

Table 5.1 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 1996 (1 of 2)

Community-Only Residents¹

Indicator of Access to Care ²	Total	All Medicare Beneficiaries				Male					Female				
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	36,631	4,297	18,711	10,758	2,864	2,468	8,538	4,308	917	16,230	1,830	10,173	6,450	1,947	20,400
	144	88	172	145	62	75	151	93	36	147	51	153	115	58	149
Beneficiaries as a Percentage of Column Total Access to Care															
Usual Source of Care															
None ³	7.22	9.59	7.66	6.02	5.30	10.96	8.91	7.22	5.74	8.59	7.73	6.62	5.23	5.09	6.13
	0.33	0.84	0.51	0.51	0.66	1.07	0.79	0.96	1.22	0.52	1.30	0.59	0.55	0.71	0.37
Doctor's office	72.47	65.34	71.15	75.96	78.58	60.45	67.20	73.14	77.21	68.33	71.95	74.45	77.84	79.22	75.76
	0.74	1.26	0.89	1.14	1.18	1.85	1.26	1.70	2.09	0.95	2.03	1.01	1.21	1.45	0.83
Doctor's clinic	6.76	7.13	6.77	7.02	5.21	6.85	6.64	7.13	4.33	6.67	7.51	6.88	6.95	5.63	6.84
	0.56	0.71	0.59	0.84	0.72	0.80	0.70	1.03	0.82	0.58	1.16	0.74	0.89	0.97	0.66
HMO ⁴	6.24	3.10	7.35	5.92	4.80	2.76	7.06	6.05	4.82	6.02	3.56	7.60	5.83	4.80	6.41
	0.37	0.64	0.53	0.56	0.68	0.81	0.74	0.92	1.09	0.51	0.90	0.61	0.73	0.82	0.42
Hospital OPD/ER ⁵	2.40	5.79	2.13	1.59	2.19	6.45	1.86	1.57	2.55	2.52	4.89	2.36	1.61	2.01	2.31
	0.20	0.66	0.28	0.23	0.39	1.02	0.34	0.33	0.73	0.25	0.95	0.42	0.31	0.44	0.28
Other clinic/health center	4.91	9.07	4.94	3.48	3.92	12.53	8.33	4.89	5.35	7.88	4.38	2.09	2.55	3.25	2.55
	0.31	0.98	0.39	0.38	0.57	1.45	0.72	0.56	1.33	0.54	0.95	0.36	0.43	0.56	0.21
Difficulty Obtaining Care															
Yes	3.26	10.42	2.68	1.73	2.23	10.12	2.60	1.15	0.97	3.26	10.84	2.74	2.11	2.83	3.26
	0.20	0.84	0.33	0.24	0.41	0.98	0.43	0.33	0.51	0.27	1.32	0.44	0.34	0.55	0.27
No	96.74	89.58	97.32	98.27	97.77	89.88	97.40	98.85	99.03	96.74	89.16	97.26	97.89	97.17	96.74
	0.20	0.84	0.33	0.24	0.41	0.98	0.43	0.33	0.51	0.27	1.32	0.44	0.34	0.55	0.27
Delayed Care Due to Cost															
Yes	7.55	22.89	6.54	4.49	2.97	21.27	5.53	4.46	2.11	7.42	25.09	7.38	4.51	3.37	7.66
	0.31	1.38	0.44	0.48	0.45	1.83	0.54	0.62	0.64	0.43	1.68	0.60	0.53	0.57	0.39
No	92.45	77.11	93.46	95.51	97.03	78.73	94.47	95.54	97.89	92.58	74.91	92.62	95.49	96.63	92.34
	0.31	1.38	0.44	0.48	0.45	1.83	0.54	0.62	0.64	0.43	1.68	0.60	0.53	0.57	0.39

Table 5.1 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 1996 (2 of 2)

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)	36,631	4,297	18,711	10,758	2,864	2,468	8,538	4,308	917	16,230	1,830	10,173	6,450	1,947	20,400
	<i>144</i>	<i>88</i>	<i>172</i>	<i>145</i>	<i>62</i>	<i>75</i>	<i>151</i>	<i>93</i>	<i>36</i>	<i>147</i>	<i>51</i>	<i>153</i>	<i>115</i>	<i>58</i>	<i>149</i>
Beneficiaries as a Percentage of Column Total															
Continuity of Care															
Length of Association with Usual Source of Care															
No usual source ³	7.25	9.63	7.68	6.06	5.40	11.03	8.92	7.25	5.81	8.62	7.75	6.63	5.26	5.21	6.16
	<i>0.33</i>	<i>0.84</i>	<i>0.51</i>	<i>0.51</i>	<i>0.68</i>	<i>1.07</i>	<i>0.79</i>	<i>0.97</i>	<i>1.24</i>	<i>0.52</i>	<i>1.30</i>	<i>0.59</i>	<i>0.55</i>	<i>0.73</i>	<i>0.37</i>
Less than 1 year	9.59	11.25	9.30	9.27	10.28	11.86	9.62	8.40	9.63	9.63	10.43	9.04	9.84	10.58	9.56
	<i>0.31</i>	<i>1.03</i>	<i>0.42</i>	<i>0.53</i>	<i>0.90</i>	<i>1.40</i>	<i>0.78</i>	<i>0.83</i>	<i>1.57</i>	<i>0.54</i>	<i>1.44</i>	<i>0.68</i>	<i>0.71</i>	<i>1.03</i>	<i>0.47</i>
1 to less than 3 years	18.25	21.25	18.33	17.35	16.67	22.16	17.64	16.55	19.00	18.11	20.02	18.91	17.89	15.56	18.37
	<i>0.48</i>	<i>1.23</i>	<i>0.74</i>	<i>0.69</i>	<i>1.08</i>	<i>1.70</i>	<i>1.09</i>	<i>1.13</i>	<i>1.87</i>	<i>0.71</i>	<i>2.09</i>	<i>0.94</i>	<i>0.92</i>	<i>1.29</i>	<i>0.60</i>
3 to less than 5 years	15.63	17.76	15.51	15.42	14.08	16.15	14.97	15.13	12.57	15.05	19.93	15.95	15.61	14.80	16.09
	<i>0.46</i>	<i>1.08</i>	<i>0.69</i>	<i>0.64</i>	<i>0.91</i>	<i>1.40</i>	<i>0.90</i>	<i>1.23</i>	<i>1.72</i>	<i>0.65</i>	<i>1.86</i>	<i>0.96</i>	<i>0.83</i>	<i>1.23</i>	<i>0.60</i>
5 years or more	49.27	40.11	49.18	51.91	53.57	38.80	48.84	52.68	52.99	48.58	41.87	49.46	51.40	53.85	49.81
	<i>0.65</i>	<i>1.25</i>	<i>0.96</i>	<i>0.90</i>	<i>1.66</i>	<i>1.87</i>	<i>1.44</i>	<i>1.42</i>	<i>2.36</i>	<i>0.94</i>	<i>1.82</i>	<i>1.21</i>	<i>1.19</i>	<i>2.04</i>	<i>0.79</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File, CY 1996 Access to Care Public Use File, supplemented by CY 1995 and CY 1997 Access to Care Public Use Files as needed to fill in missing data for sample persons not in the CY 1996 file.

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 Responses for sample persons not interviewed in Round 16 (i.e., the 1996 Access to Care Public Use File) were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File) or from their Round 19 interview (i.e., the 1997 Access to Care Public Use File).
- 3 The percentages for *none* under *Usual Source of Care* differs from the percentages 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 (1 of 2)

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)	36,631	4,297	18,711	10,758	2,864	2,468	8,538	4,308	917	16,230	1,830	10,173	6,450	1,947	20,400
	144	88	172	145	62	75	151	93	36	147	51	153	115	58	149
Beneficiaries as a Percentage of Column Total³															
Quality of Care															
General Care															
Very satisfied	28.86	21.40	32.11	27.54	23.63	20.78	32.51	28.68	23.37	29.20	22.24	31.77	26.78	23.75	28.58
	0.81	1.23	1.16	1.02	1.03	1.59	1.39	1.43	2.07	0.94	1.96	1.44	1.14	1.20	0.96
(Very) Unsatisfied	3.46	7.11	2.76	3.11	3.99	6.83	2.55	3.36	3.66	3.47	7.49	2.93	2.94	4.14	3.45
	0.18	0.71	0.25	0.31	0.51	0.94	0.39	0.55	0.90	0.28	1.09	0.38	0.39	0.70	0.26
Follow-up Care															
Very satisfied	17.46	15.60	19.09	16.34	13.78	14.30	20.46	17.27	13.56	18.29	17.36	17.93	15.72	13.89	16.80
	0.52	1.13	0.74	0.78	1.00	1.51	1.13	1.15	1.62	0.72	1.68	0.90	1.01	1.16	0.66
(Very) Unsatisfied	2.82	5.06	2.39	2.82	2.24	5.73	2.14	2.98	1.28	2.85	4.16	2.60	2.72	2.69	2.79
	0.19	0.58	0.26	0.32	0.36	0.83	0.34	0.47	0.53	0.27	0.81	0.35	0.39	0.50	0.23
Access/Coordination of Care															
Availability (Night/Weekends)															
Very satisfied	10.19	10.30	10.82	9.33	9.14	10.72	11.95	9.66	8.50	10.96	9.74	9.88	9.12	9.44	9.58
	0.39	1.01	0.58	0.56	0.83	1.42	0.78	0.71	1.28	0.53	1.51	0.73	0.74	0.96	0.48
(Very) Unsatisfied	2.70	6.35	2.28	2.20	1.90	6.12	2.15	2.44	1.50	2.79	6.64	2.39	2.04	2.09	2.63
	0.19	0.67	0.25	0.31	0.42	0.85	0.35	0.50	0.53	0.26	1.22	0.35	0.40	0.53	0.24
Ease of Access to Doctor															
Very satisfied	18.77	11.62	21.93	17.19	14.72	10.51	22.29	17.46	16.45	18.90	13.10	21.62	17.01	13.90	18.67
	0.61	1.10	0.86	0.76	1.09	1.24	1.19	1.14	1.93	0.79	1.76	1.04	1.13	1.14	0.76
(Very) Unsatisfied	5.54	10.51	4.31	5.74	5.38	9.12	4.25	4.34	3.03	4.94	12.39	4.37	6.67	6.49	6.01
	0.34	0.91	0.40	0.48	0.57	1.09	0.52	0.64	0.85	0.41	1.55	0.48	0.73	0.76	0.44
Can Obtain Care in Same Location															
Very satisfied	13.99	11.34	16.11	12.10	11.13	10.80	15.92	11.93	10.78	13.80	12.07	16.27	12.22	11.30	14.14
	0.57	1.05	0.86	0.65	0.93	1.45	0.94	0.91	1.76	0.66	1.43	1.09	0.87	1.07	0.68
(Very) Unsatisfied	4.52	9.58	4.05	3.83	2.67	9.46	3.93	2.74	3.12	4.40	9.74	4.15	4.55	2.45	4.61
	0.30	1.03	0.40	0.41	0.40	1.40	0.56	0.44	0.78	0.42	1.42	0.51	0.57	0.49	0.34

Table 5.2 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 1996 (2 of 2)

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)	36,631	4,297	18,711	10,758	2,864	2,468	8,538	4,308	917	16,230	1,830	10,173	6,450	1,947	20,400
	<i>144</i>	<i>88</i>	<i>172</i>	<i>145</i>	<i>62</i>	<i>75</i>	<i>151</i>	<i>93</i>	<i>36</i>	<i>147</i>	<i>51</i>	<i>153</i>	<i>115</i>	<i>58</i>	<i>149</i>
Beneficiaries as a Percentage of Column Total³															
Relationship with Primary Doctor															
Information from Doctor															
Very satisfied	17.41	14.83	19.70	15.52	13.35	14.14	20.29	15.55	13.33	17.72	15.75	19.20	15.50	13.35	17.17
	<i>0.60</i>	<i>1.11</i>	<i>0.88</i>	<i>0.72</i>	<i>0.90</i>	<i>1.56</i>	<i>1.10</i>	<i>1.04</i>	<i>1.75</i>	<i>0.71</i>	<i>1.63</i>	<i>1.14</i>	<i>0.93</i>	<i>1.05</i>	<i>0.76</i>
(Very) Unsatisfied	5.48	9.53	4.57	5.96	3.65	9.08	3.54	6.05	2.21	4.97	10.12	5.44	5.90	4.34	5.90
	<i>0.25</i>	<i>0.80</i>	<i>0.35</i>	<i>0.50</i>	<i>0.47</i>	<i>1.14</i>	<i>0.46</i>	<i>0.67</i>	<i>0.71</i>	<i>0.31</i>	<i>1.14</i>	<i>0.51</i>	<i>0.61</i>	<i>0.60</i>	<i>0.34</i>
Doctor's Concern for Overall Health															
Very satisfied	19.00	17.38	20.99	16.97	15.98	16.14	21.52	16.91	14.86	19.11	19.05	20.54	17.01	16.52	18.91
	<i>0.56</i>	<i>1.35</i>	<i>0.76</i>	<i>0.78</i>	<i>0.98</i>	<i>1.82</i>	<i>1.12</i>	<i>1.03</i>	<i>1.90</i>	<i>0.78</i>	<i>1.79</i>	<i>0.87</i>	<i>1.06</i>	<i>1.15</i>	<i>0.63</i>
(Very) Unsatisfied	4.87	7.17	4.47	4.90	3.98	7.20	4.52	4.33	3.28	4.80	7.13	4.44	5.28	4.31	4.93
	<i>0.24</i>	<i>0.70</i>	<i>0.39</i>	<i>0.42</i>	<i>0.61</i>	<i>0.86</i>	<i>0.54</i>	<i>0.59</i>	<i>0.91</i>	<i>0.32</i>	<i>1.17</i>	<i>0.50</i>	<i>0.52</i>	<i>0.71</i>	<i>0.32</i>
Cost of Care															
Cost															
Very Satisfied	16.48	12.43	18.10	16.18	13.00	11.81	19.41	16.26	13.93	17.12	13.25	17.01	16.13	12.56	15.98
	<i>0.56</i>	<i>0.98</i>	<i>0.77</i>	<i>0.73</i>	<i>1.01</i>	<i>1.38</i>	<i>0.94</i>	<i>1.02</i>	<i>1.78</i>	<i>0.60</i>	<i>1.49</i>	<i>1.00</i>	<i>0.99</i>	<i>1.20</i>	<i>0.72</i>
(Very) Unsatisfied	11.83	21.26	10.86	10.42	9.38	21.13	9.79	10.00	10.23	11.58	21.43	11.76	10.70	8.97	12.02
	<i>0.39</i>	<i>1.32</i>	<i>0.55</i>	<i>0.65</i>	<i>0.90</i>	<i>1.75</i>	<i>0.74</i>	<i>0.90</i>	<i>1.58</i>	<i>0.54</i>	<i>1.84</i>	<i>0.86</i>	<i>0.86</i>	<i>1.09</i>	<i>0.50</i>

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 Responses for sample persons not interviewed in Round 16 (i.e., the 1996 Access to Care Public Use File) were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File) or from their Round 19 interview (i.e., the 1997 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 (1 of 2)

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)	36,631	2,871	15,642	9,238	2,431	30,183	801	1,442	784	228	3,256	491	1,126	477	150	2,244
	144	79	193	142	59	199	39	71	43	20	77	41	70	38	21	99
Beneficiaries as a Percentage of Column Total Access to Care																
Usual Source of Care																
None ⁴	7.22	9.27	7.58	5.55	5.20	6.93	10.45	8.09	7.70	4.42	8.31	9.15	8.49	9.94	8.43	8.94
	0.33	1.09	0.49	0.49	0.71	0.34	1.57	1.51	2.07	1.84	0.92	2.85	3.35	3.16	2.84	1.76
Doctor's office	72.47	70.05	73.93	78.06	79.61	75.29	53.15	58.03	68.54	75.53	60.62	58.83	53.18	52.38	68.65	55.25
	0.74	1.71	0.98	1.16	1.27	0.83	3.24	3.47	3.06	3.64	2.05	3.86	4.47	4.52	6.70	2.37
Doctor's clinic	6.76	6.66	7.20	7.41	5.49	7.08	9.84	4.38	4.08	3.40	5.57	3.83	2.72	4.83	1.12	3.30
	0.56	0.80	0.69	0.92	0.81	0.65	2.04	1.41	1.03	1.52	0.84	1.28	1.16	1.51	1.11	0.75
HMO ⁵	6.24	2.54	6.38	5.34	4.80	5.57	3.23	6.99	6.40	2.76	5.63	6.31	18.04	13.46	8.44	13.91
	0.37	0.60	0.56	0.57	0.73	0.40	1.43	1.57	2.10	1.33	0.83	2.76	2.98	2.80	3.89	1.62
Hospital OPD/ER ⁶	2.40	2.89	1.09	1.04	1.42	1.27	13.49	9.84	6.63	8.78	9.87	11.94	7.45	4.43	2.65	7.44
	0.20	0.60	0.22	0.21	0.31	0.15	2.43	1.80	1.76	2.11	1.17	3.28	1.82	1.29	1.68	1.11
Other clinic/health center	4.91	8.60	3.81	2.60	3.48	3.86	9.83	12.67	6.65	5.11	9.99	9.95	10.12	14.96	10.71	11.16
	0.31	1.18	0.40	0.34	0.57	0.33	1.55	2.37	1.46	2.02	1.18	2.06	2.27	3.73	5.23	1.54
Difficulty Obtaining Care																
Yes	3.26	10.76	2.58	1.41	1.93	2.94	10.45	3.06	5.04	4.62	5.44	10.18	2.93	2.93	2.90	4.49
	0.20	1.01	0.36	0.24	0.39	0.22	1.67	0.92	1.16	2.04	0.60	2.42	1.18	1.33	1.72	0.82
No	96.74	89.24	97.42	98.59	98.07	97.06	89.55	96.94	94.96	95.38	94.56	89.82	97.07	97.07	97.10	95.51
	0.20	1.01	0.36	0.24	0.39	0.22	1.67	0.92	1.16	2.04	0.60	2.42	1.18	1.33	1.72	0.82
Delayed Care Due to Cost																
Yes	7.55	24.92	5.75	4.42	2.61	6.90	16.97	11.01	7.70	7.17	11.39	22.53	10.33	1.70	2.56	10.58
	0.31	1.58	0.44	0.53	0.45	0.28	2.17	2.08	1.88	2.20	1.25	4.72	2.10	1.53	2.20	1.69
No	92.45	75.08	94.25	95.58	97.39	93.10	83.03	88.99	92.30	92.83	88.61	77.47	89.67	98.30	97.44	89.42
	0.31	1.58	0.44	0.53	0.45	0.28	2.17	2.08	1.88	2.20	1.25	4.72	2.10	1.53	2.20	1.69

Table 5.3 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 1996 (2 of 2)

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)	36,631	2,871	15,642	9,238	2,431	30,183	801	1,442	784	228	3,256	491	1,126	477	150	2,244
	<i>144</i>	<i>79</i>	<i>193</i>	<i>142</i>	<i>59</i>	<i>199</i>	<i>39</i>	<i>71</i>	<i>43</i>	<i>20</i>	<i>77</i>	<i>41</i>	<i>70</i>	<i>38</i>	<i>21</i>	<i>99</i>
Beneficiaries as a Percentage of Column Total																
Continuity of Care																
Length of Association with Usual Source of Care																
No usual source ⁴	7.25	9.31	7.59	5.57	5.29	6.95	10.55	8.11	7.75	4.53	8.37	9.15	8.60	10.05	8.70	9.04
	<i>0.33</i>	<i>1.10</i>	<i>0.49</i>	<i>0.49</i>	<i>0.73</i>	<i>0.34</i>	<i>1.57</i>	<i>1.51</i>	<i>2.10</i>	<i>1.91</i>	<i>0.93</i>	<i>2.85</i>	<i>3.40</i>	<i>3.19</i>	<i>2.88</i>	<i>1.77</i>
Less than 1 year	9.59	11.03	8.78	9.67	10.04	9.36	10.77	8.77	5.94	12.78	8.84	12.92	14.56	8.61	10.15	12.64
	<i>0.31</i>	<i>1.24</i>	<i>0.45</i>	<i>0.60</i>	<i>1.04</i>	<i>0.37</i>	<i>2.37</i>	<i>1.39</i>	<i>1.30</i>	<i>2.30</i>	<i>0.92</i>	<i>3.18</i>	<i>2.32</i>	<i>2.37</i>	<i>3.51</i>	<i>1.42</i>
1 to less than 3 years	18.25	20.94	17.32	16.89	16.38	17.46	21.24	20.33	22.07	19.97	20.95	25.44	26.92	21.20	19.31	24.88
	<i>0.48</i>	<i>1.51</i>	<i>0.78</i>	<i>0.78</i>	<i>1.23</i>	<i>0.53</i>	<i>2.50</i>	<i>2.45</i>	<i>2.61</i>	<i>3.44</i>	<i>1.65</i>	<i>4.52</i>	<i>3.54</i>	<i>3.09</i>	<i>4.43</i>	<i>1.98</i>
3 to less than 5 years	15.63	16.49	15.38	15.06	13.95	15.28	22.45	18.58	17.76	13.15	18.94	17.92	10.55	14.46	16.28	13.36
	<i>0.46</i>	<i>1.42</i>	<i>0.78</i>	<i>0.68</i>	<i>1.04</i>	<i>0.52</i>	<i>2.41</i>	<i>2.18</i>	<i>2.09</i>	<i>3.36</i>	<i>1.21</i>	<i>3.03</i>	<i>1.94</i>	<i>3.40</i>	<i>3.82</i>	<i>1.39</i>
5 years or more	49.27	42.23	50.92	52.81	54.34	50.95	34.99	44.21	46.48	49.57	42.89	34.56	39.37	45.68	45.57	40.09
	<i>0.65</i>	<i>1.67</i>	<i>1.06</i>	<i>0.99</i>	<i>1.79</i>	<i>0.73</i>	<i>2.88</i>	<i>2.64</i>	<i>3.27</i>	<i>4.53</i>	<i>1.75</i>	<i>4.57</i>	<i>3.02</i>	<i>5.19</i>	<i>4.84</i>	<i>1.91</i>

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 Responses for sample persons not interviewed in Round 16 (i.e., the 1996 Access to Care Public Use File) were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File) or from their Round 19 interview (i.e., the 1997 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 percentages for *none* under *Usual Source of Care* differs from the percentages 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 (1 of 2)

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)	36,631	2,871	15,642	9,238	2,431	30,183	801	1,442	784	228	3,256	491	1,126	477	150	2,244
	144.48	79	193	142	59	199	39	71	43	20	77	41	70	38	21	99
Beneficiaries as a Percentage of Column Total⁴																
Quality of Care																
General Care																
Very satisfied	28.86	23.67	34.35	28.93	24.54	30.89	15.14	21.90	20.37	18.73	19.66	15.05	19.18	15.17	18.37	17.38
	0.81	1.67	1.33	1.08	1.13	0.94	2.08	2.41	2.68	2.95	1.36	3.74	2.32	4.33	6.28	2.21
(Very) Unsatisfied	3.46	7.64	2.54	3.28	4.22	3.38	5.21	3.25	1.13	2.42	3.15	8.15	4.19	3.23	1.07	4.63
	0.18	0.81	0.26	0.35	0.59	0.19	1.55	1.19	0.62	0.93	0.72	2.86	1.35	1.80	1.47	0.90
Follow-up Care																
Very satisfied	17.46	16.72	20.61	17.12	13.75	18.62	13.65	10.10	9.15	11.12	10.80	11.88	13.50	13.84	20.77	13.71
	0.52	1.33	0.83	0.89	1.03	0.58	2.59	1.84	1.73	2.73	1.31	3.78	2.19	4.39	5.57	2.60
(Very) Unsatisfied	2.82	5.35	2.22	2.83	2.54	2.73	5.22	2.76	1.71	0.00	2.91	4.26	4.17	4.84	0.00	4.05
	0.19	0.77	0.26	0.33	0.45	0.20	1.25	1.04	0.74	0.00	0.65	1.71	1.69	1.63	0.00	0.99
Access/Coordination of Care																
Availability (Night/Weekend)																
Very satisfied	10.19	11.79	11.71	9.51	9.17	10.84	5.65	4.52	5.48	8.09	5.28	7.10	8.68	13.04	12.36	9.51
	0.39	1.29	0.69	0.58	0.91	0.45	1.36	1.43	1.50	2.09	0.89	2.90	2.01	4.17	5.51	2.27
(Very) Unsatisfied	2.70	6.58	2.32	2.31	1.96	2.69	6.21	0.83	0.46	0.68	2.04	2.15	4.66	2.55	2.00	3.49
	0.19	0.66	0.25	0.35	0.46	0.21	2.07	0.48	0.46	0.68	0.54	1.43	1.56	1.35	1.39	0.83
Ease of Access to Doctor																
Very satisfied	18.77	12.56	23.52	17.98	14.83	20.09	9.48	14.16	12.20	16.24	12.69	8.56	13.24	11.38	14.72	11.93
	0.61	1.27	1.00	0.83	1.18	0.69	2.07	2.14	2.15	2.80	1.22	3.64	1.96	3.84	7.63	2.27
(Very) Unsatisfied	5.54	9.86	4.04	5.24	5.21	5.05	10.23	5.94	8.82	4.64	7.59	10.29	6.49	12.64	7.29	8.68
	0.34	1.02	0.41	0.47	0.62	0.36	2.20	1.79	1.64	1.75	0.99	3.93	2.09	3.60	2.13	1.71
Can Obtain Care in Same Location																
Very satisfied	13.99	11.62	17.16	12.55	10.99	14.73	11.14	10.03	8.89	11.48	10.13	9.40	11.77	10.84	15.18	11.29
	0.57	1.19	0.96	0.73	1.00	0.62	2.24	1.76	1.57	2.39	1.10	3.40	2.77	3.70	6.84	2.76
(Very) Unsatisfied	4.52	10.05	3.94	3.93	2.71	4.41	7.25	1.92	0.88	1.35	2.91	12.05	6.42	8.15	3.22	7.79
	0.30	1.07	0.41	0.40	0.43	0.28	1.45	0.74	0.50	0.94	0.57	5.18	1.81	4.83	2.33	2.40

Table 5.4 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 1996 (2 of 2)

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)	36,631	2,871	15,642	9,238	2,431	30,183	801	1,442	784	228	3,256	491	1,126	477	150	2,244
	<i>144.48</i>	<i>79</i>	<i>193</i>	<i>142</i>	<i>59</i>	<i>199</i>	<i>39</i>	<i>71</i>	<i>43</i>	<i>20</i>	<i>77</i>	<i>41</i>	<i>70</i>	<i>38</i>	<i>21</i>	<i>99</i>
Beneficiaries as a Percentage of Column Total⁴																
Relationship with Primary Doctor																
Information from Doctor																
Very satisfied	17.41	16.02	21.22	16.32	13.56	18.62	12.16	11.34	10.25	9.34	11.13	12.60	12.86	11.33	18.15	12.83
	<i>0.60</i>	<i>1.29</i>	<i>1.01</i>	<i>0.78</i>	<i>0.99</i>	<i>0.70</i>	<i>2.22</i>	<i>2.05</i>	<i>2.05</i>	<i>2.32</i>	<i>1.16</i>	<i>3.85</i>	<i>2.17</i>	<i>4.21</i>	<i>5.93</i>	<i>2.59</i>
(Very) Unsatisfied	5.48	10.02	4.49	6.34	3.83	5.53	6.92	3.78	3.29	3.10	4.38	7.54	5.91	4.61	0.00	5.59
	<i>0.25</i>	<i>0.94</i>	<i>0.38</i>	<i>0.56</i>	<i>0.54</i>	<i>0.30</i>	<i>1.88</i>	<i>0.95</i>	<i>1.08</i>	<i>1.45</i>	<i>0.69</i>	<i>2.93</i>	<i>1.63</i>	<i>1.63</i>	<i>0.00</i>	<i>1.02</i>
Doctor's Concern for Overall Health																
Very satisfied	19.00	19.46	22.52	17.91	16.42	20.33	14.47	13.94	11.59	12.63	13.40	12.42	12.57	12.06	19.54	12.89
	<i>0.56</i>	<i>1.69</i>	<i>0.88</i>	<i>0.85</i>	<i>1.04</i>	<i>0.63</i>	<i>2.72</i>	<i>2.29</i>	<i>2.08</i>	<i>3.28</i>	<i>1.36</i>	<i>3.76</i>	<i>2.29</i>	<i>3.84</i>	<i>6.01</i>	<i>2.60</i>
(Very) Unsatisfied	4.87	7.57	4.45	5.19	4.06	4.94	4.91	4.46	2.73	5.10	4.19	9.01	4.63	3.48	0.00	5.01
	<i>0.24</i>	<i>0.75</i>	<i>0.45</i>	<i>0.46</i>	<i>0.63</i>	<i>0.26</i>	<i>1.30</i>	<i>1.12</i>	<i>0.76</i>	<i>1.89</i>	<i>0.66</i>	<i>3.24</i>	<i>1.26</i>	<i>1.17</i>	<i>0.00</i>	<i>0.96</i>
Cost of Care																
Cost																
Very Satisfied	16.48	12.10	19.17	16.48	12.85	17.17	10.46	10.24	10.69	12.08	10.53	12.74	14.73	15.69	17.69	14.70
	<i>0.56</i>	<i>1.21</i>	<i>0.89</i>	<i>0.81</i>	<i>1.03</i>	<i>0.64</i>	<i>1.97</i>	<i>1.89</i>	<i>2.32</i>	<i>2.69</i>	<i>1.14</i>	<i>2.92</i>	<i>3.48</i>	<i>4.93</i>	<i>6.98</i>	<i>3.02</i>
(Very) Unsatisfied	11.83	21.25	10.22	10.62	9.47	11.32	21.06	16.35	10.98	9.96	15.74	22.02	13.27	7.03	6.74	13.38
	<i>0.39</i>	<i>1.68</i>	<i>0.56</i>	<i>0.73</i>	<i>0.95</i>	<i>0.42</i>	<i>2.85</i>	<i>2.18</i>	<i>2.02</i>	<i>3.04</i>	<i>1.42</i>	<i>3.64</i>	<i>2.46</i>	<i>1.94</i>	<i>2.88</i>	<i>1.72</i>

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.

- 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 beneficiaries who resided only in a long-term care facility during the year.
- Responses for sample persons not interviewed in Round 16 (i.e., the 1996 Access to Care Public Use File) were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File) or from their Round 19 interview (i.e., the 1997 Access to Care Public Use File).
- Total* includes persons of other race/ethnicity and persons who did not report their race/ethnicity.
- 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 (1 of 2)

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)	36,631	994	4,482	4,035	1,436	10,947	1,816	11,951	5,248	659	19,676	1,487	2,277	1,475	765	6,004
	144	52	133	116	53	167	86	167	125	36	217	67	98	72	37	140
Beneficiaries as a Percentage of Column Total Access to Care																
Usual Source of Care																
None ³	7.22	9.29	9.15	6.30	6.59	7.77	5.69	6.75	5.42	3.00	6.17	14.56	9.53	7.40	4.86	9.64
	0.33	1.69	1.03	0.65	1.09	0.48	0.86	0.56	0.78	0.94	0.38	1.77	1.69	1.30	1.20	0.87
Doctor's office	72.47	63.42	69.72	75.85	77.40	72.43	70.56	71.51	76.99	81.94	73.24	60.24	72.05	72.63	77.89	70.05
	0.74	2.99	1.57	1.43	1.71	1.05	1.82	1.12	1.64	2.39	0.99	2.40	2.26	1.94	2.26	1.26
Doctor's clinic	6.76	5.88	6.25	6.79	5.83	6.36	7.29	7.54	7.31	4.36	7.34	7.78	3.77	6.66	4.80	5.59
	0.56	1.39	1.03	0.87	1.23	0.76	1.17	0.74	1.17	0.95	0.69	1.17	0.79	1.23	0.94	0.56
HMO ⁴	6.24	1.49	6.60	5.63	4.07	5.45	4.34	7.84	6.11	5.00	6.96	2.66	6.30	6.00	6.02	5.30
	0.37	0.61	0.85	0.73	0.86	0.46	1.10	0.65	0.83	1.11	0.51	0.98	1.07	1.18	1.37	0.54
Hospital OPD/ER ⁵	2.40	8.21	3.00	2.00	2.84	3.08	4.16	1.63	1.12	0.57	1.69	6.14	3.03	2.15	2.35	3.48
	0.20	1.54	0.70	0.44	0.66	0.39	1.09	0.27	0.26	0.42	0.21	1.13	0.78	0.64	0.81	0.48
Other clinic/health center	4.91	11.71	5.27	3.43	3.27	4.91	7.96	4.74	3.05	5.13	4.59	8.63	5.33	5.16	4.09	5.94
	0.31	2.13	0.85	0.56	0.75	0.49	1.48	0.53	0.44	1.78	0.44	1.20	1.01	1.24	1.22	0.59
Difficulty Obtaining Care																
Yes	3.26	10.63	2.45	2.06	2.69	3.07	10.65	2.34	0.82	1.20	2.65	10.01	4.91	4.02	2.26	5.60
	0.20	1.71	0.65	0.48	0.58	0.37	1.48	0.33	0.22	0.71	0.23	1.07	1.06	0.81	0.77	0.46
No	96.74	89.37	97.55	97.94	97.31	96.93	89.35	97.66	99.18	98.80	97.35	89.99	95.09	95.98	97.74	94.40
	0.20	1.71	0.65	0.48	0.58	0.37	1.48	0.33	0.22	0.71	0.23	1.07	1.06	0.81	0.77	0.46
Delayed Care Due to Cost																
Yes	7.55	25.54	7.67	5.57	3.91	8.01	23.25	5.00	3.62	1.87	6.19	20.67	12.38	4.62	2.14	11.18
	0.31	3.06	0.85	0.74	0.77	0.57	2.02	0.43	0.55	0.79	0.33	1.65	1.82	0.95	0.87	0.79
No	92.45	74.46	92.33	94.43	96.09	91.99	76.75	95.00	96.38	98.13	93.81	79.33	87.62	95.38	97.86	88.82
	0.31	3.06	0.85	0.74	0.77	0.57	2.02	0.43	0.55	0.79	0.33	1.65	1.82	0.95	0.87	0.79

Table 5.5 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 1996 (2 of 2)

Community-Only Residents¹

Indicator of Access to Care ²	Total	Lives Alone				Total	Lives with Spouse				Total	Lives with Children/Others				Total
		< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
Beneficiaries (in 000s)	36,631	994	4,482	4,035	1,436	10,947	1,816	11,951	5,248	659	19,676	1,487	2,277	1,475	765	6,004
	<i>144</i>	<i>52</i>	<i>133</i>	<i>116</i>	<i>53</i>	<i>167</i>	<i>86</i>	<i>167</i>	<i>125</i>	<i>36</i>	<i>217</i>	<i>67</i>	<i>98</i>	<i>72</i>	<i>37</i>	<i>140</i>
Beneficiaries as a Percentage of Column Total																
Continuity of Care																
Length of Association with Usual Source of Care																
No usual source ³	7.25	9.36	9.20	6.34	6.75	7.84	5.69	6.75	5.44	3.04	6.18	14.68	9.56	7.46	4.95	9.71
	<i>0.33</i>	<i>1.69</i>	<i>1.03</i>	<i>0.65</i>	<i>1.12</i>	<i>0.48</i>	<i>0.86</i>	<i>0.56</i>	<i>0.78</i>	<i>0.95</i>	<i>0.38</i>	<i>1.79</i>	<i>1.69</i>	<i>1.31</i>	<i>1.22</i>	<i>0.88</i>
Less than 1 year	9.59	8.73	9.87	10.54	9.50	9.97	10.80	8.50	7.62	9.25	8.50	13.51	12.38	11.60	12.63	12.50
	<i>0.31</i>	<i>1.38</i>	<i>1.09</i>	<i>0.77</i>	<i>1.13</i>	<i>0.55</i>	<i>1.46</i>	<i>0.56</i>	<i>0.70</i>	<i>2.15</i>	<i>0.41</i>	<i>1.86</i>	<i>1.55</i>	<i>1.67</i>	<i>1.68</i>	<i>0.85</i>
1 to less than 3 years	18.25	20.27	17.65	17.35	15.54	17.50	21.45	18.47	17.78	16.08	18.48	21.66	18.97	15.82	19.28	18.89
	<i>0.48</i>	<i>2.28</i>	<i>1.33</i>	<i>0.99</i>	<i>1.55</i>	<i>0.70</i>	<i>1.92</i>	<i>1.02</i>	<i>1.13</i>	<i>2.11</i>	<i>0.73</i>	<i>1.98</i>	<i>2.10</i>	<i>1.86</i>	<i>1.89</i>	<i>0.92</i>
3 to less than 5 years	15.63	19.84	14.33	14.54	14.59	14.94	18.53	16.18	15.80	10.59	16.10	15.40	14.29	16.46	16.16	15.33
	<i>0.46</i>	<i>2.30</i>	<i>1.04</i>	<i>1.00</i>	<i>1.46</i>	<i>0.64</i>	<i>1.70</i>	<i>0.88</i>	<i>0.91</i>	<i>1.88</i>	<i>0.63</i>	<i>1.52</i>	<i>1.62</i>	<i>1.81</i>	<i>1.88</i>	<i>0.87</i>
5 years or more	49.27	41.79	48.95	51.23	53.62	49.75	43.54	50.10	53.35	61.05	50.73	34.75	44.79	48.65	46.98	43.57
	<i>0.65</i>	<i>2.77</i>	<i>1.58</i>	<i>1.66</i>	<i>2.16</i>	<i>0.95</i>	<i>2.02</i>	<i>1.22</i>	<i>1.35</i>	<i>3.19</i>	<i>0.87</i>	<i>2.20</i>	<i>2.56</i>	<i>2.54</i>	<i>2.79</i>	<i>1.37</i>

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 Responses for sample persons not interviewed in Round 16 (i.e., the 1996 Access to Care Public Use File) were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File) or from their Round 19 interview (i.e., the 1997 Access to Care Public Use File).
- 3 The percentages for *none* under *Usual Source of Care* differs from the percentages 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 (1 of 2)

Community-Only Residents¹

Measure of Satisfaction ²	Total	Lives Alone				Total	Lives with Spouse				Total	Lives with Children/Others				Total
		< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
Beneficiaries (in 000s)	36,631	994	4,482	4,035	1,436	10,947	1,816	11,951	5,248	659	19,676	1,487	2,277	1,475	765	6,004
	144	52	133	116	53	167	86	167	125	36	217	67	98	72	37	140
Beneficiaries as a Percentage of Column Total³																
Quality of Care																
General Care																
Very satisfied	28.86	20.44	27.36	24.64	23.33	25.20	22.71	34.59	31.09	22.52	32.16	20.45	28.47	22.92	25.12	24.71
	0.81	2.38	1.71	1.34	1.57	0.96	1.99	1.31	1.33	2.44	1.00	1.64	2.80	2.21	2.08	1.41
(Very) Unsatisfied	3.46	8.69	3.31	2.99	4.52	3.84	6.51	2.56	2.97	4.30	3.09	6.78	2.69	3.93	2.72	4.00
	0.18	1.72	0.62	0.58	0.81	0.36	1.02	0.31	0.48	1.27	0.25	1.12	0.57	0.83	0.80	0.43
Follow-up Care																
Very satisfied	17.46	14.60	15.57	15.49	13.29	15.15	17.22	20.43	17.84	14.38	19.25	14.28	18.96	13.35	14.20	15.82
	0.52	2.01	1.30	1.10	1.40	0.79	1.80	0.88	1.11	1.96	0.60	1.56	1.65	1.79	1.73	1.01
(Very) Unsatisfied	2.82	5.58	2.71	2.94	2.76	3.06	4.09	2.38	2.81	1.96	2.64	5.91	1.80	2.56	1.48	2.95
	0.19	1.55	0.58	0.58	0.64	0.37	0.88	0.32	0.41	0.72	0.25	0.99	0.56	0.76	0.58	0.39
Access/Coordination of Care																
Availability (Night/Weekends)																
Very satisfied	10.19	7.72	9.16	7.90	9.09	8.56	10.40	11.38	10.51	7.87	10.94	11.91	11.17	9.08	10.32	10.73
	0.39	1.60	0.89	0.89	1.28	0.54	1.58	0.70	0.69	1.60	0.47	1.57	1.66	1.45	1.64	1.01
(Very) Unsatisfied	2.70	8.14	2.26	1.80	1.70	2.55	6.45	2.27	2.51	1.83	2.70	5.01	2.40	2.17	2.35	2.97
	0.19	1.34	0.50	0.46	0.51	0.31	1.20	0.27	0.51	0.60	0.24	1.07	0.84	0.54	0.82	0.42
Ease of Access to Doctor																
Very satisfied	18.77	9.28	19.53	14.78	14.58	16.21	11.85	22.98	19.99	14.95	20.89	12.91	21.14	13.85	14.77	16.52
	0.61	1.84	1.52	1.15	1.53	0.79	1.46	1.05	1.02	2.14	0.74	1.59	2.19	1.56	1.71	1.20
(Very) Unsatisfied	5.54	13.77	6.09	6.42	6.15	6.91	9.94	3.36	4.74	3.24	4.32	9.00	5.82	7.44	5.78	6.99
	0.34	1.97	0.88	0.86	0.84	0.59	1.51	0.50	0.52	1.02	0.39	1.23	1.35	1.32	1.03	0.72
Can Obtain Care in Same Location																
Very satisfied	13.99	11.28	13.71	12.15	10.47	12.49	10.98	16.92	12.40	10.02	14.94	11.82	16.55	10.91	13.32	13.60
	0.57	2.09	1.26	1.04	1.29	0.72	1.38	0.93	0.92	2.04	0.69	1.36	2.09	1.78	1.81	1.08
(Very) Unsatisfied	4.52	9.88	3.96	3.67	2.34	4.18	11.51	4.02	3.98	2.37	4.64	7.01	4.39	3.74	3.54	4.76
	0.30	2.04	0.74	0.51	0.58	0.41	1.80	0.54	0.56	0.93	0.44	0.88	1.00	1.29	1.07	0.56

Table 5.6 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 1996 (2 of 2)

Community-Only Residents¹

Measure of Satisfaction ²	Total	Lives Alone				Total	Lives with Spouse				Total	Lives with Children/Others				Total
		< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
Beneficiaries (in 000s)	36,631	994	4,482	4,035	1,436	10,947	1,816	11,951	5,248	659	19,676	1,487	2,277	1,475	765	6,004
	<i>144</i>	<i>52</i>	<i>133</i>	<i>116</i>	<i>53</i>	<i>167</i>	<i>86</i>	<i>167</i>	<i>125</i>	<i>36</i>	<i>217</i>	<i>67</i>	<i>98</i>	<i>72</i>	<i>37</i>	<i>140</i>
Beneficiaries as a Percentage of Column Total³																
Relationship with Primary Doctor																
Information from Doctor																
Very satisfied	17.41	13.35	17.52	14.63	12.08	15.37	16.75	20.59	16.90	13.27	19.01	13.46	19.35	13.11	15.77	15.92
	<i>0.60</i>	<i>2.10</i>	<i>1.37</i>	<i>1.04</i>	<i>1.21</i>	<i>0.79</i>	<i>1.91</i>	<i>0.95</i>	<i>0.92</i>	<i>2.13</i>	<i>0.69</i>	<i>1.46</i>	<i>2.06</i>	<i>1.61</i>	<i>1.97</i>	<i>1.14</i>
(Very) Unsatisfied	5.48	11.51	5.40	6.19	4.36	6.11	9.66	4.24	6.19	1.47	5.16	8.02	4.70	4.54	4.21	5.41
	<i>0.25</i>	<i>1.87</i>	<i>0.80</i>	<i>0.83</i>	<i>0.74</i>	<i>0.50</i>	<i>1.24</i>	<i>0.48</i>	<i>0.74</i>	<i>0.65</i>	<i>0.36</i>	<i>1.28</i>	<i>0.97</i>	<i>1.10</i>	<i>1.06</i>	<i>0.52</i>
Doctor's Concern for Overall Health																
Very satisfied	19.00	16.68	19.38	16.13	15.76	17.47	19.85	21.48	17.90	13.41	20.10	14.84	21.58	15.97	18.61	18.17
	<i>0.56</i>	<i>2.79</i>	<i>1.58</i>	<i>1.14</i>	<i>1.47</i>	<i>0.96</i>	<i>2.04</i>	<i>0.89</i>	<i>1.04</i>	<i>2.02</i>	<i>0.67</i>	<i>1.52</i>	<i>2.13</i>	<i>1.94</i>	<i>2.23</i>	<i>1.20</i>
(Very) Unsatisfied	4.87	8.50	5.64	4.85	4.30	5.43	6.73	4.14	4.91	3.43	4.56	6.79	3.93	4.98	3.85	4.88
	<i>0.24</i>	<i>1.74</i>	<i>0.78</i>	<i>0.68</i>	<i>0.79</i>	<i>0.41</i>	<i>1.04</i>	<i>0.56</i>	<i>0.62</i>	<i>1.06</i>	<i>0.37</i>	<i>1.04</i>	<i>0.76</i>	<i>0.90</i>	<i>1.05</i>	<i>0.50</i>
Cost of Care																
Cost																
Very Satisfied	16.48	10.26	18.89	14.45	11.74	15.54	12.33	18.19	17.69	12.88	17.35	13.99	16.09	15.52	15.48	15.36
	<i>0.56</i>	<i>1.44</i>	<i>1.46</i>	<i>1.09</i>	<i>1.37</i>	<i>0.81</i>	<i>1.82</i>	<i>0.91</i>	<i>0.89</i>	<i>2.23</i>	<i>0.63</i>	<i>1.48</i>	<i>1.99</i>	<i>1.85</i>	<i>1.83</i>	<i>1.08</i>
(Very) Unsatisfied	11.83	22.38	10.92	10.68	8.81	11.59	22.20	10.14	10.39	11.47	11.36	19.35	14.53	9.79	8.65	13.80
	<i>0.39</i>	<i>2.46</i>	<i>1.15</i>	<i>0.83</i>	<i>1.14</i>	<i>0.63</i>	<i>2.17</i>	<i>0.74</i>	<i>0.90</i>	<i>1.96</i>	<i>0.51</i>	<i>1.75</i>	<i>1.78</i>	<i>1.49</i>	<i>1.39</i>	<i>0.84</i>

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 Responses for sample persons not interviewed in Round 16 (i.e., the 1996 Access to Care Public Use File) were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File) or from their Round 19 interview (i.e., the 1997 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 (1 of 2)

Community-Only Residents¹

Indicator of Access to Care ²	Total ³	Indicators of Good Health ³			Indicators of Poor Health ³		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	36,631	15,981	21,814	12,696	9,607	2,464	1,678
	144	236	217	204	210	101	80
Beneficiaries as a Percentage of Column Total Access to Care							
Usual Source of Care							
None ⁶	7.22	9.29	8.54	9.76	5.10	4.95	5.85
	0.33	0.61	0.46	0.65	0.43	0.95	1.15
Doctor's office	72.47	70.90	71.70	71.40	72.66	74.31	73.52
	0.74	0.95	0.90	0.99	1.03	1.70	1.96
Doctor's clinic	6.76	6.88	6.40	6.37	6.70	6.57	5.32
	0.56	0.54	0.62	0.56	0.70	1.50	1.42
HMO ⁷	6.24	7.51	7.02	7.63	3.83	3.99	4.64
	0.37	0.56	0.45	0.62	0.45	0.92	1.11
Hospital OPD/ER ⁸	2.40	1.37	2.06	1.30	4.04	2.18	2.33
	0.20	0.20	0.22	0.23	0.43	0.48	0.52
Other clinic/health center	4.91	4.05	4.28	3.55	7.66	8.00	8.34
	0.31	0.43	0.38	0.40	0.67	0.98	1.17
Difficulty Obtaining Care							
Yes	3.26	1.91	1.74	1.42	6.59	10.40	12.62
	0.20	0.26	0.19	0.25	0.53	1.32	1.84
No	96.74	98.09	98.26	98.58	93.41	89.60	87.38
	0.20	0.26	0.19	0.25	0.53	1.32	1.84
Delayed Care Due to Cost							
Yes	7.55	3.91	4.52	3.17	15.08	14.48	18.08
	0.31	0.28	0.26	0.33	0.87	1.56	2.10
No	92.45	96.09	95.48	96.83	84.92	85.52	81.92
	0.31	0.28	0.26	0.33	0.87	1.56	2.10

Table 5.7 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 1996 (2 of 2)

Community-Only Residents¹

Indicator of Access to Care ²	Total ³	Indicators of Good Health ³			Indicators of Poor Health ³		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	36,631	15,981	21,814	12,696	9,607	2,464	1,678
	<i>144</i>	<i>236</i>	<i>217</i>	<i>204</i>	<i>210</i>	<i>101</i>	<i>80</i>
Beneficiaries as a Percentage of Column Total							
Continuity of Care							
Length of Association with Usual Source of Care							
No usual source ⁶	7.25	9.33	8.56	9.78	5.13	5.03	5.96
	<i>0.33</i>	<i>0.61</i>	<i>0.46</i>	<i>0.65</i>	<i>0.43</i>	<i>0.97</i>	<i>1.16</i>
Less than 1 year	9.59	8.90	8.73	8.30	10.50	12.64	13.04
	<i>0.31</i>	<i>0.48</i>	<i>0.35</i>	<i>0.50</i>	<i>0.67</i>	<i>1.25</i>	<i>1.51</i>
1 to less than 3 years	18.25	17.44	17.40	16.70	19.16	18.58	17.59
	<i>0.48</i>	<i>0.65</i>	<i>0.62</i>	<i>0.74</i>	<i>0.95</i>	<i>1.78</i>	<i>2.24</i>
3 to less than 5 years	15.63	14.91	14.70	14.65	16.98	16.36	16.69
	<i>0.46</i>	<i>0.69</i>	<i>0.58</i>	<i>0.75</i>	<i>0.84</i>	<i>1.66</i>	<i>1.98</i>
5 years or more	49.27	49.42	50.61	50.56	48.23	47.38	46.71
	<i>0.65</i>	<i>0.97</i>	<i>0.87</i>	<i>1.08</i>	<i>1.02</i>	<i>1.97</i>	<i>2.73</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File, CY 1996 Access to Care Public Use File, supplemented by CY 1995 and CY 1997 Access to Care Public Use Files as needed to fill in missing data for sample persons not in the CY 1996 file.

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 Responses for sample persons not interviewed in Round 16 (i.e., the 1996 Access to Care Public Use File) were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File) or from their Round 19 interview (i.e., the 1997 Access to Care Public Use File).
- 3 The subcategories of *Indicators of Good Health* and *Indicators of Poor Health* are not mutually exclusive. 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 percentages for *none* under *Usual Source of Care* differs from the percentages 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 (1 of 3)

Community-Only Residents¹

Measure of Satisfaction ²	Total ³	Indicators of Good Health ³			Indicators of Poor Health ³		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	36,631	15,981	21,814	12,696	9,607	2,464	1,678
	144	236	217	204	210	101	80
Beneficiaries as a Percentage of Column Total⁶							
Quality of Care							
General Care							
Very satisfied	28.86	36.76	30.58	36.40	20.02	23.51	19.08
	0.81	1.09	0.97	1.23	0.94	1.80	1.87
(Very) Unsatisfied	3.46	1.92	2.37	1.68	6.74	8.37	10.56
	0.18	0.21	0.22	0.23	0.50	1.20	1.55
Follow-up Care							
Very satisfied	17.46	21.11	18.13	20.96	14.15	14.73	13.33
	0.52	0.84	0.67	0.92	0.79	1.55	1.83
(Very) Unsatisfied	2.82	1.68	1.82	1.20	4.73	7.36	8.71
	0.19	0.24	0.18	0.23	0.47	1.12	1.47
Access/Coordination of Care							
Availability (Night/Weekends)							
Very satisfied	10.19	11.47	10.25	11.12	9.30	11.50	9.97
	0.39	0.58	0.47	0.63	0.64	1.61	1.82
(Very) Unsatisfied	2.70	1.77	1.88	1.48	4.43	5.02	6.26
	0.19	0.23	0.17	0.22	0.38	0.96	1.31
Ease of Access to Doctor							
Very satisfied	18.77	23.62	21.13	24.14	12.62	12.98	11.15
	0.61	0.84	0.80	1.00	0.72	1.59	1.87
(Very) Unsatisfied	5.54	3.38	2.90	2.39	10.19	14.40	17.71
	0.34	0.33	0.26	0.31	0.73	1.49	1.98
Can Obtain Care in Same Location							
Very satisfied	13.99	17.49	15.28	17.89	10.70	11.44	10.17
	0.57	0.79	0.66	0.86	0.86	1.52	1.80
(Very) Unsatisfied	4.52	2.88	2.94	2.38	7.75	9.62	11.01
	0.30	0.28	0.24	0.26	0.66	1.30	1.49

Table 5.8 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 1996 (2 of 3)

Community-Only Residents¹

Measure of Satisfaction ²	Total ³	Indicators of Good Health ³			Indicators of Poor Health ³		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	36,631	15,981	21,814	12,696	9,607	2,464	1,678
	144	236	217	204	210	101	80
Beneficiaries as a Percentage of Column Total⁶							
Relationship with Primary Doctor							
Information from Doctor							
Very satisfied	17.41	22.46	19.03	22.86	13.23	13.42	12.83
	0.60	0.86	0.72	0.92	0.80	1.54	1.92
(Very) Unsatisfied	5.48	3.24	3.53	2.75	10.05	10.92	12.35
	0.25	0.34	0.30	0.35	0.67	1.20	1.69
Doctor's Concern for Overall Health							
Very satisfied	19.00	23.05	19.70	22.85	15.13	13.89	12.89
	0.56	0.79	0.67	0.90	0.79	1.43	1.74
(Very) Unsatisfied	4.87	3.52	3.75	3.22	8.02	9.94	12.37
	0.24	0.35	0.32	0.37	0.56	1.14	1.58

Table 5.8 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 1996 (3 of 3)

Community-Only Residents¹

Measure of Satisfaction ²	Total ³	Indicators of Good Health ³			Indicators of Poor Health ³		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	36,631	15,981	21,814	12,696	9,607	2,464	1,678
	<i>144</i>	<i>236</i>	<i>217</i>	<i>204</i>	<i>210</i>	<i>101</i>	<i>80</i>
Beneficiaries as a Percentage of Column Total⁶							
Cost							
Very Satisfied	16.48	21.30	18.31	21.51	11.82	11.60	10.56
	<i>0.56</i>	<i>0.82</i>	<i>0.69</i>	<i>0.93</i>	<i>0.78</i>	<i>1.47</i>	<i>1.48</i>
(Very) Unsatisfied	11.83	8.40	8.74	7.36	19.26	24.12	27.77
	<i>0.39</i>	<i>0.44</i>	<i>0.41</i>	<i>0.49</i>	<i>0.91</i>	<i>1.81</i>	<i>2.16</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File, CY 1996 Access to Care Public Use File, supplemented by CY 1995 and CY 1997 Access to Care Public Use Files as needed to fill in missing data for sample persons not in the CY 1996 file.

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 Responses for sample persons not interviewed in Round 16 (i.e., the 1996 Access to Care Public Use File) were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File) or from their Round 19 interview (i.e., the 1997 Access to Care Public Use File).
- 3 The subcategories of *Indicators of Good Health* and *Indicators of Poor Health* are not mutually exclusive. 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 of *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 (1 of 2)

Community-Only Residents¹

Indicator of Access to Care ²	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Beneficiaries (in 000s)	36,631	4,008	4,993	9,437	11,987	1,724	4,481
	<i>144</i>	<i>120</i>	<i>130</i>	<i>203</i>	<i>200</i>	<i>105</i>	<i>157</i>
Beneficiaries as a Percentage of Column Total Access to Care							
Usual Source of Care							
None ³	7.22	16.62	8.66	6.40	5.99	5.00	3.10
	<i>0.33</i>	<i>1.28</i>	<i>0.69</i>	<i>0.61</i>	<i>0.62</i>	<i>1.30</i>	<i>0.59</i>
Doctor's office	72.47	54.71	67.74	82.48	79.92	83.00	48.62
	<i>0.74</i>	<i>1.43</i>	<i>1.32</i>	<i>1.26</i>	<i>1.19</i>	<i>2.25</i>	<i>2.19</i>
Doctor's clinic	6.76	5.83	6.54	7.62	6.79	8.34	5.36
	<i>0.56</i>	<i>1.05</i>	<i>0.70</i>	<i>1.05</i>	<i>0.80</i>	<i>1.17</i>	<i>0.50</i>
HMO ⁴	6.24	1.03	1.99	0.09	3.05	0.05	39.39
	<i>0.37</i>	<i>0.44</i>	<i>0.51</i>	<i>0.06</i>	<i>0.50</i>	<i>0.04</i>	<i>2.12</i>
Hospital OPD/ER ⁵	2.40	5.42	7.59	0.89	1.19	0.66	1.01
	<i>0.20</i>	<i>0.71</i>	<i>0.82</i>	<i>0.23</i>	<i>0.24</i>	<i>0.40</i>	<i>0.47</i>
Other clinic/health center	4.91	16.39	7.48	2.52	3.07	2.95	2.51
	<i>0.31</i>	<i>1.23</i>	<i>0.66</i>	<i>0.38</i>	<i>0.40</i>	<i>0.92</i>	<i>0.55</i>
Difficulty Obtaining Care							
Yes	3.26	6.94	6.49	1.07	2.05	3.27	4.23
	<i>0.20</i>	<i>0.69</i>	<i>0.61</i>	<i>0.20</i>	<i>0.31</i>	<i>0.98</i>	<i>0.60</i>
No	96.74	93.06	93.51	98.93	97.95	96.73	95.77
	<i>0.20</i>	<i>0.69</i>	<i>0.61</i>	<i>0.20</i>	<i>0.31</i>	<i>0.98</i>	<i>0.60</i>
Delayed Care Due to Cost							
Yes	7.55	19.60	13.21	5.60	4.28	4.84	4.41
	<i>0.31</i>	<i>1.39</i>	<i>1.02</i>	<i>0.48</i>	<i>0.37</i>	<i>1.06</i>	<i>0.76</i>
No	92.45	80.40	86.79	94.40	95.72	95.16	95.59
	<i>0.31</i>	<i>1.39</i>	<i>1.02</i>	<i>0.48</i>	<i>0.37</i>	<i>1.06</i>	<i>0.76</i>

Table 5.9 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 1996 (2 of 2)

Community-Only Residents¹

Indicator of Access to Care ²	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Beneficiaries (in 000s)	36,631	4,008	4,993	9,437	11,987	1,724	4,481
	<i>144</i>	<i>120</i>	<i>130</i>	<i>203</i>	<i>200</i>	<i>105</i>	<i>157</i>
Beneficiaries as a Percentage of Column Total							
Continuity of Care							
Length of Association with Usual Source of Care							
No usual source ³	7.25	16.71	8.75	6.43	6.00	5.02	3.11
	<i>0.33</i>	<i>1.29</i>	<i>0.70</i>	<i>0.61</i>	<i>0.62</i>	<i>1.30</i>	<i>0.59</i>
Less than 1 year	9.59	9.69	10.86	7.40	7.68	6.75	18.93
	<i>0.31</i>	<i>1.09</i>	<i>0.78</i>	<i>0.55</i>	<i>0.54</i>	<i>1.29</i>	<i>1.11</i>
1 to less than 3 years	18.25	16.86	20.78	16.57	15.59	12.03	29.76
	<i>0.48</i>	<i>1.41</i>	<i>1.05</i>	<i>0.75</i>	<i>0.76</i>	<i>1.58</i>	<i>1.48</i>
3 to less than 5 years	15.63	14.42	16.66	15.01	16.00	15.85	15.82
	<i>0.46</i>	<i>1.23</i>	<i>0.94</i>	<i>0.94</i>	<i>0.87</i>	<i>1.90</i>	<i>1.11</i>
5 years or more	49.27	42.33	42.95	54.60	54.73	60.35	32.38
	<i>0.65</i>	<i>1.58</i>	<i>1.41</i>	<i>1.15</i>	<i>1.01</i>	<i>2.71</i>	<i>1.44</i>

Source: Medicare Current Beneficiary Survey, CY 1996 Cost and Use Public Use File, CY 1996 Access to Care Public Use File, supplemented by CY 1995 and CY 1997 Access to Care Public Use Files as needed to fill in missing data for sample persons not in the CY 1996 file.

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 Responses for sample persons not interviewed in Round 16 (i.e., the 1996 Access to Care Public Use File) were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File) or from their Round 19 interview (i.e., the 1997 Access to Care Public Use File).
- 3 The percentages for *none* under *Usual Source of Care* differs from the percentages 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 (1 of 2)

Community-Only Residents¹

Measure of Satisfaction ²	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO ³
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Beneficiaries (in 000s)	36,631	4,008	4,993	9,437	11,987	1,724	4,481
	144	120	130	203	200	105	157
Beneficiaries as a Percentage of Column Total⁴							
Quality of Care							
General Care							
Very satisfied	28.86	21.45	21.50	30.18	32.18	35.53	29.44
	0.81	1.60	1.41	1.28	1.19	2.62	1.58
(Very) Unsatisfied	3.46	5.00	5.40	2.69	3.16	2.21	2.82
	0.18	0.77	0.65	0.24	0.33	0.75	0.49
Follow-up Care							
Very satisfied	17.46	15.30	13.51	15.91	19.87	20.36	19.51
	0.52	1.21	1.22	0.94	0.88	2.26	1.38
(Very) Unsatisfied	2.82	3.74	4.31	2.29	2.54	2.55	2.29
	0.19	0.62	0.66	0.32	0.29	0.81	0.43
Access/Coordination of Care							
Availability (Night/Weekends)							
Very satisfied	10.19	8.80	8.76	9.08	11.05	15.65	10.99
	0.39	1.16	1.03	0.72	0.66	2.04	0.92
(Very) Unsatisfied	2.70	4.06	4.31	2.35	2.19	1.46	2.27
	0.19	0.50	0.59	0.33	0.29	0.57	0.43
Ease of Access to Doctor							
Very satisfied	18.77	14.21	11.44	18.21	21.20	26.16	22.84
	0.61	1.18	0.93	0.95	0.87	2.61	1.48
(Very) Unsatisfied	5.54	8.51	9.99	3.98	4.70	4.61	3.79
	0.34	0.93	0.85	0.41	0.51	1.00	0.54
Can Obtain Care in Same Location							
Very satisfied	13.99	11.82	11.62	11.38	15.18	14.37	20.70
	0.57	1.35	1.13	0.90	0.87	2.01	1.53
(Very) Unsatisfied	4.52	5.77	6.41	3.84	4.57	3.36	3.05
	0.30	0.78	0.87	0.47	0.50	0.94	0.52

Table 5.10 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 1996 (2 of 2)

Community-Only Residents¹

Measure of Satisfaction ²	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO ³
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Beneficiaries (in 000s)	36,631	4,008	4,993	9,437	11,987	1,724	4,481
	<i>144</i>	<i>120</i>	<i>130</i>	<i>203</i>	<i>200</i>	<i>105</i>	<i>157</i>
Beneficiaries as a Percentage of Column Total⁴							
Relationship with Primary Doctor							
Information from Doctor							
Very satisfied	17.41	13.95	13.66	16.34	19.12	22.43	20.45
	<i>0.60</i>	<i>1.29</i>	<i>1.22</i>	<i>0.95</i>	<i>0.96</i>	<i>2.40</i>	<i>1.40</i>
(Very) Unsatisfied	5.48	6.56	7.48	4.80	5.33	2.84	5.18
	<i>0.25</i>	<i>0.79</i>	<i>0.66</i>	<i>0.42</i>	<i>0.53</i>	<i>0.95</i>	<i>0.69</i>
Doctor's Concern for Overall Health							
Very satisfied	19.00	15.05	14.50	17.61	21.65	22.97	21.84
	<i>0.56</i>	<i>1.28</i>	<i>1.13</i>	<i>0.97</i>	<i>0.91</i>	<i>2.51</i>	<i>1.46</i>
(Very) Unsatisfied	4.87	7.19	5.64	4.34	4.62	2.37	4.71
	<i>0.24</i>	<i>0.79</i>	<i>0.68</i>	<i>0.53</i>	<i>0.44</i>	<i>0.79</i>	<i>0.64</i>
Cost of Care							
Cost							
Very satisfied	16.48	9.64	16.19	12.55	18.33	17.71	25.73
	<i>0.56</i>	<i>0.87</i>	<i>1.37</i>	<i>0.87</i>	<i>0.89</i>	<i>1.74</i>	<i>1.58</i>
(Very) Unsatisfied	11.83	22.46	11.41	13.08	10.07	7.24	6.64
	<i>0.39</i>	<i>1.24</i>	<i>1.04</i>	<i>0.76</i>	<i>0.55</i>	<i>1.40</i>	<i>0.83</i>

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 Responses for sample persons not interviewed in Round 16 (i.e., the 1996 Access to Care Public Use File) were taken from their Round 13 interview (i.e., the 1995 Access to Care Public Use File) or from their Round 19 interview (i.e., the 1997 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.