

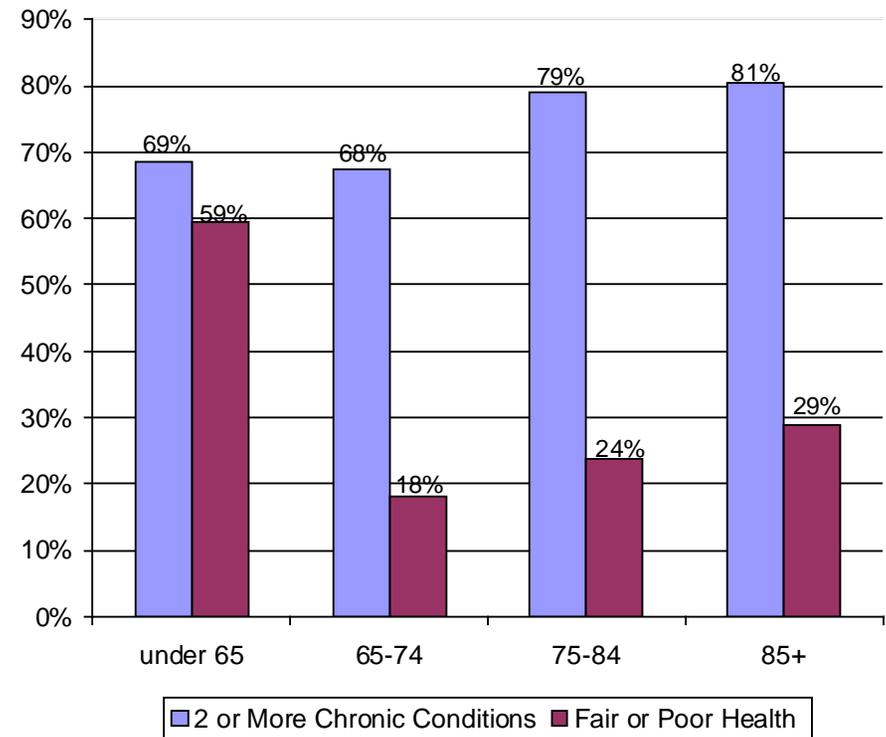
# Section 2

## Health Status in 2009

### Health Status, by Age

- Fifty-nine percent of disabled beneficiaries considered their health fair or poor, while only 20 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-three percent of beneficiaries' aged 85 or older reported some type of functional limitation. Fifty-eight 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 rates of diabetes and pulmonary disease.
- Fifty-eight 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.

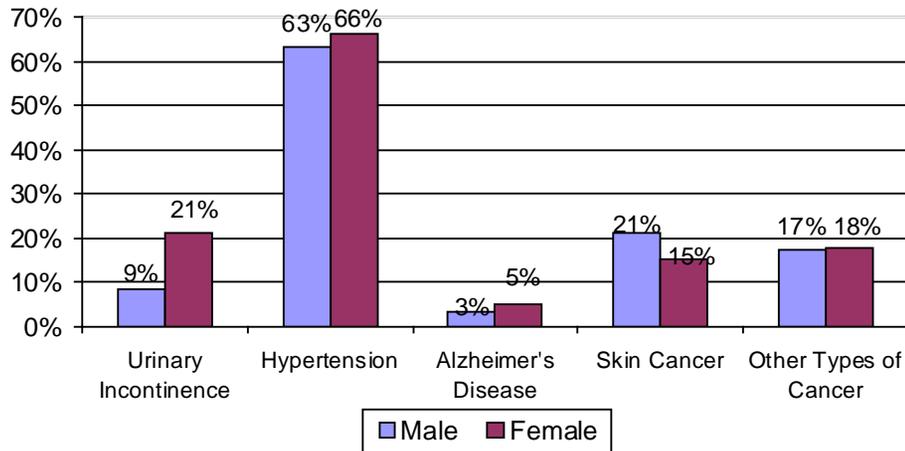
**Beneficiaries with Two or More Chronic Conditions and Fair or Poor Health, by Age**



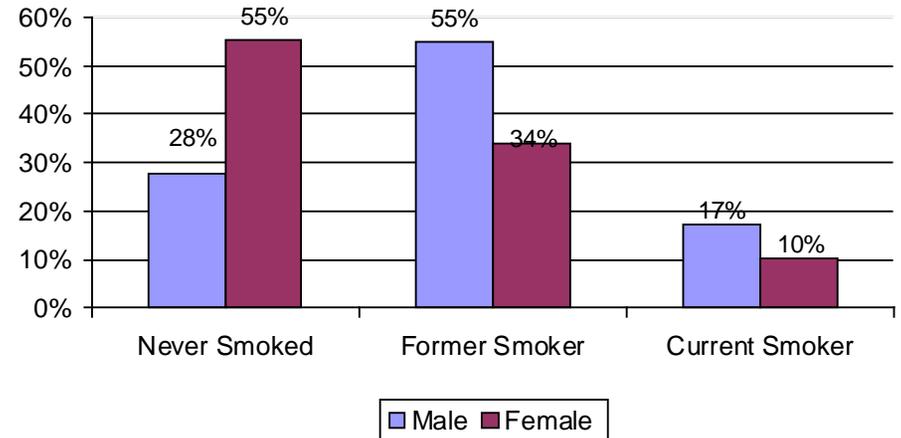
## Health Status, by Gender

- Male beneficiaries had higher rates of skin cancer. Female beneficiaries had a higher incidence of osteoporosis and broken hip (33 percent of all females as compared to 7 percent of all males), urinary incontinence, hypertension, Alzheimer’s disease, and arthritis.
- Sixteen percent of female beneficiaries aged 85 and older reported they could not perform three to six ADLs compared to only 12 percent of men in that age group.
- Seventy-seven percent of female beneficiaries compared to 67 percent of male beneficiaries had two or more chronic conditions.
- A large portion of female beneficiaries never smoked (55 percent), while most male beneficiaries were former or current smokers (72 percent).

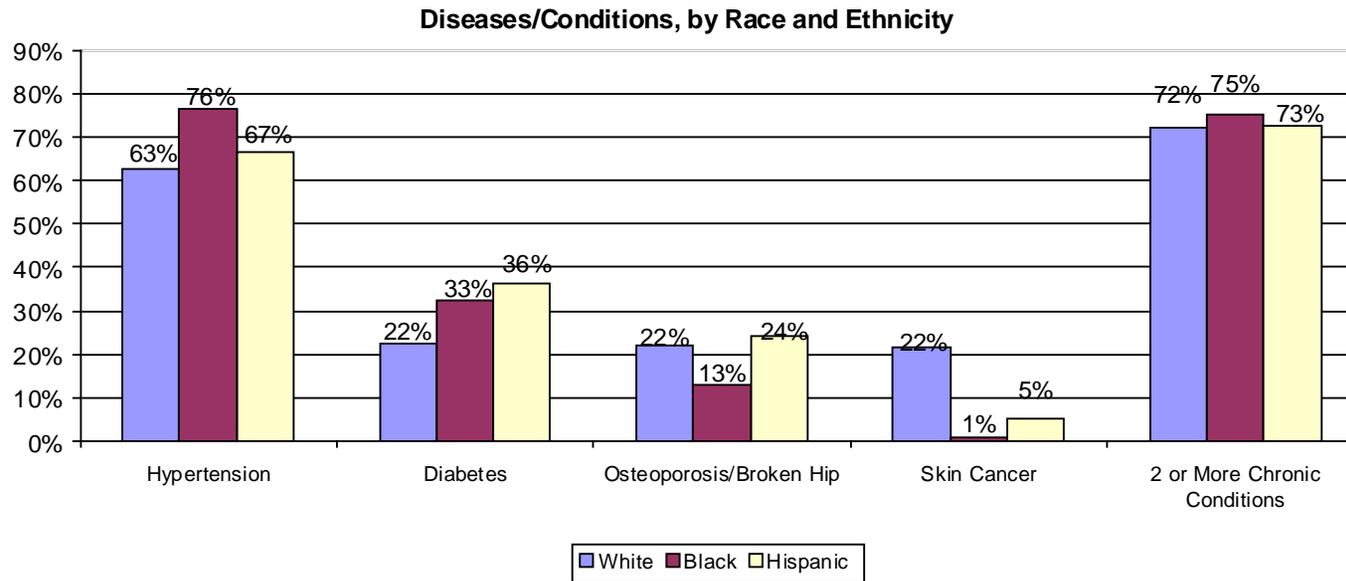
**Diseases/Conditions, by Gender**



**Smoking, by Gender**



## Health Status, by Race and Ethnicity

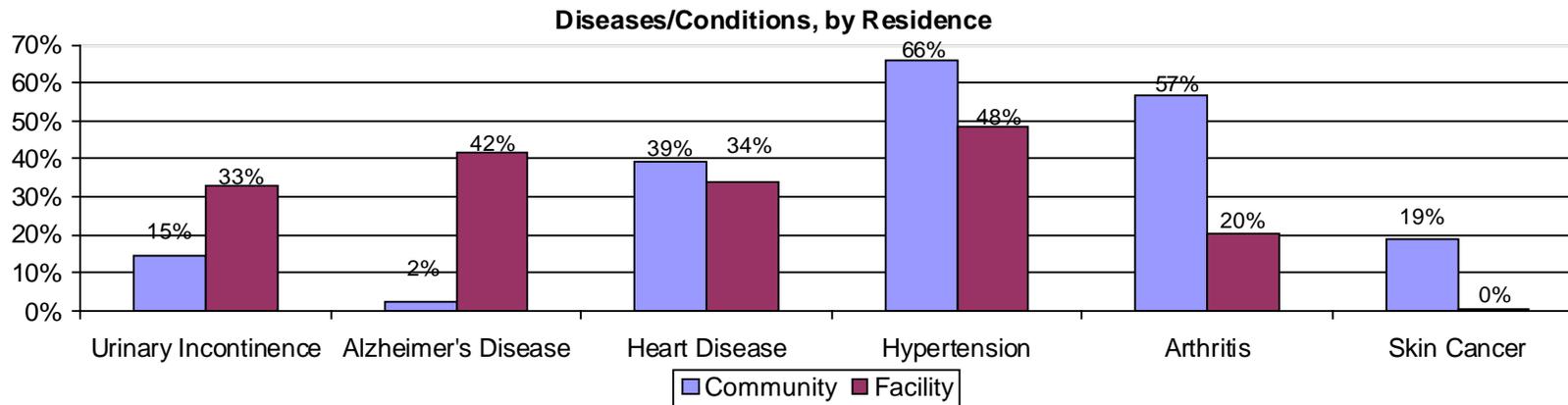


- Forty-five percent of White beneficiaries compared to only 27 percent of Black beneficiaries considered their health very good or excellent.
- A larger percentage of Black beneficiaries currently smoke (19 percent) than do Hispanic or White beneficiaries. Hispanic beneficiaries were the most likely 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 diabetes than did White beneficiaries, but had much lower rates of skin cancer.
- Black beneficiaries and Hispanic beneficiaries were more likely than White beneficiaries to have one or more functional limitation(s).

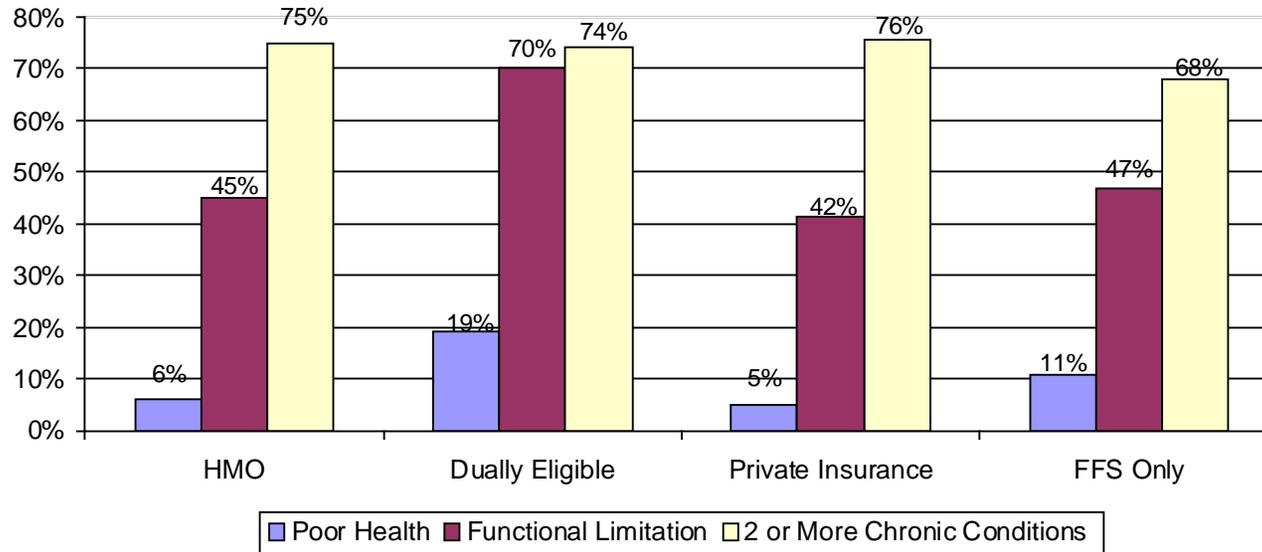
## Health Status, by Residence

- 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 or alone, while a greater percentage of beneficiaries in poor health lived with children or others. Sixty-three 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 heart disease, hypertension, arthritis, and skin cancer.
- Sixty-four percent of beneficiaries in facilities had two or more chronic conditions compared to 73 percent of beneficiaries living in the community.
- All beneficiaries in facilities had functional limitations and were unable to perform one or more ADL(s). In the community about 64 percent of those that lived with children or others had a functional limitation. In comparison, only 47 percent of those who lived alone and 39 percent of those who lived with a spouse reported functional limitations.



## Health Status, by Insurance Type

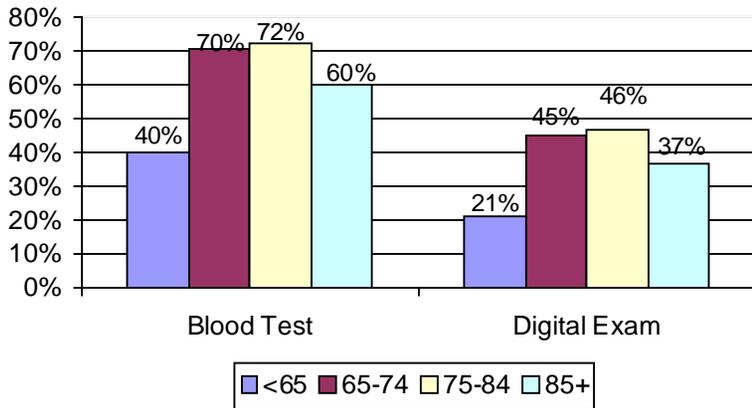
**Beneficiaries in Poor Health, with Functional Limitations, Two or More Chronic Conditions/Diseases, by Insurance Type**



- Dually eligible beneficiaries were much more likely than other community beneficiaries to be in poor health and have some type of limitation.
- 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.
- Medicare FFS only beneficiaries were the least likely to have two or more chronic conditions.

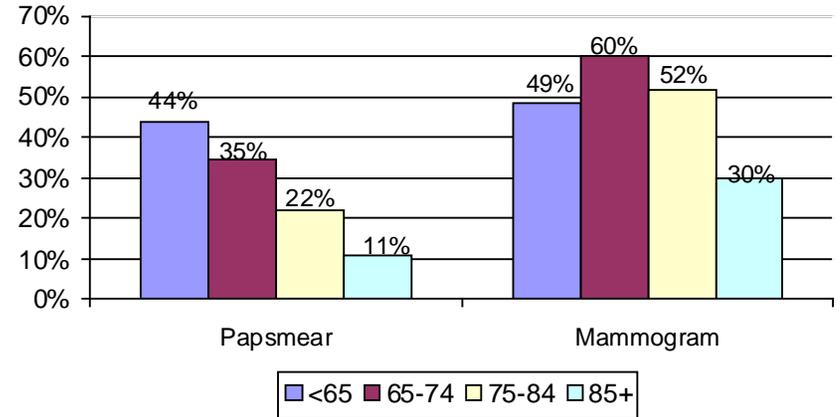
## Preventive Services, by Gender and Age

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



- Sixty-four percent of male beneficiaries had a blood test and 40 percent of male beneficiaries had a digital exam.
- Disabled male beneficiaries were the least likely to have a blood test or digital exam.
- Male beneficiaries aged 75 to 84 were more likely to have a blood test and digital exam than other male beneficiaries.

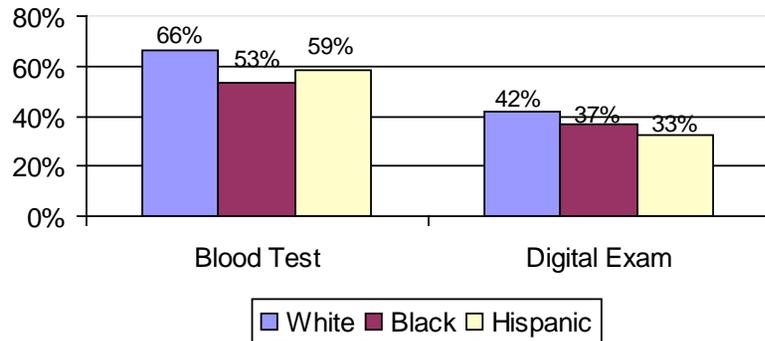
**Female Beneficiaries that had a Papsmear or Mammogram, by Age**



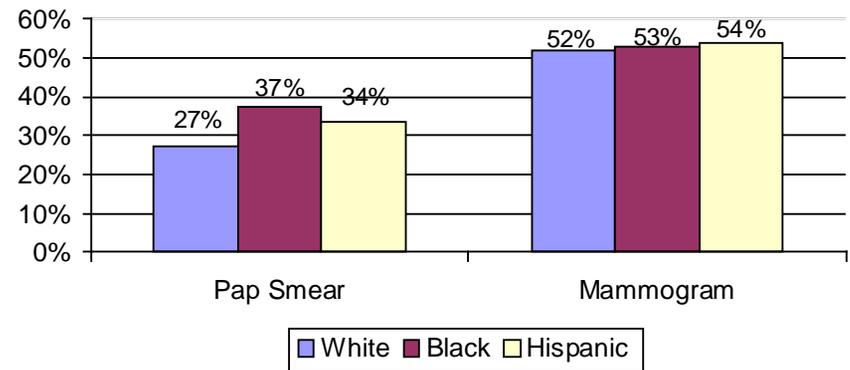
- Twenty-nine percent of female beneficiaries had a pap smear and over half of female beneficiaries had a mammogram.
- Female beneficiaries aged 65 to 74 were the most likely to have a mammogram.
- Female beneficiaries aged 65 to 74 were three times more likely to have a pap smear than beneficiaries 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**



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



- Hispanic male beneficiaries were the least likely to have a digital exam for prostate cancer and Black male beneficiaries were the least likely to have a blood test for prostate cancer.
- White male beneficiaries were more likely than Black or Hispanic male beneficiaries to have a blood test.
- Male beneficiaries had higher rates of reporting having a blood test than a digital exam.
- Female beneficiaries were equally likely to have a mammogram. Black and Hispanic female beneficiaries were more likely to have a pap smear.