MCBS Highlights

Diabetes in the Medicare Aged Population, 2004

Gerald S. Adler, M.Phil.

The Medicare Current Beneficiary Survey (MCBS) contains a wealth of information on the health status of Medicare beneficiaries. In particular, the 2004 MCBS included a series of questions about diabetes care for those who reported they had the condition, and diabetes screening for those who said they did not. This highlight reviews some of the characteristics of the diabetic population compared to the non-diabetic population.

INTRODUCTION

The population to be examined consists of Medicare beneficiaries who are age 65 or over and who live in the community rather than long-term care facilities. This includes approximately 81.2 percent of all beneficiaries, and yields a more homogeneous group for analysis. In 2004, this group comprised 31.3 million persons,

NOTE: Highlights are not peer reviewed.

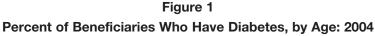
The author is with the Centers for Medicare & Medicaid Services (CMS). The statements expressed in this article are those of the author and do not necessarily reflect the views or policies of CMS.

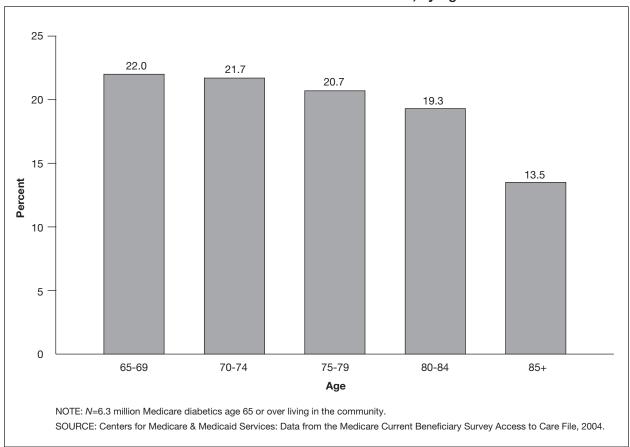
represented in the MCBS by a sample of 11,926 persons. Of this number, 2,416 respondents representing 6.3 million or 20.3 percent of aged beneficiaries responded positively to the following question:

"Has a doctor ever told you that you had any type of diabetes, including sugar diabetes, high blood sugar, borderline diabetes, pre-diabetes, or pregnancyrelated diabetes?"

The question thus gives a comprehensive definition of diabetes. Subsequent questions permit separation of borderline diabetes, pre-diabetes, and gestational diabetes. For this highlight, a small number of females who reported diabetes only during pregnancy were removed from the analysis.

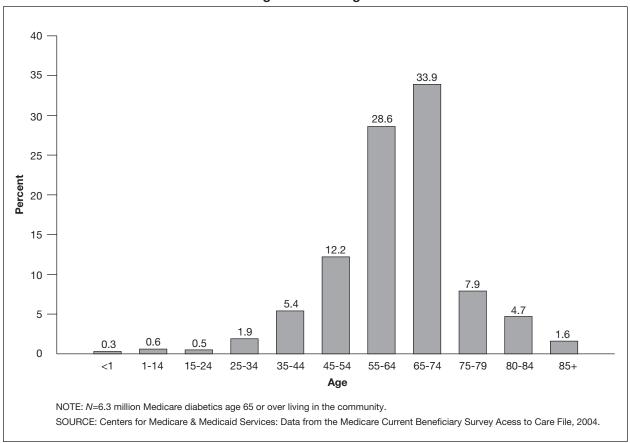
Diabetics living in the community have consistently worse health status and higher Medicare Part B costs than nondiabetics. These findings are not accounted for by age, since fewer diabetics than non-diabetics are in the older age groups.





• This figure presents the percent of beneficiaries in each age group who have diabetes. At least two factors are at work: the number of diabetics is increased by the onset of the disease over time, and rates of mortality and institutionalization reduce that number. Mortality and institutionalization most likely occur more frequently with diabetes than without it.

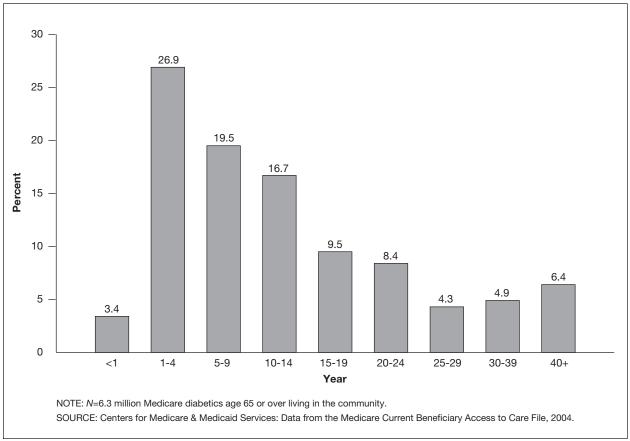
Figure 2
Percent Distribution of Age at First Diagnosis With Diabetes: 2004



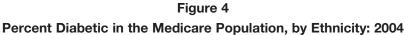
• Many of the Medicare aged diabetics—62.5 percent—were first diagnosed between age 55 and 74.

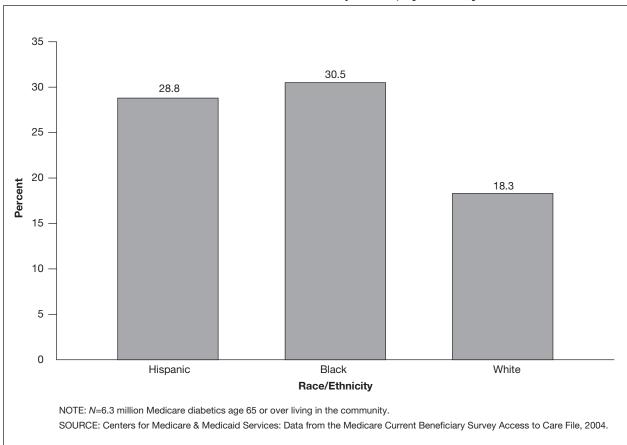
Figure 3

Percent Distribution of Population Who Have Been Diagnosed With Diabetes, by Duration of Diagnosis: 2004

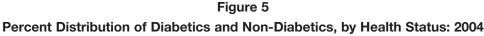


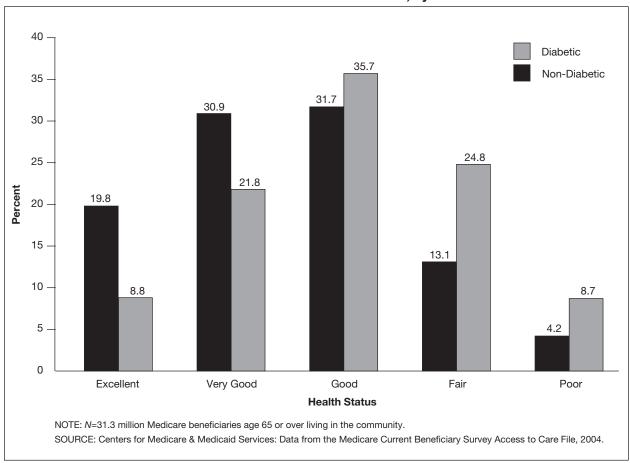
• As a result, while a large number of people have had diabetes for more than 20 years; an even larger proportion of the population is relatively new to the disease. Almost one-half (49.8 percent) have been diagnosed for less than 10 years.



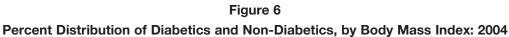


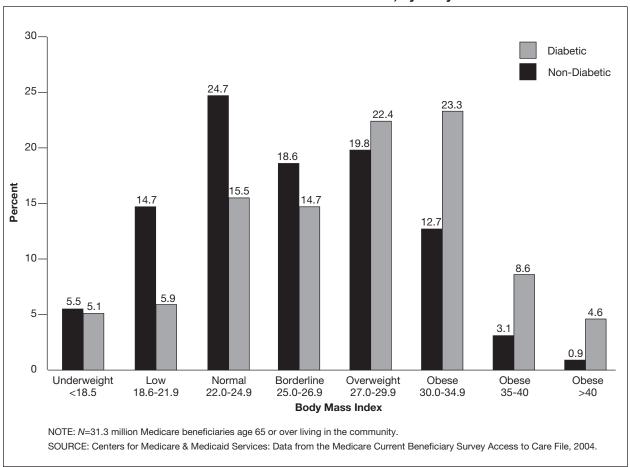
• The diabetic population is composed of 10.4 percent Hispanic, 11.9 percent Black, 73.1 percent White, and 4.6 percent other races or no answers. This figure shows the percent of each of the three main groups who are diabetic. Clearly Hispanic and Black persons have higher rates of diabetes than White persons.





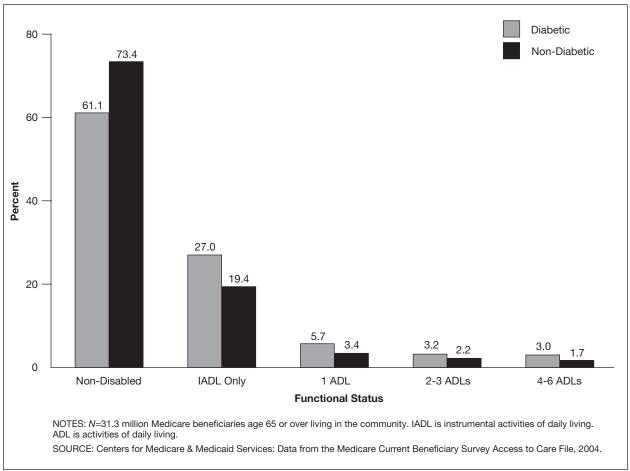
• Self-reported health status is poorer for diabetics than non-diabetics, even though the diabetic group is younger on average. The whole distribution of health status is lower for diabetics: more diabetics see their health as fair or poor (33.5 versus 17.3 percent for non-diabetics), and fewer diabetics see their health status as excellent or very good (30.6 versus 50.7 percent of non-diabetics).



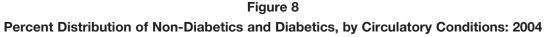


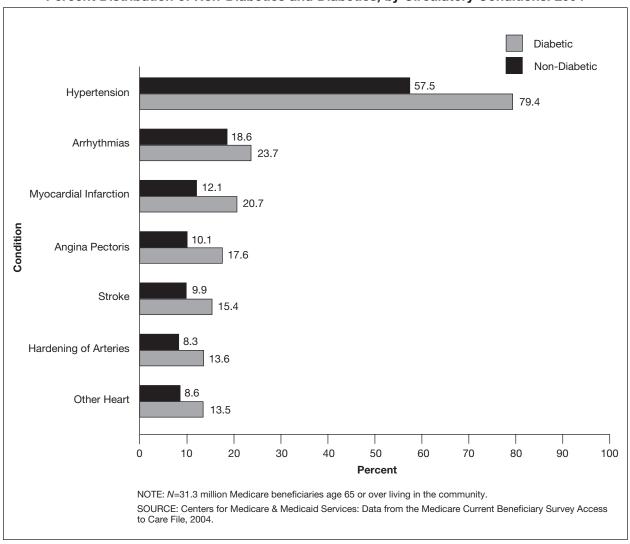
• The distribution of body mass index (BMI) is clearly different for diabetics and non-diabetics: while 36.5 percent of diabetics are obese (BMI 30 or above), only 16.7 percent of non-diabetics are obese. Looking at normal weight (BMI 25) or below, 26.5 percent of diabetics, and 44.9 percent of non-diabetics are in this range.





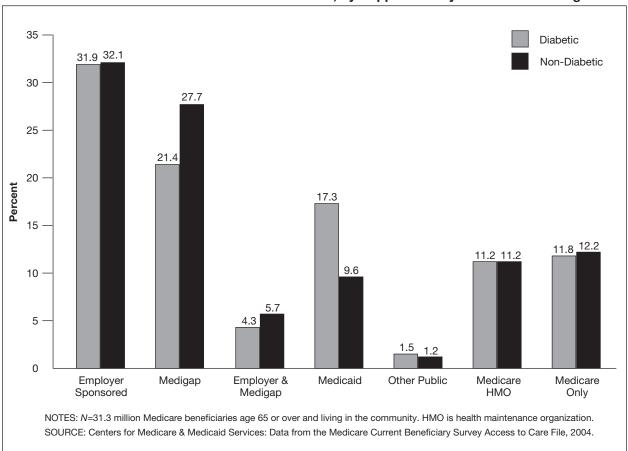
• Diabetics are more impaired (defined as receiving help from another person) on a scale compounded of activities of daily living (ADL) and instrumental ADL. Of non-diabetics, 73.4 percent have none of these disabilities compared to 61.1 percent of diabetics. Diabetics are more impaired across the range of disability scores. For example, 27.0 percent of diabetics receive help with IADLs compared to 19.4 percent of non-diabetics. Again, this is not a function of the age of the two populations since on average diabetics are younger.





• The MCBS explores numerous kinds of comorbidity. This figure shows the relative frequency of different types of circulatory conditions in the diabetic and non-diabetic populations. Diabetics have excessive prevalence of every circulatory disorder.

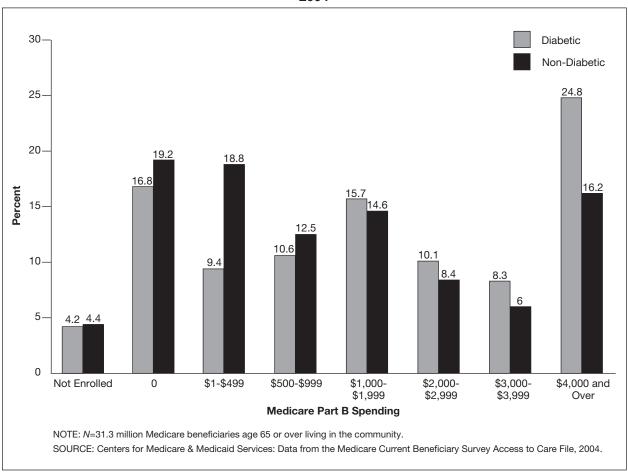
Figure 9
Percent Distribution of Diabetics and Non-Diabetics, by Supplementary Insurance Coverage: 2004



• Rates of employer-sponsored coverage, public insurance other than Medicaid, and Medicare Advantage are similar, as are the proportions that have no supplementary coverage (Medicare only). However, there are two notable differences: (1) non-diabetics are more likely to have self-purchased (Medigap) insurance and, (2) diabetics are much more likely to be covered by Medicaid. This leads to hypotheses about the socioeconomic disadvantages of the diabetic population.

Figure 10

Percent Distribution of Diabetics and Non-Diabetics, by Medicare Part B Spending Per Person: 2004



• Diabetics are concentrated at the higher end of the Part B spending distribution, and non-diabetics at the lower end: 33.1 percent of the diabetic population has 2004 Part B expenses over \$3,000 compared to 22.2 percent of non-diabetics. Another 36.8 percent of diabetics have Part B expenses under \$1,000 for the year, compared to 50.5 percent of non-diabetics.

Reprint Requests: Gerald S. Adler, M.Phil., Centers for Medicare & Medicaid Services, 7500 Security Boulevard, C3-16-27, Baltimore, MD 21244-1850. E-mail: gerald.adler@cms.hhs.gov