

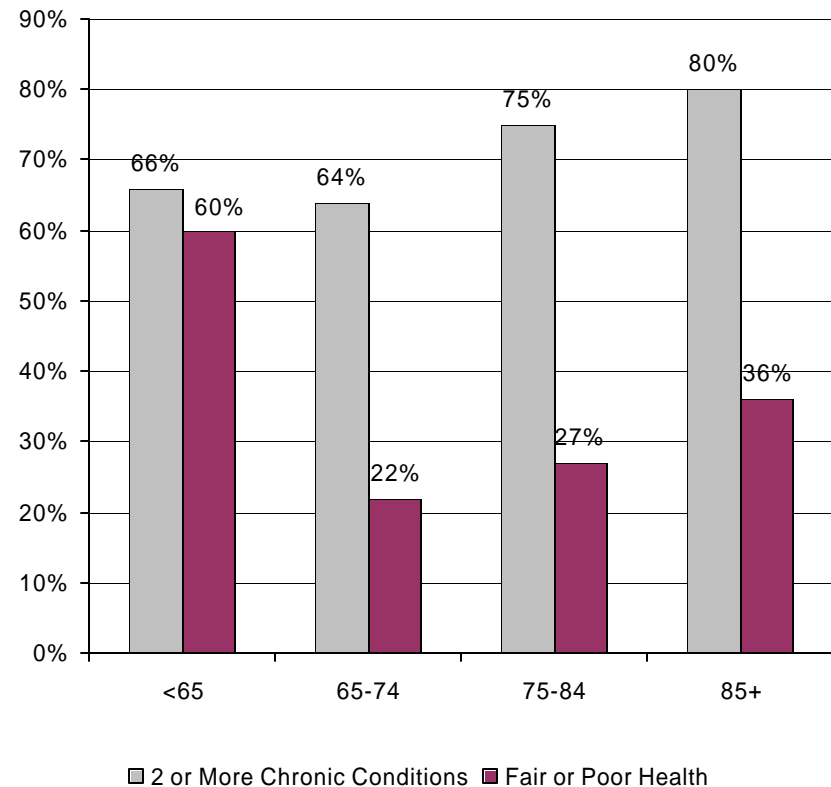
# Section 2

## Health Status

### Health Status, By Age

- Sixty percent of disabled beneficiaries considered their health fair or poor, while only 22 percent of those aged 65 to 74 classified their health as fair or poor. The percentage of aged beneficiaries who reported their health as fair or poor increased with age.
- Eighty percent of beneficiaries aged 85 or older reported some type of functional limitation. Sixty-eight percent of those over age 84 could not perform one or more ADL(s).
- As age increased, the percentage of aged beneficiaries with two or more chronic conditions also increased. Beneficiaries over age 84 were more likely to have Parkinson's Disease, Alzheimer's Disease, stroke, osteoporosis or a broken hip. Cancer rates were highest for beneficiaries in the 75 to 84 age group. Disabled beneficiaries had higher than average rates of diabetes and Pulmonary disease.
- Sixty-three percent of beneficiaries over age 84 said they had never smoked. The percentage of beneficiaries who have never smoked increased significantly in the higher age groups.
- Overall, beneficiaries over age 74 were the most likely to receive flu or pneumonia shots.

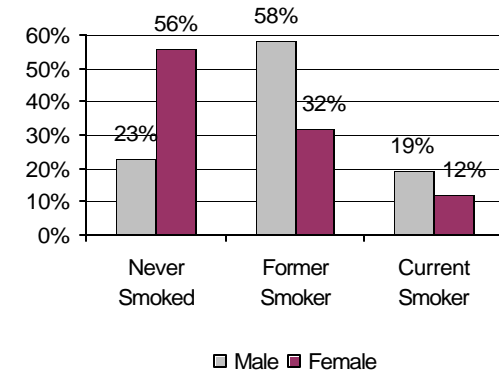
**Beneficiaries with Two or More Chronic Conditions and Fair or Poor Health, By Age**



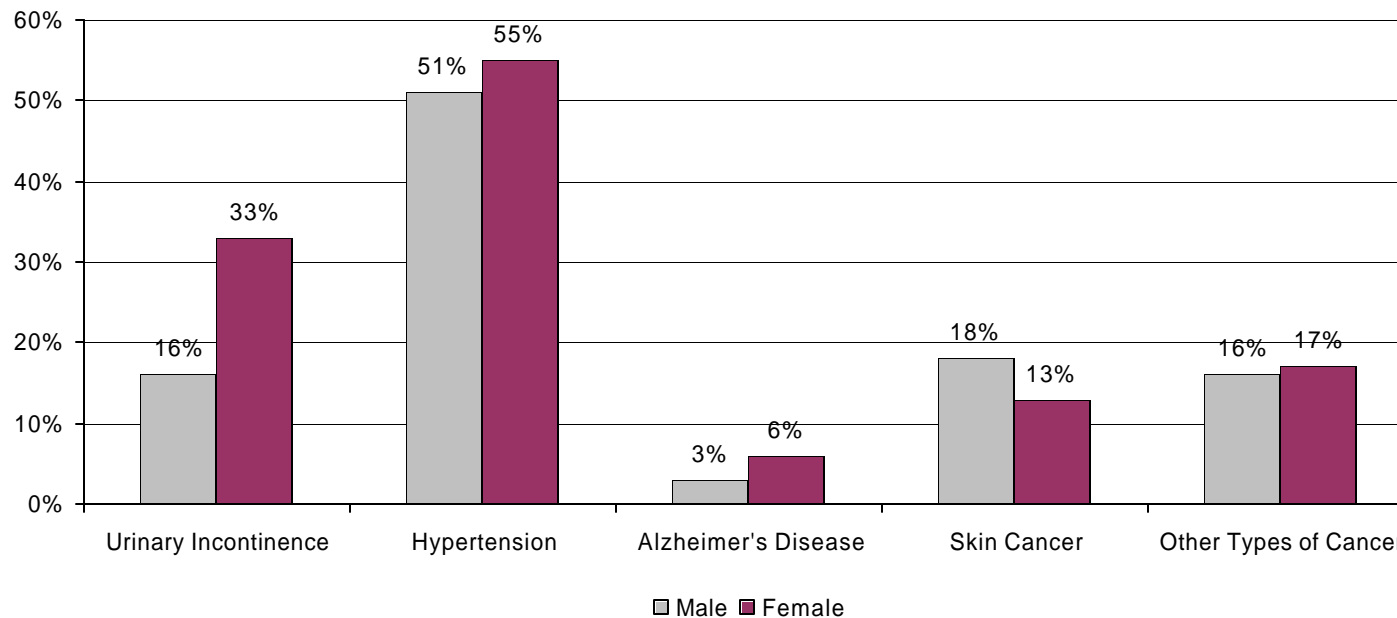
### Health Status, By Gender

- Male beneficiaries had higher rates of Pulmonary Disease and skin cancer. Female beneficiaries had a higher incidence of osteoporosis and broken hip (23 percent of all females as compared to six percent of all males), Alzheimer's Disease, urinary incontinence, arthritis, hypertension, and cancer (excluding skin cancer).
- Forty-four percent of female beneficiaries over age 84 reported they could not perform three to six ADLs compared to only 31 percent of men in that age group.
- Seventy-four percent of female beneficiaries compared to 65 percent of male beneficiaries had two or more chronic conditions.
- A large portion of female beneficiaries never smoked while most male beneficiaries were former or current smokers.

### Smoking, By Gender

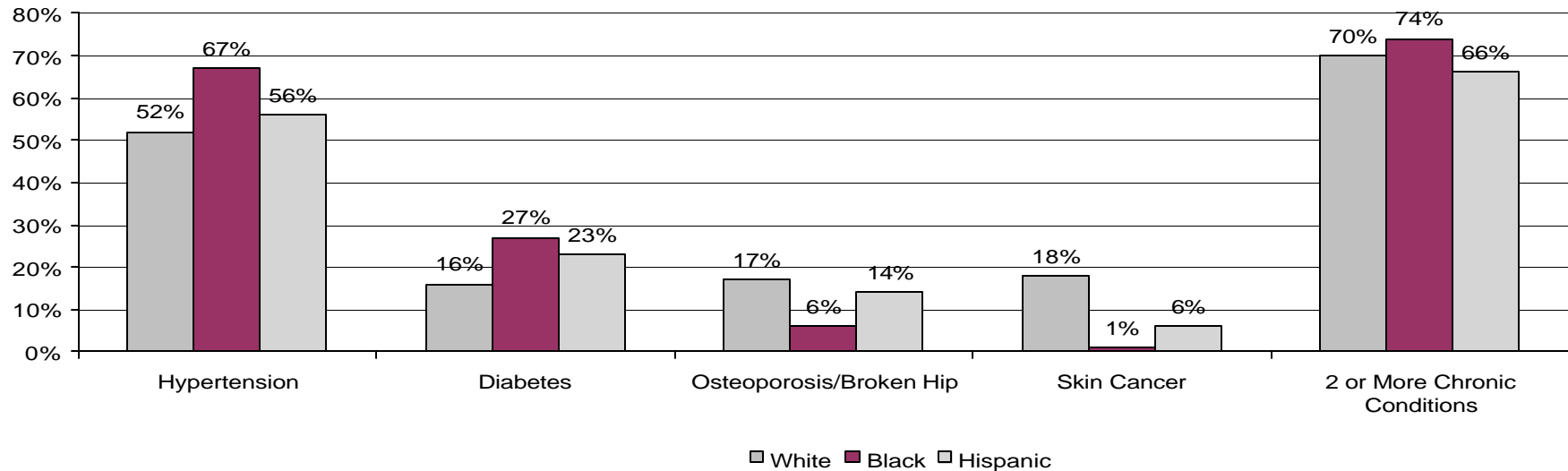


### Diseases/Conditions, By Gender



## Health Status, By Race and Ethnicity

### Diseases/Conditions, By Race and Ethnicity

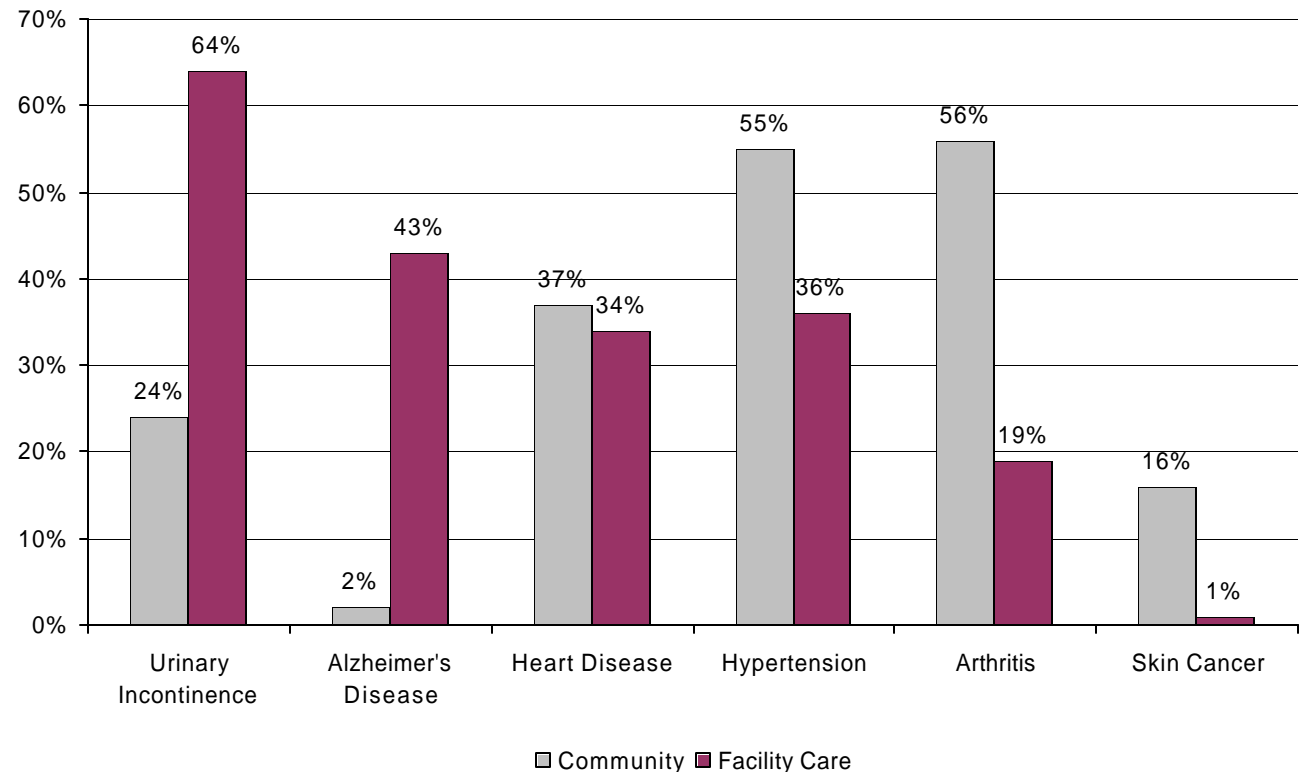


- Forty-one percent of white beneficiaries compared to only 29 percent of Hispanic and 26 percent of black beneficiaries considered their health very good or excellent.
- A higher percentage of black beneficiaries had two or more chronic conditions than Hispanic or white beneficiaries. Black and Hispanic beneficiaries had a higher incidence of hypertension and diabetes than white beneficiaries, but had lower rates of osteoporosis, broken hip, and skin cancer.
- Black beneficiaries were more likely than Hispanic or white beneficiaries to have one or more functional limitation(s).
- A larger percentage of black beneficiaries currently smoked (21 percent) than Hispanic or white beneficiaries (13 and 14 percent respectively). Hispanic beneficiaries were the most likely to have never smoked.

## Health Status, By Residence

- Although most beneficiaries in the community reported their health status as good, this varied by living arrangement. A greater percentage of beneficiaries in excellent health lived with a spouse, while a greater percentage of beneficiaries in poor health lived with children or others. Sixty percent of beneficiaries living in facility care were reportedly in fair or poor health.
- All beneficiaries in facilities had functional limitation and were unable to perform one or more ADL(s). In the community about 64 percent of those that lived with children or others had a functional limitation. In comparison, functional limitations were reported by only 48 percent of those who lived alone and 39 percent of those who lived with a spouse.

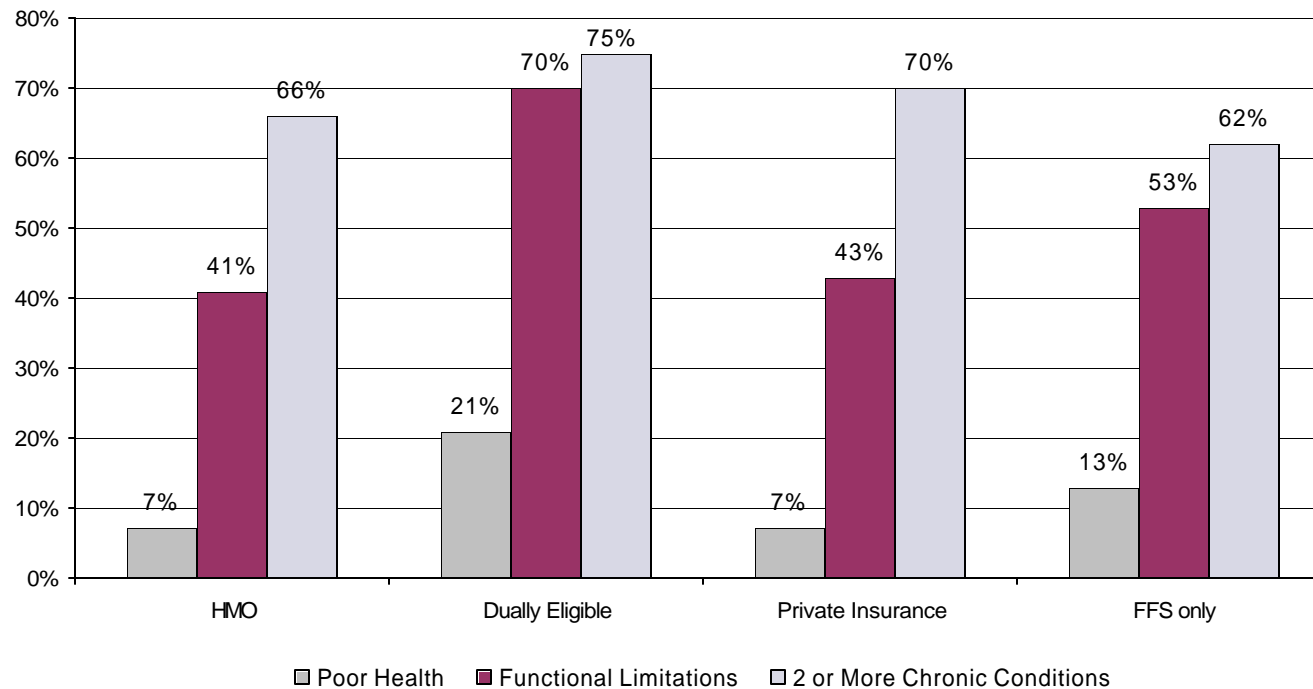
Diseases/Conditions, By Residence



- Seventy-three percent of beneficiaries in facilities had two or more chronic conditions compared to only 64 percent of beneficiaries living in the community.
- Beneficiaries in facility care had much higher rates of urinary incontinence and Alzheimer's Disease. Beneficiaries in the community had higher rates of hypertension, arthritis, and skin cancer.

## Health Status, By Insurance Type

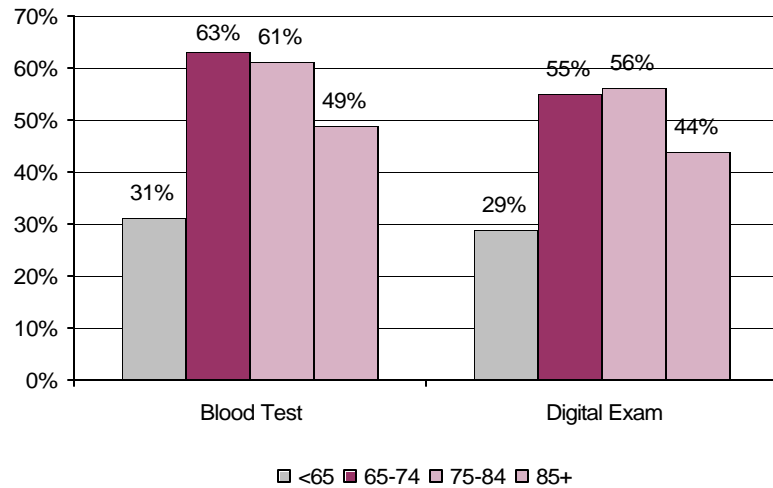
### Beneficiaries in Poor Health, with Functional Limitations, Two or More Chronic Condition/Diseases, By Insurance Type



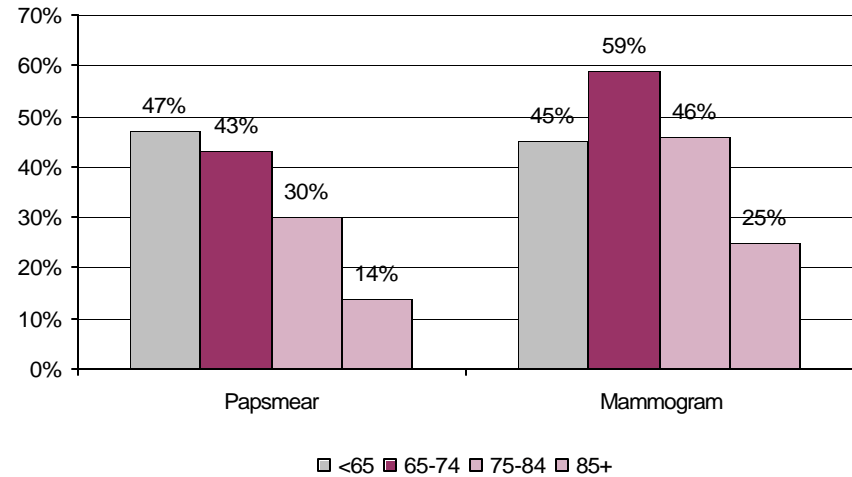
- Dually eligible beneficiaries were much more likely than other community beneficiaries to be in poor health, have some type of limitation, and have more than one chronic condition.
- Beneficiaries in Medicare HMOs or those with private insurance were less likely to be in poor health or have functional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

## Preventive Services, By Gender and Age

**Male Beneficiaries That Had a Blood Test or Digital Exam for Prostate Cancer, By Age**



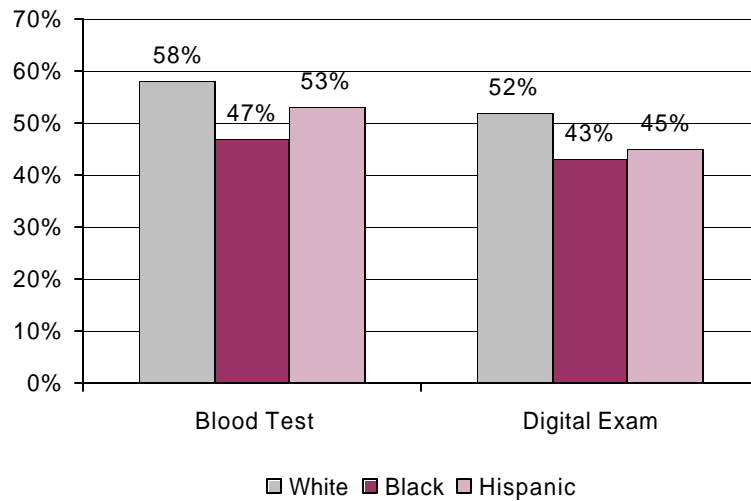
**Female Beneficiaries That Had a Papsmear or Mammogram, By Age**



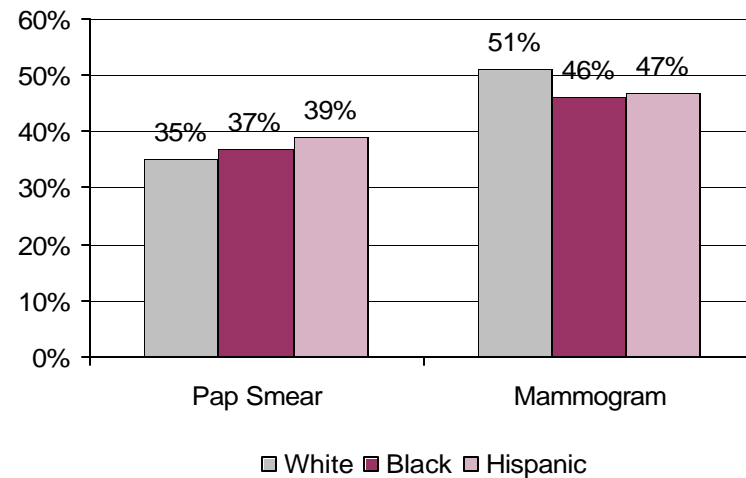
- Fifty-six percent of male beneficiaries had a blood test and half of male beneficiaries had a digital exam.
- Disabled male beneficiaries and those over age 84 were the least likely to have a blood test or digital exam.
- Male beneficiaries aged 65 to 74 were more than twice as likely as other male beneficiaries to have a blood test.
- Thirty-six percent of female beneficiaries had a papsmear and half of female beneficiaries had a mammogram.
- Female beneficiaries aged 65 to 74 were the most likely to have a mammogram.
- Female beneficiaries over age 84 were the least likely to have either a papsmear or a mammogram.
- Female beneficiaries aged 65 to 74 were three times more likely to have a papsmear and more than twice as likely to have a mammogram than beneficiaries aged 85 or older.

## Preventive Services, By Gender and Race and Ethnicity

**Male Beneficiaries That Had a Blood Test or Digital Exam for Prostate Cancer, By Race and Ethnicity**



**Female Beneficiaries That Had a Pap Smear or Mammogram, By Race and Ethnicity**



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