

**Table 3.1 Outpatient Hospital User Rates for Non-institutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2011**

Community Residents<sup>1</sup>

Beneficiary Characteristic	Total	Medicare Risk HMO <sup>2</sup>	Supplemental Health Insurance			Medicare Fee-For-Service Only	Other	
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance			Both Types of Private Insurance
Percent of Beneficiaries With at Least One Outpatient Hospital Stay								
All Beneficiaries	38.18	32.58	38.63	43.71	39.05	47.27	38.81	38.03*
	0.63	1.04	1.31	1.31	1.15	2.98	1.67	7.04
Medicare Status <sup>3</sup>								
Aged								
65 - 74 years	37.61	31.89	38.51	43.17	38.05	48.94	38.15	38.12*
	0.78	1.52	2.62	1.90	1.63	4.25	2.26	10.62
75 - 84 years	38.73	32.34	37.32	45.68	41.12	41.43	39.54	26.00*
	0.75	1.15	2.58	1.62	1.48	4.62	2.32	6.72
85 years and older	34.63	27.06	33.26	40.04	36.62	50.61*	34.15	11.27*
	1.25	2.06	3.67	2.21	2.44	7.49	3.00	11.22
Disabled								
Under 45 years	34.90	35.71	34.82	50.43*	40.05*	22.26*	30.59	57.88*
	1.32	3.67	1.74	17.72	5.87	22.34	3.47	24.06
45 - 64 years	43.12	40.69	43.02	52.84*	42.07	68.01*	43.40	63.80*
	1.72	2.84	2.81	7.48	4.26	20.22	3.82	20.06
Gender								
Male	36.93	32.01	36.14	41.53	37.50	44.90	38.72	34.32*
	0.82	1.34	2.16	1.70	1.49	4.26	2.08	12.44
Female	39.22	33.02	40.24	45.29	40.47	49.09	38.92	40.26*
	0.75	1.47	1.56	1.74	1.56	4.03	2.09	8.12
Living Arrangement								
Lives alone	37.87	31.47	40.04	45.07	37.04	43.46*	38.73	31.53*
	1.04	1.64	2.29	2.25	2.35	5.78	2.48	10.29
With spouse	39.52	32.85	41.34	43.10	40.64	47.46	42.85	45.11*
	0.78	1.37	3.16	1.55	1.34	3.82	1.85	14.42
With children	36.10	34.54	36.06	45.56	31.67	66.53*	32.70	50.75*
	1.41	2.64	2.50	3.67	3.44	12.25	3.62	11.16
With others	34.05	32.22	36.38	39.78	34.82*	53.69*	27.96	20.37*
	1.64	3.02	2.50	4.72	4.76	15.24	3.99	14.76

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Community Residents<sup>1</sup>

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			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance			Both Types of Private Insurance
Percent of Beneficiaries With at Least One Outpatient Hospital Stay								
All Beneficiaries	38.18	32.58	38.63	43.71	39.05	47.27	38.81	38.03*
	0.63	1.04	1.31	1.31	1.15	2.98	1.67	7.04
Race/Ethnicity								
White non-Hispanic	39.36	33.66	39.91	44.33	40.45	48.03	38.61	25.90*
	0.71	1.27	1.74	1.32	1.20	3.53	1.78	7.82
Black non-Hispanic	34.33	33.26	34.90	36.12*	31.63	38.69*	36.63	46.47*
	1.70	2.82	3.52	7.95	3.88	16.58	3.68	22.47
Hispanic	32.34	26.06	41.35	32.56*	29.45*	20.34*	37.15	74.67*
	2.00	2.76	3.28	6.36	4.41	15.88	5.66	15.60
Other	39.96	37.67	35.52	43.98*	35.64*	63.30*	48.72	74.31*
	2.44	4.10	4.40	7.34	6.02	13.97	5.81	25.66
Income <sup>4</sup>								
Less than \$5,000	30.85	28.92*	31.67	43.42*	25.29*	.	27.27*	76.39*
	2.84	4.91	3.66	11.04	8.58	.	6.91	27.25
\$5,000 - \$9,999	37.07	34.35	38.13	45.57*	45.80*	35.94*	29.78	88.39*
	1.68	2.93	2.00	5.76	8.73	27.20	4.55	12.32
\$10,000 - \$14,999	37.00	33.72	40.07	45.43	29.74*	30.32*	33.90	30.05*
	1.28	2.34	2.40	3.55	4.76	20.39	3.58	11.36
\$15,000 - \$19,999	37.44	30.24	38.90	53.02	38.40	28.08*	36.90	16.69*
	1.46	2.51	4.51	3.17	3.76	18.42	3.46	9.42
\$20,000 - \$24,999	37.97	33.86	39.72*	41.56	37.20	74.82*	39.47	34.88*
	1.54	2.64	5.39	3.27	3.09	11.19	3.54	19.60
\$25,000 - \$29,999	38.05	29.65	52.15*	42.43	42.13	61.35*	36.39	25.48*
	1.65	2.76	9.78	3.21	3.57	11.09	3.95	15.07
\$30,000 - \$39,999	39.25	33.88	54.21*	43.93	38.13	45.13*	41.64	68.68*
	1.36	2.63	10.28	2.94	2.42	6.84	2.94	23.77
\$40,000 - \$49,999	39.69	31.30	21.16*	46.40	39.02	41.46*	48.08	.
	1.36	2.30	20.14	3.33	2.37	7.49	3.54	.
\$50,000 or more	39.46	33.13	52.51*	39.72	40.16	46.50	43.92	.
	1.15	2.34	16.57	2.21	1.69	4.63	3.20	.

**Table 3.1 Outpatient Hospital User Rates for Non-institutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2011**

Community Residents<sup>1</sup>

Beneficiary Characteristic	Total	Medicare Risk HMO <sup>2</sup>	Supplemental Health Insurance			Medicare Fee-For-Service Only	Other	
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance			Both Types of Private Insurance
Percent of Beneficiaries With at Least One Outpatient Hospital Stay								
All Beneficiaries	38.18	32.58	38.63	43.71	39.05	47.27	38.81	38.03*
	0.63	1.04	1.31	1.31	1.15	2.98	1.67	7.04
Health Status								
Excellent	29.45	24.66	29.69*	31.41	30.15	39.70*	31.82	48.15*
	1.09	1.82	4.71	2.05	1.97	6.48	2.95	24.42
Very Good	35.83	31.25	26.03	41.19	38.30	45.23	35.22	26.75*
	0.95	1.66	2.78	2.13	1.76	5.08	2.29	14.84
Good	40.37	34.82	37.42	49.01	42.50	46.72	39.51	33.74*
	1.04	1.46	2.12	2.45	1.97	6.52	2.50	11.55
Fair	43.24	33.77	44.58	53.42	45.56	64.95*	44.13	64.19*
	1.20	2.32	2.11	3.18	2.67	9.61	3.15	13.77
Poor	44.83	43.37	43.80	53.98	42.16	59.89*	46.56	5.06*
	1.85	3.29	3.06	4.62	3.95	15.82	3.95	6.22
Functional Limitation								
None	35.40	30.25	28.71	40.05	37.93	43.33	36.41	45.20*
	0.69	1.36	2.11	1.61	1.22	4.48	1.82	13.64
IADL only	40.58	37.87	41.10	44.70	39.52	44.22*	41.86	19.90*
	1.36	2.53	3.00	2.98	2.75	6.41	3.16	11.42
One to two ADLs	41.54	35.02	41.91	52.77	40.25	59.55*	39.88	43.43*
	1.21	1.79	2.48	2.43	2.59	6.76	2.93	12.03
Three to six ADLs	41.13	33.14	44.56	45.44	43.66	48.77*	42.30	20.17*
	1.42	2.78	2.68	3.14	3.66	11.67	3.54	14.97

**Table 3.1 Outpatient Hospital User Rates for Non-institutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2011**

Community Residents<sup>1</sup>

Beneficiary Characteristic	Total	Medicare Risk HMO <sup>2</sup>	Supplemental Health Insurance			Medicare Fee-For-Service Only	Other	
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance			Both Types of Private Insurance
Percent of Beneficiaries With at Least One Outpatient Hospital Stay								
All Beneficiaries	38.18	32.58	38.63	43.71	39.05	47.27	38.81	38.03*
	0.63	1.04	1.31	1.31	1.15	2.98	1.67	7.04
Metropolitan Area Resident								
Yes	35.48	30.55	36.71	40.59	36.19	45.05	36.65	37.98*
	0.73	1.15	1.60	1.68	1.28	2.91	2.12	8.02
No	47.06	45.91	43.04	50.26	49.50	56.63*	44.14	38.25*
	1.08	2.44	2.12	2.09	2.18	9.73	2.44	16.13

Source: Medicare Current Beneficiary Survey

Note: An \* indicates a sample size of 50 or less. Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community residents* includes beneficiaries who resided in the community at the time of the round 61 interview (fall 2011), and beneficiaries who resided in the community at the time of the round 58 interview (fall 2010) who died prior to the round 61 interview.
- 2 HMO stands for Health Maintenance Organization.
- 3 Medicare beneficiaries with end-stage renal disease (ESRD) are included within the subgroups of "Aged" and "Disabled."
- 4 Income estimates are derived from imputed income data. Standard errors of income estimates may be underestimated as they have not been adjusted to reflect the imputation of missing data.

**Table 3.2 Physician Services User Rates for Non-institutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2011**

Community Residents<sup>1</sup>

Beneficiary Characteristic	Total	Medicare Risk HMO <sup>2</sup>	Supplemental Health Insurance			Medicare Fee-For-Service Only	Other	
			Medicaid	Individually Purchased Private Insurance	Employer Sponsored Private Insurance			Both Types of Private Insurance
Percent of Beneficiaries With at Least One Physician Service								
All Beneficiaries	90.62	92.07	88.66	92.62	93.41	95.88	82.59	83.16
	0.30	0.54	0.74	0.71	0.49	1.16	1.12	6.74
Medicare Status <sup>3</sup>								
Aged								
65 - 74 years	89.76	92.14	88.94	90.64	92.48	96.31	78.00	80.80*
	0.52	0.83	1.76	1.16	0.78	1.57	1.97	7.87
75 - 84 years	92.13	91.37	87.43	95.12	95.04	95.32	86.51	96.81*
	0.44	0.80	1.58	0.69	0.67	2.46	1.60	2.99
85 years and older	92.00	91.46	92.97	93.00	93.27	94.90*	87.31	100.00*
	0.61	1.35	1.82	1.13	1.08	3.64	2.13	0.00
Disabled								
Under 45 years	83.28	85.41	83.33	86.77*	94.27	77.74*	75.98	92.01*
	1.16	3.41	1.20	10.63	2.50	22.34	3.06	10.00
45 - 64 years	91.49	95.22	90.80	98.31*	94.28	100.00*	86.96	58.71*
	0.91	1.31	1.36	1.68	2.20	0.00	2.16	22.82
Gender								
Male	88.95	91.26	85.47	92.26	92.30	94.58	80.17	70.96*
	0.50	0.74	1.43	1.12	0.74	2.17	1.73	15.11
Female	92.01	92.68	90.72	92.88	94.43	96.89	85.50	90.47*
	0.33	0.77	0.89	0.88	0.61	1.43	1.33	4.29
Living Arrangement								
Lives alone	90.84	92.65	88.59	94.16	94.78	90.70	82.17	91.69*
	0.55	1.01	1.41	0.89	1.05	3.04	1.91	5.92
With spouse	91.34	91.96	90.14	91.92	93.27	97.98	84.76	59.91*
	0.38	0.71	1.97	0.95	0.66	1.31	1.24	17.27
With children	89.68	92.85	89.96	90.85	90.23	100.00*	81.55	91.51*
	0.91	1.26	1.87	2.23	1.92	0.00	2.85	8.24
With others	87.03	89.71	86.56	94.01	93.21	96.84*	75.60	100.00*
	1.06	1.49	1.43	2.13	2.64	3.40	3.53	0.00

**Table 3.2 Physician Services User Rates for Non-institutionalized Medicare Beneficiaries, by Insurance Coverage, and by Demographic, Socioeconomic, and Health Characteristics, 2011**

Community Residents<sup>1</sup>

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			Medicaid	Individually Purchased Private Insurance	Employer Sponsored Private Insurance			Both Types of Private Insurance
Percent of Beneficiaries With at Least One Physician Service								
All Beneficiaries	90.62	92.07	88.66	92.62	93.41	95.88	82.59	83.16
	0.30	0.54	0.74	0.71	0.49	1.16	1.12	6.74
Race/Ethnicity								
White non-Hispanic	91.45	92.45	89.58	92.95	93.49	96.94	84.37	90.49
	0.37	0.66	0.94	0.72	0.52	1.05	1.18	4.31
Black non-Hispanic	88.49	91.64	87.20	89.06	96.38	81.45*	77.66	87.13*
	0.91	1.55	1.86	5.36	1.24	10.14	3.05	13.56
Hispanic	87.29	90.85	88.28	87.07	88.39	100.00*	74.90	44.19*
	1.26	1.51	2.41	4.33	3.85	0.00	3.84	25.60
Other	88.29	91.22	87.54	93.49	92.14	87.76*	77.92	100.00*
	1.51	2.46	2.67	5.01	2.50	9.98	5.14	0.00
Income <sup>4</sup>								
Less than \$5,000	85.06	85.00	84.87	93.74*	90.24*	100.00*	79.11	100.00*
	2.03	4.11	2.64	6.30	5.42	0.00	7.06	0.00
\$5,000 - \$9,999	87.56	90.78	87.68	95.41	97.62*	63.48*	76.69	47.69*
	0.87	1.44	1.04	2.01	2.42	27.46	3.56	31.24
\$10,000 - \$14,999	90.47	93.04	91.69	90.23	94.90	86.60*	82.81	89.18*
	0.73	1.23	1.03	1.94	1.77	14.28	2.34	7.27
\$15,000 - \$19,999	88.17	91.73	84.47	92.52	89.52	100.00*	78.86	81.24*
	1.03	1.38	3.38	1.79	2.36	0.00	3.25	11.75
\$20,000 - \$24,999	90.14	92.34	93.01	89.94	94.30	94.08*	79.47	100.00*
	1.03	1.54	2.62	2.59	1.43	6.04	3.39	0.00
\$25,000 - \$29,999	91.05	95.16	83.49*	89.36	94.90	94.63*	82.25	80.15*
	0.98	1.29	9.60	1.86	1.67	5.46	3.03	14.67
\$30,000 - \$39,999	93.36	93.68	100.00*	96.88	92.97	98.47	87.40	100.00*
	0.83	1.20	0.00	0.80	1.24	1.46	3.08	0.00
\$40,000 - \$49,999	92.71	94.46	82.36*	95.34	93.81	95.20*	82.76	100.00*
	1.04	1.03	14.79	1.50	1.44	3.87	3.79	0.00
\$50,000 or more	91.32	88.74	95.31*	91.65	93.27	96.29	86.00	29.49*
	0.61	1.45	5.35	1.55	0.82	1.86	2.31	28.91

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			Medicaid	Individually Purchased Private Insurance	Employer Sponsored Private Insurance			Both Types of Private Insurance
Percent of Beneficiaries With at Least One Physician Service								
All Beneficiaries	90.62	92.07	88.66	92.62	93.41	95.88	82.59	83.16
	0.30	0.54	0.74	0.71	0.49	1.16	1.12	6.74
Health Status								
Excellent	84.29	87.83	70.56	85.95	88.30	95.62*	71.57	42.35*
	0.89	1.54	4.48	1.52	1.49	2.85	3.05	24.60
Very Good	89.70	90.13	80.16	92.78	93.42	96.26	79.79	93.72*
	0.66	1.03	2.81	1.35	0.93	2.04	2.50	5.90
Good	92.37	94.43	90.31	94.64	94.80	94.29	83.33	94.16*
	0.48	0.78	1.31	0.84	0.74	2.66	1.79	4.26
Fair	93.56	94.45	91.86	96.28	96.84	97.26*	90.21	60.83*
	0.59	0.91	1.09	0.99	0.71	2.78	1.63	19.36
Poor	93.30	93.13	92.94	96.70	96.12	100.00*	89.35	100.00*
	0.80	1.73	1.61	1.68	1.52	0.00	2.33	0.00
Functional Limitation								
None	88.46	90.91	82.10	90.59	91.61	95.20	77.05	69.77*
	0.50	0.82	1.78	0.92	0.70	1.85	1.84	13.11
IADL only	92.03	94.11	89.10	95.41	95.99	97.09*	83.06	87.05*
	0.70	1.09	1.32	1.30	1.33	2.17	2.72	9.56
One to two ADLs	93.35	93.81	91.80	95.50	96.32	98.40	88.08	94.81*
	0.44	0.93	1.43	0.94	0.68	1.22	1.44	3.63
Three to six ADLs	93.16	91.98	91.87	94.99	95.57	92.42*	92.99	100.00*
	0.56	1.38	1.34	1.40	1.33	5.32	1.20	0.00

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Percent of Beneficiaries With at Least One Physician Service								
All Beneficiaries	90.62	92.07	88.66	92.62	93.41	95.88	82.59	83.16
	0.30	0.54	0.74	0.71	0.49	1.16	1.12	6.74
Metropolitan Area Resident								
Yes	90.46	91.90	87.77	92.58	93.41	95.06	81.85	81.64
	0.37	0.60	0.98	0.93	0.60	1.41	1.36	7.96
No	91.14	93.15	90.69	92.71	93.42	99.38	84.42	89.58*
	0.41	1.02	1.06	1.05	0.79	0.66	1.92	7.98

Source: Medicare Current Beneficiary Survey

Note: An \* indicates a sample size of 50 or less. Standard errors are shaded and in italics. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

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