

Table 5.1 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 1996

Community-Only Residents¹

Indicator of Access to Care ²	Total	All Medicare Beneficiaries				Male				Total	Female				Total
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
Beneficiaries (in 000s)	37,013	4,440	18,094	11,316	3,163	2,590	8,399	4,508	1,026	16,523	1,848	9,696	6,805	2,136	20,485
	118	82	141	104	60	71	124	70	36	118	46	125	80	53	124
Beneficiaries as a Percent of Column Total															
Access to Care															
Usual Source of Care															
None ³	7.21	10.02	7.61	5.99	5.31	11.49	8.54	6.53	6.44	8.32	7.97	6.80	5.63	4.77	6.31
	0.27	0.72	0.40	0.41	0.53	0.96	0.60	0.68	1.09	0.41	0.94	0.50	0.48	0.54	0.32
Doctor's office	71.63	63.75	70.38	75.01	77.73	59.63	66.69	71.56	76.67	67.53	69.50	73.59	77.29	78.24	74.93
	0.78	1.10	0.96	0.96	1.10	1.44	1.34	1.31	2.05	0.99	1.87	1.00	1.02	1.15	0.80
Doctor's clinic	7.66	7.59	8.00	7.51	6.35	6.59	8.16	7.99	5.55	7.71	8.99	7.87	7.19	6.73	7.62
	0.61	0.73	0.73	0.69	0.66	0.68	0.92	0.79	0.82	0.68	1.19	0.74	0.76	0.82	0.65
HMO ⁴	5.80	3.17	6.65	5.81	4.59	3.22	6.38	6.07	4.76	5.70	3.10	6.88	5.63	4.50	5.88
	0.27	0.47	0.35	0.37	0.45	0.70	0.45	0.54	0.69	0.35	0.58	0.45	0.43	0.52	0.29
Hospital OPD/ER ⁵	2.71	6.21	2.40	1.93	2.41	6.92	2.19	1.87	2.41	2.86	5.21	2.59	1.96	2.41	2.60
	0.16	0.64	0.23	0.19	0.36	0.96	0.31	0.27	0.64	0.24	0.86	0.29	0.25	0.44	0.20
Other clinic/health center	4.99	9.26	4.95	3.76	3.62	12.14	8.04	5.99	4.18	7.88	5.22	2.28	2.29	3.35	2.66
	0.28	0.66	0.37	0.34	0.45	0.95	0.73	0.58	0.93	0.48	0.85	0.28	0.33	0.47	0.21
Difficulty Obtaining Care															
Yes	3.54	11.87	2.64	1.98	2.54	11.24	2.59	1.61	1.68	3.62	12.76	2.68	2.23	2.96	3.47
	0.15	0.83	0.23	0.19	0.32	0.94	0.34	0.30	0.51	0.22	1.44	0.30	0.27	0.44	0.22
No	96.46	88.13	97.36	98.02	97.46	88.76	97.41	98.39	98.32	96.38	87.24	97.32	97.77	97.04	96.53
	0.15	0.83	0.23	0.19	0.32	0.94	0.34	0.30	0.51	0.22	1.44	0.30	0.27	0.44	0.22
Delayed Care Due to Cost															
Yes	8.23	23.72	7.06	5.22	3.95	22.83	5.87	4.80	3.10	8.06	24.95	8.10	5.49	4.36	8.37
	0.26	1.17	0.38	0.33	0.47	1.51	0.52	0.44	0.70	0.39	1.56	0.51	0.43	0.54	0.30
No	91.77	76.28	92.94	94.78	96.05	77.17	94.13	95.20	96.90	91.94	75.05	91.90	94.51	95.64	91.63
	0.26	1.17	0.38	0.33	0.47	1.51	0.52	0.44	0.70	0.39	1.56	0.51	0.43	0.54	0.30

Table 5.1 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 1996

Community-Only Residents¹

Indicator of Access to Care ²	Total	All Medicare Beneficiaries				Male				Total	Female				Total
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
Beneficiaries (in 000s)	37,013	4,440	18,094	11,316	3,163	2,590	8,399	4,508	1,026	16,523	1,848	9,696	6,805	2,136	20,485
	<i>118</i>	<i>82</i>	<i>141</i>	<i>104</i>	<i>60</i>	<i>71</i>	<i>124</i>	<i>70</i>	<i>36</i>	<i>118</i>	<i>46</i>	<i>125</i>	<i>80</i>	<i>53</i>	<i>124</i>
Beneficiaries as a Percent of Column Total															
Continuity of Care															
Length of Association with Usual Source of Care															
No usual source ³	7.24	10.07	7.62	6.01	5.40	11.55	8.55	6.55	6.52	8.35	8.01	6.82	5.66	4.85	6.34
	<i>0.27</i>	<i>0.73</i>	<i>0.40</i>	<i>0.42</i>	<i>0.55</i>	<i>0.96</i>	<i>0.60</i>	<i>0.69</i>	<i>1.10</i>	<i>0.41</i>	<i>0.94</i>	<i>0.50</i>	<i>0.48</i>	<i>0.55</i>	<i>0.32</i>
Less than 1 year	9.48	10.36	9.34	9.28	9.79	9.46	8.80	8.14	8.70	8.72	11.62	9.81	10.03	10.31	10.10
	<i>0.27</i>	<i>0.75</i>	<i>0.43</i>	<i>0.41</i>	<i>0.76</i>	<i>0.83</i>	<i>0.57</i>	<i>0.62</i>	<i>1.23</i>	<i>0.36</i>	<i>1.26</i>	<i>0.66</i>	<i>0.58</i>	<i>0.87</i>	<i>0.41</i>
1 to less than 3 years	18.42	21.26	18.41	17.84	16.61	22.23	17.40	16.83	17.07	17.98	19.89	19.28	18.52	16.38	18.79
	<i>0.39</i>	<i>0.95</i>	<i>0.60</i>	<i>0.56</i>	<i>0.88</i>	<i>1.45</i>	<i>0.92</i>	<i>0.88</i>	<i>1.36</i>	<i>0.60</i>	<i>1.52</i>	<i>0.82</i>	<i>0.70</i>	<i>1.06</i>	<i>0.52</i>
3 to less than 5 years	15.59	18.27	15.79	14.44	14.70	17.34	15.86	14.12	14.38	15.52	19.58	15.74	14.65	14.85	15.64
	<i>0.38</i>	<i>1.04</i>	<i>0.55</i>	<i>0.55</i>	<i>0.83</i>	<i>1.39</i>	<i>0.71</i>	<i>1.00</i>	<i>1.44</i>	<i>0.51</i>	<i>1.67</i>	<i>0.72</i>	<i>0.69</i>	<i>1.07</i>	<i>0.49</i>
5 years or more	49.27	40.04	48.83	52.42	53.51	39.42	49.39	54.36	53.33	49.43	40.90	48.35	51.14	53.60	49.14
	<i>0.57</i>	<i>1.19</i>	<i>0.89</i>	<i>0.70</i>	<i>1.31</i>	<i>1.52</i>	<i>1.14</i>	<i>1.09</i>	<i>1.87</i>	<i>0.74</i>	<i>1.84</i>	<i>1.13</i>	<i>0.92</i>	<i>1.60</i>	<i>0.70</i>

Source: Medicare Current Beneficiary Survey

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 residents* includes beneficiaries who resided in the community at the time of the round 16 interview (fall 1996), and beneficiaries who resided in the community at the time of the round 13 interview (fall 1995) who died prior to the round 16 interview
- 2 Responses for sample persons who died in 1996 prior to the Round 16 interview were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File).
- 3 The percentage of responses for "none" under "Usual Source of Care" differs from the percentage of responses for "no usual source" under "Length of Association with Usual Source of Care" because of differences in the number of missing responses for the two variables. See the entry *Missing values* in Appendix B for further explanation.
- 4 HMO stands for Health Maintenance Organization.
- 5 OPD stands for Outpatient Department; ER stands for Emergency Room.

Table 5.2 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 1996

Community-Only Residents¹

Measure of Satisfaction ²	Total	All Medicare Beneficiaries				Male				Total	Female				Total
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
Beneficiaries (in 000s)	37,013	4,440	18,094	11,316	3,163	2,590	8,399	4,508	1,026	16,523	1,848	9,696	6,805	2,136	20,485
	118	82	141	104	60	71	124	70	36	118	46	125	80	53	124
Beneficiaries as a Percent of Column Total³															
Quality of Care															
General Care															
Very Satisfied	30.44	21.84	33.36	30.19	26.59	21.43	33.56	30.72	24.91	30.35	22.42	33.19	29.84	27.40	30.50
	0.70	1.05	0.96	0.86	0.88	1.33	1.29	1.21	1.69	0.90	1.46	1.15	0.87	1.05	0.76
(Very) Unsatisfied	4.01	7.57	3.28	3.63	4.53	7.91	3.07	3.76	4.74	4.12	7.10	3.45	3.54	4.43	3.91
	0.17	0.67	0.24	0.27	0.40	0.86	0.37	0.44	0.69	0.28	0.93	0.33	0.33	0.60	0.20
Follow-up Care															
Very Satisfied	18.39	15.76	19.84	17.96	15.25	14.90	20.30	19.06	14.85	18.78	16.96	19.44	17.24	15.44	18.07
	0.49	0.93	0.70	0.57	0.84	1.09	1.00	0.91	1.30	0.68	1.38	0.85	0.69	0.94	0.52
(Very) Unsatisfied	3.09	5.94	2.69	2.71	2.68	6.50	2.31	3.04	2.61	3.19	5.15	3.03	2.49	2.71	3.01
	0.17	0.62	0.23	0.23	0.31	0.95	0.27	0.37	0.57	0.23	0.71	0.35	0.29	0.39	0.22
Access/Coordination of Care															
Availability															
Very Satisfied	11.04	10.35	11.55	10.64	10.53	10.96	12.17	11.30	8.99	11.55	9.49	11.01	10.21	11.28	10.63
	0.36	0.74	0.54	0.51	0.73	1.06	0.77	0.73	1.06	0.48	1.07	0.63	0.58	0.92	0.41
(Very) Unsatisfied	3.09	6.80	2.59	2.59	2.50	6.39	2.52	2.89	2.33	3.21	7.38	2.66	2.39	2.58	2.99
	0.17	0.63	0.22	0.25	0.41	0.73	0.34	0.32	0.69	0.22	1.09	0.30	0.37	0.47	0.23
Ease of Access to Doctor															
Very Satisfied	19.89	12.98	22.94	18.65	16.47	12.40	22.85	19.09	18.16	19.90	13.80	23.03	18.36	15.66	19.88
	0.58	0.96	0.84	0.64	0.94	1.22	1.11	1.03	1.61	0.77	1.36	1.04	0.79	1.04	0.64
(Very) Unsatisfied	5.74	10.53	4.26	5.93	6.80	9.18	4.23	4.91	5.24	5.25	12.43	4.29	6.59	7.55	6.13
	0.25	0.81	0.29	0.39	0.50	0.93	0.42	0.46	0.88	0.31	1.50	0.40	0.53	0.64	0.35
Can Obtain Care in Same Location															
Very Satisfied	14.79	11.65	16.88	13.26	12.60	10.96	16.28	13.79	11.69	14.49	12.61	17.41	12.91	13.03	15.03
	0.50	0.87	0.72	0.55	0.74	1.04	0.83	0.85	1.37	0.61	1.14	0.91	0.64	0.84	0.55
(Very) Unsatisfied	4.82	10.25	4.15	4.24	3.16	10.09	4.31	3.91	3.84	5.08	10.47	4.02	4.45	2.83	4.62
	0.20	0.90	0.30	0.31	0.33	1.12	0.42	0.46	0.75	0.33	1.41	0.38	0.42	0.43	0.26

Table 5.2 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 1996

Community-Only Residents¹

Measure of Satisfaction ²	Total	All Medicare Beneficiaries				Male				Total	Female				Total
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
Beneficiaries (in 000s)	37,013	4,440	18,094	11,316	3,163	2,590	8,399	4,508	1,026	16,523	1,848	9,696	6,805	2,136	20,485
	<i>118</i>	<i>82</i>	<i>141</i>	<i>104</i>	<i>60</i>	<i>71</i>	<i>124</i>	<i>70</i>	<i>36</i>	<i>118</i>	<i>46</i>	<i>125</i>	<i>80</i>	<i>53</i>	<i>124</i>
Beneficiaries as a Percent of Column Total³															
Relationship with Primary Doctor															
Information from Doctor															
Very Satisfied	17.99	15.07	19.99	16.95	14.24	14.48	20.21	17.20	13.11	18.05	15.90	19.81	16.79	14.79	17.93
	<i>0.52</i>	<i>0.86</i>	<i>0.75</i>	<i>0.69</i>	<i>0.78</i>	<i>1.01</i>	<i>1.05</i>	<i>0.92</i>	<i>1.40</i>	<i>0.73</i>	<i>1.39</i>	<i>0.90</i>	<i>0.76</i>	<i>0.88</i>	<i>0.53</i>
(Very) Unsatisfied	6.00	10.93	4.87	6.24	4.70	10.93	3.90	6.60	4.11	5.75	10.93	5.71	5.99	4.98	6.20
	<i>0.22</i>	<i>0.78</i>	<i>0.31</i>	<i>0.38</i>	<i>0.42</i>	<i>1.03</i>	<i>0.39</i>	<i>0.58</i>	<i>0.77</i>	<i>0.31</i>	<i>1.12</i>	<i>0.52</i>	<i>0.46</i>	<i>0.54</i>	<i>0.34</i>
Doctor's Concern for Overall Health															
Very Satisfied	19.74	17.74	21.54	18.50	16.68	16.97	21.43	18.44	14.87	19.51	18.80	21.65	18.53	17.54	19.93
	<i>0.46</i>	<i>1.04</i>	<i>0.71</i>	<i>0.59</i>	<i>0.85</i>	<i>1.21</i>	<i>0.99</i>	<i>0.78</i>	<i>1.40</i>	<i>0.64</i>	<i>1.52</i>	<i>0.87</i>	<i>0.76</i>	<i>1.03</i>	<i>0.54</i>
(Very) Unsatisfied	5.12	8.19	4.52	5.12	4.25	8.42	4.62	4.82	3.94	5.22	7.86	4.44	5.33	4.39	5.04
	<i>0.23</i>	<i>0.77</i>	<i>0.33</i>	<i>0.36</i>	<i>0.42</i>	<i>1.03</i>	<i>0.37</i>	<i>0.50</i>	<i>0.77</i>	<i>0.28</i>	<i>0.96</i>	<i>0.50</i>	<i>0.45</i>	<i>0.53</i>	<i>0.32</i>
Cost															
Very Satisfied	16.97	12.75	18.70	16.69	13.97	12.27	19.20	17.98	13.47	17.43	13.42	18.27	15.85	14.20	16.60
	<i>0.52</i>	<i>0.82</i>	<i>0.77</i>	<i>0.52</i>	<i>0.82</i>	<i>1.12</i>	<i>0.91</i>	<i>0.85</i>	<i>1.47</i>	<i>0.60</i>	<i>1.25</i>	<i>0.96</i>	<i>0.64</i>	<i>0.94</i>	<i>0.60</i>
(Very) Unsatisfied	12.84	23.76	11.55	11.25	10.56	23.04	11.00	11.43	11.31	13.02	24.76	12.03	11.13	10.19	12.69
	<i>0.37</i>	<i>1.15</i>	<i>0.45</i>	<i>0.55</i>	<i>0.78</i>	<i>1.60</i>	<i>0.62</i>	<i>0.77</i>	<i>1.34</i>	<i>0.47</i>	<i>1.58</i>	<i>0.69</i>	<i>0.65</i>	<i>0.93</i>	<i>0.46</i>

Source: Medicare Current Beneficiary Survey

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 residents* includes beneficiaries who resided in the community at the time of the round 16 interview (fall 1996), and beneficiaries who resided in the community at the time of the round 13 interview (fall 1995) who died prior to the round 16 interview
- 2 Responses for sample persons who died in 1996 prior to the Round 16 interview were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File).
- 3 Column percentages do not sum to 100 percent because the responses of "satisfied" and "no experience" are excluded from the table for all satisfaction variables.

Table 5.3 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 1996

Community-Only Residents¹

Indicator of Access to Care ²	Total ³	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,013	2,974	15,010	9,733	2,691	30,408	809	1,450	799	249	3,308	528	1,151	537	151	2,367
	117.622	74	149	115	56	177	31	60	34	16	65	34	82	37	12	126
Beneficiaries as a Percent of Column Total																
Access to Care																
Usual Source of Care																
None ⁴	7.21	10.07	7.28	5.43	5.18	6.77	11.07	11.06	7.35	6.36	9.81	8.60	7.78	11.11	7.10	8.67
	0.27	0.95	0.42	0.37	0.59	0.29	1.45	1.76	1.51	1.44	0.78	2.44	1.72	2.76	2.00	1.10
Doctor's office	71.63	67.57	73.40	76.92	78.98	74.45	52.37	54.45	67.75	71.27	58.41	59.55	54.87	53.73	69.89	56.61
	0.78	1.46	1.11	1.00	1.17	0.89	2.65	2.58	2.38	3.24	1.37	3.71	2.81	3.16	4.64	1.87
Doctor's clinic	7.66	7.33	8.50	7.96	6.65	8.05	8.85	4.75	4.63	3.99	5.67	5.61	5.39	3.64	3.14	4.90
	0.61	0.84	0.87	0.76	0.74	0.71	1.70	1.18	0.91	1.18	0.81	2.14	1.29	1.08	1.47	0.85
HMO ⁵	5.80	2.92	5.62	5.43	4.53	5.20	2.12	7.67	5.04	2.89	5.32	6.41	15.52	13.84	7.53	12.60
	0.27	0.46	0.34	0.36	0.49	0.26	0.62	1.21	1.13	0.88	0.58	2.76	1.94	1.93	2.02	1.59
Hospital OPD/ER ⁶	2.71	3.79	1.26	1.25	1.51	1.53	12.62	10.85	7.69	10.57	10.50	11.26	6.82	5.65	3.95	7.37
	0.16	0.58	0.18	0.18	0.31	0.13	2.25	1.49	1.39	2.25	0.99	2.80	1.55	1.18	1.13	0.99
Other clinic/ health center	4.99	8.32	3.94	3.02	3.15	4.00	12.96	11.22	7.54	4.92	10.28	8.57	9.63	12.03	8.40	9.85
	0.28	0.88	0.40	0.33	0.44	0.30	2.09	1.61	1.12	1.62	0.76	1.33	1.91	2.26	3.17	1.26
Difficulty Obtaining Care																
Yes	3.54	11.89	2.51	1.73	2.30	3.15	12.61	3.64	4.29	4.44	6.05	12.63	2.29	3.55	2.87	4.92
	0.15	0.93	0.26	0.20	0.32	0.17	1.94	0.73	0.96	1.67	0.55	3.00	0.73	1.14	1.35	0.85
No	96.46	88.11	97.49	98.27	97.70	96.85	87.39	96.36	95.71	95.56	93.95	87.37	97.71	96.45	97.13	95.08
	0.15	0.93	0.26	0.20	0.32	0.17	1.94	0.73	0.96	1.67	0.55	3.00	0.73	1.14	1.35	0.85
Delayed Care Due to Cost																
Yes	8.23	24.66	6.29	5.00	3.87	7.46	17.99	11.82	7.97	6.61	12.01	28.47	8.89	5.92	2.65	12.19
	0.26	1.38	0.42	0.35	0.50	0.26	2.04	1.31	1.37	1.66	0.78	4.27	1.66	1.62	1.63	1.28
No	91.77	75.34	93.71	95.00	96.13	92.54	82.01	88.18	92.03	93.39	87.99	71.53	91.11	94.08	97.35	87.81
	0.26	1.38	0.42	0.35	0.50	0.26	2.04	1.31	1.37	1.66	0.78	4.27	1.66	1.62	1.63	1.28

Table 5.3 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 1996

Community-Only Residents¹

Indicator of Access to Care ²	Total ³	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,013	2,974	15,010	9,733	2,691	30,408	809	1,450	799	249	3,308	528	1,151	537	151	2,367
	<i>117.622</i>	<i>74</i>	<i>149</i>	<i>115</i>	<i>56</i>	<i>177</i>	<i>31</i>	<i>60</i>	<i>34</i>	<i>16</i>	<i>65</i>	<i>34</i>	<i>82</i>	<i>37</i>	<i>12</i>	<i>126</i>

Beneficiaries as a Percent of Column Total

Continuity of Care																
Length of Association with Usual Source of Care																
No usual source ⁴	7.24	10.13	7.29	5.44	5.24	6.80	11.12	11.08	7.39	6.57	9.87	8.60	7.84	11.19	7.32	8.73
	<i>0.27</i>	<i>0.96</i>	<i>0.42</i>	<i>0.37</i>	<i>0.60</i>	<i>0.29</i>	<i>1.45</i>	<i>1.76</i>	<i>1.52</i>	<i>1.50</i>	<i>0.78</i>	<i>2.44</i>	<i>1.73</i>	<i>2.79</i>	<i>2.05</i>	<i>1.11</i>
Less than 1 year	9.48	10.00	8.82	9.36	9.68	9.19	11.01	11.31	8.13	10.21	10.39	11.36	12.17	10.21	10.69	11.46
	<i>0.27</i>	<i>0.90</i>	<i>0.46</i>	<i>0.46</i>	<i>0.85</i>	<i>0.29</i>	<i>1.57</i>	<i>1.43</i>	<i>1.33</i>	<i>1.69</i>	<i>0.83</i>	<i>2.14</i>	<i>1.85</i>	<i>1.81</i>	<i>2.64</i>	<i>1.18</i>
1 to less than 3 years	18.42	21.14	17.51	17.25	16.38	17.68	19.50	20.10	22.92	18.58	20.52	26.23	27.01	22.83	18.05	25.34
	<i>0.39</i>	<i>1.19</i>	<i>0.64</i>	<i>0.62</i>	<i>0.97</i>	<i>0.42</i>	<i>2.14</i>	<i>2.00</i>	<i>2.16</i>	<i>2.53</i>	<i>1.15</i>	<i>3.35</i>	<i>2.24</i>	<i>2.15</i>	<i>3.49</i>	<i>1.41</i>
3 to less than 5 years	15.59	17.26	15.86	14.37	14.61	15.41	19.84	15.98	15.39	12.22	16.51	21.68	13.45	13.77	19.52	15.75
	<i>0.38</i>	<i>1.12</i>	<i>0.63</i>	<i>0.60</i>	<i>0.89</i>	<i>0.42</i>	<i>2.72</i>	<i>1.83</i>	<i>1.73</i>	<i>2.50</i>	<i>0.89</i>	<i>3.14</i>	<i>1.86</i>	<i>2.10</i>	<i>4.11</i>	<i>1.26</i>
5 years or more	49.27	41.47	50.52	53.58	54.09	50.93	38.53	41.53	46.18	52.42	42.71	32.13	39.52	42.00	44.43	38.72
	<i>0.57</i>	<i>1.50</i>	<i>1.01</i>	<i>0.74</i>	<i>1.40</i>	<i>0.64</i>	<i>2.67</i>	<i>2.40</i>	<i>2.66</i>	<i>3.47</i>	<i>1.38</i>	<i>3.47</i>	<i>2.59</i>	<i>2.84</i>	<i>4.48</i>	<i>1.54</i>

Source: Medicare Current Beneficiary Survey

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 residents* includes beneficiaries who resided in the community at the time of the round 16 interview (fall 1996), and beneficiaries who resided in the community at the time of the round 13 interview (fall 1995) who died prior to the round 16 interview
- 2 Responses for sample persons who died in 1996 prior to the Round 16 interview were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File).
- 3 Total includes persons of other race/ethnicity and persons who did not report their race/ethnicity.
- 4 The percentage of responses for "none" under "Usual Source of Care" differs from the percentage of responses for "no usual source" under "Length of Association with Usual Source of Care" because of differences in the number of missing responses for the two variables. See the entry *Missing values* in Appendix B for further explanation.
- 5 HMO stands for Health Maintenance Organization.
- 6 OPD stands for Outpatient Department; ER stands for Emergency Room.

Table 5.4 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 1996

Community-Only Residents¹

Measure of Satisfaction ²	Total ³	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,013	2,974	15,010	9,733	2,691	30,408	809	1,450	799	249	3,308	528	1,151	537	151	2,367
	117.622	74	149	115	56	177	31	60	34	16	65	34	82	37	12	126
Beneficiaries as a Percent of Column Total⁴																
Quality of Care																
General Care																
Very Satisfied	30.44	23.87	36.09	31.51	27.60	32.68	16.28	21.28	22.44	20.68	20.29	15.96	17.22	21.61	22.89	18.29
	0.70	1.20	1.14	0.94	1.03	0.82	2.37	1.84	2.10	3.00	1.03	3.23	1.96	1.73	3.30	1.16
(Very) Unsatisfied	4.01	7.59	3.06	3.75	4.56	3.85	7.30	3.43	2.71	3.40	4.20	8.78	5.18	3.61	4.07	5.56
	0.17	0.71	0.26	0.29	0.45	0.18	1.48	0.76	0.81	1.25	0.51	2.68	1.21	1.25	2.02	1.04
Follow-up Care																
Very Satisfied	18.39	16.76	21.53	18.62	15.54	19.61	13.44	11.73	12.22	8.97	12.06	13.15	12.84	15.69	23.60	14.23
	0.49	1.07	0.83	0.64	0.97	0.57	2.28	1.37	1.75	2.03	0.99	3.42	1.20	2.07	3.23	1.05
(Very) Unsatisfied	3.09	6.16	2.68	2.62	2.86	3.01	5.43	2.77	2.67	1.09	3.27	6.36	3.11	4.60	1.64	4.08
	0.17	0.75	0.26	0.24	0.37	0.17	1.18	0.91	0.77	0.75	0.57	2.04	1.15	1.28	1.16	0.84
Access/Coordination of Care																
Availability																
Very Satisfied	11.04	11.73	12.33	11.01	10.86	11.72	5.42	6.72	6.21	6.62	6.27	8.26	9.01	12.11	14.11	9.87
	0.36	0.98	0.60	0.56	0.83	0.43	1.39	1.35	1.57	1.91	0.76	2.68	1.70	1.39	2.07	0.99
(Very) Unsatisfied	3.09	7.10	2.72	2.79	2.57	3.16	6.18	1.51	0.73	0.46	2.39	4.69	3.31	2.23	2.07	3.29
	0.17	0.69	0.23	0.28	0.47	0.18	1.40	0.51	0.45	0.46	0.41	1.52	1.00	0.85	0.48	0.61
Ease of Access to Doctor																
Very Satisfied	19.89	14.31	24.67	19.65	16.91	21.37	10.01	14.62	11.46	13.49	12.64	9.06	13.89	14.42	17.85	13.18
	0.58	1.16	1.00	0.73	1.08	0.68	1.64	1.89	1.69	2.12	0.95	2.92	2.24	1.98	3.34	1.04
(Very) Unsatisfied	5.74	10.04	3.92	5.46	6.72	5.26	11.09	5.60	8.24	5.83	7.59	9.36	6.81	11.83	8.49	8.62
	0.25	1.03	0.29	0.41	0.58	0.24	2.10	1.36	1.23	1.79	0.90	2.98	1.52	2.44	2.45	1.20
Can Obtain Care in Same Location																
Very Satisfied	14.79	12.21	17.95	13.70	12.87	15.58	11.49	10.89	9.22	10.12	10.58	8.20	12.24	13.13	15.31	11.73
	0.50	0.99	0.84	0.60	0.88	0.57	2.02	1.48	1.42	1.83	0.93	2.66	1.47	1.93	3.45	1.02
(Very) Unsatisfied	4.82	10.78	4.10	4.35	3.16	4.75	7.91	2.66	1.36	1.05	3.50	11.75	5.65	7.56	5.78	7.46
	0.20	1.01	0.30	0.33	0.35	0.18	1.52	0.60	0.60	0.77	0.54	4.69	1.28	2.51	1.22	1.80

Table 5.4 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 1996

Community-Only Residents¹

Measure of Satisfaction ²	Total ³	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,013	2,974	15,010	9,733	2,691	30,408	809	1,450	799	249	3,308	528	1,151	537	151	2,367
	<i>117.622</i>	<i>74</i>	<i>149</i>	<i>115</i>	<i>56</i>	<i>177</i>	<i>31</i>	<i>60</i>	<i>34</i>	<i>16</i>	<i>65</i>	<i>34</i>	<i>82</i>	<i>37</i>	<i>12</i>	<i>126</i>
Beneficiaries as a Percent of Column Total⁴																
Relationship with Primary Doctor																
Information from Doctor																
Very Satisfied	17.99	16.45	21.50	17.58	14.52	19.14	11.50	12.47	11.96	8.49	11.81	13.00	13.64	15.21	21.42	14.34
	<i>0.52</i>	<i>1.12</i>	<i>0.89</i>	<i>0.76</i>	<i>0.91</i>	<i>0.61</i>	<i>2.02</i>	<i>1.49</i>	<i>1.71</i>	<i>2.10</i>	<i>0.95</i>	<i>3.13</i>	<i>1.46</i>	<i>2.15</i>	<i>3.79</i>	<i>1.12</i>
(Very) Unsatisfied	6.00	11.14	4.86	6.53	4.95	6.02	8.76	5.35	4.80	3.03	5.88	11.56	4.70	4.37	1.10	5.93
	<i>0.22</i>	<i>0.98</i>	<i>0.35</i>	<i>0.42</i>	<i>0.46</i>	<i>0.26</i>	<i>1.45</i>	<i>1.02</i>	<i>1.16</i>	<i>1.18</i>	<i>0.65</i>	<i>2.76</i>	<i>1.04</i>	<i>1.21</i>	<i>1.07</i>	<i>0.85</i>
Doctor's Concern for Overall Health																
Very Satisfied	19.74	19.42	23.29	19.39	17.20	21.12	15.59	14.01	12.77	9.98	13.79	13.17	12.07	15.04	23.32	13.70
	<i>0.46</i>	<i>1.31</i>	<i>0.85</i>	<i>0.63</i>	<i>0.98</i>	<i>0.53</i>	<i>2.38</i>	<i>1.73</i>	<i>1.91</i>	<i>2.35</i>	<i>1.04</i>	<i>3.29</i>	<i>1.66</i>	<i>1.90</i>	<i>3.44</i>	<i>1.09</i>
(Very) Unsatisfied	5.12	8.70	4.55	5.29	4.36	5.18	6.30	4.90	4.26	4.67	5.07	9.66	3.60	3.89	1.10	4.85
	<i>0.23</i>	<i>0.87</i>	<i>0.36</i>	<i>0.39</i>	<i>0.42</i>	<i>0.23</i>	<i>1.38</i>	<i>0.91</i>	<i>0.94</i>	<i>1.55</i>	<i>0.66</i>	<i>2.98</i>	<i>0.81</i>	<i>1.06</i>	<i>1.07</i>	<i>0.85</i>
Cost of Care																
Cost																
Very Satisfied	16.97	13.17	19.87	17.22	13.92	17.84	9.89	11.49	10.38	11.42	10.82	11.15	14.47	15.38	19.10	14.23
	<i>0.52</i>	<i>0.97</i>	<i>0.87</i>	<i>0.59</i>	<i>0.86</i>	<i>0.58</i>	<i>1.69</i>	<i>1.77</i>	<i>1.70</i>	<i>2.63</i>	<i>0.95</i>	<i>2.64</i>	<i>1.64</i>	<i>2.28</i>	<i>4.46</i>	<i>1.12</i>
(Very) Unsatisfied	12.84	23.38	10.79	10.88	10.43	12.02	23.43	18.02	15.72	12.85	18.40	26.60	13.28	11.30	9.39	15.57
	<i>0.37</i>	<i>1.41</i>	<i>0.51</i>	<i>0.60</i>	<i>0.82</i>	<i>0.39</i>	<i>2.44</i>	<i>1.80</i>	<i>1.87</i>	<i>2.96</i>	<i>1.09</i>	<i>3.30</i>	<i>1.72</i>	<i>1.71</i>	<i>2.81</i>	<i>1.32</i>

Source: Medicare Current Beneficiary Survey

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 residents* includes beneficiaries who resided in the community at the time of the round 16 interview (fall 1996), and beneficiaries who resided in the community at the time of the round 13 interview (fall 1995) who died prior to the round 16 interview
- 2 Responses for sample persons who died in 1996 prior to the Round 16 interview were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File).
- 3 Total includes persons of other race/ethnicity and persons who did not report their race/ethnicity.
- 4 Column percentages do not sum to 100 percent because the responses of "satisfied" and "no experience" are excluded from the table for all satisfaction variables.

Table 5.5 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 1996

Community-Only Residents¹

Indicator of Access to Care ²	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,013	1,119	4,446	4,157	1,607	11,329	1,772	11,554	5,602	728	19,657	1,547	2,094	1,554	827	6,022
	117.622	44	109	97	46	155	73	148	100	29	185	58	88	66	33	125
Beneficiaries as a Percent of Column Total																
Access to Care																
Usual Source of Care																
None ³	7.21	9.84	9.29	6.46	6.46	7.91	6.27	6.32	5.16	3.47	5.88	14.44	11.15	7.74	4.72	10.24
	0.27	1.16	0.93	0.54	0.86	0.43	0.84	0.47	0.55	0.85	0.31	1.48	1.51	1.07	0.80	0.75
Doctor's office	71.63	59.68	67.72	74.94	76.99	70.89	69.59	71.85	75.62	80.20	73.03	60.02	67.95	72.99	76.95	68.44
	0.78	2.38	1.53	1.17	1.41	0.96	1.81	1.24	1.20	2.13	1.02	1.90	2.17	1.62	1.81	1.17
Doctor's clinic	7.66	6.61	7.81	7.25	7.01	7.37	7.41	8.70	7.91	5.88	8.26	8.51	4.57	6.73	5.47	6.26
	0.61	1.13	1.06	0.86	1.06	0.74	1.22	0.94	0.77	0.97	0.78	1.18	0.74	0.97	0.79	0.55
HMO ⁴	5.80	1.81	6.45	5.44	4.03	5.28	4.73	6.76	6.28	5.27	6.39	2.37	6.41	5.09	5.05	4.85
	0.27	0.47	0.61	0.53	0.56	0.36	0.97	0.41	0.53	0.89	0.37	0.57	1.00	0.73	0.94	0.42
Hospital OPD/ER ⁵	2.71	9.26	3.21	2.33	2.38	3.37	4.47	1.85	1.52	1.17	1.97	6.00	3.77	2.27	3.58	3.93
	0.16	1.50	0.55	0.31	0.52	0.29	1.02	0.22	0.26	0.69	0.19	0.90	0.84	0.52	0.80	0.40
Other clinic/ health center	4.99	12.81	5.52	3.57	3.13	5.18	7.54	4.52	3.51	4.00	4.48	8.66	6.16	5.17	4.23	6.28
	0.28	1.86	0.70	0.50	0.60	0.40	0.98	0.46	0.40	1.17	0.35	0.95	1.06	1.00	1.00	0.57
Difficulty Obtaining Care																
Yes	3.54	12.03	3.48	1.98	3.00	3.70	11.50	2.09	1.49	1.76	2.76	12.19	3.88	3.74	2.36	5.77
	0.15	1.52	0.53	0.31	0.47	0.28	1.37	0.24	0.25	0.56	0.20	1.32	0.82	0.65	0.66	0.44
No	96.46	87.97	96.52	98.02	97.00	96.30	88.50	97.91	98.51	98.24	97.24	87.81	96.12	96.26	97.64	94.23
	0.15	1.52	0.53	0.31	0.47	0.28	1.37	0.24	0.25	0.56	0.20	1.32	0.82	0.65	0.66	0.44
Delayed Care Due to Cost																
Yes	8.23	27.10	9.14	5.78	4.86	9.08	24.17	5.41	4.31	2.20	6.67	20.74	11.79	6.98	3.74	11.74
	0.26	1.81	0.79	0.54	0.69	0.39	2.08	0.48	0.45	0.71	0.36	1.66	1.58	1.03	0.85	0.78
No	91.77	72.90	90.86	94.22	95.14	90.92	75.83	94.59	95.69	97.80	93.33	79.26	88.21	93.02	96.26	88.26
	0.26	1.81	0.79	0.54	0.69	0.39	2.08	0.48	0.45	0.71	0.36	1.66	1.58	1.03	0.85	0.78

Table 5.5 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 1996

Community-Only Residents¹

Indicator of Access to Care ²	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,013	1,119	4,446	4,157	1,607	11,329	1,772	11,554	5,602	728	19,657	1,547	2,094	1,554	827	6,022
	<i>117.622</i>	<i>44</i>	<i>109</i>	<i>97</i>	<i>46</i>	<i>155</i>	<i>73</i>	<i>148</i>	<i>100</i>	<i>29</i>	<i>185</i>	<i>58</i>	<i>88</i>	<i>66</i>	<i>33</i>	<i>125</i>

Continuity of Care

Length of Association with Usual Source of Care																
No usual source ³	7.24	9.95	9.34	6.49	6.58	7.97	6.27	6.33	5.17	3.50	5.89	14.53	11.18	7.79	4.79	10.30
	<i>0.27</i>	<i>1.17</i>	<i>0.93</i>	<i>0.54</i>	<i>0.88</i>	<i>0.43</i>	<i>0.84</i>	<i>0.47</i>	<i>0.56</i>	<i>0.86</i>	<i>0.31</i>	<i>1.49</i>	<i>1.51</i>	<i>1.08</i>	<i>0.81</i>	<i>0.76</i>
Less than 1 year	9.48	9.85	10.50	10.26	9.74	10.24	9.03	8.44	8.08	9.18	8.42	12.26	11.85	11.00	10.42	11.54
	<i>0.27</i>	<i>1.32</i>	<i>0.96</i>	<i>0.65</i>	<i>0.90</i>	<i>0.49</i>	<i>1.18</i>	<i>0.56</i>	<i>0.56</i>	<i>1.70</i>	<i>0.36</i>	<i>1.33</i>	<i>1.14</i>	<i>1.20</i>	<i>1.34</i>	<i>0.64</i>
1 to less than 3 years	18.42	22.81	18.87	17.89	16.12	18.51	20.84	18.00	17.58	16.25	18.07	20.62	19.70	18.66	17.87	19.42
	<i>0.39</i>	<i>2.05</i>	<i>1.18</i>	<i>0.77</i>	<i>1.24</i>	<i>0.61</i>	<i>1.64</i>	<i>0.81</i>	<i>0.86</i>	<i>1.52</i>	<i>0.57</i>	<i>1.52</i>	<i>1.46</i>	<i>1.63</i>	<i>1.62</i>	<i>0.86</i>
3 to less than 5 years	15.59	18.86	14.61	13.80	14.71	14.74	19.35	16.74	14.53	12.20	16.18	16.61	13.08	15.83	16.90	15.21
	<i>0.38</i>	<i>1.83</i>	<i>0.88</i>	<i>0.74</i>	<i>1.19</i>	<i>0.53</i>	<i>1.91</i>	<i>0.69</i>	<i>0.81</i>	<i>1.49</i>	<i>0.50</i>	<i>1.43</i>	<i>1.32</i>	<i>1.25</i>	<i>1.69</i>	<i>0.73</i>
5 years or more	49.27	38.52	46.69	51.55	52.85	48.53	44.51	50.49	54.64	58.88	51.44	35.98	44.20	46.73	50.02	43.53
	<i>0.57</i>	<i>2.14</i>	<i>1.32</i>	<i>1.14</i>	<i>1.65</i>	<i>0.72</i>	<i>2.02</i>	<i>1.23</i>	<i>0.98</i>	<i>2.51</i>	<i>0.82</i>	<i>1.78</i>	<i>2.19</i>	<i>1.97</i>	<i>2.49</i>	<i>1.07</i>

Source: Medicare Current Beneficiary Survey

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 residents* includes beneficiaries who resided in the community at the time of the round 16 interview (fall 1996), and beneficiaries who resided in the community at the time of the round 13 interview (fall 1995) who died prior to the round 16 interview
- 2 Responses for sample persons who died in 1996 prior to the Round 16 interview were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File).
- 3 The percentage of responses for "none" under "Usual Source of Care" differs from the percentage of responses for "no usual source" under "Length of Association with Usual Source of Care" because of differences in the number of missing responses for the two variables. See the entry *Missing values* in Appendix B for further explanation.
- 4 HMO stands for Health Maintenance Organization.
- 5 OPD stands for Outpatient Department; ER stands for Emergency Room.

Table 5.6 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 1996

Community-Only Residents¹

Measure of Satisfaction ²	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,013	1,119	4,446	4,157	1,607	11,329	1,772	11,554	5,602	728	19,657	1,547	2,094	1,554	827	6,022
	117.622	44	109	97	46	155	73	148	100	29	185	58	88	66	33	125
Beneficiaries as a Percent of Column Total³																
Quality of Care																
General Care																
Very Satisfied	30.44	21.51	29.95	27.35	25.40	27.52	22.39	35.78	33.21	26.28	33.49	21.46	27.29	26.88	29.16	25.95
	0.70	1.81	1.41	1.11	1.24	0.76	1.88	1.18	1.21	1.85	0.92	1.65	2.39	1.55	1.95	1.05
(Very) Unsatisfied	4.01	9.95	4.00	3.83	5.34	4.71	7.47	3.04	3.31	4.48	3.57	5.97	3.05	4.24	3.03	4.10
	0.17	1.54	0.56	0.46	0.69	0.34	1.01	0.29	0.38	0.79	0.23	0.86	0.80	0.75	0.79	0.46
Follow-up Care																
Very Satisfied	18.39	16.07	17.14	16.04	13.92	16.18	18.05	21.18	19.95	16.63	20.38	12.91	18.18	15.91	16.58	16.02
	0.49	1.49	1.23	0.80	1.18	0.66	1.85	0.87	0.86	1.64	0.67	1.14	1.57	1.54	1.63	0.83
(Very) Unsatisfied	3.09	7.36	3.52	2.66	3.18	3.54	5.15	2.47	2.69	2.30	2.77	5.81	2.18	2.91	2.04	3.28
	0.17	1.35	0.63	0.43	0.58	0.30	0.91	0.31	0.31	0.63	0.23	0.86	0.51	0.60	0.58	0.30
Access/Coordination of Care																
Availability																
Very Satisfied	11.04	9.39	10.82	8.55	10.16	9.75	10.74	11.96	12.12	10.07	11.82	10.58	10.86	10.91	11.66	10.91
	0.36	1.39	0.88	0.68	1.13	0.48	1.31	0.61	0.75	1.27	0.44	1.29	1.56	1.32	1.44	0.83
(Very) Unsatisfied	3.09	8.73	2.65	2.26	1.80	2.99	7.37	2.53	2.78	3.23	3.06	4.76	2.83	2.76	3.20	3.36
	0.17	1.17	0.44	0.36	0.48	0.25	1.18	0.26	0.34	0.85	0.25	0.78	0.78	0.56	0.72	0.40
Ease of Access to Doctor																
Very Satisfied	19.89	11.54	20.24	16.20	15.45	17.22	13.64	24.60	21.35	17.79	22.44	13.27	19.53	15.46	17.27	16.57
	0.58	1.38	1.31	0.81	1.27	0.67	1.60	0.98	0.99	1.78	0.76	1.32	1.95	1.27	1.51	0.90
(Very) Unsatisfied	5.74	14.22	5.56	6.85	7.88	7.22	10.57	3.58	4.83	4.60	4.60	7.82	5.28	7.42	6.64	6.67
	0.25	1.97	0.77	0.72	0.81	0.43	1.31	0.34	0.49	1.02	0.29	0.89	0.95	1.08	0.92	0.52
Can Obtain Care in Same Location																
Very Satisfied	14.79	12.66	15.51	12.99	11.67	13.77	11.06	17.55	14.16	11.85	15.79	11.59	16.13	10.73	15.02	13.43
	0.50	1.33	1.09	0.84	1.07	0.61	1.21	0.84	0.78	1.61	0.61	1.30	1.72	1.12	1.64	0.80
(Very) Unsatisfied	4.82	10.82	4.27	3.83	2.77	4.54	12.86	4.10	4.40	3.25	4.94	6.83	4.23	4.73	3.83	4.97
	0.20	1.81	0.60	0.43	0.55	0.34	1.63	0.34	0.47	0.92	0.29	0.88	0.83	1.04	1.00	0.55

Table 5.6 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 1996

Community-Only Residents¹

Measure of Satisfaction ²	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,013	1,119	4,446	4,157	1,607	11,329	1,772	11,554	5,602	728	19,657	1,547	2,094	1,554	827	6,022
	<i>117.622</i>	<i>44</i>	<i>109</i>	<i>97</i>	<i>46</i>	<i>155</i>	<i>73</i>	<i>148</i>	<i>100</i>	<i>29</i>	<i>185</i>	<i>58</i>	<i>88</i>	<i>66</i>	<i>33</i>	<i>125</i>
Beneficiaries as a Percent of Column Total³																
Relationship with Primary Doctor																
Information from Doctor																
Very Satisfied	17.99	14.54	17.87	15.24	12.91	15.88	17.01	21.24	18.68	14.32	19.88	13.22	17.59	15.26	16.72	15.75
	<i>0.52</i>	<i>1.68</i>	<i>1.23</i>	<i>0.84</i>	<i>1.01</i>	<i>0.65</i>	<i>1.59</i>	<i>0.88</i>	<i>0.86</i>	<i>1.52</i>	<i>0.67</i>	<i>1.06</i>	<i>1.70</i>	<i>1.50</i>	<i>1.71</i>	<i>0.82</i>
(Very) Unsatisfied	6.00	12.72	5.33	6.57	5.11	6.49	11.55	4.73	6.24	4.01	5.75	8.91	4.70	5.31	4.53	5.91
	<i>0.22</i>	<i>1.67</i>	<i>0.72</i>	<i>0.61</i>	<i>0.66</i>	<i>0.41</i>	<i>1.31</i>	<i>0.39</i>	<i>0.61</i>	<i>0.83</i>	<i>0.31</i>	<i>1.13</i>	<i>0.86</i>	<i>0.99</i>	<i>0.78</i>	<i>0.50</i>
Doctor's Concern for Overall Health																
Very Satisfied	19.74	18.50	20.30	17.12	15.54	18.28	19.48	22.38	19.89	15.79	21.17	15.19	19.56	17.11	19.62	17.82
	<i>0.46</i>	<i>2.04</i>	<i>1.42</i>	<i>0.96</i>	<i>1.22</i>	<i>0.73</i>	<i>1.84</i>	<i>0.83</i>	<i>0.81</i>	<i>1.66</i>	<i>0.60</i>	<i>1.23</i>	<i>1.83</i>	<i>1.47</i>	<i>1.74</i>	<i>0.89</i>
(Very) Unsatisfied	5.12	9.98	5.33	5.15	4.95	5.67	8.60	4.29	4.94	3.60	4.84	6.41	4.09	5.71	3.47	5.02
	<i>0.23</i>	<i>1.72</i>	<i>0.64</i>	<i>0.58</i>	<i>0.64</i>	<i>0.41</i>	<i>1.44</i>	<i>0.38</i>	<i>0.50</i>	<i>0.80</i>	<i>0.31</i>	<i>0.89</i>	<i>0.71</i>	<i>0.96</i>	<i>0.68</i>	<i>0.49</i>
Cost of Care																
Cost																
Very Satisfied	16.97	11.14	18.58	15.02	12.21	15.64	12.41	19.11	18.11	14.70	18.06	14.30	16.69	16.07	16.71	15.92
	<i>0.52</i>	<i>1.31</i>	<i>1.35</i>	<i>0.80</i>	<i>1.14</i>	<i>0.75</i>	<i>1.34</i>	<i>0.91</i>	<i>0.77</i>	<i>1.57</i>	<i>0.63</i>	<i>1.37</i>	<i>1.73</i>	<i>1.36</i>	<i>1.64</i>	<i>0.75</i>
(Very) Unsatisfied	12.84	24.27	12.27	11.20	10.50	12.81	26.02	10.79	11.10	11.51	12.28	20.79	14.18	11.95	9.82	14.72
	<i>0.37</i>	<i>2.27</i>	<i>1.02</i>	<i>0.76</i>	<i>1.06</i>	<i>0.61</i>	<i>1.64</i>	<i>0.56</i>	<i>0.71</i>	<i>1.62</i>	<i>0.45</i>	<i>1.86</i>	<i>1.62</i>	<i>1.30</i>	<i>1.18</i>	<i>0.88</i>

Source: Medicare Current Beneficiary Survey

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 residents* includes beneficiaries who resided in the community at the time of the round 16 interview (fall 1996), and beneficiaries who resided in the community at the time of the round 13 interview (fall 1995) who died prior to the round 16 interview
- 2 Responses for sample persons who died in 1996 prior to the Round 16 interview were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File).
- 3 Column percentages do not sum to 100 percent because the responses to "satisfied" and "no experience" are excluded from the table for all satisfaction variables.

Table 5.7 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 1996

Community-Only Residents¹

Indicator of Access to Care ²	Total ³	Indicators of Good Health			Indicators of Poor Health		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	37,013	15,755	21,469	12,464	10,125	2,676	7,704
	118	191	212	187	182	89	172
Beneficiaries as a Percent of Column Total							
Access to Care							
Usual Source of Care							
None ⁶	7.21	9.36	8.49	9.72	5.11	4.73	3.96
	0.27	0.49	0.38	0.54	0.38	0.72	0.36
Doctor's office	71.63	70.66	71.52	70.91	70.85	72.11	72.01
	0.78	0.99	0.88	1.02	0.94	1.38	1.06
Doctor's clinic	7.66	7.80	7.29	7.51	7.70	7.24	7.85
	0.61	0.72	0.68	0.75	0.66	1.38	0.71
HMO ⁷	5.80	6.83	6.42	7.00	4.03	4.27	4.07
	0.27	0.32	0.34	0.38	0.35	0.68	0.37
Hospital OPD/ER ⁸	2.71	1.72	2.18	1.62	4.48	3.74	4.07
	0.16	0.19	0.19	0.21	0.38	0.55	0.42
Other clinic/health center	4.99	3.62	4.11	3.25	7.83	7.92	8.03
	0.28	0.36	0.30	0.32	0.50	0.85	0.66
Difficulty Obtaining Care							
Yes	3.54	1.92	1.73	1.34	7.06	10.65	7.68
	0.15	0.17	0.14	0.17	0.40	1.01	0.49
No	96.46	98.08	98.27	98.66	92.94	89.35	92.32
	0.15	0.17	0.14	0.17	0.40	1.01	0.49
Delayed Care Due to Cost							
Yes	8.23	4.32	4.57	3.27	16.01	16.00	16.41
	0.26	0.32	0.25	0.27	0.65	1.42	0.88
No	91.77	95.68	95.43	96.73	83.99	84.00	83.59
	0.26	0.32	0.25	0.27	0.65	1.42	0.88

Table 5.7 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 1996

Community-Only Residents¹

Indicator of Access to Care ²	Total ³	Indicators of Good Health			Indicators of Poor Health		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	37,013	15,755	21,469	12,464	10,125	2,676	7,704
	<i>118</i>	<i>191</i>	<i>212</i>	<i>187</i>	<i>182</i>	<i>89</i>	<i>172</i>

Beneficiaries as a Percent of Column Total

Continuity of Care							
Length of Association with Usual Source of Care							
No usual source ⁶	7.24	9.39	8.50	9.74	5.14	4.79	3.98
	<i>0.27</i>	<i>0.49</i>	<i>0.38</i>	<i>0.54</i>	<i>0.38</i>	<i>0.73</i>	<i>0.36</i>
Less than 1 year	9.48	8.70	8.65	8.27	10.37	13.13	10.83
	<i>0.27</i>	<i>0.40</i>	<i>0.32</i>	<i>0.43</i>	<i>0.44</i>	<i>1.09</i>	<i>0.60</i>
1 to less than 3 years	18.42	17.16	17.39	16.48	20.04	20.19	20.61
	<i>0.39</i>	<i>0.56</i>	<i>0.53</i>	<i>0.61</i>	<i>0.68</i>	<i>1.39</i>	<i>0.79</i>
3 to less than 5 years	15.59	14.86	14.49	14.56	17.24	16.76	17.24
	<i>0.38</i>	<i>0.59</i>	<i>0.47</i>	<i>0.61</i>	<i>0.65</i>	<i>1.22</i>	<i>0.78</i>
5 years or more	49.27	49.88	50.97	50.95	47.21	45.14	47.32
	<i>0.57</i>	<i>0.83</i>	<i>0.72</i>	<i>0.94</i>	<i>0.89</i>	<i>1.61</i>	<i>1.09</i>

Source: Medicare Current Beneficiary Survey

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 residents* includes beneficiaries who resided in the community at the time of the round 16 interview (fall 1996), and beneficiaries who resided in the community at the time of the round 13 interview (fall 1995) who died prior to the round 16 interview
- 2 Responses for sample persons who died in 1996 prior to the Round 16 interview were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File).
- 3 "Indicators of Good Health" and "Indicators of Poor Health" do not contain mutually exclusive categories. Therefore, beneficiary counts sum to more than the total number of Medicare beneficiaries.
- 4 "No Functional Limitations" means that the beneficiary did not report limitations in any instrumental activities of daily living (IADLs) or activities of daily living (ADLs). See Appendix B for definitions of IADL and ADL.
- 5 ADL stands for Activity of Daily Living.
- 6 The percentage of responses for "none" under "Usual Source of Care" differs from the percentage of responses for "no usual source" under "Length of Association with Usual Source of Care" because of differences in the number of missing responses for the two variables. See the entry *Missing values* in Appendix B for further explanation.
- 7 HMO stands for Health Maintenance Organization.
- 8 OPD stands for Outpatient Department; ER stands for Emergency Room.

Table 5.8 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 1996

Community-Only Residents¹

Measure of Satisfaction ²	Total ³	Indicators of Good Health			Indicators of Poor Health		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	37,013	15,755	21,469	12,464	10,125	2,676	7,704
	118	191	212	187	182	89	172
Beneficiaries as a Percent of Column Total⁶							
Quality of Care							
General Care							
Very Satisfied	30.44	38.62	32.19	38.16	22.22	25.86	23.00
	0.70	0.91	0.81	1.01	0.80	1.44	0.88
(Very) Unsatisfied	4.01	2.22	2.71	1.96	7.34	9.18	7.94
	0.17	0.19	0.19	0.22	0.42	0.99	0.52
Follow-up Care							
Very Satisfied	18.39	22.39	19.12	22.29	14.85	15.94	15.64
	0.49	0.81	0.62	0.86	0.76	1.44	0.91
(Very) Unsatisfied	3.09	1.73	1.95	1.34	5.29	7.70	5.89
	0.17	0.19	0.17	0.20	0.40	0.95	0.50
Access/Coordination of Care							
Availability							
Very Satisfied	11.04	12.45	11.05	12.13	10.52	12.32	11.26
	0.36	0.54	0.43	0.55	0.62	1.18	0.65
(Very) Unsatisfied	3.09	1.98	2.10	1.81	5.09	6.19	5.71
	0.17	0.20	0.20	0.24	0.38	0.76	0.47
Ease of Access to Doctor							
Very Satisfied	19.89	25.30	22.39	25.91	13.25	14.06	13.22
	0.58	0.84	0.75	0.95	0.71	1.26	0.76
(Very) Unsatisfied	5.74	3.34	3.11	2.45	10.38	15.01	11.26
	0.25	0.31	0.26	0.33	0.58	1.22	0.62
Can Obtain Care in Same Location							
Very Satisfied	14.79	18.78	16.09	18.99	11.12	12.44	11.62
	0.50	0.71	0.57	0.73	0.82	1.18	0.93
(Very) Unsatisfied	4.82	2.88	3.17	2.57	8.13	10.26	8.69
	0.20	0.27	0.23	0.27	0.53	1.03	0.67

Table 5.8 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 1996

Community-Only Residents¹

Measure of Satisfaction ²	Total ³	Indicators of Good Health			Indicators of Poor Health		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	37,013	15,755	21,469	12,464	10,125	2,676	7,704
	<i>118</i>	<i>191</i>	<i>212</i>	<i>187</i>	<i>182</i>	<i>89</i>	<i>172</i>
Beneficiaries as a Percent of Column Total⁶							
Relationship with Primary Doctor							
Information from Doctor							
Very Satisfied	17.99	23.29	19.70	23.57	13.56	14.39	13.81
	<i>0.52</i>	<i>0.78</i>	<i>0.62</i>	<i>0.80</i>	<i>0.68</i>	<i>1.27</i>	<i>0.72</i>
(Very) Unsatisfied	6.00	3.31	3.81	2.86	10.88	11.96	11.45
	<i>0.22</i>	<i>0.26</i>	<i>0.20</i>	<i>0.27</i>	<i>0.60</i>	<i>1.12</i>	<i>0.65</i>
Doctor's Concern for Overall Health							
Very Satisfied	19.74	24.48	20.61	24.45	15.48	15.42	16.10
	<i>0.46</i>	<i>0.73</i>	<i>0.61</i>	<i>0.82</i>	<i>0.70</i>	<i>1.30</i>	<i>0.74</i>
(Very) Unsatisfied	5.12	3.34	3.71	3.06	8.44	10.09	9.19
	<i>0.23</i>	<i>0.32</i>	<i>0.28</i>	<i>0.35</i>	<i>0.51</i>	<i>0.95</i>	<i>0.60</i>
Cost of Care							
Cost							
Very Satisfied	16.97	21.72	18.76	22.21	12.42	12.13	12.47
	<i>0.52</i>	<i>0.75</i>	<i>0.65</i>	<i>0.81</i>	<i>0.74</i>	<i>1.11</i>	<i>0.87</i>
(Very) Unsatisfied	12.84	8.88	9.27	7.63	20.86	25.30	21.91
	<i>0.37</i>	<i>0.46</i>	<i>0.43</i>	<i>0.54</i>	<i>0.70</i>	<i>1.41</i>	<i>0.84</i>

Source: Medicare Current Beneficiary Survey

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 residents* includes beneficiaries who resided in the community at the time of the round 16 interview (fall 1996), and beneficiaries who resided in the community at the time of the round 13 interview (fall 1995) who died prior to the round 16 interview
- 2 Responses for sample persons who died in 1996 prior to the Round 16 interview were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File).
- 3 "Indicators of Good Health" and "Indicators of Poor Health" do not contain mutually exclusive categories. Therefore, beneficiary counts sum to more than the total number of Medicare beneficiaries.
- 4 "No Functional Limitations" means that the beneficiary did not report limitations in any instrumental activities of daily living (IADLs) or activities of daily living (ADLs). See Appendix B for definitions of IADL and ADL.
- 5 ADL stands for Activity of Daily Living.
- 6 Column percentages do not sum to 100 percent because the responses for "satisfied" and "no experience" are excluded from the table for all satisfaction variables.

Table 5.9 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 1996

Community-Only Residents¹

Indicator of Access to Care ²	Total	Medicare Risk HMO ²	Supplemental Health Insurance				Medicare Fee-For-Service Only	Other
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance		
Beneficiaries (in 000s)	37,013	4,133	4,660	10,206	11,452	1,577	4,509	476
	118	125	147	163	216	87	118	48
Beneficiaries as a Percent of Column Total								
Access to Care								
Usual Source of Care								
None ³	7.21	3.51	8.50	5.91	5.68	4.24	17.13	7.22
	0.27	0.57	0.65	0.50	0.42	1.04	1.15	2.54
Doctor's office	71.63	49.00	67.61	80.28	79.89	81.45	53.03	66.61
	0.78	1.89	1.26	1.22	0.92	1.90	1.66	4.14
Doctor's clinic	7.66	6.63	7.29	8.33	8.04	9.21	5.94	8.11
	0.61	0.64	0.68	0.97	0.80	1.60	0.74	2.27
HMO ⁴	5.80	37.47	0.56	1.35	2.10	1.48	3.53	1.84
	0.27	1.71	0.18	0.31	0.24	0.63	0.58	1.36
Hospital OPD/ER ⁵	2.71	1.42	8.23	1.23	1.25	1.30	5.50	5.42
	0.16	0.34	0.69	0.21	0.19	0.48	0.66	1.44
Other clinic/health center	4.99	1.97	7.82	2.89	3.05	2.31	14.86	10.81
	0.28	0.31	0.67	0.38	0.38	0.74	0.91	2.98
Difficulty Obtaining Care								
Yes	3.54	5.00	6.25	1.50	1.95	2.97	7.91	6.71
	0.15	0.43	0.53	0.21	0.26	0.83	0.62	1.65
No	96.46	95.00	93.75	98.50	98.05	97.03	92.09	93.29
	0.15	0.43	0.53	0.21	0.26	0.83	0.62	1.65
Delayed Care Due to Cost								
Yes	8.23	4.19	12.72	6.33	4.79	4.46	21.03	14.48
	0.26	0.52	0.85	0.37	0.37	0.99	1.14	2.17
No	91.77	95.81	87.28	93.67	95.21	95.54	78.97	85.52
	0.26	0.52	0.85	0.37	0.37	0.99	1.14	2.17

Table 5.9 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 1996

Community-Only Residents¹

Indicator of Access to Care ²	Total	Medicare Risk HMO ²	Supplemental Health Insurance				Medicare Fee-For-Service Only	Other
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance		
Beneficiaries (in 000s)	37,013	4,133	4,660	10,206	11,452	1,577	4,509	476
	<i>118</i>	<i>125</i>	<i>147</i>	<i>163</i>	<i>216</i>	<i>87</i>	<i>118</i>	<i>48</i>
Beneficiaries as a Percent of Column Total								
Continuity of Care								
Length of Association with Usual Source of Care								
No usual source ³	7.24	3.52	8.58	5.93	5.69	4.25	17.25	7.22
	<i>0.27</i>	<i>0.57</i>	<i>0.66</i>	<i>0.50</i>	<i>0.42</i>	<i>1.04</i>	<i>1.16</i>	<i>2.54</i>
Less than 1 year	9.48	20.10	10.17	7.24	7.32	7.51	10.23	10.04
	<i>0.27</i>	<i>0.99</i>	<i>0.70</i>	<i>0.41</i>	<i>0.51</i>	<i>1.30</i>	<i>0.83</i>	<i>2.33</i>
1 to less than 3 years	18.42	29.86	20.33	16.83	16.07	12.72	17.55	18.90
	<i>0.39</i>	<i>0.97</i>	<i>0.87</i>	<i>0.61</i>	<i>0.70</i>	<i>1.68</i>	<i>1.07</i>	<i>3.14</i>
3 to less than 5 years	15.59	16.46	17.37	15.59	14.91	16.33	13.86	20.95
	<i>0.38</i>	<i>0.74</i>	<i>0.82</i>	<i>0.79</i>	<i>0.65</i>	<i>1.81</i>	<i>0.87</i>	<i>2.87</i>
5 years or more	49.27	30.05	43.55	54.41	56.02	59.18	41.11	42.89
	<i>0.57</i>	<i>1.43</i>	<i>1.11</i>	<i>0.92</i>	<i>0.80</i>	<i>2.57</i>	<i>1.26</i>	<i>3.50</i>

Source: Medicare Current Beneficiary Survey

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 residents* includes beneficiaries who resided in the community at the time of the round 16 interview (fall 1996), and beneficiaries who resided in the community at the time of the round 13 interview (fall 1995) who died prior to the round 16 interview
- 2 Responses for sample persons who died in 1996 prior to the Round 16 interview were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File).
- 3 The percentage of responses for "none" under "Usual Source of Care" differs from the percentage of responses for "no usual source" under "Length of Association with Usual Source of Care" because of differences in the number of missing responses for the two variables. See the entry *Missing values* in Appendix B for further explanation.
- 4 HMO stands for Health Maintenance Organization.
- 5 OPD stands for Outpatient Department; ER stands for Emergency Room.

Table 5.10 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 1996

Community-Only Residents¹

Measure of Satisfaction ²	Total	Medicare Risk HMO ²	Supplemental Health Insurance			Both Types of Private Insurance	Medicare Fee-For Service Only	Other
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance			
Beneficiaries (in 000s)	37,013	4,133	4,660	10,206	11,452	1,577	4,509	476
	118	125	147	163	216	87	118	48
Beneficiaries as a Percent of Column Total⁴								
Quality of Care								
General Care								
Very Satisfied	30.44	33.06	21.56	31.94	34.17	40.04	21.29	26.71
	0.70	1.12	1.02	0.98	1.20	2.37	1.14	4.16
(Very) Unsatisfied	4.01	4.49	5.79	3.17	3.30	2.30	5.89	5.12
	0.17	0.44	0.57	0.24	0.34	0.68	0.59	1.37
Follow-up Care								
Very Satisfied	18.39	21.14	13.82	17.41	20.98	24.76	14.45	13.51
	0.49	1.03	0.79	0.71	0.80	2.10	1.00	3.26
(Very) Unsatisfied	3.09	3.31	4.39	2.62	2.43	2.79	4.47	2.24
	0.17	0.28	0.57	0.30	0.24	0.80	0.49	0.93
Access/Coordination of Care								
Availability								
Very Satisfied	11.04	13.01	9.60	10.37	12.18	15.16	8.03	9.68
	0.36	0.82	0.84	0.57	0.68	1.92	0.75	2.57
(Very) Unsatisfied	3.09	3.20	4.25	2.54	2.56	2.55	4.40	4.81
	0.17	0.45	0.48	0.22	0.30	0.71	0.49	1.97
Ease of Access to Doctor								
Very Satisfied	19.89	25.89	11.69	20.10	22.84	26.50	13.03	14.72
	0.58	1.28	0.78	0.73	0.95	2.34	1.09	3.28
(Very) Unsatisfied	5.74	5.30	9.79	4.55	4.42	4.28	8.20	8.81
	0.25	0.48	0.80	0.38	0.35	0.96	0.72	2.16
Can Obtain Care in Same Location								
Very Satisfied	14.79	21.77	11.72	13.25	16.13	15.31	11.62	12.75
	0.50	0.99	0.90	0.75	0.80	1.73	0.90	3.54
(Very) Unsatisfied	4.82	4.23	5.87	4.37	4.45	5.18	6.10	5.46
	0.20	0.38	0.57	0.29	0.39	1.06	0.61	1.29

Table 5.10 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 1996

Community-Only Residents¹

Measure of Satisfaction ²	Total	Medicare Risk HMO ²	Supplemental Health Insurance				Medicare Fee-For Service Only	Other
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance		
Beneficiaries (in 000s)	37,013	4,133	4,660	10,206	11,452	1,577	4,509	476
	<i>118</i>	<i>125</i>	<i>147</i>	<i>163</i>	<i>216</i>	<i>87</i>	<i>118</i>	<i>48</i>
Relationship with Primary Doctor								
Information from Doctor								
Very Satisfied	17.99	21.99	13.69	17.28	19.61	26.24	13.48	16.25
	<i>0.52</i>	<i>1.13</i>	<i>0.93</i>	<i>0.69</i>	<i>0.96</i>	<i>1.95</i>	<i>1.01</i>	<i>3.62</i>
(Very) Unsatisfied	6.00	5.50	8.14	5.63	5.20	4.91	7.50	5.92
	<i>0.22</i>	<i>0.54</i>	<i>0.66</i>	<i>0.38</i>	<i>0.42</i>	<i>0.97</i>	<i>0.64</i>	<i>1.85</i>
Doctor's Concern for Overall Health								
Very Satisfied	19.74	22.68	14.45	19.14	22.33	28.00	14.55	18.11
	<i>0.46</i>	<i>1.04</i>	<i>0.73</i>	<i>0.78</i>	<i>0.86</i>	<i>2.36</i>	<i>0.96</i>	<i>3.79</i>
(Very) Unsatisfied	5.12	5.89	5.71	4.45	4.64	3.53	7.17	4.58
	<i>0.23</i>	<i>0.57</i>	<i>0.64</i>	<i>0.39</i>	<i>0.42</i>	<i>0.84</i>	<i>0.55</i>	<i>1.43</i>
Cost of Care								
Cost								
Very Satisfied	16.97	26.29	16.27	13.34	19.22	22.93	9.80	13.88
	<i>0.52</i>	<i>1.19</i>	<i>1.08</i>	<i>0.65</i>	<i>0.87</i>	<i>1.97</i>	<i>0.83</i>	<i>2.71</i>
(Very) Unsatisfied	12.84	5.77	11.66	14.51	10.29	8.51	23.93	21.63
	<i>0.37</i>	<i>0.51</i>	<i>0.93</i>	<i>0.65</i>	<i>0.58</i>	<i>1.27</i>	<i>1.17</i>	<i>2.64</i>

Source: Medicare Current Beneficiary Survey

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 residents* includes beneficiaries who resided in the community at the time of the round 16 interview (fall 1996), and beneficiaries who resided in the community at the time of the round 13 interview (fall 1995) who died prior to the round 16 interview
- 2 Responses for sample persons who died in 1996 prior to the Round 16 interview were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File).
- 3 HMO stands for Health Maintenance Organization.
- 4 Column percentages do not sum to 100 percent because the responses to "satisfied" and "no experience" are excluded from the table for all satisfaction variables.