
Medicare Utilization by Disabled-Worker Beneficiaries: A Longitudinal Analysis

by Barry Bye, Gerald Riley, and James Lubitz*

Medicare eligibility for Social Security disabled-worker beneficiaries begins after 2 years of cash benefit receipt. Extension of the current coverage is often proposed as a way to encourage beneficiaries to return to work. Little is known, however, about the long-run Medicare costs for the disabled and how costs vary by demographic and health characteristics. This article describes Medicare utilization and reimbursement amounts for 1974-81 for a cohort of disabled-worker beneficiaries under age 62 and first entitled to cash benefits in 1972. The data come from a first-time linkage of Disability Insurance program data with data on Medicare utilization. The tables provide a detailed look at several factors that are associated with variation in Medicare costs among beneficiaries and over time.

The Social Security Amendments of 1972 extended Medicare protection to Social Security Disability Insurance (DI) beneficiaries who had been receiving cash benefits for 24 months.¹ On July 1, 1973, about 1.7 million disabled persons became entitled under the program. The extension of Medicare coverage to DI beneficiaries was motivated by concern over spiralling medical care costs and the low level of health insurance protection for members of this vulnerable group: They were in poorer health, used more health care services, had less private health insurance protection, and more out-of-pocket expenses than the non-disabled population.²

In 1980, coverage for DI beneficiaries was further extended.³ Under the previous law, Medicare coverage ended when DI cash benefits ceased, and individuals who returned to work and later became reentitled under the DI program had to wait another 24 months for their Medicare coverage to begin. The 1980 amendments provided a 24-month extension of coverage to beneficiaries whose cash benefits stopped when they returned to work despite a continuing severe impairment.⁴ The law also eliminated the 24-month waiting period when an individual became reentitled to DI benefits within 5 years after leaving the program. These provisions were added to encourage DI beneficiaries to return to work.

Although the 1980 amendments liberalized Medicare eligibility requirements and made other programmatic changes to strengthen work incentives, Congress directed the Secretary of Health and Human Services to develop and carry out experiments and demonstration projects to test the effectiveness of other alternatives in encouraging DI beneficiaries to return to work. Among the examples that Congress had in mind was shortening the initial 24-month waiting period for

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¹See Robert M. Ball, "Social Security Amendments of 1972: Summary and Legislative History," *Social Security Bulletin*, March 1973, pages 3-25.

²*Social Security Survey of the Disabled Population: 1966* (Reports Nos. 5 and 7), Office of Research and Statistics, Social Security Administration, 1977; *Advisory Council on Social Security, Reports on the Old-Age, Survivors, and Disability Insurance and Medicare Programs*, Washington, D.C., 1971; and *Advisory Council on Health Insurance for the Disabled, Health Insurance for the Disabled Under Social Security: Report of the Advisory Council on Health Insurance for the Disabled*, Washington, D.C., 1969.

³*Social Security Disability Amendments of 1980: Legislative History and Summary of Provisions*, *Social Security Bulletin*, April 1981, pages 14-31.

⁴Thus, in effect, a beneficiary who continues to work after completion of a trial work period now receives 36 months of additional Medicare coverage—the 12 months of the extended period of eligibility plus an additional 24 months.

qualification for Medicare coverage to improve the chances of medical recovery. Others have proposed additional extensions of Medicare coverage for beneficiaries working despite severe impairments beyond the additional years mandated by the 1980 amendments. There has, of course, been great concern about the additional costs to the Medicare trust funds that would be entailed by further extension of Medicare coverage. Since the primary objective of the 1980 legislation was to save trust fund monies by strengthening work incentives, questions have been raised about whether beneficiary response to such additional work incentives would be large enough to offset the additional costs to the program.

Little is currently known about how the Medicare costs for DI beneficiaries vary over time and across beneficiaries with different health and demographic characteristics. This information can be used to assess the effects of further changes in Medicare and Social Security DI provisions.

This article presents longitudinal data on Medicare utilization and reimbursement for a cohort of newly entitled disabled-worker beneficiaries.⁵ The results are obtained from a first-time linkage of DI program and Medicare program data files. The data provide a detailed look at several factors that are associated with variation in Medicare costs of DI beneficiaries both cross-sectionally and over time. Such factors include the cause of the disability, duration of benefit receipt, and whether the beneficiary recovered or died.

Previous Research

A major study by Lubitz and Pine analyzed Medicare service utilization of a 5-percent cross-sectional sample of the Medicare DI enrollee population in 1978 and 1981.⁶ The authors found that the disabled incurred Medicare costs at a level similar to that of retired-worker beneficiaries, although their mortality rates were lower. Disabled beneficiaries incurred an average of \$1,393 in Medicare costs in 1981, with an annual death rate of 31 per 1,000, compared with a per capita reimbursement rate of \$1,292 and a death rate of 52 per 1,000 for aged enrollees. Compared with the general population under age 65, DI beneficiaries

⁵Disabled-worker beneficiaries are persons aged 18-64 who meet the Social Security program definition of disability. They are eligible for DI benefits based on their own earnings record, having worked 5 out of the last 10 years. In addition to disabled workers, there are two other categories of Social Security DI beneficiaries—adults disabled as children (ADC) and disabled widower(s). For the definitions of disability and eligibility requirements for these categories of DI beneficiaries, see *Social Security Handbook, 1986*, Social Security Administration, 1986, pages 77-78.

Disabled workers comprise 80 percent of the beneficiaries in the DI program.

⁶James Lubitz and Penelope Pine, "Health Care Use by Medicare's Disabled Enrollees," *Health Care Financing Review*, summer 1986, pages 19-31.

are considerably less healthy; the hospitalization rate for Medicare DI enrollees was 2.5 times that of the general population aged 15-64. Lubitz and Pine also found that over half of the DI beneficiaries diagnosed with malignant neoplasms do not survive the 2-year waiting period for Medicare coverage.

Medicare reimbursements varied substantially by type of DI beneficiary. Reimbursement per enrollee in 1978 was highest for disabled widows (\$1,051) followed by disabled workers (\$924), and lowest for adults disabled as children (\$345). These categories of beneficiaries comprised 4 percent, 82 percent, and 14 percent of the disabled, respectively.

Data and Methods

Data Sources

The data for this study were obtained through a linkage of several data files for a 1972 cohort of newly entitled disabled-worker beneficiaries. A 5-percent sample of disabled-worker beneficiaries was selected from the Master Beneficiary Record (MBR) of the Social Security Administration. The MBR contains entitlement data and a history of cash benefit payments for all persons who have ever received a Social Security benefit. After the sample cases were drawn, data were matched from two statistical data files: the Continuous Disability History Sample (CDHS)—a 20-percent sample of disability determination decisions made by SSA,⁷ and the Continuous Medicare History Sample (CMHS)—a 5-percent sample of Medicare enrollees that provides data on Medicare utilization and costs for 1974-81.⁸

The data items obtained from the CDHS consist mainly of beneficiary characteristics at the time of the benefit award as reflected on the disability determination form prepared by the State agency. This form contains information about the beneficiary's age, years of education, former occupation, and the nature of the disabling condition.

The CMHS is a 5-percent longitudinal research file, with sample selection based on the last two digits of the beneficiary's Medicare number. New enrollees whose numbers place them in the sample are added to the file, and the records of enrollees who die are retained. The file contains demographic data and program information. Included is a summary of enrollees' annual use of physician, hospital outpatient, and home health services, and selected data on all inpatient hospital and skilled-nursing facility stays.

⁷Continuous Disability History Sample, Restricted Use Data File: Description and Documentation, Office of Research and Statistics, Social Security Administration, 1978.

⁸Medicare Statistical Files Manual, Bureau of Data Management and Strategy, Health Care Financing Administration, September 1983.

The 1972 Cohort

A 1972 cohort, rather than a cohort for a later year, was chosen for two reasons. First, this cohort permitted the use of the CMHS data for all years in the period 1974-81. Disability Insurance beneficiaries entitled to cash benefits in 1972 would be first entitled to Medicare in 1974 if they survived the 2-year waiting period—that is, neither died nor recovered. Second, this older cohort probably better reflects the duration experience of future Social Security DI cohorts even though a decade old. Data records for a later beneficiary cohort, whose early postentitlement history under the program crosses the first part of the 1980's, would reflect the broad changes in continuing disability review practices that occurred in that period—acceleration of the reviews in 1981 and 1982, and then a full moratorium in 1984. Thus, the distributional aspects of duration of benefit receipt for such a cohort would be expected to be quite different than that of cohorts before and after that period. It is quite likely that the duration experience of entitlement cohorts beginning after the implementation of the medical improvement standard mandated in the 1984 amendments will be more like that of the early 1970's, apart from the differences attributable to the passage of 10 years. To the extent that Medicare utilization and cost histories are driven by DI program duration, they should be more representative as well.

The cohort was limited to those beneficiaries under age 62 at the time of entitlement. Beneficiaries aged 62 or older were excluded because it was difficult to tell from historical SSA administrative records if the initial period of entitlement was for disability or for reduced retired-worker benefits. A number of these persons probably took a reduced benefit pending the determination of their disability claim. Utilization of Medicare services for this group is not an important issue since persons aged 63-64 at the time of their DI award cannot be eligible and persons aged 62 can have at most a year of eligibility.

Dependent Variables

Medicare Program

The principal dependent variables examined in this article are derived from the Medicare reimbursement amounts from 1974 to 1981. To remove the effects of inflation when analyzing reimbursement amounts over time, adjustments were made for each of the years 1974-80 to convert reimbursement dollar amounts in those years to 1981 levels. The adjustments were applied separately to Part A (Hospital Insurance) and Part B (Supplementary Medical Insurance) reimbursements. For Part A services, the National Hospital

Input Price Index was used.⁹ This index measures inflation in hospital input prices and is appropriate for the years examined because hospitals were reimbursed on a reasonable cost basis for that period. Therefore, an index measuring the inflation effect on hospital input prices should also measure reasonably well the effects of inflation on hospital reimbursements. Although the index does not take into account skilled-nursing facility and home health services, separate indices were not developed for these factors because they comprise a very small part of Part A reimbursements. The proportion of persons with one or more inpatient hospital stays is shown in some of the tables.

Part B reimbursements were indexed using data prepared by the Health Care Financing Administration for the 1983 Annual Report of the Medicare Board of Trustees.¹⁰ The data show net increases in reasonable charges for physician services for Medicare DI enrollees. Technically, the index applies only to physician services, but these comprise the bulk of Part B services.

The reimbursement amounts for Part A and Part B services, combined after adjustment for inflation, were used in several ways in the analysis. For each sample person with a period of Medicare eligibility, the average reimbursement per month of eligibility was computed for each of the years 1974-81. The reimbursement amounts and eligibility months were also used to summarize Medicare utilization during the 8-year period. Both total reimbursement and average reimbursement per month over all months of eligibility were computed separately for each enrollee.

It should be noted that some DI Medicare enrollees with no reimbursements may nonetheless have used some services. Costs of care that do not exceed the Part A or Part B deductible are not paid by the program and are therefore not recorded in the Medicare Statistical System. In addition, the Part B deductible remained at \$60 during 1974-81; high inflation during that period caused more DI Medicare enrollees to exceed the Part B deductible threshold over time, resulting in an increase in the number identified as users of services, independent of any real changes in utilization.

Disability Insurance Program

Social Security DI beneficiaries who receive benefits for 2 years or more—that is, do not die or recover—comprise the beneficiaries eligible for Medicare. Given that a disabled-worker beneficiary has received benefits for 2 years, how the period of eligibility ends has

⁹Mark S. Freeland, Gerard Anderson, and Carol Ellen Schendler, "National Hospital Input Price Index," *Health Care Financing Review*, summer 1979, pages 37-61.

¹⁰1983 Annual Report of the Board of Trustees of the Federal Supplementary Medical Insurance Trust Fund, June 1983.

meaning for the Medicare utilization analysis. Persons whose disability period ends in death most likely represent less healthy persons during their Medicare eligibility than those who continued to receive benefits through 1981 or recovered and left the DI program before that time. And, in turn, disabled-worker beneficiaries who stay in the program are likely to represent persons who are less healthy than those who recover. The MBR, however, which is the source of cash benefit termination data, does not distinguish between medical recovery and return to work. The overall health status of beneficiaries who return to work is thought to be generally poorer than that of persons who medically recover. Nevertheless, how the period of disability ends for those persons eligible for Medicare can be taken as proxy for overall health status and prognosis of the disabling condition.

Beneficiary Characteristics

A number of characteristics of individual disabled-worker beneficiaries are available from SSA administrative records. These characteristics include sex, race, date of birth, primary diagnosis, years of education, occupation, and current primary insurance amount (PIA). There is reason to believe that some or all of these factors may be associated with variation in levels of Medicare service utilization. Several of these factors require further explanation.

Primary Diagnosis

The primary diagnosis identifies the principal medical cause of the disabling condition as determined by the physician-examiner team in the State agency where disability determinations are made. The diagnosis has been coded according to the International Classification of Diseases, Eighth Revision, Clinical Modification.¹¹ One might expect, and in fact observes, substantial variation in DI programmatic outcomes and Medicare utilization among these groups.

Occupation

For most persons in the study, the occupation reported is the individual's major occupation in the 15-year period preceding application for benefits. Occupations are coded using the 3-digit codes found in the Dictionary of Occupational Titles.¹² The categories presented in this analysis are the major occupational groups based on the first digit of the code. (Occupation is "unknown" for 15 percent of the sample cases.)

¹¹Manual of the International Statistical Classification of Diseases, Injuries, and Causes of Death, World Health Organization, Geneva, 1967.

¹²Department of Labor, Dictionary of Occupational Titles, Washington, D.C., 1965.

Primary Insurance Amount

The PIA is the dollar figure upon which cash benefits are based. Computationally, the PIA is a function of the number of years of covered earnings under Social Security before onset of disability and the level of earnings in those years. Analytically, the PIA serves roughly as a proxy for level of lifetime earnings and also as a rough indication of economic status since it is directly related to the amount of cash benefits received.

The PIA's used in the analysis were those in effect as of December 31, 1985. The data available for this study did not include a uniform reporting of the PIA at the time of entitlement, 1972. The 1985 PIA reflects adjustments that were made over the years due to legislative changes and inflation; in the case of beneficiaries who recovered, and became reentitled to DI benefits or entitled to retired-worker benefits, the 1985 PIA might reflect earnings in the intervening period.

Overview of Medicare Utilization

As shown in table 1, the 1972 sample cohort numbers about 18,900 newly entitled disabled-worker beneficiaries under age 62.¹³ About 70 percent of the beneficiaries were men; about 14 percent were black; and a majority—65 percent—were aged 50-61. The largest diagnostic groups were circulatory, 28 percent; musculoskeletal, 15 percent; mental disorders, 9 percent; and neoplasms, 8 percent. Most of the beneficiaries had either less than 9 years of education (36 percent) or 9-12 years (44 percent). The most common occupational groups were service, 14 percent; clerical/sales, 12 percent; and structural work, 12 percent. About 70 percent of the cohort had PIA's of between \$300 and \$600, with the remainder split about equally in the tails of the PIA distribution.

About 82 percent of the cohort continued to receive DI benefits for 2 years or more, thus becoming eligible for Medicare. Within the first 2 years of entitlement, about 13 percent died and 5 percent recovered. Substantial variation was apparent in the proportion of Medicare DI enrollees by individual characteristics. In the cohort, women (86 percent) were more likely to become eligible for Medicare than were men (80 percent). This was due to lower death and recovery rates among women. Older beneficiaries were more likely to become eligible for Medicare than younger beneficiaries. The higher death rates for the older beneficiaries were more than offset by their relatively lower recovery rates.

¹³Estimated population totals can be obtained by multiplying sample counts by 20.

There was great variation in the likelihood of attaining Medicare eligibility across diagnostic groups, from a low of about 34 percent for the neoplasms group to a high of 93 percent for the mental disorders group. Death rates in the first 2 years after entitlement to Disability Insurance were highest for beneficiaries with neoplasms (65 percent), digestive disorders (23 percent), and those in the genitourinary group (20 percent) and lowest for those in mental disorders (2 percent), traumatic injuries (3 percent) and musculoskeletal (3 percent) groups. On the other hand, the percentage of recoveries in the first 2 years was highest for persons in the infective and parasitic group (23 percent) and the traumatic injuries group (22 percent). Beneficiaries with mental disorders, impairments of the nervous system, eye and ear, and musculoskeletal system tended to have both low death and recovery rates and therefore a larger likelihood of being a Medicare DI enrollee after 2 years in the Social Security DI program.

Both recovery rates and death rates rise with higher educational attainment; thus the likelihood of achieving Medicare eligibility declines with increased education. The higher death rate probably results from the fact that beneficiaries with more education on average need have more severe disabling conditions to be allowed DI benefits.¹⁴ There was also some variation in the proportion of disabled workers who were eligible for Medicare across occupational and PIA groups.

During the 8-year period 1974-81, the average number of months of Medicare eligibility was 63, or a little more than 5 years.¹⁵ The average total reimbursement per beneficiary during the period was \$7,563.

Overall, the average reimbursement per month per enrollee was \$154.¹⁶ There is wide variation in the average reimbursement per month across disabled-worker beneficiary characteristics. Average reim-

bursements per month for women were about 20 percent higher than for men. The same is true for blacks compared with whites. Among diagnostic groups, the highest average reimbursement is found for persons in the genitourinary group, \$773. About 30 percent of beneficiaries in this group had end-stage renal disease, and the reimbursement amount reflects the high cost of kidney dialysis. Other diagnostic groups with high monthly averages include neoplasms (\$354), endocrine and metabolic (\$251), and digestive disorders (\$197). High costs in the first and third of these groups might be due to continued higher than average death rates and the large medical care use associated with death.

Average reimbursement per month rises with increasing years of education. Average reimbursements rise as the PIA increases and are also high for beneficiaries whose occupations before onset of disability were professional or clerical. These results are consistent either with the notion that medical care utilization among disabled persons is higher for those with higher socioeconomic status or that persons in these occupational groups as a whole exhibit relatively greater medical severity than those in other groups of DI beneficiaries.

Program Terminations Before 1981

Tables 2 and 3 show average Medicare utilization and reimbursement amounts for each year of eligibility separately for beneficiaries whose period of disability ended in death or recovery. The table stub contains the year of DI program termination. The columns contain the year of Medicare utilization, which is characterized by three quantities: (1) The percentage of DI enrollees with Medicare utilization in the year—that is, \$1 or more of Medicare reimbursement, (2) the percentage of enrollees with one or more inpatient hospital stays in the year, and (3) the average reimbursement per month for each enrollee. The denominator for the average is all enrollees, including those enrollees with no reimbursement in the year. (Analysts who wish to compute the average reimbursement per month for only those enrollees with services may divide the reimbursement amount shown by the proportion of enrollees with Medicare use.) A special comment is required concerning 1974, the first year of eligibility. In tables 2, 3, and 5, the percentage of enrollees with Medicare use and inpatient hospital stays tends to be much lower in 1974 than in 1975 and subsequent years. This phenomenon reflects the lower number of months of eligibility in the first year of entitlement.

Deceased Beneficiaries

During 1974-81, about 2 percent of the Medicare enrollees died. As table 2 shows, the proportion of

¹⁴DI program applicants with intermediate severity are more likely to be awarded benefits under one or more of the following conditions: advanced age, less education, former occupation did not provide transferrable job skills. These factors are not considered when impairments are most severe. This implies that beneficiaries who are young, better educated, or had higher status occupations will, on average, have impairments of greater severity than those beneficiaries with the opposite characteristics.

¹⁵The maximum number of months of observation was $8 \times 12 = 96$ for those beneficiaries entitled in January 1974 and remaining in the DI program through December 1981.

¹⁶This figure—which is the mean value of the average reimbursement per month over the period of eligibility for each enrollee with the mean taken over all enrollees—is not the same as one obtained by dividing the average total reimbursement by the average number of months. The latter ($\$7,563/62.9 = \120) represents a weighted mean of the average reimbursement per month with more weight given to enrollees with a greater number of months of eligibility. In this analysis, these tend to be younger enrollees whose disability period has not ended in death. Thus, those enrollees with the longer durations tend to have lower average monthly Medicare reimbursements, thus explaining why the quotient of the figures in columns 6 and 7 of table 1 tend to be smaller than the figure in the last column.

beneficiaries using Medicare services rises over time, reaching levels of 70 percent or more in the year of death. The proportion of beneficiaries with inpatient hospital stays also increases to levels of about 60 percent and average Medicare reimbursements per month are in the \$900-\$1,100 range in the year of death. As one looks diagonally down the array for program terminations for death, a remarkable consistency is apparent in the patterns of utilization and average reimbursements in the last 3 years of life. There are especially large increases in the average monthly reimbursements in the last 2 years. In addition, real growth in the cost of services might have been expected but is not evident from the pattern of average reimbursements for the last 2 years of life over the 5-year period 1977-81.

The second column of table 2 shows the proportion of eligible beneficiaries who never used Medicare services in 1974-81. The data show that, of those beneficiaries who die within 3 years after eligibility, upwards of 19 percent show no Medicare reimbursement. Some of those beneficiaries may have received services from sources not reimbursed by Medicare. Others may not have elected Part B coverage and did not have any Part A utilization. The proportion of nonusers declines monotonically to the point where more than 90 percent of eligible beneficiaries who died in 1981 had used Medicare services in at least one of the years before death.

Recovered Beneficiaries

During 1974-81, just over 5 percent of the Medicare enrollees left the DI program because of recovery. Recovered beneficiaries are presumably the most healthy of all the beneficiaries, and this is reflected in their Medicare utilization patterns. As table 3 shows, the average monthly reimbursements almost never exceed \$100 and are frequently below \$50. Utilization rates, both overall and for inpatient hospital stays, are also low, with the former running in the 20-40 percent range and the latter in the 10-20 percent range. There appears to be a pronounced decline in the proportion of beneficiaries utilizing services in their year of recovery, probably due to fewer months of eligibility. The data suggest that with larger sample sizes a pattern of decline over the last few years leading up to the year of recovery might be more evident. The proportion of recovered beneficiaries who never used services is very high, being estimated at 40 percent or more for beneficiaries who recovered in all years but the most recent, 1981.

Age 65 Benefit Terminations

Patterns of Medicare utilization are difficult to interpret because turning age 65 per se does not imply a

health characteristic other than the fact that these disabled-worker beneficiaries were aged 55 or older when they became eligible for Disability Insurance and that death occurred after age 65. The utilization and reimbursement patterns would probably be of more interest if the post-age-65 data were included in the analyses, but this is beyond the scope of this article.

Variation in Patterns by Diagnostic Group

Ideally, a disaggregation of the data in tables 2 and 3 on decedents and on recovered beneficiaries for each combination of DI program characteristics would provide information on the variation of Medicare program costs among beneficiaries. Space and sample size, however, do not permit such an analysis. Nevertheless, some notion of the nature of the variation in overall utilization patterns in the four largest diagnostic groups is presented in table 4. The data in tables 2 and 3 are summarized by accumulating along the diagonals using all years except 1974 (for the reasons cited earlier).

The validity of this aggregation depends on the assumption that utilization patterns over time are governed largely by the length of time to the termination event and not by length of time in the program or the year in which the medical care was used. Although these assumptions may not hold completely, accumulating along the diagonals does provide a sufficient summary of the data in tables 2 and 3 so that the patterns can be disaggregated.

The first part of table 4 shows the accumulated patterns for all sample cases by reason for DI program termination. There is also a panel for disabled-worker beneficiaries who were still receiving benefits in 1981. The first column of table 4 shows the percentage of beneficiaries with each DI outcome, with all 1972 entitlements as the base. Similar percentages are shown in the second column but only for Medicare enrollees. For program terminations, the columns of the table represent the Medicare utilization and reimbursement amounts in the years before termination, summarized from tables 2 and 3 as described above. For those who were still receiving benefits, the figures represent utilization and reimbursement in each of the years 1974-81, as shown in the column headings in parentheses.¹⁷

The results for all cases show that the total Medicare reimbursement level for beneficiaries who died is substantially higher than the level for beneficiaries who recovered, attained age 65, or remained in the program. Average monthly reimbursements for the deceased were higher even when

¹⁷There is, of course, no summarization required for these cases. Also, the caveats concerning the 1974 figures, discussed in terms of tables 2-4, apply here as well.

comparing averages 6 years before program termination. On the other hand, recovered beneficiaries had the lowest reimbursement levels. They were the only group for which Medicare utilization and reimbursement levels did not increase over time.

The pattern of results among the four most prevalent diagnostic groups provides a sense of the sources and sizes of variation in Medicare costs. The results for beneficiaries with neoplasms are driven by their higher death rates. About 82 percent died within the first 10 years after DI benefit receipt, and 50 percent of those who became eligible for Medicare died within 8 years. The proportion using Medicare services in the year of death reached almost three-fourths; almost all of these (92 percent) showed one or more inpatient hospital stays.

In contrast to the neoplasms group, the mental disorders group showed a very low death rate and a large proportion (62 percent) of beneficiaries who continued to receive disabled-worker benefits through 1981. For the death cases, Medicare utilization and reimbursement levels were substantially lower than those in the neoplasms group—for example, \$748 compared with \$1,224 per month in the year of death. Medicare DI enrollees with mental disorders who remained in the program exhibited lower utilization and reimbursement levels than did the total population of disabled-worker beneficiaries. The results for the circulatory and the musculoskeletal groups fell between the other two groups.

Benefit Receipt Through 1981

Table 5 describes the utilization pattern for those beneficiaries who were still receiving DI benefits in 1981. This group comprised about 33 percent of those who first became entitled in 1972. There appears to be slow but steady growth in Medicare utilization, reflecting an aging population; the proportion using services in 1975 was about 44 percent, rising to about 57 percent in 1981. Part of this growth is due to constant Part B deductibles, as discussed earlier. About 19 percent never used Medicare services in the 8-year period. Data not shown here indicate that about one-third of these persons did not elect Part B coverage in any year. Thus, there were a substantial number of beneficiaries (about 12 percent) who never used services sufficient to exceed the Part B deductible who were eligible for Part A and Part B in at least one of the years. As stated previously, some beneficiaries may have received services from sources not reimbursed by Medicare.

The remainder of table 5 disaggregates the group who remained on the rolls by the same demographic and DI program characteristics used in table 1. Again, there is a great variety of patterns and levels of Medicare utilization across beneficiaries with varying

characteristics. In the remainder of this section, just a few of the interesting findings are highlighted.

Sex

Both the overall proportion of beneficiaries using Medicare services and the likelihood of inpatient hospital stays were higher for women than for men. Over the 8-year period, the average reimbursement for women was more than 40 percent higher than that for men (\$10,657, compared with \$7,389).

Race

The proportions of beneficiaries using Medicare services and those with inpatient hospital stays were approximately the same for whites and blacks. However, the average reimbursement per month for blacks was 30-40 percent higher over all the years.

Age

A greater proportion of DI beneficiaries in the older age group used Medicare services. This pattern occurred in all years. There does not appear, however, to be a corresponding pattern in inpatient hospital use. The data seem to reflect few or no associations. Average reimbursement per month appears to decline with age. This presumably reflects the relatively greater severity of the disabling conditions of younger beneficiaries.

Occupation

Beneficiaries whose principal occupation was in the clerical group were among the highest users of overall Medicare services. The generally lower physical demands of clerical work imply that clerical workers' disabilities may be more severe on the average than those of persons in other occupational categories.

Future Research

A more complete examination of the association of the various disabled-worker characteristics with Medicare utilization and reimbursement levels will require a different kind of analytic approach. There are too many factors involved to permit simultaneous analysis in a cross-tabular context. Instead, future research with these data will proceed through the use of mathematical models representing the relationships between Medicare costs and independent variables.

The data in the CDHS-CMHS link will also provide the opportunity to make projections of Medicare costs in the 2-year waiting period before Medicare eligibility and costs of extending Medicare coverage beyond the provisions of the current law for recovered beneficiaries. These issues, which are still of great interest as they relate to Disability Insurance beneficiary work incentives, will be the subject of future articles.

Table 1.—Medicare utilization by disabled-worker beneficiaries, by selected characteristics, 1974-81¹

| Characteristics | Sample size | Percent of— | | | | Average— | | |
|--|-------------|-------------|-------------------------|-----------------------------|--------------------|----------------------------------|-----------------------|--------------------------------------|
| | | Population | Deaths in first 2 years | Recoveries in first 2 years | Medicare enrollees | Total reimbursement per enrollee | Months of eligibility | Reimbursement per month per enrollee |
| Total..... | 18,878 | 100.0 | 12.8 | 5.3 | 81.9 | \$7,563 | 62.9 | \$154 |
| Sex: | | | | | | | | |
| Men..... | 13,217 | 70.0 | 13.9 | 6.0 | 80.1 | 6,768 | 61.2 | 145 |
| Women..... | 5,661 | 30.0 | 10.4 | 3.7 | 85.9 | 9,293 | 66.6 | 172 |
| Race: | | | | | | | | |
| White and unknown..... | 16,104 | 85.3 | 12.8 | 5.4 | 81.8 | 7,165 | 62.5 | 150 |
| Black..... | 2,653 | 14.1 | 13.2 | 2.4 | 84.4 | 9,743 | 65.3 | 172 |
| Other..... | 211 | 1.1 | 8.1 | 5.7 | 86.2 | 10,051 | 64.0 | 162 |
| Age in 1972: | | | | | | | | |
| Under 40..... | 2,995 | 15.9 | 6.6 | 16.1 | 77.3 | 9,054 | 73.3 | 140 |
| 40-49..... | 3,628 | 19.2 | 13.3 | 7.9 | 78.8 | 8,972 | 75.1 | 147 |
| 50-59..... | 9,435 | 50.0 | 14.0 | 2.6 | 83.4 | 7,839 | 65.7 | 158 |
| 60-61..... | 2,820 | 14.9 | 14.8 | .6 | 84.6 | 3,494 | 28.9 | 161 |
| Diagnostic group: | | | | | | | | |
| Infective and parasitic..... | 319 | 1.7 | 7.2 | 23.2 | 69.6 | 5,591 | 61.2 | 98 |
| Neoplasms..... | 1,583 | 8.4 | 64.5 | 1.9 | 33.6 | 9,351 | 45.2 | 354 |
| Endocrine and metabolic..... | 619 | 3.3 | 12.6 | 1.6 | 85.8 | 12,574 | 62.3 | 251 |
| Mental disorders..... | 1,737 | 9.2 | 2.2 | 4.7 | 93.1 | 5,669 | 73.3 | 85 |
| Nervous system..... | 681 | 3.6 | 6.3 | 2.8 | 90.9 | 7,336 | 69.7 | 121 |
| Eye and ear..... | 385 | 2.0 | 4.2 | 4.9 | 90.9 | 5,070 | 66.6 | 94 |
| Circulatory..... | 5,345 | 28.3 | 12.2 | 2.5 | 85.3 | 7,712 | 58.0 | 171 |
| Respiratory..... | 1,153 | 6.1 | 10.2 | 1.0 | 88.8 | 7,889 | 56.6 | 181 |
| Digestive..... | 542 | 2.9 | 22.5 | 4.2 | 73.3 | 8,588 | 57.0 | 197 |
| Genitourinary..... | 170 | .9 | 20.0 | 5.3 | 74.7 | 38,397 | 57.4 | 773 |
| Musculoskeletal..... | 2,886 | 15.3 | 2.7 | 6.8 | 90.5 | 6,072 | 66.4 | 109 |
| Traumatic injuries..... | 1,262 | 6.7 | 2.5 | 22.1 | 75.4 | 5,114 | 64.1 | 83 |
| Other and unknown..... | 2,196 | 11.6 | 6.6 | 5.2 | 88.2 | 8,469 | 67.9 | 147 |
| Education: | | | | | | | | |
| None..... | 216 | 1.1 | 10.6 | 1.4 | 88.0 | 4,700 | 60.2 | 89 |
| 1-8 years..... | 6,562 | 34.8 | 12.1 | 3.2 | 84.7 | 6,356 | 61.1 | 140 |
| 9-12 years..... | 8,231 | 43.6 | 14.3 | 6.7 | 79.0 | 8,494 | 63.6 | 167 |
| 13 years or more..... | 1,472 | 7.8 | 15.2 | 8.4 | 76.4 | 8,458 | 60.6 | 184 |
| Other and unknown..... | 2,397 | 12.7 | 8.1 | 4.6 | 87.3 | 7,651 | 67.1 | 138 |
| Occupation: | | | | | | | | |
| Professional, technical, managerial..... | 1,893 | 10.0 | 17.1 | 5.0 | 77.9 | 8,281 | 58.4 | 203 |
| Clerical, sales..... | 2,277 | 12.1 | 14.4 | 5.0 | 80.6 | 9,184 | 63.6 | 184 |
| Service..... | 2,672 | 14.2 | 12.1 | 4.1 | 83.8 | 8,291 | 63.7 | 163 |
| Farming, fishing, forestry..... | 760 | 4.0 | 10.8 | 4.3 | 84.9 | 5,238 | 58.3 | 108 |
| Processing..... | 565 | 3.0 | 13.3 | 4.8 | 81.9 | 7,959 | 63.2 | 144 |
| Machine trades..... | 1,637 | 8.7 | 12.7 | 5.8 | 81.5 | 6,933 | 62.4 | 142 |
| Benchwork..... | 1,168 | 6.2 | 10.3 | 4.0 | 85.7 | 7,286 | 66.9 | 137 |
| Structural work..... | 2,230 | 11.8 | 12.5 | 6.1 | 81.4 | 6,268 | 59.8 | 132 |
| Miscellaneous..... | 2,864 | 15.2 | 12.7 | 6.4 | 80.9 | 6,807 | 62.3 | 145 |
| Unknown..... | 2,812 | 14.9 | 11.2 | 3.4 | 85.4 | 7,934 | 67.3 | 144 |
| Primary insurance amount, 1985: | | | | | | | | |
| Less than \$300..... | 3,068 | 16.3 | 8.3 | 8.3 | 83.4 | 7,358 | 63.9 | 139 |
| \$300-\$399..... | 4,308 | 22.8 | 10.5 | 6.3 | 83.2 | 7,898 | 64.3 | 148 |
| \$400-\$499..... | 3,812 | 20.2 | 13.1 | 4.5 | 82.4 | 7,575 | 63.0 | 158 |
| \$500-\$599..... | 5,046 | 26.7 | 15.5 | 1.9 | 82.6 | 7,359 | 61.8 | 156 |
| \$600 or more..... | 2,644 | 14.0 | 16.2 | 7.6 | 76.2 | 7,628 | 60.7 | 171 |

¹Beneficiaries under age 62 and entitled to benefits in 1972.

Table 2.—Medicare utilization and reimbursement for disabled-worker beneficiaries who died, 1974-81

| Year of death | Sample size | Percent never used Medicare | Year of Medicare utilization | | | | | | | | Average total reimbursement per enrollee |
|---|-------------|-----------------------------|------------------------------|-------|-------|---------|---------|---------|---------|-------|--|
| | | | 1974 | 1975 | 1976 | 1977 | 1978 | 1979 | 1980 | 1981 | |
| 1974 | | | | | | | | | | | |
| Total | 415 | 42.4 | ... | ... | ... | ... | ... | ... | ... | ... | \$3,029 |
| Percent with Medicare use | ... | ... | 57.6 | ... | ... | ... | ... | ... | ... | ... | ... |
| Percent with inpatient hospital stay | ... | ... | 51.6 | ... | ... | ... | ... | ... | ... | ... | ... |
| Avg. reimbursement per month per enrollee | ... | ... | \$636 | ... | ... | ... | ... | ... | ... | ... | ... |
| 1975 | | | | | | | | | | | |
| Total | 613 | 26.3 | ... | ... | ... | ... | ... | ... | ... | ... | 5,907 |
| Percent with Medicare use | ... | ... | 43.9 | 69.2 | ... | ... | ... | ... | ... | ... | ... |
| Percent with inpatient hospital stay | ... | ... | 28.9 | 61.6 | ... | ... | ... | ... | ... | ... | ... |
| Avg. reimbursement per month per enrollee | ... | ... | \$235 | \$873 | ... | ... | ... | ... | ... | ... | ... |
| 1976 | | | | | | | | | | | |
| Total | 571 | 19.1 | ... | ... | ... | ... | ... | ... | ... | ... | 9,534 |
| Percent with Medicare use | ... | ... | 41.7 | 64.8 | 71.3 | ... | ... | ... | ... | ... | ... |
| Percent with inpatient hospital stay | ... | ... | 23.1 | 43.4 | 60.6 | ... | ... | ... | ... | ... | ... |
| Avg. reimbursement per month per enrollee | ... | ... | \$198 | \$280 | \$927 | ... | ... | ... | ... | ... | ... |
| 1977 | | | | | | | | | | | |
| Total | 435 | 14.5 | ... | ... | ... | ... | ... | ... | ... | ... | 11,965 |
| Percent with Medicare use | ... | ... | 36.3 | 58.6 | 65.5 | 72.6 | ... | ... | ... | ... | ... |
| Percent with inpatient hospital stay | ... | ... | 21.1 | 33.8 | 40.7 | 61.1 | ... | ... | ... | ... | ... |
| Avg. reimbursement per month per enrollee | ... | ... | \$179 | \$171 | \$303 | \$1,021 | ... | ... | ... | ... | ... |
| 1978 | | | | | | | | | | | |
| Total | 362 | 13.3 | ... | ... | ... | ... | ... | ... | ... | ... | 16,210 |
| Percent with Medicare use | ... | ... | 28.7 | 53.0 | 58.3 | 65.4 | 71.3 | ... | ... | ... | ... |
| Percent with inpatient hospital stay | ... | ... | 12.4 | 30.3 | 37.6 | 46.1 | 58.0 | ... | ... | ... | ... |
| Avg. reimbursement per month per enrollee | ... | ... | \$99 | \$179 | \$231 | \$359 | \$1,166 | ... | ... | ... | ... |
| 1979 | | | | | | | | | | | |
| Total | 300 | 13.0 | ... | ... | ... | ... | ... | ... | ... | ... | 18,611 |
| Percent with Medicare use | ... | ... | 37.7 | 54.3 | 60.3 | 62.3 | 68.7 | 74.7 | ... | ... | ... |
| Percent with inpatient hospital stay | ... | ... | 21.7 | 28.7 | 31.7 | 32.7 | 44.3 | 64.3 | ... | ... | ... |
| Avg. reimbursement per month per enrollee | ... | ... | \$200 | \$161 | \$205 | \$217 | \$379 | \$1,160 | ... | ... | ... |
| 1980 | | | | | | | | | | | |
| Total | 259 | 9.7 | ... | ... | ... | ... | ... | ... | ... | ... | 20,828 |
| Percent with Medicare use | ... | ... | 29.7 | 51.7 | 51.0 | 53.5 | 57.5 | 71.0 | 77.2 | ... | ... |
| Percent with inpatient hospital stay | ... | ... | 16.2 | 27.4 | 29.3 | 31.3 | 36.2 | 45.9 | 67.2 | ... | ... |
| Avg. reimbursement per month per enrollee | ... | ... | \$91 | \$152 | \$156 | \$223 | \$269 | \$406 | \$1,122 | ... | ... |
| 1981 | | | | | | | | | | | |
| Total | 219 | 7.8 | ... | ... | ... | ... | ... | ... | ... | ... | 20,894 |
| Percent with Medicare use | ... | ... | 30.6 | 54.8 | 57.5 | 59.8 | 61.2 | 64.8 | 66.2 | 72.1 | ... |
| Percent with inpatient hospital stay | ... | ... | 12.3 | 24.7 | 29.7 | 31.1 | 32.9 | 35.6 | 35.2 | 54.3 | ... |
| Avg. reimbursement per month per enrollee | ... | ... | \$92 | \$121 | \$177 | \$184 | \$218 | \$238 | \$370 | \$977 | ... |

Table 3.—Medicare utilization and reimbursement for disabled-worker beneficiaries who recovered, 1974-81

| Year of recovery | Sample size | Percent never used Medicare | Year of Medicare utilization | | | | | | | | Average total reimbursement per enrollee |
|--|-------------|-----------------------------|------------------------------|------|------|------|------|-------|------|------|--|
| | | | 1974 | 1975 | 1976 | 1977 | 1978 | 1979 | 1980 | 1981 | |
| 1974 | | | | | | | | | | | |
| Total | 140 | 92.1 | ... | ... | ... | ... | ... | ... | ... | ... | \$96 |
| Percent with Medicare use | ... | ... | 7.9 | ... | ... | ... | ... | ... | ... | ... | ... |
| Percent with inpatient hospital stay | ... | ... | 3.6 | ... | ... | ... | ... | ... | ... | ... | ... |
| Average reimbursement per month per enrollee | ... | ... | \$10 | ... | ... | ... | ... | ... | ... | ... | ... |
| 1975 | | | | | | | | | | | |
| Total | 229 | 82.1 | ... | ... | ... | ... | ... | ... | ... | ... | 561 |
| Percent with Medicare use | ... | ... | 12.2 | 11.4 | ... | ... | ... | ... | ... | ... | ... |
| Percent with inpatient hospital stay | ... | ... | 6.5 | 4.4 | ... | ... | ... | ... | ... | ... | ... |
| Average reimbursement per month per enrollee | ... | ... | \$35 | \$24 | ... | ... | ... | ... | ... | ... | ... |
| 1976 | | | | | | | | | | | |
| Total | 103 | 66.0 | ... | ... | ... | ... | ... | ... | ... | ... | 1,046 |
| Percent with Medicare use | ... | ... | 19.4 | 21.4 | 19.4 | ... | ... | ... | ... | ... | ... |
| Percent with inpatient hospital stay | ... | ... | 9.7 | 9.7 | 10.7 | ... | ... | ... | ... | ... | ... |
| Average reimbursement per month per enrollee | ... | ... | \$53 | \$24 | \$29 | ... | ... | ... | ... | ... | ... |
| 1977 | | | | | | | | | | | |
| Total | 88 | 61.4 | ... | ... | ... | ... | ... | ... | ... | ... | 2,231 |
| Percent with Medicare use | ... | ... | 13.6 | 29.5 | 23.9 | 15.9 | ... | ... | ... | ... | ... |
| Percent with inpatient hospital stay | ... | ... | 6.8 | 11.4 | 11.4 | 9.1 | ... | ... | ... | ... | ... |
| Average reimbursement per month per enrollee | ... | ... | \$75 | \$77 | \$27 | \$18 | ... | ... | ... | ... | ... |
| 1978 | | | | | | | | | | | |
| Total | 81 | 46.9 | ... | ... | ... | ... | ... | ... | ... | ... | 2,153 |
| Percent with Medicare use | ... | ... | 19.8 | 32.1 | 33.3 | 25.9 | 18.5 | ... | ... | ... | ... |
| Percent with inpatient hospital stay | ... | ... | 11.1 | 17.3 | 13.5 | 7.4 | 7.4 | ... | ... | ... | ... |
| Average reimbursement per month per enrollee | ... | ... | \$49 | \$55 | \$39 | \$40 | \$29 | ... | ... | ... | ... |
| 1979 | | | | | | | | | | | |
| Total | 72 | 47.2 | ... | ... | ... | ... | ... | ... | ... | ... | 3,278 |
| Percent with Medicare use | ... | ... | 23.6 | 36.1 | 29.2 | 31.9 | 27.8 | 22.2 | ... | ... | ... |
| Percent with inpatient hospital stay | ... | ... | 12.5 | 22.2 | 11.1 | 12.5 | 9.7 | 8.3 | ... | ... | ... |
| Average reimbursement per month per enrollee | ... | ... | \$79 | \$83 | \$56 | \$43 | \$11 | \$35 | ... | ... | ... |
| 1980 | | | | | | | | | | | |
| Total | 45 | 40.0 | ... | ... | ... | ... | ... | ... | ... | ... | 4,837 |
| Percent with Medicare use | ... | ... | 20.0 | 33.3 | 33.3 | 24.4 | 33.3 | 37.8 | 22.2 | ... | ... |
| Percent with inpatient hospital stay | ... | ... | 4.4 | 15.5 | 8.9 | 13.3 | 13.3 | 20.0 | 11.1 | ... | ... |
| Average reimbursement per month per enrollee | ... | ... | \$7 | \$34 | \$13 | \$78 | \$99 | \$116 | \$60 | ... | ... |
| 1981 | | | | | | | | | | | |
| Total | 52 | 23.1 | ... | ... | ... | ... | ... | ... | ... | ... | 4,553 |
| Percent with Medicare use | ... | ... | 28.8 | 40.4 | 44.2 | 42.3 | 38.5 | 42.3 | 32.7 | 23.1 | ... |
| Percent with inpatient hospital stay | ... | ... | 15.4 | 11.5 | 32.6 | 19.2 | 13.5 | 25.0 | 15.4 | 5.8 | ... |
| Average reimbursement per month per enrollee | ... | ... | \$155 | \$28 | \$61 | \$34 | \$42 | \$92 | \$27 | \$53 | ... |

Table 4.—Medicare utilization patterns of disabled-worker beneficiaries, by Disability Insurance program status and selected diagnostic group, 1974-81

| Program status and diagnostic group | Percent of entitlement cohort | Percent of Medicare enrollees | Year of Medicare utilization | | | | | | | | Average total reimbursement per enrollee | |
|---|-------------------------------|-------------------------------|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------|--|---------|
| | | | (1974) | 6th year prior (1975) | 5th year prior (1976) | 4th year prior (1977) | 3rd year prior (1978) | 2nd year prior (1979) | 1st year prior (1980) | Year of event (1981) | | |
| Program status | | | | | | | | | | | | |
| All cases..... | 100.0 | 100.0 | ... | ... | ... | ... | ... | ... | ... | ... | ... | \$7,563 |
| Deceased..... | 29.6 | 20.5 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 11,641 |
| Sample size..... | ... | ... | ... | 219 | 478 | 778 | 1,140 | 1,575 | 2,146 | 2,759 | ... | ... |
| Percent with Medicare use..... | ... | ... | ... | 54.8 | 54.3 | 54.8 | 56.6 | 59.9 | 66.5 | 72.0 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | ... | 24.7 | 28.4 | 29.6 | 31.4 | 35.1 | 42.9 | 61.1 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | ... | \$121 | \$163 | \$166 | \$203 | \$219 | \$336 | \$1,009 | ... | ... |
| Recovered..... | 9.6 | 5.2 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 1,618 |
| Sample size..... | ... | ... | ... | 52 | 97 | 169 | 250 | 338 | 441 | 670 | ... | ... |
| Percent with Medicare use..... | ... | ... | ... | 40.4 | 39.1 | 37.3 | 31.2 | 33.4 | 26.8 | 16.9 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | ... | 11.5 | 24.7 | 17.7 | 14.0 | 14.5 | 11.3 | 7.3 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | ... | \$29 | \$49 | \$49 | \$57 | \$64 | \$35 | \$30 | ... | ... |
| Age 65..... | 28.2 | 34.5 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 4,906 |
| Sample size..... | ... | ... | ... | 540 | 1,186 | 1,976 | 2,844 | 3,820 | 4,860 | 5,329 | ... | ... |
| Percent with Medicare use..... | ... | ... | ... | 48.5 | 47.6 | 51.2 | 53.2 | 53.5 | 56.0 | 60.1 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | ... | 20.0 | 19.3 | 21.0 | 22.0 | 22.0 | 24.0 | 24.8 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | ... | \$67 | \$66 | \$76 | \$88 | \$85 | \$102 | \$124 | ... | ... |
| Still on the rolls..... | 32.6 | 39.8 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 8,543 |
| Sample size..... | ... | ... | 6,151 | 6,151 | 6,151 | 6,151 | 6,151 | 6,151 | 6,151 | 6,151 | 6,151 | ... |
| Percent with Medicare use..... | ... | ... | ... | 25.7 | 43.6 | 47.0 | 48.8 | 51.3 | 53.0 | 55.5 | 57.0 | ... |
| Percent with inpatient hospital stay..... | ... | ... | ... | 12.2 | 20.7 | 20.6 | 21.5 | 21.8 | 22.5 | 23.3 | 23.3 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | ... | \$71 | \$81 | \$84 | \$91 | \$92 | \$102 | \$112 | \$112 | ... |
| Diagnostic group | | | | | | | | | | | | |
| Neoplasms..... | 100.0 | 100.0 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 9,351 |
| Deceased..... | 81.6 | 50.9 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 10,963 |
| Sample size..... | ... | ... | ... | 7 | 20 | 34 | 51 | 77 | 128 | 211 | ... | ... |
| Percent with Medicare use..... | ... | ... | ... | 57.1 | 50.0 | 52.9 | 68.6 | 62.3 | 72.7 | 74.9 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | ... | 28.6 | 30.0 | 23.5 | 29.4 | 28.6 | 47.7 | 69.2 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | ... | \$22 | \$153 | \$146 | \$160 | \$251 | \$391 | \$1,224 | ... | ... |
| Recovered..... | 2.8 | 2.6 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 1,025 |
| Sample size..... | ... | ... | ... | 1 | 3 | 3 | 5 | 7 | 9 | 12 | ... | ... |
| Percent with Medicare use..... | ... | ... | ... | 100.0 | 66.7 | 66.7 | 20.0 | 14.3 | 22.2 | 8.3 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | ... | 0 | 66.7 | 0 | 20.0 | 0 | 11.1 | 0 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | ... | \$4 | \$145 | \$17 | \$97 | \$11 | \$5 | \$1 | ... | ... |
| Age 65..... | 8.1 | 24.1 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 6,299 |
| Sample size..... | ... | ... | ... | 9 | 19 | 44 | 60 | 79 | 114 | 128 | ... | ... |
| Percent with Medicare use..... | ... | ... | ... | 44.4 | 36.8 | 47.7 | 60.0 | 55.7 | 61.4 | 67.2 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | ... | 22.2 | 26.3 | 20.5 | 23.3 | 20.3 | 26.3 | 29.7 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | ... | \$271 | \$127 | \$103 | \$112 | \$142 | \$146 | \$175 | ... | ... |
| Still on the rolls..... | 7.5 | 22.4 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 9,941 |
| Sample size..... | ... | ... | ... | 119 | 119 | 119 | 119 | 119 | 119 | 119 | 119 | ... |
| Percent with Medicare use..... | ... | ... | ... | 32.8 | 47.9 | 49.5 | 56.3 | 58.0 | 56.3 | 61.3 | 62.2 | ... |
| Percent with inpatient hospital stay..... | ... | ... | ... | 10.1 | 21.8 | 17.6 | 21.8 | 24.4 | 14.3 | 22.7 | 23.5 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | ... | \$54 | \$94 | \$89 | \$124 | \$150 | \$83 | \$99 | \$153 | ... |
| Mental disorders..... | 100.0 | 100.0 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 5,669 |
| Deceased..... | 14.8 | 12.5 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 8,294 |
| Sample size..... | ... | ... | ... | 17 | 35 | 63 | 77 | 104 | 136 | 173 | ... | ... |
| Percent with Medicare use..... | ... | ... | ... | 41.1 | 34.4 | 38.1 | 42.9 | 48.1 | 49.3 | 57.8 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | ... | 23.5 | 17.1 | 27.0 | 26.0 | 31.7 | 33.1 | 48.0 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | ... | \$161 | \$65 | \$106 | \$124 | \$153 | \$232 | \$784 | ... | ... |

Table 4.—Medicare utilization patterns of disabled-worker beneficiaries, by Disability Insurance program status and selected diagnostic group, 1974-81—Continued

| Program status and diagnostic group | Percent of entitlement cohort | Percent of Medicare enrollees | Year of Medicare utilization | | | | | | | | Average total reimbursement per enrollee |
|--|-------------------------------|-------------------------------|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------|--|
| | | | (1974) | 6th year prior (1975) | 5th year prior (1976) | 4th year prior (1977) | 3rd year prior (1978) | 2nd year prior (1979) | 1st year prior (1980) | Year of event (1981) | |
| Mental disorders—Continued | | | | | | | | | | | |
| Recovered | 11.2 | 7.1 | ... | 9 | 14 | 29 | 39 | 49 | 60 | 97 | \$1,129 |
| Sample size | ... | ... | ... | ... | ... | ... | ... | ... | ... | ... | ... |
| Percent with Medicare use | ... | ... | ... | 11.1 | 35.7 | 41.4 | 28.2 | 26.5 | 16.7 | 14.4 | ... |
| Percent with inpatient hospital stay | ... | ... | ... | 0 | 28.6 | 20.7 | 12.8 | 10.2 | 6.7 | 7.2 | ... |
| Average reimbursement per month per enrollee | ... | ... | ... | \$1 | \$28 | \$37 | \$57 | \$47 | \$13 | \$33 | ... |
| Age 65 | 16.8 | 18.3 | ... | ... | ... | ... | ... | ... | ... | ... | 3,848 |
| Sample size | ... | ... | ... | 26 | 68 | 121 | 168 | 217 | 268 | 292 | ... |
| Percent with Medicare use | ... | ... | ... | 34.6 | 41.1 | 44.6 | 52.4 | 50.2 | 51.5 | 53.8 | ... |
| Percent with inpatient hospital stay | ... | ... | ... | 11.5 | 10.3 | 15.7 | 24.4 | 18.4 | 17.9 | 19.2 | ... |
| Average reimbursement per month per enrollee | ... | ... | ... | \$26 | \$34 | \$60 | \$87 | \$62 | \$84 | \$85 | ... |
| Still on the rolls | 57.2 | 62.1 | ... | ... | ... | ... | ... | ... | ... | ... | 6,197 |
| Sample size | ... | ... | ... | 993 | 993 | 993 | 993 | 993 | 993 | 993 | ... |
| Percent with Medicare use | ... | ... | ... | 22.7 | 34.5 | 40.0 | 42.5 | 43.6 | 45.4 | 48.1 | ... |
| Percent with inpatient hospital stay | ... | ... | ... | 10.4 | 15.1 | 16.6 | 20.4 | 18.8 | 18.0 | 19.4 | ... |
| Average reimbursement per month per enrollee | ... | ... | ... | \$56 | \$50 | \$54 | \$64 | \$69 | \$86 | \$87 | ... |
| Circulatory | 100.0 | 100.0 | ... | ... | ... | ... | ... | ... | ... | ... | 7,712 |
| Deceased | 35.1 | 26.8 | ... | 79 | 182 | 304 | 461 | 634 | 838 | 1,049 | 9,835 |
| Sample size | ... | ... | ... | ... | ... | ... | ... | ... | ... | ... | ... |
| Percent with Medicare use | ... | ... | ... | 62.0 | 51.1 | 53.6 | 56.2 | 61.4 | 66.7 | 73.3 | ... |
| Percent with inpatient hospital stay | ... | ... | ... | 24.1 | 22.0 | 24.3 | 27.8 | 33.6 | 40.3 | 60.7 | ... |
| Average reimbursement per month per enrollee | ... | ... | ... | \$98 | \$106 | \$107 | \$153 | \$181 | \$287 | \$919 | ... |
| Recovered | 4.7 | 2.6 | ... | 8 | 11 | 24 | 38 | 53 | 67 | 89 | 2,701 |
| Sample size | ... | ... | ... | ... | ... | ... | ... | ... | ... | ... | ... |
| Percent with Medicare use | ... | ... | ... | 50.0 | 54.5 | 45.8 | 34.2 | 39.6 | 37.3 | 21.3 | ... |
| Percent with inpatient hospital stay | ... | ... | ... | 0 | 18.2 | 20.8 | 5.3 | 13.2 | 17.9 | 9.0 | ... |
| Average reimbursement per month per enrollee | ... | ... | ... | \$7 | \$40 | \$32 | \$76 | \$159 | \$79 | \$37 | ... |
| Age 65 | 35.2 | 41.3 | ... | ... | ... | ... | ... | ... | ... | ... | 5,460 |
| Sample size | ... | ... | ... | 170 | 377 | 637 | 947 | 1,311 | 1,687 | 1,882 | ... |
| Percent with Medicare use | ... | ... | ... | 51.8 | 50.7 | 55.7 | 57.8 | 58.3 | 61.9 | 64.8 | ... |
| Percent with inpatient hospital stay | ... | ... | ... | 22.4 | 21.0 | 24.2 | 26.3 | 24.3 | 27.1 | 27.9 | ... |
| Average reimbursement per month per enrollee | ... | ... | ... | \$82 | \$82 | \$89 | \$108 | \$92 | \$114 | \$140 | ... |
| Still on the rolls | 25.0 | 29.3 | ... | ... | ... | ... | ... | ... | ... | ... | 9,381 |
| Sample size | ... | ... | ... | 1,338 | 1,338 | 1,338 | 1,338 | 1,338 | 1,338 | 1,338 | ... |
| Percent with Medicare use | ... | ... | ... | 31.9 | 50.1 | 55.3 | 54.2 | 57.2 | 58.8 | 60.8 | ... |
| Percent with inpatient hospital stay | ... | ... | ... | 16.0 | 23.2 | 23.4 | 22.7 | 23.5 | 25.0 | 26.1 | ... |
| Average reimbursement per month per enrollee | ... | ... | ... | \$95 | \$95 | \$88 | \$96 | \$110 | \$114 | \$155 | ... |
| Musculoskeletal | 100.0 | 100.0 | ... | ... | ... | ... | ... | ... | ... | ... | 6,072 |
| Deceased | 12.6 | 10.9 | ... | 27 | 57 | 78 | 108 | 159 | 208 | 258 | 11,834 |
| Sample size | ... | ... | ... | ... | ... | ... | ... | ... | ... | ... | ... |
| Percent with Medicare use | ... | ... | ... | 59.3 | 59.6 | 59.0 | 55.6 | 59.7 | 69.2 | 75.2 | ... |
| Percent with inpatient hospital stay | ... | ... | ... | 29.6 | 31.6 | 29.5 | 35.2 | 33.3 | 40.9 | 65.1 | ... |
| Average reimbursement per month per enrollee | ... | ... | ... | \$159 | \$126 | \$151 | \$165 | \$204 | \$293 | \$1,141 | ... |
| Recovered | 12.2 | 6.0 | ... | 13 | 24 | 33 | 50 | 67 | 86 | 131 | 1,653 |
| Sample size | ... | ... | ... | ... | ... | ... | ... | ... | ... | ... | ... |
| Percent with Medicare use | ... | ... | ... | 69.2 | 62.5 | 45.5 | 42.0 | 37.3 | 27.9 | 15.3 | ... |
| Percent with inpatient hospital stay | ... | ... | ... | 30.8 | 29.2 | 15.2 | 16.0 | 14.9 | 7.0 | 7.6 | ... |
| Average reimbursement per month per enrollee | ... | ... | ... | \$67 | \$92 | \$35 | \$68 | \$57 | \$23 | \$30 | ... |
| Age 65 | 36.6 | 10.4 | ... | ... | ... | ... | ... | ... | ... | ... | \$4,091 |
| Sample size | ... | ... | ... | 115 | 252 | 404 | 571 | 771 | 974 | 1,055 | ... |
| Percent with Medicare use | ... | ... | ... | 52.2 | 49.2 | 49.5 | 50.3 | 49.8 | 51.4 | 57.3 | ... |
| Percent with inpatient hospital stay | ... | ... | ... | 20.9 | 19.4 | 20.0 | 16.3 | 22.2 | 20.7 | 22.0 | ... |
| Average reimbursement per month per enrollee | ... | ... | ... | \$66 | \$48 | \$65 | \$58 | \$73 | \$84 | \$103 | ... |
| Still on the rolls | 38.7 | 42.7 | ... | ... | ... | ... | ... | ... | ... | ... | \$7,089 |
| Sample size | ... | ... | ... | 1,117 | 1,117 | 1,117 | 1,117 | 1,117 | 1,117 | 1,117 | ... |
| Percent with Medicare use | ... | ... | ... | 25.6 | 43.8 | 46.5 | 47.2 | 49.8 | 52.4 | 56.0 | ... |
| Percent with inpatient hospital stay | ... | ... | ... | 10.9 | 21.8 | 20.5 | 20.9 | 21.4 | 22.3 | 22.8 | ... |
| Average reimbursement per month per enrollee | ... | ... | ... | \$50 | \$73 | \$77 | \$72 | \$77 | \$83 | \$92 | ... |

Table 5.—Medicare utilization of disabled-worker beneficiaries who remained in the Disability Insurance program, by selected characteristics, 1974-81

| Characteristic | Sample size | Percent never used Medicare | Year of Medicare utilization | | | | | | | | Average total reimbursement per enrollee | |
|---|-------------|-----------------------------|------------------------------|-------|-------|-------|-------|-------|-------|-------|--|---------|
| | | | 1974 | 1975 | 1976 | 1977 | 1978 | 1979 | 1980 | 1981 | | |
| All cases..... | 6,151 | 18.7 | ... | ... | ... | ... | ... | ... | ... | ... | ... | \$8,543 |
| Percent with Medicare use..... | ... | ... | 25.7 | 43.6 | 47.0 | 48.8 | 51.3 | 53.0 | 55.5 | 57.0 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 12.2 | 20.7 | 20.6 | 21.5 | 21.8 | 22.5 | 23.3 | 23.3 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$71 | \$81 | \$84 | \$91 | \$92 | \$102 | \$112 | \$112 | ... | ... |
| Sex | | | | | | | | | | | | |
| Men..... | 3,978 | 22.7 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 7,389 |
| Percent with Medicare use..... | ... | ... | 22.1 | 38.2 | 40.6 | 41.9 | 44.4 | 46.2 | 48.8 | 50.6 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 11.0 | 18.2 | 18.2 | 18.7 | 19.2 | 19.7 | 21.3 | 21.4 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$60 | \$64 | \$72 | \$80 | \$76 | \$90 | \$102 | \$99 | ... | ... |
| Women..... | 2,173 | 11.3 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 10,657 |
| Percent with Medicare use..... | ... | ... | 32.2 | 53.5 | 58.7 | 61.4 | 64.0 | 65.5 | 67.8 | 68.7 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 14.4 | 14.4 | 25.4 | 25.0 | 26.7 | 26.6 | 27.8 | 26.8 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$91 | \$112 | \$107 | \$112 | \$121 | \$122 | \$131 | \$137 | ... | ... |
| Race | | | | | | | | | | | | |
| White and unknown..... | 5,126 | 18.3 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 8,073 |
| Percent with Medicare use..... | ... | ... | 26.7 | 44.1 | 47.2 | 49.0 | 51.8 | 53.3 | 55.6 | 57.1 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 12.7 | 21.1 | 21.4 | 22.1 | 22.3 | 23.0 | 23.8 | 23.6 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$68 | \$76 | \$79 | \$86 | \$88 | \$96 | \$107 | \$105 | ... | ... |
| Black..... | 941 | 19.6 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 10,759 |
| Percent with Medicare use..... | ... | ... | 20.5 | 41.8 | 46.7 | 48.9 | 50.0 | 52.9 | 56.0 | 57.5 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 9.5 | 19.3 | 16.8 | 19.1 | 20.0 | 21.0 | 21.0 | 22.0 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$85 | \$109 | \$106 | \$110 | \$110 | \$130 | \$133 | \$149 | ... | ... |
| Other..... | 84 | 31.0 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 12,361 |
| Percent with Medicare use..... | ... | ... | 20.2 | 32.1 | 34.5 | 38.1 | 38.1 | 38.1 | 44.1 | 42.9 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 10.7 | 13.1 | 15.5 | 14.3 | 15.5 | 13.1 | 19.1 | 20.2 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$79 | \$104 | \$131 | \$179 | \$119 | \$133 | \$140 | \$158 | ... | ... |
| Age | | | | | | | | | | | | |
| Under 40..... | 1,630 | 22.2 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 9,565 |
| Percent with Medicare use..... | ... | ... | 22.6 | 39.1 | 41.3 | 43.9 | 45.8 | 48.5 | 50.8 | 52.9 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 12.2 | 20.3 | 20.2 | 22.2 | 21.0 | 21.7 | 22.9 | 21.6 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$81 | \$96 | \$99 | \$118 | \$107 | \$108 | \$116 | \$107 | ... | ... |
| 40-49..... | 2,043 | 19.1 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 8,659 |
| Percent with Medicare use..... | ... | ... | 27.2 | 44.9 | 47.8 | 49.7 | 52.9 | 52.5 | 55.7 | 56.4 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 12.5 | 22.3 | 21.2 | 21.6 | 23.3 | 22.2 | 23.8 | 23.8 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$73 | \$84 | \$87 | \$91 | \$96 | \$98 | \$113 | \$115 | ... | ... |
| 50-55..... | 2,478 | 15.9 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 7,776 |
| Percent with Medicare use..... | ... | ... | 26.4 | 45.4 | 50.0 | 51.3 | 53.8 | 56.5 | 58.4 | 60.2 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 12.0 | 19.7 | 29.4 | 21.0 | 21.2 | 23.4 | 23.1 | 24.1 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$62 | \$69 | \$72 | \$74 | \$79 | \$101 | \$108 | \$113 | ... | ... |
| Diagnostic group | | | | | | | | | | | | |
| Infective and parasitic..... | 83 | 18.1 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 5,751 |
| Percent with Medicare use..... | ... | ... | 15.7 | 34.9 | 42.2 | 39.8 | 38.6 | 44.6 | 51.8 | 50.6 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 9.6 | 18.1 | 18.1 | 13.3 | 14.5 | 12.1 | 19.3 | 18.1 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$44 | \$51 | \$60 | \$40 | \$75 | \$40 | \$86 | \$104 | ... | ... |
| Neoplasms..... | 119 | 19.3 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 9,941 |
| Percent with Medicare use..... | ... | ... | 32.8 | 47.9 | 49.6 | 56.3 | 58.0 | 56.3 | 61.3 | 62.2 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 10.1 | 21.9 | 17.7 | 21.9 | 24.4 | 14.3 | 22.7 | 23.5 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$54 | \$94 | \$89 | \$123 | \$150 | \$83 | \$99 | \$153 | ... | ... |

Table 5.—Medicare utilization of disabled-worker beneficiaries who remained in the Disability Insurance program, by characteristics, 1974-81—Continued

| Characteristic | Sample size | Percent never used Medicare | Year of Medicare utilization | | | | | | | | Average total reimbursement per enrollee | |
|---|-------------|-----------------------------|------------------------------|-------|-------|-------|-------|-------|-------|-------|--|----------|
| | | | 1974 | 1975 | 1976 | 1977 | 1978 | 1979 | 1980 | 1981 | | |
| Diagnostic group—Continued | | | | | | | | | | | | |
| Endocrine and metabolic..... | 199 | 14.6 | ... | ... | ... | ... | ... | ... | ... | ... | ... | \$13,730 |
| Percent with Medicare use..... | ... | ... | 27.1 | 50.8 | 52.8 | 54.8 | 55.8 | 60.8 | 68.3 | 66.3 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 14.6 | 23.6 | 27.6 | 26.1 | 27.6 | 28.1 | 33.2 | 34.7 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$100 | \$84 | \$118 | \$171 | \$123 | \$166 | \$199 | \$232 | ... | ... |
| Mental disorders..... | 993 | 26.1 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 6,197 |
| Percent with Medicare use..... | ... | ... | 22.7 | 34.5 | 40.0 | 42.5 | 43.6 | 45.4 | 48.1 | 49.0 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 10.4 | 15.1 | 16.6 | 20.4 | 18.8 | 18.0 | 19.4 | 17.2 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$56 | \$50 | \$54 | \$64 | \$69 | \$86 | \$87 | \$79 | ... | ... |
| Nervous system..... | 326 | 19.9 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 8,578 |
| Percent with Medicare use..... | ... | ... | 23.6 | 44.8 | 43.6 | 49.4 | 50.0 | 50.6 | 51.5 | 54.0 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 9.5 | 20.3 | 18.4 | 19.4 | 20.6 | 20.9 | 20.6 | 20.6 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$46 | \$75 | \$79 | \$104 | \$104 | \$142 | \$101 | \$87 | ... | ... |
| Eye and ear..... | 162 | 23.5 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 5,795 |
| Percent with Medicare use..... | ... | ... | 22.8 | 29.0 | 38.3 | 40.1 | 46.9 | 49.4 | 48.8 | 48.2 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 10.5 | 13.6 | 18.5 | 13.0 | 18.5 | 22.8 | 13.6 | 19.8 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$35 | \$34 | \$60 | \$44 | \$77 | \$82 | \$57 | \$108 | ... | ... |
| Circulatory..... | 1,338 | 14.5 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 9,381 |
| Percent with Medicare use..... | ... | ... | 31.9 | 50.2 | 55.3 | 54.3 | 57.2 | 59.8 | 60.8 | 62.5 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 16.0 | 23.2 | 23.4 | 22.7 | 23.5 | 25.9 | 25.0 | 26.1 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$95 | \$95 | \$88 | \$99 | \$98 | \$104 | \$127 | \$124 | ... | ... |
| Respiratory..... | 233 | 16.7 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 8,751 |
| Percent with Medicare use..... | ... | ... | 24.0 | 44.6 | 51.1 | 55.4 | 58.8 | 54.1 | 58.4 | 62.7 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 9.4 | 18.9 | 23.2 | 25.8 | 23.6 | 23.2 | 26.2 | 28.8 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$48 | \$74 | \$76 | \$86 | \$90 | \$95 | \$133 | \$151 | ... | ... |
| Digestive..... | 132 | 16.7 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 9,914 |
| Percent with Medicare use..... | ... | ... | 27.3 | 47.7 | 48.5 | 47.7 | 56.1 | 49.2 | 57.6 | 60.6 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 15.9 | 26.5 | 22.7 | 22.7 | 26.5 | 20.5 | 31.8 | 34.9 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$77 | \$98 | \$122 | \$87 | \$92 | \$112 | \$150 | \$123 | ... | ... |
| Genitourinary..... | 46 | 8.7 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 60,569 |
| Percent with Medicare use..... | ... | ... | 50.0 | 56.5 | 58.7 | 69.6 | 71.7 | 71.7 | 71.7 | 71.7 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 23.9 | 39.1 | 26.1 | 34.8 | 34.8 | 30.4 | 39.1 | 34.8 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$593 | \$737 | \$700 | \$692 | \$682 | \$625 | \$625 | \$567 | ... | ... |
| Musculoskeletal..... | 1,117 | 17.2 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 7,089 |
| Percent with Medicare use..... | ... | ... | 25.6 | 43.8 | 46.5 | 47.2 | 49.8 | 52.4 | 56.0 | 56.5 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 10.9 | 21.8 | 20.5 | 20.9 | 21.4 | 22.3 | 22.8 | 22.2 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$50 | \$73 | \$77 | \$72 | \$77 | \$83 | \$92 | \$87 | ... | ... |
| Traumatic..... | 433 | 21.5 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 6,454 |
| Percent with Medicare use..... | ... | ... | 21.5 | 40.2 | 38.8 | 40.0 | 44.3 | 46.2 | 47.8 | 52.9 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 11.1 | 17.6 | 16.4 | 17.3 | 17.3 | 19.4 | 19.9 | 21.0 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$45 | \$61 | \$65 | \$77 | \$60 | \$86 | \$81 | \$82 | ... | ... |
| Other and unknown..... | 970 | 17.9 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 9,141 |
| Percent with Medicare use..... | ... | ... | 22.0 | 44.5 | 46.6 | 51.0 | 53.3 | 54.9 | 56.4 | 57.9 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 11.7 | 23.0 | 22.0 | 23.4 | 23.5 | 25.3 | 25.2 | 24.4 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$80 | \$92 | \$93 | \$98 | \$98 | \$103 | \$117 | \$121 | ... | ... |
| Education | | | | | | | | | | | | |
| None..... | 64 | 23.4 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 6,895 |
| Percent with Medicare use..... | ... | ... | 18.8 | 18.8 | 21.9 | 35.9 | 39.1 | 45.3 | 50.0 | 46.9 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 6.3 | 4.7 | 7.8 | 20.3 | 15.6 | 25.0 | 20.3 | 25.0 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$47 | \$29 | \$33 | \$75 | \$59 | \$154 | \$119 | \$89 | ... | ... |
| 1-8 years..... | 1,914 | 19.2 | ... | ... | ... | ... | ... | ... | ... | ... | ... | 7,066 |
| Percent with Medicare use..... | ... | ... | 24.6 | 41.5 | 44.7 | 46.7 | 50.0 | 51.8 | 53.0 | 55.6 | ... | ... |
| Percent with inpatient hospital stay..... | ... | ... | 11.3 | 19.1 | 19.6 | 19.7 | 22.7 | 22.0 | 23.3 | 24.1 | ... | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$56 | \$65 | \$66 | \$67 | \$73 | \$83 | \$98 | \$107 | ... | ... |

Table 5.—Medicare utilization of disabled-worker beneficiaries who remained in the Disability Insurance program, by selected characteristics, 1974-81—Continued

| Characteristic | Sample size | Percent never used Medicare | Year of Medicare utilization | | | | | | | | Average total reimbursement per enrollee |
|---|-------------|-----------------------------|------------------------------|-------|-------|-------|-------|-------|-------|-------|--|
| | | | 1974 | 1975 | 1976 | 1977 | 1978 | 1979 | 1980 | 1981 | |
| Education—Continued | | | | | | | | | | | |
| 9-12 years..... | 2,706 | 18.0 | ... | ... | ... | ... | ... | ... | ... | ... | \$9,603 |
| Percent with Medicare use..... | ... | ... | 27.7 | 45.3 | 49.3 | 49.9 | 52.6 | 53.9 | 57.1 | 58.7 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 13.5 | 21.8 | 21.5 | 22.4 | 21.4 | 22.9 | 23.6 | 22.8 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$82 | \$91 | \$97 | \$105 | \$102 | \$115 | \$125 | \$118 | ... |
| 13 years or more..... | 449 | 19.6 | ... | ... | ... | ... | ... | ... | ... | ... | 9,587 |
| Percent with Medicare use..... | ... | ... | 29.6 | 47.0 | 49.0 | 52.3 | 53.7 | 55.5 | 56.1 | 54.1 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 13.1 | 19.6 | 20.9 | 21.8 | 21.6 | 22.1 | 22.7 | 20.3 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$74 | \$87 | \$93 | \$126 | \$118 | \$124 | \$113 | \$99 | ... |
| Other and unknown..... | 1,018 | 18.7 | ... | ... | ... | ... | ... | ... | ... | ... | 8,147 |
| Percent with Medicare use..... | ... | ... | 21.0 | 42.9 | 45.7 | 49.0 | 50.4 | 52.5 | 56.0 | 57.2 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 10.6 | 22.3 | 20.6 | 22.5 | 21.9 | 22.7 | 23.0 | 24.5 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$70 | \$86 | \$82 | \$88 | \$90 | \$88 | \$100 | \$114 | ... |
| Occupation | | | | | | | | | | | |
| Professional, technical, managerial..... | 491 | 17.5 | ... | ... | ... | ... | ... | ... | ... | ... | 9,373 |
| Percent with Medicare use..... | ... | ... | 32.4 | 50.1 | 50.5 | 52.3 | 56.4 | 56.6 | 57.8 | 58.3 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 13.2 | 24.2 | 22.2 | 23.8 | 25.1 | 23.4 | 20.8 | 22.0 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$71 | \$92 | \$73 | \$101 | \$117 | \$140 | \$111 | \$97 | ... |
| Clerical, sales..... | 761 | 16.7 | ... | ... | ... | ... | ... | ... | ... | ... | 10,174 |
| Percent with Medicare use..... | ... | ... | 30.4 | 50.6 | 54.4 | 53.8 | 56.0 | 56.8 | 59.8 | 59.9 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 13.1 | 22.3 | 24.2 | 21.6 | 20.8 | 24.8 | 24.3 | 23.3 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$86 | \$110 | \$117 | \$110 | \$114 | \$118 | \$114 | \$122 | ... |
| Service..... | 896 | 16.2 | ... | ... | ... | ... | ... | ... | ... | ... | 9,437 |
| Percent with Medicare use..... | ... | ... | 30.0 | 45.7 | 51.6 | 52.9 | 53.7 | 56.6 | 59.9 | 63.3 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 15.1 | 22.3 | 23.0 | 22.8 | 23.4 | 23.9 | 25.1 | 26.5 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$84 | \$79 | \$91 | \$99 | \$93 | \$113 | \$125 | \$139 | ... |
| Farming, fishing, forestry..... | 207 | 29.0 | ... | ... | ... | ... | ... | ... | ... | ... | 8,589 |
| Percent with Medicare use..... | ... | ... | 21.7 | 34.8 | 34.8 | 39.6 | 46.9 | 39.0 | 46.9 | 48.8 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 11.1 | 14.5 | 15.0 | 16.9 | 18.8 | 18.4 | 22.7 | 19.8 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$61 | \$73 | \$81 | \$93 | \$99 | \$104 | \$143 | \$87 | ... |
| Processing..... | 175 | 18.3 | ... | ... | ... | ... | ... | ... | ... | ... | 8,215 |
| Percent with Medicare use..... | ... | ... | 24.0 | 40.6 | 40.0 | 43.4 | 46.9 | 50.3 | 57.1 | 58.9 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 10.3 | 20.6 | 19.4 | 24.0 | 26.3 | 22.3 | 27.4 | 29.7 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$53 | \$50 | \$61 | \$88 | \$87 | \$88 | \$142 | \$145 | ... |
| Machine trades..... | 505 | 17.8 | ... | ... | ... | ... | ... | ... | ... | ... | 7,042 |
| Percent with Medicare use..... | ... | ... | 25.4 | 42.4 | 43.0 | 47.1 | 50.7 | 51.3 | 55.3 | 55.8 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 11.5 | 17.0 | 17.6 | 20.4 | 19.8 | 19.6 | 21.6 | 23.2 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$69 | \$70 | \$74 | \$75 | \$70 | \$74 | \$94 | \$93 | ... |
| Benchwork..... | 466 | 18.0 | ... | ... | ... | ... | ... | ... | ... | ... | 8,014 |
| Percent with Medicare use..... | ... | ... | 24.7 | 41.9 | 48.5 | 51.3 | 53.4 | 57.3 | 58.2 | 59.4 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 10.7 | 20.8 | 21.7 | 22.1 | 23.4 | 23.0 | 26.0 | 23.6 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$41 | \$70 | \$77 | \$83 | \$88 | \$84 | \$111 | \$126 | ... |
| Structural work..... | 612 | 20.4 | ... | ... | ... | ... | ... | ... | ... | ... | 7,335 |
| Percent with Medicare use..... | ... | ... | 20.8 | 40.0 | 41.3 | 42.0 | 46.7 | 47.9 | 49.2 | 50.5 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 11.3 | 19.8 | 18.0 | 17.7 | 20.8 | 19.4 | 23.5 | 20.6 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$53 | \$66 | \$72 | \$58 | \$89 | \$79 | \$116 | \$96 | ... |
| Miscellaneous..... | 893 | 20.0 | ... | ... | ... | ... | ... | ... | ... | ... | 7,663 |
| Percent with Medicare use..... | ... | ... | 23.2 | 38.6 | 44.8 | 44.3 | 48.0 | 49.7 | 51.4 | 53.5 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 11.5 | 17.9 | 18.7 | 19.2 | 20.8 | 22.5 | 20.6 | 22.6 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$65 | \$68 | \$75 | \$81 | \$78 | \$98 | \$96 | \$104 | ... |
| Unknown..... | 1,145 | 19.1 | ... | ... | ... | ... | ... | ... | ... | ... | 8,655 |
| Percent with Medicare use..... | ... | ... | 22.4 | 43.8 | 46.0 | 50.0 | 50.0 | 53.5 | 55.1 | 56.5 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 11.4 | 22.4 | 20.7 | 24.1 | 21.4 | 23.2 | 23.3 | 23.1 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$82 | \$93 | \$85 | \$103 | \$87 | \$102 | \$108 | \$109 | ... |

Table 5.—Medicare utilization of disabled-worker beneficiaries who remained in the Disability Insurance program, by selected characteristics, 1974-81—Continued

| Characteristic | Sample size | Percent never used Medicare | Year of Medicare utilization | | | | | | | | Average total reimbursement per enrollee |
|---|-------------|-----------------------------|------------------------------|------|------|------|-------|-------|-------|-------|--|
| | | | 1974 | 1975 | 1976 | 1977 | 1978 | 1979 | 1980 | 1981 | |
| Primary insurance amount, 1985 | | | | | | | | | | | |
| Less than \$300..... | 1,073 | 18.3 | ... | ... | ... | ... | ... | ... | ... | ... | \$9,078 |
| Percent with Medicare use..... | ... | ... | 24.5 | 42.4 | 48.9 | 52.6 | 55.4 | 55.8 | 59.7 | 62.6 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 13.6 | 21.7 | 22.8 | 25.1 | 24.1 | 25.1 | 25.2 | 27.0 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$66 | \$94 | \$86 | \$99 | \$93 | \$97 | \$114 | \$133 | ... |
| \$300-\$399..... | 1,522 | 18.0 | ... | ... | ... | ... | ... | ... | ... | ... | 9,094 |
| Percent with Medicare use..... | ... | ... | 28.2 | 46.4 | 50.9 | 51.6 | 52.9 | 54.8 | 58.2 | 58.4 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 13.2 | 23.0 | 22.6 | 22.9 | 23.5 | 22.5 | 24.4 | 23.3 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$87 | \$89 | \$95 | \$98 | \$101 | \$103 | \$118 | \$112 | ... |
| \$400-\$499..... | 1,271 | 20.4 | ... | ... | ... | ... | ... | ... | ... | ... | 8,611 |
| Percent with Medicare use..... | ... | ... | 25.3 | 42.0 | 43.9 | 46.7 | 51.5 | 51.0 | 52.6 | 55.4 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 12.4 | 19.4 | 19.6 | 20.6 | 22.1 | 21.9 | 23.1 | 22.8 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$65 | \$77 | \$80 | \$84 | \$96 | \$105 | \$121 | \$115 | ... |
| \$500-\$599..... | 1,517 | 18.7 | ... | ... | ... | ... | ... | ... | ... | ... | 7,699 |
| Percent with Medicare use..... | ... | ... | 24.7 | 43.0 | 45.0 | 45.7 | 47.2 | 51.7 | 53.3 | 53.7 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 10.7 | 19.2 | 18.6 | 19.7 | 19.6 | 22.3 | 21.8 | 22.3 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$59 | \$69 | \$76 | \$84 | \$82 | \$101 | \$100 | \$98 | ... |
| \$600 or more..... | 768 | 17.4 | ... | ... | ... | ... | ... | ... | ... | ... | 8,256 |
| Percent with Medicare use..... | ... | ... | 24.9 | 43.5 | 45.3 | 47.7 | 50.7 | 51.6 | 53.5 | 55.6 | ... |
| Percent with inpatient hospital stay..... | ... | ... | 11.1 | 20.1 | 19.3 | 18.8 | 19.1 | 20.6 | 21.7 | 21.0 | ... |
| Average reimbursement per month per enrollee..... | ... | ... | \$79 | \$80 | \$82 | \$94 | \$85 | \$101 | \$104 | \$106 | ... |