71,262	\$78,146	\$81,829	\$3,683	\$23,684
	<i>2,909</i>	<i>4,354</i>	<i>3,987</i>	<i>3,776</i>	<i>3,091</i>	<i>3,229</i>
Beneficiaries 65 years and older	47,596	56,908	63,183	66,067	2,884	18,471
	<i>1,916</i>	<i>2,845</i>	<i>2,857</i>	<i>2,644</i>	<i>2,688</i>	<i>2,629</i>
Beneficiaries 64 years and younger	10,550	14,354	14,963	15,762	799	5,212
	<i>1,634</i>	<i>2,173</i>	<i>2,030</i>	<i>1,889</i>	<i>1,318</i>	<i>1,372</i>

Source: Medicare Current Beneficiary Survey, CY 1992, CY 1993, CY 1994, and CY 1995 Cost and Use Public-Use Files.

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

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

Table 6.3 Personal Health Care Expenditures, Share of Personal Health Care Expenditures, and Payer Sources for Medicare Beneficiaries by Type of Medical Service, 1992-1995 (1 of 6)

All Medicare Beneficiaries

Medical Service	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Total Personal Health Care Expenditures (millions of \$)	\$247,037	\$273,564	\$303,683	\$333,013	\$29,330	\$85,976
	4,091	6,181	6,809	7,622	7,318	7,951
Source of Payment (percent)						
Medicare	53.28	51.41	52.73	54.98	2.25	1.70
	0.83	0.93	1.04	0.86	0.98	0.87
Medicaid	13.99	13.96	13.66	12.40	-1.26	-1.60
	0.81	0.68	0.76	0.55	0.63	0.67
Private insurance	9.88	9.49	9.44	9.39	-0.05	-0.49
	0.38	0.40	0.30	0.24	0.28	0.38
Out of pocket	19.73	19.74	19.05	18.69	-0.35	-1.04
	0.41	0.55	0.52	0.43	0.54	0.54
Other source	3.11	5.39	5.12	4.53	-0.59	1.42
	0.26	0.66	0.56	0.39	0.53	0.42
Total Inpatient Hospital Expenditures (millions of \$)	\$81,061	\$86,653	\$93,581	\$98,871	\$5,289	\$17,809
	2,145	2,418	3,620	3,929	4,637	4,413
Percent of Total Health Care Expenditures	32.81	31.68	30.82	29.69	-1.13	-3.12
	0.66	0.73	0.87	0.76	0.92	0.85
Source of Payment (percent)						
Medicare	87.08	87.31	87.51	88.97	1.46	1.88
	0.85	1.33	0.80	0.64	0.88	1.05
Medicaid	1.44	1.51	1.56	1.17	-0.39	-0.27
	0.11	0.11	0.10	0.08	0.12	0.13
Private insurance	7.47	6.06	6.67	5.93	-0.74	-1.55
	0.79	0.45	0.59	0.41	0.65	0.85
Out of pocket	1.93	4.08	2.71	2.36	-0.35	0.43
	0.23	1.49	0.33	0.20	0.35	0.29
Other source	2.07	1.04	1.55	1.58	0.03	-0.49
	0.30	0.24	0.28	0.28	0.36	0.46

Table 6.3 Personal Health Care Expenditures, Share of Personal Health Care Expenditures, and Payer Sources for Medicare Beneficiaries by Type of Medical Service, 1992-1995 (2 of 6)

All Medicare Beneficiaries

Medical Service	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Total Personal Health Care Expenditures (millions of \$)	\$247,037	\$273,564	\$303,683	\$333,013	\$29,330	\$85,976
	4,091	6,181	6,809	7,622	7,318	7,951
Total Outpatient Hospital Expenditures (millions of \$)	\$19,294	\$20,610	\$23,336	\$27,972	\$4,636	\$8,678
	623	673	815	933	958	1,075
Percent of Total Health Care Expenditures	7.81	7.53	7.68	8.40	0.72	0.59
	0.22	0.24	0.27	0.28	0.29	0.33
Source of Payment (percent)						
Medicare	62.05	61.62	62.36	62.72	0.36	0.67
	0.77	0.74	0.84	0.92	1.12	1.06
Medicaid	3.90	4.46	4.19	3.48	-0.71	-0.42
	0.28	0.44	0.32	0.21	0.31	0.36
Private insurance	20.29	21.58	20.93	20.89	-0.04	0.60
	0.69	0.72	0.73	0.70	0.98	0.89
Out of pocket	9.63	9.49	9.48	9.30	-0.18	-0.33
	0.40	0.44	0.55	0.51	0.66	0.57
Other source	4.13	2.85	3.03	3.61	0.58	-0.52
	0.41	0.29	0.40	0.79	0.78	0.83
Total Physician/Supplier Services Expenditures (millions of \$)	\$57,367	\$59,484	\$66,017	\$77,135	\$11,119	\$19,769
	1,022	1,144	1,371	1,613	1,754	1,755
Percent of Total Health Care Expenditures	23.22	21.74	21.74	23.16	1.42	-0.06
	0.39	0.51	0.41	0.41	0.49	0.47

Table 6.3 Personal Health Care Expenditures, Share of Personal Health Care Expenditures, and Payer Sources for Medicare Beneficiaries by Type of Medical Service, 1992-1995 (3 of 6)

All Medicare Beneficiaries

Medical Service	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Total Personal Health Care Expenditures (millions of \$)	\$247,037	\$273,564	\$303,683	\$333,013	\$29,330	\$85,976
	4,091	6,181	6,809	7,622	7,318	7,951
Source of Payment (percent)						
Medicare	63.44	60.42	60.99	65.12	4.13	1.68
	0.40	0.88	0.63	0.50	0.67	0.60
Medicaid	2.86	3.87	3.59	2.35	-1.24	-0.51
	0.15	0.49	0.24	0.14	0.25	0.19
Private insurance	14.87	16.40	14.94	13.50	-1.44	-1.36
	0.35	1.00	0.37	0.35	0.40	0.44
Out of pocket	17.79	18.05	19.36	17.90	-1.47	0.11
	0.32	0.45	0.53	0.49	0.58	0.54
Other source	1.05	1.25	1.11	1.13	0.02	0.09
	0.11	0.15	0.16	0.12	0.19	0.16
Total Dental Services Expenditures (millions of \$)	\$4,882	\$5,365	\$5,716	\$6,530	\$814	\$1,648
	152	219	187	279	311	273
Percent of Total Health Care Expenditures	1.98	1.96	1.88	1.96	0.08	-0.02
	0.07	0.08	0.07	0.09	0.09	0.09
Source of Payment (percent)						
Medicare	0.11	0.09	0.12	0.79	0.67	0.68
	0.03	0.03	0.05	0.05	0.07	0.06
Medicaid	2.18	1.65	1.89	0.72	-1.17	-1.46
	0.24	0.20	0.22	0.12	0.24	0.27
Private insurance	11.87	15.12	14.27	15.28	1.01	3.40
	0.64	1.17	0.97	1.08	1.32	1.16
Out of pocket	82.92	81.57	81.89	81.74	-0.15	-1.18
	0.82	1.16	0.98	1.12	1.36	1.29
Other source	2.92	1.57	1.83	1.47	-0.36	-1.45
	0.50	0.30	0.30	0.32	0.40	0.56

Table 6.3 Personal Health Care Expenditures, Share of Personal Health Care Expenditures, and Payer Sources for Medicare Beneficiaries by Type of Medical Service, 1992-1995 (4 of 6)

All Medicare Beneficiaries

Medical Service	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Total Personal Health Care Expenditures (millions of \$)	\$247,037	\$273,564	\$303,683	\$333,013	\$29,330	\$85,976
	4,091	6,181	6,809	7,622	7,318	7,951
Total Prescription Medicine Expenditures (millions of \$)	\$16,231	\$17,718	\$19,252	\$21,599	\$2,347	\$5,369
	231	272	321	419	352	418
Percent of Total Health Care Expenditures	6.57	6.48	6.34	6.49	0.15	-0.08
	0.13	0.19	0.16	0.17	0.16	0.19
Source of Payment (percent)						
Medicare	0.32	0.29	0.08	2.85	2.78	2.53
	0.06	0.12	0.02	0.11	0.11	0.13
Medicaid	10.25	11.69	12.14	10.95	-1.18	0.71
	0.39	0.57	0.62	0.72	0.54	0.68
Private insurance	25.45	25.55	27.54	29.47	1.93	4.03
	0.69	0.69	0.73	0.79	0.85	0.84
Out of pocket	57.48	54.88	52.06	49.33	-2.73	-8.15
	0.71	0.72	0.73	0.91	0.88	0.95
Other source	6.51	7.58	8.19	7.39	-0.79	0.88
	0.44	0.46	0.51	0.43	0.49	0.47
Total Hospice Services Expenditures (millions of \$)	\$868	\$862	\$1,868	\$1,472	-\$396	\$604
	137	142	317	255	348	291
Percent of Total Health Care Expenditures	0.35	0.32	0.61	0.44	-0.17	0.09
	0.06	0.05	0.11	0.08	0.11	0.10

Table 6.3 Personal Health Care Expenditures, Share of Personal Health Care Expenditures, and Payer Sources for Medicare Beneficiaries by Type of Medical Service, 1992-1995 (5 of 6)

All Medicare Beneficiaries

Medical Service	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Total Personal Health Care Expenditures (millions of \$)	\$247,037	\$273,564	\$303,683	\$333,013	\$29,330	\$85,976
	4,091	6,181	6,809	7,622	7,318	7,951
Source of Payment (percent)						
Medicare	99.98	100.00	100.00	100.00	0.00	0.02
	0.02	0.00	0.00	0.00	0.00	0.02
Medicaid	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00
Private insurance	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00
Out of pocket	0.02	0.00	0.00	0.00	0.00	-0.02
	0.02	0.00	0.00	0.00	0.00	0.02
Other source	0.00	0.00	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00	0.00	0.00
Total Home Health Services Expenditures (millions of \$)	\$9,189	\$11,610	\$15,767	\$17,604	\$1,837	\$8,415
	638	918	1,275	1,078	1,089	973
Percent of Total Health Care Expenditures	3.72	4.24	5.19	5.29	0.09	1.57
	0.24	0.30	0.38	0.28	0.33	0.27
Source of Payment (percent)						
Medicare	89.94	88.04	86.20	92.68	6.48	2.74
	1.90	4.67	5.15	2.35	4.25	2.58
Medicaid	0.96	1.12	5.17	0.37	-4.79	-0.59
	0.32	0.50	4.53	0.16	4.54	0.32
Private insurance	1.19	1.19	0.85	0.54	-0.31	-0.65
	0.67	0.61	0.30	0.16	0.28	0.67
Out of pocket	5.82	8.90	7.07	5.87	-1.21	0.04
	1.49	4.77	3.28	2.37	1.28	2.53
Other source	2.08	0.75	0.71	0.54	-0.17	-1.54
	1.15	0.17	0.19	0.25	0.24	1.18

Table 6.3 Personal Health Care Expenditures, Share of Personal Health Care Expenditures, and Payer Sources for Medicare Beneficiaries by Type of Medical Service, 1992-1995 (6 of 6)

All Medicare Beneficiaries

Medical Service	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Total Personal Health Care Expenditures (millions of \$)	\$247,037	\$273,564	\$303,683	\$333,013	\$29,330	\$85,976
	<i>4,091</i>	<i>6,181</i>	<i>6,809</i>	<i>7,622</i>	<i>7,318</i>	<i>7,951</i>
Total Long-Term Facility Care¹ Expenditures (millions of \$)	\$58,146	\$71,262	\$78,146	\$81,829	\$3,683	\$23,684
	<i>2,909</i>	<i>4,354</i>	<i>3,987</i>	<i>3,776</i>	<i>3,091</i>	<i>3,229</i>
Percent of Total Health Care Expenditures	23.54	26.05	25.73	24.57	-1.16	1.04
	<i>1.03</i>	<i>1.16</i>	<i>1.03</i>	<i>0.90</i>	<i>0.89</i>	<i>0.95</i>
Source of Payment (percent)						
Medicare	6.00	7.31	10.18	10.89	0.71	4.89
	<i>0.47</i>	<i>0.65</i>	<i>0.80</i>	<i>0.75</i>	<i>0.90</i>	<i>0.74</i>
Medicaid	50.14	44.04	42.75	42.61	-0.14	-7.53
	<i>2.02</i>	<i>1.79</i>	<i>1.75</i>	<i>1.34</i>	<i>1.64</i>	<i>2.00</i>
Private insurance	1.87	1.44	1.83	2.09	0.26	0.21
	<i>0.30</i>	<i>0.24</i>	<i>0.24</i>	<i>0.26</i>	<i>0.36</i>	<i>0.36</i>
Out of pocket	36.46	31.78	31.34	32.36	1.02	-4.10
	<i>1.73</i>	<i>1.78</i>	<i>1.50</i>	<i>1.23</i>	<i>1.33</i>	<i>1.55</i>
Other source	5.53	15.44	13.90	12.05	-1.85	6.52
	<i>0.90</i>	<i>2.15</i>	<i>1.79</i>	<i>1.28</i>	<i>1.79</i>	<i>1.30</i>

Source: Medicare Current Beneficiary Survey, CY 1992, CY 1993, CY 1994, and CY 1995 Cost and Use Public-Use Files.

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

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

Table 6.4 Personal Health Care Expenditures for Medicare Beneficiaries by Demographic and Socioeconomic Characteristics, 1992-1995 (1 of 3)

All Medicare Beneficiaries

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Personal Health Care						
Expenditures (millions of \$)	\$247,037	\$273,564	\$303,683	\$333,013	\$29,330	\$85,976
	4,091	6,181	6,809	7,622	7,318	7,951
	Percent of Personal Health Care Expenditures ¹				Change in Proportion	
Medicare Status						
65 years and older	86.53	85.73	85.84	85.34	-0.50	-1.19
	0.74	0.77	0.72	0.75	0.82	0.83
64 years and younger	13.47	14.27	14.16	14.66	0.50	1.19
	0.74	0.77	0.72	0.75	0.82	0.83
Race/Ethnicity						
White non-Hispanic	84.51	82.77	83.05	82.55	-0.50	-1.96
	0.87	1.03	0.77	0.93	0.97	1.18
All others	15.49	17.23	16.95	17.45	0.50	1.96
	0.87	1.03	0.77	0.93	0.97	1.18
Living Arrangement						
Community						
Alone	22.18	20.24	18.19	24.78	6.59	2.60
	0.69	0.77	0.76	0.94	1.05	1.10
With spouse	38.02	37.58	39.72	35.13	-4.59	-2.89
	0.98	1.04	1.12	0.93	1.18	1.17
With children/others	16.45	16.61	17.33	16.38	-0.95	-0.07
	0.90	0.81	0.81	0.77	0.92	0.97
Long-Term Care Facility	23.35	25.57	24.76	23.70	-1.06	0.35
	1.06	1.21	1.17	0.97	1.00	0.96

Table 6.4 Personal Health Care Expenditures for Medicare Beneficiaries by Demographic and Socioeconomic Characteristics, 1992-1995 (2 of 3)

All Medicare Beneficiaries

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Personal Health Care						
Expenditures (millions of \$)	\$247,037	\$273,564	\$303,683	\$333,013	\$29,330	\$85,976
	4,091	6,181	6,809	7,622	7,318	7,951
	Percent of Personal Health Care Expenditures ¹				Change in Proportion	
Functional Limitation						
None	25.85	25.02	23.70	26.19	2.49	0.34
	0.85	0.90	0.80	0.83	0.99	1.07
IADL only ²	20.09	20.75	19.87	19.47	-0.40	-0.62
	0.87	0.87	0.84	0.88	1.03	1.34
One to two ADLs ³	20.23	19.40	19.49	18.16	-1.33	-2.07
	0.79	0.89	0.78	0.64	0.92	1.11
Three to five ADLs	33.83	34.83	36.94	36.19	-0.75	2.35
	0.99	1.00	1.21	1.15	1.27	1.32
Health Insurance⁴						
Medicare fee for service only	9.16	9.99	10.23	9.17	-1.07	0.00
	0.57	0.75	0.79	0.64	0.80	0.76
Medicaid	33.89	35.87	35.78	35.46	-0.32	1.57
	1.22	1.27	1.22	1.03	1.25	1.38
Private health insurance	51.90	49.38	49.87	48.72	-1.15	-3.18
	1.24	1.21	1.24	1.21	1.25	1.43

Table 6.4 Personal Health Care Expenditures for Medicare Beneficiaries by Demographic and Socioeconomic Characteristics, 1992-1995 (3 of 3)

All Medicare Beneficiaries

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Personal Health Care						
Expenditures (millions of \$)	\$247,037	\$273,564	\$303,683	\$333,013	\$29,330	\$85,976
	<i>4,091</i>	<i>6,181</i>	<i>6,809</i>	<i>7,622</i>	<i>7,318</i>	<i>7,951</i>
	Percent of Personal Health Care Expenditures¹				Change in Proportion	
Income						
Lowest income quartile	32.60	35.58	35.96	33.72	-2.24	1.13
	<i>0.98</i>	<i>1.17</i>	<i>1.09</i>	<i>0.91</i>	<i>1.27</i>	<i>1.19</i>
Second income quartile	26.57	25.38	25.37	27.51	2.14	0.94
	<i>0.85</i>	<i>0.91</i>	<i>0.80</i>	<i>1.10</i>	<i>1.28</i>	<i>1.33</i>
Third income quartile	22.47	21.30	20.75	19.54	-1.22	-2.93
	<i>0.76</i>	<i>0.67</i>	<i>0.81</i>	<i>0.95</i>	<i>1.10</i>	<i>1.05</i>
Highest income quartile	18.36	17.74	17.92	19.23	1.31	0.87
	<i>0.81</i>	<i>0.74</i>	<i>0.76</i>	<i>0.77</i>	<i>0.94</i>	<i>1.03</i>

Source: Medicare Current Beneficiary Survey, CY 1992, CY 1993, CY 1994, and CY 1995 Cost and Use Public-Use Files.

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

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

Table 6.5 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (1 of 2)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Total Inpatient Hospital Expenditures (millions of \$)	\$72,063	\$73,246	\$79,268	\$81,969	\$2,701	\$9,906
	2,095	2,428	3,329	3,419	4,245	4,108
Percent of Total Inpatient Hospital Expenditures²					Change in Proportion	
Medicare Status						
65 years and older	86.92	88.05	87.89	87.10	-0.80	0.18
	1.01	0.84	1.03	1.23	1.34	1.54
64 years and younger	13.08	11.95	12.11	12.90	0.80	-0.18
	1.01	0.84	1.03	1.23	1.34	1.54
Race/Ethnicity						
White non-Hispanic	82.19	79.98	81.56	80.10	-1.46	-2.09
	1.59	2.28	1.42	1.71	2.05	2.22
All others	17.81	20.02	18.44	19.90	1.46	2.09
	1.59	2.28	1.42	1.71	2.05	2.22
Functional Limitation						
None	30.60	34.21	30.47	34.59	4.12	3.98
	1.43	1.87	1.73	1.86	2.42	2.45
IADL only ³	26.22	29.49	27.06	28.27	1.22	2.06
	1.59	1.86	1.64	1.87	2.40	2.64
One to two ADLs ⁴	23.33	19.46	19.22	18.57	-0.64	-4.76
	1.49	1.88	1.37	1.33	1.74	2.00
Three to five ADLs	19.84	16.84	23.26	18.57	-4.69	-1.28
	1.39	1.30	2.25	1.71	2.56	2.16

Table 6.5 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (2 of 2)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Total Inpatient Hospital Expenditures (millions of \$)	\$72,063 <i>2,095</i>	\$73,246 <i>2,428</i>	\$79,268 <i>3,329</i>	\$81,969 <i>3,419</i>	\$2,701 <i>4,245</i>	\$9,906 <i>4,108</i>
Percent of Total Inpatient Hospital Expenditures²				Change in Proportion		
Health Insurance⁵						
Medicare fee for service only	9.26 <i>0.96</i>	9.35 <i>1.14</i>	10.87 <i>1.83</i>	9.80 <i>1.14</i>	-1.07 <i>2.01</i>	0.54 <i>1.15</i>
Medicaid	19.67 <i>1.58</i>	19.52 <i>2.17</i>	19.21 <i>1.46</i>	18.72 <i>1.39</i>	-0.49 <i>1.72</i>	-0.95 <i>2.08</i>
Private health insurance	62.81 <i>1.89</i>	61.36 <i>2.15</i>	61.82 <i>2.05</i>	61.41 <i>2.02</i>	-0.41 <i>2.37</i>	-1.40 <i>2.73</i>
Income						
Lowest income quartile	26.54 <i>1.52</i>	29.03 <i>1.97</i>	29.83 <i>2.47</i>	28.48 <i>1.80</i>	-1.35 <i>2.60</i>	1.94 <i>2.39</i>
Second income quartile	29.87 <i>1.59</i>	26.90 <i>1.95</i>	26.42 <i>1.86</i>	28.01 <i>2.30</i>	1.59 <i>3.15</i>	-1.87 <i>2.78</i>
Third income quartile	22.35 <i>1.37</i>	23.34 <i>1.49</i>	24.22 <i>1.77</i>	23.05 <i>1.72</i>	-1.17 <i>2.43</i>	0.70 <i>2.16</i>
Highest income quartile	21.24 <i>1.63</i>	20.72 <i>1.45</i>	19.53 <i>1.45</i>	20.46 <i>1.69</i>	0.93 <i>2.05</i>	-0.78 <i>2.21</i>

Source: Medicare Current Beneficiary Survey, CY 1992, CY 1993, CY 1994, and CY 1995 Cost and Use Public-Use Files.

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

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

Table 6.6 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (1 of 2)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Total Outpatient Hospital Expenditures (millions of \$)	\$17,324	\$18,164	\$20,401	\$23,833	\$3,432	\$6,509
	628	623	737	841	890	1,005
Percent of Total Outpatient Hospital Expenditures²					Change in Proportion	
Medicare Status						
65 years and older	81.80	82.20	82.38	80.92	-1.46	-0.88
	1.32	1.19	1.39	1.44	1.41	1.86
64 years and younger	18.20	17.80	17.62	19.08	1.46	0.88
	1.32	1.19	1.39	1.44	1.41	1.86
Race/Ethnicity						
White non-Hispanic	79.39	78.62	79.03	76.04	-2.99	-3.35
	1.86	2.10	2.11	1.65	1.83	2.09
All others	20.61	21.38	20.97	23.96	2.99	3.35
	1.86	2.10	2.11	1.65	1.83	2.09
Functional Limitation						
None	41.71	42.87	42.34	43.73	1.40	2.02
	1.86	1.69	2.11	1.83	2.20	2.45
IADL only ³	27.74	27.36	28.32	28.57	0.25	0.83
	1.72	1.72	2.00	1.89	2.55	2.57
One to two ADLs ⁴	19.30	17.05	17.61	16.04	-1.57	-3.26
	1.48	1.22	1.17	1.18	1.55	1.83
Three to five ADLs	11.25	12.72	11.73	11.66	-0.07	0.41
	1.22	1.74	1.96	1.57	1.89	1.76

Table 6.6 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (2 of 2)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Total Outpatient Hospital Expenditures (millions of \$)	\$17,324	\$18,164	\$20,401	\$23,833	\$3,432	\$6,509
	<i>628</i>	<i>623</i>	<i>737</i>	<i>841</i>	<i>890</i>	<i>1,005</i>
Percent of Total Outpatient Hospital Expenditures²					Change in Proportion	
Health Insurance⁵						
Medicare fee for service only	9.06	7.79	9.22	9.29	0.07	0.23
	<i>0.83</i>	<i>0.61</i>	<i>0.89</i>	<i>1.34</i>	<i>1.38</i>	<i>1.46</i>
Medicaid	19.50	18.68	21.20	20.34	-0.86	0.84
	<i>1.76</i>	<i>1.62</i>	<i>2.13</i>	<i>1.71</i>	<i>2.08</i>	<i>2.31</i>
Private health insurance	64.90	67.70	63.49	61.34	-2.15	-3.57
	<i>1.95</i>	<i>1.76</i>	<i>2.13</i>	<i>1.63</i>	<i>2.09</i>	<i>2.35</i>
Income						
Lowest income quartile	24.72	26.11	27.01	24.40	-2.60	-0.32
	<i>1.63</i>	<i>1.67</i>	<i>1.98</i>	<i>1.40</i>	<i>2.21</i>	<i>2.02</i>
Second income quartile	27.59	25.27	24.27	26.97	2.70	-0.62
	<i>1.86</i>	<i>1.76</i>	<i>1.79</i>	<i>1.81</i>	<i>2.21</i>	<i>2.42</i>
Third income quartile	24.83	23.90	24.52	22.75	-1.76	-2.08
	<i>1.55</i>	<i>1.35</i>	<i>1.42</i>	<i>1.40</i>	<i>1.86</i>	<i>1.86</i>
Highest income quartile	22.86	24.73	24.20	25.87	1.67	3.01
	<i>1.31</i>	<i>1.54</i>	<i>1.37</i>	<i>1.76</i>	<i>2.07</i>	<i>2.03</i>

Source: Medicare Current Beneficiary Survey, CY 1992, CY 1993, CY 1994, and CY 1995 Cost and Use Public-Use Files.

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

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

Table 6.7 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (1 of 2)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Total Physician/Supplier Expenditures (millions of \$)	\$52,350	\$53,003	\$58,424	\$68,185	\$9,762	\$15,835
	1,018	1,097	1,287	1,514	1,796	1,769
Percent of Total Physician/Supplier Services Expenditures²					Change in Proportion	
Medicare Status						
65 years and older	89.68	88.06	88.26	87.35	-0.91	-2.33
	0.53	0.64	0.58	0.79	0.81	0.92
64 years and younger	10.32	11.94	11.74	12.65	0.91	2.33
	0.53	0.64	0.58	0.79	0.81	0.92
Race/Ethnicity						
White non-Hispanic	83.90	83.23	82.70	81.78	-0.92	-2.12
	0.86	0.97	0.89	1.22	1.38	1.38
All others	16.10	16.77	17.30	18.22	0.92	2.12
	0.86	0.97	0.89	1.22	1.38	1.38
Functional Limitation						
None	40.49	39.49	38.29	43.40	5.12	2.91
	1.15	1.35	1.26	1.15	1.43	1.48
IADL only ³	26.19	26.43	25.41	24.78	-1.64	-1.42
	1.05	1.04	0.98	0.97	1.28	1.48
One to two ADLs ⁴	19.31	18.86	19.27	17.40	-1.87	-1.91
	0.94	1.39	1.09	0.90	1.37	1.26
Three to five ADLs	14.01	15.22	17.03	14.42	-2.61	0.42
	0.87	0.98	1.12	0.92	1.30	1.08

Table 6.7 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (2 of 2)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Total Physician/Supplier Expenditures (millions of \$)	\$52,350	\$53,003	\$58,424	\$68,185	\$9,762	\$15,835
	<i>1.018</i>	<i>1.097</i>	<i>1.287</i>	<i>1.514</i>	<i>1.796</i>	<i>1.769</i>
Percent of Total Physician/Supplier Services Expenditures²					Change in Proportion	
Health Insurance⁵						
Medicare fee for service only	6.90	7.76	8.76	8.12	-0.63	1.22
	<i>0.41</i>	<i>0.49</i>	<i>0.71</i>	<i>0.84</i>	<i>0.93</i>	<i>0.77</i>
Medicaid	15.66	15.93	16.52	15.32	-1.20	-0.34
	<i>0.85</i>	<i>0.98</i>	<i>0.87</i>	<i>0.77</i>	<i>0.93</i>	<i>1.04</i>
Private health insurance	71.57	74.13	72.74	66.30	-6.44	-5.27
	<i>1.01</i>	<i>1.17</i>	<i>1.13</i>	<i>1.35</i>	<i>1.38</i>	<i>1.47</i>
Income						
Lowest income quartile	22.57	24.01	26.69	26.64	-2.06	2.06
	<i>0.92</i>	<i>0.94</i>	<i>1.11</i>	<i>1.20</i>	<i>1.45</i>	<i>1.47</i>
Second income quartile	27.53	25.63	25.41	25.91	0.50	-1.62
	<i>0.96</i>	<i>1.27</i>	<i>1.01</i>	<i>1.09</i>	<i>1.30</i>	<i>1.32</i>
Third income quartile	24.59	25.23	23.49	24.26	0.77	-0.33
	<i>0.84</i>	<i>1.22</i>	<i>0.78</i>	<i>1.03</i>	<i>1.14</i>	<i>1.18</i>
Highest income quartile	25.31	25.14	24.40	25.19	0.79	-0.12
	<i>1.00</i>	<i>0.96</i>	<i>0.96</i>	<i>1.01</i>	<i>1.22</i>	<i>1.19</i>

Source: Medicare Current Beneficiary Survey, CY 1992, CY 1993, CY 1994, and CY 1995 Cost and Use Public-Use Files.

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

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

Table 6.8 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 1 of 2)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Total Prescription Medicine Expenditures (millions of \$)	\$16,070	\$17,507	\$19,039	\$21,325	\$2,286	\$5,256
	228	277	318	412	344	413
Percent of Total Prescription Medicine Expenditures²					Change in Proportion	
Medicare Status						
65 years and older	85.74	84.87	85.46	83.71	-1.75	-2.02
	0.62	0.55	0.47	0.70	0.70	0.75
64 years and younger	14.26	15.13	14.54	16.29	1.75	2.02
	0.62	0.55	0.47	0.70	0.70	0.75
Race/Ethnicity						
White non-Hispanic	86.25	85.01	84.55	84.13	-0.42	-2.12
	0.58	0.61	0.54	1.18	1.07	1.13
All others	13.75	14.99	15.45	15.87	0.42	2.12
	0.58	0.61	0.54	1.18	1.07	1.13
Functional Limitation						
None	41.04	41.25	42.88	44.01	1.13	2.98
	0.93	1.01	1.06	0.92	1.14	1.15
IADL only ³	28.19	27.00	27.02	25.36	-1.65	-2.83
	0.75	0.73	0.83	0.72	1.08	1.08
One to two ADLs ⁴	18.76	19.83	18.16	17.81	-0.35	-0.96
	0.66	0.85	0.78	0.73	0.89	0.91
Three to five ADLs	12.01	11.93	11.94	12.82	0.87	0.81
	0.61	0.68	0.70	0.87	0.93	1.01

Table 6.8 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (2 of 2)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Total Prescription Medicine Expenditures (millions of \$)	\$16,070	\$17,507	\$19,039	\$21,325	\$2,286	\$5,256
	<i>228</i>	<i>277</i>	<i>318</i>	<i>412</i>	<i>344</i>	<i>413</i>
Percent of Total Prescription Medicine Expenditures²					Change in Proportion	
Health Insurance⁵						
Medicare fee for service only	8.62	8.83	8.63	8.04	-0.59	-0.58
	<i>0.46</i>	<i>0.45</i>	<i>0.53</i>	<i>0.51</i>	<i>0.55</i>	<i>0.71</i>
Medicaid	14.75	15.99	16.92	16.25	-0.68	1.50
	<i>0.59</i>	<i>0.73</i>	<i>0.68</i>	<i>0.90</i>	<i>0.71</i>	<i>0.92</i>
Private health insurance	72.75	70.62	69.39	67.31	-2.08	-5.44
	<i>0.73</i>	<i>0.78</i>	<i>0.92</i>	<i>0.98</i>	<i>0.93</i>	<i>0.98</i>
Income						
Lowest income quartile	23.47	25.24	25.37	24.43	-0.95	0.96
	<i>0.73</i>	<i>0.75</i>	<i>0.69</i>	<i>0.97</i>	<i>1.05</i>	<i>1.07</i>
Second income quartile	25.64	23.51	26.12	23.98	-2.15	-1.67
	<i>0.75</i>	<i>0.66</i>	<i>0.71</i>	<i>0.75</i>	<i>0.85</i>	<i>0.91</i>
Third income quartile	26.64	26.18	24.15	26.30	2.16	-0.34
	<i>0.80</i>	<i>0.77</i>	<i>0.71</i>	<i>0.94</i>	<i>1.04</i>	<i>1.08</i>
Highest income quartile	24.25	25.07	24.36	25.30	0.94	1.05
	<i>0.78</i>	<i>0.75</i>	<i>0.80</i>	<i>0.92</i>	<i>1.02</i>	<i>0.96</i>

Source: Medicare Current Beneficiary Survey, CY 1992, CY 1993, CY 1994, and CY 1995 Cost and Use Public-Use Files.

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

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

Table 6.9 Long-Term Facility Care Expenditures for Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (1 of 2)

Long-Term Care Facility Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Total Long-Term Facility Care Expenditures (millions of \$)	\$56,280	\$69,138	\$74,031	\$77,664	\$3,633	\$21,384
	2,903	4,320	3,997	3,775	3,108	3,263
Percent of Total Long-Term Facility Care Expenditures²					Change in Proportion	
Medicare Status						
65 years and older	81.65	79.45	80.11	80.04	-0.07	-1.61
	2.22	2.22	2.09	1.80	1.53	1.69
64 years and younger	18.35	20.55	19.89	19.96	0.07	1.61
	2.22	2.22	2.09	1.80	1.53	1.69
Race/Ethnicity						
White non-Hispanic	89.45	86.94	87.82	87.26	-0.56	-2.19
	1.28	1.35	1.26	1.20	1.45	1.49
All others	10.55	13.06	12.18	12.74	0.56	2.19
	1.28	1.35	1.26	1.20	1.45	1.49
Functional Limitation						
None	2.52	0.59	1.15	0.55	-0.60	-1.97
	0.67	0.24	0.32	0.18	0.37	0.70
IADL only ³	7.05	8.72	6.73	7.01	0.28	-0.04
	1.28	1.22	0.93	0.97	1.20	1.38
One to two ADLs ⁴	17.89	19.59	21.43	18.81	-2.62	0.92
	1.49	1.49	1.64	1.30	1.97	2.06
Three to five ADLs	72.54	71.10	70.69	73.63	2.94	1.09
	1.97	1.59	1.80	1.51	2.06	2.16

Table 6.9 Long-Term Facility Care Expenditures for Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (2 of 2)

Long-Term Care Facility Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Total Long-Term Facility Care Expenditures (millions of \$)	\$56,280	\$69,138	\$74,031	\$77,664	\$3,633	\$21,384
	<i>2,903</i>	<i>4,320</i>	<i>3,997</i>	<i>3,775</i>	<i>3,108</i>	<i>3,263</i>
Percent of Total Long-Term Facility Care Expenditures²					Change in Proportion	
Health Insurance⁵						
Medicare fee for service only	11.51	14.04	13.38	10.19	-3.19	-1.32
	<i>1.27</i>	<i>1.85</i>	<i>1.43</i>	<i>1.46</i>	<i>1.26</i>	<i>1.94</i>
Medicaid	73.73	72.46	71.24	72.73	1.49	-0.99
	<i>1.97</i>	<i>2.27</i>	<i>1.80</i>	<i>1.60</i>	<i>1.75</i>	<i>2.45</i>
Private health insurance	14.65	12.70	15.28	16.50	1.22	1.85
	<i>1.40</i>	<i>1.21</i>	<i>1.29</i>	<i>1.39</i>	<i>1.50</i>	<i>1.77</i>
Income						
Lowest income quartile	56.09	60.76	56.38	55.62	-0.76	-0.47
	<i>1.96</i>	<i>2.16</i>	<i>2.13</i>	<i>1.77</i>	<i>2.16</i>	<i>2.43</i>
Second income quartile	23.17	21.07	23.41	25.30	1.88	2.13
	<i>1.58</i>	<i>1.28</i>	<i>1.39</i>	<i>1.51</i>	<i>1.92</i>	<i>2.16</i>
Third income quartile	13.26	11.27	12.47	10.42	-2.06	-2.85
	<i>1.21</i>	<i>1.23</i>	<i>1.15</i>	<i>1.08</i>	<i>1.61</i>	<i>1.52</i>
Highest income quartile	7.49	6.89	7.73	8.67	0.93	1.18
	<i>1.14</i>	<i>1.02</i>	<i>1.00</i>	<i>1.08</i>	<i>1.34</i>	<i>1.50</i>

Source: Medicare Current Beneficiary Survey, CY 1992, CY 1993, CY 1994, and CY 1995 Cost and Use Public-Use Files.

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

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

Table 6.10 Inpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (1 of 2)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Percent of Beneficiaries with at Least One Inpatient Hospital Stay				Change in Proportion		
All Beneficiaries	17.94	17.80	18.27	18.21	-0.06	0.27
	0.33	0.15	0.46	0.41	0.53	0.53
Medicare Status						
65 years and older	17.70	17.50	18.14	17.89	-0.25	0.19
	0.37	0.16	0.49	0.44	0.60	0.56
64 years and younger	20.15	20.43	19.31	20.66	1.34	0.50
	0.93	0.62	1.13	1.11	1.30	1.43
Race/Ethnicity						
White non-Hispanic	18.07	17.89	18.10	17.92	-0.18	-0.15
	0.36	0.20	0.45	0.45	0.56	0.56
All others	17.39	17.39	18.73	19.76	1.03	2.37
	0.98	0.79	1.10	0.86	1.18	1.18
Functional Limitation						
None	11.28	11.48	11.27	11.93	0.65	0.64
	0.39	0.35	0.46	0.44	0.56	0.61
IADL only ²	22.36	22.38	23.47	21.93	-1.53	-0.43
	0.82	0.67	0.92	0.95	1.18	1.39
One to two ADLs ³	27.46	26.29	25.29	27.07	1.78	-0.40
	1.15	1.13	1.28	1.25	1.88	1.52
Three to five ADLs	35.75	36.38	43.68	41.11	-2.57	5.36
	1.40	1.51	1.89	1.90	2.45	2.52
Health Insurance						
Medicare fee for service only	16.85	16.01	16.39	16.00	-0.39	-0.85
	1.06	1.02	1.07	1.22	1.52	1.41
Medicaid	24.67	23.51	25.41	24.77	-0.64	0.10
	1.28	0.97	1.09	1.09	1.43	1.48
Private health insurance	17.06	17.44	17.64	17.62	-0.02	0.56
	0.42	0.30	0.51	0.54	0.60	0.72
Medicare HMO ⁴	16.23	14.09	14.05	15.33	1.29	-0.89
	1.38	1.45	1.67	1.17	1.71	1.77

Table 6.10 Inpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (2 of 2)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Percent of Beneficiaries with at Least One Inpatient Hospital Stay					Change in Proportion	
All Beneficiaries	17.94	17.80	18.27	18.21	-0.06	0.27
	<i>0.33</i>	<i>0.15</i>	<i>0.46</i>	<i>0.41</i>	<i>0.53</i>	<i>0.53</i>
Income						
Lowest income quartile	18.78	19.80	21.61	21.25	-0.36	2.48
	<i>0.67</i>	<i>0.69</i>	<i>0.85</i>	<i>0.74</i>	<i>1.12</i>	<i>0.98</i>
Second income quartile	20.95	19.05	19.53	19.29	-0.23	-1.66
	<i>0.88</i>	<i>0.74</i>	<i>0.93</i>	<i>0.80</i>	<i>1.09</i>	<i>1.19</i>
Third income quartile	16.47	17.58	16.72	17.65	0.93	1.18
	<i>0.64</i>	<i>0.68</i>	<i>0.78</i>	<i>0.79</i>	<i>1.03</i>	<i>0.96</i>
Highest income quartile	15.40	14.78	15.13	14.63	-0.49	-0.77
	<i>0.59</i>	<i>0.69</i>	<i>0.83</i>	<i>0.74</i>	<i>0.93</i>	<i>1.03</i>

Source: Medicare Current Beneficiary Survey; CY 1992, CY 1993, CY 1994, and CY 1995 Cost and Use Public-Use Files.

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

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

Table 6.11 Outpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (1 of 2)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Percent of Beneficiaries with at Least One Outpatient Hospital Visit						
					Change in Proportion	
All Beneficiaries	57.90	58.66	60.89	63.21	2.32	5.30
	0.77	0.68	0.61	0.60	0.69	0.78
Medicare Status						
65 years and older	57.40	58.05	60.42	62.83	2.41	5.43
	0.81	0.71	0.65	0.66	0.78	0.81
64 years and younger	62.48	63.96	64.68	66.10	1.42	3.62
	1.30	1.18	1.32	1.24	1.73	1.79
Race/Ethnicity						
White non-Hispanic	57.81	58.24	61.33	63.44	2.11	5.62
	0.86	0.75	0.66	0.69	0.79	0.85
All others	58.28	60.71	58.55	61.99	3.43	3.71
	1.32	1.43	1.20	1.17	1.48	1.76
Functional Limitation						
None	52.23	52.93	55.74	58.60	2.86	6.37
	0.88	0.89	0.71	0.89	1.02	1.05
IADL only ²	62.52	64.06	65.84	67.60	1.75	5.07
	1.15	1.15	1.09	1.00	1.39	1.48
One to two ADLs ³	66.13	66.74	68.84	69.69	0.85	3.56
	1.22	1.53	1.43	1.37	1.78	1.62
Three to five ADLs	70.31	71.56	71.00	75.34	4.35	5.03
	1.50	1.99	1.80	1.57	2.25	2.00
Health Insurance						
Medicare fee for service only	50.58	51.63	51.94	54.51	2.57	3.93
	1.53	1.69	1.32	1.77	2.18	2.35
Medicaid	65.89	67.83	68.27	69.00	0.73	3.11
	1.54	1.31	1.21	1.19	1.63	1.81
Private health insurance	57.77	58.78	61.09	64.60	3.50	6.83
	0.92	0.85	0.78	0.77	0.86	0.98
Medicare HMO ⁴	57.05	53.04	59.94	56.16	-3.78	-0.89
	2.14	2.20	2.08	1.79	2.14	2.28

Table 6.11 Outpatient Hospital User Rates for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (2 of 2)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Percent of Beneficiaries with at Least One Outpatient Hospital Visit				Change in Proportion		
All Beneficiaries	57.90	58.66	60.89	63.21	2.32	5.30
	<i>0.77</i>	<i>0.68</i>	<i>0.61</i>	<i>0.60</i>	<i>0.69</i>	<i>0.78</i>
Income						
Lowest income quartile	56.64	59.70	59.80	62.29	2.48	5.65
	<i>1.12</i>	<i>1.06</i>	<i>0.98</i>	<i>0.95</i>	<i>1.34</i>	<i>1.40</i>
Second income quartile	59.64	58.16	62.90	63.71	0.81	4.08
	<i>1.15</i>	<i>1.31</i>	<i>1.25</i>	<i>1.14</i>	<i>1.31</i>	<i>1.50</i>
Third income quartile	56.78	57.56	60.10	63.29	3.18	6.51
	<i>1.32</i>	<i>1.25</i>	<i>1.11</i>	<i>1.10</i>	<i>1.45</i>	<i>1.65</i>
Highest income quartile	58.54	59.23	60.71	63.55	2.83	5.00
	<i>1.28</i>	<i>1.17</i>	<i>1.14</i>	<i>1.25</i>	<i>1.54</i>	<i>1.79</i>

Source: Medicare Current Beneficiary Survey; CY 1992, CY 1993, CY 1994, and CY 1995 Cost and Use Public-Use Files.

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

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

Table 6.12 Physician/Supplier Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (1 of 2)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
	Percent of Beneficiaries with at Least One Physician/Supplier Service				Change in Proportion	
All Beneficiaries	92.36	92.77	93.13	93.49	0.36	1.13
	0.27	0.28	0.28	0.30	0.40	0.35
Medicare Status						
65 years and older	92.69	93.24	93.48	93.96	0.48	1.27
	0.26	0.31	0.30	0.32	0.43	0.36
64 years and younger	89.34	88.75	90.33	89.88	-0.45	0.55
	0.73	0.83	0.66	0.77	0.94	1.06
Race/Ethnicity						
White non-Hispanic	92.99	93.42	94.00	94.27	0.27	1.28
	0.26	0.30	0.27	0.30	0.38	0.34
All others	89.13	89.61	89.03	89.81	0.78	0.67
	0.98	0.75	0.79	0.79	1.09	1.11
Functional Limitation						
None	90.13	90.76	91.22	92.39	1.17	2.26
	0.42	0.43	0.45	0.47	0.58	0.52
IADL only ²	94.55	95.15	95.00	93.51	-0.49	-1.04
	0.44	0.47	0.50	0.63	0.66	0.72
One to two ADLs ³	95.43	95.21	96.15	96.27	0.12	0.85
	0.54	0.61	0.60	0.59	0.71	0.82
Three to five ADLs	96.34	96.38	96.61	97.19	0.58	0.85
	0.52	0.78	0.75	0.58	0.88	0.80
Health Insurance						
Medicare fee for service only	83.25	83.17	83.84	82.06	-1.77	-1.19
	1.23	1.32	1.12	1.07	1.48	1.49
Medicaid	92.42	91.42	92.07	91.78	-0.29	-0.64
	0.74	0.70	0.91	0.80	1.06	1.06
Private health insurance	93.86	94.56	94.94	95.81	0.88	1.96
	0.31	0.36	0.29	0.31	0.37	0.37
Medicare HMO ⁴	92.76	94.19	93.62	93.88	0.26	1.12
	0.97	1.03	1.00	0.88	1.42	1.32

Table 6.12 Physician/Supplier Services User Rates for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (2 of 2)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
	Percent of Beneficiaries with at Least One Physician/Supplier Service				Change in Proportion	
All Beneficiaries	92.36	92.77	93.13	93.49	0.36	1.13
	<i>0.27</i>	<i>0.28</i>	<i>0.28</i>	<i>0.30</i>	<i>0.40</i>	<i>0.35</i>
Income						
Lowest income quartile	88.83	89.82	91.03	90.59	-0.44	1.76
	<i>0.65</i>	<i>0.65</i>	<i>0.63</i>	<i>0.59</i>	<i>0.84</i>	<i>0.81</i>
Second income quartile	93.19	92.31	92.24	93.16	0.91	-0.03
	<i>0.49</i>	<i>0.59</i>	<i>0.58</i>	<i>0.49</i>	<i>0.70</i>	<i>0.70</i>
Third income quartile	92.46	93.22	94.47	94.86	0.39	2.40
	<i>0.52</i>	<i>0.63</i>	<i>0.49</i>	<i>0.56</i>	<i>0.74</i>	<i>0.74</i>
Highest income quartile	95.04	95.73	94.84	95.36	0.52	0.32
	<i>0.42</i>	<i>0.49</i>	<i>0.53</i>	<i>0.60</i>	<i>0.75</i>	<i>0.71</i>

Source: Medicare Current Beneficiary Survey; CY 1992, CY 1993, CY 1994, and CY 1995 Cost and Use Public-Use Files.

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

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

Table 6.13 Prescription Medicine User Rates for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (1 of 2)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Percent of Beneficiaries with at Least One Prescribed Medicine				Change in Proportion		
All Beneficiaries	85.20	84.88	85.28	86.63	1.35	1.43
	0.36	0.34	0.41	0.42	0.51	0.49
Medicare Status						
65 years and older	85.31	84.97	85.42	86.92	1.50	1.61
	0.38	0.38	0.46	0.47	0.57	0.55
64 years and younger	84.14	84.14	84.11	84.35	0.24	0.21
	0.86	0.86	0.93	0.82	1.28	1.21
Race/Ethnicity						
White non-Hispanic	85.52	85.03	85.72	86.82	1.10	1.30
	0.42	0.37	0.45	0.45	0.58	0.55
All others	83.54	84.20	83.21	85.59	2.38	2.05
	1.00	1.04	0.91	0.90	1.23	1.14
Functional Limitation						
None	80.67	80.49	81.25	83.48	2.24	2.82
	0.59	0.55	0.61	0.60	0.75	0.72
IADL only ²	90.33	89.84	89.57	89.48	-0.09	-0.84
	0.55	0.74	0.72	0.68	0.90	0.90
One to two ADLs ³	91.16	90.64	91.59	92.11	0.52	0.95
	0.64	0.84	0.68	0.83	0.95	0.96
Three to five ADLs	91.90	93.00	91.84	93.30	1.45	1.39
	0.86	0.96	0.94	0.95	1.09	1.18
Health Insurance						
Medicare fee for service only	76.58	75.67	74.20	77.62	3.42	1.04
	1.26	1.38	1.59	1.19	1.97	1.82
Medicaid	86.72	87.64	87.61	87.35	-0.26	0.63
	0.91	0.88	0.93	0.93	1.19	1.20
Private health insurance	86.39	85.74	86.45	87.86	1.41	1.47
	0.46	0.45	0.50	0.50	0.57	0.59
Medicare HMO ⁴	85.04	87.26	88.09	87.87	-0.22	2.83
	1.68	1.31	1.40	1.18	1.52	1.77

Table 6.13 Prescription Medicine User Rates for Noninstitutionalized Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (2 of 2)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Percent of Beneficiaries with at Least One Prescribed Medicine					Change in Proportion	
All Beneficiaries	85.20	84.88	85.28	86.63	1.35	1.43
	<i>0.36</i>	<i>0.34</i>	<i>0.41</i>	<i>0.42</i>	<i>0.51</i>	<i>0.49</i>
Income						
Lowest income quartile	82.74	83.33	84.06	85.23	1.17	2.50
	<i>0.69</i>	<i>0.83</i>	<i>0.67</i>	<i>0.64</i>	<i>0.93</i>	<i>0.91</i>
Second income quartile	85.70	85.34	85.74	86.61	1.06	1.11
	<i>0.70</i>	<i>0.80</i>	<i>0.73</i>	<i>0.60</i>	<i>0.90</i>	<i>0.90</i>
Third income quartile	85.51	84.91	86.02	87.08	1.06	1.57
	<i>0.78</i>	<i>0.74</i>	<i>0.88</i>	<i>0.96</i>	<i>1.18</i>	<i>1.23</i>
Highest income quartile	86.88	85.95	85.30	87.39	2.09	0.51
	<i>0.78</i>	<i>0.88</i>	<i>0.83</i>	<i>0.81</i>	<i>0.99</i>	<i>1.05</i>

Source: Medicare Current Beneficiary Survey; CY 1992, CY 1993, CY 1994, and CY 1995 Cost and Use Public-Use Files.

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

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

Table 6.14 Facility User Rates for Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (1 of 2)

All Medicare Beneficiaries

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
Percent of Beneficiaries with at Least One Short- or Long-Term Care Facility Stay				Change in Proportion		
All Beneficiaries	7.69	8.23	8.88	9.02	0.14	1.33
	0.23	0.28	0.27	0.22	0.28	0.27
Medicare Status						
65 years and older	7.58	8.14	8.89	9.03	0.14	1.44
	0.23	0.29	0.28	0.24	0.30	0.28
64 years and younger	8.67	8.96	8.77	8.97	0.20	0.30
	0.66	0.71	0.66	0.63	0.52	0.69
Race/Ethnicity						
White non-Hispanic	8.02	8.49	9.26	9.45	0.19	1.43
	0.26	0.30	0.30	0.27	0.33	0.32
All others	5.47	6.35	6.58	6.65	0.07	1.18
	0.47	0.54	0.51	0.47	0.54	0.56
Functional Limitation						
None	0.81	0.57	0.82	1.02	0.19	0.21
	0.11	0.11	0.13	0.16	0.19	0.18
IADL only ¹	3.95	4.35	4.68	5.11	0.43	1.16
	0.39	0.40	0.42	0.42	0.53	0.58
One to two ADLs ²	11.54	12.53	13.52	13.69	0.18	2.16
	0.84	1.00	1.06	0.70	1.28	1.12
Three to five ADLs	41.18	43.49	46.40	46.16	-0.24	4.98
	1.31	1.49	1.43	1.38	1.41	1.75
Health Insurance						
Medicare fee for service only	8.74	8.97	9.55	7.99	-1.56	-0.75
	0.62	0.84	0.72	0.65	0.76	0.84
Medicaid	28.66	29.42	29.32	28.88	-0.44	0.21
	1.06	1.21	1.13	1.11	1.02	1.40
Private health insurance	2.77	3.10	3.91	4.21	0.30	1.44
	0.16	0.20	0.20	0.25	0.33	0.27
Medicare HMO ³	2.06	2.88	1.67	2.47	0.80	0.42
	0.56	0.62	0.46	0.48	0.70	0.70

Table 6.14 Facility User Rates for Medicare Beneficiaries, by Demographic and Socioeconomic Characteristics, 1992-1995 (2 of 2)

All Medicare Beneficiaries

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
	Percent of Beneficiaries with at Least One Short- or Long-Term Care Facility Stay				Change in Proportion	
All Beneficiaries	7.69	8.23	8.88	9.02	0.14	1.33
	<i>0.23</i>	<i>0.28</i>	<i>0.27</i>	<i>0.22</i>	<i>0.28</i>	<i>0.27</i>
Income						
Lowest income quartile	15.48	16.83	17.41	17.96	0.54	2.48
	<i>0.62</i>	<i>0.73</i>	<i>0.73</i>	<i>0.59</i>	<i>0.66</i>	<i>0.76</i>
Second income quartile	7.75	8.62	8.92	9.28	0.36	1.53
	<i>0.44</i>	<i>0.51</i>	<i>0.48</i>	<i>0.46</i>	<i>0.67</i>	<i>0.58</i>
Third income quartile	4.56	4.46	5.68	5.14	-0.55	0.58
	<i>0.34</i>	<i>0.36</i>	<i>0.36</i>	<i>0.37</i>	<i>0.53</i>	<i>0.49</i>
Highest income quartile	2.67	2.93	3.16	3.56	0.39	0.89
	<i>0.31</i>	<i>0.34</i>	<i>0.32</i>	<i>0.32</i>	<i>0.41</i>	<i>0.44</i>

Source: Medicare Current Beneficiary Survey; CY 1992, CY 1993, CY 1994, and CY 1995 Cost and Use Public-Use Files.

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

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

Table 6.15 Percentage of Noninstitutionalized Medicare Beneficiaries Satisfied or Very Satisfied with Their General Health Care,¹ by Demographic and Socioeconomic Characteristics, 1992-1995 (1 of 3)

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
All Beneficiaries	88.24	89.47	90.40	90.66	0.26	2.43
	0.36	0.31	0.35	0.37	0.47	0.47
Medicare Status						
65 years and older	88.70	89.82	90.85	91.02	1.17	2.32
	0.38	0.32	0.38	0.42	0.50	0.50
64 years and younger	83.90	86.49	86.77	87.87	1.10	3.97
	0.94	0.96	0.90	0.91	1.15	1.36
Gender						
Male	86.43	88.06	89.03	89.71	0.68	3.28
	0.49	0.51	0.46	0.54	0.66	0.71
Female	89.63	90.56	91.48	91.42	-0.07	1.78
	0.47	0.44	0.45	0.49	0.57	0.60
Race/Ethnicity						
White non-Hispanic	88.87	89.76	90.70	90.93	0.23	2.05
	0.37	0.34	0.36	0.40	0.48	0.49
All others	84.92	87.95	88.99	89.32	0.33	4.40
	1.05	0.85	0.74	0.71	0.89	1.18
Functional Limitation						
None	87.27	88.90	90.03	90.41	0.37	3.14
	0.47	0.49	0.48	0.53	0.66	0.67
IADL only ³	90.67	90.98	91.43	91.28	-0.15	0.61
	0.60	0.54	0.64	0.67	0.82	0.95
One to two ADLs ⁴	89.83	88.80	90.70	92.06	1.35	2.23
	0.93	0.85	0.81	0.73	1.05	1.13
Three to five ADLs	85.02	90.62	89.58	88.50	-1.08	3.47
	1.31	0.90	1.11	1.34	1.42	1.79
Usual Source of Care						
No usual source of care	55.17	56.88	58.77	57.24	-1.54	2.06
	1.77	2.23	2.08	2.01	2.52	2.96
Has usual source of care	91.74	92.68	93.27	93.25	-0.01	1.51
	0.30	0.29	0.29	0.30	0.40	0.40

Table 6.15 Percentage of Noninstitutionalized Medicare Beneficiaries Satisfied or Very Satisfied with Their General Health Care,¹ by Demographic and Socioeconomic Characteristics, 1992-1995 (2 of 3)

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
All Beneficiaries	88.24	89.47	90.40	90.66	0.26	2.43
	0.36	0.31	0.35	0.37	0.47	0.47
Living Arrangement						
Alone	89.16	89.23	89.84	89.75	-0.09	0.59
	0.59	0.59	0.65	0.63	0.73	0.80
With spouse	88.63	90.56	91.61	91.83	0.22	3.20
	0.47	0.42	0.40	0.46	0.54	0.65
With children/others	85.49	86.47	87.38	88.52	1.15	3.03
	0.90	0.88	0.76	0.90	1.00	1.15
Health Insurance						
Medicare fee for service only	76.61	80.56	82.30	80.62	-1.68	4.01
	1.23	1.35	1.20	1.33	1.46	1.90
Medicaid	87.48	87.15	88.03	89.97	1.94	2.49
	0.99	0.97	0.78	0.79	0.96	1.15
Private health insurance	90.13	91.29	92.08	92.21	0.13	2.08
	0.39	0.36	0.40	0.42	0.54	0.53
Medicare HMO ⁵	90.41	91.29	92.44	92.90	0.46	2.49
	1.13	1.15	0.97	0.85	1.32	1.37

Table 6.15 Percentage of Noninstitutionalized Medicare Beneficiaries Satisfied or Very Satisfied with Their General Health Care,¹ by Demographic and Socioeconomic Characteristics, 1992-1995 (3 of 3)

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
All Beneficiaries	88.24	89.47	90.40	90.66	0.26	2.43
	<i>0.36</i>	<i>0.31</i>	<i>0.35</i>	<i>0.37</i>	<i>0.47</i>	<i>0.47</i>
Income						
Lowest income quartile	85.99	86.22	87.74	88.30	0.57	2.32
	<i>0.75</i>	<i>0.71</i>	<i>0.67</i>	<i>0.81</i>	<i>1.05</i>	<i>1.03</i>
Second income quartile	87.39	88.49	89.84	89.14	-0.70	1.75
	<i>0.72</i>	<i>0.61</i>	<i>0.59</i>	<i>0.61</i>	<i>0.82</i>	<i>0.90</i>
Third income quartile	87.52	90.67	91.21	92.11	0.90	4.58
	<i>0.70</i>	<i>0.63</i>	<i>0.65</i>	<i>0.59</i>	<i>0.80</i>	<i>1.00</i>
Highest income quartile	92.22	92.48	92.88	93.09	0.21	0.87
	<i>0.58</i>	<i>0.67</i>	<i>0.63</i>	<i>0.56</i>	<i>0.76</i>	<i>0.75</i>

Source: Medicare Current Beneficiary Survey, CY 1992, CY 1993, CY 1994, and CY 1995 Access to Care Public-Use Files.

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

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

Table 6.16 Percentage of Noninstitutionalized Medicare Beneficiaries With a Usual Source of Health Care, by Demographic and Socioeconomic Characteristics, 1992-1995 (1 of 3)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
All Beneficiaries	90.45	91.10	91.73	92.78	1.05	2.33
	<i>0.35</i>	<i>0.34</i>	<i>0.29</i>	<i>0.37</i>	<i>0.33</i>	<i>0.41</i>
Medicare Status						
65 years and older	90.66	91.44	92.22	93.22	1.01	2.56
	<i>0.36</i>	<i>0.39</i>	<i>0.28</i>	<i>0.40</i>	<i>0.37</i>	<i>0.44</i>
64 years and younger	88.46	88.17	87.73	89.32	1.59	0.86
	<i>0.79</i>	<i>0.88</i>	<i>0.96</i>	<i>0.97</i>	<i>0.97</i>	<i>1.12</i>
Gender						
Male	88.14	89.65	89.99	91.01	1.02	2.88
	<i>0.52</i>	<i>0.45</i>	<i>0.42</i>	<i>0.51</i>	<i>0.44</i>	<i>0.67</i>
Female	92.24	92.22	93.09	94.18	1.08	1.94
	<i>0.40</i>	<i>0.44</i>	<i>0.38</i>	<i>0.42</i>	<i>0.47</i>	<i>0.52</i>
Race/Ethnicity						
White non-Hispanic	90.96	91.37	92.09	93.39	1.30	2.43
	<i>0.35</i>	<i>0.37</i>	<i>0.31</i>	<i>0.39</i>	<i>0.36</i>	<i>0.47</i>
All others	87.64	89.61	89.92	89.80	-0.12	2.16
	<i>0.99</i>	<i>0.72</i>	<i>0.75</i>	<i>0.90</i>	<i>0.75</i>	<i>1.22</i>
Functional Limitation						
None	88.36	89.65	90.21	91.70	1.49	3.34
	<i>0.52</i>	<i>0.55</i>	<i>0.41</i>	<i>0.52</i>	<i>0.55</i>	<i>0.68</i>
IADL only ²	93.03	92.28	93.58	93.57	-0.01	0.54
	<i>0.51</i>	<i>0.58</i>	<i>0.57</i>	<i>0.65</i>	<i>0.70</i>	<i>0.78</i>
One to two ADLs ³	92.95	93.60	93.27	94.86	1.60	1.92
	<i>0.57</i>	<i>0.58</i>	<i>0.59</i>	<i>0.58</i>	<i>0.69</i>	<i>0.74</i>
Three to five ADLs	93.39	93.97	94.99	95.41	0.42	2.02
	<i>1.01</i>	<i>0.70</i>	<i>0.84</i>	<i>0.81</i>	<i>0.83</i>	<i>1.24</i>

Table 6.16 Percentage of Noninstitutionalized Medicare Beneficiaries With a Usual Source of Health Care, by Demographic and Socioeconomic Characteristics, 1992-1995 (2 of 3)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
All Beneficiaries	90.45	91.10	91.73	92.78	1.05	2.33
	0.35	0.34	0.29	0.37	0.33	0.41
Living Arrangement						
Alone	90.64	91.02	91.05	92.10	1.05	1.47
	0.49	0.64	0.68	0.58	0.73	0.70
With spouse	90.94	91.89	92.95	94.03	1.08	3.09
	0.46	0.45	0.38	0.41	0.40	0.53
With children/others	88.59	88.79	88.81	89.94	1.14	1.35
	0.72	0.75	0.69	0.87	0.78	1.04
Health Insurance						
Medicare fee for service only	80.82	83.37	83.87	85.80	1.94	4.98
	1.17	1.18	1.21	1.34	1.09	1.70
Medicaid	89.61	89.55	89.80	91.19	1.39	1.58
	0.85	0.91	0.79	0.87	0.96	0.95
Private health insurance	91.78	92.19	93.07	93.74	0.67	1.96
	0.37	0.40	0.35	0.43	0.40	0.49
Medicare HMO ⁴	95.18	96.35	95.51	96.59	1.08	1.41
	0.99	0.96	1.04	0.72	1.32	1.26

Table 6.16 Percentage of Noninstitutionalized Medicare Beneficiaries With a Usual Source of Health Care, by Demographic and Socioeconomic Characteristics, 1992-1995 (3 of 3)

Community-Only Residents¹

Beneficiary Characteristic	1992	1993	1994	1995	Difference 1994-1995	Difference 1992-1995
All Beneficiaries	90.45	91.10	91.73	92.78	1.05	2.33
	<i>0.35</i>	<i>0.34</i>	<i>0.29</i>	<i>0.37</i>	<i>0.33</i>	<i>0.41</i>
Income						
Lowest income quartile	88.61	89.66	89.73	89.67	-0.06	1.06
	<i>0.72</i>	<i>0.67</i>	<i>0.58</i>	<i>0.75</i>	<i>0.79</i>	<i>0.83</i>
Second income quartile	90.15	90.19	90.67	92.78	2.11	2.63
	<i>0.58</i>	<i>0.60</i>	<i>0.59</i>	<i>0.64</i>	<i>0.75</i>	<i>0.81</i>
Third income quartile	91.22	91.74	93.00	93.99	0.99	2.77
	<i>0.54</i>	<i>0.64</i>	<i>0.50</i>	<i>0.63</i>	<i>0.75</i>	<i>0.80</i>
Highest income quartile	91.85	92.80	93.57	94.68	1.11	2.82
	<i>0.63</i>	<i>0.59</i>	<i>0.64</i>	<i>0.62</i>	<i>0.71</i>	<i>0.82</i>

Source: Medicare Current Beneficiary Survey, CY 1992, CY 1993, CY 1994, and CY 1995 Access to Care Public-Use Files.

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

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