

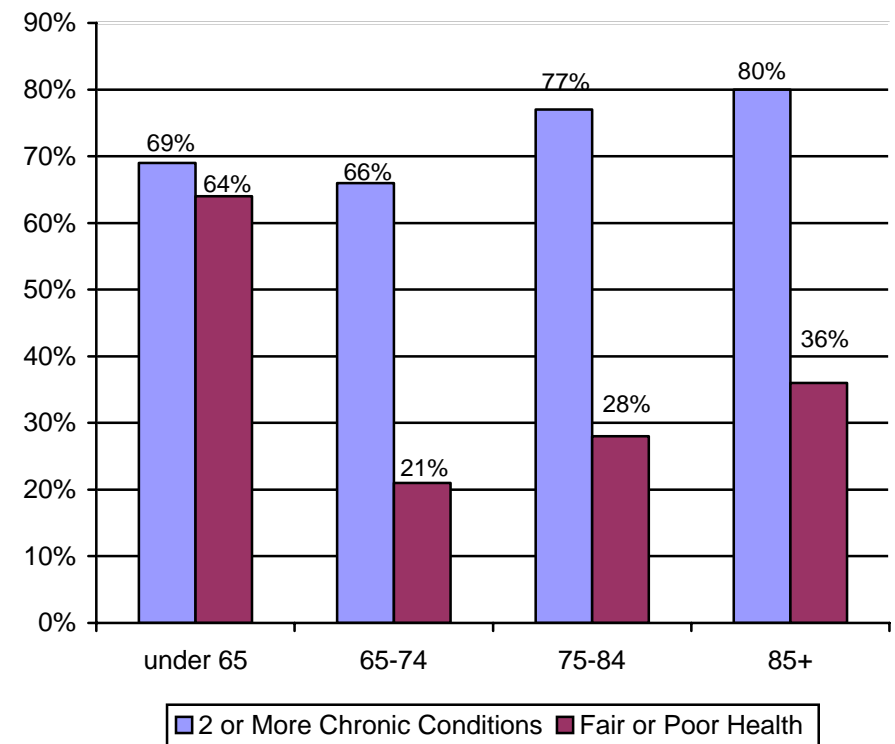
# Section 2

## Health Status

### Health Status, by Age

- Sixty-four percent of disabled beneficiaries considered their health fair or poor, while only 21 percent of those 65 to 74 classified their health as fair or poor. The percentage of aged beneficiaries who reported their health as fair or poor increased with age.
- Seventy-eight percent of beneficiaries' aged 85 or older reported some type of functional limitation. Sixty-four percent of those aged 85 and older could not perform one or more ADL(s).
- As age increased, the percentage of aged beneficiaries with two or more chronic conditions also increased. Beneficiaries aged 85 and older were more likely to have Parkinson's disease, Alzheimer's disease, stroke, osteoporosis or a broken hip. Cancer rates were highest for beneficiaries in the 75 to 84 age group. Disabled beneficiaries had higher than average rates of diabetes and pulmonary disease.
- Sixty-two percent of beneficiaries over aged 85 and older said they had never smoked. The percentage of beneficiaries who have never smoked increased significantly in the higher age groups.
- Overall, beneficiaries over age 74 were the most likely to receive flu or pneumonia shots.

**Beneficiaries with Two or More Chronic Conditions and Fair or Poor Health, by Age**

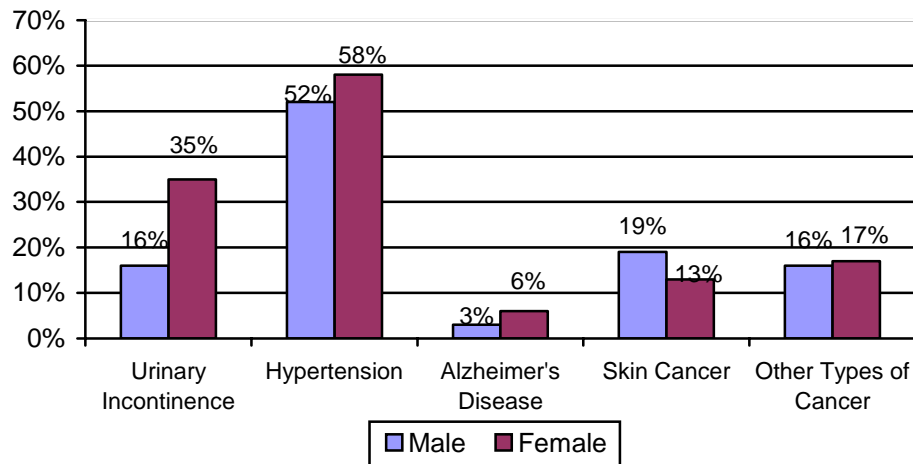


## Health Status, by Gender

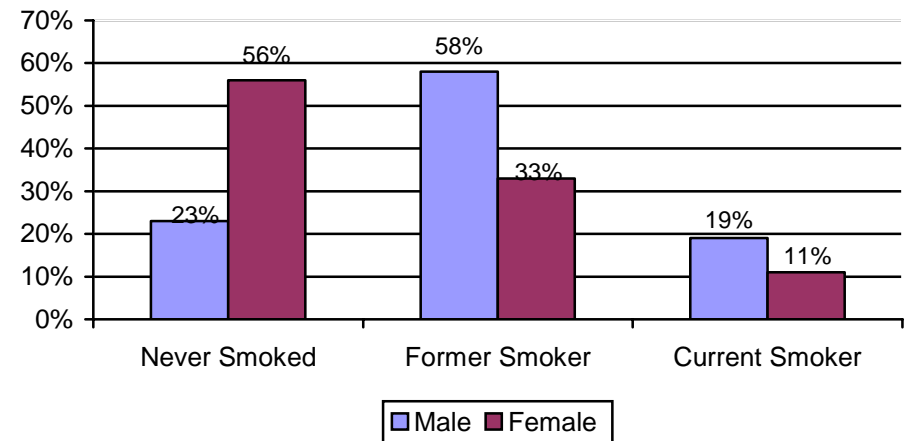
- Male beneficiaries had higher rates of pulmonary disease and skin cancer. Female beneficiaries had a higher incidence of osteoporosis and broken hip (25 percent of all females as compared to 6 percent of all males), Alzheimer's disease, urinary incontinence, arthritis, hypertension, and cancer (excluding skin cancer).
- Forty percent of female beneficiaries aged 85 and older reported they could not perform three to six ADLs compared to only 28 percent of men in that age group.

- Seventy-six percent of female beneficiaries compared to 65 percent of male beneficiaries had two or more chronic conditions.
- A large portion of female beneficiaries never smoked (56 percent), while most male beneficiaries were former or current smokers (77 percent).

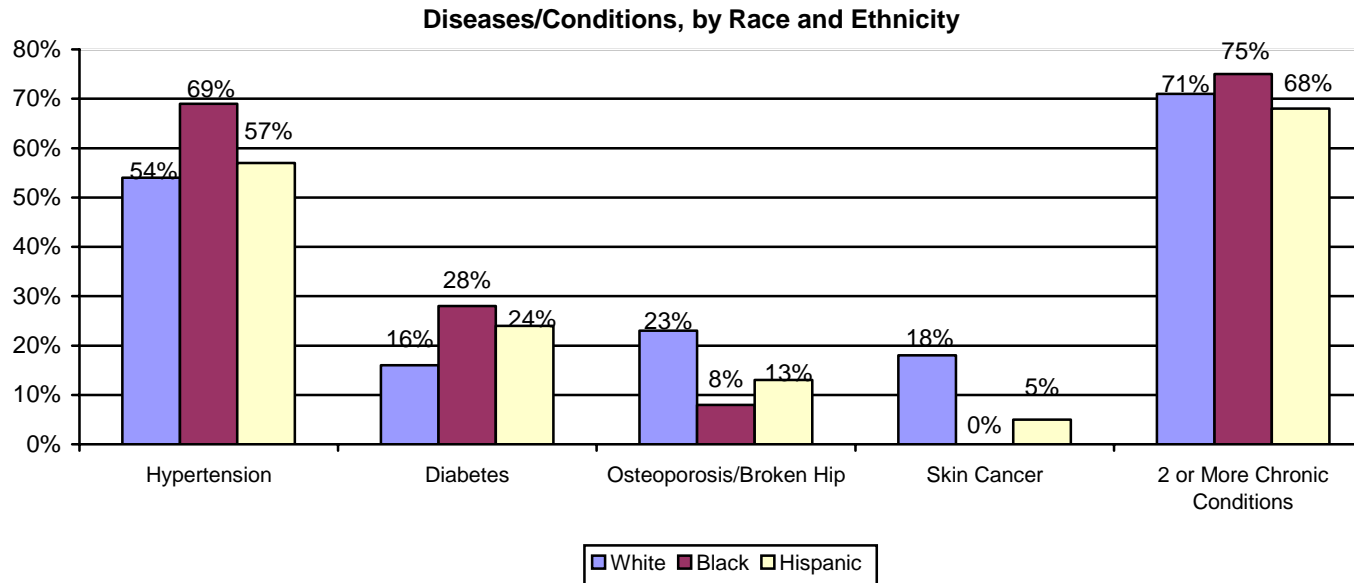
Diseases/Conditions, by Gender



Smoking, by Gender



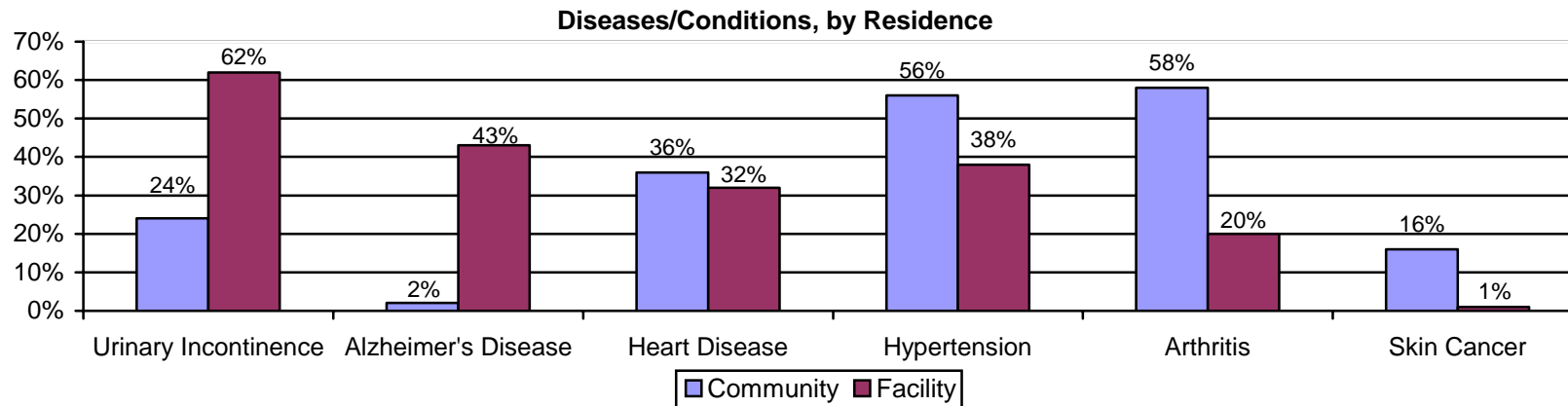
## Health Status, by Race and Ethnicity



- Forty-one percent of White beneficiaries compared to only 26 percent of Black beneficiaries considered their health very good or excellent.
- A larger percentage of Black beneficiaries currently smoke (20 percent) than do Hispanic or White beneficiaries (13 and 14 percent respectively). Hispanic beneficiaries were the most likely to have never smoked.
- A higher percentage of Black beneficiaries had two or more chronic conditions than did Hispanic or White beneficiaries. Black and Hispanic beneficiaries had a higher incidence of hypertension and diabetes than did White beneficiaries, but had lower rates of osteoporosis, broken hip and skin cancer.
- Black beneficiaries were more likely than Hispanic or White beneficiaries to have one or more functional limitation(s).

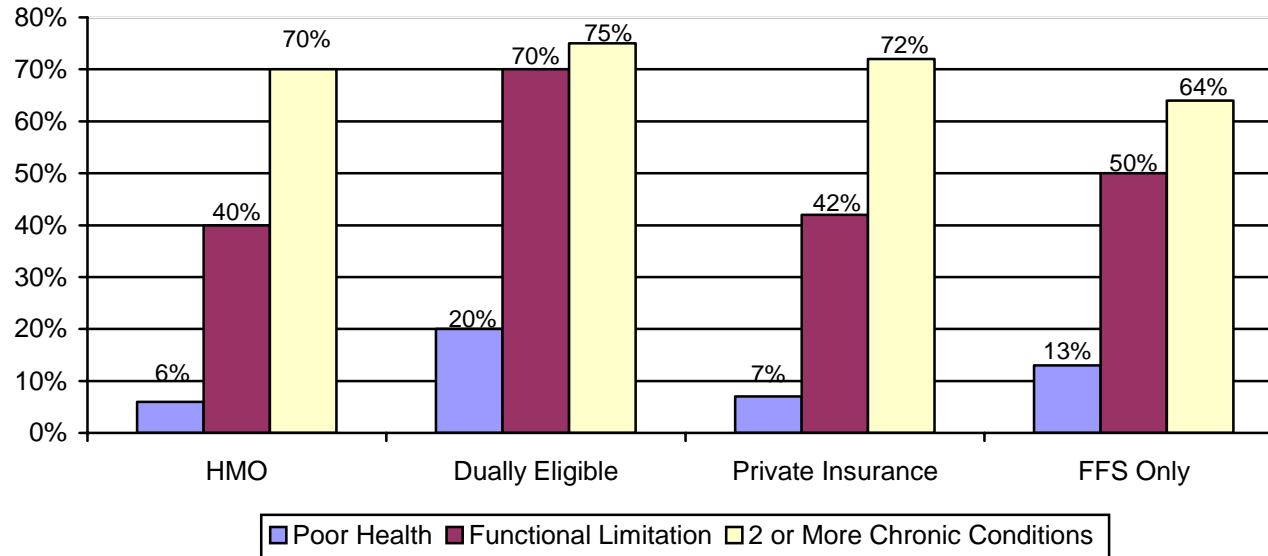
## Heath Status, by Residence

- Although most beneficiaries in the community reported their health status as good, this varied by living arrangement. A greater percentage of beneficiaries in excellent health lived with a spouse, while a greater percentage of beneficiaries in poor health lived with children or others. Sixty-two percent of beneficiaries living in facility care were reportedly in fair or poor health.
- Beneficiaries in facility care had much higher rates of urinary incontinence and Alzheimer's disease. Beneficiaries living in the community had higher rates of hypertension, arthritis, and skin cancer.
- Seventy-three percent of beneficiaries in facilities had two or more chronic conditions compared to only 71 percent of beneficiaries living in the community.
- All beneficiaries in facilities had functional limitation and were unable to perform one or more ADL(s). In the community about 62 percent of those that lived with children or others had a functional limitation. In comparison, only 49 percent of those who lived alone and 40 percent of those who lived with a spouse reported functional limitations.



## Health Status, by Insurance Type

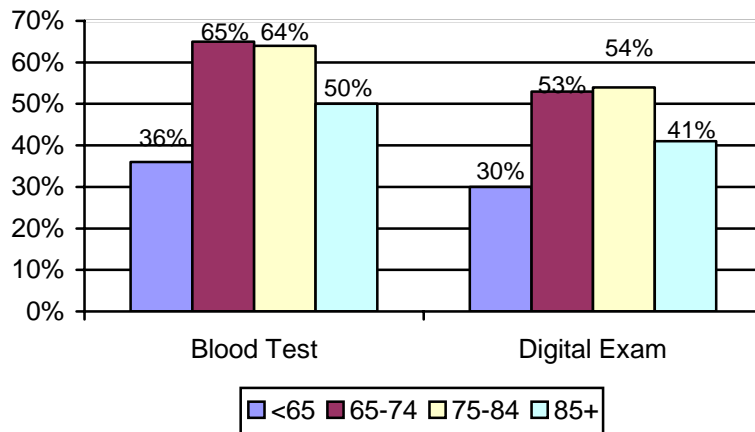
**Beneficiaries in Poor Health, with Functional Limitations, Two or More Chronic Conditions/Diseases, by Insurance Type**



- Dually eligible beneficiaries were much more likely than other community beneficiaries to be in poor health, have some type of limitation, and have more than one chronic condition.
- Beneficiaries in the Medicare HMOs or those with private insurance were less likely to be in poor health or have functional limitations than were other community beneficiaries.

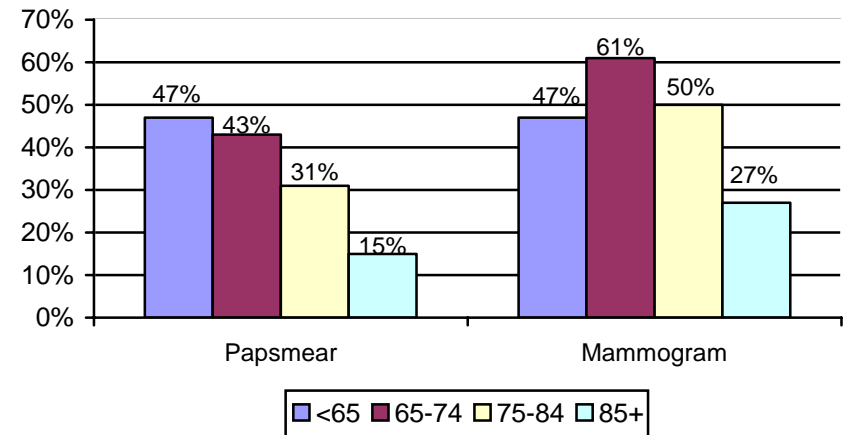
## Preventive Services, by Gender and Age

**Male Beneficiaries that had a Blood Test or Digital Exam for Prostate Cancer, by Age**



- Fifty-nine percent of male beneficiaries had a blood test and almost half of male beneficiaries had a digital exam.
- Disabled male beneficiaries and those aged 85 and older were the least likely to have a blood test or digital exam.
- Male beneficiaries aged 65 to 84 were more likely to have a blood test than other male beneficiaries.

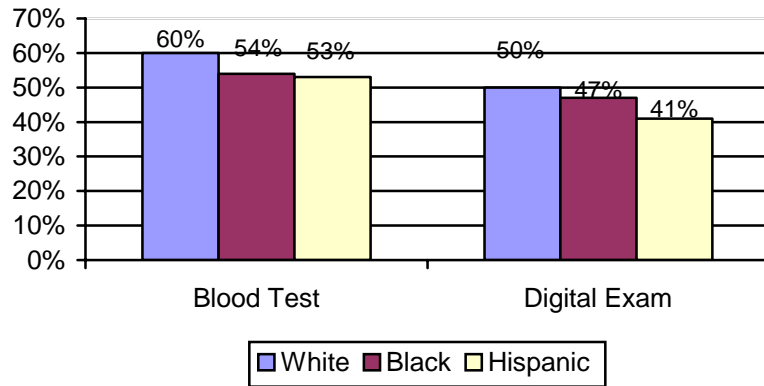
**Female Beneficiaries that had a Papsmear or Mammogram, by Age**



- Thirty-six percent of female beneficiaries had a pap smear and over half of female beneficiaries had a mammogram.
- Female beneficiaries aged 65 to 74 were the most likely to have a mammogram.
- Female beneficiaries aged 85 and older were the least likely to have either a pap smear or a mammogram.
- Female beneficiaries aged 65 to 74 were three times more likely to have a pap smear and were more than twice as likely to have a mammogram than beneficiaries aged 85 or older.

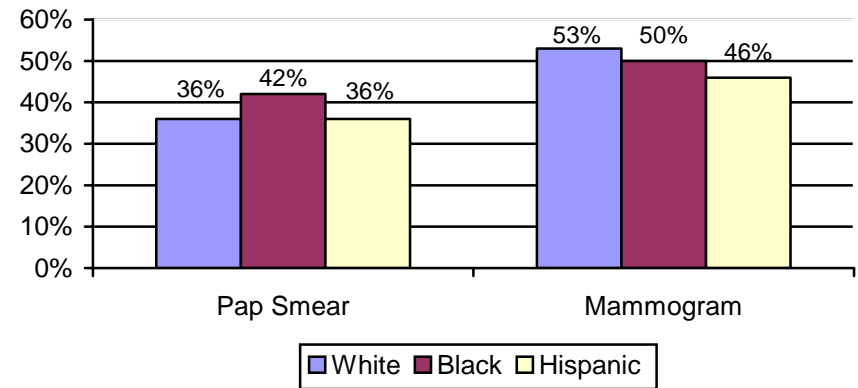
## Preventive Services, by Gender and Race and Ethnicity

**Male Beneficiaries that had a Blood Test or Digital Exam for Prostate Cancer, by Race and Ethnicity**



- Hispanic male beneficiaries were the least likely to have a blood test or digital exam for prostate cancer.
- White male beneficiaries were slightly more likely than Black or Hispanic male beneficiaries to have a blood test or digital exam.
- Male beneficiaries had higher rates of reporting having a blood test than a digital exam.

**Female Beneficiaries that had a Pap Smear or Mammogram, by Race and Ethnicity**



- White female beneficiaries were more likely to have a mammogram, whereas Black female beneficiaries were more likely to have a pap smear.
- Hispanic female beneficiaries were the least likely to have a mammogram.

# **Section 2**

## **Health Status**