



Topline

**Kaiser Family Foundation Survey of
Health Care Among Nonelderly People with
Disabilities and Seniors on Medicare, 2008**

September 2010

Methodology

The Kaiser Family Foundation *Survey of Health Care Among Nonelderly People with Disabilities and Seniors on Medicare, 2008* was designed and analyzed by researchers at the Kaiser Family Foundation, including Juliette Cubanski, Ph.D., Tricia Neuman, Sc.D., and Anthony Damico, MHS. The survey was conducted October through December 2008, among a nationally representative random sample of 3,913 Medicare beneficiaries, including 2,288 nonelderly beneficiaries with disabilities and 1,625 beneficiaries age 65 and older. Mail and telephone interviews were carried out in English and Spanish by DataStat, Inc.

The margin of sampling error for the total sample is plus or minus 2 percentage points. For results based on subgroups, the margin of sampling error is higher. Note that sampling error is only one of many potential sources of error in this or any other survey.

Values less than 0.5% are indicated by an asterisk (*).

Due to rounding, percentages may not sum to totals or 100.

YOUR RECENT USE OF MEDICAL CARE

1. Overall, how satisfied are you with the health care that you have received over the past 12 months?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Very satisfied	60	51	62
Somewhat satisfied	25	32	23
<i>TOTAL Very/somewhat satisfied</i>	<i>84</i>	<i>83</i>	<i>85</i>
Somewhat dissatisfied	3	6	3
Very dissatisfied	1	3	1
<i>TOTAL Very/somewhat dissatisfied</i>	<i>4</i>	<i>10</i>	<i>3</i>
<i>Did not respond</i>	11	7	12

2. In the past 12 months, have you received the following services? (*percent responding YES*)

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
a. Complete physical exam	57	55	57
b. Dental exam	45	35	47
c. Flu vaccination	64	49	68
d. Vision exam	58	44	61
e. Mental health care or counseling	9	29	5
f. Colon screening	20	19	20
<i>For women only:</i>			
g. Mammogram	55	51	56
h. Pap smear	29	44	26
<i>For men only:</i>			
i. Prostate exam	49	27	54

3. Is there one particular doctor that you see most often for your own medical care?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	89	88	89
No	8	10	8
<i>Did not respond</i>	3	2	3

4. In the past 6 months, how many different doctors have you seen, not counting any you saw in a hospital?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
None	13	10	14
1-2	48	47	48
3-5	33	36	32
6-8	3	4	3
9 or more	1	1	*
<i>Did not respond</i>	3	2	3

5. In the past 6 months, how many times have you been to a doctor's office or clinic for your own medical care, not including a hospital emergency room?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
None	11	9	12
1-2	36	29	38
3-5	33	33	33
6-8	10	14	10
9 or more	6	13	5
<i>Did not respond</i>	3	3	3

6. In the past 6 months, how many times have you been to an emergency room at a hospital for your own medical care?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
None	75	67	76
1-2	18	24	17
3-5	3	5	3
6-8	*	1	*
9 or more	*	1	0
<i>Did not respond</i>	4	2	4

7. In the past 6 months, how many times have you been a patient in a hospital overnight or longer for a physical health problem?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
None	81	79	82
1-2	13	16	13
3-5	2	2	1
6-8	*	*	*
9 or more	*	*	*
<i>Did not respond</i>	3	3	4

8. In the past 6 months, how many times have you been a patient in a hospital overnight or longer for a mental health problem?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
None	95	94	95
1-2	1	3	1
3-5	*	*	*
6-8	*	*	*
9 or more	*	*	*
<i>Did not respond</i>	4	2	4

YOUR HEALTH

9. Altogether, how satisfied are you with your quality of life these days?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Very satisfied	42	23	45
Somewhat satisfied	39	43	39
<i>TOTAL Very/somewhat satisfied</i>	<i>81</i>	<i>66</i>	<i>84</i>
Somewhat dissatisfied	9	19	7
Very dissatisfied	4	10	3
<i>TOTAL Very/somewhat dissatisfied</i>	<i>13</i>	<i>30</i>	<i>10</i>
<i>Did not respond</i>	6	4	6

10. In general, would you say your health is...

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Excellent	10	2	11
Very good	29	11	32
<i>TOTAL Excellent/very good</i>	<i>39</i>	<i>14</i>	<i>44</i>
Good	28	27	29
Fair	21	37	18
Poor	8	18	6
<i>TOTAL Fair/poor</i>	<i>28</i>	<i>55</i>	<i>23</i>
<i>Did not respond</i>	4	4	4

11. What health conditions do you currently have? Check all that apply.

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
ALS (Lou Gehrig's disease)	*	*	*
Alzheimer's disease or dementia	3	1	3
Arthritis (rheumatoid or other)	49	51	48
Asthma or emphysema	12	22	11
Blindness or severe loss of vision	6	9	5
Cancer, other than skin cancer	6	5	6
Cerebral palsy (CP)	*	2	*
Chronic obstructive pulmonary disease	8	13	7
Chronic pain	23	46	19
Deafness or severe loss of hearing	15	9	16
Depression	16	44	11
Diabetes or high blood sugar	23	27	22
Epilepsy	1	4	1
Heart disease or other heart condition	24	21	24
High blood pressure or hypertension	51	48	52
High cholesterol	33	38	32
HIV/AIDS	*	2	*
Kidney disease or kidney failure	4	6	3
Liver disease	1	4	1
Loss of limb	1	2	*
Mental or psychiatric disorder such as bipolar or schizophrenia	3	18	*
Mental retardation	1	6	*
Multiple sclerosis (MS)	1	3	*
Muscular dystrophy	*	1	*
Neuralgia or other neural conditions	4	9	3
Obesity	12	21	10
Organ transplant	*	1	*
Osteoporosis	15	10	16
Other developmental disability	3	10	1
Parkinson's disease	1	1	1
Spinal cord injury	4	10	2
Stroke	6	7	6
Other	14	25	12

12. What would you say is your primary disability?
 (Asked of Disabled only; n=2,288)

ALS (Lou Gehrig's disease)	*
Alzheimer's disease or dementia	*
Arthritis (rheumatoid or other)	7
Asthma or emphysema	2
Blindness or severe loss of vision	2
Cancer, other than skin cancer	2
Cerebral palsy (CP)	1
Chronic obstructive pulmonary disease	2
Chronic pain	9
Deafness or severe loss of hearing	*
Depression	4
Diabetes or high blood sugar	5
Epilepsy	1
Heart disease or other heart condition	5
High blood pressure or hypertension	1
High cholesterol	*
HIV/AIDS	1
Kidney disease or kidney failure	1
Liver disease	*
Loss of limb	1
Mental or psychiatric disorder such as bipolar or schizophrenia	10
Mental retardation	3
Multiple sclerosis (MS)	2
Muscular dystrophy	*
Neuralgia or other neural conditions	1
Obesity	1
Organ transplant	*
Osteoporosis	*
Other developmental disability	1
Parkinson's disease	1
Spinal cord injury	3
Stroke	2
Other	11

13. How old were you when you first developed your primary disability?
(Asked of Disabled only; n=2,161)

Less than 1 year of age	7
1-21 years of age	15
22-40 years of age	35
More than 40 years of age	37
<i>Did not respond</i>	6

14. On a scale of 1 to 10, how much pain have you had during the past 4 weeks?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
0 None	15	9	17
1-2 Very mild	26	9	30
3-4 Mild	16	10	17
<i>TOTAL Very mild/mild</i>	<i>43</i>	<i>19</i>	<i>47</i>
5-6 Moderate	20	25	19
7-8 Severe	10	28	7
9-10 Very Severe	4	13	2
<i>TOTAL Very severe/severe</i>	<i>14</i>	<i>41</i>	<i>9</i>
<i>Did not respond</i>	7	6	8

15. In the past 12 months, how often did you feel sad or depressed?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
All of the time	4	13	2
Some of the time	24	43	20
A little of the time	31	24	32
None of the time	36	15	39
<i>Did not respond</i>	6	4	7

16. In the past 12 months, have you sought help from a health care professional because you were feeling sad or depressed?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	11	33	6
No	64	53	67
Does not apply	18	10	20
<i>Did not respond</i>	7	4	7

Based on those who reported feeling sad or depressed “all”, “some”, or “a little” of the time:

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	16	40	10
No	75	56	80
<i>Did not respond</i>	9	5	10

17. In the past 12 months, have you taken a prescription medicine because you were feeling sad or depressed?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	17	43	12
No	72	49	77
Does not apply	5	4	5
<i>Did not respond</i>	6	4	7

Based on those who reported feeling sad or depressed “all”, “some”, or “a little” of the time:

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	25	51	19
No	66	45	72
<i>Did not respond</i>	8	4	9

MEDICARE AND HEALTH INSURANCE

18. How long have you been on Medicare?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Less than 1 year	4	4	4
1-2 years	10	13	9
3-5 years	16	24	15
More than 5 years	63	55	64
<i>Did not respond</i>	7	4	7

19. How did you qualify for Medicare?

(Asked of Disabled only; n=2,101)

I qualified because I could no longer work	83
I qualified as a dependent of my parents	7
I qualified when my spouse died	1
<i>Did not respond</i>	9

20. Overall, how satisfied are you with the Medicare program?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Very satisfied	49	39	51
Somewhat satisfied	34	42	33
<i>TOTAL Very/somewhat satisfied</i>	<i>84</i>	<i>81</i>	<i>84</i>
Somewhat dissatisfied	6	9	6
Very dissatisfied	2	4	2
<i>TOTAL Very/somewhat dissatisfied</i>	<i>8</i>	<i>13</i>	<i>8</i>
<i>Did not respond</i>	8	5	8

21. Most people who qualify for disability benefits must wait 24 months before receiving Medicare coverage. Did you go without health insurance coverage at any time during this 24-month waiting period?

(Asked of Disabled only; n=2,202)

Yes	32
No	49
Do not recall	15
<i>Did not respond</i>	4

22. Are you currently enrolled in the Medicaid (Medical Assistance) program for people with very low income or very high medical bills? Medicaid may go by another name in your state, such as Title 19, Medi-Cal in California or MassHealth in Massachusetts.

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	16	42	11
No	84	58	89

23. Do you have any health insurance or benefits from a current or previous employer, job or union?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	32	17	35
No	62	79	58
<i>Did not respond</i>	6	4	6

24. Are you currently a member of a Medicare HMO or other Medicare health plan (sometimes called a “Medicare Advantage” plan)?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	25	20	26
No	75	80	74

25. Do you have any health insurance that fills gaps in Medicare (sometimes called “Medigap” or a Medicare supplement)?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	37	19	40
No	53	72	49
<i>Did not respond</i>	11	9	11

26. Do you have any other health insurance that helps pay for your health care costs, such as hospital and doctor bills?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes			
TRICARE	5	2	5
FEHB	2	2	3
VA	3	3	3
Other	24	20	25
No	14	23	12

27. Each month, about how much do you spend on premiums for your health insurance?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
\$0	27	42	24
\$1-\$50	10	14	10
\$51-\$100	14	17	13
\$101-\$300	29	15	32
\$301-\$500	6	4	6
More than \$500	2	2	2
<i>Did not respond</i>	12	6	13

PRESCRIPTION DRUG COVERAGE

28. Do you have any insurance that helps pay for your prescription medicines?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	85	88	84
No	10	8	11
<i>Did not respond</i>	5	3	5

29. Does the Department of Veterans Affairs currently help pay for your prescription medicines?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	6	6	6
No	84	85	84
<i>Did not respond</i>	10	9	10

30. Medicare offers a choice of plans to help pay for prescription drugs, sometimes called Part D or Medicare prescription drug plans. Are you currently enrolled in a Medicare prescription drug plan?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	47	67	43
No	41	26	44
<i>Did not respond</i>	11	7	12

31. Each month, about how much do you spend on premiums for your prescription drug plan?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
\$0	31	30	32
\$1-\$25	16	23	15
\$26-\$50	16	15	16
\$51-\$100	11	11	11
More than \$100	8	9	8
<i>Did not respond</i>	18	13	19

32. How satisfied are you with your Medicare prescription drug plan?
Based on those who reported being enrolled in a Medicare drug plan:

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Very satisfied	33	37	32
Somewhat satisfied	32	34	31
<i>TOTAL Very/somewhat satisfied</i>	<i>65</i>	<i>71</i>	<i>63</i>
Somewhat dissatisfied	8	9	8
Very dissatisfied	5	7	4
<i>TOTAL Very/somewhat dissatisfied</i>	<i>13</i>	<i>15</i>	<i>13</i>
<i>Did not respond</i>	<i>22</i>	<i>13</i>	<i>24</i>

33. Most Medicare prescription drug plans have a gap in coverage (sometimes called a “doughnut hole”) when the plan stops paying for your medicines and you have to pay the full cost for your drugs. Have you ever reached the coverage gap in a Medicare drug plan?
Based on those who reported being enrolled in a Medicare drug plan:

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	13	15	13
No	71	73	71
<i>Did not respond</i>	<i>16</i>	<i>12</i>	<i>16</i>

34. People on Medicare can choose from at least 50 Medicare prescription drug plans in most states. Do you think this is too many, too few, or about the right number of plans?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Too many	31	27	32
Too few	6	10	5
About the right number	34	44	32
<i>Did not respond</i>	<i>29</i>	<i>18</i>	<i>31</i>

35. Under the Medicare Part D prescription drug program, people with low incomes can apply through Social Security for extra help to reduce premiums and prescription drug costs. Do you know about this program?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	35	38	35
No	53	53	53
<i>Did not respond</i>	<i>12</i>	<i>9</i>	<i>13</i>

36. Are you enrolled in the program that provides extra help to reduce premiums and prescription drug costs for low-income people covered by Medicare prescription drug plans?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	9	20	7
No	54	39	57
Still waiting to hear	1	1	1
Do not know	29	34	28
<i>Did not respond</i>	6	6	6

YOUR RECENT EXPERIENCES WITH PRESCRIPTION MEDICINES

37. How many different over-the-counter medications are you taking for your health conditions, such as aspirin or vitamins recommended by your doctor?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
None	14	18	13
1-2	37	37	37
3-5	29	27	30
6-10	8	7	8
11-15	1	2	1
More than 15	1	1	*
<i>Did not respond</i>	10	7	10

38. How many different prescription medicines are you taking for your health conditions? Please include all prescriptions, such as pills, inhalers, eye drops, injectibles, and creams. Do NOT include over-the-counter medications.

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
None	8	7	8
1-2	18	11	20
3-5	32	27	33
6-10	24	31	23
11-15	6	12	5
More than 15	2	4	1
<i>Did not respond</i>	10	7	10

Q39-45 Based on those who take 1 or more prescriptions:

39. Compared to what you paid for prescriptions last year, are you now paying less, paying more, or paying about the same overall for your prescriptions?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Paying less	11	16	11
Paying more	28	30	27
Paying about the same overall	56	50	57
<i>Did not respond</i>	4	4	4

40. Since January of this year [2008], have you had any of the following experiences related to getting your prescription medicines? (*percent responding YES*)

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
a. Unable to get a prescription medicine you were taking because it was NOT covered by your plan	14	33	11
b. Switched to a different medicine because a drug you were taking was NOT covered by your plan	17	31	14
c. Had to get special permission (or prior authorization) from your plan for a medicine you use	14	30	11
d. Switched from a brand-name drug to a generic drug	58	63	57
e. Had to deal with a billing mistake for a prescription medicine	7	10	6
f. Ordered prescriptions by mail	34	21	36

41. Since January of this year [2008], have you delayed getting or not gotten a prescription medicine because it was too expensive?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	17	37	13
No	80	61	84
<i>Did not respond</i>	3	3	3

42. Did you let your doctor know that you delayed getting or did not get a prescription medicine because it was too expensive?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes, I let my doctor know	12	28	9
No, I did not let my doctor know	10	14	9
Does not apply; I filled all my prescriptions without delay	74	54	78
<i>Did not respond</i>	4	4	4

Based on those who delayed getting or did not get a prescription:

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes, I let my doctor know	47	61	41
No, I did not let my doctor know	38	31	42
<i>Did not respond</i>	15	8	17

43. Did your health suffer because you delayed getting or did not get a prescription medicine?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	8	25	5
No	22	23	21
Does not apply; I filled all my prescriptions without delay	65	46	68
<i>Did not respond</i>	5	5	5

Based on those who delayed getting or did not get a prescription:

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	24	47	16
No	61	44	67
<i>Did not respond</i>	15	10	17

44. Since January of this year [2008], have you skipped doses or taken smaller doses of a prescription medicine to make it last longer because it was too expensive?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	13	28	10
No	84	70	87
<i>Did not respond</i>	3	2	3

45. Did your health suffer because you skipped doses or took smaller doses of a prescription medicine?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	7	21	4
No	21	23	21
Does not apply; I did not skip or take smaller doses	67	52	70
<i>Did not respond</i>	5	5	5

Based on those who skipped doses or took smaller doses of a prescription:

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	20	44	13
No	64	47	70
<i>Did not respond</i>	16	9	18

YOUR BASIC NEEDS AND USE OF PERSONAL ASSISTANCE AND EQUIPMENT

46. Are you usually able to do the following activities without help from another person?
(percent responding *NO*)

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
a. Bathing or showering	10	13	10
b. Getting dressed	8	12	8
c. Getting in and out of bed or a chair	8	12	7
d. Using the toilet or getting to the toilet	7	10	7
e. Taking medicines at the right time	10	17	9
f. Preparing meals	15	27	12
g. Eating	5	8	5
h. Managing money, such as keeping track of expenses or paying bills	15	31	12
i. Doing household tasks such as laundry	18	34	14
<i>Total: Any ADL limitation</i>	13	21	12
<i>Total: Any IADL limitation</i>	24	51	19

47. Do you currently get assistance with any basic needs and activities from friends or family members?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes, every day	10	21	8
Yes, but not every day	16	34	13
<i>TOTAL YES</i>	26	55	21
No	65	39	70
<i>Did not respond</i>	9	6	9

48. Do you currently get assistance with any basic needs and activities from anybody else, such as a paid home health aide or personal assistant?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes, every day	3	6	3
Yes, but not every day	5	7	4
<i>TOTAL YES</i>	8	13	7
No	83	82	83
<i>Did not respond</i>	9	6	9

49. Each week, how many hours of personal assistance with basic needs and activities do you get?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
0 hours; I get no personal assistance	71	50	75
1-2 hours	7	14	6
3-5 hours	5	11	4
6-8 hours	2	5	1
9-12 hours	1	3	1
More than 12 hours	4	10	3
<i>Did not respond</i>	9	7	10

50. Have you ever fallen while getting in or out of bed or chairs because no one was available to help you?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	9	22	7
No	82	71	84
<i>Did not respond</i>	9	6	9

51. Overall, how would you describe the amount of personal assistance with basic needs and activities that you get from other people?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Not enough	5	12	3
About right	22	42	18
More than I think I need	3	4	3
Does not apply; I do not need personal assistance with basic needs and activities	59	34	64
<i>Did not respond</i>	11	8	11

Based on those who say they need personal assistance with basic needs and activities:

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Not enough	11	18	9
About right	54	64	51
More than I think I need	8	7	9
<i>Did not respond</i>	26	11	31

52. Overall, how satisfied are you with the quality of personal assistance with basic needs and activities that you get from other people?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Very satisfied	14	28	11
Somewhat satisfied	17	17	5
Somewhat dissatisfied	1	3	1
Very dissatisfied	1	2	1
Does not apply; I do not need personal assistance with basic needs and activities	66	42	71
<i>Did not respond</i>	11	8	12

Based on those who say they need personal assistance with basic needs and activities:

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Very satisfied	41	48	38
Somewhat satisfied	19	29	16
Somewhat dissatisfied	4	6	3
Very dissatisfied	3	3	3
<i>Did not respond</i>	33	14	40

53. Who helps you manage your overall medical care needs? Check all that apply.

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
No one; I manage this on my own	59	38	63
No one; I need help but do not receive it	1	3	*
A doctor	16	23	14
A nurse	3	5	3
A case manager or social worker	2	6	2
A friend or family member	22	39	18
Someone else	4	5	3

54. Do you use any special equipment, technology or assistive devices to help you with your daily activities?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	19	31	16
No	72	63	74
<i>Did not respond</i>	9	6	10

55. In the past month, did you get together socially with family, friends or neighbors?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	82	74	84
No	9	21	7
<i>Did not respond</i>	9	6	9

56. In the past month, did you leave your home for activities such as eating out, doing errands, or going to social events?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	83	77	84
No	8	17	7
<i>Did not respond</i>	9	6	10

YOUR SPENDING ON HEALTH CARE

57. In the past 6 months, about how much did you spend out of pocket on medical care services, such as doctor visits, screening exams, x-rays, or lab work?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
\$0	31	30	31
\$1-\$100	24	23	24
\$101-\$250	15	17	15
\$251-\$500	9	11	8
\$501-\$1,000	5	6	5
More than \$1,000	3	4	3
<i>Did not respond</i>	13	9	14

58. Each month, about how much do you spend out of pocket on supplies or personal care items you regularly use to help you with your disability, such as heating pads?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
\$0	41	32	43
\$1-\$25	23	23	23
\$26-\$50	13	17	12
\$51-\$100	7	12	6
\$101-\$200	3	5	2
\$201-\$300	1	2	1
\$301-\$500	*	1	*
More than \$500	*	1	*
<i>Did not respond</i>	12	9	12

59. Each month, about how much do you spend out of pocket on services provided by a paid home health aid or personal assistant?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
\$0	85	86	84
\$1-\$25	1	2	1
\$26-\$50	*	1	*
\$51-\$100	1	1	1
\$101-\$200	1	1	1
\$201-\$300	*	*	*
\$301-\$500	*	*	*
More than \$500	1	1	1
<i>Did not respond</i>	11	7	12

60. In the past 30 days, about how much did you spend out of pocket (including copayments) to fill or refill your prescription medicines?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
\$0	19	17	19
\$1-\$25	22	27	21
\$26-\$50	16	17	16
\$51-\$100	14	13	14
\$101-\$200	9	9	10
\$201-\$300	3	4	3
\$301-\$500	2	2	2
More than \$500	1	1	2
<i>Did not respond</i>	12	9	13

61. In the past 30 days, about how much did you spend out of pocket for over-the-counter medications?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
\$0	20	19	21
\$1-\$25	40	42	40
\$26-\$50	17	20	17
\$51-\$100	8	8	7
\$101-\$200	2	3	2
\$201-\$300	1	1	1
\$301-\$500	*	*	0
More than \$500	*	*	*
<i>Did not respond</i>	11	7	12

62. In the past 6 months, about how much did you spend out of pocket on equipment, including purchasing, renting, servicing, or repairing your equipment?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
\$0	81	79	82
\$1-\$250	8	12	7
\$251-\$1,000	2	3	1
\$1,001-\$2,000	*	1	*
\$2,001-\$5,000	*	*	*
More than \$5,000	*	*	*
<i>Did not respond</i>	9	5	10

GETTING HEALTH CARE

63. In the past 12 months, have you had a problem paying your health care costs?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes, a major problem	5	16	3
Yes, a minor problem	11	17	9
TOTAL YES	16	33	13
No problem	73	59	75
<i>Did not respond</i>	11	8	12

64. In the past 12 months, have you had a problem paying your health insurance premiums?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes, a major problem	3	7	2
Yes, a minor problem	7	9	7
TOTAL YES	11	16	9
No problem	77	74	77
<i>Did not respond</i>	13	10	13

65. In the past 12 months, have you had a problem paying for any of the following?
(percent responding YES)

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
a. Visits to doctors	8	22	5
b. Hospital services	7	21	5
c. Prescription drugs	11	28	8
d. Over-the-counter medications	8	22	6
e. Home health services or personal assistance	2	6	2
f. Mental health services	2	9	1
g. Dental services	13	30	10
h. Medical equipment, such as a wheelchair or hearing aid	5	8	4
i. Bathroom equipment, such as a raised toilet seat or shower chair	3	8	2
j. Safety equipment, such as grab bars	3	7	3
k. Home modifications, such as wheelchair ramps	3	5	2

66. In the past 12 months, did you delay getting or not get any of the following because of cost concerns? (*percent responding YES*)

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
a. Visits to doctors	7	21	4
b. Hospital services	3	13	1
c. Prescription drugs	11	28	7
d. Over-the-counter medications	8	23	5
e. Home health services or personal assistance	2	7	1
f. Mental health services	2	9	1
g. Dental services	16	34	12
h. Medical equipment, such as a wheelchair or hearing aid	5	10	4
i. Bathroom equipment, such as a raised toilet seat or shower chair	4	9	3
j. Safety equipment, such as grab bars	4	10	3
k. Home modifications, such as wheelchair ramps	3	7	2

67. If you answered “YES” to any item in Question 66, what was the effect of delaying or not getting the service(s) or item(s) you felt you needed? (*percent responding YES*)

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
a. Caused your primary disability to get worse (<i>Disabled only</i>)	36	36	--
Caused an existing medical condition to get worse (<i>Elderly only</i>)	21	--	21
b. Caused a significant amount of physical pain	36	54	26
c. Caused a significant amount of stress or anxiety	51	72	40
d. Caused problems that required medical attention	20	32	13

68. Have you ever had problems getting Medicare to pay for any of the following items: (*percent responding YES*)

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
a. Mental health services	3	8	1
b. Home health services	3	6	2
c. Medical equipment, such as assistive technologies or power wheelchairs	5	9	4

69. In the past 12 months, have you had problems with any of the following?
(percent responding YES)

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
a. Finding a doctor who accepts Medicare	6	12	4
b. Finding a doctor who understands your disability or how to treat it (Disabled only)	15	15	--
c. Finding a dentist who would see you	7	23	4
d. Finding someone to provide home health care or personal assistance	2	5	2
e. Getting medical care because the facilities were not easily accessible for people with disabilities	2	4	1
f. Getting medical care when you needed it because you could not get an appointment	5	13	4
g. Getting transportation to a hospital or doctor's office	5	13	4
h. Getting the right equipment you need to help you with your disability (Disabled only)	10	10	--

70. At any time in the past 12 months, have you and others in the household spent less on food, heat, or other basic needs so that you would have enough money to pay for your health care needs?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	13	33	9
No	74	57	78
<i>Did not respond</i>	13	10	13

71. How concerned are you that you will have difficulty paying for basic needs like food or rent sometime in the next year?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Very concerned	14	35	10
Somewhat concerned	22	29	20
<i>TOTAL Very/somewhat concerned</i>	<i>36</i>	<i>64</i>	<i>30</i>
Not too concerned	22	14	24
Not at all concerned	29	13	32
<i>TOTAL Not too/not at all concerned</i>	<i>52</i>	<i>26</i>	<i>56</i>
<i>Did not respond</i>	13	10	13

72. How concerned are you that you will have to go into a nursing home or other type of facility sometime in the next year?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Very concerned	5	5	5
Somewhat concerned	10	10	10
<i>TOTAL Very/somewhat concerned</i>	<i>16</i>	<i>15</i>	<i>16</i>
Not too concerned	24	23	24
Not at all concerned	46	51	45
<i>TOTAL Not too/not at all concerned</i>	<i>70</i>	<i>74</i>	<i>70</i>
<i>Did not respond</i>	14	11	15

73. How concerned are you that caring for you will become too much of a burden on your family or friends sometime in the next year?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Very concerned	8	10	8
Somewhat concerned	13	17	12
<i>TOTAL Very/somewhat concerned</i>	<i>21</i>	<i>28</i>	<i>19</i>
Not too concerned	23	23	24
Not at all concerned	42	39	43
<i>TOTAL Not too/not at all concerned</i>	<i>66</i>	<i>61</i>	<i>67</i>
<i>Did not respond</i>	14	11	14

GETTING HEALTH INFORMATION

74. Have you ever called the government's toll-free phone number (1-800-MEDICARE) to get information about Medicare?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	17	32	14
No	64	51	66
Never heard of 1-800-MEDICARE	6	7	6
<i>Did not respond</i>	13	10	14

75. Have you ever looked for information on the website www.Medicare.gov?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	12	19	11
No	70	65	70
Never heard of this website	5	6	5
<i>Did not respond</i>	13	10	13

76. Have you ever tried to compare different Medicare prescription drug plans on www.Medicare.gov?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	8	10	7
No	73	73	73
Never heard of this website	6	6	6
<i>Did not respond</i>	13	10	14

EMPLOYMENT AND OTHER ASSISTANCE

77. Have you ever been employed either part-time or full-time?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	72	69	72
No	12	20	11
<i>Did not respond</i>	16	11	17

78. Are you currently...? (*percent responding YES*)

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Working full-time	3	3	3
Working part-time	9	8	9
Self-employed	3	1	4
A full-time student	*	1	*
Unemployed but looking for work	2	4	1
Unemployed and not looking for work	5	14	3
On sick leave	1	1	*
Retired	66	25	73
None of the above	11	41	5

79. Which of the following would you say are the three (3) greatest barriers to employment for people with disabilities? (*Asked of Disabled only*)

Fear of losing disability benefits	53
Fear of losing health insurance	41
Physical barriers at the workplace	19
Lack of flexible schedules, such as work hours or breaks during the workday	20
Discrimination in hiring or at work	18
Lack of transportation to the workplace	11
Lack of jobs available for people with disabilities	35
Other	10

80. Of the three (3) items that you checked in response to Question 79 above, which would you say is the single greatest barrier to employment for people with disabilities? (*Asked of Disabled only*)

Fear of losing disability benefits	21
Fear of losing health insurance	6
Physical barriers at the workplace	4
Lack of flexible schedules, such as work hours or breaks during the workday	3
Discrimination in hiring or at work	5
Lack of transportation to the workplace	1
Lack of jobs available for people with disabilities	8
Other	11
<i>Did not respond</i>	41

81. In the past 12 months, have you received benefits from any of the following programs, in addition to Medicare? (*percent responding YES*)

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Medicaid	12	27	9
Supplemental Security Income (SSI)	10	23	7
Social Security Disability Insurance (SSDI) (<i>Disabled only</i>)	--	51	--
Worker's compensation benefits (<i>Disabled only</i>)	--	2	--
Disability benefits from a private insurance policy (<i>Disabled only</i>)	--	4	--
TANF, the Temporary Assistance for Needy Families program	1	1	1
Job training or vocational rehabilitation (including the Ticket to Work program)	1	2	*
Food Stamps	7	20	5
A program that assists with your rent or housing costs	3	8	2
A program that assists with your utility bills, such as electricity	5	11	4
A program that provides transportation services	4	5	3
Other	4	5	3

82. How concerned are you that you will lose the benefits that you may receive from any of these programs sometime in the next year?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Very concerned	14	29	11
Somewhat concerned	14	22	13
<i>TOTAL Very/somewhat concerned</i>	<i>28</i>	<i>51</i>	<i>14</i>
Not too concerned	15	19	15
Not at all concerned	29	15	31
<i>TOTAL Not too/not at all concerned</i>	<i>44</i>	<i>34</i>	<i>46</i>
<i>Did not respond</i>	<i>28</i>	<i>15</i>	<i>31</i>

BACKGROUND INFORMATION

83. How old are you?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
18-24	*	1	--
25-34	1	5	--
35-44	2	14	--
45-54	5	30	--
55-64	7	42	*
65-74	41	5	48
75-84	30	2	36
85+	13	1	16

84. Are you male or female?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Male	43	52	42
Female	57	48	58

85. Have you ever served in the armed forces?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	22	13	24
No	66	79	64
<i>Did not respond</i>	12	8	12

86. What is your current marital status?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Married	48	35	50
Separated	1	4	1
Divorced	10	22	8
Widowed	23	7	26
Never been married/single	6	24	3
<i>Did not respond</i>	11	8	12

87. Do you have any children under age 18?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	3	14	1
No	86	78	87
<i>Did not respond</i>	11	8	12

88. Which of the following best describes your living arrangements?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Live alone	27	25	27
Live with spouse or partner	47	36	50
Live with other family members	11	24	8
Live with other non-family members	3	6	2
<i>Did not respond</i>	12	9	13

89. Do you rent or own the home you live in?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Rent	16	36	12
Own	65	41	70
Neither	7	15	6
<i>Did not respond</i>	12	8	13

90. Are you Spanish, Hispanic, or Latino?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Yes	2	4	2
No	98	96	98
<i>Did not respond</i>			

91. Which of the following best describes your race?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
White or Caucasian	86	75	88
Black or African-American	10	19	8
Asian	1	1	2
Native Hawaiian or Pacific Islander	*	*	*
American Indian or Alaskan native	*	1	*
Multiple races	1	2	1
Other	1	2	1
<i>Did not respond</i>			

92. What language do you use most in your daily life?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
English	85	89	85
Spanish	1	1	1
Other	1	1	1
<i>Did not respond</i>	12	9	13

93. What is the highest level of school you have completed or the highest degree you have received?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Less than high school	15	19	15
High school graduate, GED or technical/vocational school graduate	31	36	30
Special education	2	5	1
Some college, but no degree	20	19	20
College graduate (Bachelors degree)	12	9	12
Graduate school (Masters degree, a PhD, or a law degree)	9	2	10
<i>Did not respond</i>	12	9	13

94-5. What is your total ANNUAL income including income from a job, pension, Social Security, SSI or any other source? (Include your spouse's income if you are married.)

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
Less than \$10,400 per year	18	33	14
\$10,401 to \$14,000 per year	13	22	11
\$14,001 to \$15,600 per year	7	7	7
\$15,601 to \$20,800 per year	11	12	11
\$20,801 to \$31,200 per year	17	12	18
\$31,201 to \$41,600 per year	13	7	14
More than \$41,600 per year	22	9	25

YOUR VIEWS

96. Which of the following would you say are the three (3) most important things the government could do to improve the quality of life for people with disabilities? Check up to 3. (*Asked of Disabled only; n=2,288*)

Making it easier for people with disabilities to work and keep their health and disability benefits	54
Making it easier to apply for disability benefits	41
Improving prescription drug coverage for people with disabilities	44
Helping with the cost of home health services, personal assistance, and equipment often needed by people with disabilities	26
Improving transportation services for people with disabilities	16
Doing away with the 24-month waiting period for people with disabilities before Medicare coverage begins	46
Other	6

97. Of the three (3) items that you checked in response to Question 96 above, which would you say is the single most important thing the government could do to improve the quality of life for people with disabilities? (*Asked of Disabled only*)

Making it easier for people with disabilities to work and keep their health and disability benefits	15
Making it easier to apply for disability benefits	8
Improving prescription drug coverage for people with disabilities	9
Helping with the cost of home health services, personal assistance, and equipment often needed by people with disabilities	3
Improving transportation services for people with disabilities	1
Doing away with the 24-month waiting period for people with disabilities before Medicare coverage begins	11
Other	14
<i>Did not respond</i>	39

98. Did you fill out this survey by yourself or with help from another person, or is someone filling out this survey for you?

	<u>Total</u>	<u>Disabled</u>	<u>Elderly</u>
I filled this survey out by myself	78	64	81
I filled this survey out with help from another person	7	13	6
Someone else filled out this survey for me, but the answers are my own	11	18	9
<i>Did not respond</i>	4	5	4



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