

**Table 5.1 Indicators of Access to Care for Non-institutionalized Medicare Beneficiaries, by Age and by Gender and Age, 2003**

Community-Only Residents<sup>1</sup>

Indicator of Access to Care	Total	All Medicare Beneficiaries				Male				Total	Female				Total
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
<b>Beneficiaries (in 000s)</b>	40,125	5,806	17,961	12,372	3,985	3,071	8,206	5,268	1,357	17,902	2,735	9,755	7,103	2,629	22,223
	120	109	128	106	77	77	112	84	39	138	73	118	83	65	141
<b>Beneficiaries as a Percent of Column Total</b>															
<b>Usual Source of Care</b>															
None <sup>2</sup>	4.65	6.25	5.23	3.45	3.49	7.92	6.77	3.23	3.54*	5.68	4.38	3.93	3.61	3.46*	3.83
	0.18	0.61	0.30	0.27	0.39	0.71	0.54	0.37	0.69	0.30	0.78	0.41	0.39	0.46	0.24
Doctor's office	75.75	68.35	75.46	78.27	79.97	62.36	71.52	76.24	79.49	71.95	75.04	78.77	79.77	80.21	78.80
	0.54	1.45	0.78	0.62	0.83	1.89	1.12	0.88	1.41	0.75	1.76	0.96	0.74	1.09	0.59
Doctor's clinic	9.57	12.47	10.06	8.22	7.35	12.95	9.91	7.78	7.00	9.59	11.93	10.18	8.54	7.52	9.56
	0.49	1.03	0.60	0.53	0.67	1.31	0.87	0.72	0.94	0.61	1.24	0.71	0.63	0.72	0.52
HMO <sup>3</sup>	4.18	2.56	4.39	4.68	4.09	2.20*	4.25	4.86	3.13*	3.99	2.97*	4.50	4.55	4.59	4.34
	0.28	0.37	0.42	0.31	0.48	0.50	0.54	0.53	0.80	0.34	0.56	0.51	0.36	0.54	0.28
Hospital OPD/ER <sup>4</sup>	1.93	4.05	1.62	1.58	1.33*	5.04	1.67*	1.53*	1.46*	2.19	2.93*	1.59	1.62*	1.26*	1.72
	0.15	0.50	0.24	0.19	0.25	0.64	0.37	0.29	0.40	0.25	0.75	0.22	0.24	0.31	0.16
Other clinic/health center	3.92	6.32	3.24	3.81	3.79	9.52	5.88	6.37	5.38*	6.61	2.74*	1.03*	1.91	2.96*	1.75
	0.19	0.63	0.26	0.34	0.42	0.95	0.53	0.64	0.83	0.37	0.70	0.17	0.34	0.48	0.19
<b>Difficulty Obtaining Care</b>															
Yes	4.91	15.93	3.37	2.88	2.17*	15.41	3.38	2.91	2.58*	5.24	16.51	3.35	2.85	1.95*	4.65
	0.24	1.04	0.30	0.26	0.30	1.30	0.42	0.41	0.55	0.34	1.50	0.37	0.31	0.35	0.27
No	95.09	84.07	96.63	97.12	97.83	84.59	96.62	97.09	97.42	94.76	83.49	96.65	97.15	98.05	95.35
	0.24	1.04	0.30	0.26	0.30	1.30	0.42	0.41	0.55	0.34	1.50	0.37	0.31	0.35	0.27
<b>Delayed Care Due to Cost</b>															
Yes	8.47	24.62	7.09	4.55	3.34	21.60	6.08	3.81	3.54*	7.88	28.01	7.95	5.11	3.24*	8.96
	0.30	1.32	0.40	0.31	0.38	1.53	0.52	0.44	0.60	0.40	1.78	0.58	0.42	0.45	0.37
No	91.53	75.38	92.91	95.45	96.66	78.40	93.92	96.19	96.46	92.12	71.99	92.05	94.89	96.76	91.04
	0.30	1.32	0.40	0.31	0.38	1.53	0.52	0.44	0.60	0.40	1.78	0.58	0.42	0.45	0.37

**Table 5.1 Indicators of Access to Care for Non-institutionalized Medicare Beneficiaries, by Age and by Gender and Age, 2003**

Community-Only Residents<sup>1</sup>

Indicator of Access to Care	Total	All Medicare Beneficiaries				Male					Female				
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
<b>Beneficiaries (in 000s)</b>	40,125	5,806	17,961	12,372	3,985	3,071	8,206	5,268	1,357	17,902	2,735	9,755	7,103	2,629	22,223
	<i>120</i>	<i>109</i>	<i>128</i>	<i>106</i>	<i>77</i>	<i>77</i>	<i>112</i>	<i>84</i>	<i>39</i>	<i>138</i>	<i>73</i>	<i>118</i>	<i>83</i>	<i>65</i>	<i>141</i>
<b>Beneficiaries as a Percent of Column Total</b>															
<b>Length of Association with Usual Source of Care</b>															
No usual source <sup>2</sup>	4.68	6.30	5.25	3.46	3.53	8.00	6.81	3.24	3.56*	5.71	4.41	3.94	3.63	3.51*	3.85
	<i>0.19</i>	<i>0.62</i>	<i>0.30</i>	<i>0.27</i>	<i>0.40</i>	<i>0.72</i>	<i>0.54</i>	<i>0.38</i>	<i>0.69</i>	<i>0.30</i>	<i>0.78</i>	<i>0.42</i>	<i>0.40</i>	<i>0.47</i>	<i>0.24</i>
Less than 1 year	8.62	10.26	7.90	8.67	9.35	10.24	7.55	7.82	6.09*	7.98	10.29	8.19	9.31	11.05	9.14
	<i>0.24</i>	<i>0.72</i>	<i>0.36</i>	<i>0.37</i>	<i>0.65</i>	<i>1.00</i>	<i>0.59</i>	<i>0.51</i>	<i>0.86</i>	<i>0.37</i>	<i>0.97</i>	<i>0.55</i>	<i>0.50</i>	<i>0.91</i>	<i>0.32</i>
1 to less than 3 years	18.81	20.78	18.79	18.03	18.51	20.25	17.17	18.13	16.73	17.95	21.38	20.14	17.95	19.44	19.51
	<i>0.41</i>	<i>1.11</i>	<i>0.74</i>	<i>0.54</i>	<i>0.97</i>	<i>1.58</i>	<i>0.87</i>	<i>0.81</i>	<i>1.49</i>	<i>0.49</i>	<i>1.60</i>	<i>0.88</i>	<i>0.70</i>	<i>1.21</i>	<i>0.54</i>
3 to less than 5 years	16.04	19.73	15.98	15.08	13.95	19.21	15.91	14.37	12.00	15.73	20.30	16.03	15.60	14.96	16.29
	<i>0.33</i>	<i>1.20</i>	<i>0.52</i>	<i>0.59</i>	<i>0.81</i>	<i>1.47</i>	<i>0.77</i>	<i>0.83</i>	<i>1.28</i>	<i>0.49</i>	<i>1.69</i>	<i>0.77</i>	<i>0.75</i>	<i>0.97</i>	<i>0.44</i>
5 years or more	51.85	42.93	52.09	54.76	54.66	42.31	52.56	56.44	61.61	52.64	43.62	51.70	53.51	51.03	51.21
	<i>0.52</i>	<i>1.36</i>	<i>0.80</i>	<i>0.75</i>	<i>1.08</i>	<i>1.67</i>	<i>1.20</i>	<i>1.08</i>	<i>1.86</i>	<i>0.66</i>	<i>1.89</i>	<i>1.03</i>	<i>0.90</i>	<i>1.29</i>	<i>0.59</i>

Source: Medicare Current Beneficiary Survey

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

1 The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview

It excludes beneficiaries who resided in a long-term care facility at the time of their interview

2 The percentage of responses for "none" under "Usual Source of Care" differs from the percentage of responses for "no usual source" under "Length of Association with Usual Source of Care" because of differences in the number of missing responses for the two variables. See the entry *Missing values* in Appendix B for further explanation.

3 HMO stands for Health Maintenance Organization.

4 OPD stands for Outpatient Department; ER stands for Emergency Room.

**Table 5.2 Measures of Satisfaction with Care for Non-institutionalized Medicare Beneficiaries, by Age and by Gender and Age, 2003**

Community-Only Residents<sup>1</sup>

Measure of Satisfaction with Care	Total	All Medicare Beneficiaries				Male				Total	Female				Total
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
<b>Beneficiaries (in 000s)</b>	40,125	5,806	17,961	12,372	3,985	3,071	8,206	5,268	1,357	17,902	2,735	9,755	7,103	2,629	22,223
	120	109	128	106	77	77	112	84	39	138	73	118	83	65	141
<b>Beneficiaries as a Percent of Column Total<sup>2</sup></b>															
<b>Quality of Care</b>															
<b>General Care</b>															
Very Satisfied <sup>3</sup>	30.59	23.32	33.36	31.11	27.06	21.02	35.30	31.71	27.33	31.20	25.90	31.73	30.67	26.93	30.10
	0.75	1.36	0.90	0.81	1.26	1.60	1.20	1.05	1.92	0.88	1.92	1.11	1.05	1.32	0.83
(Very) Unsatisfied <sup>4</sup>	3.78	7.63	2.96	3.50	2.69	7.73	2.52	3.54	2.58*	3.72	7.52	3.33	3.48	2.75*	3.82
	0.18	0.76	0.24	0.24	0.40	0.95	0.35	0.39	0.55	0.25	1.10	0.37	0.34	0.48	0.24
<b>Follow-up Care</b>															
Very Satisfied <sup>3</sup>	19.73	15.85	22.13	19.42	15.45	14.29	23.10	20.37	15.65	20.23	17.59	21.32	18.71	15.35	19.32
	0.66	1.16	0.84	0.70	0.99	1.41	1.18	0.94	1.68	0.80	1.72	0.93	0.91	1.04	0.73
(Very) Unsatisfied <sup>4</sup>	3.20	6.60	2.60	2.78	2.30*	7.35	2.09	2.32	2.44*	3.09	5.76	3.02	3.12	2.22*	3.29
	0.15	0.60	0.21	0.22	0.33	0.74	0.31	0.32	0.56	0.21	0.94	0.33	0.32	0.39	0.22
<b>Access/Coordination of Care</b>															
<b>Availability</b>															
Very Satisfied <sup>3</sup>	10.39	10.19	10.67	10.01	10.59	9.36	11.95	10.33	11.16	10.97	11.13	9.60	9.78	10.29	9.93
	0.58	1.08	0.72	0.56	0.78	1.18	1.01	0.82	1.26	0.71	1.58	0.73	0.68	0.89	0.61
(Very) Unsatisfied <sup>4</sup>	4.19	8.62	3.48	3.48	3.14	7.40	3.35	3.50	4.03*	4.14	9.99	3.58	3.46	2.68*	4.22
	0.23	0.73	0.32	0.25	0.36	1.01	0.40	0.40	0.65	0.33	1.02	0.40	0.37	0.44	0.30
<b>Ease of Access to Doctor</b>															
Very Satisfied <sup>3</sup>	20.57	13.47	23.31	21.45	15.81	12.23	23.66	22.37	18.15	20.91	14.86	23.02	20.76	14.61	20.30
	0.72	1.12	0.92	0.83	1.04	1.30	1.19	1.16	1.71	0.85	1.73	1.04	0.93	1.04	0.78
(Very) Unsatisfied <sup>4</sup>	5.57	11.10	4.42	4.69	5.43	8.95	4.04	4.24	4.89*	5.00	13.51	4.74	5.02	5.71	6.03
	0.25	0.74	0.36	0.35	0.52	0.93	0.43	0.56	0.68	0.36	1.19	0.53	0.44	0.69	0.31
<b>Can Obtain Care in Same Location</b>															
Very Satisfied <sup>3</sup>	15.06	12.01	16.28	15.07	13.97	12.01	17.13	15.13	13.88	15.42	12.02	15.57	15.03	14.01	14.78
	0.62	1.01	0.79	0.65	0.97	1.22	1.04	0.87	1.60	0.72	1.57	0.89	0.75	1.12	0.70
(Very) Unsatisfied <sup>4</sup>	5.56	11.32	4.98	4.51	3.01	10.72	4.53	4.74	2.82*	5.52	11.98	5.36	4.35	3.11*	5.59
	0.26	0.90	0.37	0.30	0.39	1.24	0.51	0.49	0.59	0.37	1.25	0.48	0.33	0.45	0.30

**Table 5.2 Measures of Satisfaction with Care for Non-institutionalized Medicare Beneficiaries, by Age and by Gender and Age, 2003**

Community-Only Residents<sup>1</sup>

Measure of Satisfaction with Care	Total	All Medicare Beneficiaries				Male				Total	Female				Total
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
<b>Beneficiaries (in 000s)</b>	40,125	5,806	17,961	12,372	3,985	3,071	8,206	5,268	1,357	17,902	2,735	9,755	7,103	2,629	22,223
	<i>120</i>	<i>109</i>	<i>128</i>	<i>106</i>	<i>77</i>	<i>77</i>	<i>112</i>	<i>84</i>	<i>39</i>	<i>138</i>	<i>73</i>	<i>118</i>	<i>83</i>	<i>65</i>	<i>141</i>
<b>Beneficiaries as a Percent of Column Total<sup>2</sup></b>															
<b>Information from Doctor</b>															
Very Satisfied <sup>3</sup>	19.12	15.26	21.83	18.32	14.92	14.17	22.96	19.43	14.92	19.81	16.49	20.87	17.50	14.92	18.56
	<i>0.68</i>	<i>1.14</i>	<i>0.85</i>	<i>0.79</i>	<i>0.83</i>	<i>1.58</i>	<i>1.21</i>	<i>1.15</i>	<i>1.43</i>	<i>0.83</i>	<i>1.47</i>	<i>0.92</i>	<i>0.88</i>	<i>0.95</i>	<i>0.73</i>
(Very) Unsatisfied <sup>4</sup>	4.94	10.19	3.69	4.66	3.84	8.98	3.68	4.20	3.34*	4.71	11.54	3.70	5.00	4.10	5.12
	<i>0.21</i>	<i>0.92</i>	<i>0.32</i>	<i>0.30</i>	<i>0.55</i>	<i>1.03</i>	<i>0.45</i>	<i>0.41</i>	<i>0.75</i>	<i>0.32</i>	<i>1.57</i>	<i>0.39</i>	<i>0.39</i>	<i>0.63</i>	<i>0.26</i>
<b>Doctor's Concern for Overall Health</b>															
Very Satisfied <sup>3</sup>	21.47	18.26	23.29	21.31	18.33	17.21	23.64	21.91	18.28	21.63	19.43	23.00	20.86	18.36	21.34
	<i>0.68</i>	<i>1.19</i>	<i>0.87</i>	<i>0.77</i>	<i>1.14</i>	<i>1.49</i>	<i>1.14</i>	<i>1.07</i>	<i>1.98</i>	<i>0.78</i>	<i>1.78</i>	<i>1.00</i>	<i>0.96</i>	<i>1.21</i>	<i>0.78</i>
(Very) Unsatisfied <sup>4</sup>	5.27	10.67	4.10	4.80	4.17	9.77	3.55	4.53	4.45*	4.97	11.68	4.56	4.99	4.03	5.51
	<i>0.22</i>	<i>0.98</i>	<i>0.26</i>	<i>0.30</i>	<i>0.48</i>	<i>1.16</i>	<i>0.39</i>	<i>0.51</i>	<i>0.82</i>	<i>0.31</i>	<i>1.54</i>	<i>0.37</i>	<i>0.45</i>	<i>0.60</i>	<i>0.29</i>
<b>Cost</b>															
Very Satisfied <sup>3</sup>	16.11	13.17	17.12	16.97	13.17	12.41	17.70	18.65	15.98	16.95	14.02	16.63	15.72	11.71	15.44
	<i>0.60</i>	<i>1.11</i>	<i>0.76</i>	<i>0.63</i>	<i>0.90</i>	<i>1.31</i>	<i>1.03</i>	<i>0.99</i>	<i>1.70</i>	<i>0.78</i>	<i>1.64</i>	<i>0.89</i>	<i>0.71</i>	<i>0.96</i>	<i>0.64</i>
(Very) Unsatisfied <sup>4</sup>	16.15	26.49	15.31	13.57	12.90	22.46	14.22	12.64	13.64	15.12	31.01	16.23	14.26	12.52	16.99
	<i>0.37</i>	<i>1.27</i>	<i>0.52</i>	<i>0.52</i>	<i>0.74</i>	<i>1.34</i>	<i>0.76</i>	<i>0.75</i>	<i>1.34</i>	<i>0.51</i>	<i>2.17</i>	<i>0.78</i>	<i>0.66</i>	<i>0.97</i>	<i>0.51</i>

Source: Medicare Current Beneficiary Survey

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

<sup>1</sup> The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview

It excludes beneficiaries who resided in a long-term care facility at the time of their interview

<sup>2</sup> Column percentages do not sum to 100 percent because the responses of "satisfied" and "no experience" are excluded from the table for all satisfaction variables

<sup>3</sup> Beneficiaries whose response to the question was 'very satisfied'.

<sup>4</sup> Beneficiaries whose response to the question was 'unsatisfied' or 'very unsatisfied'.

**Table 5.3 Measures of Propensity to Seek Care for Non-institutionalized Medicare Beneficiaries, by Age and by Gender and Age, 2003**

Community-Only Residents<sup>1</sup>

Measure of Propensity to Seek Care	Total	All Medicare Beneficiaries				Male				Total	Female				Total
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
<b>Beneficiaries (in 000s)</b>	40,125	5,806	17,961	12,372	3,985	3,071	8,206	5,268	1,357	17,902	2,735	9,755	7,103	2,629	22,223
	120	109	128	106	77	77	112	84	39	138	73	118	83	65	141
<b>Beneficiaries as a Percent of Column Total</b>															
<b>Had a Problem and Did Not See a Doctor</b>															
Yes	8.81	23.07	7.29	5.83	4.18	21.70	6.19	4.83	4.49*	8.31	24.60	8.22	6.58	4.02	9.22
	0.32	1.37	0.39	0.34	0.42	1.49	0.57	0.55	0.81	0.45	1.72	0.54	0.47	0.48	0.35
No	91.19	76.93	92.71	94.17	95.82	78.30	93.81	95.17	95.51	91.69	75.40	91.78	93.42	95.98	90.78
	0.32	1.37	0.39	0.34	0.42	1.49	0.57	0.55	0.81	0.45	1.72	0.54	0.47	0.48	0.35
<b>Ever Had a Prescription You Did Not Fill</b>															
Yes	4.69	10.99	4.46	3.11	1.44*	10.00	3.23	2.79	1.93*	4.16	12.10	5.49	3.34	1.19*	5.11
	0.23	0.79	0.32	0.27	0.25	1.02	0.41	0.38	0.53	0.30	1.18	0.42	0.32	0.30	0.26
No	95.31	89.01	95.54	96.89	98.56	90.00	96.77	97.21	98.07	95.84	87.90	94.51	96.66	98.81	94.89
	0.23	0.79	0.32	0.27	0.25	1.02	0.41	0.38	0.53	0.30	1.18	0.42	0.32	0.30	0.26
<b>Visit a Doctor as Soon as You Feel Bad</b>															
Yes	36.35	37.89	34.40	37.27	40.06	37.90	33.42	38.99	39.67	36.30	37.88	35.22	36.00	40.27	36.39
	0.60	1.37	0.77	0.80	1.29	1.95	1.00	1.00	2.49	0.71	1.66	0.90	1.15	1.35	0.72
No	63.65	62.11	65.60	62.73	59.94	62.10	66.58	61.01	60.33	63.70	62.12	64.78	64.00	59.73	63.61
	0.60	1.37	0.77	0.80	1.29	1.95	1.00	1.00	2.49	0.71	1.66	0.90	1.15	1.35	0.72
<b>Avoid Going to the Doctor</b>															
Yes	28.81	36.45	29.25	26.43	23.05	35.43	27.68	23.58	20.89	27.29	37.60	30.57	28.55	24.17	30.03
	0.57	1.20	0.72	0.73	1.05	1.45	1.04	1.07	1.48	0.68	1.94	0.96	0.87	1.34	0.68
No	71.19	63.55	70.75	73.57	76.95	64.57	72.32	76.42	79.11	72.71	62.40	69.43	71.45	75.83	69.97
	0.57	1.20	0.72	0.73	1.05	1.45	1.04	1.07	1.48	0.68	1.94	0.96	0.87	1.34	0.68

**Table 5.3 Measures of Propensity to Seek Care for Non-institutionalized Medicare Beneficiaries, by Age and by Gender and Age, 2003**

Community-Only Residents<sup>1</sup>

Measure of Propensity to Seek Care	Total	All Medicare Beneficiaries				Male				Total	Female				Total
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
<b>Beneficiaries (in 000s)</b>	40,125	5,806	17,961	12,372	3,985	3,071	8,206	5,268	1,357	17,902	2,735	9,755	7,103	2,629	22,223
	<i>120</i>	<i>109</i>	<i>128</i>	<i>106</i>	<i>77</i>	<i>77</i>	<i>112</i>	<i>84</i>	<i>39</i>	<i>138</i>	<i>73</i>	<i>118</i>	<i>83</i>	<i>65</i>	<i>141</i>

Beneficiaries as a Percent of Column Total

**Do You Worry About Your  
Health More Than Others**

Yes	19.54	50.99	15.33	13.24	12.19	48.56	14.52	12.72	13.03	19.75	53.73	16.01	13.63	11.76	19.38
	<i>0.37</i>	<i>1.24</i>	<i>0.54</i>	<i>0.45</i>	<i>0.84</i>	<i>1.49</i>	<i>0.70</i>	<i>0.68</i>	<i>1.30</i>	<i>0.50</i>	<i>2.06</i>	<i>0.73</i>	<i>0.63</i>	<i>0.93</i>	<i>0.43</i>
No	80.46	49.01	84.67	86.76	87.81	51.44	85.48	87.28	86.97	80.25	46.27	83.99	86.37	88.24	80.62
	<i>0.37</i>	<i>1.24</i>	<i>0.54</i>	<i>0.45</i>	<i>0.84</i>	<i>1.49</i>	<i>0.70</i>	<i>0.68</i>	<i>1.30</i>	<i>0.50</i>	<i>2.06</i>	<i>0.73</i>	<i>0.63</i>	<i>0.93</i>	<i>0.43</i>

**When Sick, Do You Keep  
it to Yourself**

Yes	38.32	47.20	37.15	37.06	34.59	46.53	34.76	33.50	31.95	36.19	47.95	39.16	39.70	35.95	40.04
	<i>0.65</i>	<i>1.32</i>	<i>0.80</i>	<i>0.85</i>	<i>1.25</i>	<i>1.70</i>	<i>1.07</i>	<i>1.23</i>	<i>1.93</i>	<i>0.82</i>	<i>1.95</i>	<i>0.98</i>	<i>0.99</i>	<i>1.48</i>	<i>0.73</i>
No	61.68	52.80	62.85	62.94	65.41	53.47	65.24	66.50	68.05	63.81	52.05	60.84	60.30	64.05	59.96
	<i>0.65</i>	<i>1.32</i>	<i>0.80</i>	<i>0.85</i>	<i>1.25</i>	<i>1.70</i>	<i>1.07</i>	<i>1.23</i>	<i>1.93</i>	<i>0.82</i>	<i>1.95</i>	<i>0.98</i>	<i>0.99</i>	<i>1.48</i>	<i>0.73</i>

Source: Medicare Current Beneficiary Survey

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

<sup>1</sup> The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview  
It excludes beneficiaries who resided in a long-term care facility at the time of their interview

**Table 5.4 Indicators of Access to Care for Non-institutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 2003**

Community-Only Residents<sup>1</sup>

Indicator of Access to Care	Total <sup>2</sup>	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
<b>Beneficiaries (in 000s)</b>	40,125	3,759	14,055	10,238	3,284	31,336	1,097	1,573	833	292	3,796	612	1,426	827	249	3,114
	120	125	145	116	72	240	54	61	40	23	88	47	99	65	24	188
<b>Beneficiaries as a Percent of Column Total</b>																
<b>Usual Source of Care</b>																
None <sup>3</sup>	4.65	6.30	4.94	3.26	3.42	4.40	5.77*	4.93*	2.68*	3.19*	4.54	6.12*	7.86*	5.72*	5.22*	6.74
	0.18	0.83	0.37	0.28	0.45	0.20	1.02	1.22	0.91	1.46	0.62	1.18	1.54	1.09	1.69	0.89
Doctor's office	75.75	72.95	77.38	79.97	81.58	78.13	59.56	71.10	76.92	76.08	69.43	62.50	61.85	62.42	64.31	62.33
	0.54	1.72	0.85	0.67	0.91	0.63	3.27	2.22	2.38	4.18	1.50	4.10	2.71	2.88	3.92	2.04
Doctor's clinic	9.57	10.68	10.22	8.65	7.34	9.46	17.18	11.07*	5.81*	4.67*	11.18	10.11*	8.51*	6.12*	7.30*	8.09
	0.49	1.08	0.73	0.62	0.78	0.58	2.72	1.66	1.16	1.90	1.07	2.48	1.76	1.24	2.20	1.11
HMO <sup>4</sup>	4.18	1.82*	3.62	3.75	3.46	3.43	2.20*	4.15*	5.53*	4.78*	3.94	5.41*	11.56*	13.52*	11.86*	10.89
	0.28	0.39	0.43	0.31	0.46	0.29	0.71	1.16	1.21	1.84	0.63	1.87	2.28	2.29	3.06	1.66
Hospital OPD/ER <sup>5</sup>	1.93	2.14*	1.04*	1.15	0.96*	1.20	8.66*	4.33*	2.70*	5.74*	5.33	9.18*	5.08*	5.99*	1.20*	5.82
	0.15	0.45	0.21	0.16	0.23	0.13	1.84	1.14	0.90	1.99	0.77	1.93	1.21	1.43	0.15	0.81
Other clinic/health center	3.92	6.10	2.80	3.21	3.25	3.38	6.63*	4.42*	6.37*	5.53*	5.57	6.69*	5.14*	6.23*	10.11*	6.13
	0.19	0.88	0.26	0.31	0.45	0.20	1.12	0.99	1.43	2.18	0.63	2.01	1.00	1.94	2.81	0.71
<b>Difficulty Obtaining Care</b>																
Yes	4.91	17.22	3.04	2.56	1.94*	4.47	11.14*	5.50*	3.93*	2.04*	6.52	13.16*	3.88*	5.00*	3.58*	5.98
	0.24	1.27	0.32	0.23	0.35	0.23	2.20	1.13	1.02	1.22	0.87	2.05	1.00	1.23	0.83	0.70
No	95.09	82.78	96.96	97.44	98.06	95.53	88.86	94.50	96.07	97.96	93.48	86.84	96.12	95.00	96.42	94.02
	0.24	1.27	0.32	0.23	0.35	0.23	2.20	1.13	1.02	1.22	0.87	2.05	1.00	1.23	0.83	0.70
<b>Delayed Care Due to Cost</b>																
Yes	8.47	26.56	6.50	4.19	3.36	7.82	17.72	8.91*	6.01*	3.22*	10.38	22.39	8.32*	6.40*	2.29*	10.10
	0.30	1.56	0.43	0.33	0.45	0.28	2.63	1.38	1.32	1.34	1.01	2.89	1.37	1.45	1.63	1.02
No	91.53	73.44	93.50	95.81	96.64	92.18	82.28	91.09	93.99	96.78	89.62	77.61	91.68	93.60	97.71	89.90
	0.30	1.56	0.43	0.33	0.45	0.28	2.63	1.38	1.32	1.34	1.01	2.89	1.37	1.45	1.63	1.02

**Table 5.4 Indicators of Access to Care for Non-institutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 2003**

Community-Only Residents<sup>1</sup>

Indicator of Access to Care	Total <sup>2</sup>	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
<b>Beneficiaries (in 000s)</b>	40,125	3,759	14,055	10,238	3,284	31,336	1,097	1,573	833	292	3,796	612	1,426	827	249	3,114
	120	125	145	116	72	240	54	61	40	23	88	47	99	65	24	188
<b>Beneficiaries as a Percent of Column Total</b>																
<b>Length of Association with Usual Source of Care</b>																
No usual source <sup>3</sup>	4.68	6.36	4.96	3.28	3.45	4.42	5.79*	4.95*	2.70*	3.26*	4.57	6.15*	7.92*	5.80*	5.40*	6.81
	0.19	0.84	0.37	0.28	0.46	0.20	1.02	1.23	0.92	1.48	0.62	1.19	1.54	1.10	1.75	0.89
Less than 1 year	8.62	9.60	7.37	8.34	9.21	8.14	9.85*	6.68*	7.89*	10.25*	8.13	10.79*	13.18	10.48*	12.70*	11.96
	0.24	0.87	0.38	0.38	0.77	0.26	1.72	1.25	1.52	2.26	0.70	1.99	1.79	1.80	2.54	0.97
1 to less than 3 years	18.81	20.85	18.08	17.87	18.24	18.36	19.80	17.92	18.92	19.36*	18.79	21.51	25.15	19.89	20.88*	22.70
	0.41	1.39	0.79	0.54	1.06	0.47	2.46	1.72	2.02	3.15	1.02	2.16	2.70	3.27	3.63	1.17
3 to less than 5 years	16.04	20.26	15.98	14.56	12.81	15.70	18.27	16.34	17.71	16.70*	17.23	19.82*	15.17	16.89	20.56*	16.96
	0.33	1.60	0.55	0.61	0.86	0.35	2.20	1.79	2.54	2.80	1.12	2.86	1.86	2.60	3.65	1.18
5 years or more	51.85	42.92	53.61	55.95	56.28	53.38	46.29	54.11	52.78	50.44	51.28	41.72	38.58	46.95	40.47	41.57
	0.52	1.50	0.91	0.82	1.17	0.57	3.68	2.28	2.48	3.42	1.42	3.55	2.15	2.80	4.57	1.37

Source: Medicare Current Beneficiary Survey

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

The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview

It excludes beneficiaries who resided in a long-term care facility at the time of their interview

The percentage of responses for "None" under "Usual Source of Care" differs from the percentage of responses for "No usual source" under "Length of Association with Usual Source of Care" because of differences in the number of missing responses for the two variables. See the entry *Missing values* in Appendix B for further explanation.

HMO stands for Health Maintenance Organization.

OPD stands for Outpatient Department; ER stands for Emergency Room.



**Table 5.5 Measures of Satisfaction with Care for Non-institutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 2003**

Community-Only Residents<sup>1</sup>

Measure of Satisfaction with Care	Total <sup>6</sup>	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
<b>Beneficiaries (in 000s)</b>	40,125	3,759	14,055	10,238	3,284	31,336	1,097	1,573	833	292	3,796	612	1,426	827	249	3,114
	120	125	145	116	72	240	54	61	40	23	88	47	99	65	24	188
<b>Beneficiaries as a Percent of Column Total<sup>3</sup></b>																
<b>Quality of Care</b>																
<b>General Care</b>																
Very Satisfied <sup>4</sup>	30.59	25.17	36.04	33.56	29.34	33.23	17.80	21.03	16.06	15.96*	18.61	22.71*	24.12	19.01	12.72*	21.57
	0.75	1.78	1.02	0.88	1.41	0.86	2.44	2.06	1.83	3.29	1.20	3.36	2.13	2.81	2.55	1.56
(Very) Unsatisfied <sup>5</sup>	3.78	7.51	2.77	3.46	2.89*	3.57	6.34*	4.10*	2.92*	1.34*	4.28	8.12*	4.36*	4.26*	1.27*	4.82
	0.18	0.95	0.24	0.28	0.47	0.20	1.35	1.03	0.94	0.94	0.64	1.88	1.23	1.13	0.25	0.67
<b>Follow-up Care</b>																
Very Satisfied <sup>4</sup>	19.73	17.77	23.64	20.54	16.58	21.19	13.98	12.14	13.61*	7.43*	12.63	13.54*	17.66	14.11*	12.95*	15.53
	0.66	1.65	0.96	0.81	1.14	0.79	1.98	1.80	1.74	2.73	1.09	2.14	1.86	2.38	2.91	1.24
(Very) Unsatisfied <sup>5</sup>	3.20	6.80	2.41	2.55	2.57*	2.99	4.11*	4.07*	2.84*	.	3.50*	5.25*	2.38*	6.04*	0.68*	3.78
	0.15	0.76	0.25	0.23	0.40	0.16	0.98	1.09	0.95	.	0.57	1.24	0.82	1.34	0.72	0.50
<b>Access/Coordination of Care</b>																
<b>Availability</b>																
Very Satisfied <sup>4</sup>	10.39	11.09	11.43	10.34	11.40	11.03	7.98*	5.80*	6.69*	6.95*	6.71	9.26*	8.92*	8.62*	6.21*	8.69
	0.58	1.38	0.85	0.64	0.89	0.66	1.93	1.15	1.21	1.91	0.75	2.29	1.57	1.70	2.05	0.97
(Very) Unsatisfied <sup>5</sup>	4.19	9.40	3.41	3.66	3.43	4.21	5.70*	3.24*	2.64*	0.70*	3.62*	5.93*	3.00*	1.85*	1.35*	3.14*
	0.23	0.98	0.33	0.28	0.41	0.24	1.31	0.72	0.92	0.68	0.60	1.10	1.12	0.78	0.98	0.48
<b>Ease of Access to Doctor</b>																
Very Satisfied <sup>4</sup>	20.57	14.40	25.46	22.69	16.68	22.31	13.05	13.11	13.75*	10.57*	13.04	11.26*	14.63	15.38	9.87*	13.78
	0.72	1.41	1.10	0.93	1.14	0.84	2.18	1.60	1.84	2.34	1.09	2.39	1.57	2.22	2.51	1.13
(Very) Unsatisfied <sup>5</sup>	5.57	11.09	3.75	4.39	5.01	4.97	7.81*	5.81*	4.73*	4.83*	6.07	11.51*	8.54*	8.18*	10.91*	9.22
	0.25	1.00	0.37	0.36	0.57	0.26	1.37	1.27	1.14	1.82	0.72	2.36	1.37	2.20	2.70	1.06
<b>Can Obtain Care in Same Location</b>																
Very Satisfied <sup>4</sup>	15.06	11.92	17.48	15.72	14.85	15.96	11.78	8.77*	10.98*	8.23*	10.08	12.57*	14.29	11.47*	11.70*	13.00
	0.62	1.36	0.92	0.71	1.09	0.73	2.00	1.36	1.65	1.84	0.95	2.77	1.72	2.52	2.43	1.31
(Very) Unsatisfied <sup>5</sup>	5.56	13.25	4.95	4.64	3.06	5.65	6.14*	4.97*	2.19*	1.06*	4.40	6.69*	5.51*	5.39*	4.49*	5.63
	0.26	1.27	0.41	0.34	0.44	0.29	1.36	1.12	0.79	1.02	0.76	1.25	1.01	1.29	1.89	0.55

**Table 5.5 Measures of Satisfaction with Care for Non-institutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 2003**

Community-Only Residents<sup>1</sup>

Measure of Satisfaction with Care	Total <sup>6</sup>	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
<b>Beneficiaries (in 000s)</b>	40,125	3,759	14,055	10,238	3,284	31,336	1,097	1,573	833	292	3,796	612	1,426	827	249	3,114
	<i>120</i>	<i>125</i>	<i>145</i>	<i>116</i>	<i>72</i>	<i>240</i>	<i>54</i>	<i>61</i>	<i>40</i>	<i>23</i>	<i>88</i>	<i>47</i>	<i>99</i>	<i>65</i>	<i>24</i>	<i>188</i>
<b>Beneficiaries as a Percent of Column Total<sup>3</sup></b>																
<b>Relationship with Primary Doctor</b>																
<b>Information from Doctor</b>																
Very Satisfied <sup>4</sup>	19.12	17.20	23.43	19.44	16.04	20.61	11.43	12.26	11.64*	4.93*	11.33	13.55*	15.06	12.73*	12.15*	13.92
	<i>0.68</i>	<i>1.52</i>	<i>0.98</i>	<i>0.89</i>	<i>0.97</i>	<i>0.80</i>	<i>1.76</i>	<i>1.57</i>	<i>1.76</i>	<i>1.63</i>	<i>0.97</i>	<i>2.77</i>	<i>1.72</i>	<i>2.47</i>	<i>2.60</i>	<i>1.18</i>
(Very) Unsatisfied <sup>5</sup>	4.94	10.58	3.51	4.67	4.45	4.83	7.10*	5.28*	3.55*	0.64*	5.07	9.43*	3.16*	5.29*	0.57*	4.73
	<i>0.21</i>	<i>1.22</i>	<i>0.37</i>	<i>0.35</i>	<i>0.67</i>	<i>0.24</i>	<i>1.13</i>	<i>1.24</i>	<i>1.11</i>	<i>0.66</i>	<i>0.67</i>	<i>1.54</i>	<i>0.81</i>	<i>1.52</i>	<i>0.57</i>	<i>0.72</i>
<b>Doctor's Concern for Overall Health</b>																
Very Satisfied <sup>4</sup>	21.47	21.04	25.25	22.74	19.43	23.32	14.53	12.78	12.99*	9.53*	13.08	13.04*	15.21	14.21*	15.71*	14.56
	<i>0.68</i>	<i>1.63</i>	<i>0.97</i>	<i>0.82</i>	<i>1.27</i>	<i>0.77</i>	<i>1.87</i>	<i>1.75</i>	<i>1.90</i>	<i>2.31</i>	<i>1.14</i>	<i>2.09</i>	<i>1.74</i>	<i>2.45</i>	<i>2.54</i>	<i>1.13</i>
(Very) Unsatisfied <sup>5</sup>	5.27	12.06	4.03	4.79	4.65	5.30	5.66*	4.91*	3.81*	1.12*	4.60	8.04*	4.78*	6.91*	3.40*	5.87
	<i>0.22</i>	<i>1.40</i>	<i>0.28</i>	<i>0.35</i>	<i>0.55</i>	<i>0.27</i>	<i>0.94</i>	<i>1.20</i>	<i>1.02</i>	<i>0.79</i>	<i>0.63</i>	<i>1.76</i>	<i>1.20</i>	<i>1.68</i>	<i>1.11</i>	<i>0.68</i>
<b>Cost of Care</b>																
<b>Cost</b>																
Very Satisfied <sup>4</sup>	16.11	13.67	18.27	17.62	14.24	17.09	11.19	9.96*	9.97*	6.42*	10.05	15.41*	12.29	12.91*	8.43*	12.76
	<i>0.60</i>	<i>1.44</i>	<i>0.89</i>	<i>0.71</i>	<i>1.04</i>	<i>0.70</i>	<i>2.12</i>	<i>1.58</i>	<i>1.51</i>	<i>1.79</i>	<i>0.86</i>	<i>3.11</i>	<i>1.48</i>	<i>2.09</i>	<i>2.31</i>	<i>1.11</i>
(Very) Unsatisfied <sup>5</sup>	16.15	27.59	14.45	13.14	12.73	15.42	24.03	18.18	16.17	16.35*	19.28	19.53	19.56	17.38	10.03*	18.21
	<i>0.37</i>	<i>1.51</i>	<i>0.54</i>	<i>0.55</i>	<i>0.79</i>	<i>0.37</i>	<i>2.96</i>	<i>2.32</i>	<i>2.40</i>	<i>2.98</i>	<i>1.61</i>	<i>3.16</i>	<i>2.36</i>	<i>2.03</i>	<i>2.72</i>	<i>1.61</i>

Source: Medicare Current Beneficiary Survey

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

1 The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview. It excludes beneficiaries who resided in a long-term care facility at the time of their interview.

3 Column percentages do not sum to 100 percent because the responses of "satisfied" and "no experience" are excluded from the table for all satisfaction variables.

4 Beneficiaries whose response to the question was 'very satisfied'.

5 Beneficiaries whose response to the question was 'unsatisfied' or 'very unsatisfied'.

6 Total includes persons of other race/ethnicity and persons who did not report their race/ethnicity.

**Table 5.6 Measures of Propensity to Seek Care for Non-institutionalized Medicare Beneficiaries, by Age and by Gender and Age, 2003**

Community-Only Residents<sup>1</sup>

Measure of Propensity to Seek Care	Total	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
<b>Beneficiaries (in 000s)</b>	40,125	3,759	14,055	10,238	3,284	31,336	1,097	1,573	833	292	3,796	612	1,426	827	249	3,114
	120	125	145	116	72	240	54	61	40	23	88	47	99	65	24	188
<b>Beneficiaries as a Percent of Column Total<sup>2</sup></b>																
<b>Had a Problem and Did Not See a Doctor</b>																
Yes	8.81	22.81	6.90	5.60	3.92	8.07	21.42	8.64*	5.32*	5.03*	11.32	21.09	8.95*	7.89*	4.90*	10.74
	0.32	1.53	0.44	0.38	0.46	0.33	2.78	1.42	1.30	1.98	1.07	4.06	1.33	1.49	1.97	1.25
No	91.19	77.19	93.10	94.40	96.08	91.93	78.58	91.36	94.68	94.97	88.68	78.91	91.05	92.11	95.10	89.26
	0.32	1.53	0.44	0.38	0.46	0.33	2.78	1.42	1.30	1.98	1.07	4.06	1.33	1.49	1.97	1.25
<b>Ever Had a Prescription You Did Not Fill</b>																
Yes	4.69	11.29	4.55	3.01	1.44*	4.53	9.72*	4.98*	2.96*	2.35*	5.70	10.28*	4.46*	4.53*	0.61*	5.31
	0.23	1.12	0.38	0.30	0.27	0.24	1.74	1.19	0.97	1.17	0.68	1.80	1.05	1.08	0.60	0.69
No	95.31	88.71	95.45	96.99	98.56	95.47	90.28	95.02	97.04	97.65	94.30	89.72	95.54	95.47	99.39	94.69
	0.23	1.12	0.38	0.30	0.27	0.24	1.74	1.19	0.97	1.17	0.68	1.80	1.05	1.08	0.60	0.69
<b>Visit a Doctor as Soon as You Feel Bad</b>																
Yes	36.35	32.88	31.46	34.72	38.22	33.39	46.18	41.19	42.18	42.74	42.96	55.16	49.99	56.78	54.60	53.17
	0.60	1.68	0.82	0.87	1.38	0.64	3.06	2.81	2.99	4.30	1.76	4.03	2.20	2.67	4.98	1.90
No	63.65	67.12	68.54	65.28	61.78	66.61	53.82	58.81	57.82	57.26	57.04	44.84	50.01	43.22	45.40	46.83
	0.60	1.68	0.82	0.87	1.38	0.64	3.06	2.81	2.99	4.30	1.76	4.03	2.20	2.67	4.98	1.90
<b>Avoid Going to the Doctor</b>																
Yes	28.81	38.33	29.34	26.07	23.44	28.73	31.82	29.75	24.97	20.70*	28.60	31.59	27.98	31.41	21.26*	29.06
	0.57	1.60	0.79	0.70	1.15	0.61	2.81	2.26	2.52	3.52	1.24	4.17	2.52	3.66	3.20	2.25
No	71.19	61.67	70.66	73.93	76.56	71.27	68.18	70.25	75.03	79.30	71.40	68.41	72.02	68.59	78.74	70.94
	0.57	1.60	0.79	0.70	1.15	0.61	2.81	2.26	2.52	3.52	1.24	4.17	2.52	3.66	3.20	2.25

**Table 5.6 Measures of Propensity to Seek Care for Non-institutionalized Medicare Beneficiaries, by Age and by Gender and Age, 2003**

Community-Only Residents<sup>1</sup>

Measure of Propensity to Seek Care	Total	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
<b>Beneficiaries (in 000s)</b>	40,125	3,759	14,055	10,238	3,284	31,336	1,097	1,573	833	292	3,796	612	1,426	827	249	3,114
	<i>120</i>	<i>125</i>	<i>145</i>	<i>116</i>	<i>72</i>	<i>240</i>	<i>54</i>	<i>61</i>	<i>40</i>	<i>23</i>	<i>88</i>	<i>47</i>	<i>99</i>	<i>65</i>	<i>24</i>	<i>188</i>

Beneficiaries as a Percent of Column Total<sup>2</sup>

**Do You Worry About Your  
Health More Than Others**

Yes	19.54	50.52	11.99	10.99	10.57	16.13	44.24	22.31	16.61	11.91*	26.62	61.05	35.12	32.33	29.86*	39.05
	<i>0.37</i>	<i>1.43</i>	<i>0.56</i>	<i>0.45</i>	<i>0.81</i>	<i>0.38</i>	<i>2.48</i>	<i>2.33</i>	<i>2.19</i>	<i>3.21</i>	<i>1.42</i>	<i>4.18</i>	<i>2.04</i>	<i>2.60</i>	<i>4.51</i>	<i>1.44</i>
No	80.46	49.48	88.01	89.01	89.43	83.87	55.76	77.69	83.39	88.09	73.38	38.95	64.88	67.67	70.14	60.95
	<i>0.37</i>	<i>1.43</i>	<i>0.56</i>	<i>0.45</i>	<i>0.81</i>	<i>0.38</i>	<i>2.48</i>	<i>2.33</i>	<i>2.19</i>	<i>3.21</i>	<i>1.42</i>	<i>4.18</i>	<i>2.04</i>	<i>2.60</i>	<i>4.51</i>	<i>1.44</i>

**When Sick, Do You Keep  
it to Yourself**

Yes	38.32	47.84	37.91	38.22	35.55	38.96	45.17	34.08	30.22	32.11*	36.28	43.53	33.28	30.41	30.79*	34.35
	<i>0.65</i>	<i>1.82</i>	<i>0.91</i>	<i>0.94</i>	<i>1.34</i>	<i>0.79</i>	<i>2.53</i>	<i>2.23</i>	<i>2.45</i>	<i>3.58</i>	<i>1.23</i>	<i>3.94</i>	<i>2.28</i>	<i>2.33</i>	<i>3.25</i>	<i>1.61</i>
No	61.68	52.16	62.09	61.78	64.45	61.04	54.83	65.92	69.78	67.89	63.72	56.47	66.72	69.59	69.21	65.65
	<i>0.65</i>	<i>1.82</i>	<i>0.91</i>	<i>0.94</i>	<i>1.34</i>	<i>0.79</i>	<i>2.53</i>	<i>2.23</i>	<i>2.45</i>	<i>3.58</i>	<i>1.23</i>	<i>3.94</i>	<i>2.28</i>	<i>2.33</i>	<i>3.25</i>	<i>1.61</i>

Source: Medicare Current Beneficiary Survey

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

1 The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview. It excludes beneficiaries who resided in a long-term care facility at the time of their interview.

2 Column percentages do not sum to 100 percent because the responses of "satisfied" and "no experience" are excluded from the table for all satisfaction variables.

**Table 5.7 Indicators of Access to Care for Non-institutionalized Medicare Beneficiaries, by Living Arrangement and Age, 2003**

Community-Only Residents<sup>1</sup>

Indicator of Access to Care	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
<b>Beneficiaries (in 000s)</b>	40,125	1,534	4,224	4,435	1,937	12,130	2,235	11,450	6,134	1,071	20,890	2,037	2,287	1,803	978	7,105
	120	90	119	82	55	184	104	145	114	45	172	69	83	54	40	130
<b>Beneficiaries as a Percent of Column Total</b>																
<b>Access to Care</b>																
<b>Usual Source of Care</b>																
None <sup>2</sup>	4.65	7.34	6.77	4.20	4.21*	5.49	3.35*	4.50	2.75	1.73*	3.72	8.61	6.05*	3.96*	3.97*	5.97
	0.18	1.92	0.81	0.45	0.65	0.35	0.55	0.39	0.35	0.58	0.24	0.88	0.90	0.72	0.95	0.45
Doctor's office	75.75	62.42	73.91	78.66	79.36	75.08	74.03	76.96	78.81	82.44	77.47	66.55	70.80	75.46	78.44	71.81
	0.54	2.42	1.50	0.93	1.26	0.77	2.00	0.91	0.78	1.51	0.68	2.03	1.86	1.54	1.76	1.11
Doctor's clinic	9.57	15.09	9.31	7.70	8.23	9.28	11.11	10.34	8.25	6.32*	9.61	12.01	9.99	9.38	6.73*	9.97
	0.49	2.20	0.92	0.62	1.00	0.56	1.60	0.71	0.67	1.11	0.59	1.33	1.44	1.23	1.08	0.84
HMO <sup>3</sup>	4.18	2.08*	4.61	3.92	3.82*	3.91	2.75*	4.08	5.44	3.75*	4.32	2.71*	5.51*	3.96*	5.01*	4.24
	0.28	0.56	0.80	0.46	0.62	0.43	0.67	0.51	0.49	0.94	0.39	0.53	0.97	0.67	0.81	0.45
Hospital OPD/ER <sup>4</sup>	1.93	5.73*	1.90*	1.39*	1.13*	2.07	2.63*	1.30*	1.20*	1.59*	1.43	4.34*	2.76*	3.34*	1.42*	3.18
	0.15	1.25	0.46	0.31	0.32	0.28	0.77	0.26	0.25	0.49	0.19	0.63	0.86	0.68	0.51	0.38
Other clinic/health center	3.92	7.34*	3.50*	4.13	3.25*	4.17	6.13*	2.82	3.54	4.17*	3.46	5.78	4.89*	3.91*	4.43*	4.83
	0.19	1.48	0.59	0.45	0.57	0.32	0.98	0.28	0.41	0.70	0.25	0.93	0.69	0.84	0.93	0.36
<b>Difficulty Obtaining Care</b>																
Yes	4.91	19.88	4.23*	2.64*	1.40*	5.17	13.89	2.69	2.58	1.69*	3.80	15.20	5.14*	4.47*	4.20*	7.73
	0.24	2.47	0.64	0.35	0.35	0.51	1.61	0.30	0.34	0.50	0.25	1.66	0.86	0.86	0.88	0.58
No	95.09	80.12	95.77	97.36	98.60	94.83	86.11	97.31	97.42	98.31	96.20	84.80	94.86	95.53	95.80	92.27
	0.24	2.47	0.64	0.35	0.35	0.51	1.61	0.30	0.34	0.50	0.25	1.66	0.86	0.86	0.88	0.58
<b>Delayed Care Due to Cost</b>																
Yes	8.47	23.23	10.04	4.83	3.58*	8.77	27.12	5.67	3.97	2.87*	7.32	22.94	8.76	5.87*	3.39*	11.36
	0.30	2.23	1.08	0.46	0.60	0.53	2.04	0.48	0.39	0.67	0.41	2.24	1.05	0.85	0.76	0.74
No	91.53	76.77	89.96	95.17	96.42	91.23	72.88	94.33	96.03	97.13	92.68	77.06	91.24	94.13	96.61	88.64
	0.30	2.23	1.08	0.46	0.60	0.53	2.04	0.48	0.39	0.67	0.41	2.24	1.05	0.85	0.76	0.74

**Table 5.7 Indicators of Access to Care for Non-institutionalized Medicare Beneficiaries, by Living Arrangement and Age, 2003**

Community-Only Residents<sup>1</sup>

Indicator of Access to Care	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
<b>Beneficiaries (in 000s)</b>	40,125	1,534	4,224	4,435	1,937	12,130	2,235	11,450	6,134	1,071	20,890	2,037	2,287	1,803	978	7,105
	<i>120</i>	<i>90</i>	<i>119</i>	<i>82</i>	<i>55</i>	<i>184</i>	<i>104</i>	<i>145</i>	<i>114</i>	<i>45</i>	<i>172</i>	<i>69</i>	<i>83</i>	<i>54</i>	<i>40</i>	<i>130</i>
<b>Beneficiaries as a Percent of Column Total</b>																
<b>Continuity of Care</b>																
<b>Length of Association with Usual Source of Care</b>																
No usual source <sup>2</sup>	4.68	7.46	6.80	4.22	4.27*	5.53	3.36*	4.51	2.76	1.73*	3.73	8.69	6.09*	4.00*	4.07*	6.03
	<i>0.19</i>	<i>1.95</i>	<i>0.81</i>	<i>0.45</i>	<i>0.66</i>	<i>0.36</i>	<i>0.55</i>	<i>0.39</i>	<i>0.35</i>	<i>0.58</i>	<i>0.24</i>	<i>0.89</i>	<i>0.90</i>	<i>0.73</i>	<i>0.98</i>	<i>0.45</i>
Less than 1 year	8.62	9.81	8.06	8.66	9.93	8.79	10.04	8.04	7.79	7.75*	8.17	10.85	6.87*	11.75	9.97	9.67
	<i>0.24</i>	<i>1.52</i>	<i>0.79</i>	<i>0.64</i>	<i>0.96</i>	<i>0.45</i>	<i>1.12</i>	<i>0.52</i>	<i>0.50</i>	<i>1.15</i>	<i>0.37</i>	<i>1.30</i>	<i>1.17</i>	<i>1.20</i>	<i>1.29</i>	<i>0.69</i>
1 to less than 3 years	18.81	20.83	19.00	18.70	18.47	19.03	19.22	17.43	16.67	16.23	17.34	22.46	25.26	21.01	21.17	22.82
	<i>0.41</i>	<i>2.01</i>	<i>1.17</i>	<i>0.81</i>	<i>1.35</i>	<i>0.61</i>	<i>1.84</i>	<i>0.87</i>	<i>0.67</i>	<i>1.58</i>	<i>0.57</i>	<i>1.70</i>	<i>1.98</i>	<i>1.51</i>	<i>1.63</i>	<i>0.90</i>
3 to less than 5 years	16.04	21.31	15.39	14.80	13.70	15.64	20.49	16.06	14.98	13.52	16.08	17.72	16.65	16.10	14.91	16.58
	<i>0.33</i>	<i>2.36</i>	<i>0.97</i>	<i>0.86</i>	<i>1.03</i>	<i>0.48</i>	<i>1.86</i>	<i>0.67</i>	<i>0.82</i>	<i>1.51</i>	<i>0.50</i>	<i>1.59</i>	<i>1.62</i>	<i>1.40</i>	<i>1.55</i>	<i>0.75</i>
5 years or more	51.85	40.60	50.76	53.63	53.62	51.00	46.90	53.97	57.80	60.77	54.68	40.28	45.13	47.14	49.89	44.89
	<i>0.52</i>	<i>2.73</i>	<i>1.36</i>	<i>1.25</i>	<i>1.44</i>	<i>0.81</i>	<i>1.99</i>	<i>1.00</i>	<i>0.96</i>	<i>2.26</i>	<i>0.72</i>	<i>2.04</i>	<i>2.05</i>	<i>2.12</i>	<i>2.10</i>	<i>0.97</i>

Source: Medicare Current Beneficiary Survey

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

The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview

It excludes beneficiaries who resided in a long-term care facility at the time of their interview

The percentage of responses for "None" under "Usual Source of Care" differs from the percentage of responses for "No usual source" under "Length of Association with Usual Source of Care" because of differences in the number of missing responses for the two variables. See the entry *Missing values* in Appendix B for further explanation.

HMO stands for Health Maintenance Organization.

OPD stands for Outpatient Department; ER stands for Emergency Room.

**Table 5.8 Measures of Satisfaction with Care for Non-institutionalized Medicare Beneficiaries, by Living Arrangement and Age, 2003**

Community-Only Residents<sup>1</sup>

Measure of Satisfaction with Care	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
<b>Beneficiaries (in 000s)</b>	40,125	1,534	4,224	4,435	1,937	12,130	2,235	11,450	6,134	1,071	20,890	2,037	2,287	1,803	978	7,105
	120	90	119	82	55	184	104	145	114	45	172	69	83	54	40	130
<b>Beneficiaries as a Percent of Column Total<sup>2</sup></b>																
<b>Quality of Care</b>																
<b>General Care</b>																
Very Satisfied <sup>3</sup>	30.59	23.63	30.81	28.65	27.68	28.62	23.92	35.08	34.05	28.64	33.25	22.42	29.45	27.18	24.12	26.12
	0.75	2.49	1.50	1.17	1.70	1.00	2.08	1.10	1.04	1.80	0.91	1.91	1.83	1.79	1.90	1.01
(Very) Unsatisfied <sup>4</sup>	3.78	9.56	3.83	3.91	2.95*	4.44	7.65	2.36	3.12	1.75*	3.12	6.17	4.37*	3.82*	3.23*	4.59
	0.18	1.36	0.50	0.50	0.60	0.33	1.16	0.24	0.31	0.51	0.19	1.00	0.79	0.69	0.87	0.41
<b>Follow-up Care</b>																
Very Satisfied <sup>3</sup>	19.73	15.50	19.84	18.71	15.61	18.20	18.74	24.00	20.59	16.69	22.06	12.93	16.98	17.18	13.78	15.43
	0.66	2.00	1.42	1.12	1.28	0.88	2.06	1.06	0.90	1.56	0.84	1.57	1.46	1.47	1.62	0.75
(Very) Unsatisfied <sup>4</sup>	3.20	7.81*	3.24*	3.46	2.59*	3.79	7.33	2.28	2.28	1.61*	2.79	4.88	2.99*	2.79*	2.48*	3.41
	0.15	1.61	0.58	0.42	0.53	0.34	0.83	0.25	0.32	0.54	0.17	0.83	0.71	0.52	0.69	0.41
<b>Availability</b>																
Very Satisfied <sup>3</sup>	10.39	9.99	9.14	8.99	9.94	9.32	10.75	11.75	10.57	12.18	11.32	9.74	8.10	10.63	10.12	9.49
	0.58	1.96	1.00	0.72	0.93	0.63	1.78	0.88	0.85	1.54	0.76	1.26	1.21	1.27	1.51	0.69
(Very) Unsatisfied <sup>4</sup>	4.19	8.61	3.10*	3.14	2.30*	3.68	10.27	3.66	3.80	4.14*	4.43	6.81	3.28*	3.22*	3.70*	4.33
	0.23	1.26	0.66	0.43	0.43	0.37	1.28	0.39	0.38	0.95	0.32	1.05	0.60	0.58	0.88	0.41
<b>Ease of Access to Doctor</b>																
Very Satisfied <sup>3</sup>	20.57	13.40	22.83	19.53	15.02	19.19	15.28	23.98	23.91	17.93	22.72	11.54	20.86	17.76	15.07	16.60
	0.72	1.88	1.46	1.11	1.33	0.83	1.86	1.09	1.02	1.72	0.84	1.59	1.54	1.42	1.68	0.97
(Very) Unsatisfied <sup>4</sup>	5.57	14.73	5.68	5.69	5.97	6.87	8.87	3.52	3.49	3.59*	4.09	10.83	6.59*	6.28*	6.38*	7.70
	0.25	1.71	0.75	0.51	0.84	0.45	1.00	0.43	0.42	0.70	0.29	1.32	1.07	0.92	1.12	0.66
<b>Can Obtain Care in Same Location</b>																
Very Satisfied <sup>3</sup>	15.06	14.43	16.07	13.94	13.34	14.65	11.66	16.75	15.89	14.58	15.84	10.61	14.35	15.08	14.54	13.49
	0.62	1.95	1.13	0.88	1.34	0.68	1.70	0.97	0.87	1.52	0.80	1.22	1.47	1.23	1.77	0.81
(Very) Unsatisfied <sup>4</sup>	5.56	12.18	4.74	3.94	2.92*	5.09	12.29	4.89	4.91	3.17*	5.60	9.60	5.91*	4.59*	3.01*	6.24
	0.26	1.62	0.61	0.43	0.51	0.38	1.19	0.49	0.48	0.64	0.38	1.39	0.97	0.72	0.79	0.57

**Table 5.8 Measures of Satisfaction with Care for Non-institutionalized Medicare Beneficiaries, by Living Arrangement and Age, 2003**

Community-Only Residents<sup>1</sup>

Measure of Satisfaction with Care	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
<b>Beneficiaries (in 000s)</b>	40,125	1,534	4,224	4,435	1,937	12,130	2,235	11,450	6,134	1,071	20,890	2,037	2,287	1,803	978	7,105
	<i>120</i>	<i>90</i>	<i>119</i>	<i>82</i>	<i>55</i>	<i>184</i>	<i>104</i>	<i>145</i>	<i>114</i>	<i>45</i>	<i>172</i>	<i>69</i>	<i>83</i>	<i>54</i>	<i>40</i>	<i>130</i>

**Beneficiaries as a Percent of Column Total<sup>2</sup>**

**Information from Doctor**

Very Satisfied <sup>3</sup>	19.12	14.94	18.98	16.69	14.25	16.88	16.85	23.51	20.06	16.15	21.41	13.75	18.64	16.41	14.91	16.17
	<i>0.68</i>	<i>1.93</i>	<i>1.47</i>	<i>0.95</i>	<i>1.20</i>	<i>0.90</i>	<i>2.06</i>	<i>1.08</i>	<i>1.04</i>	<i>1.43</i>	<i>0.84</i>	<i>1.57</i>	<i>1.47</i>	<i>1.38</i>	<i>1.61</i>	<i>0.79</i>
(Very) Unsatisfied <sup>4</sup>	4.94	11.48	4.66	5.03	4.55*	5.64	10.57	3.09	4.33	2.96*	4.25	8.78	4.91*	4.84*	3.41*	5.79
	<i>0.21</i>	<i>1.64</i>	<i>0.67</i>	<i>0.56</i>	<i>0.81</i>	<i>0.43</i>	<i>1.27</i>	<i>0.34</i>	<i>0.39</i>	<i>0.79</i>	<i>0.23</i>	<i>1.07</i>	<i>0.80</i>	<i>0.81</i>	<i>0.83</i>	<i>0.49</i>

**Doctor's Concern for Overall Health**

Very Satisfied <sup>3</sup>	21.47	17.96	20.83	19.94	17.52	19.62	21.67	25.13	23.08	19.19	23.86	14.65	18.64	18.64	18.98	17.55
	<i>0.68</i>	<i>2.02</i>	<i>1.51</i>	<i>1.07</i>	<i>1.50</i>	<i>0.95</i>	<i>1.89</i>	<i>0.99</i>	<i>1.02</i>	<i>1.87</i>	<i>0.82</i>	<i>1.65</i>	<i>1.62</i>	<i>1.33</i>	<i>1.94</i>	<i>0.83</i>
(Very) Unsatisfied <sup>4</sup>	5.27	12.46	4.60	5.20	4.43*	5.78	11.57	3.72	4.48	4.02*	4.80	8.29	5.05*	4.88*	3.82*	5.76
	<i>0.22</i>	<i>2.00</i>	<i>0.65</i>	<i>0.52</i>	<i>0.68</i>	<i>0.41</i>	<i>1.50</i>	<i>0.37</i>	<i>0.45</i>	<i>0.82</i>	<i>0.28</i>	<i>1.01</i>	<i>0.91</i>	<i>0.72</i>	<i>0.88</i>	<i>0.49</i>

**Cost**

Very Satisfied <sup>3</sup>	16.11	16.94	17.78	15.04	13.09	15.93	11.05	17.59	18.39	15.30	17.01	12.69	13.50	16.87	10.97	13.78
	<i>0.60</i>	<i>2.09</i>	<i>1.34</i>	<i>0.78</i>	<i>1.09</i>	<i>0.75</i>	<i>1.71</i>	<i>1.00</i>	<i>0.89</i>	<i>1.75</i>	<i>0.81</i>	<i>1.40</i>	<i>1.18</i>	<i>1.49</i>	<i>1.51</i>	<i>0.79</i>
(Very) Unsatisfied <sup>4</sup>	16.15	23.00	15.76	12.10	11.89	14.72	33.45	14.52	14.61	14.11	16.55	21.43	18.46	13.64	13.59	17.42
	<i>0.37</i>	<i>2.36</i>	<i>1.07</i>	<i>0.77</i>	<i>1.12</i>	<i>0.61</i>	<i>2.19</i>	<i>0.67</i>	<i>0.79</i>	<i>1.43</i>	<i>0.56</i>	<i>1.71</i>	<i>1.48</i>	<i>1.39</i>	<i>1.40</i>	<i>0.83</i>

Source: Medicare Current Beneficiary Survey

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

1 The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview.

It excludes beneficiaries who resided in a long-term care facility at the time of their interview

2 Column percentages do not sum to 100 percent because the responses to "satisfied" and "no experience" are excluded from the table for all satisfaction variables.

3 Beneficiaries whose response to the question was 'very satisfied'.

4 Beneficiaries whose response to the question was 'unsatisfied' or 'very unsatisfied'.



**Table 5.9 Measures of Propensity to Seek Care for Non-institutionalized Medicare Beneficiaries, by Living Arrangement and Age, 2003**

Community-Only Residents<sup>1</sup>

Measure of Propensity to Seek Care	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
<b>Beneficiaries (in 000s)</b>	40,125	1,534	4,224	4,435	1,937	12,130	2,235	11,450	6,134	1,071	20,890	2,037	2,287	1,803	978	7,105
	120	90	119	82	55	184	104	145	114	45	172	69	83	54	40	130
<b>Beneficiaries as a Percent of Column Total</b>																
<b>Had a Problem and Did Not See a Doctor</b>																
Yes	8.81	25.85	8.42	6.34	4.14*	9.17	22.37	6.42	5.39	4.61*	7.73	21.75	9.58	6.07*	3.78*	11.38
	0.32	2.75	0.87	0.52	0.66	0.55	2.44	0.49	0.52	0.90	0.45	2.21	1.09	0.90	0.70	0.76
No	91.19	74.15	91.58	93.66	95.86	90.83	77.63	93.58	94.61	95.39	92.27	78.25	90.42	93.93	96.22	88.62
	0.32	2.75	0.87	0.52	0.66	0.55	2.44	0.49	0.52	0.90	0.45	2.21	1.09	0.90	0.70	0.76
<b>Ever Had a Prescription You Did Not Fill</b>																
Yes	4.69	9.55	4.24	3.01	1.31*	3.99	13.20	4.19	3.14	1.56*	4.71	9.65	6.22*	3.22*	1.58*	5.81
	0.23	1.37	0.51	0.41	0.32	0.30	1.69	0.45	0.37	0.51	0.37	1.22	1.05	0.63	0.55	0.45
No	95.31	90.45	95.76	96.99	98.69	96.01	86.80	95.81	96.86	98.44	95.29	90.35	93.78	96.78	98.42	94.19
	0.23	1.37	0.51	0.41	0.32	0.30	1.69	0.45	0.37	0.51	0.37	1.22	1.05	0.63	0.55	0.45
<b>Visit a Doctor as Soon as You Feel Bad</b>																
Yes	36.35	39.42	32.81	35.63	38.90	35.64	37.54	34.08	36.36	40.91	35.46	37.12	38.91	44.48	41.44	40.15
	0.60	2.49	1.38	1.26	1.65	0.84	2.16	0.97	0.97	2.31	0.71	1.64	2.04	2.02	1.99	1.11
No	63.65	60.58	67.19	64.37	61.10	64.36	62.46	65.92	63.64	59.09	64.54	62.88	61.09	55.52	58.56	59.85
	0.60	2.49	1.38	1.26	1.65	0.84	2.16	0.97	0.97	2.31	0.71	1.64	2.04	2.02	1.99	1.11
<b>Avoid Going to the Doctor</b>																
Yes	28.81	37.68	30.73	29.05	22.65	29.71	34.15	27.80	23.44	22.52	26.93	38.06	33.80	30.18	24.45	32.82
	0.57	2.50	1.50	1.04	1.38	0.81	2.17	0.88	0.97	1.95	0.70	1.89	1.72	1.88	2.07	1.10
No	71.19	62.32	69.27	70.95	77.35	70.29	65.85	72.20	76.56	77.48	73.07	61.94	66.20	69.82	75.55	67.18
	0.57	2.50	1.50	1.04	1.38	0.81	2.17	0.88	0.97	1.95	0.70	1.89	1.72	1.88	2.07	1.10

**Table 5.9 Measures of Propensity to Seek Care for Non-institutionalized Medicare Beneficiaries, by Living Arrangement and Age, 2003**

Community-Only Residents<sup>1</sup>

Measure of Propensity to Seek Care	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
<b>Beneficiaries (in 000s)</b>	40,125	1,534	4,224	4,435	1,937	12,130	2,235	11,450	6,134	1,071	20,890	2,037	2,287	1,803	978	7,105
	<i>120</i>	<i>90</i>	<i>119</i>	<i>82</i>	<i>55</i>	<i>184</i>	<i>104</i>	<i>145</i>	<i>114</i>	<i>45</i>	<i>172</i>	<i>69</i>	<i>83</i>	<i>54</i>	<i>40</i>	<i>130</i>

**Beneficiaries as a Percent of Column Total**

**Do You Worry About Your  
Health More Than Others**

Yes	19.54	47.46	15.11	12.07	11.10	17.46	55.63	14.57	12.64	13.87	18.36	48.55	19.58	18.18	12.53	26.65
	<i>0.37</i>	<i>2.79</i>	<i>0.85</i>	<i>0.73</i>	<i>1.16</i>	<i>0.60</i>	<i>2.20</i>	<i>0.68</i>	<i>0.68</i>	<i>1.80</i>	<i>0.55</i>	<i>1.92</i>	<i>1.66</i>	<i>1.29</i>	<i>1.54</i>	<i>0.93</i>
No	80.46	52.54	84.89	87.93	88.90	82.54	44.37	85.43	87.36	86.13	81.64	51.45	80.42	81.82	87.47	73.35
	<i>0.37</i>	<i>2.79</i>	<i>0.85</i>	<i>0.73</i>	<i>1.16</i>	<i>0.60</i>	<i>2.20</i>	<i>0.68</i>	<i>0.68</i>	<i>1.80</i>	<i>0.55</i>	<i>1.92</i>	<i>1.66</i>	<i>1.29</i>	<i>1.54</i>	<i>0.93</i>

**When Sick, Do You Keep  
it to Yourself**

Yes	38.32	49.34	40.45	42.35	39.28	42.09	45.29	34.49	33.52	28.99	35.09	47.70	44.38	36.15	31.41	41.49
	<i>0.65</i>	<i>2.55</i>	<i>1.61</i>	<i>1.30</i>	<i>1.69</i>	<i>0.98</i>	<i>2.13</i>	<i>0.97</i>	<i>1.13</i>	<i>1.82</i>	<i>0.80</i>	<i>1.76</i>	<i>2.01</i>	<i>1.61</i>	<i>2.41</i>	<i>1.01</i>
No	61.68	50.66	59.55	57.65	60.72	57.91	54.71	65.51	66.48	71.01	64.91	52.30	55.62	63.85	68.59	58.51
	<i>0.65</i>	<i>2.55</i>	<i>1.61</i>	<i>1.30</i>	<i>1.69</i>	<i>0.98</i>	<i>2.13</i>	<i>0.97</i>	<i>1.13</i>	<i>1.82</i>	<i>0.80</i>	<i>1.76</i>	<i>2.01</i>	<i>1.61</i>	<i>2.41</i>	<i>1.01</i>

Source: Medicare Current Beneficiary Survey

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

<sup>1</sup> The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview. It excludes beneficiaries who resided in a long-term care facility at the time of their interview

**Table 5.10 Indicators of Access to Care for Non-institutionalized Medicare Beneficiaries, by Health Status, 2003**

Community-Only Residents<sup>1</sup>

Indicator of Access to Care	Total <sup>2</sup>	Indicators of Good Health			Indicators of Poor Health		
		Excellent/Very Good Health	No Functional Limitations <sup>3</sup>	Both Indicators	Fair/Poor Health	Three to Six ADLs <sup>4</sup>	Both Indicators
<b>Beneficiaries (in 000s)</b>	40,125	16,168	21,270	12,264	11,646	4,508	3,080
	120	205	194	190	167	131	104
<b>Beneficiaries as a Percent of Column Total</b>							
<b>Access to Care</b>							
<b>Usual Source of Care</b>							
None <sup>5</sup>	4.65	6.10	5.37	6.39	3.74	3.58	3.83*
	0.18	0.34	0.30	0.43	0.32	0.48	0.65
Doctor's office	75.75	75.35	75.82	75.24	75.67	74.52	73.54
	0.54	0.73	0.71	0.83	0.84	1.27	1.60
Doctor's clinic	9.57	9.58	9.52	9.63	9.32	8.84	9.36
	0.49	0.61	0.62	0.70	0.70	0.78	0.96
HMO <sup>6</sup>	4.18	4.64	4.51	4.69	3.05	3.83	3.43*
	0.28	0.42	0.37	0.45	0.32	0.42	0.52
Hospital OPD/ER <sup>7</sup>	1.93	1.33	1.67	1.34	2.69	2.58*	2.84*
	0.15	0.22	0.22	0.25	0.27	0.42	0.62
Other clinic/health center	3.92	2.99	3.11	2.71	5.54	6.65	7.00
	0.19	0.25	0.22	0.26	0.39	0.62	0.81
<b>Difficulty Obtaining Care</b>							
Yes	4.91	2.38	2.42	1.75	10.26	12.82	15.96
	0.24	0.22	0.27	0.23	0.58	0.93	1.33
No	95.09	97.62	97.58	98.25	89.74	87.18	84.04
	0.24	0.22	0.27	0.23	0.58	0.93	1.33
<b>Delayed Care Due to Cost</b>							
Yes	8.47	4.08	4.76	3.13	15.92	18.05	20.60
	0.30	0.31	0.35	0.37	0.79	1.07	1.39
No	91.53	95.92	95.24	96.87	84.08	81.95	79.40
	0.30	0.31	0.35	0.37	0.79	1.07	1.39

**Table 5.10 Indicators of Access to Care for Non-institutionalized Medicare Beneficiaries, by Health Status, 2003**

Community-Only Residents<sup>1</sup>

Indicator of Access to Care	Total <sup>2</sup>	Indicators of Good Health			Indicators of Poor Health		
		Excellent/Very Good Health	No Functional Limitations <sup>3</sup>	Both Indicators	Fair/Poor Health	Three to Six ADLs <sup>4</sup>	Both Indicators
<b>Beneficiaries (in 000s)</b>	40,125	16,168	21,270	12,264	11,646	4,508	3,080
	<i>120</i>	<i>205</i>	<i>194</i>	<i>190</i>	<i>167</i>	<i>131</i>	<i>104</i>

Beneficiaries as a Percent of Column Total

Length of Association with Usual Source of Care		Continuity of Care					
No usual source <sup>5</sup>	4.68	6.13	5.39	6.41	3.76	3.62	3.86*
	<i>0.19</i>	<i>0.34</i>	<i>0.30</i>	<i>0.43</i>	<i>0.32</i>	<i>0.49</i>	<i>0.66</i>
Less than 1 year	8.62	8.30	8.34	8.25	9.64	10.39	10.88
	<i>0.24</i>	<i>0.36</i>	<i>0.35</i>	<i>0.45</i>	<i>0.51</i>	<i>0.87</i>	<i>1.11</i>
1 to less than 3 years	18.81	17.17	17.45	16.30	21.13	20.88	22.63
	<i>0.41</i>	<i>0.64</i>	<i>0.57</i>	<i>0.72</i>	<i>0.64</i>	<i>1.12</i>	<i>1.30</i>
3 to less than 5 years	16.04	15.02	15.79	15.07	17.25	16.09	16.30
	<i>0.33</i>	<i>0.47</i>	<i>0.44</i>	<i>0.58</i>	<i>0.61</i>	<i>0.95</i>	<i>1.31</i>
5 years or more	51.85	53.38	53.03	53.98	48.22	49.02	46.33
	<i>0.52</i>	<i>0.77</i>	<i>0.70</i>	<i>0.85</i>	<i>0.90</i>	<i>1.37</i>	<i>1.70</i>

Source: Medicare Current Beneficiary Survey

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

1 The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview.

It excludes beneficiaries who resided in a long-term care facility at the time of their interview.

2 "Indicators of Good Health" and "Indicators of Poor Health" do not contain mutually exclusive categories. Therefore, beneficiary counts sum to more than the total number of Medicare beneficiaries.

3 "No Functional Limitations" means that the beneficiary did not report limitations in any instrumental activities of daily living (IADLs) or activities of daily living (ADLs).

See Appendix B for definitions of IADL and ADL.

4 ADL stands for Activity of Daily Living.

5 The percentage of responses for "None" under "Usual Source of Care" differs from the percentage of responses for "No usual source" under "Length of Association with Usual Source of Care" because of differences in the number of missing responses for the two variables. See the entry *Missing values* in Appendix B for further explanation.

6 HMO stands for Health Maintenance Organization.

7 OPD stands for Outpatient Department; ER stands for Emergency Room.

**Table 5.11 Measures of Satisfaction with Care for Non-institutionalized Medicare Beneficiaries, by Health Status, 2003**

Community-Only Residents<sup>1</sup>

Measure of	Total <sup>2</sup>	Indicators of Good Health			Indicators of Poor Health		
		Excellent/Very Good Health	No Functional Limitations <sup>3</sup>	Both Indicators	Fair/Poor Health	Three to Six ADLs <sup>4</sup>	Both Indicators
Satisfaction with Care							
Beneficiaries (in 000s)	40,125	16,168	21,270	12,264	11,646	4,508	3,080
	120	205	194	190	167	131	104
Beneficiaries as a Percent of Column Total <sup>5</sup>							
Quality of Care							
General Care							
Very Satisfied <sup>6</sup>	30.59	39.52	32.90	39.69	22.46	25.59	24.16
	0.75	1.03	0.97	1.18	0.85	1.39	1.58
(Very) Unsatisfied <sup>7</sup>	3.78	2.19	2.51	1.79	6.58	6.64	7.20
	0.18	0.19	0.18	0.21	0.45	0.72	0.96
Follow-up Care							
Very Satisfied <sup>6</sup>	19.73	24.19	21.02	24.54	14.57	16.51	14.78
	0.66	0.92	0.90	1.07	0.79	1.05	1.14
(Very) Unsatisfied <sup>7</sup>	3.20	1.78	1.89	1.27	6.15	6.80	8.33
	0.15	0.17	0.18	0.17	0.37	0.74	1.01
Access/Coordination of Care							
Availability							
Very Satisfied <sup>6</sup>	10.39	11.58	10.25	11.51	9.71	12.11	11.58
	0.58	0.72	0.74	0.85	0.75	0.97	1.23
(Very) Unsatisfied <sup>7</sup>	4.19	2.64	2.53	2.32	7.27	8.46	10.07
	0.23	0.24	0.22	0.27	0.49	0.72	1.01
Ease of Access to Doctor							
Very Satisfied <sup>6</sup>	20.57	27.13	23.14	27.77	13.76	14.95	13.00
	0.72	0.98	0.93	1.13	0.74	1.17	1.18
(Very) Unsatisfied <sup>7</sup>	5.57	3.29	3.11	2.54	9.59	12.84	14.36
	0.25	0.28	0.24	0.31	0.56	0.87	1.11
Can Obtain Care in Same Location							
Very Satisfied <sup>6</sup>	15.06	19.45	16.26	19.81	10.50	12.56	10.84
	0.62	0.82	0.82	0.96	0.71	0.93	1.08
(Very) Unsatisfied <sup>7</sup>	5.56	3.69	3.95	3.42	9.45	11.24	13.84
	0.26	0.33	0.29	0.38	0.52	0.88	1.06

**Table 5.11 Measures of Satisfaction with Care for Non-institutionalized Medicare Beneficiaries, by Health Status, 2003**

Community-Only Residents<sup>1</sup>

Measure of	Total <sup>2</sup>	Indicators of Good Health			Indicators of Poor Health		
		Excellent/Very Good Health	No Functional Limitations <sup>3</sup>	Both Indicators	Fair/Poor Health	Three to Six ADLs <sup>4</sup>	Both Indicators
Satisfaction with Care							
Beneficiaries (in 000s)	40,125	16,168	21,270	12,264	11,646	4,508	3,080
	120	205	194	190	167	131	104
Beneficiaries as a Percent of Column Total <sup>5</sup>							
Relationship with Primary Doctor							
Information from Doctor							
Very Satisfied <sup>6</sup>	19.12	25.09	21.00	25.69	13.56	14.79	13.14
	0.68	1.00	0.92	1.15	0.76	1.01	1.22
(Very) Unsatisfied <sup>7</sup>	4.94	2.57	2.87	1.95	9.03	10.72	12.58
	0.21	0.22	0.20	0.20	0.50	0.83	1.11
Doctor's Concern for Overall Health							
Very Satisfied <sup>6</sup>	21.47	26.90	22.74	26.80	16.13	19.21	16.93
	0.68	0.94	0.90	1.05	0.80	1.15	1.21
(Very) Unsatisfied <sup>7</sup>	5.27	3.07	3.42	2.55	9.39	9.73	12.72
	0.22	0.24	0.22	0.25	0.56	0.82	1.15
Cost of Care							
Cost							
Very Satisfied <sup>6</sup>	16.11	20.44	17.23	20.76	11.87	13.33	11.89
	0.60	0.87	0.83	1.08	0.71	0.81	1.06
(Very) Unsatisfied <sup>7</sup>	16.15	11.23	12.16	10.25	23.63	25.85	28.78
	0.37	0.38	0.43	0.44	0.81	1.07	1.40

Source: Medicare Current Beneficiary Survey

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

<sup>1</sup> The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview.

It excludes beneficiaries who resided in a long-term care facility at the time of their interview.

<sup>2</sup> "Indicators of Good Health" and "Indicators of Poor Health" do not contain mutually exclusive categories. Therefore, beneficiary counts sum to more than the total number of Medicare beneficiaries.

<sup>3</sup> "No Functional Limitations" means that the beneficiary did not report limitations in any instrumental activities of daily living (IADLs) or activities of daily living (ADLs).

See Appendix B for definitions of IADL and ADL.

<sup>4</sup> ADL stands for Activity of Daily Living.

<sup>5</sup> Column percentages do not sum to 100 percent because the responses for "satisfied" and "no experience" are excluded from the table for all satisfaction variables.

<sup>6</sup> Beneficiaries whose response to the question was 'very satisfied'.

<sup>7</sup> Beneficiaries whose response to the question was 'unsatisfied' or 'very unsatisfied'.

**Table 5.12 Measures of Propensity to Seek Care for Non-institutionalized Medicare Beneficiaries, by Health Status, 2003**

Community-Only Residents<sup>1</sup>

Measure of Propensity to Seek Care	Total <sup>2</sup>	Indicators of Good Health			Indicators of Poor Health		
		Excellent/Very Good Health	No Functional Limitations <sup>3</sup>	Both Indicators	Fair/Poor Health	Three to Six ADLs <sup>4</sup>	Both Indicators
<b>Beneficiaries (in 000s)</b>	40,125	16,168	21,270	12,264	11,646	4,508	3,080
	120	205	194	190	167	131	104
<b>Beneficiaries as a Percent of Column Total</b>							
<b>Had a Problem and Did Not See a Doctor</b>							
Yes	8.81	4.41	4.68	3.65	16.48	18.83	20.77
	0.32	0.29	0.33	0.34	0.76	1.20	1.39
No	91.19	95.59	95.32	96.35	83.52	81.17	79.23
	0.32	0.29	0.33	0.34	0.76	1.20	1.39
<b>Ever Had a Prescription You Did Not Fill</b>							
Yes	4.69	3.33	3.25	2.90	7.10	8.39	9.66
	0.23	0.32	0.26	0.34	0.48	0.78	1.06
No	95.31	96.67	96.75	97.10	92.90	91.61	90.34
	0.23	0.32	0.26	0.34	0.48	0.78	1.06
<b>Visit a Doctor as Soon as You Feel Bad</b>							
Yes	36.35	32.80	34.65	31.42	39.77	37.77	38.24
	0.60	0.70	0.76	0.82	1.02	1.26	1.64
No	63.65	67.20	65.35	68.58	60.23	62.23	61.76
	0.60	0.70	0.76	0.82	1.02	1.26	1.64
<b>Avoid Going to the Doctor</b>							
Yes	28.81	27.69	27.48	27.22	31.88	32.69	32.44
	0.57	0.72	0.72	0.81	0.84	1.49	1.79
No	71.19	72.31	72.52	72.78	68.12	67.31	67.56
	0.57	0.72	0.72	0.81	0.84	1.49	1.79

**Table 5.12 Measures of Propensity to Seek Care for Non-institutionalized Medicare Beneficiaries, by Health Status, 2003**

Community-Only Residents<sup>1</sup>

Measure of Propensity to Seek Care	Total <sup>2</sup>	Indicators of Good Health			Indicators of Poor Health		
		Excellent/Very Good Health	No Functional Limitations <sup>3</sup>	Both Indicators	Fair/Poor Health	Three to Six ADLs <sup>4</sup>	Both Indicators
<b>Beneficiaries (in 000s)</b>	40,125	16,168	21,270	12,264	11,646	4,508	3,080
	<i>120</i>	<i>205</i>	<i>194</i>	<i>190</i>	<i>167</i>	<i>131</i>	<i>104</i>
<b>Beneficiaries as a Percent of Column Total</b>							
<b>Do You Worry About Your Health More Than Others</b>							
Yes	19.54	6.95	10.98	5.58	40.01	40.58	48.75
	<i>0.37</i>	<i>0.36</i>	<i>0.41</i>	<i>0.41</i>	<i>0.86</i>	<i>1.37</i>	<i>1.66</i>
No	80.46	93.05	89.02	94.42	59.99	59.42	51.25
	<i>0.37</i>	<i>0.36</i>	<i>0.41</i>	<i>0.41</i>	<i>0.86</i>	<i>1.37</i>	<i>1.66</i>
<b>When Sick, Do You Keep it to Yourself</b>							
Yes	38.32	36.67	36.23	36.18	42.32	41.04	42.37
	<i>0.65</i>	<i>0.80</i>	<i>0.76</i>	<i>0.94</i>	<i>1.02</i>	<i>1.45</i>	<i>1.61</i>
No	61.68	63.33	63.77	63.82	57.68	58.96	57.63
	<i>0.65</i>	<i>0.80</i>	<i>0.76</i>	<i>0.94</i>	<i>1.02</i>	<i>1.45</i>	<i>1.61</i>

Source: Medicare Current Beneficiary Survey

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

<sup>1</sup> The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview.

It excludes beneficiaries who resided in a long-term care facility at the time of their interview.

<sup>2</sup> "Indicators of Good Health" and "Indicators of Poor Health" do not contain mutually exclusive categories. Therefore, beneficiary counts sum to more than the total number of Medicare beneficiaries.

<sup>3</sup> "No Functional Limitations" means that the beneficiary did not report limitations in any instrumental activities of daily living (IADLs) or activities of daily living (ADLs).

See Appendix B for definitions of IADL and ADL.

<sup>4</sup> ADL stands for Activity of Daily Living.



**Table 5.13 Indicators of Access to Care for Non-institutionalized Medicare Beneficiaries, by Insurance Coverage, 2003**

Community-Only Residents<sup>1</sup>

Indicator of Access to Care	Total	Medicare Risk HMO	Supplemental Health Insurance				Medicare Fee-For-Service Only	Other
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance		
<b>Beneficiaries (in 000s)</b>	40,125	4,984	6,124	9,294	11,642	1,709	5,676	696
	120	124	123	187	205	75	140	61
<b>Beneficiaries as a Percent of Column Total</b>								
<b>Access to Care</b>								
<b>Usual Source of Care</b>								
None <sup>2</sup>	4.65	1.31*	6.42	4.56	3.61	2.34*	8.55	5.58*
	0.18	0.22	0.72	0.35	0.35	0.89	0.69	1.48
Doctor's office	75.75	65.65	70.52	81.89	82.89	84.01	63.08	75.46
	0.54	1.74	1.06	0.97	0.78	1.67	1.26	2.75
Doctor's clinic	9.57	6.86	12.39	10.28	8.65	9.17	10.20	5.95*
	0.49	0.64	0.85	0.98	0.69	1.06	0.90	2.10
HMO <sup>3</sup>	4.18	23.82	0.79*	0.37*	1.87	1.09*	2.82	1.84*
	0.28	1.82	0.18	0.09	0.29	0.57	0.44	0.35
Hospital OPD/ER <sup>4</sup>	1.93	0.86*	5.29	0.75*	1.35	1.75*	2.50	1.47*
	0.15	0.24	0.63	0.14	0.28	0.39	0.40	0.86
Other clinic/health center	3.92	1.50*	4.59	2.16	1.64	1.65*	12.84	9.69*
	0.19	0.32	0.51	0.25	0.21	0.70	0.86	2.16
<b>Difficulty Obtaining Care</b>								
Yes	4.91	4.12	11.11	1.96	2.62	1.44*	9.28	6.74*
	0.24	0.62	0.85	0.27	0.28	0.52	0.88	2.03
No	95.09	95.88	88.89	98.04	97.38	98.56	90.72	93.26
	0.24	0.62	0.85	0.27	0.28	0.52	0.88	2.03
<b>Delayed Care Due to Cost</b>								
Yes	8.47	5.59	13.12	4.79	5.33	2.76*	18.87	19.32*
	0.30	0.60	0.83	0.41	0.43	0.54	1.19	3.40
No	91.53	94.41	86.88	95.21	94.67	97.24	81.13	80.68
	0.30	0.60	0.83	0.41	0.43	0.54	1.19	3.40

**Table 5.13 Indicators of Access to Care for Non-institutionalized Medicare Beneficiaries, by Insurance Coverage, 2003**

Community-Only Residents<sup>1</sup>

Indicator of Access to Care	Total	Medicare Risk HMO	Supplemental Health Insurance				Medicare Fee-For-Service Only	Other
			Medicaid	Individually Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance		
<b>Beneficiaries (in 000s)</b>	40,125	4,984	6,124	9,294	11,642	1,709	5,676	696
	<i>120</i>	<i>124</i>	<i>123</i>	<i>187</i>	<i>205</i>	<i>75</i>	<i>140</i>	<i>61</i>
<b>Beneficiaries as a Percent of Column Total</b>								
<b>Length of Association with Usual Source of Care</b>								
No usual source <sup>2</sup>	4.68	1.32*	6.49	4.59	3.62	2.34*	8.63	5.62*
	<i>0.19</i>	<i>0.22</i>	<i>0.72</i>	<i>0.36</i>	<i>0.35</i>	<i>0.89</i>	<i>0.69</i>	<i>1.49</i>
Less than 1 year	8.62	12.06	11.24	7.14	7.26	5.82*	9.21	5.76*
	<i>0.24</i>	<i>0.84</i>	<i>0.77</i>	<i>0.53</i>	<i>0.48</i>	<i>1.11</i>	<i>0.70</i>	<i>1.18</i>
1 to less than 3 years	18.81	23.23	22.74	17.11	15.63	18.48	19.79	21.95*
	<i>0.41</i>	<i>0.98</i>	<i>0.97</i>	<i>0.84</i>	<i>0.77</i>	<i>1.96</i>	<i>0.98</i>	<i>3.12</i>
3 to less than 5 years	16.04	17.38	17.41	15.51	15.03	10.96	17.93	15.41*
	<i>0.33</i>	<i>0.78</i>	<i>0.92</i>	<i>0.70</i>	<i>0.69</i>	<i>1.40</i>	<i>1.19</i>	<i>2.79</i>
5 years or more	51.85	46.01	42.11	55.65	58.47	62.39	44.44	51.26
	<i>0.52</i>	<i>1.26</i>	<i>1.15</i>	<i>1.22</i>	<i>0.97</i>	<i>2.21</i>	<i>1.46</i>	<i>3.06</i>

Source: Medicare Current Beneficiary Survey

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

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.

The percentage of responses for "None" under "Usual Source of Care" differs from the percentage of responses for "No usual source" under "Length of Association with Usual Source of Care" because of differences in the number of missing responses for the two variables. See the entry *Missing values* in Appendix B for further explanation.

HMO stands for Health Maintenance Organization.

OPD stands for Outpatient Department; ER stands for Emergency Room.

**Table 5.14 Measures of Satisfaction with Care for Non-institutionalized Medicare Beneficiaries, by Insurance Coverage, 2003**

Community-Only Residents<sup>1</sup>

Measure of Satisfaction with Care	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		
<b>Beneficiaries (in 000s)</b>	40,125	4,984	6,124	9,294	11,642	1,709	5,676	696
	120	124	123	187	205	75	140	61
<b>Beneficiaries as a Percent of Column Total<sup>3</sup></b>								
<b>Quality of Care</b>								
<b>General Care</b>								
Very Satisfied <sup>4</sup>	30.59	29.98	22.07	32.32	34.11	43.73	26.87	26.24
	0.75	1.22	1.26	1.31	1.03	1.98	1.68	3.15
(Very) Unsatisfied <sup>5</sup>	3.78	4.81	5.76	2.76	2.64	1.46*	4.85	8.42*
	0.18	0.54	0.56	0.30	0.29	0.72	0.53	1.54
<b>Follow-up Care</b>								
Very Satisfied <sup>4</sup>	19.73	18.11	14.38	20.29	22.65	26.41	18.38	16.21*
	0.66	1.09	1.11	1.20	0.88	1.77	1.22	2.90
(Very) Unsatisfied <sup>5</sup>	3.20	3.19	4.68	2.05	3.04	2.13*	4.01	4.37*
	0.15	0.41	0.49	0.25	0.31	0.76	0.49	1.23
<b>Availability</b>								
Very Satisfied <sup>4</sup>	10.39	8.56	9.33	10.57	11.33	11.05	10.53	12.11*
	0.58	0.69	0.84	0.96	0.68	1.55	1.19	3.01
(Very) Unsatisfied <sup>5</sup>	4.19	3.41	5.60	3.49	4.14	4.41*	4.77	2.01*
	0.23	0.51	0.61	0.40	0.42	1.00	0.57	0.83
<b>Ease of Access to Doctor</b>								
Very Satisfied <sup>4</sup>	20.57	20.51	12.34	22.82	23.18	30.48	18.65	11.37*
	0.72	0.89	0.96	1.23	1.04	2.37	1.34	2.35
(Very) Unsatisfied <sup>5</sup>	5.57	4.11	11.32	3.47	3.98	4.82*	7.63	4.94*
	0.25	0.47	0.93	0.36	0.34	1.28	0.77	1.34
<b>Can Obtain Care in Same Location</b>								
Very Satisfied <sup>4</sup>	15.06	16.87	12.48	14.78	15.85	18.12	14.79	10.32*
	0.62	0.89	1.01	1.11	0.80	1.72	1.18	2.17
(Very) Unsatisfied <sup>5</sup>	5.56	4.91	7.60	4.20	5.42	6.45*	6.15	5.48*
	0.26	0.67	0.79	0.43	0.47	1.25	0.64	1.58

**Table 5.14 Measures of Satisfaction with Care for Non-institutionalized Medicare Beneficiaries, by Insurance Coverage, 2003**

Community-Only Residents<sup>1</sup>

Measure of Satisfaction with Care	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		
<b>Beneficiaries (in 000s)</b>	40,125	4,984	6,124	9,294	11,642	1,709	5,676	696
	<i>120</i>	<i>124</i>	<i>123</i>	<i>187</i>	<i>205</i>	<i>75</i>	<i>140</i>	<i>61</i>
<b>Information from Doctor</b>								
Very Satisfied <sup>4</sup>	19.12	17.77	13.65	19.24	22.22	28.04	17.01	18.26*
	<i>0.68</i>	<i>0.91</i>	<i>1.12</i>	<i>1.19</i>	<i>0.97</i>	<i>1.65</i>	<i>1.20</i>	<i>3.04</i>
(Very) Unsatisfied <sup>5</sup>	4.94	5.44	7.06	3.68	4.43	2.43*	5.79	7.33*
	<i>0.21</i>	<i>0.61</i>	<i>0.66</i>	<i>0.34</i>	<i>0.32</i>	<i>0.82</i>	<i>0.62</i>	<i>1.92</i>
<b>Doctor's Concern for Overall Health</b>								
Very Satisfied <sup>4</sup>	21.47	20.54	14.66	22.82	25.12	28.21	17.88	21.16*
	<i>0.68</i>	<i>1.00</i>	<i>1.07</i>	<i>1.25</i>	<i>0.86</i>	<i>2.11</i>	<i>1.26</i>	<i>3.11</i>
(Very) Unsatisfied <sup>5</sup>	5.27	6.11	7.79	3.79	4.73	3.91*	5.59	6.40*
	<i>0.22</i>	<i>0.62</i>	<i>0.68</i>	<i>0.31</i>	<i>0.43</i>	<i>1.04</i>	<i>0.56</i>	<i>1.96</i>
<b>Cost</b>								
Very Satisfied <sup>4</sup>	16.11	12.93	16.76	15.73	18.05	21.19	14.09	9.81*
	<i>0.60</i>	<i>0.82</i>	<i>1.07</i>	<i>1.15</i>	<i>0.77</i>	<i>2.04</i>	<i>1.03</i>	<i>1.82</i>
(Very) Unsatisfied <sup>5</sup>	16.15	19.04	13.10	16.02	13.60	11.27	23.11	22.11*
	<i>0.37</i>	<i>1.04</i>	<i>0.80</i>	<i>0.66</i>	<i>0.65</i>	<i>1.75</i>	<i>1.23</i>	<i>3.55</i>

Source: Medicare Current Beneficiary Survey

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

1 The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview.

It excludes beneficiaries who resided in a long-term care facility at the time of their interview.

2 HMO stands for Health Maintenance Organization.

3 Column percentages do not sum to 100 percent because the responses to "satisfied" and "no experience" are excluded from the table for all satisfaction variables.

4 Beneficiaries whose response to the question was 'very satisfied'.

5 Beneficiaries whose response to the question was 'unsatisfied' or 'very unsatisfied'.

**Table 5.15 Measures of Propensity to Seek Care for Non-institutionalized Medicare Beneficiaries, by Insurance Coverage, 2003**

Community-Only Residents<sup>1</sup>

Measure of Propensity to Seek Care	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		
<b>Beneficiaries (in 000s)</b>	40,125	4,984	6,124	9,294	11,642	1,709	5,676	696
	120	124	123	187	205	75	140	61
<b>Beneficiaries as a Percent of Column Total<sup>4</sup></b>								
<b>Had a Problem and Did Not See a Doctor</b>								
Yes	8.81	7.32	15.53	5.48	6.63	4.28*	13.62	13.44*
	0.32	0.77	0.98	0.38	0.50	0.83	0.90	2.78
No	91.19	92.68	84.47	94.52	93.37	95.72	86.38	86.56
	0.32	0.77	0.98	0.38	0.50	0.83	0.90	2.78
<b>Ever Had a Prescription You Did Not Fill</b>								
Yes	4.69	5.17	5.82	4.34	3.40	1.88*	6.97	5.74*
	0.23	0.58	0.50	0.38	0.32	0.67	0.68	1.52
No	95.31	94.83	94.18	95.66	96.60	98.12	93.03	94.26
	0.23	0.58	0.50	0.38	0.32	0.67	0.68	1.52
<b>Visit a Doctor as Soon as You Feel Bad</b>								
Yes	36.35	40.80	42.29	33.52	36.35	34.80	31.25	35.06
	0.60	1.58	1.11	1.08	0.89	2.35	1.37	3.26
No	63.65	59.20	57.71	66.48	63.65	65.20	68.75	64.94
	0.60	1.58	1.11	1.08	0.89	2.35	1.37	3.26
<b>Avoid Going to the Doctor</b>								
Yes	28.81	26.11	35.82	26.20	25.09	18.36	37.19	40.94
	0.57	1.06	1.37	0.80	0.73	1.99	1.37	4.80
No	71.19	73.89	64.18	73.80	74.91	81.64	62.81	59.06
	0.57	1.06	1.37	0.80	0.73	1.99	1.37	4.80

**Table 5.15 Measures of Propensity to Seek Care for Non-institutionalized Medicare Beneficiaries, by Insurance Coverage, 2003**

Community-Only Residents<sup>1</sup>

Measure of Propensity to Seek Care	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		
<b>Beneficiaries (in 000s)</b>	40,125	4,984	6,124	9,294	11,642	1,709	5,676	696
	<i>120</i>	<i>124</i>	<i>123</i>	<i>187</i>	<i>205</i>	<i>75</i>	<i>140</i>	<i>61</i>
<b>Do You Worry About Your Health More Than Others</b>								
Yes	19.54	16.49	36.47	13.19	16.19	12.13	22.42	28.36
	<i>0.37</i>	<i>0.99</i>	<i>1.12</i>	<i>0.60</i>	<i>0.68</i>	<i>1.59</i>	<i>0.83</i>	<i>3.64</i>
No	80.46	83.51	63.53	86.81	83.81	87.87	77.58	71.64
	<i>0.37</i>	<i>0.99</i>	<i>1.12</i>	<i>0.60</i>	<i>0.68</i>	<i>1.59</i>	<i>0.83</i>	<i>3.64</i>
<b>When Sick, Do You Keep it to Yourself</b>								
Yes	38.32	34.25	44.15	38.04	35.49	32.16	43.28	42.27
	<i>0.65</i>	<i>1.34</i>	<i>1.33</i>	<i>1.13</i>	<i>0.87</i>	<i>2.36</i>	<i>1.35</i>	<i>4.23</i>
No	61.68	65.75	55.85	61.96	64.51	67.84	56.72	57.73
	<i>0.65</i>	<i>1.34</i>	<i>1.33</i>	<i>1.13</i>	<i>0.87</i>	<i>2.36</i>	<i>1.35</i>	<i>4.23</i>

Source: Medicare Current Beneficiary Survey

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

<sup>1</sup> The term *community-only residents* includes beneficiaries who resided in the community at the time of their interview.

It excludes beneficiaries who resided in a long-term care facility at the time of their interview.

<sup>2</sup> HMO stands for Health Maintenance Organization.