

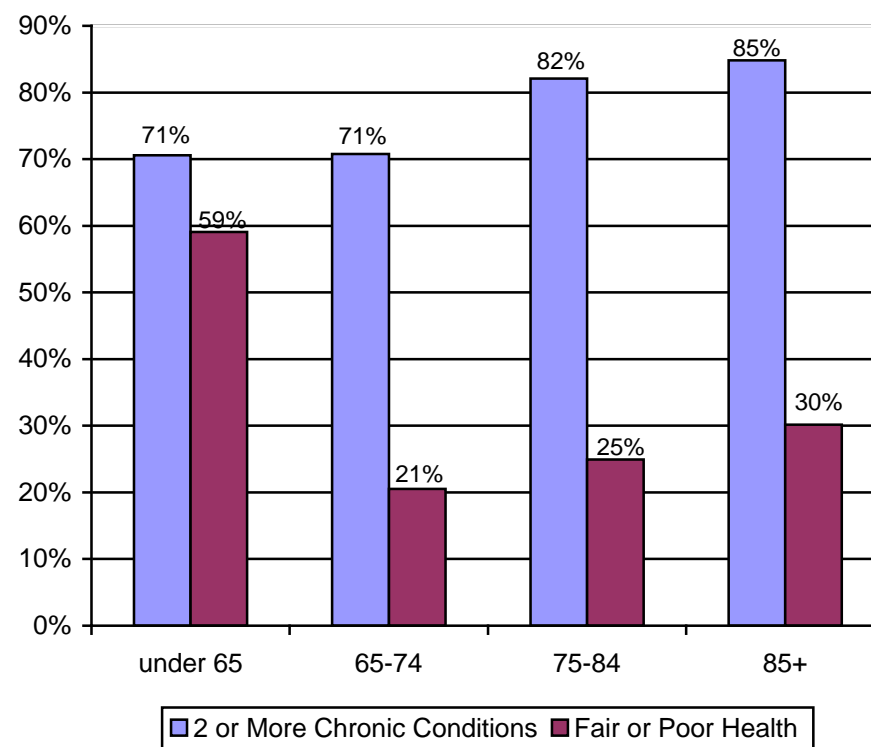
Section 2

Health Status in 2006

Health Status, by Age

- Fifty-nine percent of disabled beneficiaries considered their health fair or poor, while only 21 percent of those 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.
- Seventy-three percent of beneficiaries' aged 85 or older reported some type of functional limitation. Fifty-eight percent of those aged 85 and older 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 aged 85 and older 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.
- Fifty-nine percent of beneficiaries over aged 85 and older 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.

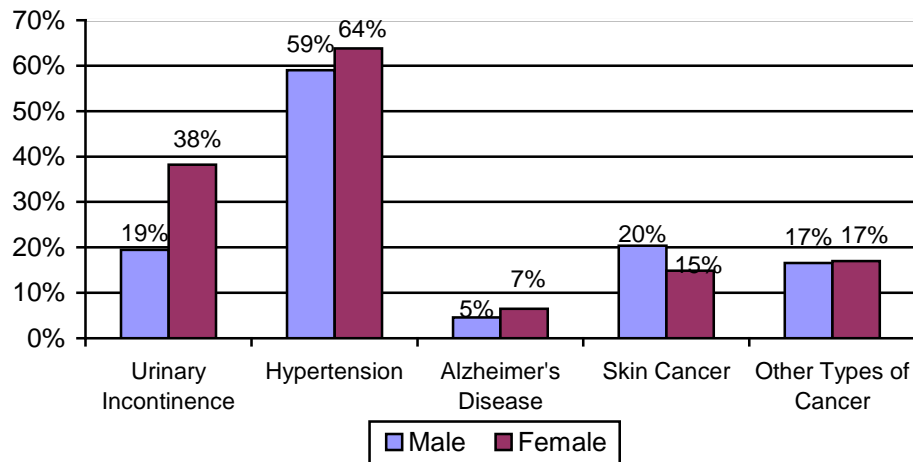
Beneficiaries with Two or More Chronic Conditions and Fair or Poor Health, by Age



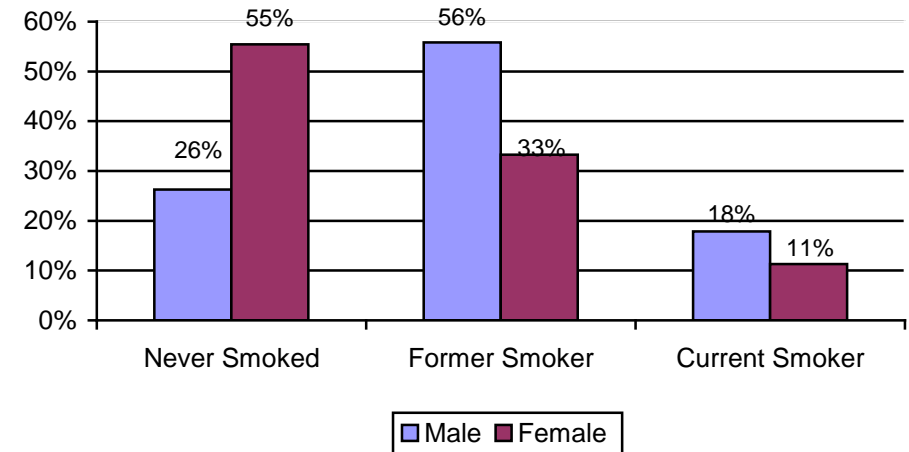
Health Status, by Gender

- Male beneficiaries had higher rates of skin cancer. Female beneficiaries had a higher incidence of osteoporosis and broken hip (32 percent of all females as compared to 8 percent of all males), urinary incontinence, hypertension, Alzheimer's disease, and arthritis.
- Thirty-three percent of female beneficiaries aged 85 and older reported they could not perform three to six ADLs compared to only 24 percent of men in that age group.
- Eighty-one percent of female beneficiaries compared to 70 percent of male beneficiaries had two or more chronic conditions.
- A large portion of female beneficiaries never smoked (55 percent), while most male beneficiaries were former or current smokers (74 percent).

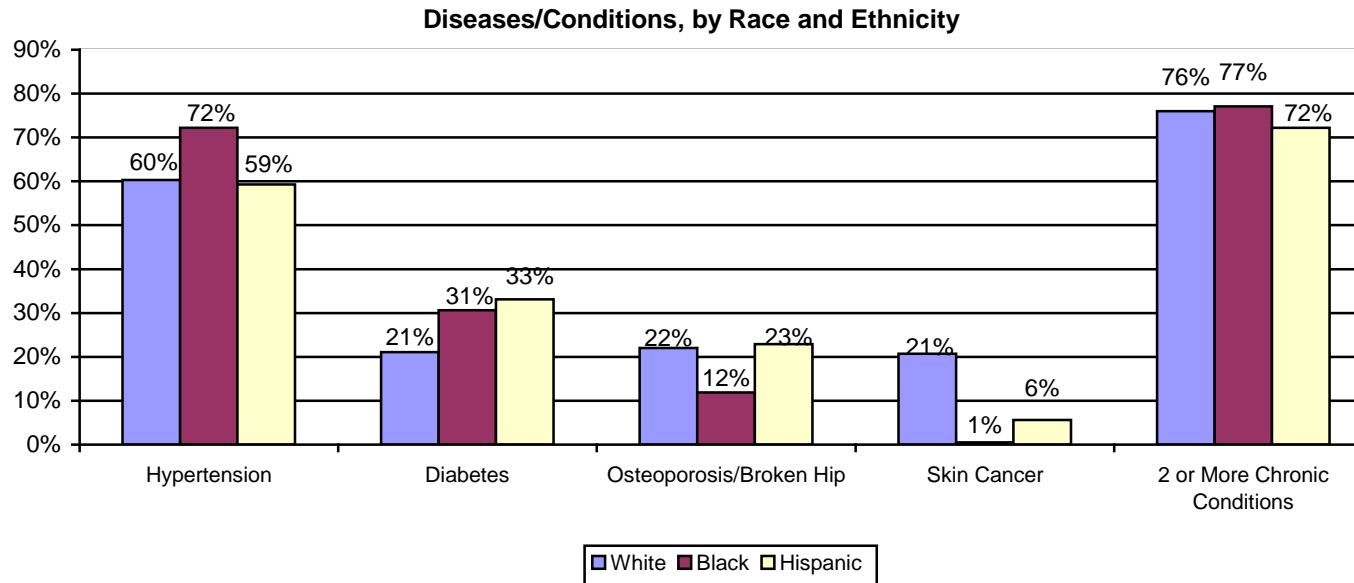
Diseases/Conditions, by Gender



Smoking, by Gender



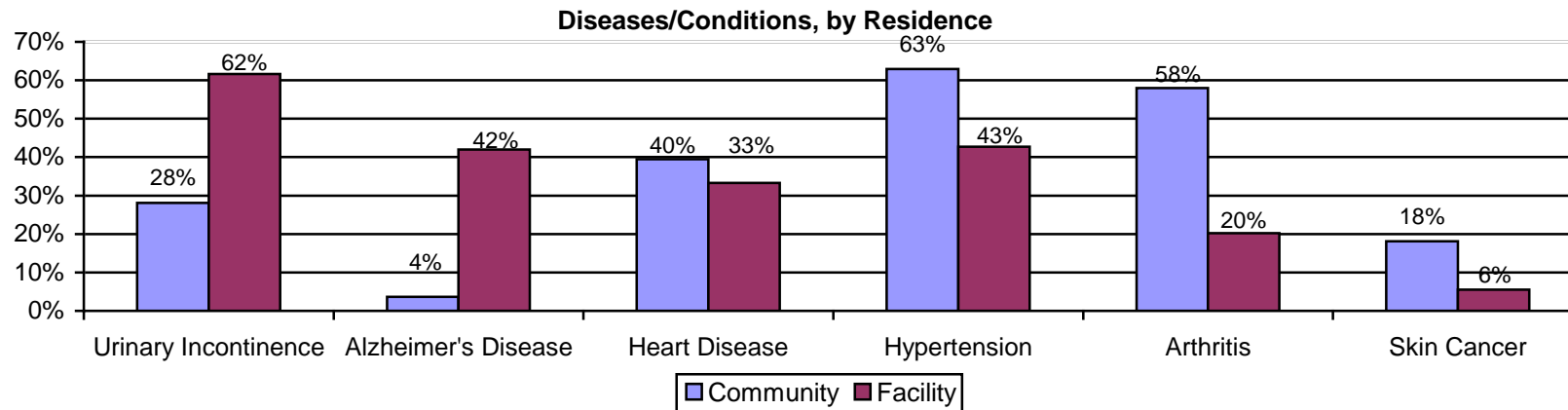
Health Status, by Race and Ethnicity



- Forty-three percent of White beneficiaries compared to only 26 percent of Black beneficiaries considered their health very good or excellent.
- A larger percentage of Black beneficiaries currently smoke (20 percent) than do Hispanic or White beneficiaries. Hispanic beneficiaries were the most likely to have never smoked.
- A slightly higher percentage of Black beneficiaries had two or more chronic conditions than did Hispanic or White beneficiaries. Black and Hispanic beneficiaries had a higher incidence of diabetes than did White beneficiaries, but had much lower rates of skin cancer.
- Black beneficiaries and Hispanic beneficiaries were more likely than White beneficiaries to have one or more functional limitation(s).

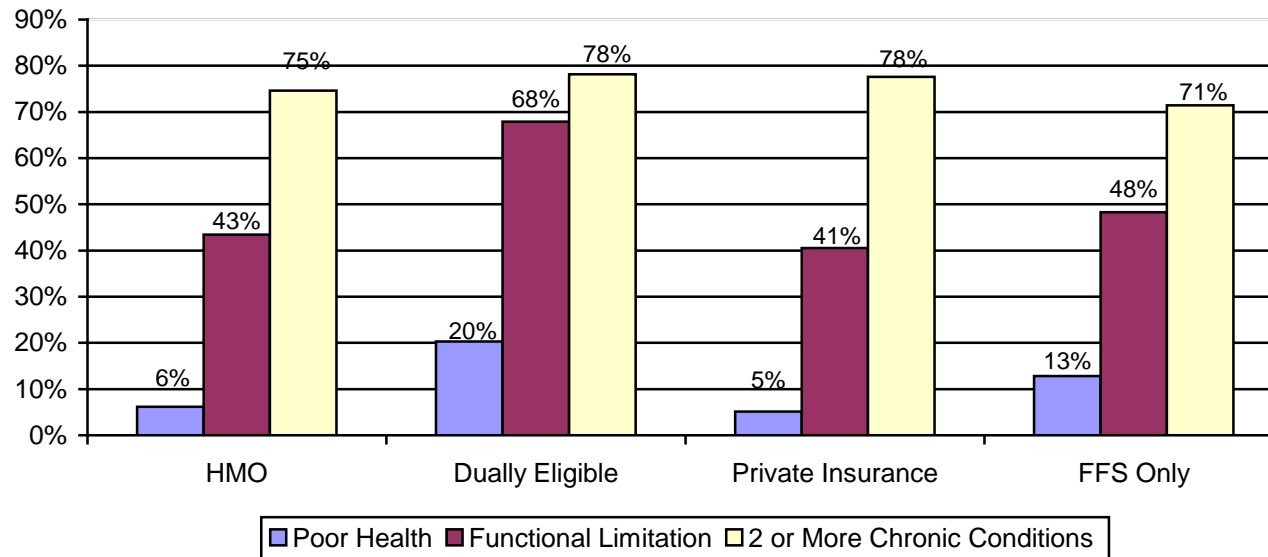
Heath Status, by Residence

- 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. Fifty-nine percent of beneficiaries living in facility care were reportedly in fair or poor health.
- Beneficiaries in facility care had much higher rates of urinary incontinence and Alzheimer's disease. Beneficiaries living in the community had higher rates of heart disease, hypertension, arthritis, and skin cancer.
- Seventy-eight percent of beneficiaries in facilities had two or more chronic conditions compared to 76 percent of beneficiaries living in the community.
- All beneficiaries in facilities had functional limitations and were unable to perform one or more ADL(s). In the community about 61 percent of those that lived with children or others had a functional limitation. In comparison, only 48 percent of those who lived alone and 40 percent of those who lived with a spouse reported functional limitations.



Health Status, by Insurance Type

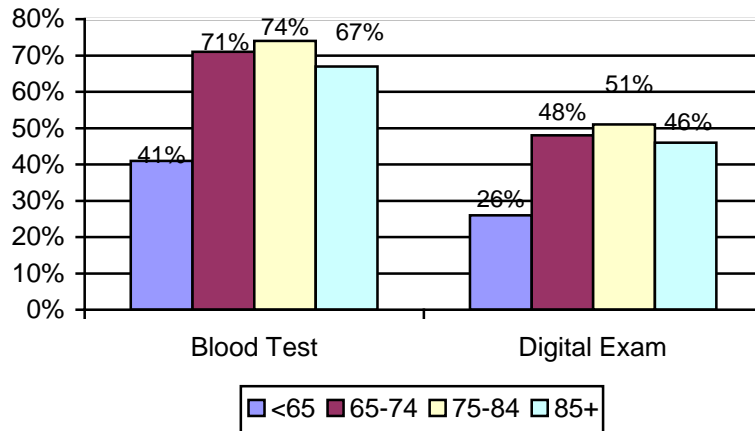
Beneficiaries in Poor Health, with Functional Limitations, Two or More Chronic Conditions/Diseases, by Insurance Type



- Dually eligible beneficiaries were much more likely than other community beneficiaries to be in poor health and have some type of limitation.
- Beneficiaries in the Medicare HMOs or those with private insurance were less likely to be in poor health or have functional limitations than were other community beneficiaries.
- Medicare FFS only beneficiaries were the least likely to have two or more chronic conditions.

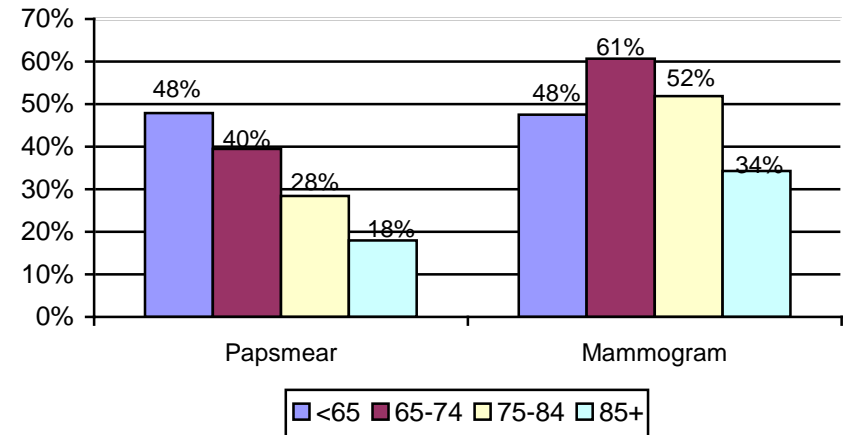
Preventive Services, by Gender and Age

Male Beneficiaries that had a Blood Test or Digital Exam for Prostate Cancer, by Age



- Sixty-six percent of male beneficiaries had a blood test and 45 percent of male beneficiaries had a digital exam.
- Disabled male beneficiaries were the least likely to have a blood test or digital exam.
- Male beneficiaries aged 65 to 84 were more likely to have a blood test than other male beneficiaries.

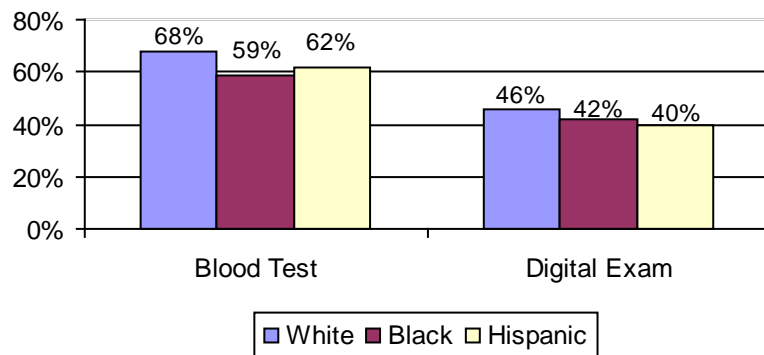
Female Beneficiaries that had a Papsmear or Mammogram, by Age



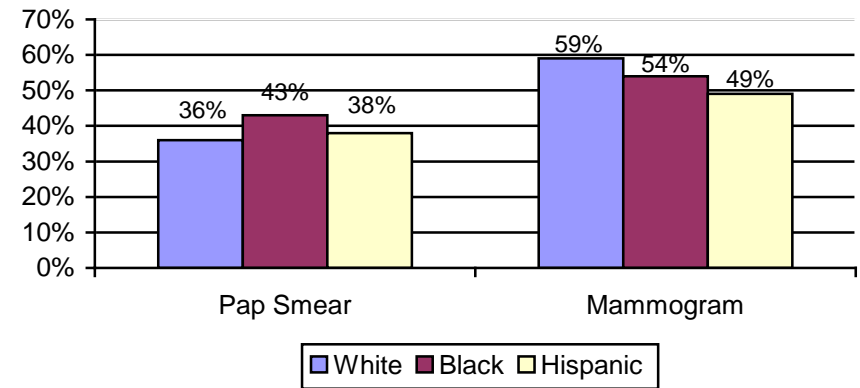
- Thirty-five percent of female beneficiaries had a pap smear and over half of female beneficiaries had a mammogram.
- Female beneficiaries aged 65 to 74 were the most likely to have a mammogram.
- Female beneficiaries aged 85 and older were the least likely to have either a pap smear or a mammogram.
- Female beneficiaries aged 65 to 74 were more than twice as likely to have a pap smear 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



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