

Table 3.1 Outpatient Hospital User Rates for Non-institutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2009

Community Residents¹

Beneficiary Characteristic	Total	Medicare Risk HMO ²	Supplemental Health Insurance			Medicare Fee-For-Service Only	Other
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance		
Percent of Beneficiaries With at Least One Outpatient Hospital Stay							
All Beneficiaries	37.42	33.37	38.25	40.58	39.36	47.64	35.93*
	0.63	1.02	1.26	1.09	0.92	2.72	6.54
Medicare Status³							
Aged							
65 - 74 years	35.91	32.64	35.58	40.19	37.25	45.11	34.79*
	0.89	1.55	2.75	1.87	1.57	3.96	12.58
75 - 84 years	39.59	34.42	35.90	45.85	41.54	52.07	35.31*
	0.86	1.54	2.57	1.45	1.50	4.08	9.04
85 years and older	32.78	29.26	31.05	32.22	35.84	41.92*	30.92*
	1.17	2.09	3.82	2.13	2.27	5.87	10.34
Disabled							
Under 45 years	34.20	32.96	32.73	39.56*	45.54*	59.67*	64.11*
	1.57	4.73	1.72	17.48	7.78	32.70	21.28
45 - 64 years	43.20	37.69	47.37	33.10*	48.41	66.98*	36.46*
	1.77	3.55	2.69	7.19	4.84	20.18	16.26
Gender							
Male	36.72	33.27	35.74	39.81	36.95	47.55	47.00*
	0.83	1.36	1.78	1.77	1.41	4.11	8.89
Female	38.01	33.46	39.97	41.09	41.63	47.71	26.56*
	0.75	1.38	1.69	1.53	1.35	4.21	6.77
Living Arrangement							
Lives alone	36.94	32.34	40.49	40.32	36.75	46.93	32.47*
	0.84	1.48	1.83	1.58	1.56	4.68	8.04
With spouse	38.86	34.94	40.17	41.30	40.57	47.62	44.26*
	0.85	1.50	3.46	1.56	1.24	4.00	10.69
With children	34.94	31.83	37.23	39.39	36.42	42.14*	17.68*
	1.36	2.62	2.82	2.94	3.75	11.18	11.00
With others	33.30	28.97	33.87	35.42*	40.60*	63.46*	58.23*
	1.72	2.90	2.34	5.72	5.76	16.63	28.71

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Community Residents¹

Beneficiary Characteristic	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			
Percent of Beneficiaries With at Least One Outpatient Hospital Stay								
All Beneficiaries	37.42	33.37	38.25	40.58	39.36	47.64	34.33	35.93*
	0.63	1.02	1.26	1.09	0.92	2.72	1.47	6.54
Race/Ethnicity								
White non-Hispanic	38.08	34.56	39.57	40.79	39.36	49.02	33.56	34.77*
	0.70	1.14	1.63	1.12	1.10	2.96	1.74	8.98
Black non-Hispanic	33.48	29.17	34.25	28.36*	38.69	38.70*	33.73	39.87*
	1.31	2.38	2.29	7.00	3.53	12.85	3.27	13.96
Hispanic	35.66	31.35	40.19	38.79*	37.85	27.98*	38.50	60.78*
	1.98	3.08	3.87	5.67	4.83	17.13	4.35	24.20
Other	37.52	29.56*	36.50	43.25*	45.18*	38.62*	39.40*	15.62*
	1.98	4.82	3.69	7.33	6.20	15.88	6.79	16.57
Income								
\$5,000 or less	35.64	29.52*	32.35	41.64*	46.61*	57.22*	40.67*	29.71*
	2.57	4.36	3.38	7.53	6.52	22.47	9.03	26.69
\$5,001 - \$10,000	35.33	32.17	39.78	35.42*	38.99*	31.95*	22.49*	23.61*
	1.32	2.67	1.72	4.82	6.49	17.77	3.45	14.63
\$10,001 - \$15,000	33.79	28.19	37.33	36.69	36.84	66.13*	32.02	34.04*
	1.13	2.10	2.14	2.84	3.05	13.91	2.36	12.34
\$15,001 - \$20,000	36.93	30.16	41.17	41.17	42.48	36.78*	36.09	35.90*
	1.43	2.27	5.29	3.12	2.43	10.33	3.35	12.07
\$20,001 - \$25,000	38.00	35.23	39.95*	42.92	35.90	59.29*	35.50	33.04*
	1.54	3.62	6.60	3.18	2.69	7.43	3.96	15.43
\$25,001 - \$30,000	40.71	36.00	40.83*	42.64	43.86	46.95*	39.28	49.82*
	1.68	2.78	9.27	3.31	3.11	8.96	4.16	13.87
\$30,001 - \$35,000	38.95	39.32	27.68*	34.77	40.30	57.29*	38.25	100.00*
	1.74	2.99	12.24	3.27	2.89	9.83	4.87	0.00
\$35,001 - \$40,000	34.50	28.00	42.30*	41.53	35.96	36.79*	29.99*	.
	1.71	3.22	22.20	3.74	2.85	8.12	4.57	.
More than \$40,000	40.22	38.90	48.04*	43.17	39.28	47.81	36.16	.
	1.27	2.15	21.75	2.65	1.61	3.91	3.53	.

Table 3.1 Outpatient Hospital User Rates for Non-institutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2009

Community Residents¹

Beneficiary Characteristic	Total	Medicare Risk HMO ²	Supplemental Health Insurance			Medicare Fee-For-Service Only	Other
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance		
Percent of Beneficiaries With at Least One Outpatient Hospital Stay							
All Beneficiaries	37.42	33.37	38.25	40.58	39.36	47.64	35.93*
	0.63	1.02	1.26	1.09	0.92	2.72	6.54
Health Status							
Excellent	29.53	27.32	26.45*	29.85	33.33	37.09*	31.41*
	1.11	2.61	5.28	2.13	2.27	6.09	16.18
Very Good	35.64	32.64	28.40	38.16	37.31	48.21	44.20*
	0.96	1.74	3.02	2.02	1.69	4.45	20.54
Good	37.87	34.40	35.53	46.12	39.04	46.23	32.77*
	0.83	1.56	1.98	2.48	1.41	5.08	8.37
Fair	42.87	35.33	43.50	48.31	47.39	63.41*	30.46*
	1.43	2.40	2.11	2.94	3.00	7.27	11.58
Poor	44.78	37.51	46.11	38.68*	52.87	68.79*	61.68*
	2.12	4.43	2.98	4.67	4.28	14.94	19.31
Functional Limitation							
None	33.59	30.79	31.93	37.51	34.56	40.82	39.52*
	0.71	1.28	2.19	1.37	1.13	3.52	13.15
IADL only	41.54	38.49	37.56	44.47	47.83	61.66*	44.67*
	1.21	2.07	2.37	3.15	2.94	7.79	12.72
One to two ADLs	42.21	35.33	41.93	46.52	46.19	55.50*	17.30*
	1.12	2.05	2.44	2.26	2.18	5.39	7.38
Three to six ADLs	41.70	36.46	43.76	41.24	46.95	59.40*	43.62*
	1.70	3.11	3.01	3.71	3.15	10.23	16.82

Table 3.1 Outpatient Hospital User Rates for Non-institutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2009

Community Residents¹

Beneficiary Characteristic	Total	Medicare Risk HMO ²	Supplemental Health Insurance			Medicare Fee-For-Service Only	Other
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance		
Percent of Beneficiaries With at Least One Outpatient Hospital Stay							
All Beneficiaries	37.42	33.37	38.25	40.58	39.36	47.64	35.93*
	<i>0.63</i>	<i>1.02</i>	<i>1.26</i>	<i>1.09</i>	<i>0.92</i>	<i>2.72</i>	<i>6.54</i>
Metropolitan Area Resident							
Yes	35.04	32.15	36.15	37.65	36.52	44.49	33.62*
	<i>0.66</i>	<i>1.05</i>	<i>1.62</i>	<i>1.37</i>	<i>1.00</i>	<i>3.13</i>	<i>6.92</i>
No	45.17	41.93	42.86	47.25	48.93	61.36	41.41*
	<i>1.55</i>	<i>3.96</i>	<i>1.95</i>	<i>1.73</i>	<i>1.86</i>	<i>3.93</i>	<i>16.27</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 37 interview (fall 2003), and beneficiaries who resided in the community at the time of the round 34 interview (fall 2002) who died prior to the round 37 interview.
- 2 HMO stands for Health Maintenance Organization.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of "Aged" and "Disabled."

Table 3.2 Physician Services User Rates for Non-institutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2009

Community Residents¹

Beneficiary Characteristic	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
Percent of Beneficiaries With at Least One Physician Service								
All Beneficiaries	90.08	92.38	86.67	93.61	91.47	95.87	81.13	90.55
	0.53	0.57	0.99	0.66	0.74	1.53	1.29	3.15
Medicare Status³								
Aged								
65 - 74 years	88.19	91.46	83.59	91.93	88.94	94.17	76.87	86.04*
	0.74	0.83	2.14	1.21	1.14	2.73	2.08	5.71
75 - 84 years	93.35	94.22	91.01	95.53	94.58	97.98	85.13	94.08*
	0.38	0.62	1.46	0.58	0.79	1.17	1.51	6.00
85 years and older	92.03	90.10	90.89	94.24	93.10	98.43	88.01	88.20*
	0.62	1.69	2.47	1.11	1.05	1.58	2.21	7.64
Disabled								
Under 45 years	82.58	83.98	82.55	87.99*	93.37	100.00*	73.57	92.88*
	1.19	3.60	1.71	9.34	3.40	0.00	3.89	8.03
45 - 64 years	89.30	94.54	87.76	93.35*	92.98	81.75*	83.14	100.00*
	1.18	1.65	1.99	4.16	1.86	17.97	2.67	0.00
Gender								
Male	88.08	91.20	82.19	92.76	90.01	96.69	78.66	92.60*
	0.70	0.97	1.53	1.16	1.05	2.23	1.61	3.99
Female	91.76	93.33	89.74	94.17	92.86	95.19	84.03	88.81*
	0.53	0.63	1.24	0.69	0.89	2.05	1.68	4.50
Living Arrangement								
Lives alone	88.61	89.90	87.54	91.90	91.46	96.11	78.55	90.47*
	0.70	1.04	1.41	1.00	1.25	1.66	2.09	4.96
With spouse	91.92	94.34	85.41	94.48	91.94	95.83	84.70	91.66*
	0.61	0.70	2.44	0.91	0.83	2.28	1.47	5.33
With children	89.53	92.15	90.22	94.32	86.81	100.00*	81.82	84.73*
	1.24	1.56	1.75	2.16	3.62	0.00	3.14	10.46
With others	84.81	88.98	83.25	95.15	92.36	87.83*	71.85	100.00*
	1.30	2.68	2.02	2.39	3.27	12.28	3.84	0.00

Table 3.2 Physician Services User Rates for Non-institutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2009

Community Residents¹

Beneficiary Characteristic	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
Percent of Beneficiaries With at Least One Physician Service								
All Beneficiaries	90.08	92.38	86.67	93.61	91.47	95.87	81.13	90.55
	0.53	0.57	0.99	0.66	0.74	1.53	1.29	3.15
Race/Ethnicity								
White non-Hispanic	90.85	92.73	87.58	93.72	91.65	96.96	82.47	88.44
	0.56	0.68	1.30	0.68	0.77	1.25	1.44	4.03
Black non-Hispanic	86.57	89.45	86.81	86.17*	91.22	100.00*	76.36	90.53*
	1.05	1.75	1.70	4.57	1.98	0.00	3.50	9.58
Hispanic	87.46	92.94	80.78	92.19	88.32	63.10*	76.94	100.00*
	1.38	1.28	3.02	3.89	4.36	21.51	4.15	0.00
Other	89.47	91.73	89.76	96.97	92.80	81.84*	79.29	100.00*
	1.43	2.89	2.56	2.34	2.87	17.26	4.92	0.00
Income								
\$5,000 or less	86.74	87.66	84.66	91.55	97.73	100.00*	78.35	100.00*
	1.71	3.67	2.42	4.03	1.73	0.00	7.51	0.00
\$5,001 - \$10,000	86.32	89.77	87.88	89.53	94.01	59.06*	69.57	67.90*
	1.05	2.09	1.19	3.61	2.79	19.66	4.15	16.52
\$10,001 - \$15,000	86.32	91.27	85.01	92.04	82.89	100.00*	76.12	91.29*
	1.04	1.52	1.96	2.09	3.22	0.00	3.35	5.34
\$15,001 - \$20,000	89.59	91.52	86.56	94.27	90.68	96.63*	80.50	91.70*
	1.11	1.33	4.61	1.64	2.00	3.32	2.99	6.20
\$20,001 - \$25,000	90.60	93.25	89.84	92.35	90.20	97.16*	82.61	97.40*
	1.06	1.52	4.17	1.70	2.38	3.02	3.16	3.12
\$25,001 - \$30,000	93.30	96.99	85.67*	94.85	94.94	100.00*	81.96	100.00*
	0.97	0.77	7.72	1.81	1.29	0.00	4.21	0.00
\$30,001 - \$35,000	91.09	93.38	87.60*	89.98	93.15	100.00*	83.33	.
	1.14	1.63	8.23	2.44	1.59	0.00	3.46	.
\$35,001 - \$40,000	92.00	92.72	100.00*	94.51	92.71	89.53*	85.89	.
	1.06	1.86	0.00	2.06	1.53	6.83	2.87	.
More than \$40,000	92.57	92.65	100.00*	96.39	91.16	97.25	88.19	100.00*
	0.84	1.39	0.00	1.11	1.15	2.03	2.26	0.00

Table 3.2 Physician Services User Rates for Non-institutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2009

Community Residents¹

Beneficiary Characteristic	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
Percent of Beneficiaries With at Least One Physician Service								
All Beneficiaries	90.08	92.38	86.67	93.61	91.47	95.87	81.13	90.55
	0.53	0.57	0.99	0.66	0.74	1.53	1.29	3.15
Health Status								
Excellent	82.65	87.12	74.39	86.84	85.04	84.57	67.79	65.33*
	1.53	2.08	4.61	2.32	2.05	6.29	4.31	18.62
Very Good	90.17	91.65	80.99	93.70	90.65	97.98	82.59	85.24*
	0.67	1.06	3.37	1.07	1.36	1.12	1.78	8.85
Good	91.67	93.29	86.51	94.73	94.28	99.52	82.72	97.30*
	0.61	0.83	1.80	0.85	0.94	0.58	2.20	3.41
Fair	92.76	94.78	89.80	97.64	94.57	100.00*	85.82	95.01*
	0.69	1.07	1.35	0.87	1.07	0.00	2.50	4.88
Poor	92.09	94.98	90.11	99.65	95.33	100.00*	85.02	83.19*
	1.21	2.01	2.32	0.35	1.52	0.00	3.18	13.62
Functional Limitation								
None	87.69	90.97	79.78	92.19	88.97	94.19	75.78	81.03*
	0.73	0.83	2.12	0.95	0.98	2.39	1.83	7.03
IADL only	92.66	95.32	87.47	94.77	95.56	96.83	87.61	98.17*
	0.62	1.00	1.62	1.52	1.08	3.42	2.33	2.08
One to two ADLs	93.36	93.52	90.87	96.76	94.99	99.09	88.07	100.00*
	0.64	1.09	1.88	0.98	1.06	0.83	1.78	0.00
Three to six ADLs	92.27	93.39	89.68	94.74	95.84	100.00*	86.05	89.21*
	0.90	1.47	1.94	2.01	1.62	0.00	3.07	10.77

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Community Residents¹

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			Medicaid	Individually Purchased Private Insurance	Employer Sponsored Private Insurance			
Percent of Beneficiaries With at Least One Physician Service								
All Beneficiaries	90.08	92.38	86.67	93.61	91.47	95.87	81.13	90.55
	<i>0.53</i>	<i>0.57</i>	<i>0.99</i>	<i>0.66</i>	<i>0.74</i>	<i>1.53</i>	<i>1.29</i>	<i>3.15</i>
Metropolitan Area Resident								
Yes	90.35	92.45	85.26	93.74	91.40	95.57	82.72	92.63
	<i>0.56</i>	<i>0.61</i>	<i>1.29</i>	<i>0.76</i>	<i>0.87</i>	<i>1.87</i>	<i>1.30</i>	<i>3.57</i>
No	89.22	91.84	89.76	93.29	91.71	97.16	77.27	85.63*
	<i>1.01</i>	<i>1.62</i>	<i>1.42</i>	<i>1.15</i>	<i>1.42</i>	<i>1.91</i>	<i>2.73</i>	<i>5.79</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 37 interview (fall 2003), and beneficiaries who resided in the community at the time of the round 34 interview (fall 2002) who died prior to the round 37 interview
- 2 HMO stands for Health Maintenance Organization.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of "Aged" and "Disabled."