

3.5 What is the Medicare Population's Access to Care and How Satisfied are They with Their Care?

Table 5.1 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 2000

Community-Only Residents¹

1 of 2

Indicator of Access to Care ²	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 +	
Beneficiaries (in 000s)	37,907	5,161	18,121	11,390	3,236	2,903	8,273	4,556	1,021	16,753	2,258	9,848	6,834	2,215	21,154
	123	103	142	137	74	78	121	86	42	120	71	126	116	67	139
Beneficiaries as a Percentage of Column Total															
Access to Care															
Usual Source of Care															
None ³	5.73	7.93	6.51	3.91	4.32	9.40	8.33	4.92	4.97*	7.38	6.03	4.99	3.23	4.02*	4.43
	0.26	0.70	0.38	0.32	0.58	1.04	0.63	0.49	0.92	0.44	0.87	0.52	0.42	0.72	0.32
Doctor's office	74.29	66.85	73.21	77.85	79.55	63.50	68.74	74.01	77.80	69.83	71.18	76.94	80.41	80.36	77.81
	0.83	1.42	0.95	1.13	1.29	1.84	1.13	1.41	2.27	0.94	1.89	1.15	1.17	1.46	0.91
Doctor's clinic	7.08	8.00	7.08	7.02	5.87	7.21	7.09	6.89	5.36*	6.95	9.02	7.06	7.11	6.11	7.18
	0.42	0.68	0.45	0.68	0.84	0.90	0.57	0.91	1.08	0.49	1.15	0.54	0.73	0.91	0.46
HMO ⁴	6.05	3.74	7.17	5.60	5.07	3.47*	7.22	5.74	5.68*	6.08	4.09*	7.12	5.51	4.79*	6.03
	0.45	0.60	0.60	0.57	0.63	0.71	0.71	0.74	1.24	0.49	0.97	0.69	0.66	0.78	0.51
Hospital OPD/ER ⁵	2.68	6.15	2.39	1.78	2.03*	6.57	2.82	2.19*	2.43*	3.27	5.60	2.03	1.51*	1.85*	2.22
	0.19	0.58	0.26	0.23	0.38	0.80	0.41	0.40	0.70	0.28	0.75	0.26	0.26	0.41	0.18
Other clinic/health center	4.16	7.33	3.65	3.84	3.16*	9.84	5.80	6.24	3.77*	6.50	4.07*	1.85*	2.24	2.88*	2.32
	0.21	0.68	0.29	0.33	0.45	1.05	0.56	0.71	0.99	0.39	0.91	0.26	0.29	0.52	0.21
Difficulty Obtaining Care															
Yes	3.90	10.60	2.71	3.29	2.14*	9.70	2.73	2.70*	1.88*	3.87	11.76	2.68	3.69	2.26*	3.92
	0.24	1.11	0.26	0.27	0.43	1.19	0.40	0.35	0.67	0.33	1.71	0.35	0.41	0.53	0.29
No	96.10	89.40	97.29	96.71	97.86	90.30	97.27	97.30	98.12	96.13	88.24	97.32	96.31	97.74	96.08
	0.24	1.11	0.26	0.27	0.43	1.19	0.40	0.35	0.67	0.33	1.71	0.35	0.41	0.53	0.29
Delayed Care Due to Cost															
Yes	6.97	21.06	5.68	3.95	2.52*	19.26	4.60	2.42*	2.01*	6.37	23.39	6.58	4.97	2.76*	7.43
	0.29	1.32	0.40	0.31	0.47	1.60	0.56	0.40	0.58	0.43	2.08	0.53	0.46	0.63	0.38
No	93.03	78.94	94.32	96.05	97.48	80.74	95.40	97.58	97.99	93.63	76.61	93.42	95.03	97.24	92.57
	0.29	1.32	0.40	0.31	0.47	1.60	0.56	0.40	0.58	0.43	2.08	0.53	0.46	0.63	0.38

Table 5.1 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 2000

Community-Only Residents¹

2 of 2

Indicator of Access to Care ²	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 +	
Beneficiaries (in 000s)	37,907	5,161	18,121	11,390	3,236	2,903	8,273	4,556	1,021	16,753	2,258	9,848	6,834	2,215	21,154
	<i>123</i>	<i>103</i>	<i>142</i>	<i>137</i>	<i>74</i>	<i>78</i>	<i>121</i>	<i>86</i>	<i>42</i>	<i>120</i>	<i>71</i>	<i>126</i>	<i>116</i>	<i>67</i>	<i>139</i>
Beneficiaries as a Percentage of Column Total															
Continuity of Care															
Length of Association with Usual Source of Care															
No usual source ³	5.77	8.00	6.54	3.93	4.38	9.48	8.37	4.93	5.03*	7.42	6.08	5.01	3.26	4.08*	4.46
	<i>0.26</i>	<i>0.71</i>	<i>0.38</i>	<i>0.32</i>	<i>0.59</i>	<i>1.05</i>	<i>0.63</i>	<i>0.49</i>	<i>0.93</i>	<i>0.44</i>	<i>0.88</i>	<i>0.52</i>	<i>0.42</i>	<i>0.72</i>	<i>0.32</i>
Less than 1 year	9.65	11.06	9.40	9.82	8.27	10.59	9.47	8.36	7.35*	9.23	11.66	9.35	10.80	8.68	9.99
	<i>0.31</i>	<i>0.92</i>	<i>0.50</i>	<i>0.56</i>	<i>0.80</i>	<i>1.14</i>	<i>0.74</i>	<i>0.80</i>	<i>1.26</i>	<i>0.46</i>	<i>1.45</i>	<i>0.74</i>	<i>0.78</i>	<i>0.99</i>	<i>0.49</i>
1 to less than 3 years	18.93	21.44	19.24	17.99	16.62	19.20	18.12	17.36	17.14	18.04	24.34	20.17	18.41	16.38	19.65
	<i>0.43</i>	<i>1.20</i>	<i>0.58</i>	<i>0.66</i>	<i>1.05</i>	<i>1.57</i>	<i>0.89</i>	<i>0.95</i>	<i>1.75</i>	<i>0.59</i>	<i>1.90</i>	<i>0.79</i>	<i>0.84</i>	<i>1.24</i>	<i>0.58</i>
3 to less than 5 years	15.99	17.90	16.01	15.34	15.19	18.14	16.79	15.38	14.55	16.50	17.59	15.35	15.31	15.48	15.59
	<i>0.31</i>	<i>1.02</i>	<i>0.49</i>	<i>0.57</i>	<i>1.08</i>	<i>1.54</i>	<i>0.85</i>	<i>0.83</i>	<i>1.90</i>	<i>0.55</i>	<i>1.51</i>	<i>0.68</i>	<i>0.70</i>	<i>1.29</i>	<i>0.37</i>
5 years or more	49.65	41.61	48.81	52.93	55.54	42.60	47.25	53.96	55.92	48.81	40.33	50.12	52.23	55.37	50.32
	<i>0.62</i>	<i>1.35</i>	<i>0.78</i>	<i>0.95</i>	<i>1.43</i>	<i>1.94</i>	<i>1.28</i>	<i>1.27</i>	<i>2.13</i>	<i>0.91</i>	<i>2.11</i>	<i>1.01</i>	<i>1.13</i>	<i>1.97</i>	<i>0.72</i>

Source: Medicare Current Beneficiary Survey, CY 2000 Cost and Use Public Use File, CY 2000 Access to Care Public Use File, supplemented by CY 1999 and CY 2001 Access to Care Public Use Files as needed to fill in missing data for sample persons not in the CY 2000 file.

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

Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 1 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.
- 2 Responses for sample persons not interviewed in Round 28 (i.e., the 2000 Access to Care Public Use File) were taken from their Round 25 interview (i.e., the 1999 Access to Care Public Use File) or from their Round 31 interview (i.e., the 2001 Access to Care Public Use File).
- 3 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.
- 4 *HMO* stands for Health Maintenance Organization.
- 5 *OPD* stands for Outpatient Department; *ER* stands for Emergency Room.

Table 5.2 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 2000

Community-Only Residents¹

1 of 2

Measure of Satisfaction ²	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 +	
Beneficiaries (in 000s)	37,907	5,161	18,121	11,390	3,236	2,903	8,273	4,556	1,021	16,753	2,258	9,848	6,834	2,215	21,154
	123	103	142	137	74	78	121	86	42	120	71	126	116	67	139
Beneficiaries as a Percentage of Column Total ³															
Quality of Care															
General Care															
Very satisfied	28.76	23.14	31.77	28.61	21.27	23.36	31.69	29.95	22.29	29.21	22.86	31.84	27.71	20.80	28.40
	0.66	1.28	0.92	0.91	1.04	1.93	1.12	1.37	1.99	0.82	1.62	1.10	1.01	1.23	0.68
(Very) Unsatisfied	3.62	6.76	2.95	3.38	3.22*	6.01	2.65	2.91*	2.29*	3.28	7.71	3.21	3.69	3.65*	3.88
	0.19	0.64	0.27	0.30	0.51	0.68	0.36	0.45	0.72	0.26	1.15	0.36	0.39	0.70	0.23
Follow-up Care															
Very satisfied	18.45	15.70	19.91	18.59	14.04	16.37	20.53	20.55	16.48	19.58	14.83	19.40	17.27	12.93	17.55
	0.54	1.14	0.79	0.79	0.97	1.66	1.05	1.25	1.77	0.74	1.24	0.96	0.94	1.01	0.62
(Very) Unsatisfied	3.06	5.48	2.64	2.75	2.68*	4.57	2.31*	2.60*	2.40*	2.78	6.65*	2.93	2.85	2.81*	3.28
	0.20	0.63	0.29	0.27	0.45	0.76	0.37	0.40	0.71	0.25	1.10	0.39	0.33	0.54	0.27
Access/Coordination of Care															
Availability															
Very satisfied	9.90	9.56	10.84	8.91	8.65	10.08	11.75	9.60	10.65*	10.81	8.88	10.09	8.45	7.73	9.18
	0.34	0.84	0.57	0.53	0.72	1.19	0.75	0.77	1.47	0.45	1.24	0.66	0.66	0.88	0.39
(Very) Unsatisfied	3.32	6.56	2.86	2.82	2.51*	5.19	2.59	2.36*	3.32*	3.02	8.35	3.09	3.13	2.14*	3.56
	0.22	0.67	0.30	0.29	0.49	0.74	0.42	0.45	0.90	0.31	1.18	0.37	0.39	0.55	0.27
Ease of Access to Doctor															
Very satisfied	18.97	13.74	22.21	17.57	14.08	14.22	22.27	20.40	17.94	20.10	13.12	22.16	15.68	12.31	18.08
	0.57	1.15	0.79	0.85	0.86	1.63	1.11	1.39	1.71	0.83	1.37	0.90	0.91	1.10	0.56
(Very) Unsatisfied	5.57	10.11	4.26	5.27	6.83	8.62	4.16	2.71*	5.84*	4.64	12.03	4.34	6.97	7.28	6.31
	0.26	0.78	0.34	0.37	0.70	0.97	0.49	0.43	1.04	0.32	1.29	0.44	0.52	0.97	0.35
Can Obtain Care in Same Location															
Very satisfied	14.58	12.44	16.15	13.90	11.59	12.94	16.18	15.15	12.69	15.13	11.81	16.12	13.06	11.08	14.15
	0.53	0.99	0.69	0.72	0.87	1.41	1.00	1.14	1.53	0.75	1.29	0.83	0.80	1.02	0.55
(Very) Unsatisfied	4.70	9.16	4.13	4.01	3.25*	8.50	3.76	4.08	2.68*	4.60	10.01	4.44	3.97	3.51*	4.78
	0.23	0.90	0.30	0.35	0.52	1.16	0.42	0.59	0.84	0.31	1.38	0.42	0.39	0.66	0.29

Table 5.2 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 2000

Community-Only Residents¹

2 of 2

Measure of Satisfaction ²	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 +	
Beneficiaries (in 000s)	37,907	5,161	18,121	11,390	3,236	2,903	8,273	4,556	1,021	16,753	2,258	9,848	6,834	2,215	21,154
	<i>123</i>	<i>103</i>	<i>142</i>	<i>137</i>	<i>74</i>	<i>78</i>	<i>121</i>	<i>86</i>	<i>42</i>	<i>120</i>	<i>71</i>	<i>126</i>	<i>116</i>	<i>67</i>	<i>139</i>
Beneficiaries as a Percentage of Column Total³															
Relationship with Primary Doctor															
Information from Doctor															
Very satisfied	17.69	15.35	20.14	16.28	12.59	16.11	20.70	18.44	15.46	18.97	14.38	19.68	14.83	11.28	16.67
	<i>0.51</i>	<i>1.11</i>	<i>0.71</i>	<i>0.68</i>	<i>0.97</i>	<i>1.60</i>	<i>0.97</i>	<i>1.02</i>	<i>1.70</i>	<i>0.65</i>	<i>1.15</i>	<i>0.94</i>	<i>0.91</i>	<i>1.09</i>	<i>0.64</i>
(Very) Unsatisfied	5.19	8.96	4.12	5.56	3.92	8.22	3.92	5.16	3.09*	4.95	9.92	4.29	5.82	4.29*	5.38
	<i>0.26</i>	<i>0.86</i>	<i>0.32</i>	<i>0.41</i>	<i>0.56</i>	<i>1.07</i>	<i>0.43</i>	<i>0.58</i>	<i>0.80</i>	<i>0.33</i>	<i>1.18</i>	<i>0.43</i>	<i>0.53</i>	<i>0.75</i>	<i>0.34</i>
Doctor's Concern for Overall Health															
Very satisfied	19.49	18.19	21.11	18.53	15.78	17.70	20.82	19.86	17.13	19.80	18.82	21.36	17.63	15.16	19.24
	<i>0.53</i>	<i>1.15</i>	<i>0.75</i>	<i>0.72</i>	<i>0.88</i>	<i>1.78</i>	<i>0.98</i>	<i>1.21</i>	<i>1.59</i>	<i>0.69</i>	<i>1.36</i>	<i>1.00</i>	<i>0.92</i>	<i>1.10</i>	<i>0.65</i>
(Very) Unsatisfied	5.09	9.07	4.31	5.01	3.39*	7.90	3.56	4.27	3.11*	4.47	10.57	4.94	5.50	3.52*	5.57
	<i>0.27</i>	<i>0.88</i>	<i>0.32</i>	<i>0.49</i>	<i>0.57</i>	<i>1.05</i>	<i>0.41</i>	<i>0.63</i>	<i>0.87</i>	<i>0.40</i>	<i>1.36</i>	<i>0.46</i>	<i>0.57</i>	<i>0.68</i>	<i>0.31</i>
Cost of Care															
Cost															
Very satisfied	16.54	13.63	17.90	16.26	14.50	13.84	18.57	17.53	17.61	17.41	13.35	17.34	15.42	13.08	15.86
	<i>0.53</i>	<i>0.99</i>	<i>0.75</i>	<i>0.69</i>	<i>0.92</i>	<i>1.38</i>	<i>1.01</i>	<i>1.08</i>	<i>1.57</i>	<i>0.63</i>	<i>1.22</i>	<i>0.86</i>	<i>0.81</i>	<i>1.16</i>	<i>0.61</i>
(Very) Unsatisfied	14.27	24.47	12.85	12.97	10.68	23.50	12.09	11.72	10.51*	13.87	25.73	13.48	13.80	10.76	14.58
	<i>0.45</i>	<i>1.32</i>	<i>0.60</i>	<i>0.68</i>	<i>0.88</i>	<i>1.65</i>	<i>0.94</i>	<i>1.06</i>	<i>1.79</i>	<i>0.70</i>	<i>1.69</i>	<i>0.66</i>	<i>0.77</i>	<i>0.98</i>	<i>0.50</i>

Source: Medicare Current Beneficiary Survey, CY 2000 Cost and Use Public Use File, CY 2000 Access to Care Public Use File, supplemented by CY 1999 and CY 2001 Access to Care Public Use Files as needed to fill in missing data for sample persons not in the CY 2000 file.

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

Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 1 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.
- 2 Responses for sample persons not interviewed in Round 28 (i.e., the 2000 Access to Care Public Use File) were taken from their Round 25 interview (i.e., the 1999 Access to Care Public Use File) or from their Round 31 interview (i.e., the 2001 Access to Care Public Use File).
- 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.

Table 5.3 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 2000

Community-Only Residents¹

1 of 2

Indicator of Access to Care ²	Total ³	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
Beneficiaries (in 000s)	37,907	3,433	14,539	9,482	2,662	30,116	811	1,506	868	263	3,447	589	1,246	622	230	2,688
	123	92	153	131	69	203	43	61	40	17	76	59	84	45	22	134
Beneficiaries as a Percentage of Column Total																
Access to Care																
Usual Source of Care																
None ⁴	5.73	7.87	6.41	3.74	4.24*	5.55	6.96*	5.65*	5.87*	5.30*	5.99	7.92*	7.88*	3.17*	5.69*	6.61
	0.26	0.88	0.44	0.35	0.64	0.29	1.38	1.22	1.40	1.72	0.72	2.54	1.67	1.42	1.87	1.07
Doctor's office	74.29	70.24	75.26	80.13	81.64	76.79	61.62	66.95	62.86	73.34	65.16	58.13	60.73	66.91	63.05	61.79
	0.83	1.61	1.04	1.29	1.25	0.94	2.68	2.68	2.81	3.68	1.79	4.03	2.90	2.86	6.26	1.60
Doctor's clinic	7.08	8.55	7.43	7.36	6.38	7.44	6.72*	5.25*	3.04*	3.76*	4.93	5.82*	4.40*	7.65*	3.52*	5.39*
	0.42	0.84	0.49	0.78	0.92	0.49	1.45	1.11	0.95	1.63	0.72	2.06	1.18	1.86	1.58	0.80
HMO ⁵	6.05	3.20*	6.25	4.75	4.38*	5.26	2.76*	9.31*	9.65*	3.78*	7.42	8.76*	13.96*	12.43*	13.23*	12.40
	0.45	0.56	0.66	0.58	0.57	0.47	0.96	1.99	2.09	1.69	1.32	2.84	2.17	2.71	4.63	1.44
Hospital OPD/ER ⁶	2.68	3.88	1.34*	1.06*	1.10*	1.52	11.92*	7.90*	6.87*	8.84*	8.66	10.29*	7.86*	4.34*	2.77*	7.14
	0.19	0.62	0.25	0.19	0.32	0.19	2.00	1.50	1.43	2.33	0.93	2.06	1.42	1.00	2.75	0.90
Other clinic/health center	4.16	6.25	3.31	2.96	2.26*	3.44	10.02*	4.95*	11.70*	4.99*	7.83	9.09*	5.18*	5.51*	11.74*	6.67
	0.21	0.74	0.29	0.35	0.46	0.22	1.89	1.02	2.05	1.83	0.88	2.39	1.15	1.81	3.45	0.62
Difficulty Obtaining Care																
Yes	3.90	10.05	2.51	2.87	2.02*	3.44	9.03*	3.08*	4.73*	2.94*	4.88	8.62*	4.17*	6.14*	2.11*	5.43*
	0.24	1.11	0.29	0.26	0.46	0.22	2.00	0.96	1.08	1.72	0.73	3.78	1.13	1.83	1.50	1.09
No	96.10	89.95	97.49	97.13	97.98	96.56	90.97	96.92	95.27	97.06	95.12	91.38	95.83	93.86	97.89	94.57
	0.24	1.11	0.29	0.26	0.46	0.22	2.00	0.96	1.08	1.72	0.73	3.78	1.13	1.83	1.50	1.09
Delayed Care Due to Cost																
Yes	6.97	20.87	5.09	3.57	2.26*	6.16	17.84	8.00*	7.05*	5.04*	9.85	21.47*	7.32*	5.53*	3.62*	9.70
	0.29	1.46	0.45	0.33	0.49	0.31	2.32	1.56	1.49	1.86	1.07	4.24	1.71	1.75	2.09	1.34
No	93.03	79.13	94.91	96.43	97.74	93.84	82.16	92.00	92.95	94.96	90.15	78.53	92.68	94.47	96.38	90.30
	0.29	1.46	0.45	0.33	0.49	0.31	2.32	1.56	1.49	1.86	1.07	4.24	1.71	1.75	2.09	1.34

Table 5.3 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 2000

Community-Only Residents¹

2 of 2

Indicator of Access to Care ²	Total ³	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
Beneficiaries (in 000s)	37,907	3,433	14,539	9,482	2,662	30,116	811	1,506	868	263	3,447	589	1,246	622	230	2,688
	<i>123</i>	<i>92</i>	<i>153</i>	<i>131</i>	<i>69</i>	<i>203</i>	<i>43</i>	<i>61</i>	<i>40</i>	<i>17</i>	<i>76</i>	<i>59</i>	<i>84</i>	<i>45</i>	<i>22</i>	<i>134</i>
Beneficiaries as a Percentage of Column Total																
Continuity of Care																
Length of Association with Usual Source of Care																
No usual source ⁴	5.77	7.92	6.44	3.76	4.29*	5.57	7.03*	5.70*	5.90*	5.34*	6.04	7.98*	7.88*	3.19*	5.94*	6.65
	<i>0.26</i>	<i>0.89</i>	<i>0.44</i>	<i>0.35</i>	<i>0.65</i>	<i>0.29</i>	<i>1.39</i>	<i>1.23</i>	<i>1.40</i>	<i>1.73</i>	<i>0.73</i>	<i>2.56</i>	<i>1.67</i>	<i>1.43</i>	<i>1.95</i>	<i>1.07</i>
Less than 1 year	9.65	11.58	8.91	9.55	7.99	9.33	8.03*	10.42*	11.06*	11.53*	10.10	11.87*	13.11*	13.34*	6.43*	12.34
	<i>0.31</i>	<i>1.17</i>	<i>0.58</i>	<i>0.62</i>	<i>0.87</i>	<i>0.36</i>	<i>2.05</i>	<i>1.67</i>	<i>1.94</i>	<i>3.04</i>	<i>1.07</i>	<i>2.88</i>	<i>2.14</i>	<i>2.59</i>	<i>2.72</i>	<i>1.40</i>
1 to less than 3 years	18.93	20.27	18.29	17.35	16.02	18.02	24.29	22.28	19.51	15.83*	21.56	22.74*	25.69	24.44*	19.84*	24.27
	<i>0.43</i>	<i>1.44</i>	<i>0.60</i>	<i>0.73</i>	<i>1.15</i>	<i>0.43</i>	<i>3.51</i>	<i>2.28</i>	<i>2.44</i>	<i>3.19</i>	<i>1.48</i>	<i>3.14</i>	<i>2.92</i>	<i>2.78</i>	<i>4.12</i>	<i>1.77</i>
3 to less than 5 years	15.99	18.13	15.96	15.02	14.16	15.75	16.98	16.98	15.21*	17.83*	16.60	17.91*	17.00	17.34*	21.12*	17.62
	<i>0.31</i>	<i>1.21</i>	<i>0.55</i>	<i>0.64</i>	<i>1.06</i>	<i>0.33</i>	<i>1.93</i>	<i>1.87</i>	<i>2.30</i>	<i>4.03</i>	<i>1.17</i>	<i>3.50</i>	<i>2.08</i>	<i>2.63</i>	<i>6.12</i>	<i>1.42</i>
5 years or more	49.65	42.10	50.42	54.32	57.55	51.33	43.66	44.62	48.33	49.48	45.70	39.50	36.33	41.70	46.68*	39.12
	<i>0.62</i>	<i>1.73</i>	<i>0.89</i>	<i>1.07</i>	<i>1.62</i>	<i>0.69</i>	<i>2.84</i>	<i>2.47</i>	<i>3.41</i>	<i>3.78</i>	<i>1.56</i>	<i>3.80</i>	<i>2.85</i>	<i>3.55</i>	<i>5.23</i>	<i>1.82</i>

Source: Medicare Current Beneficiary Survey, CY 2000 Cost and Use Public Use File, CY 2000 Access to Care Public Use File, supplemented by CY 1999 and CY 2001 Access to Care Public Use Files as needed to fill in missing data for sample persons not in the CY 2000 file.

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

Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

1 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.

2 Responses for sample persons not interviewed in Round 28 (i.e., the 2000 Access to Care Public Use File) were taken from their Round 25 interview (i.e., the 1999 Access to Care Public Use File) or from their Round 31 interview (i.e., the 2001 Access to Care Public Use File).

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

4 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.

5 *HMO* stands for Health Maintenance Organization.

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

Table 5.4 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 2000

Community-Only Residents¹

1 of 2

Measure of Satisfaction ²	Total ³	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
Beneficiaries (in 000s)	37,907	3,433	14,539	9,482	2,662	30,116	811	1,506	868	263	3,447	589	1,246	622	230	2,688
	123	92	153	131	69	203	43	61	40	17	76	59	84	45	22	134
Beneficiaries as a Percentage of Column Total ⁴																
Quality of Care																
General Care																
Very satisfied	28.76	25.86	34.20	30.38	22.10	30.99	13.89*	14.77	14.48*	11.45*	14.24	19.69*	27.77	23.71*	24.60*	24.78
	0.66	1.63	1.05	1.02	1.06	0.75	1.99	1.93	2.05	2.44	1.04	3.45	2.91	3.62	5.73	1.96
(Very) Unsatisfied	3.62	5.95	3.07	3.56	3.51*	3.59	5.88*	2.50*	1.02*	1.64*	2.86*	9.38*	2.17*	4.07*	2.87*	4.25*
	0.19	0.71	0.30	0.33	0.61	0.21	1.48	0.76	0.61	1.17	0.47	2.66	0.96	1.50	1.48	0.71
Follow-up Care																
Very satisfied	18.45	17.07	21.10	20.07	14.65	19.75	9.23*	9.64*	8.26*	3.18*	8.70	15.81*	18.39	16.00*	17.33*	17.18
	0.54	1.46	0.86	0.91	1.08	0.61	2.10	1.63	1.72	1.65	0.95	2.75	2.12	3.20	4.01	1.48
(Very) Unsatisfied	3.06	5.08	2.77	2.69	2.92*	3.02	5.62*	2.01*	2.70*	1.65*	3.00*	6.41*	1.90*	3.18*	1.95*	3.19*
	0.20	0.73	0.33	0.29	0.53	0.24	1.48	0.61	0.95	1.19	0.58	2.11	0.78	1.31	1.37	0.66
Access/Coordination of Care																
Availability																
Very satisfied	9.90	10.05	11.34	9.32	8.81	10.34	6.53*	4.77*	4.17*	1.82*	4.81	6.88*	13.29*	11.16*	13.76*	11.43
	0.34	1.07	0.67	0.56	0.82	0.40	1.73	1.08	1.17	1.26	0.65	1.92	2.20	3.77	3.65	2.01
(Very) Unsatisfied	3.32	6.29	2.91	2.78	2.41*	3.21	3.86*	1.70*	2.40*	0.77*	2.31*	7.20*	2.70*	2.69*	5.74*	3.94*
	0.22	0.67	0.33	0.33	0.54	0.23	1.32	0.64	0.91	0.78	0.49	2.30	1.21	1.23	2.38	0.96
Ease of Access to Doctor																
Very satisfied	18.97	16.19	23.63	19.13	14.68	20.58	8.31*	11.01*	6.63*	4.87*	8.81	9.86*	21.75	13.99*	19.58*	17.15
	0.57	1.56	0.94	0.91	0.99	0.67	1.66	1.61	1.34	1.85	0.81	2.51	2.53	4.42	3.99	2.23
(Very) Unsatisfied	5.57	10.15	3.65	4.77	6.77	5.02	9.09*	6.14*	6.88*	3.41*	6.81	6.69*	8.32*	11.01*	9.94*	8.72
	0.26	0.86	0.35	0.38	0.81	0.25	2.00	1.38	1.36	1.50	0.82	2.16	1.54	2.01	2.71	1.03
Can Obtain Care in Same Location																
Very satisfied	14.58	12.78	16.81	14.60	11.79	15.22	9.56*	7.88*	6.74*	4.12*	7.71	12.15*	19.08	16.53*	15.34*	16.64
	0.53	1.11	0.82	0.81	0.94	0.63	2.03	1.42	1.52	1.89	0.79	2.60	2.07	3.35	2.93	1.40
(Very) Unsatisfied	4.70	10.74	4.38	4.11	3.39*	4.93	3.13*	2.56*	2.27*	1.48*	2.54*	4.81*	3.90*	3.95*	1.90*	3.95*
	0.23	1.26	0.33	0.38	0.59	0.25	1.17	0.85	0.94	1.04	0.53	1.56	0.97	1.38	1.35	0.69

Table 5.4 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 2000

Community-Only Residents¹

2 of 2

Measure of Satisfaction ²	Total ³	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
Beneficiaries (in 000s)	37,907	3,433	14,539	9,482	2,662	30,116	811	1,506	868	263	3,447	589	1,246	622	230	2,688
	<i>123</i>	<i>92</i>	<i>153</i>	<i>131</i>	<i>69</i>	<i>203</i>	<i>43</i>	<i>61</i>	<i>40</i>	<i>17</i>	<i>76</i>	<i>59</i>	<i>84</i>	<i>45</i>	<i>22</i>	<i>134</i>
Beneficiaries as a Percentage of Column Total ⁴																
Relationship with Primary Doctor																
Information from Doctor																
Very satisfied	17.69	16.52	21.30	17.28	13.21	18.78	12.01*	9.01*	8.36*	4.12*	9.18	14.24*	20.77	17.18*	16.48*	18.14
	<i>0.51</i>	<i>1.49</i>	<i>0.82</i>	<i>0.78</i>	<i>1.02</i>	<i>0.60</i>	<i>2.13</i>	<i>1.48</i>	<i>1.83</i>	<i>1.87</i>	<i>0.91</i>	<i>2.51</i>	<i>2.26</i>	<i>3.56</i>	<i>4.34</i>	<i>1.73</i>
(Very) Unsatisfied	5.19	9.50	4.12	5.79	4.28*	5.27	5.78*	3.80*	4.95*	3.10*	4.50	8.34*	3.29*	3.76*	0.98*	4.31*
	<i>0.26</i>	<i>1.10</i>	<i>0.35</i>	<i>0.43</i>	<i>0.66</i>	<i>0.28</i>	<i>1.30</i>	<i>1.02</i>	<i>1.39</i>	<i>1.52</i>	<i>0.62</i>	<i>2.43</i>	<i>1.02</i>	<i>1.44</i>	<i>0.99</i>	<i>0.70</i>
Doctor's Concern for Overall Health																
Very satisfied	19.49	20.07	22.50	19.87	16.55	20.88	10.36*	9.75*	7.52*	7.24*	9.14	16.54*	17.64	17.39*	16.17*	17.21
	<i>0.53</i>	<i>1.50</i>	<i>0.85</i>	<i>0.84</i>	<i>1.02</i>	<i>0.62</i>	<i>1.85</i>	<i>1.62</i>	<i>1.79</i>	<i>2.32</i>	<i>0.91</i>	<i>2.73</i>	<i>2.04</i>	<i>3.61</i>	<i>3.08</i>	<i>1.65</i>
(Very) Unsatisfied	5.09	9.10	4.44	5.12	3.50*	5.10	6.10*	3.92*	4.15*	4.59*	4.54	10.03*	4.25*	5.22*	0.98*	5.47*
	<i>0.27</i>	<i>1.04</i>	<i>0.35</i>	<i>0.57</i>	<i>0.63</i>	<i>0.30</i>	<i>1.38</i>	<i>1.04</i>	<i>1.19</i>	<i>1.84</i>	<i>0.67</i>	<i>3.03</i>	<i>1.42</i>	<i>1.56</i>	<i>0.99</i>	<i>0.91</i>
Cost of Care																
Very satisfied	16.54	14.80	18.84	17.02	14.69	17.44	8.94*	9.25*	9.34*	7.67*	9.08	12.56*	16.56	16.90*	20.02*	16.05
	<i>0.53</i>	<i>1.37</i>	<i>0.86</i>	<i>0.79</i>	<i>1.06</i>	<i>0.63</i>	<i>1.74</i>	<i>1.65</i>	<i>1.91</i>	<i>2.58</i>	<i>1.02</i>	<i>2.28</i>	<i>2.16</i>	<i>2.64</i>	<i>3.18</i>	<i>1.44</i>
(Very) Unsatisfied	14.27	24.78	12.62	12.60	10.94	13.85	22.81	14.92	15.67*	8.88*	16.51	20.54*	13.32*	13.21*	10.08*	14.60
	<i>0.45</i>	<i>1.49</i>	<i>0.63</i>	<i>0.74</i>	<i>0.92</i>	<i>0.48</i>	<i>3.10</i>	<i>1.98</i>	<i>2.41</i>	<i>2.88</i>	<i>1.41</i>	<i>4.92</i>	<i>2.25</i>	<i>2.50</i>	<i>2.74</i>	<i>1.25</i>

Source: Medicare Current Beneficiary Survey, CY 2000 Cost and Use Public Use File, CY 2000 Access to Care Public Use File, supplemented by CY 1999 and CY 2001 Access to Care Public Use Files as needed to fill in missing data for sample persons not in the CY 2000 file.

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

Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 1 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.
- 2 Responses for sample persons not interviewed in Round 28 (i.e., the 2000 Access to Care Public Use File) were taken from their Round 25 interview (i.e., the 1999 Access to Care Public Use File) or from their Round 31 interview (i.e., the 2001 Access to Care Public Use File).
- 3 *Total* includes persons of *other race/ethnicity* and persons who did not report their race/ethnicity.
- 4 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 5.5 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 2000

Community-Only Residents¹

1 of 2

Indicator of Access to Care ²	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
Beneficiaries (in 000s)	37,907	1,199	4,504	4,219	1,661	11,582	2,058	11,528	5,367	730	19,682	1,852	2,046	1,804	846	6,547
	123	66	162	122	56	228	81	191	95	44	240	73	96	68	42	147
Beneficiaries as a Percentage of Column Total Access to Care																
Usual Source of Care																
None ³	5.73	8.38*	7.59	4.60	5.22*	6.25	4.77*	6.11	3.44	3.12*	5.13	11.16	6.36*	3.67*	3.60*	6.62
	0.26	1.51	0.81	0.62	0.78	0.46	0.86	0.45	0.41	0.96	0.30	1.40	1.13	0.92	1.08	0.61
Doctor's office	74.29	60.84	71.80	76.79	79.89	73.64	72.76	74.04	78.96	75.97	75.32	64.19	71.64	77.00	81.98	72.35
	0.83	2.95	1.52	1.37	1.66	0.97	2.16	1.11	1.41	2.90	0.98	2.20	2.00	1.97	2.04	1.22
Doctor's clinic	7.08	10.36*	6.74	7.57	5.84*	7.29	6.94	7.29	7.07	7.95*	7.22	7.65	6.58*	5.60*	4.14*	6.30
	0.42	1.62	0.86	0.92	1.03	0.55	1.06	0.45	0.92	1.78	0.48	1.13	1.15	1.01	0.95	0.65
HMO ⁴	6.05	3.57*	7.12	5.56	4.80*	5.85	4.69*	7.08	5.47	7.77*	6.42	2.80*	7.76*	6.06*	3.25*	5.31
	0.45	1.01	0.96	0.74	0.87	0.57	1.07	0.64	0.67	1.77	0.51	0.67	1.22	1.11	1.30	0.64
Hospital OPD/ER ⁵	2.68	7.36*	2.69*	1.75*	1.58*	2.67	4.94*	1.97	1.38*	2.59*	2.14	6.70	4.09*	3.07*	2.44*	4.33
	0.19	1.31	0.54	0.36	0.44	0.28	0.77	0.29	0.32	1.12	0.23	1.15	0.83	0.60	0.81	0.52
Other clinic/health center	4.16	9.49	4.05*	3.72	2.67*	4.30	5.90*	3.51	3.68	2.61*	3.77	7.50	3.57*	4.61*	4.59*	5.10
	0.21	1.58	0.62	0.44	0.64	0.38	1.09	0.36	0.52	0.87	0.27	1.14	0.71	0.87	1.02	0.47
Difficulty Obtaining Care																
Yes	3.90	15.45	3.58*	4.49	2.33*	4.96	9.05	2.38	2.18*	1.24*	2.98	9.17	2.60*	3.80*	2.56*	4.78
	0.24	2.27	0.58	0.55	0.60	0.41	1.52	0.31	0.35	0.64	0.28	1.37	0.77	0.75	0.90	0.53
No	96.10	84.55	96.42	95.51	97.67	95.04	90.95	97.62	97.82	98.76	97.02	90.83	97.40	96.20	97.44	95.22
	0.24	2.27	0.58	0.55	0.60	0.41	1.52	0.31	0.35	0.64	0.28	1.37	0.77	0.75	0.90	0.53
Delayed Care Due to Cost																
Yes	6.97	23.75	6.54	5.50	2.72*	7.40	20.70	4.83	2.43*	2.30*	5.74	19.71	8.58	4.79*	2.34*	9.88
	0.29	2.65	0.84	0.64	0.66	0.53	1.81	0.46	0.35	0.84	0.36	1.96	1.42	0.86	0.88	0.78
No	93.03	76.25	93.46	94.50	97.28	92.60	79.30	95.17	97.57	97.70	94.26	80.29	91.42	95.21	97.66	90.12
	0.29	2.65	0.84	0.64	0.66	0.53	1.81	0.46	0.35	0.84	0.36	1.96	1.42	0.86	0.88	0.78

Table 5.5 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 2000

Community-Only Residents¹

2 of 2

Indicator of Access to Care ²	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
Beneficiaries (in 000s)	37,907	1,199	4,504	4,219	1,661	11,582	2,058	11,528	5,367	730	19,682	1,852	2,046	1,804	846	6,547
	<i>123</i>	<i>66</i>	<i>162</i>	<i>122</i>	<i>56</i>	<i>228</i>	<i>81</i>	<i>191</i>	<i>95</i>	<i>44</i>	<i>240</i>	<i>73</i>	<i>96</i>	<i>68</i>	<i>42</i>	<i>147</i>
Beneficiaries as a Percentage of Column Total																
Continuity of Care																
Length of Association with Usual Source of Care																
No usual source ³	5.77	8.56*	7.65	4.65	5.29*	6.31	4.79*	6.13	3.45	3.17*	5.15	11.21	6.40*	3.69*	3.64*	6.66
	<i>0.26</i>	<i>1.55</i>	<i>0.82</i>	<i>0.62</i>	<i>0.79</i>	<i>0.47</i>	<i>0.86</i>	<i>0.45</i>	<i>0.42</i>	<i>0.97</i>	<i>0.30</i>	<i>1.41</i>	<i>1.14</i>	<i>0.92</i>	<i>1.09</i>	<i>0.61</i>
Less than 1 year	9.65	14.71	11.02	10.75	7.32	10.77	10.32	8.70	8.72	9.46*	8.90	9.53	9.86	10.93	9.10*	9.96
	<i>0.31</i>	<i>2.21</i>	<i>1.20</i>	<i>0.94</i>	<i>0.99</i>	<i>0.64</i>	<i>1.65</i>	<i>0.57</i>	<i>0.69</i>	<i>1.79</i>	<i>0.43</i>	<i>1.40</i>	<i>1.52</i>	<i>1.68</i>	<i>1.43</i>	<i>0.82</i>
1 to less than 3 years	18.93	25.34	20.32	17.13	17.07	19.21	21.81	17.85	17.74	12.87*	18.05	18.53	24.68	20.72	18.97	21.11
	<i>0.43</i>	<i>2.62</i>	<i>1.09</i>	<i>1.09</i>	<i>1.46</i>	<i>0.71</i>	<i>2.15</i>	<i>0.79</i>	<i>0.83</i>	<i>1.73</i>	<i>0.55</i>	<i>1.89</i>	<i>1.83</i>	<i>1.76</i>	<i>2.27</i>	<i>0.98</i>
3 to less than 5 years	15.99	17.86	16.19	14.27	14.38	15.40	18.47	16.51	16.21	14.37*	16.56	17.29	12.75	15.25	17.47	15.33
	<i>0.31</i>	<i>2.17</i>	<i>1.07</i>	<i>0.96</i>	<i>1.30</i>	<i>0.59</i>	<i>1.29</i>	<i>0.67</i>	<i>0.87</i>	<i>2.10</i>	<i>0.47</i>	<i>1.78</i>	<i>1.51</i>	<i>1.63</i>	<i>2.32</i>	<i>0.94</i>
5 years or more	49.65	33.54	44.82	53.21	55.95	48.31	44.61	50.81	53.88	60.13	51.34	43.44	46.32	49.41	50.82	46.94
	<i>0.62</i>	<i>2.75</i>	<i>1.67</i>	<i>1.47</i>	<i>2.19</i>	<i>0.93</i>	<i>2.31</i>	<i>0.93</i>	<i>1.28</i>	<i>2.60</i>	<i>0.78</i>	<i>2.33</i>	<i>2.12</i>	<i>2.09</i>	<i>2.68</i>	<i>1.11</i>

Source: Medicare Current Beneficiary Survey, CY 2000 Cost and Use Public Use File, CY 2000 Access to Care Public Use File, supplemented by CY 1999 and CY 2001 Access to Care Public Use Files as needed to fill in missing data for sample persons not in the CY 2000 file.

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

Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 1 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.
- 2 Responses for sample persons not interviewed in Round 28 (i.e., the 2000 Access to Care Public Use File) were taken from their Round 25 interview (i.e., the 1999 Access to Care Public Use File) or from their Round 31 interview (i.e., the 2001 Access to Care Public Use File).
- 3 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.
- 4 *HMO* stands for Health Maintenance Organization.
- 5 *OPD* stands for Outpatient Department; *ER* stands for Emergency Room.

Table 5.6 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 2000

Community-Only Residents¹

1 of 2

Measure of Satisfaction ²	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
Beneficiaries (in 000s)	37,907	1,199	4,504	4,219	1,661	11,582	2,058	11,528	5,367	730	19,682	1,852	2,046	1,804	846	6,547
	123	66	162	122	56	228	81	191	95	44	240	73	96	68	42	147
Beneficiaries as a Percentage of Column Total³																
Quality of Care																
General Care																
Very satisfied	28.76	19.25	30.35	27.47	19.53	26.61	26.15	33.49	30.74	24.20	31.63	22.32	25.22	24.92	22.15	23.92
	0.66	2.16	1.55	1.35	1.35	0.91	2.07	1.04	1.34	2.64	0.88	2.05	2.15	2.10	2.20	1.24
(Very) Unsatisfied	3.62	9.35*	4.00	5.00	3.66*	4.87	7.37	2.20	2.21*	4.29*	2.82	4.39*	4.88*	3.05*	1.47*	3.80
	0.19	1.73	0.62	0.62	0.72	0.40	1.15	0.26	0.41	1.19	0.23	0.78	1.01	0.75	0.67	0.46
Follow-up Care																
Very satisfied	18.45	12.80	18.37	16.66	12.70	16.36	18.88	21.53	21.00	18.21	20.99	14.04	14.20	15.92	13.10*	14.48
	0.54	1.66	1.33	1.35	1.22	0.79	2.02	1.01	1.08	2.18	0.77	1.56	1.54	1.50	2.11	0.83
(Very) Unsatisfied	3.06	6.82*	2.95*	3.60*	3.00*	3.59	5.30*	2.55	2.05*	2.54*	2.70	4.81*	2.53*	2.87*	2.17*	3.22
	0.20	1.42	0.54	0.48	0.71	0.33	1.00	0.32	0.35	0.69	0.23	1.03	0.66	0.61	0.76	0.48
Access/Coordination of Care																
Availability																
Very satisfied	9.90	7.20*	9.87	8.30	7.64	8.70	11.57	11.57	9.80	10.73*	11.06	8.84	8.86*	7.70*	8.83*	8.53
	0.34	1.47	1.05	0.75	1.05	0.56	1.51	0.67	0.74	1.59	0.49	1.57	1.36	1.20	1.41	0.80
(Very) Unsatisfied	3.32	7.23*	2.49*	2.68*	2.34*	3.03	6.87	2.94	2.92	3.08*	3.35	5.80*	3.25*	2.85*	2.37*	3.74
	0.22	1.30	0.51	0.43	0.54	0.33	1.10	0.38	0.45	1.12	0.29	0.84	1.12	0.71	0.95	0.49
Ease of Access to Doctor																
Very satisfied	18.97	10.60	19.31	15.47	12.56	16.05	16.50	24.45	20.46	17.85	22.28	12.70	16.04	13.85	13.81*	14.21
	0.57	1.64	1.32	1.18	1.20	0.70	2.03	1.03	1.15	2.03	0.81	1.62	1.86	1.50	1.88	1.00
(Very) Unsatisfied	5.57	12.17	5.49	6.50	6.69*	6.72	8.99	3.55	3.63	6.04*	4.23	10.01	5.52*	7.27*	7.77*	7.56
	0.26	1.82	0.79	0.64	0.97	0.52	1.19	0.37	0.46	1.28	0.30	1.43	1.07	1.16	1.49	0.73
Can Obtain Care in Same Location																
Very satisfied	14.58	12.11	13.97	12.27	10.32	12.64	14.35	17.60	15.89	13.01*	16.62	10.54	12.81	11.76	12.85*	11.89
	0.53	1.62	1.01	1.13	1.03	0.66	1.77	0.88	1.05	1.74	0.72	1.36	1.66	1.20	1.89	0.80
(Very) Unsatisfied	4.70	6.53*	4.52	4.49	3.48*	4.57	11.14	3.97	3.72	3.25*	4.62	8.65	4.17*	3.78*	2.82*	5.16
	0.23	1.32	0.64	0.50	0.78	0.39	1.49	0.36	0.51	1.03	0.30	1.19	0.94	0.82	0.97	0.51

Table 5.6 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 2000

Community-Only Residents¹

2 of 2

Measure of Satisfaction ²	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
Beneficiaries (in 000s)	37,907	1,199	4,504	4,219	1,661	11,582	2,058	11,528	5,367	730	19,682	1,852	2,046	1,804	846	6,547
	<i>123</i>	<i>66</i>	<i>162</i>	<i>122</i>	<i>56</i>	<i>228</i>	<i>81</i>	<i>191</i>	<i>95</i>	<i>44</i>	<i>240</i>	<i>73</i>	<i>96</i>	<i>68</i>	<i>42</i>	<i>147</i>
Beneficiaries as a Percentage of Column Total³																
Relationship with Primary Doctor																
Information from Doctor																
Very satisfied	17.69	14.86	19.26	14.03	10.70	15.68	18.00	21.45	18.74	16.67	20.18	12.72	14.71	14.20	12.78*	13.76
	<i>0.51</i>	<i>1.78</i>	<i>1.41</i>	<i>1.11</i>	<i>1.06</i>	<i>0.80</i>	<i>1.81</i>	<i>0.89</i>	<i>1.02</i>	<i>2.28</i>	<i>0.66</i>	<i>1.52</i>	<i>1.58</i>	<i>1.42</i>	<i>1.97</i>	<i>0.82</i>
(Very) Unsatisfied	5.19	10.58*	5.20	7.37	5.05*	6.53	9.44	3.44	4.29	3.29*	4.29	7.38	5.59*	5.11*	2.23*	5.53
	<i>0.26</i>	<i>1.90</i>	<i>0.71</i>	<i>0.63</i>	<i>0.84</i>	<i>0.44</i>	<i>1.45</i>	<i>0.35</i>	<i>0.52</i>	<i>0.89</i>	<i>0.32</i>	<i>1.31</i>	<i>1.03</i>	<i>0.97</i>	<i>0.77</i>	<i>0.59</i>
Doctor's Concern for Overall Health																
Very satisfied	19.49	15.67	20.53	17.00	15.10	17.97	22.47	22.41	20.09	17.37	21.60	15.06	15.10	17.44	15.75	15.81
	<i>0.53</i>	<i>2.01</i>	<i>1.35</i>	<i>1.21</i>	<i>1.26</i>	<i>0.75</i>	<i>2.07</i>	<i>0.95</i>	<i>1.07</i>	<i>2.07</i>	<i>0.70</i>	<i>1.54</i>	<i>1.65</i>	<i>1.59</i>	<i>2.16</i>	<i>1.01</i>
(Very) Unsatisfied	5.09	9.70*	4.24	6.82	4.37*	5.76	9.32	4.26	3.64	3.73*	4.60	8.38	4.80*	4.86*	1.19*	5.36
	<i>0.27</i>	<i>2.01</i>	<i>0.66</i>	<i>0.86</i>	<i>0.78</i>	<i>0.52</i>	<i>1.29</i>	<i>0.40</i>	<i>0.47</i>	<i>1.11</i>	<i>0.31</i>	<i>1.25</i>	<i>1.04</i>	<i>0.98</i>	<i>0.58</i>	<i>0.59</i>
Cost of Care																
Cost																
Very satisfied	16.54	13.30	17.12	14.40	13.50	15.22	14.06	18.66	18.31	18.00	18.06	13.36	15.33	14.53	13.44*	14.31
	<i>0.53</i>	<i>1.74</i>	<i>1.15</i>	<i>1.10</i>	<i>1.36</i>	<i>0.72</i>	<i>1.63</i>	<i>0.91</i>	<i>0.96</i>	<i>1.84</i>	<i>0.64</i>	<i>1.54</i>	<i>1.86</i>	<i>1.55</i>	<i>2.34</i>	<i>1.05</i>
(Very) Unsatisfied	14.27	20.80	11.77	12.56	9.07	12.61	29.08	12.87	12.46	14.93*	14.53	21.69	15.10	15.41	10.18*	16.41
	<i>0.45</i>	<i>2.65</i>	<i>1.07</i>	<i>0.97</i>	<i>1.06</i>	<i>0.58</i>	<i>2.02</i>	<i>0.72</i>	<i>0.85</i>	<i>2.18</i>	<i>0.61</i>	<i>2.01</i>	<i>1.62</i>	<i>1.61</i>	<i>1.68</i>	<i>1.03</i>

Source: Medicare Current Beneficiary Survey, CY 2000 Cost and Use Public Use File, CY 2000 Access to Care Public Use File, supplemented by CY 1999 and CY 2001 Access to Care Public Use Files as needed to fill in missing data for sample persons not in the CY 2000 file.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.
Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 1 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.
- 2 Responses for sample persons not interviewed in Round 28 (i.e., the 2000 Access to Care Public Use File) were taken from their Round 25 interview (i.e., the 1999 Access to Care Public Use File) or from their Round 31 interview (i.e., the 2001 Access to Care Public Use File).
- 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.

Table 5.7 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 2000

Community-Only Residents¹

1 of 2

Indicator of Access to Care ²	Total ³	Indicators of Good Health ³			Indicators of Poor Health ³		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	37,907	15,079	21,976	11,816	10,689	2,617	1,837
	123	185	191	172	182	89	79
Beneficiaries as a Percentage of Column Total Access to Care							
Usual Source of Care							
None ⁶	5.73	7.77	6.74	8.40	4.22	3.44*	3.37*
	0.26	0.46	0.37	0.54	0.39	0.66	0.84
Doctor's office	74.29	72.69	73.93	72.30	74.12	76.27	76.63
	0.83	1.14	0.90	1.24	0.96	1.71	1.97
Doctor's clinic	7.08	7.40	6.82	6.99	6.76	6.31	6.57*
	0.42	0.57	0.44	0.57	0.52	1.01	1.16
HMO ⁷	6.05	7.23	6.70	7.54	4.72	3.55*	3.01*
	0.45	0.67	0.54	0.70	0.45	0.78	0.84
Hospital OPD/ER ⁸	2.68	1.97	2.23	1.92	4.49	3.90*	4.61*
	0.19	0.26	0.23	0.31	0.39	0.51	0.75
Other clinic/health center	4.16	2.93	3.58	2.86	5.70	6.53	5.81*
	0.21	0.26	0.26	0.31	0.42	0.98	0.87
Difficulty Obtaining Care							
Yes	3.90	2.32	2.14	1.96	7.21	10.51	12.20
	0.24	0.25	0.20	0.25	0.61	1.35	1.67
No	96.10	97.68	97.86	98.04	92.79	89.49	87.80
	0.24	0.25	0.20	0.25	0.61	1.35	1.67
Delayed Care Due to Cost							
Yes	6.97	3.16	3.55	2.56	14.13	14.17	16.00
	0.29	0.30	0.30	0.30	0.80	1.53	1.95
No	93.03	96.84	96.45	97.44	85.87	85.83	84.00
	0.29	0.30	0.30	0.30	0.80	1.53	1.95

Table 5.7 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 2000

Community-Only Residents¹

2 of 2

Indicator of Access to Care ²	Total ³	Indicators of Good Health ³			Indicators of Poor Health ³		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	37,907	15,079	21,976	11,816	10,689	2,617	1,837
	<i>123</i>	<i>185</i>	<i>191</i>	<i>172</i>	<i>182</i>	<i>89</i>	<i>79</i>
Beneficiaries as a Percentage of Column Total							
Continuity of Care							
Length of Association with Usual Source of Care							
No usual source ⁶	5.77	7.80	6.77	8.42	4.26	3.46*	3.38*
	<i>0.26</i>	<i>0.46</i>	<i>0.37</i>	<i>0.55</i>	<i>0.40</i>	<i>0.66</i>	<i>0.84</i>
Less than 1 year	9.65	9.39	9.07	8.99	9.75	11.84	11.95
	<i>0.31</i>	<i>0.50</i>	<i>0.40</i>	<i>0.55</i>	<i>0.62</i>	<i>1.27</i>	<i>1.49</i>
1 to less than 3 years	18.93	18.29	18.23	17.89	20.74	18.40	19.59
	<i>0.43</i>	<i>0.70</i>	<i>0.56</i>	<i>0.78</i>	<i>0.88</i>	<i>1.32</i>	<i>1.55</i>
3 to less than 5 years	15.99	15.17	16.48	15.43	16.97	15.71	15.03
	<i>0.31</i>	<i>0.48</i>	<i>0.42</i>	<i>0.57</i>	<i>0.66</i>	<i>1.39</i>	<i>1.68</i>
5 years or more	49.65	49.36	49.44	49.27	48.28	50.59	50.06
	<i>0.62</i>	<i>0.81</i>	<i>0.78</i>	<i>0.95</i>	<i>1.07</i>	<i>1.89</i>	<i>2.35</i>

Source: Medicare Current Beneficiary Survey, CY 2000 Cost and Use Public Use File, CY 2000 Access to Care Public Use File, supplemented by CY 1999 and CY 2001 Access to Care Public Use Files as needed to fill in missing data for sample persons not in the CY 2000 file.

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

Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

1 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.

2 Responses for sample persons not interviewed in Round 28 (i.e., the 2000 Access to Care Public Use File) were taken from their Round 25 interview (i.e., the 1999 Access to Care Public Use File) or from their Round 31 interview (i.e., the 2001 Access to Care Public Use File).

3 *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.

4 *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.

5 *ADL* stands for Activity of Daily Living.

6 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.

7 *HMO* stands for Health Maintenance Organization.

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

Table 5.8 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 2000

Community-Only Residents¹

1 of 2

Measure of Satisfaction ²	Total ³	Indicators of Good Health ³			Indicators of Poor Health ³		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	37,907	15,079	21,976	11,816	10,689	2,617	1,837
	123	185	191	172	182	89	79
Beneficiaries as a Percentage of Column Total⁶							
Quality of Care							
General Care							
Very satisfied	28.76	35.79	30.42	35.55	22.21	24.03	23.83
	0.66	0.91	0.78	0.99	0.91	1.73	1.85
(Very) Unsatisfied	3.62	2.24	2.58	2.05	6.23	9.01	10.79
	0.19	0.25	0.22	0.24	0.43	1.15	1.53
Follow-up Care							
Very satisfied	18.45	22.08	18.90	21.43	15.09	16.10	15.23
	0.54	0.74	0.72	0.91	0.82	1.56	1.63
(Very) Unsatisfied	3.06	1.84	2.14	1.57*	5.15	7.22	8.35*
	0.20	0.25	0.21	0.25	0.46	1.06	1.32
Access/Coordination of Care							
Availability							
Very satisfied	9.90	11.34	10.06	11.28	9.30	10.30	11.44
	0.34	0.50	0.45	0.57	0.61	1.10	1.42
(Very) Unsatisfied	3.32	2.34	2.36	2.00	4.92	8.79	9.79
	0.22	0.22	0.25	0.25	0.43	1.32	1.59
Ease of Access to Doctor							
Very satisfied	18.97	24.87	21.52	25.63	13.04	13.68	12.85
	0.57	0.83	0.73	0.98	0.90	1.48	1.50
(Very) Unsatisfied	5.57	3.36	2.95	2.63	9.24	14.10	15.32
	0.26	0.28	0.25	0.30	0.58	1.31	1.77
Can Obtain Care in Same Location							
Very satisfied	14.58	18.50	15.58	18.70	11.60	13.91	13.44
	0.53	0.77	0.63	0.84	0.72	1.32	1.46
(Very) Unsatisfied	4.70	3.67	3.37	3.49	6.93	8.59	9.20
	0.23	0.33	0.24	0.33	0.49	1.08	1.25

Table 5.8 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 2000

Community-Only Residents¹

2 of 2

Measure of Satisfaction ²	Total ³	Indicators of Good Health ³			Indicators of Poor Health ³		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	37,907	15,079	21,976	11,816	10,689	2,617	1,837
	<i>123</i>	<i>185</i>	<i>191</i>	<i>172</i>	<i>182</i>	<i>89</i>	<i>79</i>
Beneficiaries as a Percentage of Column Total⁶							
Relationship with Primary Doctor							
Information from Doctor							
Very satisfied	17.69	22.54	18.66	22.37	13.91	14.80	14.66
	<i>0.51</i>	<i>0.66</i>	<i>0.60</i>	<i>0.73</i>	<i>0.81</i>	<i>1.54</i>	<i>1.70</i>
(Very) Unsatisfied	5.19	3.20	3.59	2.73	8.52	9.98	10.67
	<i>0.26</i>	<i>0.29</i>	<i>0.23</i>	<i>0.32</i>	<i>0.64</i>	<i>1.15</i>	<i>1.51</i>
Doctor's Concern for Overall Health							
Very satisfied	19.49	23.36	19.79	22.78	16.28	16.34	15.82
	<i>0.53</i>	<i>0.67</i>	<i>0.60</i>	<i>0.78</i>	<i>0.90</i>	<i>1.49</i>	<i>1.69</i>
(Very) Unsatisfied	5.09	3.52	4.01	3.47	7.25	10.43	11.87
	<i>0.27</i>	<i>0.30</i>	<i>0.32</i>	<i>0.36</i>	<i>0.61</i>	<i>1.22</i>	<i>1.68</i>
Cost of Care							
Cost							
Very satisfied	16.54	20.29	17.41	20.59	12.83	15.04	15.00
	<i>0.53</i>	<i>0.74</i>	<i>0.64</i>	<i>0.83</i>	<i>0.71</i>	<i>1.60</i>	<i>1.81</i>
(Very) Unsatisfied	14.27	9.26	10.47	8.50	21.78	26.22	27.80
	<i>0.45</i>	<i>0.52</i>	<i>0.43</i>	<i>0.60</i>	<i>0.95</i>	<i>1.79</i>	<i>2.14</i>

Source: Medicare Current Beneficiary Survey, CY 2000 Cost and Use Public Use File, CY 2000 Access to Care Public Use File, supplemented by CY 1999 and CY 2001 Access to Care Public Use Files as needed to fill in missing data for sample persons not in the CY 2000 file.

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

Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

1 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.

2 Responses for sample persons not interviewed in Round 28 (i.e., the 2000 Access to Care Public Use File) were taken from their Round 25 interview (i.e., the 1999 Access to Care Public Use File) or from their Round 31 interview (i.e., the 2001 Access to Care Public Use File).

3 *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.

4 *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.

5 ADL stands for Activity of Daily Living.

6 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 5.9 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 2000

Community-Only Residents¹

1 of 2

Indicator of Access to Care ²	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Beneficiaries (in 000s)	37,907	3,720	5,556	8,184	11,832	1,727	6,889
	123	132	131	193	204	67	180
Beneficiaries as a Percentage of Column Total Access to Care							
Usual Source of Care							
None ³	5.73	14.42	6.19	5.09	4.94	3.21*	3.44
	0.26	1.20	0.61	0.42	0.41	0.87	0.50
Doctor's office	74.29	60.68	66.83	82.54	80.58	87.42	63.68
	0.83	1.56	1.25	1.05	1.15	1.68	1.75
Doctor's clinic	7.08	5.90	9.59	8.69	7.29	6.34*	3.63
	0.42	0.80	0.73	0.90	0.57	1.01	0.56
HMO ⁴	6.05	0.35*	3.43	0.06*	2.58	0.00	25.84
	0.45	0.22	0.46	0.05	0.54	0.00	1.62
Hospital OPD/ER ⁵	2.68	4.47	7.60	1.09*	1.83	1.68*	1.39*
	0.19	0.71	0.59	0.22	0.30	0.64	0.32
Other clinic/health center	4.16	14.17	6.37	2.52	2.79	1.35*	2.02*
	0.21	1.18	0.55	0.35	0.33	0.52	0.36
Difficulty Obtaining Care							
Yes	3.90	7.37	7.99	1.27*	2.15	2.98*	5.12
	0.24	0.89	0.81	0.21	0.30	0.79	0.55
No	96.10	92.63	92.01	98.73	97.85	97.02	94.88
	0.24	0.89	0.81	0.21	0.30	0.79	0.55
Delayed Care Due to Cost							
Yes	6.97	21.11	11.80	3.82	4.37	1.25*	5.08
	0.29	1.48	0.86	0.47	0.43	0.53	0.56
No	93.03	78.89	88.20	96.18	95.63	98.75	94.92
	0.29	1.48	0.86	0.47	0.43	0.53	0.56

Table 5.9 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 2000

Community-Only Residents¹

2 of 2

Indicator of Access to Care ²	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Beneficiaries (in 000s)	37,907	3,720	5,556	8,184	11,832	1,727	6,889
	<i>123</i>	<i>132</i>	<i>131</i>	<i>193</i>	<i>204</i>	<i>67</i>	<i>180</i>
Beneficiaries as a Percentage of Column Total							
Continuity of Care							
Length of Association with Usual Source of Care							
No usual source ³	5.77	14.60	6.27	5.12	4.95	3.22*	3.45
	<i>0.26</i>	<i>1.23</i>	<i>0.61</i>	<i>0.43</i>	<i>0.41</i>	<i>0.87</i>	<i>0.50</i>
Less than 1 year	9.65	7.49	11.70	6.96	8.37	8.11*	14.98
	<i>0.31</i>	<i>0.93</i>	<i>0.74</i>	<i>0.62</i>	<i>0.57</i>	<i>1.49</i>	<i>0.83</i>
1 to less than 3 years	18.93	18.87	23.22	16.39	16.24	12.72	24.79
	<i>0.43</i>	<i>1.41</i>	<i>1.10</i>	<i>0.73</i>	<i>0.73</i>	<i>1.71</i>	<i>1.18</i>
3 to less than 5 years	15.99	16.24	16.23	15.39	15.22	17.03	17.45
	<i>0.31</i>	<i>1.45</i>	<i>0.98</i>	<i>0.69</i>	<i>0.61</i>	<i>1.82</i>	<i>0.88</i>
5 years or more	49.65	42.80	42.58	56.13	55.22	58.91	39.34
	<i>0.62</i>	<i>1.72</i>	<i>1.14</i>	<i>1.26</i>	<i>1.01</i>	<i>2.47</i>	<i>1.49</i>

Source: Medicare Current Beneficiary Survey, CY 2000 Cost and Use Public Use File, CY 2000 Access to Care Public Use File, supplemented by CY 1999 and CY 2001 Access to Care Public Use Files as needed to fill in missing data for sample persons not in the CY 2000 file.

Notes: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables. Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

- 1 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.
- 2 Responses for sample persons not interviewed in Round 28 (i.e., the 2000 Access to Care Public Use File) were taken from their Round 25 interview (i.e., the 1999 Access to Care Public Use File) or from their Round 31 interview (i.e., the 2001 Access to Care Public Use File).
- 3 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.
- 4 *HMO* stands for Health Maintenance Organization.
- 5 *OPD* stands for Outpatient Department; *ER* stands for Emergency Room.

Table 5.10 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 2000

Community-Only Residents¹

1 of 2

Measure of Satisfaction ²	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO ³
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Beneficiaries (in 000s)	37,907	3,720	5,556	8,184	11,832	1,727	6,889
	123	132	131	193	204	67	180
Beneficiaries as a Percentage of Column Total⁴							
Quality of Care							
General Care							
Very satisfied	28.76	22.51	19.61	28.66	33.93	36.81	28.67
	0.66	1.39	1.08	1.30	1.13	1.78	1.14
(Very) Unsatisfied	3.62	3.96	5.14	2.86	2.94	2.68*	4.50
	0.19	0.59	0.55	0.37	0.35	0.75	0.41
Follow-up Care							
Very satisfied	18.45	12.47	12.80	17.64	21.67	22.84	20.50
	0.54	1.27	0.82	1.01	0.98	2.03	0.99
(Very) Unsatisfied	3.06	2.56*	4.11	2.71	2.88	4.27*	2.91
	0.20	0.51	0.49	0.35	0.34	0.96	0.43
Access/Coordination of Care							
Availability							
Very satisfied	9.90	7.48	7.52	8.59	12.29	9.98*	10.54
	0.34	0.71	0.68	0.71	0.69	1.49	0.73
(Very) Unsatisfied	3.32	3.37*	4.92	2.55	3.27	3.72*	2.92
	0.22	0.62	0.57	0.30	0.38	0.90	0.51
Ease of Access to Doctor							
Very satisfied	18.97	12.66	10.35	17.55	22.96	25.92	22.37
	0.57	1.02	0.89	0.98	0.96	1.86	1.07
(Very) Unsatisfied	5.57	7.96	9.47	3.97	4.37	4.58*	5.38
	0.26	0.84	0.75	0.48	0.41	0.97	0.59
Can Obtain Care in Same Location							
Very satisfied	14.58	11.01	10.55	12.47	16.82	12.89	18.80
	0.53	1.00	0.76	0.85	0.94	1.50	1.07
(Very) Unsatisfied	4.70	5.08	5.81	4.18	4.86	4.67*	3.96
	0.23	0.73	0.60	0.45	0.39	0.93	0.53

Table 5.10 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 2000

Community-Only Residents¹

2 of 2

Measure of Satisfaction ²	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO ³
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Beneficiaries (in 000s)	37,907	3,720	5,556	8,184	11,832	1,727	6,889
	<i>123</i>	<i>132</i>	<i>131</i>	<i>193</i>	<i>204</i>	<i>67</i>	<i>180</i>
Beneficiaries as a Percentage of Column Total⁴							
Relationship with Primary Doctor							
Information from Doctor							
Very satisfied	17.69	12.00	12.93	16.20	20.63	20.28	20.63
	<i>0.51</i>	<i>1.13</i>	<i>0.71</i>	<i>0.86</i>	<i>0.92</i>	<i>2.09</i>	<i>0.96</i>
(Very) Unsatisfied	5.19	6.18	5.78	4.21	5.19	5.88*	5.17
	<i>0.26</i>	<i>0.87</i>	<i>0.66</i>	<i>0.49</i>	<i>0.43</i>	<i>1.17</i>	<i>0.52</i>
Doctor's Concern for Overall Health							
Very satisfied	19.49	13.96	14.24	17.86	23.29	21.14	21.66
	<i>0.53</i>	<i>1.26</i>	<i>0.92</i>	<i>1.00</i>	<i>0.87</i>	<i>1.76</i>	<i>1.06</i>
(Very) Unsatisfied	5.09	5.68	6.71	3.75	4.50	4.49*	6.20
	<i>0.27</i>	<i>0.71</i>	<i>0.71</i>	<i>0.41</i>	<i>0.51</i>	<i>0.85</i>	<i>0.52</i>
Cost of Care							
Cost							
Very satisfied	16.54	8.27	15.53	13.12	19.61	18.72	20.05
	<i>0.53</i>	<i>1.04</i>	<i>0.92</i>	<i>0.92</i>	<i>0.93</i>	<i>1.62</i>	<i>0.98</i>
(Very) Unsatisfied	14.27	25.46	13.37	16.22	11.38	11.58	12.26
	<i>0.45</i>	<i>1.47</i>	<i>0.79</i>	<i>0.87</i>	<i>0.65</i>	<i>1.61</i>	<i>0.92</i>

Source: Medicare Current Beneficiary Survey, CY 2000 Cost and Use Public Use File, CY 2000 Access to Care Public Use File, supplemented by CY 1999 and CY 2001 Access to Care Public Use Files as needed to fill in missing data for sample persons not in the CY 2000 file.

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

Values followed by an asterisk (*) indicate that the estimates are based on cell counts of less than 50 sample persons.

1 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.

2 Responses for sample persons not interviewed in Round 28 (i.e., the 2000 Access to Care Public Use File) were taken from their Round 25 interview (i.e., the 1999 Access to Care Public Use File) or from their Round 31 interview (i.e., the 2001 Access to Care Public Use File).

3 HMO stands for Health Maintenance Organization.

4 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.