

3.4 How Much does the Medicare Population Spend on Health Care and Who Pays for Their Care?



Table 4.1 Personal Health Care Expenditures for Medicare Beneficiaries, by Source of Payment and Type of Medical Service, 1999

All Medicare Beneficiaries

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Medical Service	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Total Medical Services						
All beneficiaries	\$381,190	53.28	11.69	12.32	19.33	3.38
	<i>5,925</i>	<i>0.64</i>	<i>0.45</i>	<i>0.45</i>	<i>0.42</i>	<i>0.24</i>
Beneficiaries 65 years and older	324,254	55.15	10.04	12.15	20.36	2.31
	<i>4,993</i>	<i>0.65</i>	<i>0.44</i>	<i>0.47</i>	<i>0.47</i>	<i>0.16</i>
Beneficiaries 64 years and younger	56,936	42.68	21.08	13.34	13.44	9.46
	<i>2,753</i>	<i>2.25</i>	<i>1.41</i>	<i>1.97</i>	<i>0.65</i>	<i>1.37</i>
Inpatient Hospital Services						
All beneficiaries	110,570	86.68	1.08	8.44	2.28	1.52
	<i>2,964</i>	<i>0.93</i>	<i>0.09</i>	<i>0.83</i>	<i>0.23</i>	<i>0.21</i>
Beneficiaries 65 years and older	95,947	88.79	0.75	7.10	2.05	1.30
	<i>2,569</i>	<i>0.96</i>	<i>0.06</i>	<i>0.83</i>	<i>0.23</i>	<i>0.23</i>
Beneficiaries 64 years and younger	14,623	72.84	3.22	17.25	3.75	2.95
	<i>1,326</i>	<i>4.14</i>	<i>0.55</i>	<i>4.30</i>	<i>1.07</i>	<i>1.13</i>
Outpatient Hospital Services						
All beneficiaries	35,688	58.89	2.96	25.82	10.53	1.80
	<i>1,489</i>	<i>1.83</i>	<i>0.25</i>	<i>2.11</i>	<i>0.93</i>	<i>0.22</i>
Beneficiaries 65 years and older	28,129	58.57	2.15	27.34	10.34	1.60
	<i>1,168</i>	<i>1.92</i>	<i>0.22</i>	<i>2.22</i>	<i>1.08</i>	<i>0.25</i>
Beneficiaries 64 years and younger	7,559	60.06	6.01	20.14	11.28	2.52
	<i>770</i>	<i>4.18</i>	<i>0.87</i>	<i>4.78</i>	<i>1.42</i>	<i>0.56</i>
Physician/Supplier Services						
All beneficiaries	90,432	69.01	2.03	13.05	14.91	1.00
	<i>1,366</i>	<i>0.47</i>	<i>0.17</i>	<i>0.30</i>	<i>0.44</i>	<i>0.13</i>
Beneficiaries 65 years and older	79,125	69.83	1.48	13.14	14.77	0.77
	<i>1,236</i>	<i>0.51</i>	<i>0.18</i>	<i>0.26</i>	<i>0.48</i>	<i>0.13</i>
Beneficiaries 64 years and younger	11,306	63.27	5.90	12.38	15.88	2.57
	<i>616</i>	<i>1.77</i>	<i>0.49</i>	<i>1.54</i>	<i>0.91</i>	<i>0.52</i>

Table 4.1 Personal Health Care Expenditures for Medicare Beneficiaries, by Source of Payment and Type of Medical Service, 1999

All Medicare Beneficiaries

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Medical Service	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Dental Services						
All beneficiaries	\$9,541	0.75	1.13	16.35	80.24	1.53
	<i>336</i>	<i>0.03</i>	<i>0.31</i>	<i>0.89</i>	<i>0.95</i>	<i>0.25</i>
Beneficiaries 65 years and older	8,493	0.77	0.34	15.79	81.74	1.36
	<i>306</i>	<i>0.04</i>	<i>0.09</i>	<i>0.85</i>	<i>0.88</i>	<i>0.24</i>
Beneficiaries 64 years and younger	1,049	0.54	7.47	20.93	68.16	2.90
	<i>95</i>	<i>0.08</i>	<i>2.59</i>	<i>4.15</i>	<i>4.21</i>	<i>0.76</i>
Prescription Medicines						
All beneficiaries	37,542	4.84	11.92	34.18	40.11	8.95
	<i>567</i>	<i>0.15</i>	<i>0.58</i>	<i>0.71</i>	<i>0.67</i>	<i>0.62</i>
Beneficiaries 65 years and older	30,375	5.48	7.51	36.11	43.22	7.67
	<i>518</i>	<i>0.17</i>	<i>0.47</i>	<i>0.82</i>	<i>0.75</i>	<i>0.68</i>
Beneficiaries 64 years and younger	7,167	2.11	30.61	25.98	26.94	14.35
	<i>343</i>	<i>0.28</i>	<i>1.88</i>	<i>1.91</i>	<i>1.33</i>	<i>1.60</i>
Medicare Hospice Services						
All beneficiaries	2,203	100.00	0.00	0.00	0.00	0.00
	<i>291</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>
Beneficiaries 65 years and older	1,934	100.00	0.00	0.00	0.00	0.00
	<i>263</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>
Beneficiaries 64 years and younger	269	100.00	0.00	0.00	0.00	0.00
	<i>145</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>	<i>0.00</i>
Medicare Home Health Services						
All beneficiaries	8,749	91.07	0.71	1.67	5.35	1.19
	<i>508</i>	<i>2.06</i>	<i>0.31</i>	<i>0.73</i>	<i>1.67</i>	<i>0.65</i>
Beneficiaries 65 years and older	7,766	91.86	0.27	1.86	5.85	0.16
	<i>406</i>	<i>1.98</i>	<i>0.09</i>	<i>0.82</i>	<i>1.88</i>	<i>0.07</i>
Beneficiaries 64 years and younger	983	84.83	4.20	0.19	1.44	9.34
	<i>244</i>	<i>7.37</i>	<i>2.79</i>	<i>0.19</i>	<i>1.17</i>	<i>6.32</i>

Table 4.1 Personal Health Care Expenditures for Medicare Beneficiaries, by Source of Payment and Type of Medical Service, 1999

All Medicare Beneficiaries

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Medical Service	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Long-Term Facility Care¹						
All beneficiaries	\$86,465	13.63	41.43	2.42	35.54	6.99
	<i>2,915</i>	<i>0.81</i>	<i>1.49</i>	<i>0.26</i>	<i>1.20</i>	<i>0.79</i>
Beneficiaries 65 years and older	72,484	15.30	38.24	2.80	39.91	3.75
	<i>2,636</i>	<i>0.90</i>	<i>1.46</i>	<i>0.31</i>	<i>1.34</i>	<i>0.40</i>
Beneficiaries 64 years and younger	13,981	4.97	57.93	0.48	12.86	23.77
	<i>1,111</i>	<i>1.04</i>	<i>3.77</i>	<i>0.37</i>	<i>1.35</i>	<i>4.00</i>

Source: Medicare Current Beneficiary Survey, CY 1999 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

1 Expenditures for long-term care in facilities include facility room and board expenses for beneficiaries who resided in a facility for the full year; facility room and board expenses for beneficiaries who resided in a facility for part of the year and in the community for part of the year; and expenditures for short-term facility stays (institutional events), primarily in skilled nursing facilities, for full-year or part-year community residents, which were reported during a community interview or created through Medicare claims. See Appendix B for additional information.

Table 4.2 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

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Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$95,249	86.05	0.83	9.24	2.24	1.64	\$2,528
	<i>2,946</i>	<i>1.07</i>	<i>0.08</i>	<i>0.95</i>	<i>0.26</i>	<i>0.25</i>	<i>77</i>
Medicare Status³							
Aged							
65 - 74 years	39,962	85.92	0.57	9.74	2.25	1.52	2,193
	<i>2,111</i>	<i>2.14</i>	<i>0.08</i>	<i>1.85</i>	<i>0.45</i>	<i>0.47</i>	<i>113</i>
75 - 84 years	31,340	90.90	0.56	5.25	1.85	1.44	2,775
	<i>1,390</i>	<i>0.64</i>	<i>0.13</i>	<i>0.34</i>	<i>0.26</i>	<i>0.38</i>	<i>121</i>
85 years and older	11,106	90.67	0.64	6.72	1.18	0.78	3,498
	<i>817</i>	<i>0.99</i>	<i>0.12</i>	<i>0.93</i>	<i>0.18</i>	<i>0.36</i>	<i>224</i>
Disabled							
Under 45 years	3,418	63.99	4.96	20.06	8.00	2.99	2,439
	<i>520</i>	<i>6.59</i>	<i>1.70</i>	<i>6.94</i>	<i>4.00</i>	<i>1.99</i>	<i>356</i>
45 - 64 years	9,423	73.06	1.58	19.40	2.65	3.32	2,628
	<i>1,172</i>	<i>5.81</i>	<i>0.28</i>	<i>6.22</i>	<i>0.54</i>	<i>1.61</i>	<i>316</i>
Gender							
Male	47,321	83.70	0.57	10.38	2.82	2.52	2,814
	<i>2,058</i>	<i>1.50</i>	<i>0.11</i>	<i>1.34</i>	<i>0.42</i>	<i>0.39</i>	<i>119</i>
Female	47,928	88.38	1.09	8.10	1.66	0.77	2,297
	<i>2,019</i>	<i>1.64</i>	<i>0.12</i>	<i>1.40</i>	<i>0.34</i>	<i>0.26</i>	<i>94</i>
Living Arrangement							
Alone	29,458	88.97	1.06	6.31	2.09	1.58	2,570
	<i>1,400</i>	<i>1.08</i>	<i>0.18</i>	<i>0.79</i>	<i>0.52</i>	<i>0.55</i>	<i>114</i>
With spouse	46,578	84.73	0.24	11.23	2.11	1.69	2,365
	<i>1,958</i>	<i>1.56</i>	<i>0.04</i>	<i>1.58</i>	<i>0.26</i>	<i>0.36</i>	<i>101</i>
With children	12,343	84.04	1.91	10.17	3.28	0.59	3,421
	<i>1,468</i>	<i>5.59</i>	<i>0.39</i>	<i>4.67</i>	<i>1.16</i>	<i>0.32</i>	<i>397</i>
With others	6,681	85.89	1.98	6.75	1.83	3.55	2,348
	<i>779</i>	<i>3.08</i>	<i>0.31</i>	<i>2.79</i>	<i>0.48</i>	<i>1.60</i>	<i>237</i>

Table 4.2 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

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Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$95,249	86.05	0.83	9.24	2.24	1.64	\$2,528
	<i>2,946</i>	<i>1.07</i>	<i>0.08</i>	<i>0.95</i>	<i>0.26</i>	<i>0.25</i>	<i>77</i>
Race/Ethnicity							
White non-Hispanic	76,207	85.51	0.55	10.09	2.22	1.64	2,528
	<i>2,779</i>	<i>1.25</i>	<i>0.08</i>	<i>1.12</i>	<i>0.31</i>	<i>0.28</i>	<i>88</i>
Black non-Hispanic	10,818	89.05	2.09	4.38	2.73	1.75	3,262
	<i>1,156</i>	<i>1.76</i>	<i>0.39</i>	<i>1.27</i>	<i>0.68</i>	<i>0.73</i>	<i>321</i>
Hispanic	5,499	89.36	1.98	6.15	1.73	0.78	2,048
	<i>868</i>	<i>1.86</i>	<i>0.35</i>	<i>1.86</i>	<i>0.67</i>	<i>0.31</i>	<i>242</i>
Other	2,466	81.76	1.58	12.12	1.22	3.31	1,727
	<i>433</i>	<i>8.10</i>	<i>0.29</i>	<i>8.73</i>	<i>0.48</i>	<i>1.85</i>	<i>270</i>
Income							
Less than \$2,500	1,665	91.32	2.25	4.18	0.95	1.30	2,243
	<i>459</i>	<i>2.01</i>	<i>0.74</i>	<i>1.81</i>	<i>0.36</i>	<i>0.96</i>	<i>553</i>
\$2,500 - \$4,999	1,428	91.30	1.92	3.22	2.07	1.49	2,123
	<i>338</i>	<i>2.49</i>	<i>0.66</i>	<i>0.83</i>	<i>1.22</i>	<i>1.54</i>	<i>525</i>
\$5,000 - \$7,499	8,795	89.10	4.42	1.34	1.51	3.63	2,676
	<i>1,036</i>	<i>2.12</i>	<i>0.72</i>	<i>0.23</i>	<i>0.36</i>	<i>1.85</i>	<i>295</i>
\$7,500 - \$9,999	9,796	89.09	1.79	6.25	2.09	0.78	2,370
	<i>821</i>	<i>1.46</i>	<i>0.29</i>	<i>1.38</i>	<i>0.38</i>	<i>0.29</i>	<i>186</i>
\$10,000 - \$14,999	16,315	90.57	0.78	4.51	2.19	1.96	2,578
	<i>1,054</i>	<i>0.86</i>	<i>0.25</i>	<i>0.51</i>	<i>0.39</i>	<i>0.55</i>	<i>163</i>
\$15,000 - \$19,999	12,572	84.15	0.12	10.80	3.14	1.79	2,941
	<i>996</i>	<i>3.09</i>	<i>0.04</i>	<i>3.02</i>	<i>1.25</i>	<i>0.68</i>	<i>234</i>
\$20,000 - \$24,999	11,052	86.65	0.04	11.81	1.37	0.13	2,743
	<i>955</i>	<i>2.55</i>	<i>0.04</i>	<i>2.55</i>	<i>0.25</i>	<i>0.06</i>	<i>236</i>
\$25,000 - \$29,999	8,981	75.96	0.00	19.17	3.30	1.57	3,470
	<i>1,620</i>	<i>8.60</i>	<i>0.00</i>	<i>7.67</i>	<i>1.60</i>	<i>1.04</i>	<i>608</i>
\$30,000 or more	24,645	84.50	0.06	11.50	2.23	1.72	2,120
	<i>1,404</i>	<i>1.75</i>	<i>0.03</i>	<i>1.63</i>	<i>0.38</i>	<i>0.51</i>	<i>110</i>

Table 4.2 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

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Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
All Beneficiaries	\$95,249	86.05	0.83	9.24	2.24	1.64	\$2,528
	<i>2,946</i>	<i>1.07</i>	<i>0.08</i>	<i>0.95</i>	<i>0.26</i>	<i>0.25</i>	<i>77</i>
Health Status							
Excellent	6,567	87.51	0.65	7.50	2.17	2.16	1,221
	<i>625</i>	<i>2.38</i>	<i>0.14</i>	<i>2.20</i>	<i>0.67</i>	<i>0.93</i>	<i>106</i>
Very good	16,177	90.11	0.23	6.23	1.63	1.80	1,599
	<i>1,008</i>	<i>1.25</i>	<i>0.05</i>	<i>1.04</i>	<i>0.27</i>	<i>0.65</i>	<i>95</i>
Good	28,529	83.52	0.87	11.95	2.39	1.27	2,421
	<i>2,083</i>	<i>2.97</i>	<i>0.22</i>	<i>2.66</i>	<i>0.57</i>	<i>0.42</i>	<i>166</i>
Fair	24,048	86.30	0.85	7.95	2.94	1.96	3,421
	<i>1,588</i>	<i>1.51</i>	<i>0.11</i>	<i>1.22</i>	<i>0.73</i>	<i>0.52</i>	<i>192</i>
Poor	19,683	85.49	1.28	10.02	1.71	1.49	5,995
	<i>1,664</i>	<i>2.59</i>	<i>0.19</i>	<i>2.57</i>	<i>0.36</i>	<i>0.79</i>	<i>471</i>
Functional Limitation							
None	36,266	88.47	0.57	8.30	1.78	0.89	1,642
	<i>1,619</i>	<i>1.03</i>	<i>0.11</i>	<i>0.95</i>	<i>0.23</i>	<i>0.17</i>	<i>69</i>
IADL only ⁴	25,636	79.70	1.06	13.12	3.84	2.29	3,171
	<i>2,067</i>	<i>3.33</i>	<i>0.23</i>	<i>3.10</i>	<i>0.85</i>	<i>0.74</i>	<i>251</i>
One to two ADLs ⁵	18,216	88.27	0.92	7.92	1.50	1.39	3,702
	<i>1,330</i>	<i>1.90</i>	<i>0.12</i>	<i>1.87</i>	<i>0.27</i>	<i>0.55</i>	<i>278</i>
Three to five ADLs	15,022	88.31	0.95	6.53	1.55	2.66	5,918
	<i>1,484</i>	<i>2.28</i>	<i>0.15</i>	<i>1.57</i>	<i>0.26</i>	<i>1.12</i>	<i>505</i>

Table 4.2 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

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Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$95,249	86.05	0.83	9.24	2.24	1.64	\$2,528
	<i>2,946</i>	<i>1.07</i>	<i>0.08</i>	<i>0.95</i>	<i>0.26</i>	<i>0.25</i>	<i>77</i>
Metropolitan Area Resident							
Yes	73,994	85.85	0.83	9.65	2.16	1.52	2,584
	<i>2,763</i>	<i>1.32</i>	<i>0.10</i>	<i>1.17</i>	<i>0.32</i>	<i>0.23</i>	<i>95</i>
No	21,255	86.78	0.85	7.80	2.52	2.05	2,354
	<i>1,195</i>	<i>1.41</i>	<i>0.12</i>	<i>1.20</i>	<i>0.33</i>	<i>0.76</i>	<i>123</i>

Source: Medicare Current Beneficiary Survey, CY 1999 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. 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 beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.3 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

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Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
All Beneficiaries	\$32,356	57.60	2.75	27.66	10.07	1.92	\$859
	1,464	1.93	0.26	2.21	0.79	0.23	39
Medicare Status³							
Aged							
65 - 74 years	14,586	54.07	2.15	31.06	10.61	2.11	800
	1,076	3.34	0.34	3.95	1.48	0.42	59
75 - 84 years	8,814	61.72	1.41	27.35	8.31	1.20	780
	382	1.00	0.19	0.91	0.62	0.33	33
85 years and older	2,189	64.65	1.80	23.90	8.54	1.12	690
	162	1.45	0.35	1.35	1.05	0.52	50
Disabled							
Under 45 years	1,888	51.73	8.88	27.06	8.33	3.99	1,347
	331	8.26	1.55	10.93	1.71	1.31	230
45 - 64 years	4,879	59.83	5.00	19.98	12.98	2.21	1,361
	714	4.61	1.27	5.08	2.06	0.69	191
Gender							
Male	16,396	55.49	1.97	29.07	11.06	2.41	975
	1,197	3.02	0.29	3.78	1.11	0.34	71
Female	15,960	59.78	3.55	26.21	9.05	1.41	765
	797	2.04	0.44	1.98	1.01	0.32	37
Living Arrangement							
Alone	9,525	63.72	4.08	20.30	10.24	1.65	831
	598	1.23	0.53	1.42	1.17	0.35	50
With spouse	17,461	51.45	0.74	35.42	10.49	1.89	886
	1,129	3.07	0.12	3.54	1.25	0.31	58
With children	2,747	64.36	5.95	17.83	9.87	1.99	761
	219	2.61	0.61	2.77	1.32	0.74	56
With others	2,577	69.54	7.96	12.84	6.78	2.88	906
	448	2.57	1.52	2.52	1.39	0.84	151

Table 4.3 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

2 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$32,356	57.60	2.75	27.66	10.07	1.92	\$859
	1,464	1.93	0.26	2.21	0.79	0.23	39
Race/Ethnicity							
White non-Hispanic	24,123	53.93	1.73	32.24	10.50	1.61	800
	1,246	2.24	0.22	2.56	0.94	0.22	40
Black non-Hispanic	4,629	69.83	5.66	13.20	8.78	2.53	1,396
	744	2.41	1.18	2.67	1.89	0.72	215
Hispanic	2,239	69.52	6.61	15.39	5.85	2.63	834
	361	3.32	0.85	3.72	0.89	1.12	93
Other	1,306	61.67	4.59	15.72	13.96	4.06	914
	222	4.63	1.02	3.39	4.45	1.85	135
Income							
Less than \$2,500	1,192	62.22	6.65	14.72	14.50	1.91	1,605
	456	10.54	3.69	6.66	9.87	1.25	566
\$2,500 - \$4,999	320	65.97	7.64	14.07	11.81	0.51	476
	40	2.83	1.68	2.50	3.11	0.35	51
\$5,000 - \$7,499	2,899	69.99	12.42	6.29	9.19	2.11	882
	502	1.62	1.74	1.17	2.59	0.82	147
\$7,500 - \$9,999	3,705	67.26	7.71	13.88	8.92	2.23	896
	328	2.12	1.01	1.97	1.52	0.63	72
\$10,000 - \$14,999	5,315	65.67	1.79	17.64	11.67	3.23	840
	460	1.43	0.29	1.61	1.09	0.69	73
\$15,000 - \$19,999	4,201	47.14	0.83	40.66	9.37	2.00	983
	762	8.96	0.25	11.18	2.57	0.73	179
\$20,000 - \$24,999	3,700	51.30	0.11	35.86	11.19	1.53	918
	475	5.71	0.06	5.15	3.29	0.68	111
\$25,000 - \$29,999	2,185	54.77	0.08	34.08	10.33	0.74	844
	329	6.35	0.03	5.88	1.70	0.30	121
\$30,000 or more	8,840	52.04	0.04	37.51	9.01	1.40	760
	565	2.31	0.02	2.74	0.99	0.35	46

Table 4.3 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

3 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
All Beneficiaries	\$32,356	57.60	2.75	27.66	10.07	1.92	\$859
	1,464	1.93	0.26	2.21	0.79	0.23	39
Health Status							
Excellent	2,680	63.90	1.47	24.35	8.45	1.83	498
	202	1.91	0.34	1.87	1.12	0.76	31
Very good	5,557	60.14	1.10	27.17	10.47	1.11	549
	247	1.57	0.18	1.59	1.61	0.29	25
Good	9,331	55.18	2.28	29.61	10.50	2.43	792
	454	3.27	0.31	3.32	1.41	0.47	42
Fair	7,687	59.99	3.65	23.30	10.74	2.33	1,094
	598	1.79	0.51	1.61	1.47	0.46	75
Poor	6,988	53.90	4.19	31.57	8.84	1.50	2,128
	1,054	6.84	1.02	8.64	1.83	0.49	311
Functional Limitation							
None	14,845	59.38	1.73	27.60	9.52	1.77	672
	806	1.94	0.17	1.97	1.08	0.28	37
IADL only ⁴	7,733	58.45	3.57	26.39	10.15	1.44	956
	591	3.34	0.76	3.58	1.03	0.33	69
One to two ADLs ⁵	6,753	51.61	3.76	32.47	10.01	2.14	1,372
	964	6.32	0.87	7.94	2.04	0.63	190
Three to five ADLs	3,012	60.02	3.31	20.56	12.73	3.38	1,187
	303	2.44	0.59	2.27	2.31	0.78	111

Table 4.3 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

4 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$32,356	57.60	2.75	27.66	10.07	1.92	\$859
	<i>1,464</i>	<i>1.93</i>	<i>0.26</i>	<i>2.21</i>	<i>0.79</i>	<i>0.23</i>	<i>39</i>
Metropolitan Area Resident							
Yes	24,371	58.20	2.89	28.61	8.47	1.83	851
	<i>1,370</i>	<i>2.54</i>	<i>0.33</i>	<i>2.89</i>	<i>0.84</i>	<i>0.27</i>	<i>48</i>
No	7,985	55.80	2.30	24.76	14.94	2.20	884
	<i>576</i>	<i>1.49</i>	<i>0.35</i>	<i>1.01</i>	<i>1.87</i>	<i>0.46</i>	<i>62</i>

Source: Medicare Current Beneficiary Survey, CY 1999 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. 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 beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.4 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

1 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$82,132	68.06	1.85	13.77	15.26	1.06	\$2,180
	<i>1,377</i>	<i>0.50</i>	<i>0.20</i>	<i>0.32</i>	<i>0.49</i>	<i>0.14</i>	<i>35</i>
Medicare Status³							
Aged							
65 - 74 years	35,272	67.43	1.69	14.37	15.69	0.81	1,936
	<i>1,069</i>	<i>0.89</i>	<i>0.41</i>	<i>0.43</i>	<i>0.86</i>	<i>0.14</i>	<i>55</i>
75 - 84 years	28,306	71.09	0.84	13.55	13.64	0.87	2,506
	<i>677</i>	<i>0.60</i>	<i>0.09</i>	<i>0.32</i>	<i>0.53</i>	<i>0.27</i>	<i>56</i>
85 years and older	8,337	68.25	1.18	12.21	17.68	0.68	2,626
	<i>358</i>	<i>1.26</i>	<i>0.14</i>	<i>0.90</i>	<i>1.33</i>	<i>0.27</i>	<i>83</i>
Disabled							
Under 45 years	2,436	55.99	10.90	10.51	16.94	5.65	1,738
	<i>162</i>	<i>2.54</i>	<i>1.23</i>	<i>2.10</i>	<i>1.88</i>	<i>2.16</i>	<i>106</i>
45 - 64 years	7,781	63.43	4.18	14.46	16.09	1.83	2,170
	<i>616</i>	<i>2.46</i>	<i>0.50</i>	<i>2.21</i>	<i>1.11</i>	<i>0.34</i>	<i>160</i>
Gender							
Male	37,430	68.31	1.76	14.20	14.34	1.39	2,226
	<i>996</i>	<i>0.57</i>	<i>0.39</i>	<i>0.54</i>	<i>0.51</i>	<i>0.18</i>	<i>55</i>
Female	44,702	67.85	1.93	13.40	16.04	0.78	2,142
	<i>844</i>	<i>0.71</i>	<i>0.14</i>	<i>0.36</i>	<i>0.71</i>	<i>0.20</i>	<i>38</i>
Living Arrangement							
Alone	25,334	69.68	2.74	12.26	14.37	0.94	2,210
	<i>807</i>	<i>0.89</i>	<i>0.56</i>	<i>0.45</i>	<i>0.57</i>	<i>0.18</i>	<i>59</i>
With spouse	42,808	66.33	0.60	16.39	15.76	0.92	2,173
	<i>1,000</i>	<i>0.79</i>	<i>0.09</i>	<i>0.50</i>	<i>0.72</i>	<i>0.11</i>	<i>50</i>
With children	8,368	70.79	3.28	8.52	16.19	1.23	2,319
	<i>364</i>	<i>1.26</i>	<i>0.28</i>	<i>0.59</i>	<i>1.37</i>	<i>0.51</i>	<i>92</i>
With others	5,519	70.03	4.90	8.39	14.19	2.50	1,940
	<i>370</i>	<i>1.50</i>	<i>0.52</i>	<i>0.89</i>	<i>1.12</i>	<i>1.03</i>	<i>109</i>

Table 4.4 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

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Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$82,132	68.06	1.85	13.77	15.26	1.06	\$2,180
	<i>1,377</i>	<i>0.50</i>	<i>0.20</i>	<i>0.32</i>	<i>0.49</i>	<i>0.14</i>	<i>35</i>
Race/Ethnicity							
White non-Hispanic	66,220	67.12	1.03	15.12	15.89	0.84	2,197
	<i>1,398</i>	<i>0.58</i>	<i>0.08</i>	<i>0.32</i>	<i>0.58</i>	<i>0.11</i>	<i>40</i>
Black non-Hispanic	7,582	70.34	5.99	7.67	13.81	2.20	2,286
	<i>535</i>	<i>2.18</i>	<i>1.75</i>	<i>0.80</i>	<i>1.63</i>	<i>0.78</i>	<i>143</i>
Hispanic	5,638	75.46	5.06	6.74	11.50	1.24	2,100
	<i>602</i>	<i>1.43</i>	<i>0.59</i>	<i>0.73</i>	<i>1.27</i>	<i>0.40</i>	<i>115</i>
Other	2,544	69.46	3.08	12.67	11.71	3.08	1,781
	<i>283</i>	<i>2.43</i>	<i>0.52</i>	<i>1.74</i>	<i>1.04</i>	<i>1.53</i>	<i>134</i>
Income							
Less than \$2,500	1,631	69.78	4.26	9.38	14.78	1.80	2,197
	<i>281</i>	<i>3.25</i>	<i>1.24</i>	<i>2.16</i>	<i>2.88</i>	<i>0.68</i>	<i>303</i>
\$2,500 - \$4,999	1,180	67.18	4.75	9.14	18.33	0.60	1,754
	<i>145</i>	<i>4.24</i>	<i>0.89</i>	<i>1.41</i>	<i>4.89</i>	<i>0.16</i>	<i>188</i>
\$5,000 - \$7,499	6,677	71.54	8.96	5.16	11.98	2.37	2,031
	<i>467</i>	<i>1.60</i>	<i>0.62</i>	<i>0.95</i>	<i>0.98</i>	<i>0.92</i>	<i>114</i>
\$7,500 - \$9,999	9,020	73.39	4.56	7.65	12.82	1.58	2,182
	<i>499</i>	<i>1.02</i>	<i>0.43</i>	<i>0.67</i>	<i>0.83</i>	<i>0.54</i>	<i>104</i>
\$10,000 - \$14,999	13,944	69.03	2.31	10.09	17.63	0.94	2,203
	<i>636</i>	<i>1.78</i>	<i>1.02</i>	<i>0.50</i>	<i>1.69</i>	<i>0.17</i>	<i>94</i>
\$15,000 - \$19,999	9,216	68.73	0.35	14.77	15.07	1.07	2,156
	<i>406</i>	<i>1.26</i>	<i>0.08</i>	<i>0.87</i>	<i>1.10</i>	<i>0.25</i>	<i>91</i>
\$20,000 - \$24,999	8,970	70.91	0.09	15.14	13.06	0.80	2,226
	<i>433</i>	<i>1.03</i>	<i>0.03</i>	<i>0.75</i>	<i>0.64</i>	<i>0.21</i>	<i>97</i>
\$25,000 - \$29,999	5,934	63.58	0.12	18.33	16.78	1.18	2,293
	<i>437</i>	<i>2.98</i>	<i>0.05</i>	<i>2.44</i>	<i>2.26</i>	<i>0.63</i>	<i>144</i>
\$30,000 or more	25,560	64.46	0.07	18.77	16.06	0.63	2,199
	<i>835</i>	<i>0.70</i>	<i>0.04</i>	<i>0.50</i>	<i>0.58</i>	<i>0.11</i>	<i>60</i>

Table 4.4 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

3 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$82,132	68.06	1.85	13.77	15.26	1.06	\$2,180
	<i>1,377</i>	<i>0.50</i>	<i>0.20</i>	<i>0.32</i>	<i>0.49</i>	<i>0.14</i>	<i>35</i>
Health Status							
Excellent	7,505	68.75	0.84	12.47	17.18	0.76	1,395
	<i>355</i>	<i>1.10</i>	<i>0.18</i>	<i>0.64</i>	<i>0.99</i>	<i>0.24</i>	<i>44</i>
Very good	16,722	67.77	0.54	14.61	16.18	0.90	1,653
	<i>562</i>	<i>0.93</i>	<i>0.06</i>	<i>0.58</i>	<i>0.73</i>	<i>0.20</i>	<i>42</i>
Good	24,940	68.12	1.94	14.62	14.16	1.16	2,116
	<i>784</i>	<i>0.65</i>	<i>0.59</i>	<i>0.78</i>	<i>0.50</i>	<i>0.24</i>	<i>53</i>
Fair	19,546	67.03	2.09	12.80	16.96	1.12	2,780
	<i>836</i>	<i>1.38</i>	<i>0.21</i>	<i>0.57</i>	<i>1.46</i>	<i>0.21</i>	<i>98</i>
Poor	13,116	69.29	3.58	13.33	12.61	1.19	3,995
	<i>775</i>	<i>1.13</i>	<i>0.43</i>	<i>1.07</i>	<i>0.85</i>	<i>0.37</i>	<i>183</i>
Functional Limitation							
None	38,234	69.79	0.97	14.00	14.35	0.90	1,731
	<i>1,050</i>	<i>0.68</i>	<i>0.10</i>	<i>0.34</i>	<i>0.67</i>	<i>0.16</i>	<i>39</i>
IADL only ⁴	19,824	66.68	2.84	14.51	14.79	1.18	2,452
	<i>734</i>	<i>0.97</i>	<i>0.77</i>	<i>1.09</i>	<i>0.84</i>	<i>0.27</i>	<i>73</i>
One to two ADLs ⁵	14,296	67.38	2.33	13.08	16.37	0.85	2,905
	<i>686</i>	<i>1.22</i>	<i>0.26</i>	<i>0.79</i>	<i>1.05</i>	<i>0.15</i>	<i>115</i>
Three to five ADLs	9,739	65.03	2.59	12.37	18.23	1.78	3,837
	<i>597</i>	<i>1.53</i>	<i>0.36</i>	<i>1.13</i>	<i>1.53</i>	<i>0.56</i>	<i>196</i>

Table 4.4 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

4 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$82,132	68.06	1.85	13.77	15.26	1.06	\$2,180
	<i>1,377</i>	<i>0.50</i>	<i>0.20</i>	<i>0.32</i>	<i>0.49</i>	<i>0.14</i>	<i>35</i>
Metropolitan Area Resident							
Yes	64,416	69.93	1.84	13.43	13.94	0.87	2,250
	<i>1,241</i>	<i>0.53</i>	<i>0.24</i>	<i>0.40</i>	<i>0.46</i>	<i>0.15</i>	<i>42</i>
No	17,716	61.27	1.92	14.98	20.06	1.76	1,962
	<i>641</i>	<i>1.12</i>	<i>0.24</i>	<i>0.53</i>	<i>1.41</i>	<i>0.37</i>	<i>66</i>

Source: Medicare Current Beneficiary Survey, CY 1999 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. 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 beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.5 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

1 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
All Beneficiaries	\$9,494	0.72	1.13	16.36	80.25	1.54	\$252
	335	0.03	0.31	0.89	0.95	0.25	9
Medicare Status³							
Aged							
65 - 74 years	5,184	0.61	0.25	17.38	80.40	1.37	284
	266	0.04	0.07	1.09	1.15	0.33	14
75 - 84 years	2,756	0.90	0.55	14.02	83.14	1.38	244
	150	0.07	0.25	1.33	1.35	0.35	13
85 years and older	514	1.27	0.14	10.00	87.29	1.30	162
	48	0.15	0.14	1.65	1.68	0.64	15
Disabled							
Under 45 years	225	0.32	7.07	21.51	66.75	4.34	161
	31	0.13	1.72	3.94	3.98	1.61	21
45 - 64 years	815	0.57	7.64	20.37	68.89	2.53	227
	91	0.10	3.28	5.27	5.38	0.92	25
Gender							
Male	4,225	0.72	1.47	16.94	78.40	2.47	251
	195	0.05	0.64	1.49	1.60	0.45	11
Female	5,269	0.72	0.85	15.89	81.74	0.79	253
	209	0.04	0.21	1.24	1.22	0.23	10
Living Arrangement							
Alone	2,531	0.82	1.79	16.45	79.40	1.54	221
	149	0.06	0.99	1.75	1.96	0.46	12
With spouse	5,893	0.61	0.39	16.54	81.02	1.44	299
	270	0.04	0.14	0.99	1.00	0.30	1
With children	468	1.46	4.08	12.76	79.80	1.90	130
	60	0.21	1.94	3.77	4.10	0.96	16
With others	584	0.82	3.32	17.59	76.02	2.25	205
	78	0.14	1.02	6.72	6.39	0.85	26

Table 4.5 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

2 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$9,494	0.72	1.13	16.36	80.25	1.54	\$252
	335	0.03	0.31	0.89	0.95	0.25	9
Race/Ethnicity							
White non-Hispanic	8,310	0.63	0.41	16.82	80.91	1.23	276
	314	0.03	0.11	0.97	0.96	0.23	10
Black non-Hispanic	402	1.75	8.97	10.98	74.44	3.86	121
	78	0.38	6.02	3.05	6.52	1.52	23
Hispanic	460	1.42	6.44	14.00	73.44	4.71	171
	56	0.23	2.02	3.40	5.31	2.58	20
Other	299	0.71	2.28	15.55	79.25	2.20	210
	54	0.18	0.92	3.84	4.63	1.45	33
Income							
Less than \$2,500	145	1.07	0.22	12.53	81.72	4.46	196
	41	0.44	0.09	10.38	10.07	2.72	51
\$2,500 - \$4,999	104	0.74	7.69	7.28	75.11	9.18	155
	25	0.27	3.90	2.97	7.26	5.16	36
\$5,000 - \$7,499	301	1.11	19.92	7.10	68.84	3.02	92
	44	0.22	7.37	2.75	7.37	2.24	13
\$7,500 - \$9,999	406	1.82	6.95	7.27	79.56	4.40	98
	42	0.26	1.92	2.11	3.05	2.19	10
\$10,000 - \$14,999	934	1.51	0.69	11.81	83.95	2.04	148
	90	0.18	0.25	1.95	2.05	0.68	14
\$15,000 - \$19,999	801	1.15	0.04	18.29	78.40	2.12	187
	72	0.15	0.03	3.17	3.21	1.36	17
\$20,000 - \$24,999	1,013	0.92	0.14	15.71	82.49	0.74	251
	115	0.14	0.14	4.06	4.07	0.33	28
\$25,000 - \$29,999	748	0.61	0.32	17.36	81.62	0.09	289
	74	0.08	0.32	2.40	2.40	0.07	29
\$30,000 or more	5,041	0.36	0.00	18.46	80.02	1.17	434
	239	0.02	0.00	1.18	1.20	0.26	17

Table 4.5 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

3 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
All Beneficiaries	\$9,494	0.72	1.13	16.36	80.25	1.54	\$252
	335	0.03	0.31	0.89	0.95	0.25	9
Health Status							
Excellent	1,519	0.72	0.36	18.89	78.84	1.19	282
	100	0.06	0.17	1.96	1.99	0.40	17
Very good	2,949	0.66	0.19	16.09	81.78	1.28	291
	169	0.05	0.10	1.72	1.74	0.39	15
Good	3,050	0.71	0.96	15.58	81.49	1.25	259
	226	0.07	0.31	1.48	1.64	0.45	19
Fair	1,388	0.77	1.69	15.44	79.96	2.14	197
	113	0.09	0.46	2.08	2.14	0.59	17
Poor	569	0.85	7.62	17.97	69.65	3.92	173
	67	0.15	4.54	3.45	4.53	1.26	21
Functional Limitation							
None	6,467	0.64	0.99	16.79	80.38	1.20	293
	288	0.04	0.42	1.10	1.16	0.26	13
IADL only ⁴	1,685	0.83	0.97	16.05	79.93	2.23	208
	116	0.08	0.26	1.66	1.86	0.77	13
One to two ADLs ⁵	1,016	0.93	1.60	14.84	80.60	2.04	206
	106	0.14	0.57	2.38	2.50	0.68	20
Three to five ADLs	325	1.07	3.33	14.14	78.31	3.14	128
	45	0.19	2.51	3.13	4.03	1.57	18

Table 4.5 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

4 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$9,494	0.72	1.13	16.36	80.25	1.54	\$252
	<i>335</i>	<i>0.03</i>	<i>0.31</i>	<i>0.89</i>	<i>0.95</i>	<i>0.25</i>	<i>9</i>
Metropolitan Area Resident							
Yes	7,918	0.81	1.20	16.32	80.28	1.39	277
	<i>303</i>	<i>0.04</i>	<i>0.37</i>	<i>1.01</i>	<i>1.10</i>	<i>0.26</i>	<i>10</i>
No	1,576	0.26	0.76	16.54	80.14	2.29	175
	<i>122</i>	<i>0.04</i>	<i>0.31</i>	<i>2.01</i>	<i>1.91</i>	<i>0.66</i>	<i>14</i>

Source: Medicare Current Beneficiary Survey, CY 1999 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. 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 beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.6 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

1 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
All Beneficiaries	\$37,057	4.69	11.88	34.31	40.14	8.99	\$983
	566	0.15	0.57	0.72	0.67	0.63	15
Medicare Status³							
Aged							
65 - 74 years	15,991	4.97	8.05	38.74	40.37	7.87	877
	407	0.21	0.66	1.09	1.09	1.11	18
75 - 84 years	11,247	5.53	5.96	35.31	45.73	7.46	996
	276	0.27	0.67	1.32	1.19	0.78	23
85 years and older	2,723	6.46	10.39	25.56	50.03	7.56	858
	107	0.48	1.29	1.67	1.52	1.60	24
Disabled							
Under 45 years	1,830	1.21	47.79	18.73	20.92	11.35	1,305
	127	0.47	3.66	2.71	1.79	2.18	77
45 - 64 years	5,267	2.30	24.43	28.62	29.07	15.58	1,469
	331	0.35	2.13	2.39	1.67	1.94	74
Gender							
Male	16,100	4.94	9.08	35.96	37.29	12.73	958
	411	0.22	0.78	1.07	0.96	1.18	22
Female	20,957	4.49	14.03	33.04	42.33	6.12	1,004
	355	0.17	0.81	0.84	0.76	0.39	16
Living Arrangement							
Alone	10,711	4.86	17.58	27.95	41.32	8.29	934
	296	0.24	1.15	0.94	0.93	0.56	20
With spouse	19,771	4.54	3.51	42.61	40.51	8.83	1,004
	453	0.20	0.37	1.06	0.94	1.05	20
With children	3,584	5.37	22.91	21.93	40.86	8.93	993
	171	0.48	1.85	1.69	1.94	0.99	36
With others	2,960	4.15	33.67	16.84	32.67	12.67	1,040
	184	0.44	2.91	2.04	1.86	2.45	52

Table 4.6 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

2 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$37,057	4.69	11.88	34.31	40.14	8.99	\$983
	566	0.15	0.57	0.72	0.67	0.63	15
Race/Ethnicity							
White non-Hispanic	30,277	4.32	7.81	37.45	41.77	8.65	1,004
	580	0.15	0.46	0.87	0.72	0.72	17
Black non-Hispanic	3,155	6.03	28.67	23.26	31.80	10.25	951
	151	0.60	2.41	2.10	1.43	1.61	36
Hispanic	2,358	7.13	36.60	12.75	33.83	9.70	878
	215	0.77	3.70	1.88	2.09	1.87	45
Other	1,214	5.36	21.64	26.87	33.81	12.32	850
	149	1.10	2.84	3.10	2.58	1.82	67
Income							
Less than \$2,500	761	4.62	21.07	26.20	37.36	10.76	1,025
	100	1.17	5.41	6.02	4.32	3.65	102
\$2,500 - \$4,999	560	3.26	35.16	16.56	37.80	7.23	832
	56	0.84	5.18	2.92	4.38	1.30	68
\$5,000 - \$7,499	3,377	2.68	63.24	4.84	21.92	7.31	1,027
	212	0.32	2.46	0.76	1.43	1.35	48
\$7,500 - \$9,999	4,000	4.91	28.78	13.69	38.57	14.04	968
	183	0.42	2.22	1.36	1.63	1.87	35
\$10,000 - \$14,999	5,871	6.12	9.99	24.42	45.98	13.48	928
	214	0.39	1.31	1.39	1.51	1.27	26
\$15,000 - \$19,999	3,822	6.32	2.06	35.01	47.79	8.81	894
	142	0.51	0.59	1.59	1.46	1.10	27
\$20,000 - \$24,999	3,869	5.74	1.03	40.42	44.38	8.43	960
	162	0.49	0.40	2.11	1.95	2.12	39
\$25,000 - \$29,999	2,667	4.63	1.04	49.93	38.71	5.68	1,031
	202	0.47	0.46	2.96	2.47	1.04	69
\$30,000 or more	12,130	3.70	0.20	49.81	39.73	6.55	1,044
	403	0.20	0.09	1.38	1.04	1.06	30

Table 4.6 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

3 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source	
All Beneficiaries	\$37,057	4.69	11.88	34.31	40.14	8.99	\$983
	<i>566</i>	<i>0.15</i>	<i>0.57</i>	<i>0.72</i>	<i>0.67</i>	<i>0.63</i>	<i>15</i>
Health Status							
Excellent	2,952	9.83	4.82	35.96	42.19	7.20	549
	<i>142</i>	<i>0.73</i>	<i>0.89</i>	<i>1.81</i>	<i>1.32</i>	<i>1.14</i>	<i>21</i>
Very good	7,622	6.49	4.76	38.85	42.22	7.69	753
	<i>255</i>	<i>0.38</i>	<i>0.51</i>	<i>1.19</i>	<i>0.99</i>	<i>0.88</i>	<i>20</i>
Good	11,844	4.49	9.30	35.34	41.13	9.74	1,005
	<i>279</i>	<i>0.23</i>	<i>0.84</i>	<i>1.17</i>	<i>1.17</i>	<i>1.21</i>	<i>22</i>
Fair	9,407	3.15	15.55	32.85	38.90	9.54	1,338
	<i>331</i>	<i>0.22</i>	<i>1.23</i>	<i>1.59</i>	<i>1.26</i>	<i>0.85</i>	<i>34</i>
Poor	5,153	2.26	25.77	27.19	35.45	9.33	1,569
	<i>314</i>	<i>0.30</i>	<i>2.26</i>	<i>1.83</i>	<i>1.66</i>	<i>1.54</i>	<i>63</i>
Functional Limitation							
None	17,452	6.07	6.49	37.17	42.20	8.08	790
	<i>329</i>	<i>0.21</i>	<i>0.55</i>	<i>0.91</i>	<i>0.78</i>	<i>0.49</i>	<i>14</i>
IADL only ⁴	9,681	3.82	14.04	34.17	39.05	8.92	1,197
	<i>340</i>	<i>0.27</i>	<i>1.37</i>	<i>2.08</i>	<i>1.17</i>	<i>0.92</i>	<i>36</i>
One to two ADLs ⁵	6,196	3.59	17.62	29.10	38.37	11.33	1,259
	<i>313</i>	<i>0.34</i>	<i>1.84</i>	<i>1.52</i>	<i>1.36</i>	<i>1.61</i>	<i>45</i>
Three to five ADLs	3,695	2.30	21.49	30.09	36.46	9.66	1,456
	<i>225</i>	<i>0.22</i>	<i>2.22</i>	<i>2.15</i>	<i>2.34</i>	<i>2.91</i>	<i>67</i>

Table 4.6 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

4 of 4

Beneficiary Characteristic ²	Total Expenditures (millions of \$)	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$37,057	4.69	11.88	34.31	40.14	8.99	\$983
	<i>566</i>	<i>0.15</i>	<i>0.57</i>	<i>0.72</i>	<i>0.67</i>	<i>0.63</i>	<i>15</i>
Metropolitan Area Resident							
Yes	28,140	5.85	11.50	35.74	37.77	9.14	983
	<i>524</i>	<i>0.20</i>	<i>0.66</i>	<i>0.88</i>	<i>0.60</i>	<i>0.57</i>	<i>17</i>
No	8,909	1.02	13.08	29.76	47.60	8.54	987
	<i>235</i>	<i>0.14</i>	<i>1.12</i>	<i>1.27</i>	<i>2.03</i>	<i>2.01</i>	<i>28</i>

Source: Medicare Current Beneficiary Survey, CY 1999 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. 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 beneficiaries who resided only in a long-term care facility during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.7 Long-Term Care Facility Expenditures for Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Long-Term Care Facility Residents¹

1 of 3

Beneficiary Characteristic ²	Total Expenditures (millions of \$) ³	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$79,877	8.02	44.70	1.76	38.02	7.49	\$29,899
	<i>2,989</i>	<i>0.64</i>	<i>1.54</i>	<i>0.27</i>	<i>1.32</i>	<i>0.87</i>	<i>582</i>
Medicare Status⁴							
Aged							
65 - 74 years	9,251	11.05	53.19	2.82	31.34	1.60	29,481
	<i>1,268</i>	<i>2.60</i>	<i>4.63</i>	<i>1.11</i>	<i>3.53</i>	<i>0.61</i>	<i>2,427</i>
75 - 84 years	22,235	9.97	38.11	2.36	43.87	5.70	28,265
	<i>1,545</i>	<i>1.33</i>	<i>2.29</i>	<i>0.60</i>	<i>2.45</i>	<i>0.87</i>	<i>1,096</i>
85 years and older	34,833	7.97	40.91	1.75	45.73	3.64	28,699
	<i>1,920</i>	<i>0.86</i>	<i>2.04</i>	<i>0.34</i>	<i>1.78</i>	<i>0.73</i>	<i>823</i>
Disabled							
Under 45 years	6,501	0.14	65.14	0.00	8.08	26.65	50,019
	<i>977</i>	<i>0.06</i>	<i>4.14</i>	<i>0.00</i>	<i>1.46</i>	<i>4.34</i>	<i>6,797</i>
45 - 64 years	7,058	5.41	54.27	0.17	17.90	22.24	31,031
	<i>863</i>	<i>1.67</i>	<i>6.08</i>	<i>0.13</i>	<i>2.64</i>	<i>6.34</i>	<i>2,985</i>
Gender							
Male	24,801	8.33	43.09	1.95	31.23	15.40	30,206
	<i>1,568</i>	<i>1.25</i>	<i>2.96</i>	<i>0.57</i>	<i>1.90</i>	<i>2.54</i>	<i>1,385</i>
Female	55,076	7.88	45.43	1.68	41.08	3.93	29,762
	<i>2,379</i>	<i>0.73</i>	<i>1.58</i>	<i>0.31</i>	<i>1.47</i>	<i>0.56</i>	<i>690</i>
Race/Ethnicity							
White non-Hispanic	67,863	8.24	42.31	1.86	41.10	6.49	30,072
	<i>2,727</i>	<i>0.73</i>	<i>1.64</i>	<i>0.29</i>	<i>1.44</i>	<i>0.76</i>	<i>636</i>
Black non-Hispanic	7,296	7.22	61.20	0.57	18.08	12.93	30,234
	<i>750</i>	<i>1.98</i>	<i>3.98</i>	<i>0.30</i>	<i>2.20</i>	<i>3.78</i>	<i>1,882</i>
Hispanic	2,130*	4.95*	62.73*	4.58*	16.97*	10.78*	25,601*
	<i>535</i>	<i>2.63</i>	<i>8.46</i>	<i>3.97</i>	<i>5.88</i>	<i>3.67</i>	<i>4,343</i>
Other	1,278*	4.72*	44.83*	0.35*	18.19*	31.91*	31,415*
	<i>383</i>	<i>3.40</i>	<i>14.26</i>	<i>0.41</i>	<i>8.27</i>	<i>18.18</i>	<i>7,561</i>

Table 4.7 Long-Term Care Facility Expenditures for Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Long-Term Care Facility Residents¹

2 of 3

Beneficiary Characteristic ²	Total Expenditures (millions of \$) ³	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$79,877	8.02	44.70	1.76	38.02	7.49	\$29,899
	<i>2,989</i>	<i>0.64</i>	<i>1.54</i>	<i>0.27</i>	<i>1.32</i>	<i>0.87</i>	<i>582</i>
Income							
Less than \$2,500	3,983	6.71	51.13	0.17	36.92	5.07	36,792
	<i>876</i>	<i>3.10</i>	<i>8.45</i>	<i>0.13</i>	<i>7.43</i>	<i>2.39</i>	<i>4,328</i>
\$2,500 - \$4,999	4,599	3.00	62.73	1.01	21.66	11.60	36,454
	<i>842</i>	<i>1.63</i>	<i>4.52</i>	<i>0.64</i>	<i>5.46</i>	<i>4.93</i>	<i>6,133</i>
\$5,000 - \$7,499	17,521	6.86	61.57	0.96	18.98	11.63	30,865
	<i>1,412</i>	<i>1.35</i>	<i>3.65</i>	<i>0.37</i>	<i>1.88</i>	<i>3.10</i>	<i>1,730</i>
\$7,500 - \$9,999	14,347	6.56	48.18	1.50	36.32	7.44	27,833
	<i>807</i>	<i>0.96</i>	<i>3.18</i>	<i>0.62</i>	<i>3.03</i>	<i>1.62</i>	<i>1,154</i>
\$10,000 - \$14,999	12,954	11.82	40.48	2.42	38.28	7.00	27,477
	<i>1,279</i>	<i>1.56</i>	<i>3.31</i>	<i>0.56</i>	<i>3.30</i>	<i>2.01</i>	<i>1,315</i>
\$15,000 - \$19,999	8,458	9.15	34.97	2.09	47.71	6.09	29,518
	<i>900</i>	<i>1.94</i>	<i>4.63</i>	<i>0.81</i>	<i>5.00</i>	<i>2.22</i>	<i>1,678</i>
\$20,000 - \$24,999	5,503	7.95	31.53	4.08	52.37	4.06	28,790
	<i>789</i>	<i>1.93</i>	<i>5.15</i>	<i>1.40</i>	<i>4.89</i>	<i>1.82</i>	<i>2,548</i>
\$25,000 - \$29,999	2,956*	9.97*	23.63*	1.82*	61.82*	2.76*	32,190*
	<i>524</i>	<i>3.45</i>	<i>6.61</i>	<i>1.02</i>	<i>6.27</i>	<i>1.68</i>	<i>3,617</i>
\$30,000 or more	9,556	8.59	25.66	2.12	59.27	4.37	30,522
	<i>1,166</i>	<i>2.47</i>	<i>4.65</i>	<i>1.18</i>	<i>5.13</i>	<i>2.10</i>	<i>1,983</i>
Health Status							
Excellent	2,043*	11.98*	22.92*	2.68*	52.20*	10.23*	20,578*
	<i>393</i>	<i>3.99</i>	<i>7.37</i>	<i>1.71</i>	<i>7.73</i>	<i>3.87</i>	<i>2,569</i>
Very good	7,017	5.10	48.94	2.12	33.50	10.33	30,607
	<i>839</i>	<i>1.35</i>	<i>5.28</i>	<i>1.22</i>	<i>4.87</i>	<i>3.61</i>	<i>3,423</i>
Good	23,534	6.86	40.24	1.67	41.21	10.02	31,280
	<i>1,869</i>	<i>1.22</i>	<i>3.63</i>	<i>0.41</i>	<i>2.63</i>	<i>2.20</i>	<i>1,545</i>
Fair	31,919	7.85	45.71	1.53	39.87	5.03	30,515
	<i>1,759</i>	<i>0.94</i>	<i>1.93</i>	<i>0.31</i>	<i>2.24</i>	<i>1.09</i>	<i>877</i>
Poor	13,644	11.32	49.68	2.36	29.54	7.10	27,358
	<i>1,230</i>	<i>1.85</i>	<i>3.39</i>	<i>0.90</i>	<i>2.69</i>	<i>1.48</i>	<i>1,242</i>

Table 4.7 Long-Term Care Facility Expenditures for Medicare Beneficiaries, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Long-Term Care Facility Residents¹

3 of 3

Beneficiary Characteristic ²	Total Expenditures (millions of \$) ³	Source of Payment (as a percentage of row total)					Expenditures Per Beneficiary
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source	
All Beneficiaries	\$79,877	8.02	44.70	1.76	38.02	7.49	\$29,899
	<i>2,989</i>	<i>0.64</i>	<i>1.54</i>	<i>0.27</i>	<i>1.32</i>	<i>0.87</i>	<i>582</i>
Functional Limitation							
None	2,649	8.21	12.00	5.14	33.46	41.20	21,076
	<i>507</i>	<i>3.44</i>	<i>6.32</i>	<i>3.06</i>	<i>9.09</i>	<i>10.60</i>	<i>3,791</i>
IADL only ⁵	3,762	9.57	26.14	1.02	36.39	26.87	17,317
	<i>503</i>	<i>2.27</i>	<i>6.17</i>	<i>0.43</i>	<i>6.24</i>	<i>6.07</i>	<i>1,825</i>
One to two ADLs ⁶	13,722	7.09	38.02	1.90	40.49	12.51	25,228
	<i>1,397</i>	<i>1.17</i>	<i>3.44</i>	<i>0.46</i>	<i>3.18</i>	<i>2.07</i>	<i>1,343</i>
Three to five ADLs	59,744	8.13	48.86	1.63	37.76	3.63	33,475
	<i>2,473</i>	<i>0.77</i>	<i>1.55</i>	<i>0.30</i>	<i>1.56</i>	<i>0.62</i>	<i>796</i>
Metropolitan Area Resident							
Yes	62,865	7.91	45.25	1.61	37.35	7.89	32,291
	<i>2,737</i>	<i>0.75</i>	<i>1.85</i>	<i>0.29</i>	<i>1.54</i>	<i>1.10</i>	<i>759</i>
No	17,012	8.41	42.69	2.34	40.51	6.04	23,473
	<i>1,056</i>	<i>1.10</i>	<i>2.13</i>	<i>0.62</i>	<i>2.53</i>	<i>0.97</i>	<i>836</i>

Source: Medicare Current Beneficiary Survey, CY 1999 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables. Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 1 The term *long-term care facility residents* includes beneficiaries who resided only in a long-term care facility during the year, and beneficiaries who resided part of the year in a long-term care facility and part of the year in the community. It excludes beneficiaries who resided only in the community during the year.
- 2 Due to missing values for some variables, expenditures for individual categories may not sum to total expenditures for all beneficiaries.
- 3 Expenditures for long-term care in facilities include facility room and board expenses for beneficiaries who resided in a facility for the full year, and facility room and board expenses for beneficiaries who resided in a facility for part of the year and in the community for part of the year. However, in contrast with Table 4.1, facility expenditures in Table 4.7 do not include expenditures for short-term facility stays (institutional events), primarily in skilled nursing facilities, for full-year community residents, which were reported during a community interview or created through Medicare claims data. See Appendix B for additional information.
- 4 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 5 *IADL* stands for Instrumental Activity of Daily Living.
- 6 *ADL* stands for Activity of Daily Living.

Table 4.8 Personal Health Care Expenditures per Noninstitutionalized Medicare Beneficiary, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

1 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			Both Types of Private Insurance
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per Beneficiary	\$7,228	\$4,701	\$8,698	\$7,396	\$7,716	\$7,303
	<i>131</i>	<i>342</i>	<i>453</i>	<i>292</i>	<i>279</i>	<i>439</i>
Medicare Status³						
Aged						
65 - 74 years	6,310	4,349	7,866	6,261	6,953	5,863
	<i>184</i>	<i>538</i>	<i>545</i>	<i>474</i>	<i>386</i>	<i>550</i>
75 - 84 years	7,893	4,597	9,510	7,829	8,344	8,040
	<i>189</i>	<i>550</i>	<i>826</i>	<i>370</i>	<i>424</i>	<i>715</i>
85 years and older	9,028	5,815	8,765	10,136	9,152	11,518
	<i>336</i>	<i>1,170</i>	<i>669</i>	<i>763</i>	<i>647</i>	<i>1,945</i>
Disabled						
Under 45 years	7,188	6,090	7,553	8,337*	7,440	3,772*
	<i>539</i>	<i>1,508</i>	<i>636</i>	<i>2,175</i>	<i>1,368</i>	<i>60</i>
45 - 64 years	8,217	4,656	10,148	8,380	9,207	16,992*
	<i>657</i>	<i>696</i>	<i>1,482</i>	<i>2,039</i>	<i>1,630</i>	<i>7,167</i>
Gender						
Male	7,597	4,645	8,529	8,097	8,427	8,390
	<i>206</i>	<i>396</i>	<i>720</i>	<i>514</i>	<i>433</i>	<i>843</i>
Female	6,930	4,775	8,795	6,922	7,057	6,494
	<i>144</i>	<i>477</i>	<i>506</i>	<i>292</i>	<i>320</i>	<i>493</i>
Living Arrangement						
Alone	7,249	4,480	8,391	7,403	7,683	7,937
	<i>200</i>	<i>558</i>	<i>608</i>	<i>409</i>	<i>428</i>	<i>749</i>
With spouse	7,046	5,055	8,570	7,044	7,612	6,987
	<i>168</i>	<i>551</i>	<i>984</i>	<i>387</i>	<i>337</i>	<i>644</i>
With children	8,374	5,256	9,809	9,039	10,320	7,941*
	<i>487</i>	<i>727</i>	<i>903</i>	<i>1,072</i>	<i>1,934</i>	<i>1,915</i>
With others	6,968	3,519	8,270	8,703	6,257	6,873*
	<i>483</i>	<i>744</i>	<i>1,118</i>	<i>1,414</i>	<i>754</i>	<i>2,370</i>

Table 4.8 Personal Health Care Expenditures per Noninstitutionalized Medicare Beneficiary, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

2 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per Beneficiary	\$7,228	\$4,701	\$8,698	\$7,396	\$7,716	\$7,303
	131	342	453	292	279	439
Race/Ethnicity						
White non-Hispanic	7,222	5,196	8,230	7,376	7,814	6,971
	140	482	401	295	314	476
Black non-Hispanic	8,633	4,523	11,888	9,147	8,016	13,555*
	667	746	1,696	2,474	741	3,690
Hispanic	6,400	2,558	7,679	7,671	6,158	10,901*
	423	370	713	2,041	908	6,379
Other	5,766	4,200	5,441	5,840	6,517	13,024*
	436	1,184	902	1,762	924	7,466
Income						
Less than \$2,500	7,602	3,382*	10,499	8,243	6,004*	24,944*
	1,519	1,177	5,082	1,774	911	10,805
\$2,500 - \$4,999	5,728	2,124*	6,297	4,707*	8,064*	726*
	683	504	1,244	1,083	2,147	0
\$5,000 - \$7,499	7,184	3,062	8,178	7,911	5,259	1,919*
	546	656	781	1,204	776	391
\$7,500 - \$9,999	7,104	3,932	8,313	8,085	7,302	9,687*
	326	587	524	853	1,460	5,301
\$10,000 - \$14,999	7,265	5,648	10,919	7,168	7,297	5,485
	280	824	1,237	522	755	666
\$15,000 - \$19,999	7,591	4,930	10,198	7,021	9,064	7,247*
	438	729	2,226	769	1,004	1,302
\$20,000 - \$24,999	7,463	5,343	14,509*	7,772	7,926	7,672
	391	854	6,203	1,027	705	1,249
\$25,000 - \$29,999	8,363	4,114*	4,691*	7,783	10,218	7,634
	792	1,476	1,270	912	1,643	1,775
\$30,000 or more	6,859	5,854	7,081*	7,300	7,012	7,451
	167	1,021	2,531	567	302	622

Table 4.8 Personal Health Care Expenditures per Noninstitutionalized Medicare Beneficiary, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

3 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per Beneficiary	\$7,228	\$4,701	\$8,698	\$7,396	\$7,716	\$7,303
	<i>131</i>	<i>342</i>	<i>453</i>	<i>292</i>	<i>279</i>	<i>439</i>
Health Status						
Excellent	4,118	3,099	5,838	3,758	3,359	3,271
	<i>163</i>	<i>834</i>	<i>943</i>	<i>367</i>	<i>260</i>	<i>378</i>
Very good	5,069	3,644	4,525	4,640	5,269	5,614
	<i>138</i>	<i>837</i>	<i>474</i>	<i>290</i>	<i>256</i>	<i>513</i>
Good	6,889	4,190	5,951	7,177	7,979	7,481
	<i>215</i>	<i>492</i>	<i>389</i>	<i>434</i>	<i>626</i>	<i>708</i>
Fair	9,539	5,676	9,734	11,290	10,693	12,023
	<i>319</i>	<i>679</i>	<i>813</i>	<i>820</i>	<i>588</i>	<i>1,679</i>
Poor	15,170	7,006	15,953	19,850	18,368	28,048*
	<i>870</i>	<i>1,161</i>	<i>1,690</i>	<i>2,024</i>	<i>2,110</i>	<i>5,722</i>
Functional Limitation						
None	5,279	3,364	5,614	5,067	5,486	5,352
	<i>120</i>	<i>313</i>	<i>534</i>	<i>281</i>	<i>192</i>	<i>432</i>
IADL only ⁴	8,410	4,185	8,719	8,591	10,159	11,392
	<i>348</i>	<i>481</i>	<i>870</i>	<i>474</i>	<i>974</i>	<i>1,448</i>
One to two ADLs ⁵	10,098	6,247	10,702	12,400	10,963	9,529
	<i>505</i>	<i>1,003</i>	<i>950</i>	<i>1,094</i>	<i>1,295</i>	<i>1,352</i>
Three to five ADLs	14,891	12,073	14,613	17,581	17,320	13,854*
	<i>798</i>	<i>1,394</i>	<i>1,433</i>	<i>2,553</i>	<i>1,504</i>	<i>2,896</i>

Table 4.8 Personal Health Care Expenditures per Noninstitutionalized Medicare Beneficiary, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents¹

4 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per Beneficiary	\$7,228	\$4,701	\$8,698	\$7,396	\$7,716	\$7,303
	<i>131</i>	<i>342</i>	<i>453</i>	<i>292</i>	<i>279</i>	<i>439</i>
Metropolitan Area Resident						
Yes	7,392	4,773	8,983	7,725	7,879	7,541
	<i>165</i>	<i>458</i>	<i>597</i>	<i>424</i>	<i>337</i>	<i>547</i>
No	6,724	4,613	7,891	6,834	7,113	6,617
	<i>179</i>	<i>500</i>	<i>458</i>	<i>363</i>	<i>374</i>	<i>735</i>

Source: Medicare Current Beneficiary Survey, CY 1999 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables. Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 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 beneficiaries who resided only in a long-term care facility during the year.
- 2 Expenditures for beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but are included in the total. See entry for *personal health care expenditures* in Appendix B for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.9 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Inpatient Hospital Stay in 1999¹

1 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			Both Types of Private Insurance
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per User	\$11,542	\$11,631	\$12,250	\$12,478	\$14,303	\$12,448
	<i>347</i>	<i>1,290</i>	<i>717</i>	<i>644</i>	<i>802</i>	<i>1,330</i>
Medicare Status³						
Aged						
65 - 74 years	12,496	14,679	12,636	13,610	15,590	13,807*
	<i>727</i>	<i>2,509</i>	<i>1,314</i>	<i>1,457</i>	<i>1,480</i>	<i>1,912</i>
75 - 84 years	10,350	9,355*	12,372	11,765	12,655	9,746
	<i>434</i>	<i>1,222</i>	<i>1,421</i>	<i>785</i>	<i>839</i>	<i>1,318</i>
85 years and older	10,635	10,598*	10,075	12,098	11,400	12,778*
	<i>609</i>	<i>2,334</i>	<i>1,007</i>	<i>1,298</i>	<i>1,052</i>	<i>2,628</i>
Disabled						
Under 45 years	12,451	12,415*	12,237	9,841*	15,391*	0
	<i>1,455</i>	<i>4,645</i>	<i>1,506</i>	<i>1,799</i>	<i>6,362</i>	<i>0</i>
45 - 64 years	13,264	8,961*	12,706	12,194*	18,877*	28,458*
	<i>1,390</i>	<i>1,504</i>	<i>1,756</i>	<i>5,146</i>	<i>3,646</i>	<i>8,173</i>
Gender						
Male	12,512	11,260	13,998	13,995	15,007	14,937
	<i>525</i>	<i>1,421</i>	<i>1,260</i>	<i>1,230</i>	<i>920</i>	<i>2,047</i>
Female	10,703	12,241	11,396	11,299	13,565	9,531
	<i>442</i>	<i>2,279</i>	<i>743</i>	<i>552</i>	<i>1,268</i>	<i>1,065</i>
Living Arrangement						
Alone	10,819	9,276	11,098	12,547	13,704	12,152*
	<i>514</i>	<i>1,462</i>	<i>866</i>	<i>994</i>	<i>1,328</i>	<i>1,674</i>
With spouse	11,794	12,920	13,152	12,240	14,096	13,354
	<i>449</i>	<i>2,058</i>	<i>1,851</i>	<i>894</i>	<i>843</i>	<i>2,042</i>
With children	12,491	11,786*	12,846	12,800	19,324	8,811*
	<i>1,429</i>	<i>2,300</i>	<i>1,640</i>	<i>2,009</i>	<i>6,606</i>	<i>2,964</i>
With others	11,661	14,262*	12,597	13,843*	13,179*	11,215*
	<i>958</i>	<i>5,558</i>	<i>1,475</i>	<i>3,009</i>	<i>2,749</i>	<i>1,789</i>

Table 4.9 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Inpatient Hospital Stay in 1999¹

2 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			Both Types of Private Insurance
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per User	\$11,542	\$11,631	\$12,250	\$12,478	\$14,303	\$12,448
	<i>347</i>	<i>1,290</i>	<i>717</i>	<i>644</i>	<i>802</i>	<i>1,330</i>
Race/Ethnicity						
White non-Hispanic	11,535	13,050	10,952	12,281	14,431	11,881
	<i>366</i>	<i>1,654</i>	<i>738</i>	<i>625</i>	<i>848</i>	<i>1,365</i>
Black non-Hispanic	13,145	8,066*	15,280	17,352*	16,044*	16,371*
	<i>1,180</i>	<i>1,295</i>	<i>2,121</i>	<i>6,623</i>	<i>2,126</i>	<i>4,613</i>
Hispanic	9,767	6,556*	11,920	16,659*	8,813*	26,288*
	<i>1,375</i>	<i>2,945</i>	<i>1,460</i>	<i>8,936</i>	<i>2,231</i>	<i>4,439</i>
Other	10,461	7,775*	10,380*	10,166*	14,811*	16,076*
	<i>1,799</i>	<i>1,740</i>	<i>1,888</i>	<i>5,871</i>	<i>4,689</i>	<i>0</i>
Income						
Less than \$2,500	10,074	13,164*	13,956*	9,880*	4,496*	0
	<i>2,113</i>	<i>4,505</i>	<i>4,293</i>	<i>1,797</i>	<i>1,036</i>	<i>0</i>
\$2,500 - \$4,999	11,404*	11,086*	16,290*	5,231*	12,049*	0
	<i>2,280</i>	<i>3,193</i>	<i>5,068</i>	<i>1,431</i>	<i>3,061</i>	<i>0</i>
\$5,000 - \$7,499	11,553	8,371*	12,580	12,897*	5,629*	0
	<i>1,048</i>	<i>1,937</i>	<i>1,293</i>	<i>2,401</i>	<i>1,291</i>	<i>0</i>
\$7,500 - \$9,999	9,746	9,669*	10,198	11,667	11,191*	9,829*
	<i>633</i>	<i>1,956</i>	<i>795</i>	<i>1,360</i>	<i>2,746</i>	<i>5,334</i>
\$10,000 - \$14,999	10,901	14,811	12,533	11,357	13,879	8,277*
	<i>743</i>	<i>3,126</i>	<i>1,679</i>	<i>1,336</i>	<i>2,159</i>	<i>1,429</i>
\$15,000 - \$19,999	12,273	10,264*	17,000*	12,146	16,278	15,029*
	<i>885</i>	<i>2,440</i>	<i>5,543</i>	<i>1,664</i>	<i>1,956</i>	<i>2,963</i>
\$20,000 - \$24,999	11,445	6,720*	14,552*	13,626	14,710	9,908*
	<i>898</i>	<i>1,478</i>	<i>6,182</i>	<i>2,222</i>	<i>1,563</i>	<i>2,231</i>
\$25,000 - \$29,999	17,469	8,600*	3,270*	14,446*	23,911	11,763*
	<i>2,906</i>	<i>2,763</i>	<i>0</i>	<i>2,215</i>	<i>5,279</i>	<i>4,815</i>
\$30,000 or more	11,160	14,919*	10,374*	13,418	12,011	13,885
	<i>588</i>	<i>2,093</i>	<i>5,107</i>	<i>1,635</i>	<i>877</i>	<i>2,037</i>

Table 4.9 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Inpatient Hospital Stay in 1999¹

3 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			Both Types of Private Insurance
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per User	\$11,542	\$11,631	\$12,250	\$12,478	\$14,303	\$12,448
	347	1,290	717	644	802	1,330
Health Status						
Excellent	8,892	18,599*	12,554*	9,626*	9,101	8,350*
	992	7,283	2,435	1,590	1,334	2,519
Very good	9,736	12,764*	9,759*	9,596	12,785	10,096*
	602	4,021	1,563	950	1,123	1,558
Good	10,913	10,307	9,607	11,608	14,465	10,738*
	675	1,245	542	1,068	1,822	1,607
Fair	11,893	11,729	12,809	12,881	14,249	13,407*
	643	2,112	1,349	1,423	1,436	2,923
Poor	15,074	10,043*	14,116	18,600	18,430	24,452*
	1,064	1,910	1,457	2,300	2,295	4,744
Functional Limitation						
None	10,226	12,006	10,303	11,496	12,625	11,614
	453	1,758	1,130	1,030	714	1,648
IADL only ⁴	11,410	9,293*	12,286	10,479	15,495	15,569*
	832	2,167	1,104	812	2,301	3,065
One to two ADLs ⁵	12,347	12,096*	12,868	13,595	14,883	11,256*
	804	2,805	1,543	1,393	1,718	1,998
Three to five ADLs	14,356	13,714*	13,835	17,918	16,599	10,510*
	1,143	2,785	1,775	2,813	2,217	2,481

Table 4.9 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Inpatient Hospital Stay in 1999¹

4 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			Both Types of Private Insurance
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per User	\$11,542	\$11,631	\$12,250	\$12,478	\$14,303	\$12,448
	<i>347</i>	<i>1,290</i>	<i>717</i>	<i>644</i>	<i>802</i>	<i>1,330</i>
Metropolitan Area Resident						
Yes	11,614	12,112	12,658	13,158	14,878	12,088
	<i>429</i>	<i>1,675</i>	<i>906</i>	<i>943</i>	<i>962</i>	<i>1,474</i>
No	11,325	10,785	11,099	11,365	12,330	13,737*
	<i>551</i>	<i>2,108</i>	<i>1,135</i>	<i>883</i>	<i>1,111</i>	<i>3,104</i>

Source: Medicare Current Beneficiary Survey, CY 1999 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables. Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 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 beneficiaries who resided only in a long-term care facility during the year.
- 2 Expenditures for beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but are included in the total. See entry for *personal health care expenditures* in Appendix B for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.10 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Outpatient Hospital Visit in 1999¹

1 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			Both Types of Private Insurance
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per User	\$1,187	\$1,079	\$1,662	\$1,173	\$1,229	\$978
	<i>55</i>	<i>222</i>	<i>192</i>	<i>83</i>	<i>118</i>	<i>127</i>
Medicare Status³						
Aged						
65 - 74 years	1,150	1,130	1,427	1,175	1,292	1,035
	<i>90</i>	<i>312</i>	<i>257</i>	<i>145</i>	<i>207</i>	<i>199</i>
75 - 84 years	1,012	492	1,280	1,109	991	941
	<i>47</i>	<i>79</i>	<i>169</i>	<i>108</i>	<i>63</i>	<i>103</i>
85 years and older	939	682	780	1,006	1,056	780*
	<i>69</i>	<i>123</i>	<i>70</i>	<i>198</i>	<i>121</i>	<i>144</i>
Disabled						
Under 45 years	1,948	1,378	2,176	2,803*	1,689	281*
	<i>336</i>	<i>318</i>	<i>518</i>	<i>2,289</i>	<i>391</i>	<i>190</i>
45 - 64 years	1,818	1,408	2,374	2,796*	1,733	791*
	<i>257</i>	<i>446</i>	<i>624</i>	<i>856</i>	<i>465</i>	<i>245</i>
Gender						
Male	1,409	1,081	2,125	1,365	1,597	950
	<i>106</i>	<i>209</i>	<i>364</i>	<i>152</i>	<i>235</i>	<i>112</i>
Female	1,021	1,075	1,415	1,053	909	996
	<i>50</i>	<i>282</i>	<i>202</i>	<i>97</i>	<i>60</i>	<i>160</i>
Living Arrangement						
Alone	1,102	1,279	1,622	995	952	1,016
	<i>68</i>	<i>319</i>	<i>283</i>	<i>88</i>	<i>79</i>	<i>151</i>
With spouse	1,238	1,168	1,887	1,297	1,357	890
	<i>83</i>	<i>333</i>	<i>446</i>	<i>127</i>	<i>172</i>	<i>109</i>
With children	1,071	747	1,352	996	1,246	834*
	<i>85</i>	<i>128</i>	<i>226</i>	<i>142</i>	<i>222</i>	<i>155</i>
With others	1,353	732	1,820	1,396	951	2,436*
	<i>234</i>	<i>176</i>	<i>577</i>	<i>339</i>	<i>179</i>	<i>2,034</i>

Table 4.10 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Outpatient Hospital Visit in 1999¹

2 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			Both Types of Private Insurance
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per User	\$1,187	\$1,079	\$1,662	\$1,173	\$1,229	\$978
	55	222	192	83	118	127
Race/Ethnicity						
White non-Hispanic	1,094	964	1,254	1,151	1,204	921
	56	135	193	78	127	87
Black non-Hispanic	1,916	1,406	2,790	1,636*	1,649	972*
	304	681	656	789	377	315
Hispanic	1,248	648	1,454	1,798	1,381	409*
	140	213	244	716	383	139
Other	1,388	2,297*	1,446	740*	971	4,724*
	226	1,180	413	293	176	4,780
Income						
Less than \$2,500	2,369	559*	3,924	2,184*	1,835*	12,120*
	865	214	2,949	1,062	574	8,467
\$2,500 - \$4,999	763	431*	746	832*	901*	0
	98	251	171	235	249	0
\$5,000 - \$7,499	1,235	623	1,406	969	1,213*	225*
	210	161	296	177	337	91
\$7,500 - \$9,999	1,250	1,009	1,561	1,046	1,293	687*
	103	321	217	215	385	361
\$10,000 - \$14,999	1,141	1,252	1,997	1,199	837	630*
	103	440	407	159	89	139
\$15,000 - \$19,999	1,347	1,029	1,816	1,145	1,784	1,040*
	258	210	356	188	723	250
\$20,000 - \$24,999	1,223	954	6,215*	1,405	1,181	816
	152	314	5,023	435	170	138
\$25,000 - \$29,999	1,158	2,260*	467*	1,321	1,177	988*
	170	1,816	203	215	321	274
\$30,000 or more	1,059	1,239	1,044*	1,061	1,186	960
	64	525	343	106	115	123

Table 4.10 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Outpatient Hospital Visit in 1999¹

3 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per User	\$1,187	\$1,079	\$1,662	\$1,173	\$1,229	\$978
	<i>55</i>	<i>222</i>	<i>192</i>	<i>83</i>	<i>118</i>	<i>127</i>
Health Status						
Excellent	751	449	1199	769	712	458
	<i>50</i>	<i>72</i>	<i>232</i>	<i>105</i>	<i>100</i>	<i>93</i>
Very good	770	465	752	749	824	840
	<i>35</i>	<i>80</i>	<i>88</i>	<i>58</i>	<i>72</i>	<i>140</i>
Good	1,080	715	1,290	1,145	1,214	867
	<i>61</i>	<i>110</i>	<i>200</i>	<i>135</i>	<i>177</i>	<i>106</i>
Fair	1,380	1,036	1,678	1,639	1,327	1,607
	<i>98</i>	<i>203</i>	<i>271</i>	<i>247</i>	<i>135</i>	<i>280</i>
Poor	2,671	2,770	2,891	2,626	3,120	2,981*
	<i>389</i>	<i>1,142</i>	<i>719</i>	<i>508</i>	<i>1,057</i>	<i>1,748</i>
Functional Limitation						
None	970	1,003	1,545	921	983	799
	<i>56</i>	<i>309</i>	<i>276</i>	<i>83</i>	<i>91</i>	<i>159</i>
IADL only ⁴	1,248	694	1,665	1,410	1,211	1,384
	<i>91</i>	<i>88</i>	<i>399</i>	<i>179</i>	<i>156</i>	<i>184</i>
One to two ADLs ⁵	1,702	1,495	1,956	1,656	2,040	1,167
	<i>238</i>	<i>523</i>	<i>425</i>	<i>319</i>	<i>665</i>	<i>207</i>
Three to five ADLs	1,548	1,700	1,482	1,737	1,777	1,196*
	<i>150</i>	<i>362</i>	<i>309</i>	<i>357</i>	<i>402</i>	<i>561</i>

Table 4.10 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Outpatient Hospital Visit in 1999¹

4 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			Both Types of Private Insurance
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per User	\$1,187	\$1,079	\$1,662	\$1,173	\$1,229	\$978
	<i>55</i>	<i>222</i>	<i>192</i>	<i>83</i>	<i>118</i>	<i>127</i>
Metropolitan Area Resident						
Yes	1,212	937	1,893	1,205	1,280	872
	<i>70</i>	<i>316</i>	<i>267</i>	<i>123</i>	<i>150</i>	<i>105</i>
No	1,123	1,283	1,099	1,126	1,060	1,253
	<i>75</i>	<i>292</i>	<i>137</i>	<i>114</i>	<i>114</i>	<i>356</i>

Source: Medicare Current Beneficiary Survey, CY1999 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables. Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 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 beneficiaries who resided only in a long-term care facility during the year.
- 2 Expenditures for beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but are included in the total. See entry for *personal health care expenditures* in Appendix B for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.11 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Physician/Supplier Service in 1999¹

1 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			Both Types of Private Insurance
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per User	\$2,286	\$1,519	\$2,561	\$2,400	\$2,319	\$2,305
	<i>38</i>	<i>84</i>	<i>116</i>	<i>81</i>	<i>75</i>	<i>150</i>
Medicare Status³						
Aged						
65 - 74 years	2,050	1,481	2,503	2,121	2,074	1,996
	<i>59</i>	<i>155</i>	<i>197</i>	<i>141</i>	<i>89</i>	<i>236</i>
75 - 84 years	2,580	1,533	2,826	2,597	2,666	2,557
	<i>59</i>	<i>169</i>	<i>185</i>	<i>107</i>	<i>129</i>	<i>218</i>
85 years and older	2,708	1,914	2,760	2,756	2,639	3,276
	<i>86</i>	<i>354</i>	<i>172</i>	<i>173</i>	<i>176</i>	<i>455</i>
Disabled						
Under 45 years	1,886	1,948	1,930	2,968*	1,631	711*
	<i>113</i>	<i>427</i>	<i>137</i>	<i>870</i>	<i>207</i>	<i>456</i>
45 - 64 years	2,298	1,328	2,780	2,541	2,498	2,844*
	<i>167</i>	<i>222</i>	<i>364</i>	<i>690</i>	<i>375</i>	<i>536</i>
Gender						
Male	2,371	1,378	2,511	2,630	2,488	2,562
	<i>59</i>	<i>97</i>	<i>227</i>	<i>141</i>	<i>126</i>	<i>295</i>
Female	2,219	1,702	2,588	2,247	2,165	2,114
	<i>39</i>	<i>139</i>	<i>114</i>	<i>78</i>	<i>81</i>	<i>151</i>
Living Arrangement						
Alone	2,317	1,562	2,602	2,403	2,287	2,429
	<i>62</i>	<i>174</i>	<i>184</i>	<i>135</i>	<i>127</i>	<i>195</i>
With spouse	2,261	1,560	2,329	2,356	2,349	2,213
	<i>52</i>	<i>123</i>	<i>237</i>	<i>113</i>	<i>94</i>	<i>226</i>
With children	2,468	1,572	2,937	2,611	2,553	2,481*
	<i>96</i>	<i>259</i>	<i>239</i>	<i>231</i>	<i>228</i>	<i>565</i>
With others	2,113	1,272	2,314	2,530	1,724	2,623*
	<i>118</i>	<i>247</i>	<i>256</i>	<i>299</i>	<i>204</i>	<i>782</i>

Table 4.11 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Physician/Supplier Service in 1999¹

2 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per User	\$2,286	\$1,519	\$2,561	\$2,400	\$2,319	\$2,305
	38	84	116	81	75	150
Race/Ethnicity						
White non-Hispanic	2,284	1,499	2,439	2,408	2,354	2,234
	42	104	123	85	81	161
Black non-Hispanic	2,463	1,717	3,092	2,123	2,105	3,322*
	156	201	385	522	211	914
Hispanic	2,320	1,335	2,684	2,354	2,244	3,076*
	126	229	244	332	313	1,671
Other	1,908	1,638*	1,645	2,316	1,887	4,525*
	141	488	216	465	268	2,190
Income						
Less than \$2,500	2,394	1,162*	2,814	2,827*	1,952*	6,779*
	333	342	1,055	527	371	3,832
\$2,500 - \$4,999	1,923	889*	1,951	1,716*	2,589*	567*
	202	186	385	427	574	0
\$5,000 - \$7,499	2,175	1,151	2,350	2,278	2,051*	423*
	121	250	170	308	346	148
\$7,500 - \$9,999	2,358	1,549	2,723	2,434	2,168	2,397*
	111	219	199	279	344	1,063
\$10,000 - \$14,999	2,309	1,477	3,073	2,402	2,206	1,802
	99	168	395	185	216	244
\$15,000 - \$19,999	2,238	1,481	2,615	2,293	2,316	2,232*
	92	207	473	192	157	315
\$20,000 - \$24,999	2,300	2,010	2,747*	2,322	2,381	2,652
	99	460	634	241	177	472
\$25,000 - \$29,999	2,379	1,420*	1,360*	2,342	2,477	3,021
	149	388	501	201	254	949
\$30,000 or more	2,284	1,835	2,010*	2,493	2,318	2,213
	61	322	602	164	112	126

Table 4.11 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Physician/Supplier Service in 1999¹

3 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			Both Types of Private Insurance
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	
Expenditures per User	\$2,286	\$1,519	\$2,561	\$2,400	\$2,319	\$2,305
	<i>38</i>	<i>84</i>	<i>116</i>	<i>81</i>	<i>75</i>	<i>150</i>
Health Status						
Excellent	1,490	1,019	1,499	1,489	1,185	1,366
	<i>45</i>	<i>215</i>	<i>196</i>	<i>114</i>	<i>84</i>	<i>162</i>
Very good	1,746	1,185	1,521	1,709	1,708	1,838
	<i>44</i>	<i>197</i>	<i>127</i>	<i>94</i>	<i>90</i>	<i>143</i>
Good	2,200	1,536	1,851	2,280	2,412	2,169
	<i>55</i>	<i>187</i>	<i>152</i>	<i>108</i>	<i>131</i>	<i>174</i>
Fair	2,869	1,647	2,794	3,569	3,054	4,002
	<i>101</i>	<i>176</i>	<i>203</i>	<i>258</i>	<i>145</i>	<i>821</i>
Poor	4,172	1,999	4,465	5,403	4,712	7,328*
	<i>196</i>	<i>293</i>	<i>401</i>	<i>514</i>	<i>509</i>	<i>1,476</i>
Functional Limitation						
None	1,830	1,242	1,709	1,775	1,866	1,763
	<i>41</i>	<i>97</i>	<i>138</i>	<i>68</i>	<i>80</i>	<i>97</i>
IADL only ⁴	2,534	1,318	2,477	2,818	2,773	3,521
	<i>77</i>	<i>133</i>	<i>230</i>	<i>187</i>	<i>161</i>	<i>599</i>
One to two ADLs ⁵	2,991	1,794	3,202	3,829	2,930	2,900
	<i>119</i>	<i>274</i>	<i>264</i>	<i>355</i>	<i>253</i>	<i>345</i>
Three to five ADLs	3,998	3,209	4,149	4,611	4,320	3,742*
	<i>201</i>	<i>532</i>	<i>416</i>	<i>566</i>	<i>408</i>	<i>765</i>

Table 4.11 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Physician/Supplier Service in 1999¹

4 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per User	\$2,286	\$1,519	\$2,561	\$2,400	\$2,319	\$2,305
	<i>38</i>	<i>84</i>	<i>116</i>	<i>81</i>	<i>75</i>	<i>150</i>
Metropolitan Area Resident						
Yes	2,360	1,568	2,652	2,506	2,421	2,439
	<i>45</i>	<i>123</i>	<i>154</i>	<i>110</i>	<i>90</i>	<i>191</i>
No	2,057	1,439	2,310	2,219	1,940	1,917
	<i>72</i>	<i>94</i>	<i>142</i>	<i>121</i>	<i>127</i>	<i>135</i>

Source: Medicare Current Beneficiary Survey, CY 1999 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables. Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 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 beneficiaries who resided only in a long-term care facility during the year.
- 2 Expenditures for beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but are included in the total. See entry for *personal health care expenditures* in Appendix B for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.12 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Prescribed Medicine in 1999¹

1 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per User	\$1,091	\$898	\$1,327	\$978	\$1,301	\$1,296
	16	60	40	27	32	64
Medicare Status³						
Aged						
65 - 74 years	988	743	1,117	927	1,222	1,203
	20	97	58	36	41	79
75 - 84 years	1,079	738	1,096	999	1,316	1,348
	25	56	54	33	56	114
85 years and older	935	579	1,104	896	1,057	1,199*
	26	68	75	41	59	120
Disabled						
Under 45 years	1,514	1,321	1,568	2,643*	1,517	977*
	86	230	110	627	202	647
45 - 64 years	1,613	1,247	1,850	1,668*	1,877	2,726*
	75	113	134	354	176	773
Gender						
Male	1,083	927	1,252	952	1,308	1,202
	24	82	76	41	51	84
Female	1,097	860	1,368	995	1,294	1,364
	17	54	45	28	33	86
Living Arrangement						
Alone	1,036	741	1,362	986	1,122	1,302
	21	61	58	31	42	100
With spouse	1,106	978	1,192	962	1,368	1,314
	23	99	70	39	42	85
With children	1,102	817	1,265	993	1,399	1,295*
	39	84	82	68	86	194
With others	1,206	1,034	1,475	1,093	1,230	954*
	58	138	132	101	151	170

Table 4.12 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Prescribed Medicine in 1999¹

2 of 4

Beneficiary Characteristic	Total ²	Medicare	Supplemental Health Insurance			
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per User	\$1,091	\$898	\$1,327	\$978	\$1,301	\$1,296
	16	60	40	27	32	64
Race/Ethnicity						
White non-Hispanic	1,109	951	1,434	980	1,318	1,294
	18	77	54	29	34	68
Black non-Hispanic	1,071	774	1,272	1,078	1,211	1,685*
	41	93	80	127	91	362
Hispanic	982	773	1,291	860	1,071	881*
	48	160	118	95	113	176
Other	975	941*	885	1,043	1,306	1,364*
	77	155	93	113	189	626
Income						
Less than \$2,500	1,159	710*	1,194	1,005*	1,757*	5,189*
	115	123	194	179	309	3,377
\$2,500 - \$4,999	942	626*	1,049	1,061*	940*	62*
	67	169	138	198	141	0
\$5,000 - \$7,499	1,149	584	1,336	905	1,046*	1,278*
	54	92	74	108	145	299
\$7,500 - \$9,999	1,104	816	1,316	980	1,310	1,780*
	38	106	62	65	131	474
\$10,000 - \$14,999	1,031	940	1,519	1,000	1,090	1,406
	28	106	133	45	60	165
\$15,000 - \$19,999	978	939	1,081	950	1,174	1,034*
	30	105	151	60	63	130
\$20,000 - \$24,999	1,060	1,349	1,390*	930	1,234	1,255
	40	328	302	59	74	118
\$25,000 - \$29,999	1,139	846*	1,914*	895	1,487	1,214
	74	169	347	82	148	169
\$30,000 or more	1,147	957	1,104*	1,011	1,371	1,293
	31	113	296	54	51	88

Table 4.12 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Prescribed Medicine in 1999¹

3 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per User	\$1,091	\$898	\$1,327	\$978	\$1,301	\$1,296
	16	60	40	27	32	64
Health Status						
Excellent	672	614	758	571	764	1,003
	25	131	109	32	42	140
Very good	861	606	968	792	1,060	1,087
	21	60	70	36	43	75
Good	1,088	926	1,100	1,041	1,305	1,336
	24	123	61	43	46	107
Fair	1,399	1,040	1,399	1,238	1,832	1,990
	34	88	59	48	97	247
Poor	1,668	1,071	2,027	1,573	1,894	2,143*
	64	110	142	145	127	377
Functional Limitation						
None	903	736	1,056	850	1,079	1,093
	17	56	56	27	37	59
IADL only ⁴	1,276	929	1,281	1,154	1,720	1,451
	37	83	69	54	101	122
One to two ADLs ⁵	1,336	1,076	1,597	1,197	1,470	1,902
	48	117	109	89	86	307
Three to five ADLs	1,538	1,392	1,736	1,188	1,826	2,058*
	68	340	111	125	127	334

Table 4.12 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Prescribed Medicine in 1999¹

4 of 4

Beneficiary Characteristic	Total ²	Medicare Fee-for-Service Only	Supplemental Health Insurance			
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance
Expenditures per User	\$1,091	\$898	\$1,327	\$978	\$1,301	\$1,296
	<i>16</i>	<i>60</i>	<i>40</i>	<i>27</i>	<i>32</i>	<i>64</i>
Metropolitan Area Resident						
Yes	1,090	936	1,325	1,014	1,294	1,348
	<i>19</i>	<i>66</i>	<i>50</i>	<i>36</i>	<i>39</i>	<i>77</i>
No	1,094	835	1,332	917	1,331	1,140
	<i>29</i>	<i>118</i>	<i>62</i>	<i>33</i>	<i>46</i>	<i>84</i>

Source: Medicare Current Beneficiary Survey, CY 1999 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables. Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 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 beneficiaries who resided only in a long-term care facility during the year.
- 2 Expenditures for beneficiaries enrolled in Medicare HMOs are not shown separately in the table, but are included in the total. See entry for *personal health care expenditures* in Appendix B for additional information.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 4 *IADL* stands for Instrumental Activity of Daily Living.
- 5 *ADL* stands for Activity of Daily Living.

Table 4.13 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Inpatient Hospital Stay in 1999¹

1 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
Expenditures per User	\$11,542	\$9,720	\$109	\$1,206	\$292	\$214
	347	295	10	138	35	32
Medicare Status²						
Aged						
65 - 74 years	12,496	10,465	82	1,405	324	220
	727	564	11	309	73	66
75 - 84 years	10,350	9,276	66	619	218	170
	434	426	15	38	29	46
85 years and older	10,635	9,534	76	794	139	92
	609	562	13	122	22	42
Disabled						
Under 45 years	12,451	7,844	635	2,566	1,024	382
	1,455	942	177	1,008	556	268
45 - 64 years	13,264	9,406	226	2,778	379	475
	1,390	1,171	37	1,017	63	220
Gender						
Male	12,512	10,230	80	1,453	395	352
	525	509	15	196	58	52
Female	10,703	9,279	133	993	203	95
	442	320	14	196	45	32
Marital Status						
Married	11,760	9,742	38	1,477	284	219
	442	404	5	220	34	46
Widowed	10,780	9,432	114	949	217	68
	604	446	18	269	68	22
Divorced/separated	11,859	9,870	268	740	408	574
	1,207	1,118	38	234	88	229
Never married	13,890	11,103	415	1,261	623	489
	1,539	1,464	105	505	335	245

Table 4.13 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Inpatient Hospital Stay in 1999¹

2 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
Expenditures per User	\$11,542	\$9,720	\$109	\$1,206	\$292	\$214
	347	295	10	138	35	32
Race/Ethnicity						
White non-Hispanic	11,535	9,654	71	1,309	288	212
	366	305	10	162	42	36
Black non-Hispanic	13,145	11,543	306	640	399	257
	1,180	1,177	49	190	90	103
Hispanic	9,767	8,478	240	745	210	94
	1,375	1,262	48	254	80	39
Other	10,461	8,167	199	1,525	154	417
	1,799	1,448	45	1,227	57	213
Income						
Less than \$2,500	10,074	9,044	267	497	113	154
	2,113	2,067	119	185	38	100
\$2,500 - \$4,999	11,404*	10,318*	240*	402*	258*	186*
	2,280	2,285	718	3	136	186
\$5,000 - \$7,499	11,553	10,207	546	166	186	448
	1,048	1,078	67	26	41	226
\$7,500 - \$9,999	9,746	8,529	200	697	233	87
	633	602	31	162	40	32
\$10,000 - \$14,999	10,901	9,706	99	571	277	248
	743	705	30	66	53	70
\$15,000 - \$19,999	12,273	10,073	16	1,498	436	249
	885	782	6	452	175	91
\$20,000 - \$24,999	11,445	9,699	5	1,544	180	17
	898	834	5	357	31	8
\$25,000 - \$29,999	17,469	12,859	0	3,676	633	301
	2,906	1,735	0	1,826	368	194
\$30,000 or more	11,160	9,190	8	1,460	283	218
	588	570	3	215	45	64

Table 4.13 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Inpatient Hospital Stay in 1999¹

3 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$11,542	\$9,720	\$109	\$1,206	\$292	\$214
	347	295	10	138	35	32
Health Status						
Excellent	8,892	7,269	85	975	282	281
	992	958	19	277	85	123
Very good	9,736	8,506	28	775	203	224
	602	567	7	136	32	83
Good	10,913	8,872	108	1,480	296	158
	675	417	26	390	79	53
Fair	11,893	10,150	109	1,011	373	250
	643	609	13	159	94	68
Poor	15,074	12,829	198	1,550	265	231
	1,064	963	25	438	55	120
Functional Limitation						
None	10,226	8,747	73	1,064	228	114
	453	412	14	136	27	21
IADL only ³	11,410	8,898	132	1,623	475	283
	832	606	27	448	115	84
One to two ADLs ⁴	12,347	10,790	122	1,052	199	185
	804	670	14	281	35	74
Three to five ADLs	14,356	12,628	141	966	229	393
	1,143	1,164	20	231	39	160

Table 4.13 Inpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Inpatient Hospital Stay in 1999¹

4 of 4

Beneficiary Characteristic	Source of Payment					
	Total	Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$11,542	\$9,720	\$109	\$1,206	\$292	\$214
	<i>347</i>	<i>295</i>	<i>10</i>	<i>138</i>	<i>35</i>	<i>32</i>
Metropolitan Area Resident						
Yes	11,614	9,697	112	1,307	292	206
	<i>429</i>	<i>362</i>	<i>13</i>	<i>177</i>	<i>46</i>	<i>31</i>
No	11,325	9,788	98	907	293	238
	<i>551</i>	<i>542</i>	<i>14</i>	<i>143</i>	<i>38</i>	<i>86</i>

Source: Medicare Current Beneficiary Survey, CY 1999 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables. Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 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 beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.

Table 4.14 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Outpatient Hospital Visit in 1999¹

1 of 4

Beneficiary Characteristic	Source of Payment					
	Total	Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
Expenditures per User	\$1,187	\$656	\$34	\$347	\$126	\$24
	55	32	4	36	11	3
Medicare Status²						
Aged						
65 - 74 years	1,150	589	26	379	130	26
	90	36	4	71	18	5
75 - 84 years	1,012	597	15	296	90	13
	47	29	2	19	7	3
85 years and older	939	574	19	247	88	12
	69	49	3	23	11	5
Disabled						
Under 45 years	1,948	1,000	174	532	164	78
	336	163	25	279	22	23
45 - 64 years	1,818	1,077	92	369	240	41
	257	190	29	98	50	10
Gender						
Male	1,409	750	29	430	164	36
	106	50	5	78	18	4
Female	1,021	585	38	284	98	15
	50	34	5	26	12	4
Marital Status						
Married	1,235	606	12	458	135	24
	79	34	2	66	17	4
Widowed	973	601	35	229	98	10
	41	31	6	11	9	3
Divorced/separated	1,441	909	108	209	153	63
	212	171	30	38	18	14
Never married	1,430	946	107	198	150	30
	230	165	16	37	63	9

Table 4.14 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Outpatient Hospital Visit in 1999¹

2 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
Expenditures per User	\$1,187	\$656	\$34	\$347	\$126	\$24
	55	32	4	36	11	3
Race/Ethnicity						
White non-Hispanic	1,094	561	20	373	121	19
	56	23	3	43	11	3
Black non-Hispanic	1,916	1,313	113	264	175	50
	304	235	31	51	50	14
Hispanic	1,248	837	89	208	79	35
	140	106	15	57	11	16
Other	1,388	831	67	229	203	59
	226	182	13	50	63	31
Income						
Less than \$2,500	2,369	1,450	162	358	353	47
	865	697	134	118	221	23
\$2,500 - \$4,999	763	487	62	114	96	4
	98	70	14	25	30	3
\$5,000 - \$7,499	1,235	853	158	80	117	27
	210	156	22	14	46	9
\$7,500 - \$9,999	1,250	820	101	182	117	29
	103	84	17	28	18	8
\$10,000 - \$14,999	1,141	719	22	217	144	40
	103	77	4	21	17	10
\$15,000 - \$19,999	1,347	593	12	580	134	29
	258	52	3	256	31	8
\$20,000 - \$24,999	1,223	590	1	466	145	20
	152	54	1	109	52	8
\$25,000 - \$29,999	1,158	604	1	418	127	9
	170	73	0	116	33	3
\$30,000 or more	1,059	524	0	419	101	16
	64	26	0	50	11	4

Table 4.14 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Outpatient Hospital Visit in 1999¹

3 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$1,187	\$656	\$34	\$347	\$126	\$24
	<i>55</i>	<i>32</i>	<i>4</i>	<i>36</i>	<i>11</i>	<i>3</i>
Health Status						
Excellent	751	436	13	212	74	16
	<i>50</i>	<i>29</i>	<i>3</i>	<i>22</i>	<i>12</i>	<i>6</i>
Very good	770	427	9	234	90	10
	<i>35</i>	<i>16</i>	<i>2</i>	<i>20</i>	<i>15</i>	<i>2</i>
Good	1,080	570	26	337	120	28
	<i>61</i>	<i>30</i>	<i>4</i>	<i>52</i>	<i>17</i>	<i>5</i>
Fair	1,380	811	52	331	153	33
	<i>98</i>	<i>70</i>	<i>9</i>	<i>27</i>	<i>23</i>	<i>6</i>
Poor	2,671	1,430	113	850	238	40
	<i>389</i>	<i>213</i>	<i>29</i>	<i>305</i>	<i>51</i>	<i>13</i>
Functional Limitation						
None	970	540	18	292	101	19
	<i>56</i>	<i>29</i>	<i>2</i>	<i>31</i>	<i>14</i>	<i>3</i>
IADL only ³	1,248	711	46	341	131	19
	<i>91</i>	<i>68</i>	<i>12</i>	<i>53</i>	<i>12</i>	<i>4</i>
One to two ADLs ⁴	1,702	860	65	565	174	37
	<i>238</i>	<i>98</i>	<i>15</i>	<i>197</i>	<i>35</i>	<i>11</i>
Three to five ADLs	1,548	915	52	326	202	54
	<i>150</i>	<i>109</i>	<i>10</i>	<i>45</i>	<i>39</i>	<i>12</i>

Table 4.14 Outpatient Hospital Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Outpatient Hospital Visit in 1999¹

4 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$1,187	\$656	\$34	\$347	\$126	\$24
	<i>55</i>	<i>32</i>	<i>4</i>	<i>36</i>	<i>11</i>	<i>3</i>
Metropolitan Area Resident						
Yes	1,212	668	38	372	110	24
	<i>70</i>	<i>41</i>	<i>5</i>	<i>49</i>	<i>12</i>	<i>4</i>
No	1,123	622	26	280	169	25
	<i>75</i>	<i>44</i>	<i>4</i>	<i>22</i>	<i>26</i>	<i>4</i>

Source: Medicare Current Beneficiary Survey, CY 1999 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. 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 beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.

Table 4.15 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Physician/Supplier Service in 1999¹

1 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
Expenditures per User	\$2,286	\$1,550	\$43	\$317	\$352	\$24
	<i>38</i>	<i>27</i>	<i>5</i>	<i>9</i>	<i>13</i>	<i>3</i>
Medicare Status²						
Aged						
65 - 74 years	2,050	1,376	35	298	325	17
	<i>59</i>	<i>39</i>	<i>9</i>	<i>12</i>	<i>22</i>	<i>3</i>
75 - 84 years	2,580	1,829	22	352	355	23
	<i>59</i>	<i>43</i>	<i>2</i>	<i>12</i>	<i>16</i>	<i>7</i>
85 years and older	2,708	1,839	32	334	483	19
	<i>86</i>	<i>58</i>	<i>4</i>	<i>29</i>	<i>41</i>	<i>7</i>
Disabled						
Under 45 years	1,886	1,050	207	200	322	107
	<i>113</i>	<i>78</i>	<i>27</i>	<i>39</i>	<i>41</i>	<i>42</i>
45 - 64 years	2,298	1,453	97	334	372	42
	<i>167</i>	<i>130</i>	<i>14</i>	<i>57</i>	<i>30</i>	<i>7</i>
Gender						
Male	2,371	1,613	42	340	343	33
	<i>59</i>	<i>43</i>	<i>9</i>	<i>16</i>	<i>14</i>	<i>4</i>
Female	2,219	1,500	43	300	359	18
	<i>39</i>	<i>27</i>	<i>3</i>	<i>10</i>	<i>19</i>	<i>4</i>
Marital Status						
Married	2,268	1,503	15	373	357	21
	<i>53</i>	<i>34</i>	<i>2</i>	<i>15</i>	<i>20</i>	<i>3</i>
Widowed	2,411	1,681	55	292	365	18
	<i>52</i>	<i>39</i>	<i>14</i>	<i>12</i>	<i>19</i>	<i>4</i>
Divorced/separated	2,092	1,473	94	169	316	40
	<i>103</i>	<i>87</i>	<i>13</i>	<i>16</i>	<i>20</i>	<i>13</i>
Never married	2,164	1,467	133	195	303	65
	<i>138</i>	<i>106</i>	<i>17</i>	<i>28</i>	<i>27</i>	<i>23</i>

Table 4.15 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Physician/Supplier Service in 1999¹

2 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
Expenditures per User	\$2,286	\$1,550	\$43	\$317	\$352	\$24
	<i>38</i>	<i>27</i>	<i>5</i>	<i>9</i>	<i>13</i>	<i>3</i>
Race/Ethnicity						
White non-Hispanic	2,284	1,528	24	348	366	19
	<i>42</i>	<i>28</i>	<i>2</i>	<i>11</i>	<i>16</i>	<i>3</i>
Black non-Hispanic	2,463	1,718	150	192	347	55
	<i>156</i>	<i>115</i>	<i>48</i>	<i>21</i>	<i>47</i>	<i>19</i>
Hispanic	2,320	1,747	118	158	269	29
	<i>126</i>	<i>101</i>	<i>16</i>	<i>18</i>	<i>32</i>	<i>9</i>
Other	1,908	1,318	60	245	226	59
	<i>141</i>	<i>115</i>	<i>9</i>	<i>38</i>	<i>22</i>	<i>30</i>
Income						
Less than \$2,500	2,394	1,665	103	226	356	43
	<i>333</i>	<i>287</i>	<i>40</i>	<i>45</i>	<i>59</i>	<i>14</i>
\$2,500 - \$4,999	1,923	1,289	92	177	354	12
	<i>202</i>	<i>127</i>	<i>16</i>	<i>33</i>	<i>116</i>	<i>3</i>
\$5,000 - \$7,499	2,175	1,552	196	113	263	52
	<i>121</i>	<i>98</i>	<i>14</i>	<i>22</i>	<i>24</i>	<i>20</i>
\$7,500 - \$9,999	2,358	1,723	109	183	306	38
	<i>111</i>	<i>92</i>	<i>12</i>	<i>17</i>	<i>20</i>	<i>13</i>
\$10,000 - \$14,999	2,309	1,585	54	236	412	22
	<i>99</i>	<i>65</i>	<i>24</i>	<i>14</i>	<i>49</i>	<i>4</i>
\$15,000 - \$19,999	2,238	1,533	8	333	340	24
	<i>92</i>	<i>67</i>	<i>2</i>	<i>25</i>	<i>29</i>	<i>6</i>
\$20,000 - \$24,999	2,300	1,626	2	351	303	19
	<i>99</i>	<i>76</i>	<i>1</i>	<i>25</i>	<i>16</i>	<i>5</i>
\$25,000 - \$29,999	2,379	1,506	3	440	402	28
	<i>149</i>	<i>78</i>	<i>1</i>	<i>76</i>	<i>66</i>	<i>15</i>
\$30,000 or more	2,284	1,468	2	431	369	15
	<i>61</i>	<i>40</i>	<i>1</i>	<i>19</i>	<i>15</i>	<i>3</i>

Table 4.15 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Physician/Supplier Service in 1999¹

3 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$2,286	\$1,550	\$43	\$317	\$352	\$24
	38	27	5	9	13	3
Health Status						
Excellent	1,490	1,015	13	189	261	11
	45	30	3	11	19	4
Very good	1,746	1,174	10	259	287	16
	44	31	1	13	15	4
Good	2,200	1,493	43	324	314	26
	55	41	13	20	13	5
Fair	2,869	1,920	60	368	488	32
	101	71	6	18	51	6
Poor	4,172	2,888	150	557	527	50
	196	149	19	55	36	16
Functional Limitation						
None	1,830	1,269	18	260	266	17
	41	29	2	8	15	3
IADL only ³	2,534	1,684	73	370	377	30
	77	58	20	29	25	7
One to two ADLs ⁴	2,991	2,014	70	392	490	25
	119	90	8	31	33	4
Three to five ADLs	3,998	2,595	104	497	732	71
	201	148	15	56	66	23

Table 4.15 Physician/Supplier Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Physician/Supplier Service in 1999¹

4 of 4

Beneficiary Characteristic	Source of Payment					
	Total	Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$2,286	\$1,550	\$43	\$317	\$352	\$24
	<i>38</i>	<i>27</i>	<i>5</i>	<i>9</i>	<i>13</i>	<i>3</i>
Metropolitan Area Resident						
Yes	2,360	1,642	44	320	332	21
	<i>45</i>	<i>35</i>	<i>6</i>	<i>12</i>	<i>12</i>	<i>3</i>
No	2,057	1,260	40	309	413	36
	<i>72</i>	<i>42</i>	<i>5</i>	<i>12</i>	<i>38</i>	<i>7</i>

Source: Medicare Current Beneficiary Survey, CY 1999 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. 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 beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.

Table 4.16 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Dental Service in 1999¹

1 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
Expenditures per User	\$578	\$2	\$7	\$95	\$466	\$9
	16	0	2	6	15	1
Medicare Status²						
Aged						
65 - 74 years	606	2	2	106	489	8
	26	0	0	8	23	2
75 - 84 years	552	2	3	78	461	8
	27	0	1	8	24	2
85 years and older	479	2	1	48	422	6
	41	0	1	9	37	3
Disabled						
Under 45 years	455	1	32	98	304	20
	56	0	8	23	41	7
45 - 64 years	629	1	48	129	435	16
	62	0	21	39	44	6
Gender						
Male	596	2	9	101	469	15
	21	0	4	10	19	3
Female	565	2	5	90	464	5
	20	0	1	8	18	1
Marital Status						
Married	606	2	2	100	493	9
	21	0	1	6	19	2
Widowed	532	2	4	71	448	6
	29	0	1	10	27	2
Divorced/separated	575	2	12	125	430	7
	63	0	4	31	46	3
Never married	504	2	45	104	331	22
	64	1	24	39	38	7

Table 4.16 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Dental Service in 1999¹

2 of 4

Beneficiary Characteristic	Total	Source of Payment				Other Source
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	
Expenditures per User	\$578	\$2	\$7	\$95	\$466	\$9
	16	0	2	6	15	1
Race/Ethnicity						
White non-Hispanic	584	2	2	99	474	7
	17	0	1	6	15	1
Black non-Hispanic	510	2	46	57	385	20
	91	0	32	15	84	7
Hispanic	525	3	34	74	389	25
	57	1	11	21	58	13
Other	623	2	14	97	496	14
	93	0	5	23	92	8
Income						
Less than \$2,500	641	3	1	81	527	29
	143	1	0	71	126	14
\$2,500 - \$4,999	495	2	38	36	373	46
	105	1	18	15	106	24
\$5,000 - \$7,499	462	1	93	33	321	14
	59	0	41	12	41	11
\$7,500 - \$9,999	351	2	25	26	283	16
	34	0	6	8	32	8
\$10,000 - \$14,999	456	2	3	54	387	9
	40	0	1	10	37	3
\$15,000 - \$19,999	468	2	0	86	370	10
	41	0	0	18	31	7
\$20,000 - \$24,999	581	2	1	92	481	4
	59	0	1	25	56	2
\$25,000 - \$29,999	564	1	2	98	462	1
	49	0	2	16	43	0
\$30,000 or more	686	2	0	127	549	8
	25	0	0	9	23	2

Table 4.16 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Dental Service in 1999¹

3 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
Expenditures per User	\$578	\$2	\$7	\$95	\$466	\$9
	16	0	2	6	15	1
Health Status						
Excellent	543	2	2	103	429	6
	31	0	1	12	28	2
Very good	587	2	1	95	482	8
	27	0	1	11	24	2
Good	595	2	6	93	487	7
	39	0	2	10	35	3
Fair	561	1	10	87	451	12
	45	0	3	14	39	3
Poor	601	2	46	109	421	24
	60	0	28	26	42	7
Functional Limitation						
None	606	2	6	102	488	7
	24	0	3	7	21	2
IADL only ³	523	2	5	84	420	12
	30	0	1	10	27	4
One to two ADLs ⁴	560	2	9	83	453	11
	47	1	3	15	41	4
Three to five ADLs	469	2	16	67	370	15
	52	0	12	15	48	7

Table 4.16 Dental Services Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Dental Service in 1999¹

4 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
Expenditures per User	\$578	\$2	\$7	\$95	\$466	\$9
	<i>16</i>	<i>0</i>	<i>2</i>	<i>6</i>	<i>15</i>	<i>1</i>
Metropolitan Area Resident						
Yes	612	2	7	100	493	9
	<i>19</i>	<i>0</i>	<i>2</i>	<i>7</i>	<i>18</i>	<i>2</i>
No	454	1	3	75	364	10
	<i>27</i>	<i>0</i>	<i>1</i>	<i>11</i>	<i>20</i>	<i>3</i>

Source: Medicare Current Beneficiary Survey, CY 1999 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. 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 beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.

Table 4.17 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Prescribed Medicine in 1999¹

1 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
Expenditures per User	\$1,091	\$47	\$130	\$376	\$439	\$98
	16	1	6	10	9	7
Medicare Status²						
Aged						
65 - 74 years	988	44	80	385	401	78
	20	2	7	14	12	12
75 - 84 years	1,079	56	65	383	495	81
	25	3	7	20	14	9
85 years and older	935	56	98	240	470	71
	26	4	13	17	17	16
Disabled						
Under 45 years	1,514	17	724	284	317	172
	86	7	71	46	28	35
45 - 64 years	1,613	36	394	462	469	252
	75	5	41	49	25	34
Gender						
Male	1,083	48	99	391	406	139
	24	2	9	15	12	14
Female	1,097	46	154	363	465	67
	17	2	9	12	10	4
Marital Status						
Married	1,106	46	42	469	450	98
	22	2	4	17	11	12
Widowed	1,033	51	142	294	470	76
	20	2	12	14	13	6
Divorced/separated	1,136	50	344	224	379	139
	48	5	32	19	23	21
Never married	1,174	29	489	198	307	151
	58	3	54	23	17	25

Table 4.17 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Prescribed Medicine in 1999¹

2 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of- Pocket	Other Source
Expenditures per User	\$1,091	\$47	\$130	\$376	\$439	\$98
	16	1	6	10	9	7
Race/Ethnicity						
White non-Hispanic	1,109	44	87	417	465	96
	18	2	5	12	10	8
Black non-Hispanic	1,071	60	308	250	342	110
	41	6	27	27	16	19
Hispanic	982	66	361	126	334	96
	48	7	45	19	22	19
Other	975	49	212	263	331	121
	77	10	32	44	25	21
Income						
Less than \$2,500	1,159	52	244	304	434	125
	115	11	66	87	45	42
\$2,500 - \$4,999	942	30	331	156	356	68
	67	8	63	31	43	11
\$5,000 - \$7,499	1,149	29	728	56	252	84
	54	3	53	8	14	16
\$7,500 - \$9,999	1,104	51	319	152	427	155
	38	4	26	17	19	23
\$10,000 - \$14,999	1,031	57	104	253	477	140
	28	3	14	17	17	14
\$15,000 - \$19,999	978	59	20	344	469	86
	30	5	6	21	18	11
\$20,000 - \$24,999	1,060	56	11	430	473	90
	40	4	4	31	19	24
\$25,000 - \$29,999	1,139	49	12	571	443	65
	74	4	5	67	20	12
\$30,000 or more	1,147	38	2	574	457	75
	31	2	1	25	14	12

Table 4.17 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Prescribed Medicine in 1999¹

3 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$1,091	\$47	\$130	\$376	\$439	\$98
	16	1	6	10	9	7
Health Status						
Excellent	672	58	33	245	288	49
	25	4	6	17	13	8
Very good	861	49	41	337	367	67
	21	3	5	16	10	8
Good	1,088	46	101	386	449	106
	24	2	9	16	12	14
Fair	1,399	43	218	460	544	134
	34	3	17	27	21	13
Poor	1,668	37	430	454	592	156
	64	5	44	37	25	28
Functional Limitation						
None	903	49	59	338	383	73
	17	2	5	12	10	5
IADL only ³	1,276	47	179	437	499	114
	37	3	17	35	14	12
One to two ADLs ⁴	1,336	46	236	389	513	152
	48	4	25	26	19	24
Three to five ADLs	1,538	34	331	463	561	149
	68	3	37	41	28	48

Table 4.17 Prescription Medicine Expenditures for Noninstitutionalized Medicare Beneficiaries per User, by Source of Payment, and by Demographic, Socioeconomic, and Health Characteristics, 1999

Community-Only Residents with at Least One Prescribed Medicine in 1999¹

4 of 4

Beneficiary Characteristic	Total	Source of Payment				
		Medicare	Medicaid	Private Insurance	Out-of-Pocket	Other Source
Expenditures per User	\$1,091	\$47	\$130	\$376	\$439	\$98
	<i>16</i>	<i>1</i>	<i>6</i>	<i>10</i>	<i>9</i>	<i>7</i>
Metropolitan Area Resident						
Yes	1,090	59	126	391	413	100
	<i>19</i>	<i>2</i>	<i>8</i>	<i>13</i>	<i>9</i>	<i>6</i>
No	1,094	10	143	326	521	94
	<i>29</i>	<i>1</i>	<i>11</i>	<i>18</i>	<i>24</i>	<i>23</i>

Source: Medicare Current Beneficiary Survey, CY 1999 Cost and Use Public Use File.

Notes: Standard errors are shaded and italic. 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 beneficiaries who resided only in a long-term care facility during the year.
- 2 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of *aged* and *disabled*.
- 3 *IADL* stands for Instrumental Activity of Daily Living.
- 4 *ADL* stands for Activity of Daily Living.