

# Individuals Living in the Community with Chronic Conditions and Functional Limitations: A Closer Look

Office of the Assistant Secretary for Planning & Evaluation  
United States Department of Health and Human Services

The Lewin Group

January, 2010

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In particular, DALTCP addresses policies concerning: nursing home and community-based services, informal caregiving, the integration of acute and long-term care, Medicare post-acute services and home care, managed care for people with disabilities, long-term rehabilitation services, children's disability, and linkages between employment and health policies. These activities are carried out through policy planning, policy and program analysis, regulatory reviews, formulation of legislative proposals, policy research, evaluation and data planning.

This report was prepared under contract #HHS-100-95-0046 between HHS's ASPE/DALTCP and the Lewin Group. For additional information about this subject, you can visit the DALTCP home page at [http://aspe.hhs.gov/\\_/office\\_specific/daltcp.cfm](http://aspe.hhs.gov/_/office_specific/daltcp.cfm) or contact the ASPE Project Officer, John Drabek, at HHS/ASPE/DALTCP, Room 424E, H.H. Humphrey Building, 200 Independence Avenue, S.W., Washington, D.C. 20201. His e-mail address is: [John.Drabek@hhs.gov](mailto:John.Drabek@hhs.gov).

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# Table of Contents

<b>I</b>	<b>INTRODUCTION</b>	
	Data & Definitions .....	2
<b>II</b>	<b>ALL COMMUNITY RESIDENTS</b>	
	Individuals and health spending by health/functional status .....	3
	Average health spending by number of chronic conditions and functional limitations.....	4
	Average health spending by health/functional status and health service type.....	5
	Average health spending by health/functional status and source of financing .....	6
	Overview of community residents with functional limitations and chronic conditions .....	7
	Average health spending by primary source of insurance.....	8
	Most common chronic conditions by health/functional status .....	9
	Most common chronic conditions by age.....	10
	Individuals and health spending by age and health/functional status.....	12
<b>III</b>	<b>TOP 5% OF HEALTH CARE SPENDERS</b>	
	Distribution of health spending by top 5% spenders versus those not in top 5% spenders.....	14
	Relative risk of being in the top 5% of spenders by health/functional status .....	15
	Individuals and health spending by health/functional status among the top 5% spenders .....	16
	Most common chronic conditions by age among the top 5% spenders .....	17
	Average health spending by health service type and health/functional status among the top 5% spenders.....	19
	Average health spending by primary source of insurance among the top 5% spenders.....	20
	Average health spending by health service type and primary source of insurance among the top 5% spenders.....	21
<b>IV</b>	<b>DUAL ELIGIBLES</b>	
	Overview of dual eligibles.....	22
	Average health spending by type of service and health/functional status among dual eligibles.....	23
<b>V</b>	<b>CONCLUSION</b>	
	<b>APPENDIX</b>	





## Introduction

- ▶ Controlling health care costs has become an enormous policy challenge.
- ▶ In examining drivers behind health care costs, researchers have found that individuals with chronic conditions account for a significant amount of health care spending.
- ▶ Statistics showing that one half of the U.S. population has at least one chronic condition and represents more than 80 percent of the health care spending fail to discriminate among those who place a particularly high burden on the health system.
- ▶ This chartbook examines the combination of chronic conditions and functional limitations as a potentially better predictor of high health care utilization.
- ▶ People with functional limitations and chronic conditions need more health care services and help with activities of daily living, placing heavy demands on service delivery, social supports, and public budgets.
- ▶ Although nearly half of the persons living in the community have at least one chronic condition, less than a third of those with chronic conditions have any functional limitation.
- ▶ As the chartbook details, the co-occurrence of chronic conditions and functional limitations has wide-reaching consequences for the health care system, individuals, and the economy. Providing individuals who have both chronic conditions and functional limitations with delivery of effective treatment and coordination across health care and social service systems may offer a high yield strategy to improve lives and control spending.

### Data and Definitions

- ▶ **Data** – The analyses rely on the 2006 Medical Expenditures Panel Survey (MEPS) which represents the non-institutionalized U.S. population. Having only information on the non-institutionalized is an important limitation for studying chronic disease and disability spending because the nearly two million nursing facility residents not included in the analysis would add close to \$200 billion to the \$1.03 trillion represented by the population presented here. Health spending includes the following services: inpatient stays, physician offices or outpatient visits, emergency room visits, prescription drugs, and home health care.<sup>1</sup>
- ▶ **Chronic Conditions** – A chronic condition lasts or is expected to last 12 months or longer and either places limitations on normal functioning or requires ongoing care. The analysis relied on a list of 180 diagnosis classifications<sup>2</sup> determined to be chronic by a panel of five internists for a prior study for the Agency for Healthcare Research and Quality (AHRQ).<sup>3</sup> This analysis focuses on the conditions included in the list defined by AHRQ as chronic.<sup>4</sup>
- ▶ **Functional Limitations** – Limitation in one or more of the following:
  - Physical activity, such as difficulty walking, bending, or stooping.
  - Normal life activity, such as work, housework, or school.
  - Received assistance with Activities of Daily Living (ADL): bathing, eating, dressing, transferring (i.e., from bed to chair), toileting, and walking.
  - Received assistance with Instrumental Activities of Daily Living (IADL): doing housework, preparing meals, taking medications, shopping, telephoning, and managing money.
- ▶ **Top 5% of Spenders** – People who had health care expenditures greater than \$14,600 in 2006 represented the top 5 percent of spenders.
- ▶ **Appendix Tables** – Each table in the Appendix provides data used in developing the corresponding figure or chart in this report. For example, Exhibit A-3 provides the amounts paid for each type of service listed in the bar chart Exhibit 3.

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<sup>1</sup> MEPS may miss some expenditures for high-cost cases while people are living in the community due to sample attrition. For further information see: Sing, Merrile, Jessica S. Banthin, Thomas M. Selden, Cathy A. Cowan and Sean P. Keehan, "Reconciling Medical Expenditure Estimates from the MEPS and NHEA, 2002," *Health Care Financing Review* 28, no. 1:25-40.

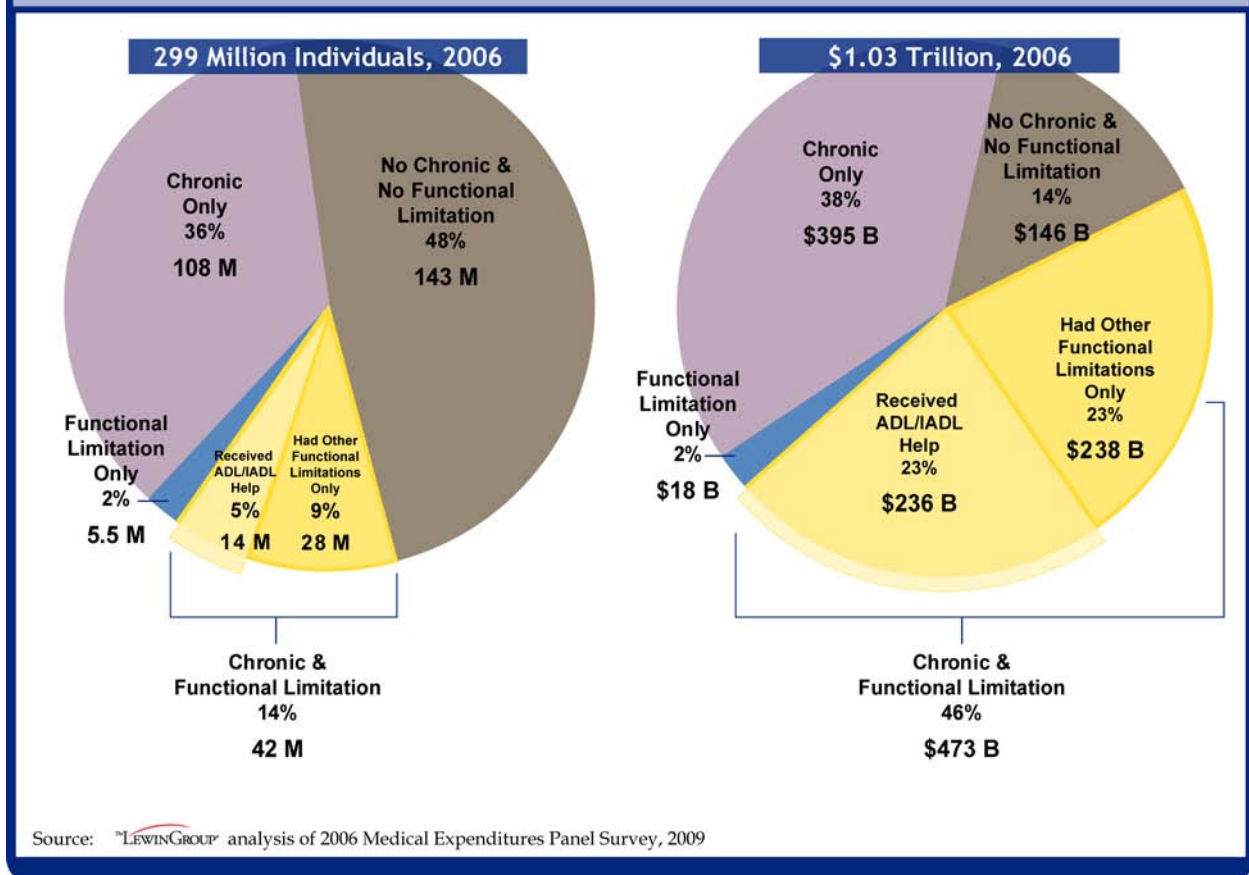
<sup>2</sup> Diagnosis classification can be defined by 3-digit International Classification of Diseases codes (ICD-9).

<sup>3</sup> <http://www.hcup-us.ahrq.gov/toolsoftware/chronic/chronic.jsp#files>

<sup>4</sup> Hwang, W., Heller, W., Ireys, H., Anderson, G. 2001. "Out-Of-Pocket Medical Spending for Care of Chronic Conditions," *Health Affairs* 20, no. 6:267-278.

## People with Chronic Conditions and Functional Limitations Use More Health Care Services than Those with Chronic Conditions Only

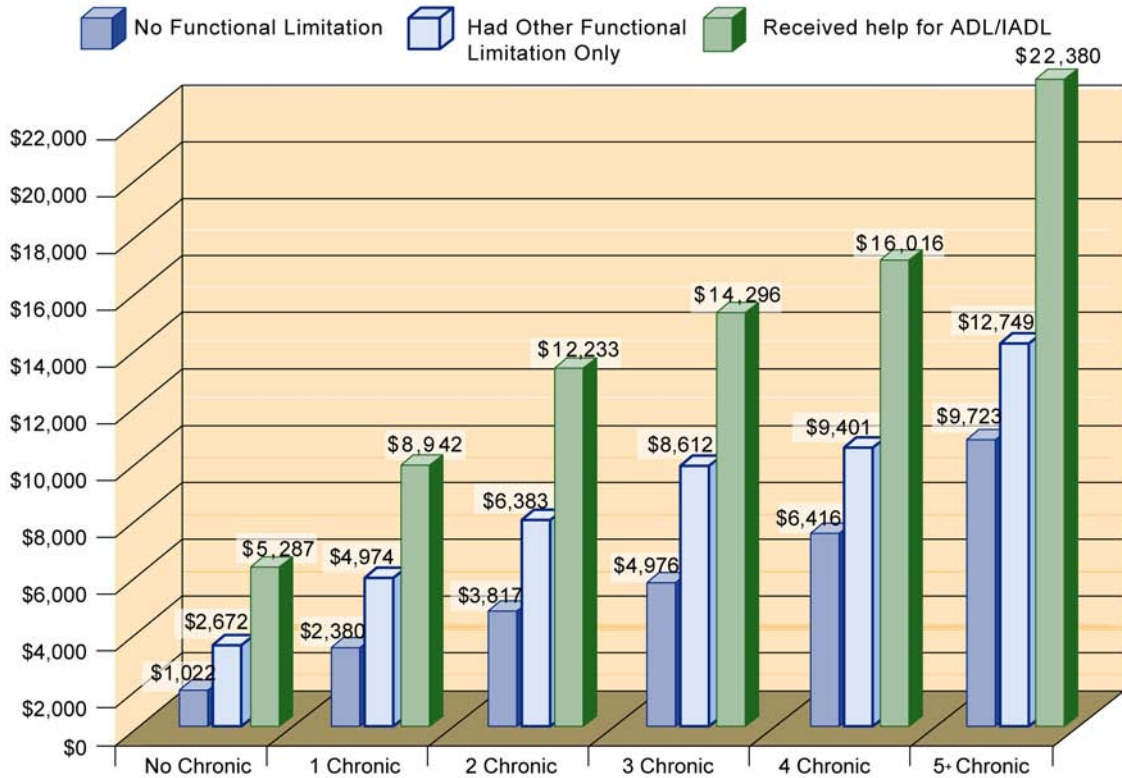
Exhibit 1: Distribution of Community Residents and Health Care Spending by Select Groups, 2006



- ▶ Fourteen percent of U.S. community residents had both chronic conditions and functional limitations. This 14 percent accounts for 46 percent of all health care spending.
- ▶ Among the 42 million people with both a chronic condition and a functional limitation, 14 million also received help with an ADL or IADL. This 14 million represents 5 percent of the population and 23 percent of all spending.
- ▶ Two percent of the population report functional limitations, including some receiving assistance with ADLs or IADLs, but no chronic conditions. Injuries and infections account for most of the non-chronic conditions among those with functional limitations only.
- ▶ People with chronic conditions and functional limitations spent three times as much as people with only chronic conditions.

## Among People with Chronic Conditions, Functional Limitations Are Associated with Increased Average Health Spending, Regardless of the Number of Chronic Conditions

Exhibit 2: Average Annual Health Spending by Number of Chronic Conditions & Functional Limitations or ADLs/IADLs, 2006

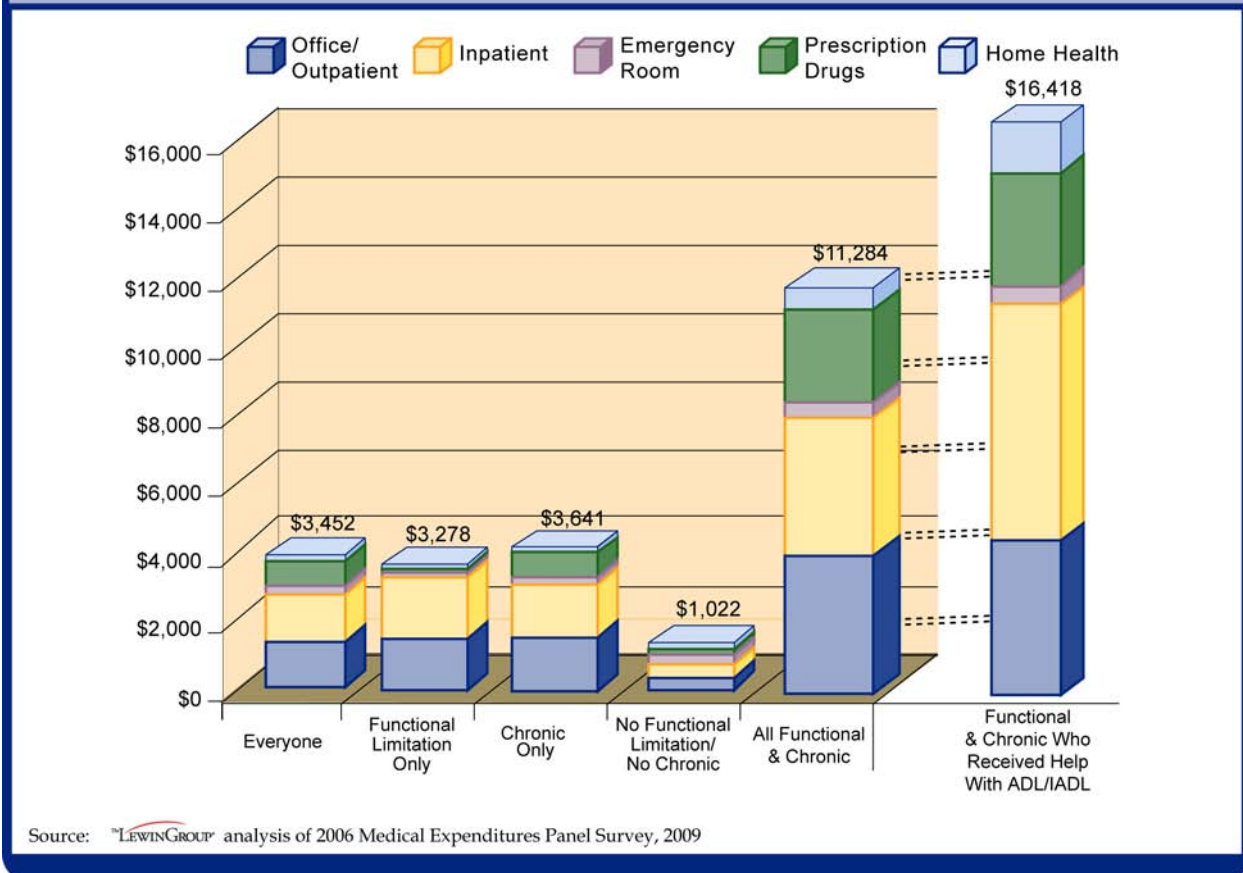


Source: LEWINGROUP analysis of 2006 Medical Expenditures Panel Survey, 2009

- ▶ People with chronic conditions who received help for their ADLs or IADLs spent much more than their counterparts with just chronic conditions. For example, among those with one chronic condition, people who received help with an ADL or IADL spent almost four times that of people with only one chronic condition (\$8,942 versus \$2,380 per person per year, respectively).
- ▶ People who did not receive assistance with ADLs or IADLs, but still had some functional limitations, spent considerably more than people with chronic conditions only.

## People with Functional Limitations and Chronic Conditions Spend More on All Types of Health Care Services

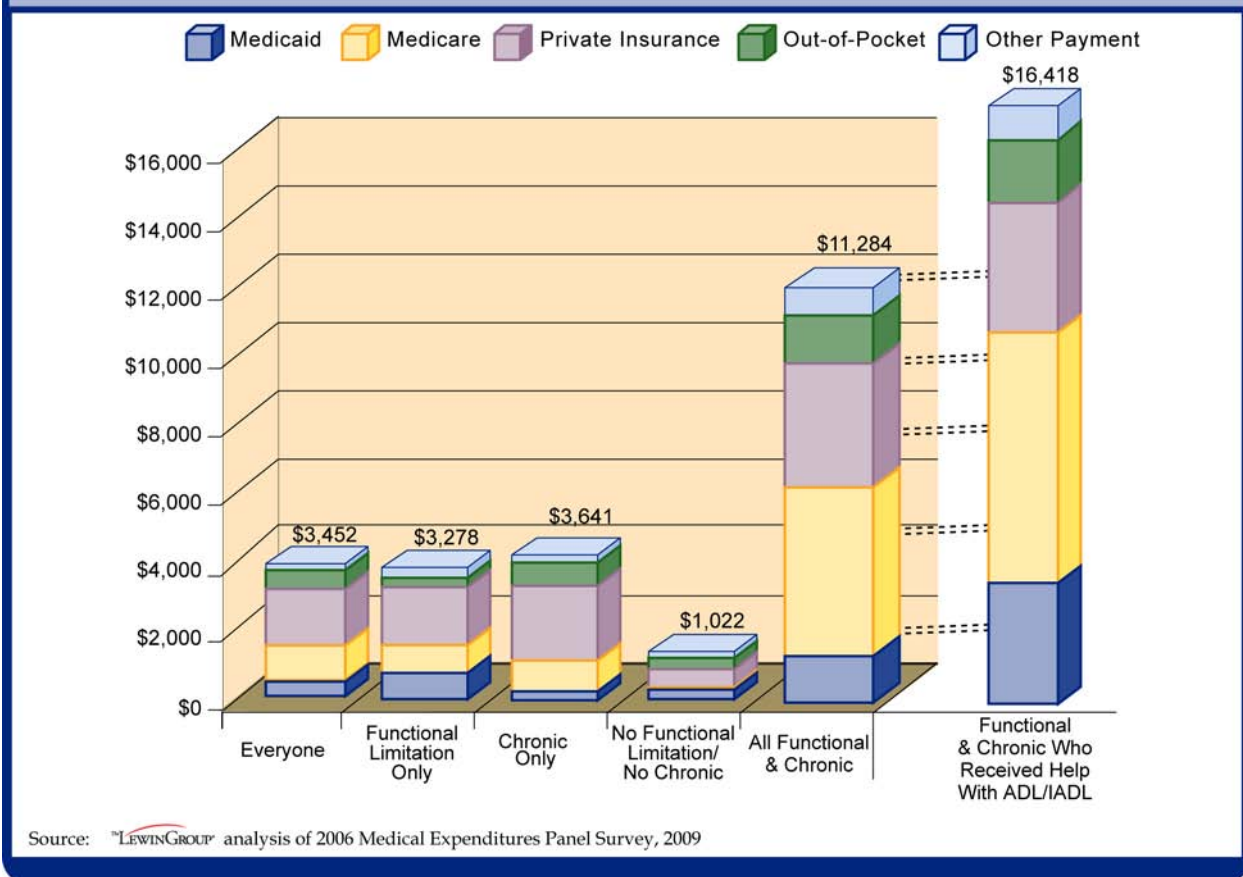
Exhibit 3: Average Spending by Type of Service for Select Groups, 2006



- ▶ On average, the 42 million people with chronic conditions and functional limitations spent at least three times the overall average annual health expenditures for all community residents (\$11,284 versus \$3,452). People with chronic conditions and functional limitations also spend three times what people who only have chronic conditions spend (\$11,284 versus \$3,641).
- ▶ The subset of persons with chronic conditions and functional limitations that received help with ADLs or IADLs on average spent the most—\$16,418 per person. This is almost five times the overall population average of \$3,452.
- ▶ Approximately 42 percent of spending for those with chronic conditions and who received help with ADLs or IADLs went to inpatient hospital care, suggesting that improved care management may yield savings in health care spending.

## Medicare and Private Insurance Cover the Majority of Health Spending for People with Functional Limitations & Chronic Conditions

Exhibit 4: Health Spending by Source of Financing for Select Groups, 2006



- ▶ People with chronic conditions and functional limitations had higher average spending across all payment sources.
- ▶ People with a combination of chronic conditions and functional limitations faced higher out-of-pocket costs. They paid two to three times as much out-of-pocket as the overall population, \$1,557 versus \$654, but paid a smaller proportion of their total expenditures out-of-pocket (14 percent versus 19 percent). (See Appendix).
- ▶ Public programs covered a large portion of expenditures for people who received help with ADLs and IADLs. On average, Medicare accounted for 48 percent of the group's annual expenditures and Medicaid covered 13 percent.

## People Under Age 65 Represent More than Half of the Population with Chronic Conditions and Functional Limitations

Exhibit 5: Overview of Community Residents with Functional Limitations and Chronic Conditions by Age Groups, 2006

	Number of Community Residents (Millions)	Percent of Age Group with Chronic Conditions & Functional Limitations	Total Health Care Expenditures (Billions)	Average Annual Health Care Expenditures
All Ages	42	14%	\$473	\$11,283
<i>Age 65 &amp; Older</i>	18	48%	\$235	\$12,880
<i>Under Age 65</i>	24	9%	\$239	\$10,068

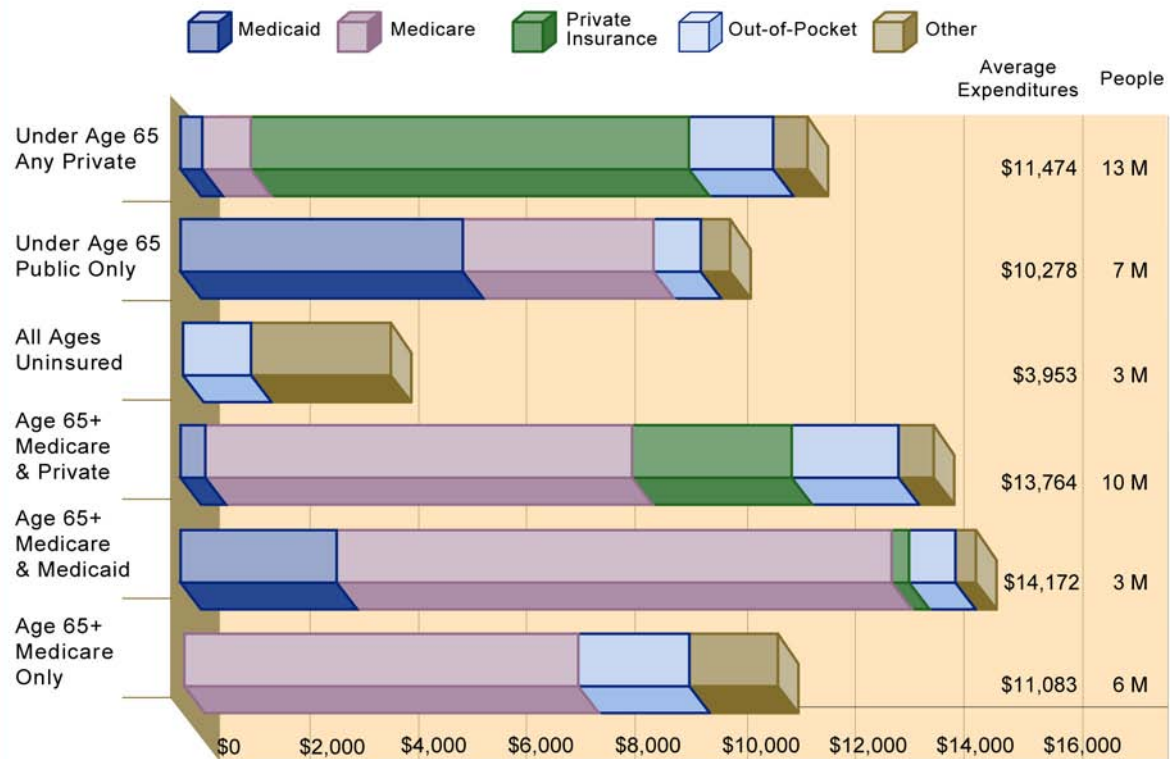
Source: <sup>®</sup>LEWINGROUP analysis of 2006 Medical Expenditures Panel Survey, 2009

- ▶ The elderly have a higher prevalence rate of chronic conditions and functional limitations (48 percent of the elderly versus nine percent of the non-elderly).
- ▶ However, the large size of the population under age 65 results in a greater number of non-elderly persons with chronic conditions and functional limitations. Most of the 42 million persons with chronic conditions and functional limitations were under age 65 (24 million, or 57 percent).
- ▶ Total health care spending for the younger and older groups of persons with chronic conditions and functional limitations are similar, with \$239 billion for the non-elderly and \$235 billion for the elderly.
- ▶ However, average annual health spending for those with chronic conditions and functional limitations is 28 percent higher among the elderly than among the non-elderly (\$12,880 for the elderly and \$10,068 for the non-elderly).

## II. All Community Residents

### Among the 42 Million People with Both Chronic Conditions and Functional Limitations, Private Insurance Plays a Greater Role for Individuals Under Age 65

Exhibit 6: Health Spending by Primary Source of Insurance and Payment Source, 2006



Source: LEWINGROUP analysis of 2006 Medical Expenditures Panel Survey, 2009

- ▶ Among individuals under age 65 with chronic conditions and functional limitations, 13 million had some private insurance, while 7 million had only public insurance.
- ▶ Among older Americans with chronic conditions and functional limitations, dual eligibles spent the most on average (\$14,172 per person per year). Dual eligibles spent more than those who used a combination of public and private insurance (\$13,764 per person per year) or people who primarily used Medicare only (\$11,083 per person per year).



## People with Chronic Conditions Only and Those with Both Chronic Conditions and Functional Limitations Have Similar Chronic Conditions

Exhibit 7: Most Common Conditions by Select Groups, 2006

People with Chronic Conditions Only	People with Functional Limitations Only	People with Chronic Conditions & Functional Limitations	People with Chronic Conditions & Received ADL/IADL Help
Chronic Conditions	Conditions Not Classified as Chronic by AHRQ	Chronic Conditions	Chronic Conditions
Essential Hypertension	Back Disorder Nec & Nos	Essential Hypertension	Essential Hypertension
Allergic Rhinitis	Injury Nec/Nos	Dis of Lipoid Metabolism	Diabetes Mellitus
Dis of Lipoid Metabolism	Joint Disorder Nec & Nos	Arthropathies Nec/Nos	Dis of Lipoid Metabolism
Chronic Sinusitis	General Symptoms	Depressive Disorder Nec	Depressive Disorder Nec
Depressive Disorder Nec	Acute Nasopharyngitis	Diabetes Mellitus	Arthropathies Nec/Nos
Asthma	Other Intestinal Infection	Neurotic Disorders	Neurotic Disorders
Neurotic Disorders	Other Soft Tissue Dis	Allergic Rhinitis	Allergic Rhinitis
Diabetes Mellitus	Normal Pregnancy	Intervertebral Disc Dis	Ill-Defined Heart Disorder
Arthropathies Nec/Nos	Periph Enthesopathies	Asthma	Asthma
Migraine	Skin/Other Integument Symp	Ill-Defined Heart Disorder	Intervertebral Disc Dis
Acquired Hypothyroidism	Influenza	Chronic Sinusitis	Cataract
Hyperkinetic Syndrome	Sprain of Ankle & Foot	Cataract	Cardiac Dysrhythmias
Intervertebral Disc Disorder	Diseases of Esophagus	Cardiac Dysrhythmias	Acquired Hypothyroidism
Cataract	Sprain Of Knee & Leg	Acquired Hypothyroidism	Chronic Sinusitis
Ill-Defined Heart Disorder	Other Urinary Tract Disorder	Glaucoma	Heart Failure

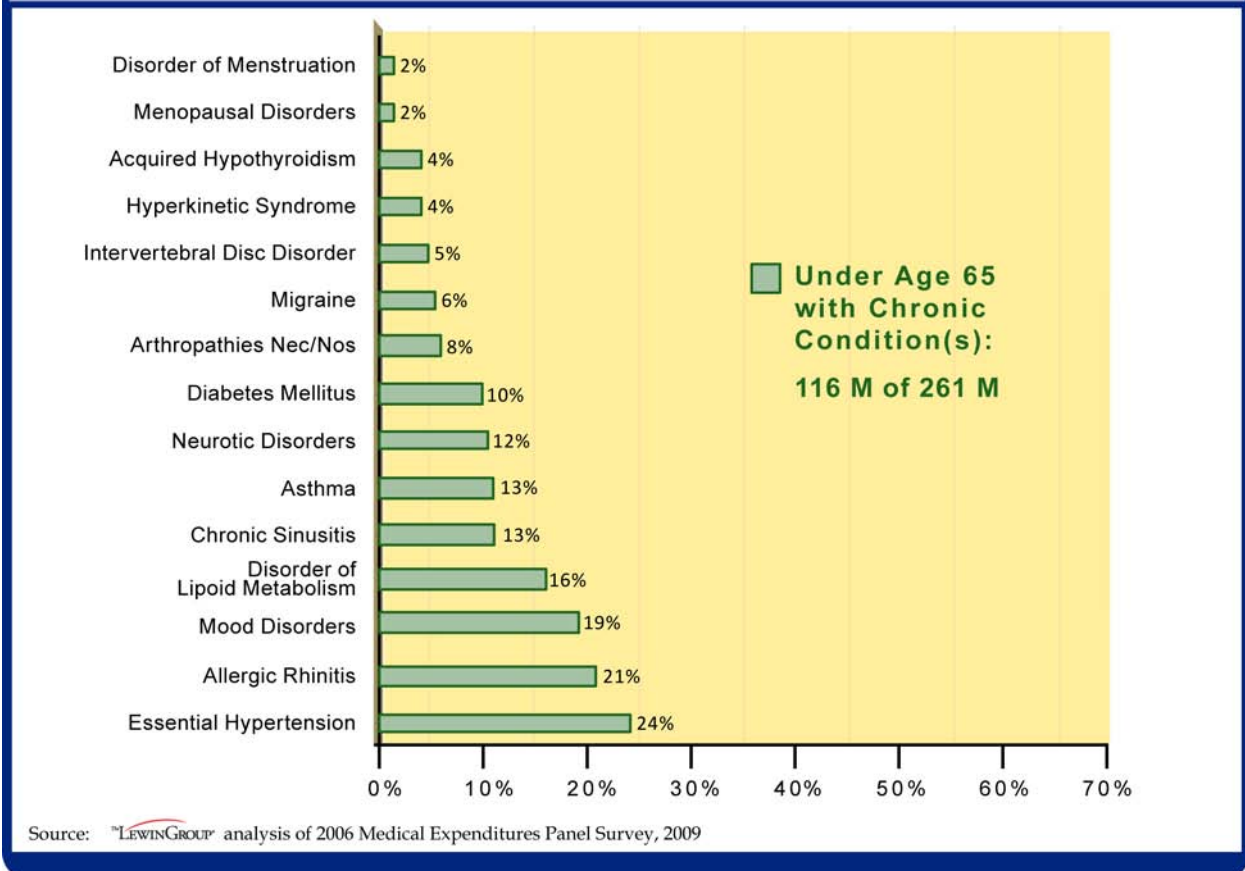
Source: <sup>®</sup>LEWINGROUP analysis of 2006 Medical Expenditures Panel Survey, 2009

Dis: disorder; Nec: not elsewhere classified; Nos: not otherwise specified

- ▶ Hypertension (high blood pressure) tops the chronic condition list for all groups with some chronic condition.
- ▶ People with chronic conditions and functional limitations commonly had hypertension, diabetes, lipid metabolism disorders (high cholesterol), and arthritis disorders.
- ▶ Mental health conditions (depression and neurotic disorders) constituted two of the top ten chronic conditions among people with chronic conditions and functional limitations.
- ▶ The chronic conditions of allergies, chronic sinusitis, and asthma were more frequent among those with chronic conditions only than among those with both chronic conditions and functional limitations.

## High Blood Pressure and Allergies Represent the Most Common Chronic Conditions Among People Under Age 65

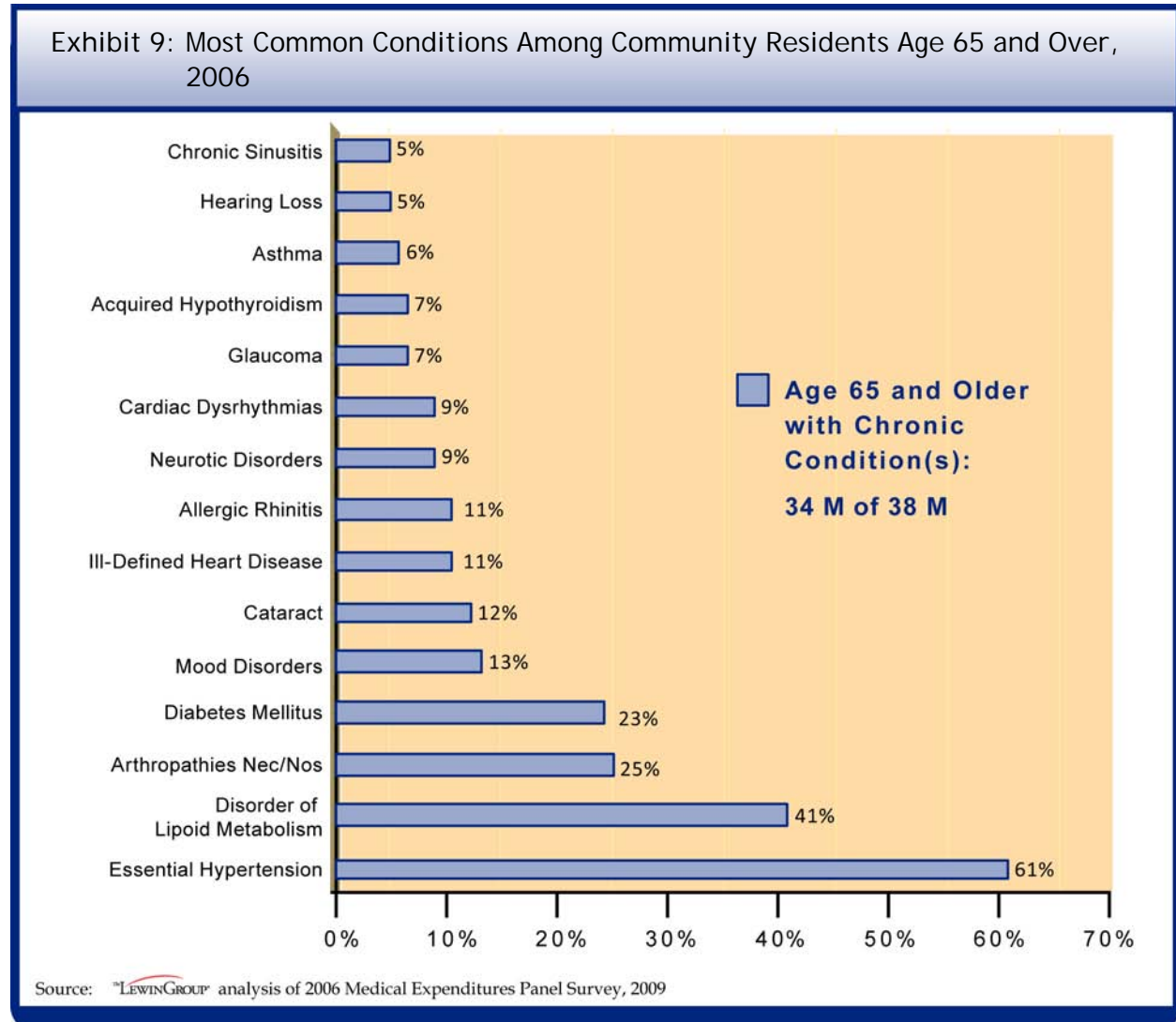
Exhibit 8: Most Common Conditions Among Community Residents Under Age 65, 2006



Nec: not elsewhere classified; Nos: not otherwise specified

- ▶ About 44 percent of people under age 65 had a least one chronic condition (116 million out of 261 million).
- ▶ About a quarter of people under age 65 with a chronic condition had hypertension (high blood pressure), and about a fifth had allergic rhinitis (allergies).
- ▶ Other common chronic conditions included mood disorders (depression and affective psychoses) and lipoid metabolism disorders.

## High Blood Pressure and High Cholesterol Represent the Most Common Chronic Conditions Among People Age 65 and Over



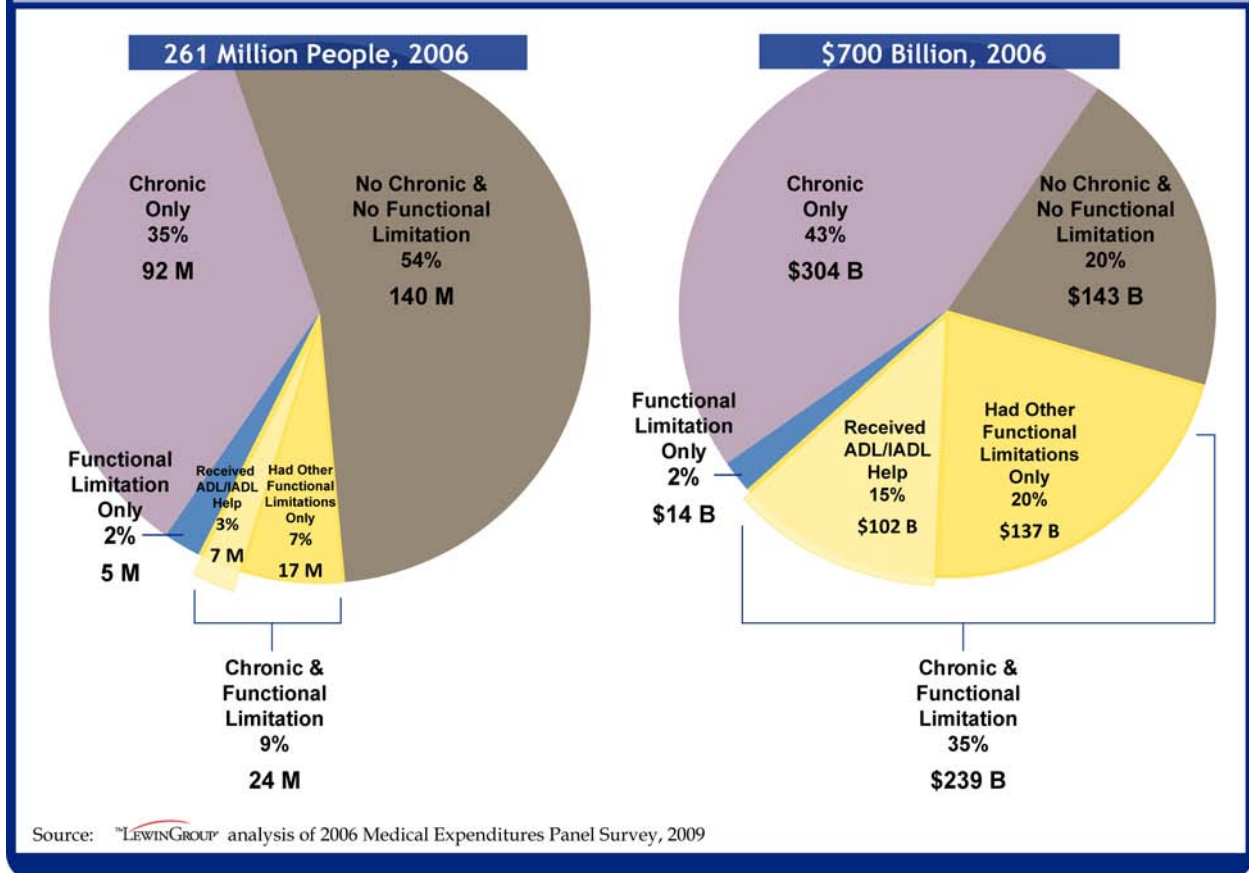
Nec: not elsewhere classified; Nos: not otherwise specified

- ▶ About 89 percent of people age 65 and over had a least one chronic condition (34 million out of 38 million).
- ▶ About 60 percent of people age 65 and over with chronic conditions had hypertension (high blood pressure). About 40 percent had a lipid metabolism disorder (high cholesterol). About a quarter had arthritis and nearly a quarter had diabetes.
- ▶ Some conditions affected much larger percentages of people age 65 and over than people under age 65, such as arthropathies (arthritis), diabetes, hypertension and lipid metabolism disorders.

## II. All Community Residents

### People with Functional Limitations and Chronic Conditions Represent Nine Percent of Adults Under Age 65, but Account for One-Third of the Group's Health Care Expenditures

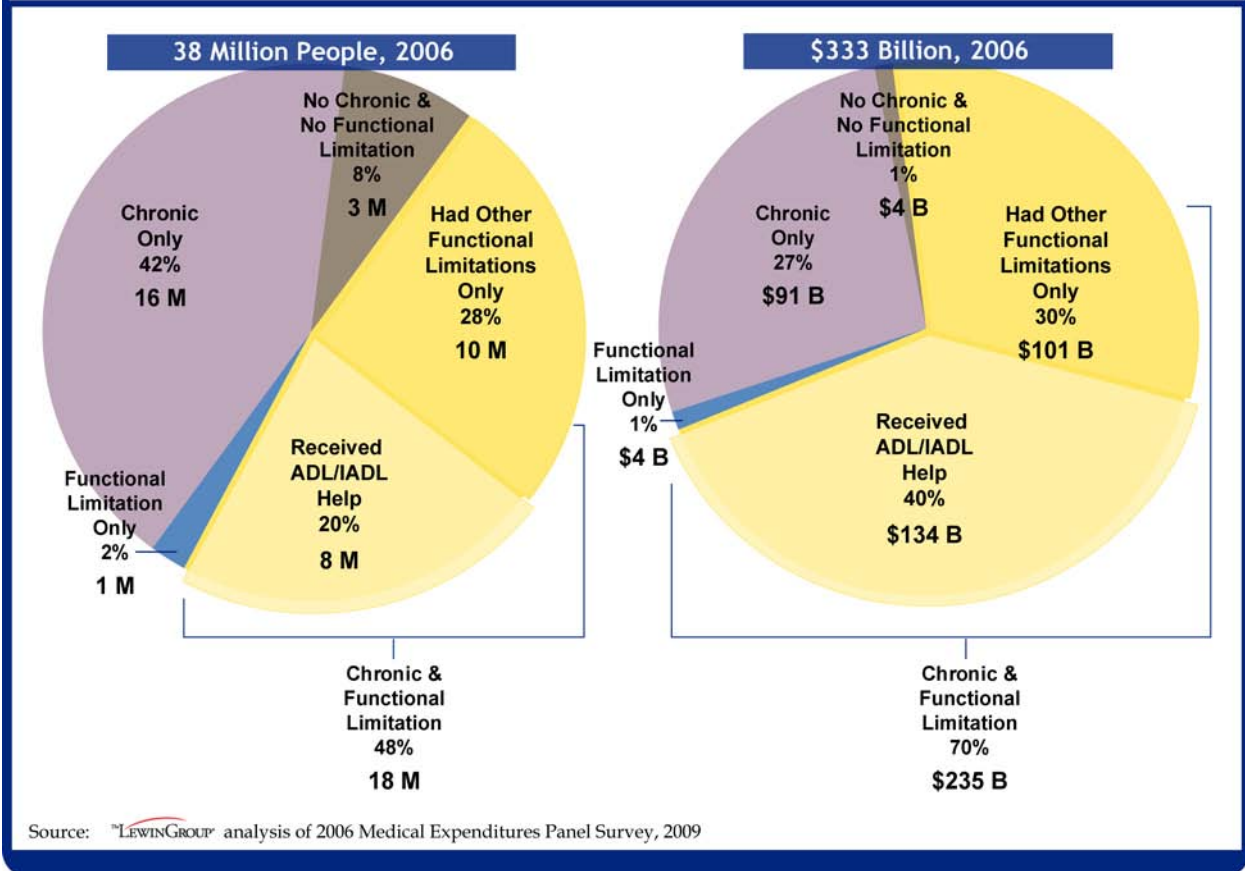
Exhibit 10: Distribution of Community Residents Under Age 65 and Health Care Spending by Select Groups, 2006



- ▶ Overall, the group under age 65 with chronic conditions and functional limitations (24 million) accounted for \$239 billion in health care expenditures. On average, people in this group spent \$10,391 on health care in 2006.
- ▶ Among people under age 65, the group with chronic conditions who received help with ADLs or IADLs had disproportionately high health expenditures: 3 percent of people accounted for 15 percent of all spending.

## Almost Half of Older Adults Have Functional Limitations and Chronic Conditions, and Account for Over Two-Thirds of All Health Spending for that Age Group

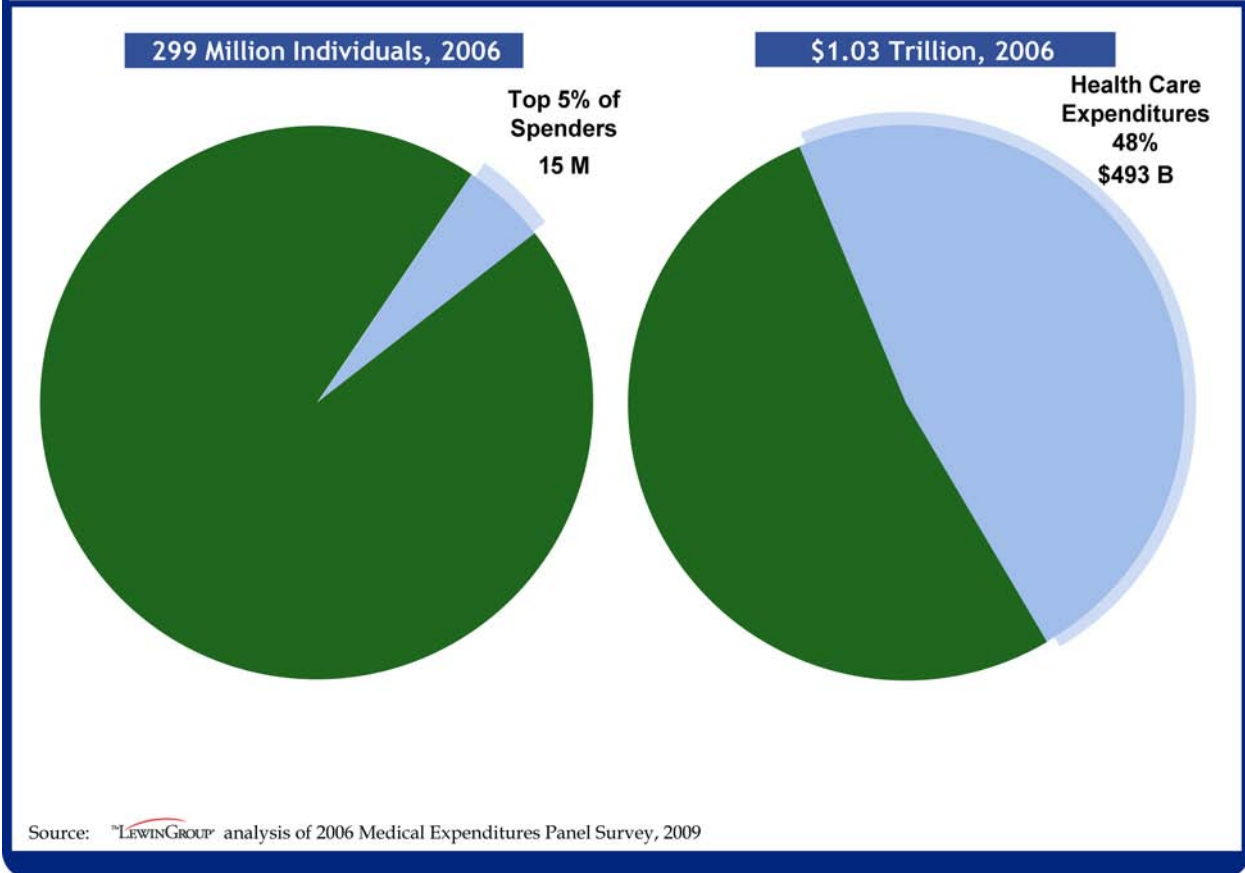
Exhibit 11: Distribution of Community Residents Age 65 and Over and Health Care Spending by Select Groups, 2006



- ▶ The 18 million people age 65 and over with chronic conditions and functional limitations made up 6 percent of the all-ages community-based population and represented about a quarter of the nation's total health care spending (\$235 billion out of \$1.03 trillion).
- ▶ The 20 percent of older adults with chronic conditions who received help with ADLs or IADLs represented 40 percent of all spending by community residents age 65 and over.
- ▶ Older adults who had chronic conditions without functional limitations represented a relatively modest share of spending. The 42 percent with at least one chronic condition but no functional limitation accounted for 27 percent of spending for older adults.

## The Top 5% of Health Care Spenders in the Community Spend Half of Total Health Care Resources

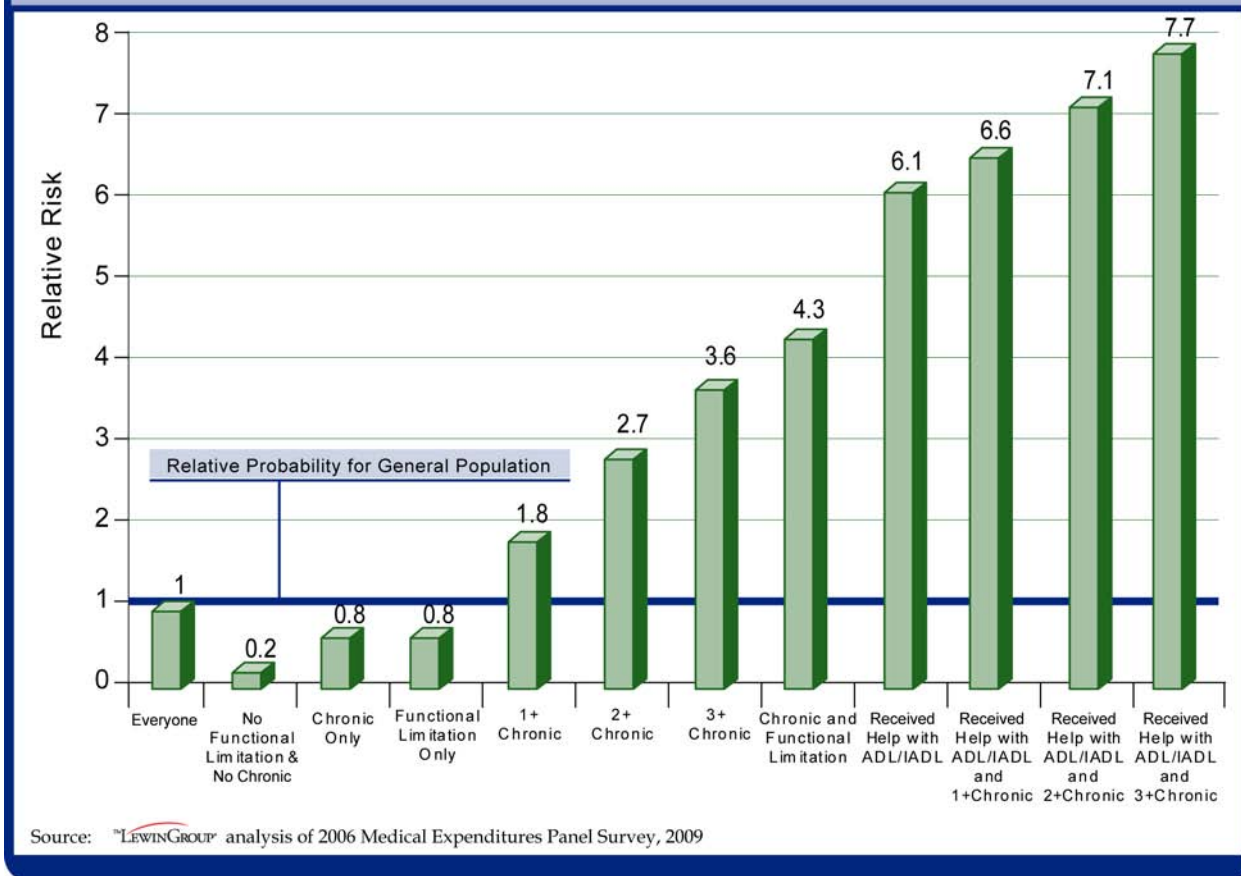
Exhibit 12: Distribution of Health Care Spending by Top 5% Spenders Versus Those Not in the Top 5% Spenders, 2006



- ▶ Within the \$1.03 trillion in health care expenditures among the U.S. community population, spending is highly concentrated among a relatively small proportion of individuals.
- ▶ Given the high concentration of medical expenditures incurred by the top 5 percent of the population ranked by health care spending, identifying the characteristics of these individuals is important for policy.

## Among People with Chronic Conditions, Having a Functional Limitation Significantly Increases the Likelihood of Being in the Top 5% of Health Care Spenders

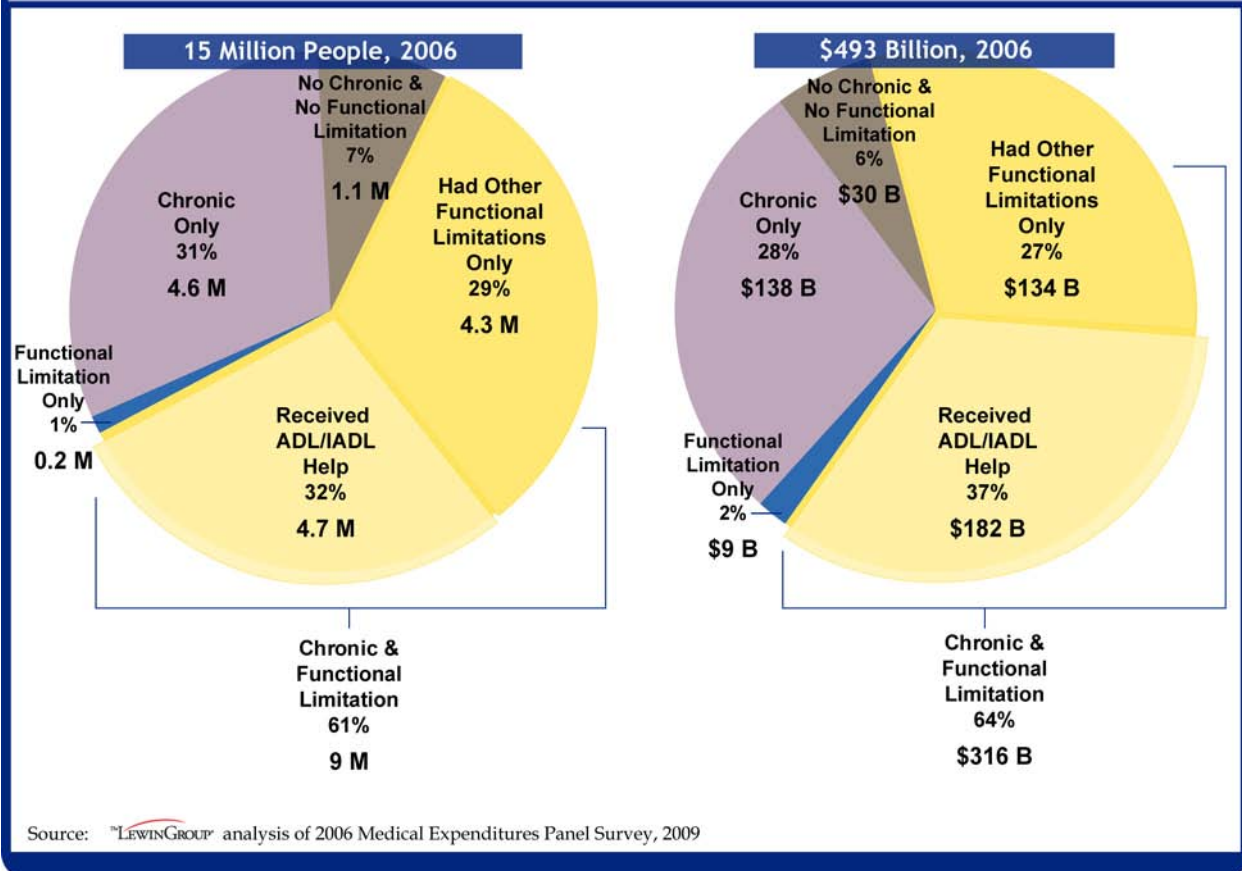
Exhibit 13: Relative Risk of Being in the Top 5% of Health Care Spenders by Selected Groups, 2006



- ▶ People with functional limitations and chronic conditions were over four times as likely to be in the top 5 percent of spenders as the general population.
- ▶ People with at least one chronic condition who received help with an ADL or IADL were over six times as likely to be in the top 5 percent of spenders as the general population. Number of people in each bar and details of relative risk can be found in the Appendix.

## Among the Top 5% of Spenders, a Majority Have Chronic Conditions and Functional Limitations

Exhibit 14: Distribution of Community Residents and Health Care Spending Among the Top 5% of Spenders by Select Groups, 2006

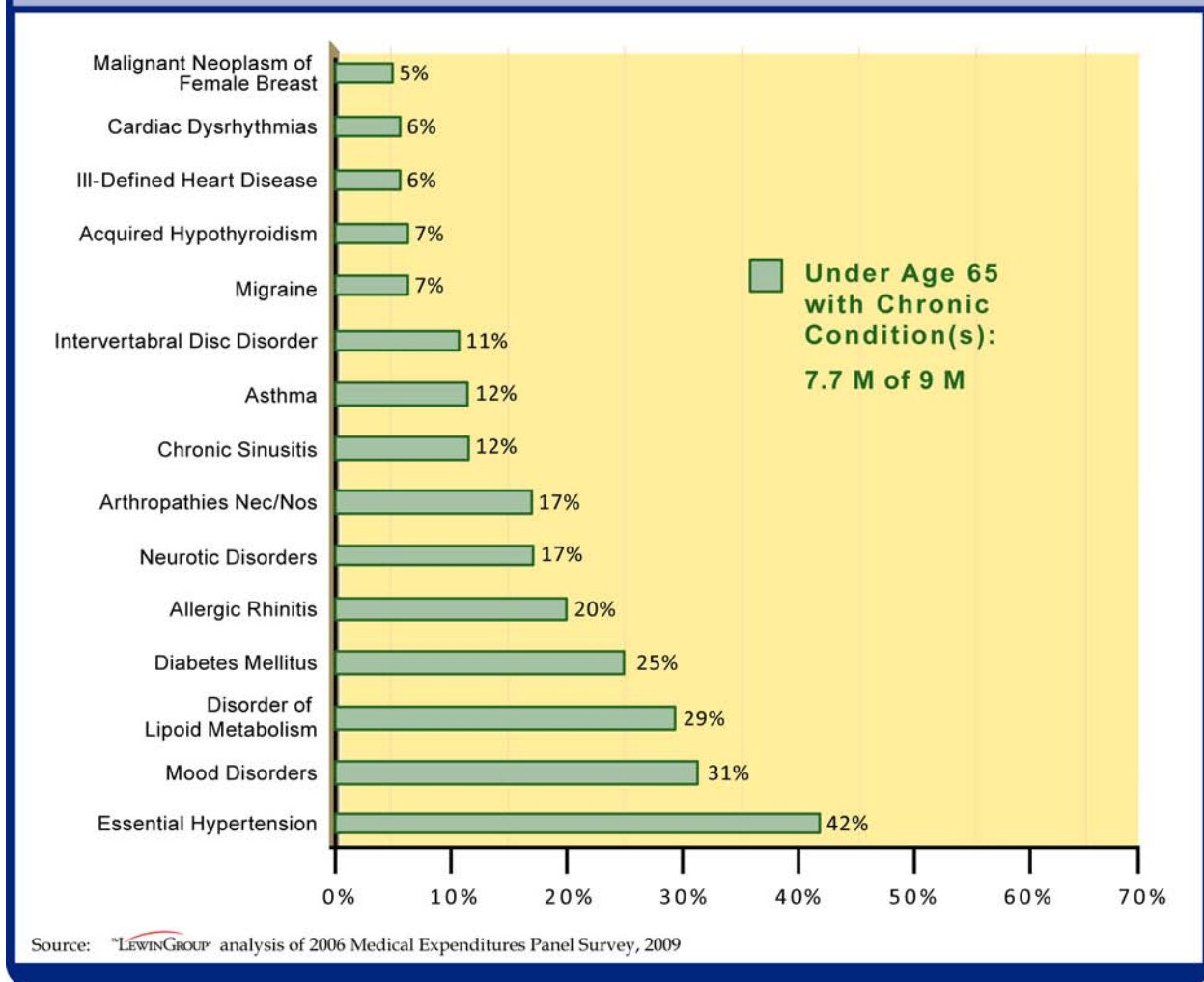


- ▶ People with chronic conditions who also received help with an ADL or IADL represented one-third of the top 5 percent of spenders and over a third of expenditures.
- ▶ People in the top 5 percent of spenders with chronic conditions and, who received help with ADL or IADL, represent less than 2 percent of the overall community-based population, but represent 18 percent of all spending.



## High Blood Pressure and Mood Disorders Represent the Most Common Chronic Conditions Among the Top 5% of Spenders Under Age 65

Exhibit 15: Most Common Chronic Conditions Among Top 5% of Spenders Under Age 65, 2006



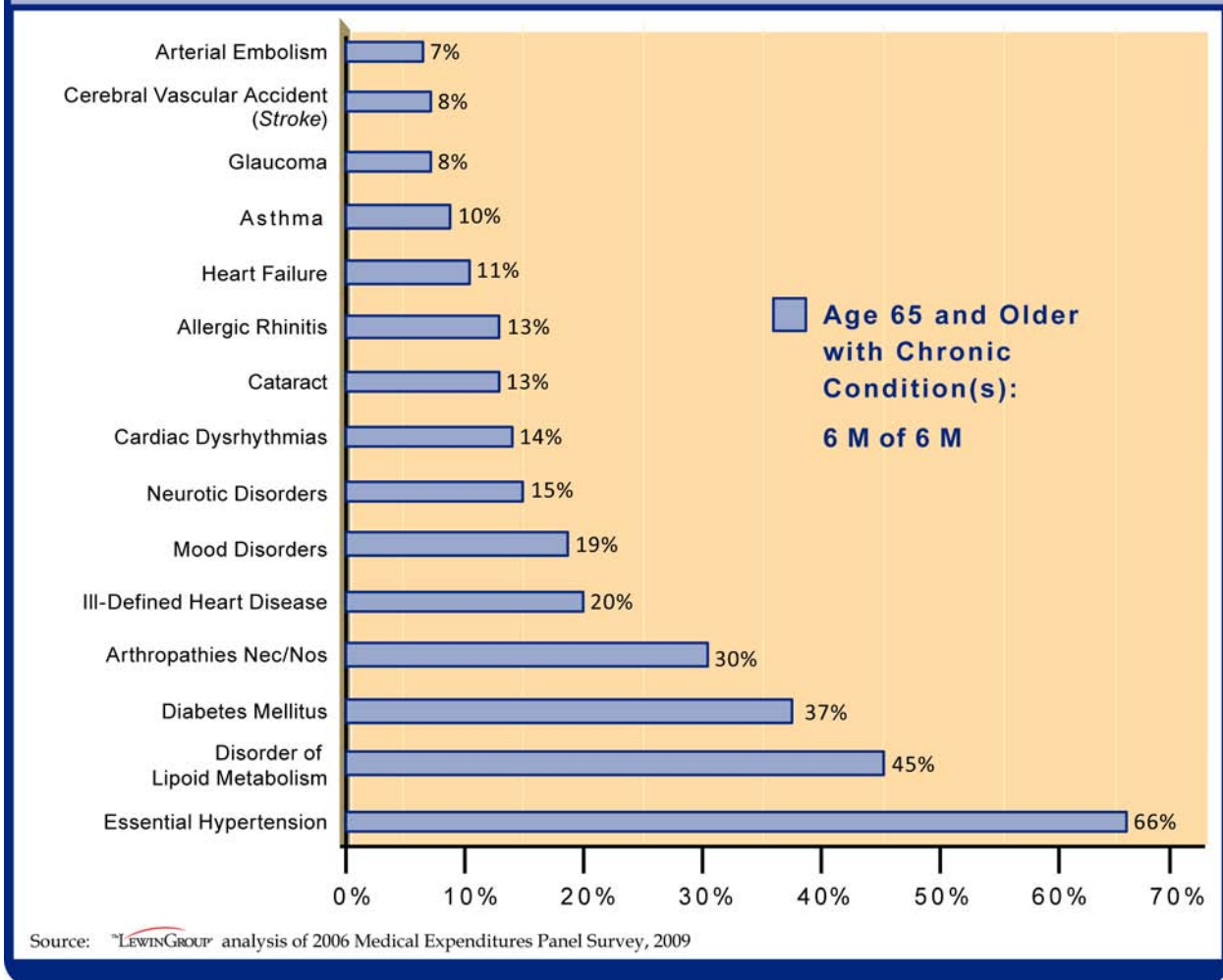
Nec: not elsewhere classified; Nos: not otherwise specified

- ▶ Top chronic conditions for those in the top 5 percent of spenders and the overall population were very similar – hypertension (high blood pressure), mood disorders (depression and affective psychoses), lipid metabolism disorders, and diabetes.
- ▶ However, chronic conditions were more prevalent among the top 5 percent of spenders than in the overall population under 65. For example, 24 percent of the overall population under age 65 had hypertension, as seen in Exhibit 8, but 42 percent of the top 5 percent under age 65 had hypertension.

### III. Top 5% of Spenders

## High Blood Pressure and High Cholesterol Also Represent the Most Common Chronic Conditions Among the Top 5% of Spenders Age 65 and Over

Exhibit 16: Most Common Chronic Conditions Among Top 5% of Spenders Age 65 and Over, 2006

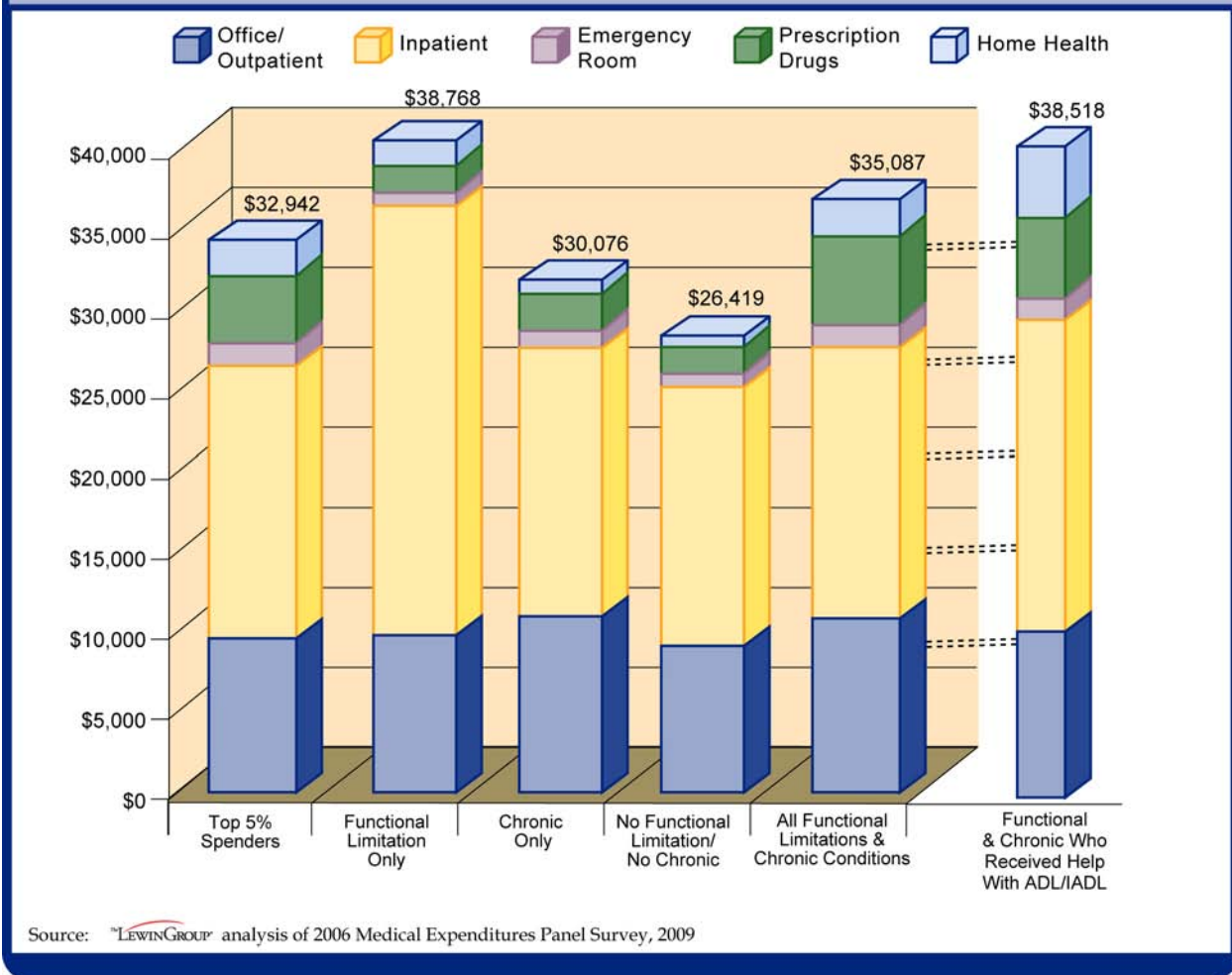


Nec: not elsewhere classified; Nos: not otherwise specified

- ▶ Two-thirds of older adults in the top 5 percent of spenders had hypertension (high blood pressure), and almost half had a lipoid metabolism disorder (high cholesterol).
- ▶ While chronic conditions were important for high health care spenders in both age groups, the conditions affected much larger percentages of people age 65 and over. For example, 66 percent of older top-tier spenders reported hypertension, while 42 percent of the younger group reported hypertension.

## Among the Top 5% of Spenders, People with Chronic Conditions and Functional Limitations Spend More on Prescription Drugs and Home Health Care

Exhibit 17: Health Care Spending by Type of Service Among the Top 5% of Spenders, 2006

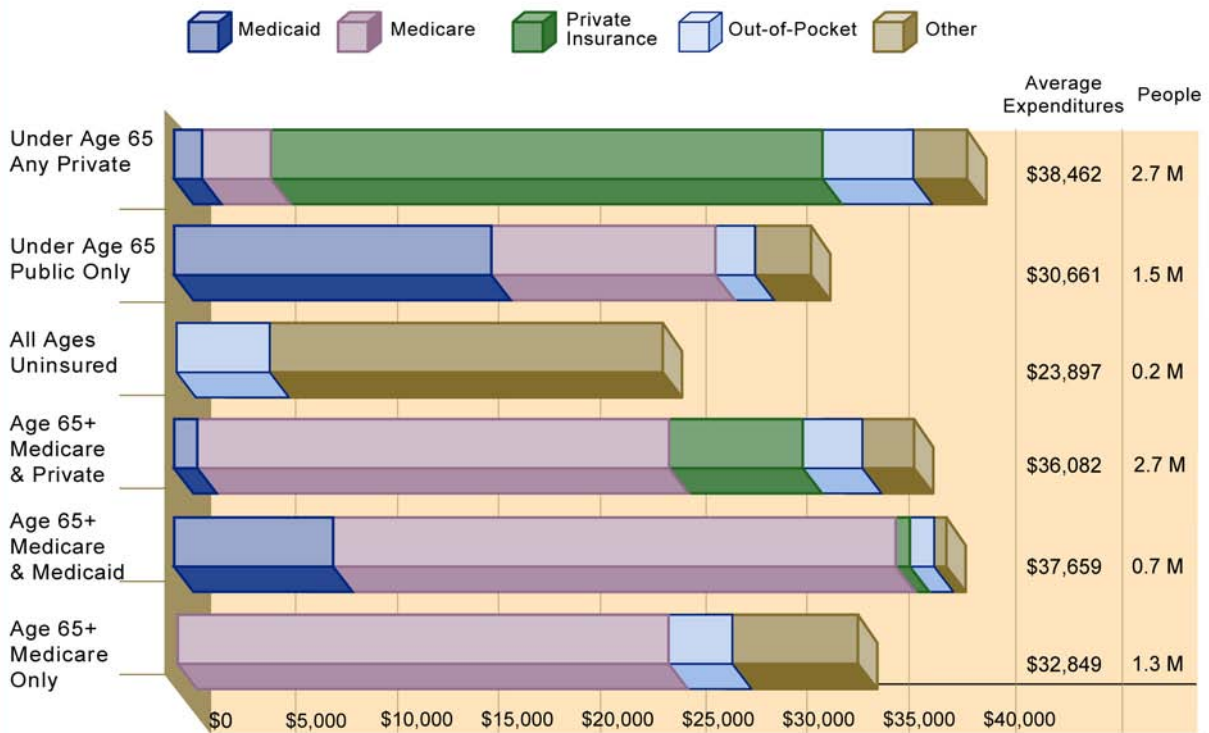


- ▶ On average, individuals in the top 5 percent spent ten times more than the general population on health care services (\$32,942 versus \$3,452).
- ▶ People who received help with ADLs or IADLs and had chronic conditions spent nearly three times the average home health expenditures as the overall top 5 percent group (\$4,611 versus \$1,750, see Appendix).
- ▶ On average, people with chronic conditions and functional limitations represent the higher spending among highest spenders. The 95<sup>th</sup> percentile of health care expenditures, the threshold for the top 5 percent of spenders group, was \$14,600. However, the top 5 percent spenders with both functional limitations and chronic conditions spent an average of \$35,087 on health care in 2006.

### III. Top 5% of Spenders

## Among Top 5% Spenders with Both Chronic Conditions and Functional Limitations, Private Insurance Plays a Greater Role for Individuals Under Age 65

Exhibit 18: Average Health Spending for Community Residents by Primary Source of Insurance and Payment Source Among the Top 5% of Spenders, 2006

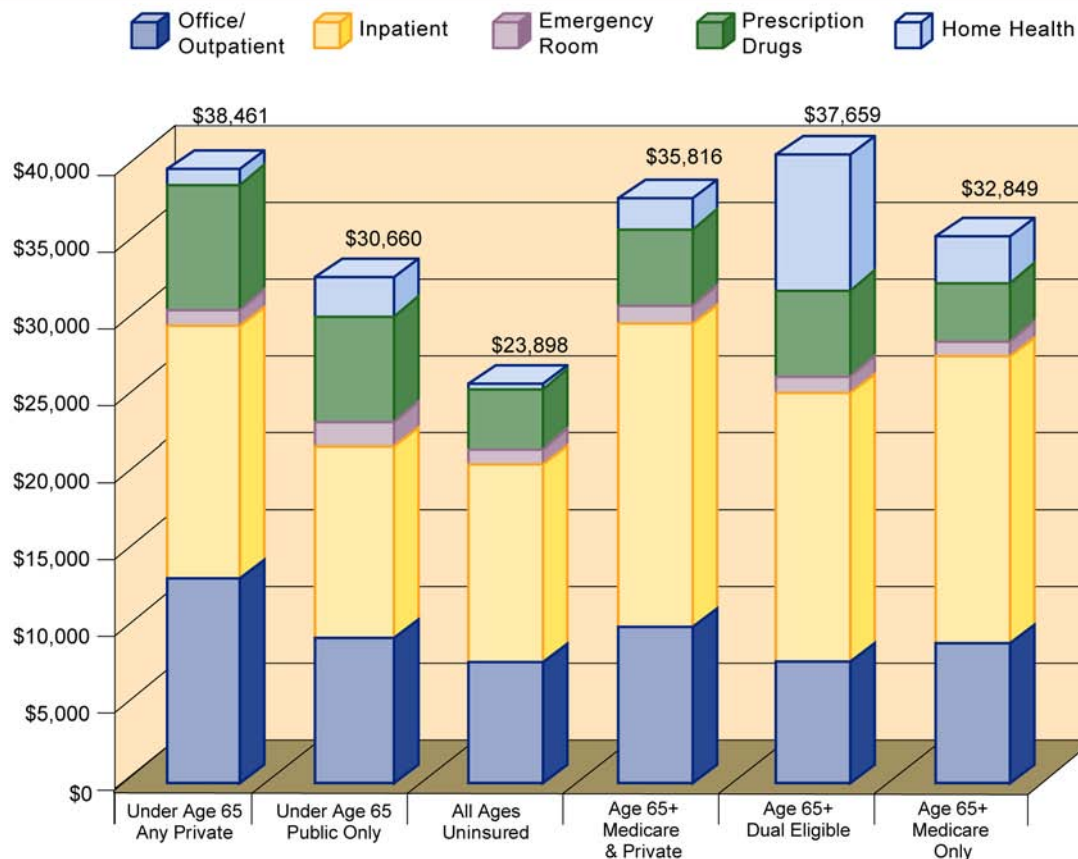


Source: <sup>SM</sup>LEWINGROUP analysis of 2006 Medical Expenditures Panel Survey, 2009

- ▶ Among the nine million community residents with both chronic conditions and functional limitations who spent at least \$14,600 in health care in 2006, individuals under age 65 relied more heavily on private insurance than public insurance.
- ▶ Among the primary insurance groups for older adults in the top 5 percent with both chronic conditions and functional limitations, Medicare covered between \$24,000 and \$28,000 in 2006.

## Older Adults with Medicaid and Medicare (Dual Eligibles) in the Top 5% of Spenders with Chronic Conditions and Functional Limitations Have High Home Health Expenditures

Exhibit 19: Health Spending by Type of Service for the Top 5% by Primary Insurance, 2006



Source: <sup>SM</sup>LEWINGROUP analysis of 2006 Medical Expenditures Panel Survey, 2009

- ▶ Older dual eligibles in the top 5 percent with both chronic conditions and functional limitations spent an average of \$8,516 a year on home health, two to three times the amount that older adults in other insurance categories spent. The older dual eligibles also had lower expenditures for outpatient and inpatient care compared to other older adults of different coverage types.
- ▶ Among people under age 65 in the top 5 percent with both chronic conditions and functional limitations, people with public insurance only spent on average over three times as much on home health as people with some private insurance (\$3,502 versus \$1,040).

## Dual Eligibles Are a Group with Chronic Conditions, Functional Limitations, and Significant Expenditures

Exhibit 20: Overview of Dual Eligibles in the Community, 2006

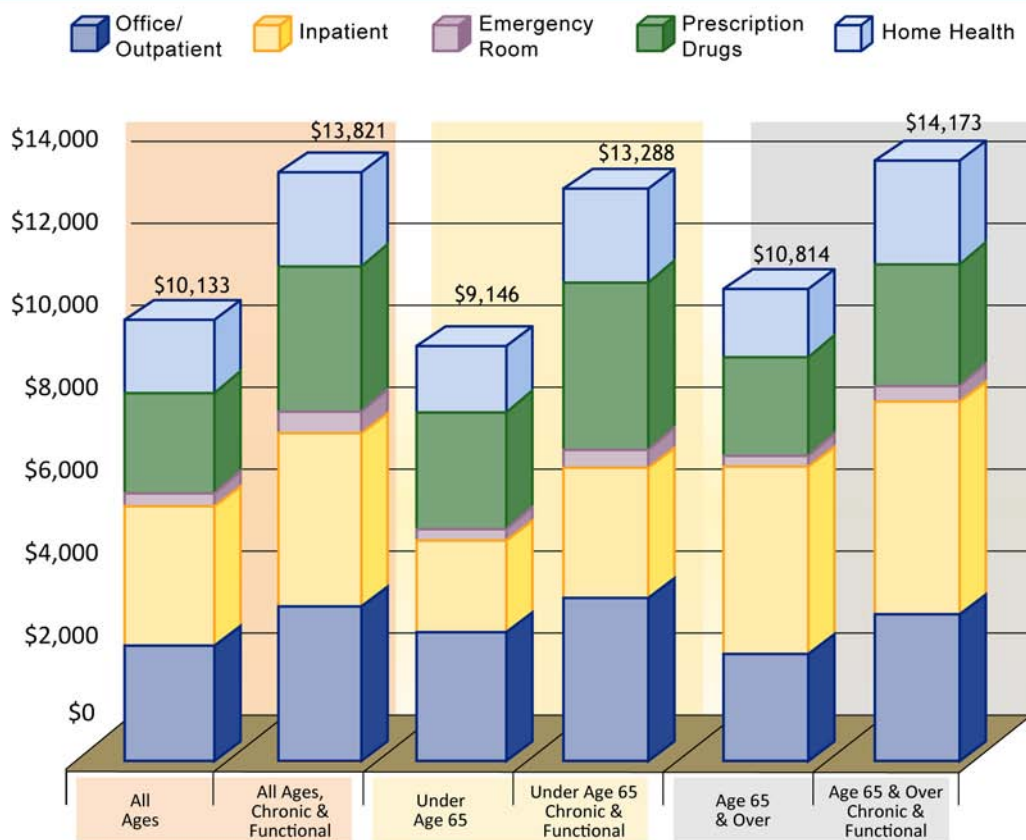
	Number of Dual Eligibles in Community (Millions)	Percent of Total Community Population	Total Health Care Expenditures (Billions)	Percent of Total Health Care Expenditures	Average Annual Health Care Expenditures
All Dual Eligibles	7.0	2.3%	\$70	7%	\$10,133
Dual Eligibles with Chronic Conditions and Functional Limitations	4.4	1.5%	\$60	6%	\$13,821
<i>Age 65 &amp; Older</i>	2.6	0.6%	\$37	4%	\$14,173
<i>Under Age 65</i>	1.7	0.9%	\$23	2%	\$13,288

Source: <sup>LEWIN</sup>GROUP analysis of 2006 Medical Expenditures Panel Survey, 2009

- ▶ In 2006, seven million people living in the community had both Medicare and Medicaid coverage. Among them, 63 percent had both chronic conditions and functional limitations.
- ▶ Dual eligibles in the community spent \$70.3 billion on health care in 2006. On average, dual eligibles spent \$10,133 on health care, compared to \$3,452 annual health care expenditure for the community-based population at the national level.
- ▶ Dual eligibles with chronic conditions and functional limitations represented about 1.5 percent of the community-based population, and with \$60.5 billion in total expenditures, represented 6 percent of the nation’s spending.
- ▶ On average, dual eligibles with chronic conditions and functional limitations spent \$13,821 on health care in 2006. About 28 percent of this group is in the top 5 percent of spenders, meaning that dual eligibles with chronic conditions and functional limitations were over five times as likely to be in the top 5 percent of spenders as the general population.
- ▶ Many dual eligibles with chronic conditions and functional limitations were younger – 1.7 million were under the age of 65, making up 39 percent of all dual eligibles with chronic conditions and functional limitations.
- ▶ On average, older dual eligibles with chronic conditions and functional limitations spent \$14,173 on health care a year, close to the 95<sup>th</sup> percentile of health care spending (\$14,600).

## Most Dual Eligibles Have Chronic Conditions and Functional Limitations, and Correspondingly Higher Expenditures

Exhibit 21: Health Spending by Type of Service for Dual Eligibles in the Community by Select Groups, 2006



Source: LEWINGROUP analysis of 2006 Medical Expenditures Panel Survey, 2009

- ▶ Overall, dual eligibles spent \$10,133 on health care and dual eligibles with chronic conditions and functional limitations spent \$13,821. The national average for health care spending among the general population was \$3,452.
- ▶ Younger dual eligibles with chronic conditions and functional limitations spent almost twice as much on home health (\$2,240) than the overall younger dual eligibles group (\$1,395).

## Conclusion

- ▶ People with functional limitations and chronic conditions need more health care services and help with activities of daily living, placing heavy demands on service delivery, social supports, and public budgets.
- ▶ Functional limitations, ADLs, and IADLs, in combination with chronic conditions, appear to serve as a more promising indicator than chronic conditions alone for the small group of individuals with a heavy concentration of health care spending.
- ▶ Some Key Findings from this Chartbook:
  - People with both chronic conditions and functional limitations who received help with an ADL or IADL represented 5 percent of the population and 23 percent of all spending. This group spent at least four times the overall average annual health expenditures for all community residents.
  - People under age 65 with chronic conditions and functional limitations represent nine percent of younger adults but account for one-third of health care expenditures for the group.
  - Almost half of older adults had chronic conditions and functional limitations and accounted for over two-thirds of all health spending for that age group.
  - Among those with one chronic condition, people who received help with ADLs or IADLs spent almost four times what people with only one chronic condition spent.
  - Those with chronic conditions and who received help with ADLs or IADLs spent nearly \$2,000 on home health, about 19 times the overall average.
  - People with at least one chronic condition who received help with ADLs or IADLs were over six times as likely to be in the top 5 percent of spenders as the general population.
  - The \$493 billion spent on health care by 5 percent of the U.S. population represented half of health care spending by the entire community-based population in 2006 (\$1 trillion). Among the top 5 percent of spenders, a majority – 61 percent – had a chronic condition and functional limitation, which represented 64 percent of spending.
  - Among the top 5 percent of spenders, people with chronic conditions and functional limitations spent more on prescription drugs and home health.
  - Most dual eligibles had chronic conditions and functional limitations, and correspondingly higher expenditures.
- ▶ The data presented here support continued study of emerging new models to better manage chronic conditions and functional limitations, as well as other strategies to prevent or delay functional limitation among those with chronic conditions only.



## Appendix

Each table in this Appendix provides data used in developing the corresponding figure or chart in the report. For example, Exhibit A-3 provides the amounts paid for each type of service listed in the bar chart Exhibit 3.

Exhibit A-1: Distribution of Community Residents and Health Care Spending by Select Groups, 2006

Health Status	Community Residents (Millions)	Percent of Total People
No Chronic, No Limitation	143.3	48%
Chronic Only	108.5	36%
Functional Limitation Only	5.5	2%
Chronic and Functional Limitation	42	14%
Among Chronic Condition and Functional Limitation	Community Residents (Millions)	Percent of Total People
<i>Received ADL-IADL Help</i>	14.3	5%
<i>Had Other Functional Limitations Only</i>	27.6	9%
Total	299.3	100%
Expenditures	Total Spending (Billions)	Percent of Total Spending
No Chronic, No Limitation	\$ 146.4	14%
Chronic Only	\$ 395.1	38%
Functional Limitation Only	\$ 18.1	2%
Chronic and Functional Limitation	\$ 473.4	46%
Among Chronic Condition and Functional Limitation	Total Spending (Billions)	Percent of Total Spending
<i>Received ADL-IADL Help</i>	\$ 235.7	23%
<i>Had Other Functional Limitations Only</i>	\$ 237.8	23%
Total	\$ 1,033	100%

Exhibit A-2: Average Annual Health Spending by Number of Chronic Conditions &amp; Functional Limitations or ADLs/IADLs, 2006

Number of Chronic Conditions	No Functional Limitation	Had Other Functional Limitation Only	Received Help with an ADL/IADL
No Chronic Condition	\$ 1,022	\$ 2,672	\$ 5,287
1 Chronic Conditions	\$ 2,380	\$ 4,974	\$ 8,942
2 Chronic Conditions	\$ 3,817	\$ 6,383	\$ 12,233
3 Chronic Conditions	\$ 4,976	\$ 8,612	\$ 14,296
4 Chronic Conditions	\$ 6,416	\$ 9,401	\$ 16,016
5+ Chronic Conditions	\$ 9,723	\$ 12,749	\$ 22,380

Exhibit A-3: Average Spending by Type of Service for Select Groups, 2006

Health Services	Everyone	Functional Limitation Only	Chronic Condition Only	No Functional Limitation, No Chronic Condition	All Functional Limitation & Chronic Condition	Subset of Functional Limitation & Chronic—People who Received ADL/IADL Help
Outpatient	\$ 1,117	\$ 1,168	\$ 1,349	\$ 365	\$ 3,079	\$ 3,464
Inpatient	\$ 1,027	\$ 1,298	\$ 843	\$ 288	\$ 3,989	\$ 6,870
Emergency Room	\$ 125	\$ 142	\$ 128	\$ 71	\$ 304	\$ 436
Prescription Drugs	\$ 746	\$ 230	\$ 893	\$ 69	\$ 2,746	\$ 3,286
Home Health	\$ 113	\$ 104	\$ 22	\$ 4	\$ 723	\$ 1,909
Average Total Expenditures	\$ 3,452	\$ 3,278	\$ 3,641	\$ 1,022	\$ 11,284	\$ 16,418
Health Services	Millions of Community Residents, Everyone	Millions of Community Residents, Functional Limitation Only	Millions of Community Residents, Chronic Condition Only	Millions of Community Residents, No Functional Limitation, No Chronic Condition	Millions of Community Residents, All Functional Limitation & Chronic Condition	Millions of Community Residents, Subset of Functional Limitation & Chronic—People who Received ADL/IADL Help
Community Residents (Millions)	299.3	5.5	108.5	143.3	42.0	14.3
Health Services	Percent of Total Spending, Everyone	Percent of Total Spending, Functional Limitation Only	Percent of Total Spending, Chronic Condition Only	Percent of Total Spending, No Functional Limitation, No Chronic Condition	Percent of Total Spending, All Functional Limitation & Chronic Condition	Percent of Total Spending, Subset of Functional Limitation & Chronic—People who Received ADL/IADL Help
Percent of Total Spending	100%	2%	38%	14%	46%	23%

Exhibit A-4: Health Spending by Source of Financing for Select Groups, 2006

Payment Source	Everyone	Functional Limitation Only	Chronic Condition Only	No Functional Limitation No Chronic Condition	All Functional Limitation & Chronic Condition	Subset of Functional Limitation & Chronic –People who Received ADL/IADL Help
Medicaid Expenditures	\$ 299	\$ 453	\$ 200	\$ 132	\$ 1,107	\$ 2,100
Medicare Expenditures	\$ 812	\$ 581	\$ 471	\$ 13	\$ 4,456	\$ 7,853
Private Insurance Expenditures	\$ 1,408	\$ 1,323	\$ 1,889	\$ 564	\$ 3,061	\$ 3,601
Out-of-Pocket Expenditures	\$ 654	\$ 525	\$ 860	\$ 239	\$ 1,557	\$ 1,831
Other Payment	\$ 278	\$ 396	\$ 221	\$ 74	\$ 1,103	\$ 1,032
Average Total Expenditures	\$ 3,452	\$ 3,278	\$ 3,641	\$ 1,022	\$ 11,284	\$ 16,418
Payment Source	Millions of Community Residents, Everyone	Millions of Community Residents, Functional Limitation Only	Millions of Community Residents, Chronic Condition Only	Millions of Community Residents, No Functional Limitation, No Chronic Condition	Millions of Community Residents, All Functional Limitation & Chronic Condition	Millions of Community Residents, Subset of Functional Limitation & Chronic –People who Received ADL/IADL Help
Community Residents (Millions)	299.3	5.5	108.5	143.3	42.0	14.3
Payment Source	Percent of Total Spending, Everyone	Percent of Total Spending, Functional Limitation Only	Percent of Total Spending, Chronic Condition Only	Percent of Total Spending, No Functional Limitation, No Chronic Condition	Percent of Total Spending, All Functional Limitation & Chronic Condition	Percent of Total Spending, Subset of Functional Limitation & Chronic –People who Received ADL/IADL Help
Percent of Total Spending	100%	2%	38%	14%	46%	23%

Exhibit A-6: Health Spending by Primary Source of Insurance and Payment Source Among Community Residents with Chronic Conditions & Functional Limitations, 2006

Payment Source	Under Age 65, Any Private	Under Age 65, Public Only	All Age, Uninsured	Age 65+, Medicare & Private <sup>a</sup>	Age 65+, Medicare & Medicaid	Age 65+, Medicare Only
Medicaid	\$ 203	\$ 5,112	—	\$ 173	\$ 2,646	—
Medicare	\$ 929	\$ 3,311	—	\$ 8,185	\$ 10,213	\$ 7,637
Private	\$ 7,746	—	—	\$ 2,578	\$ 132	—
Out-of-Pocket	\$ 1,747	\$ 971	\$ 1,643	\$ 1,808	\$ 808	\$ 1,755
Other	\$ 849	\$ 884	\$ 2,310	\$ 1,020	\$ 373	\$ 1,691
Average Total Expenditures	\$ 11,474	\$ 10,278	\$ 3,953	\$ 13,764	\$ 14,172	\$ 11,083
	Millions of Community Residents, Under Age 65, Any Private	Millions of Community Residents, Under Age 65, Public Only	Millions of Community Residents, All Age, Uninsured	Millions of Community Residents, Age 65+, Medicare & Private	Millions of Community Residents, Age 65+, Medicare & Medicaid	Millions of Community Residents, Age 65+, Medicare Only
Community Residents (Millions)	13	7	3	10	3	6
	Percent of Total Spending, Under Age 65, Any Private	Percent of Total Spending, Under Age 65, Public Only	Percent of Total Spending, All Age, Uninsured	Percent of Total Spending, Age 65+, Medicare & Private	Percent of Total Spending, Age 65+, Medicare & Medicaid	Percent of Total Spending, Age 65+, Medicare Only
Percent of Total Spending For those With Chronic Conditions and Functional Limitations	31%	17%	7%	24%	7%	14%

<sup>a</sup> This column represents people with Medicare and private insurance, but no Medicaid coverage. However, about 6% of this group that did not report Medicaid coverage had expenditures reported as paid by Medicaid.

Exhibit A-8: Most Common Conditions Among Community Residents Under Age 65 with At Least One Chronic Condition, 2006

Under Age 65	Percent of People with Condition, Out of 116 Million Community Residents with Some Chronic Condition
Disorder of Menstruation	2%
Menopausal Disorders	2%
Acquired Hypothyroidism	4%
Hyperkinetic Syndrome	4%
Intervertebral Disc Disorder	5%
Migraine	6%
Arthropathies Nec/Nos	8%
Diabetes Mellitus	10%
Neurotic Disorders	12%
Asthma	13%
Chronic Sinusitis	13%
Disorder of Lipoid Metabolism	16%
Mood Disorder	19%
Allergic Rhinitis	21%
Essential Hypertension	24%

Mood Disorders is comprised of people with Depressive Disorders Nec and Affective Psychoses.

Total number of community residents under age 65 is 261 M.

Exhibit A-9: Most Common Conditions Among Community Residents Age 65 and Over, 2006

Age 65 & Over	Percent of People with Condition, Out of 34 Million Community Residents with Some Chronic Condition
Chronic Sinusitis	5%
Hearing Loss	5%
Asthma	6%
Acquired Hypothyroidism	7%
Glaucoma	7%
Cardiac Dysrhythmias	9%
Neurotic Disorders	9%
Allergic Rhinitis	11%
III-Defined Heart Disorder	11%
Cataract	12%
Mood Disorders	13%
Diabetes Mellitus	23%
Arthropathies Nec/Nos	25%
Disorder of Lipoid Metabolism	41%
Essential Hypertension	61%

Mood Disorders is comprised of people with Depressive Disorders Nec and Affective Psychoses.

Total number of community residents age 65 and over is 38 M.

Exhibit A-10: Distribution of Community Residents Under Age 65 and Health Care Spending by Select Groups, 2006

Health Status	Community Residents (Millions)	Percent of Total People
No Chronic, No Limitation	140.4	54%
Chronic Only	92.4	35%
Functional Limitation Only	4.7	2%
Chronic and Functional Limitation	23.7	9%
Among Chronic Condition and Functional Limitation	Community Residents (Millions)	Percent of Total People
<i>Received ADL-IADL Help</i>	6.6	3%
<i>Had Other Functional Limitations Only</i>	17.1	7%
Total	261.2	100%
Expenditures	Total Spending (Billions)	Percent of Total Spending
No Chronic, No Limitation	\$ 142.8	20%
Chronic Only	\$ 304.1	43%
Functional Limitation Only	\$ 14.1	2%
Chronic and Functional Limitation	\$ 238.7	35%
Among Chronic Condition and Functional Limitation	Total Spending (Billions)	Percent of Total Spending
<i>Received ADL-IADL Help</i>	\$ 101.8	15%
<i>Had Other Functional Limitations Only</i>	\$ 136.9	20%
Total	\$ 699.7	100%



Exhibit A-11: Distribution of Community Residents Age 65 and Over and Health Care Spending by Select Groups, 2006

Health Status	Community Residents (Millions)	Percent of Total People
No Chronic, No Limitation	2.9	8%
Chronic Only	16.1	42%
Functional Limitation Only	0.8	2%
Chronic and Functional Limitation	18.2	48%
Among Chronic Condition And Functional Limitation	Community Residents (Millions)	Percent of Total People
<i>Received ADL-IADL Help</i>	7.7	20%
<i>Had Other Functional Limitations Only</i>	10.5	28%
Total	38.0	100%
Expenditures	Total Spending (Billions)	Percent of Total Spending
No Chronic, No Limitation	\$ 3.6	1%
Chronic Only	\$ 91.0	27%
Functional Limitation Only	\$ 4.0	1%
Chronic and Functional Limitation	\$ 234.7	70%
Among Chronic Condition and Functional Limitation	Total Spending (Billions)	Percent of Total Spending
<i>Received ADL-IADL Help</i>	\$ 133.9	40%
<i>Had Other Functional Limitations Only</i>	\$ 100.8	30%
Total	\$ 333.4	100%

Exhibit A-12: Distribution of Health Care Spending by Top 5% of Spenders Versus Those Not in the Top 5% Spenders, 2006

Spending Status	Community Residents (Millions)	Percent of Total People
Not Top 5%	284.3	95%
Top 5%	15.0	5%
Total	299.3	100%

Expenditures	Total Spending (Billions)	Percent of Total Spending
Not Top 5%	\$ 539.9	52%
Top 5%	\$ 493.2	48%
Total	\$ 1,033.1	100%

Exhibit A-13: Relative Risk of Being in the Top 5% of Health Care Spenders by Selected Groups, 2006

Group (By Chronic Condition, Functional Limitation)	Community Residents in the Top 5% of Spenders (Millions)	Percent of Group in Top 5% of Spenders	Relative Probability of Being in the Top 5%
All Community Residents	15.0	5%	1.0
No Chronic Condition, No Functional Limitation	1.1	1%	0.2
Chronic Condition Only	4.6	4%	0.8
Functional Limitation Only	0.2	4%	0.8
1+ Chronic Conditions	13.6	9%	1.8
2+ Chronic Conditions	11.5	13%	2.7
3+ Chronic Conditions	9.3	18%	3.6
Chronic Conditions and Functional Limitation	9.0	21%	4.3
Help with an ADL/IADL	4.8	31%	6.1
Help with an ADL/IADL and 1+ Chronic Conditions	4.7	33%	6.6
Help with an ADL/IADL and 2+ Chronic Conditions	4.4	36%	7.1
Help with an ADL/IADL and 3+ Chronic Conditions	3.8	38%	7.7

**NOTE:** Relative risk for being in the top 5% of spenders is the probability that a specified group will be in the top 5%, compared to the overall probability of being in the top 5% of spenders.

Exhibit A-14: Distribution of Community Residents and Health Care Spending Among the Top 5% of Spenders by Select Groups, 2006

Health Status	Community Residents (Millions)	Percent of Total People
No Chronic Condition, No Functional Limitation	1.1	7%
Chronic Condition Only	4.6	31%
Functional Limitation Only	0.2	1%
Chronic Condition and Functional Limitation	9.0	61%
Among Chronic Condition and Functional Limitation	Community Residents (Millions)	Percent of Total People
<i>Received ADL-IADL Help</i>	4.7	32%
<i>Had Other Functional Limitations Only</i>	4.3	29%
Total	15	100%
Expenditures	Total Spending (Billions)	Percent of Total Spending
No Chronic Condition, No Functional Limitation	\$ 30.3	6%
Chronic Condition Only	\$ 137.9	28%
Functional Limitation Only	\$ 8.6	2%
Chronic Condition and Functional Limitation	\$ 316.3	64%
Among Chronic Condition and Functional Limitation	Total Spending (Billions)	Percent of Total Spending
<i>Received ADL-IADL Help</i>	\$ 181.8	37%
<i>Had Other Functional Limitations Only</i>	\$ 134.5	27%
Total	\$ 493.2	100%

Exhibit A-15: Most Common Chronic Diseases Among Top 5% of Spenders Under Age 65, 2006

Community Residents Under Age 65	Percent of People with Condition, Out of 7.7 Million Community Residents with Some Chronic Condition
Malignant Neoplasm of Female Breast	5%
Cardiac Dysrhythmias	6%
III-Defined Heart Disease	6%
Acquired Hypothyroidism	7%
Migrane	7%
Intervertebral Disc Disorder	11%
Asthama	12%
Chronic Sinusitis	12%
Arthropathies Nec/Nos	17%
Neurotic Disorders	17%
Allergic Rhinitis	20%
Diabetes Mellitus	25%
Disorder of Lipoid Metabolism	29%
Mood Disorders	31%
Essential Hypertension	42%

Mood Disorders is comprised of people with Depressive Disorders Nec and Affective Psychoses.

Total number of community residents in the top 5% of spenders under age 65 is 9 M.

Exhibit A-16: Most Common Chronic Conditions Among Top 5% of Spenders Age 65 and Over, 2006

Community Residents Age 65 & Over	Percent of People with Condition, Out of 6 Million Community Residents with Some Chronic Condition
Arterial Embolism	7%
Cerebral Vascular Accident	8%
Glaucoma	8%
Asthma	10%
Heart Failure	11%
Allergic Rhinitis	13%
Cataract	13%
Cardiac Dysrhythmia	14%
Neurotic Disorder	15%
Mood Disorders	19%
III-Defined Heart Disease	20%
Arthropathies Nec/Nos	30%
Diabetes Mellitus	37%
Disorder of Lipoid Metabolism	45%
Essential Hypertension	66%

Mood Disorders is comprised of people with Depressive Disorders Nec and Affective Psychoses.  
 Total number of community residents in the top 5% of spenders age 65 and over is 6 M.

Exhibit A-17: Health Care Spending by Type of Service Among the Top 5% of Spenders, 2006

	Top 5% of Spenders	Functional Limitation Only	Chronic Condition Only	No Functional Limitation No Chronic Condition	Functional Limitation & Chronic Condition	Subset of Functional Limitation & Chronic –People who Received ADL/IADL Help
Outpatient	\$ 8,363	\$ 8,562	\$ 9,324	\$ 6,555	\$ 8,100	\$ 7,305
Inpatient	\$ 16,628	\$ 25,629	\$ 15,602	\$ 16,694	\$ 16,919	\$ 19,462
Emergency Room	\$ 767	\$ 376	\$ 704	\$ 899	\$ 792	\$ 885
Prescription Drugs	\$ 4,630	\$ 1,892	\$ 3,101	\$ 1,132	\$ 5,920	\$ 5,608
Home Health	\$ 1,750	\$ 1,375	\$ 394	\$ 288	\$ 2,636	\$ 4,611
Average Total Expenditures	\$ 32,942	\$ 38,768	\$ 30,076	\$ 26,419	\$ 35,087	\$ 38,518
	Millions of Community Residents, Top 5% of Spenders	Community Residents, Top 5% of Spenders, Functional Limitation Only	Community Residents, Top 5% of Spenders, Chronic Condition Only	Community Residents, Top 5% of Spenders, No Functional Limitation, No Chronic Condition	Community Residents, Top 5% of Spenders, Functional Limitation & Chronic Condition	Community Residents, Top 5% of Spenders, Subset of Functional Limitation & Chronic--People who Received ADL/IADL Help
Community Residents (Millions)	15.0	0.2	4.6	1.1	9.0	4.7
	Percent of Total Spending for Top 5%	Percent of Total Spending for Top 5%, Functional Limitation Only	Percent of Total Spending for Top 5%, Chronic Condition Only	Percent of Total Spending for Top 5%, No Functional, No Chronic	Percent of Total Spending for Top 5%, Functional & Chronic	Percent of Total Spending for Top 5%, Subset of Functional & Chronic—Received ADL/IADL Help
Percent of Total Spending for Top 5%	100%	2%	28%	6%	64%	37%

Exhibit A-18: Average Health Spending for Community Residents with Chronic Conditions and Functional Limitations by Primary Source of Insurance and Payment Source Among the Top 5% of Spenders, 2006

Insurance Payment	Under Age 65 Any Private	Under Age 65 Public Only	All Ages Uninsured	Age 65+ Medicare & Private	Age 65+ Medicare & Medicaid	Age 65+ Medicare Only
Medicaid	\$ 736	\$ 15,065	\$ 0	\$ 616	\$ 7,192	\$ 0
Medicare	\$ 3,808	\$ 10,963	\$ 0	\$ 23,447	\$ 27,921	\$ 24,196
Private	\$ 27,185	\$ 0	\$ 0	\$ 6,307	\$ 373	\$ 0
Self	\$ 4,007	\$ 2,111	\$ 4,489	\$ 2,918	\$ 1,302	\$ 3,145
Other	\$ 2,726	\$ 2,522	\$ 19,408	\$ 2,794	\$ 871	\$ 5,508
Average Total Expenditures	\$ 38,461	\$ 30,660	\$ 23,898	\$ 36,081	\$ 37,659	\$ 32,849
	Millions of Community Residents, Under Age 65 Any Private	Millions of Community Residents, Under Age 65 Public Only	Millions of Community Residents, All Ages Uninsured	Millions of Community Residents, Age 65+ Medicare & Private	Millions of Community Residents, Age 65+ Medicare & Medicaid	Millions of Community Residents, Age 65+ Medicare Only
Community Residents (Millions)	2.7	1.5	0.2	2.7	0.7	1.3
	Percent of Top 5%, Under Age 65 Any Private	Percent of Top 5%, Under Age 65 Public Only	Percent of Top 5%, All Ages Uninsured	Percent of Top 5%, Age 65+ Medicare & Private	Percent of Top 5%, Age 65+ Medicare & Medicaid	Percent of Top 5%, Age 65+ Medicare Only
Percent of Top 5% with Chronic Conditions & Functional Limitations	30%	16%	2%	29%	8%	14%



Exhibit A-19: Health Spending by Type of Service for the Top 5% by Primary Insurance, 2006

Health Services Settings	Under Age 65, Any Private	Under Age 65, Public Only	All Age, Uninsured	Over Age 65, Medicare & Private	Over Age 65, Dual Eligible	Over Age 65, Medicare Only
Outpatient	\$ 11,602	\$ 6,930	\$ 5,230	\$ 7,245	\$ 5,085	\$ 6,039
Inpatient	\$ 15,587	\$ 12,333	\$ 13,252	\$ 19,266	\$ 18,025	\$ 19,114
Emergency Room	\$ 937	\$ 837	\$ 855	\$ 725	\$ 1,071	\$ 653
Prescription Drugs	\$ 8,489	\$ 6,666	\$ 4,094	\$ 4,545	\$ 4,535	\$ 3,729
Home Health	\$ 1,040	\$ 3,502	\$ 94	\$ 3,146	\$ 8,516	\$ 2,518
Average Total Expenditures	\$ 38,461	\$ 30,660	\$ 23,898	\$ 35,816	\$ 37,659	\$ 32,849

Exhibit A-21: Health Spending by Type of Service for Dual Eligibles in the Community by Select Groups, 2006

Health Services Settings	All Ages		Under Age 65		Age 65 & Over	
	All Groups	Chronic Conditions & Functional Limitations	All Groups	Chronic Conditions & Functional Limitations	All Groups	Chronic Conditions & Functional Limitations
Office/ Outpatient (\$)	1,841	2,540	1,992	2,846	1,736	2,338
Inpatient (\$)	3,480	4,459	2,355	3,206	4,256	5,288
Emergency Room (\$)	290	403	282	379	296	420
Prescription Drugs (\$)	2,543	3,451	2,831	4,218	2,344	2,944
Home Health (\$)	1,700	2,589	1,395	2,240	1,910	2,820
Average Total Expenditures (\$)	10,133	13,821	9,146	13,288	10,814	14,173
	Millions of Community Residents, All Ages & Groups	Millions of Community Residents, All Ages with Chronic & Functional	Millions of Community Residents, Under Age 65 & All Groups	Millions of Community Residents, Under Age 65 with Chronic & Functional	Millions of Community Residents, Age 65 & Over, All Groups	Millions of Community Residents, Age 65 & Over with Chronic & Functional
Community Residents (Millions)	6.9	4.4	2.8	1.7	4.1	2.6
	Percent of Total Spending for Dual Eligibles, All Ages & Groups	Percent of Total Spending for Dual Eligibles, All Ages with Chronic & Functional	Percent of Total Spending for Dual Eligibles, Under Age 65 & All Groups	Percent of Total Spending for Dual Eligibles, Under Age 65 with Chronic & Functional	Percent of Total Spending for Dual Eligibles, Age 65 & Over, All Groups	Percent of Total Spending for Dual Eligibles, Age 65 & Over with Chronic & Functional
Percent of Total Spending for Dual Eligibles (%)	100	86	37	33	63	53

