STATEWIDE SURVEY OF OLDER PENNSYLVANIANS – 2003:

A Profile of Senior's Prescription Drug Coverage

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EXECUTIVE SUMMARY

In the summer of 2003, the PACE/PACENET Program within the Pennsylvania Department of Aging contracted with Penn State Harrisburg's Center for Survey Research to conduct a statewide survey of older Pennsylvanians. The study measured the extent and nature of both general health care and prescription drug coverage for this particular population, and it explored differences within certain socio-economic and demographic groups related to coverage. The data yielded initial answers to questions about health care coverage, current levels of prescription coverage, and utilization of prescription drugs for residents age 65 and over.

Prescription Drug Coverage

- 25% of survey respondents said that they have no health insurance plan or special government program that helps to pay for medicines prescribed by a doctor.

- 16% of the sample reported being covered for prescription drugs under the PACE/PACENET, Medical Assistance, or other public prescription drug program.

- For those individuals who reported having no prescription drug coverage, 36% said that they regularly get samples of prescription drugs from their doctor.

- 9% of citizens reported enrollment in a non-insurance, discount drug program.

- Seniors residing in Allegheny County and in the Southwest region were <u>more</u> likely to report having coverage.

- People in the Northeast and South Central regions of the state were <u>less</u> likely to report having prescription drug coverage.

- 36% of seniors reported having no prescription drug coverage under their health insurance plans.

- 27% of the sample reported being veterans, with only 25% of the veterans obtaining prescription drugs through the VA.

Utilization of Prescription Drugs

- The number of prescriptions used by Pennsylvania's 65 and over population in the previous month ranged from zero to 20, with an average of 4.13 prescriptions.

- Respondents without drug coverage through their health insurance plan reported using an average of 3.82 prescriptions in the last month while respondents with drug coverage through their health insurance averaged 4.36 per month.

- 28% of seniors reported out-of-pocket prescription drug costs of $100 or more in the previous month.

- 84% of seniors report having a copay for their drugs, with 44% of seniors indicating a tiered copay.

- For tiered copays, the average co-pay for brand drugs was about $25.00, the average for generic drugs was approximately $16.00, and the average for non-preferred was $57.00.

- 37% of seniors with deductibles (23% of the sample) reported a deductible of up to $200, 31% in the $200 to $250 range, and 32% in the $250 or higher range.

- Generalizing the findings from the Statewide – 2003 study, it can be estimated that approximately 364,641 (19%) seniors in Pennsylvania failed to get a prescription filled at least once in the year prior to the survey because they could not afford it.

Health Insurance

- 98% of Pennsylvania's seniors with general health insurance coverage are covered through Medicare with 22% in a Medicare HMO.

- 42% of seniors said that their health insurance coverage is employer sponsored.

- Two-thirds (66%) of respondents who have employer-sponsored health insurance said that they contribute toward the cost of their health insurance coverage.

- 82% of Pennsylvania's 65 and over population who are enrolled in regular Medicare reported having additional healthcare coverage to assist them with out-of-pocket costs.

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INTRODUCTION

The Pharmaceutical Assistance Contract for the Elderly, known as the PACE/PACENET Program (hereinafter referred to as the Program), provides limited prescription coverage for qualified older Pennsylvanians of low to moderate income. The ability to assess the prescription coverage of older Pennsylvanians is critical to program planning and forecasting. A review of the literature on prescription drug costs and coverage for Medicare beneficiaries provided limited forecasting utility to the Program. This lack of utility is because much of the data analyses found in the literature is several years old. Further, the prescription drug costs and coverage studies that exist are not specific to Pennsylvania.

In order to examine more closely the needs of Pennsylvania's sixty-five and older population with regard to health insurance coverage in general, and more specifically, prescription drug coverage, the Program contracted with Penn State Harrisburg's Center for Survey Research (CSR) to conduct a statewide survey of older Pennsylvanians. That study was conducted in 2001, and it provided the Program with a critical baseline measure of the extent and nature of both health and prescription drug coverage for this particular population.

In 2003, the Program was in need of a follow up study to explore the current needs of Pennsylvania's seniors along the same dimensions as those examined in the 2001 study. CSR utilized the same methodology as that employed for the 2001 study, namely, a statewide, telephone survey of Pennsylvanians, age 65 and older, using random-digit dialing and a Computer-Assisted Telephone Interviewing System. A total of 1,481 interviews were completed during the summer of 2003 with a response rate of 29%, and a sampling error of 2.5% at the 95% confidence level. The questionnaire consisted of approximately 50 questions, and the average length of time to complete each interview was about 20 minutes. The survey instrument used in the Statewide – 2003 Study is found in the Technical Compendium for the Study.

PROFILE OF RESPONDENTS

As reported in Table 1 (see Appendix A), 36% of respondents were male and 64% were female, with an overwhelming number of respondents reporting their race/ethnicity as "white" (96%).[1] Thirty-three percent of respondents said that they were in the 65-70 age category, 26% in the 71-75 category, and 23% reported being in the 76 to 80 age category. Eighteen percent of respondents reported being 80 years of age or older.

[1] Because of the discrepancy between the sample statistic and population parameter on the variable gender, the data were weighted to adjust the percentages in the direction of U.S. Census data. The 2000 Census data indicate that 52% of Pennsylvania's 65 and over population are females and that 48% are males.

Almost half (45%) of the sample reported having a high school education as the highest grade of school completed, with 20% saying that they had either a college education or had completed some post-graduate work. Over half (54%) reported being married, and over half (56%) of the married population said that their annual household income was less than $30,000. A clear majority of the single, 65 and older population (83%) reported their annual income at $30,000 or less.[2]

Fifty-two percent of respondents reported living in a two-member household, 38% in a single-member household, and only 10% said that they live in a household with three or more members. Well over a majority (80%) of respondents reported being "retired, not working," with only 11% reporting that they were retired, but still employed.

In order to examine differences by region of the state, the data were collapsed into eight different regions: Northwest, North Central, Northeast, Southwest, South Central, Southeast, Allegheny County, and Philadelphia County. The highest percentages of the sample reported residing in the Southeast (24%), South Central (16%), and Southwest (14%) sections of Pennsylvania. Eleven percent of respondents reside in the Northeast section of the state, and 13% reside in Allegheny County. The remainder of respondents reported residing in the Northwest region (10%), the North Central region (5%), and in Philadelphia County (6%). A map illustrating the counties associated with the various regions can be found in Appendix B.

[2] Based on 2000 Census data, the education level of the respondents to the PACE survey is somewhat higher than the general population of 65 and older Pennsylvanians. There is also evidence that the respondents to the survey are slightly better off financially than the general population, although an exact comparison of the sample statistics with the Census data is tenuous at best given differences in the measures used for both sources. This finding is not uncommon in survey research as much of the literature suggests that willingness to participate in a survey increases slightly with higher education and income levels.

PRESCRIPTION COVERAGE AND DRUG USE

This section of this report describes the extent and nature of prescription drug use and coverage among Pennsylvania's senior citizen population. Table 2 examines the differences in prescription drug coverage *from any source* by eight key regions of the Commonwealth. As shown in Table 2, there are statistically significant differences by region. Overall, 25% of residents reported not being covered for prescription drug coverage. Both the Northeast and the South Central regions of Pennsylvania appear to have the highest reported percentages for no prescription drug coverage at 33% and 32%, respectively, and the highest percentages for coverage are found in Allegheny County (84%) and in the Southwest region (80%).

Table 2: Prescription Drug Coverage by Region
(N = 1457)*

REGION	Percentages reported	
	Yes	No
All Regions	**75**	**25**
Northwest	75	25
North Central	69	31
Northeast	67	33
Southwest	80	20
South Central	68	32
Southeast	76	24
Allegheny	84	16
Philadelphia	73	27

*Differences significant at $\leq$ .05.

It is important to point out that if the 25% figure from the sample, that is, the percentage of citizens who reported having no assistance with prescription drug costs, is extrapolated beyond the sample and applied to Pennsylvania's 65 and over population in general (1,919,165 individuals), the number of seniors in Pennsylvania without prescription drug coverage would be estimated to be approximately 479,791.

A question asked citizens how many different prescription drugs did they personally use in the last month. As shown in Table 3, 11% of Pennsylvania's seniors reported using "zero" prescription drugs in the past month, with 27% saying that they used six or more prescription drugs in the month prior to the interview. The number of prescriptions filled ranged from zero to 20, with an average of 4.13.

Table 3: Extent of Prescription Drug Usage by Pennsylvania's Seniors

Question: How many different prescription medications or drugs did you personally use in the last month?

	Number	Percent
Zero	152	11
1	166	11
2	213	15
3	208	14
4	168	11
5	162	11
6 or more	402	27
Total	1471	100%

Overall mean/average of prescription drugs filled each month = 4.13

	Mean/average
For respondents with coverage through their general health insurance plan	4.36*
For respondents without coverage through their general health insurance plan	3.82
For respondents who are enrolled in PACE	4.73
…Chronic Renal Disease program	6.67
…Special Pharmaceutical Benefits program	4.18
…Other public assistance program	4.73
For respondents covered under the VA	5.20
For respondents covered through any source	**4.70***
For respondents not covered through any source	**3.82**

*Denotes significance at the .000 level.

There are some differences for number of prescriptions filled found by type of coverage. The average number of prescription drugs filled each month by seniors who are covered through their general health insurance plans (4.36) is slightly higher than the average for seniors who are not covered through their general health insurance plans (3.82), a

difference that reaches the level of statistical significance. For respondents who are enrolled in the PACE/PACENET Program the average number of prescription drugs filled each month is 4.73; 6.67 for those enrolled in the Chronic Renal Disease Program; 4.18 for those in the Special Pharmaceutical Benefits Program; and, 4.73 for those who report being enrolled in some "other" public assistance program. The data in Table 3 reveal a much higher average for monthly drug prescription use for those who reported getting their prescription drugs through the VA (5.20).

When comparing means for all groups, that is to say, between groups who have no prescription drug coverage from any source, and those who reported coverage through any of the sources listed in Table 3, statistically significant differences were found. The average for respondents covered through any source is 4.70, and the average for respondents not covered through any source is 3.82.

When asked, "In what kind of supply do you get these medications," 40% reported "all in a one-month supply" with 10% saying "most in a one-month supply." Thirteen percent said that they get "most of their medications in a three-month supply," and 29% said they get "all of their prescription drugs in a three-month supply."

TYPE OF PRESCRIPTION DRUG ASSISTANCE ACCESSED BY PENNSYLVANIA'S SENIOR POPULATION

A series of questions in the Statewide - 2003 Study asked seniors to report information about their actual prescription drug assistance and/or insurance program. The findings from those questions are included in Tables 4 and 5. Looking first at Table 4, 75% of Pennsylvania's seniors reported being covered for prescription drug coverage "from any" source, with fewer (64%) saying they are covered under their health insurance program.[3] When examining for differences within these basic subgroups of the sample, and again as shown in Table 4, it is interesting to note a higher percentage of males than females reported that they had prescription drug coverage. Those in the lower age bracket (65-70) were more likely to report having coverage under their health insurance program (69%) than were their older counterparts. As education increases, so too does the likelihood of being covered for prescription drugs, and married individuals reported being covered for prescription drugs under their health insurance programs at a higher rate than did single individuals. As might be expected, individuals in the higher income brackets were more likely to say that they have prescription drug coverage.

[3] The category "any source" includes individuals covered under any type of government program as well as those who reported being covered under their health insurance program.

Table 4: Prescription Drug Coverage by Socio-Demographic Groups
(Percentages Reported)

	Respondents' prescription drug coverage through….			
	Any source?		**Health insurance?**	
	Yes	**No**	**Yes**	**No**
Total	**75**	**25**	**64**	**36**
Gender				
Male	79*	21	67*	33
Female	72	28	63	37
Age				
65-70	77	23	69*	31
71-75	76	24	67	33
76-80	73	27	60	40
Over 80	71	29	57	43
Race/ethnicity				
White	74	26	64	36
Other	84	16	70	30
Education				
Less than high school	68*	32	51*	49
High school graduate	76	24	66	34
Some college/two-year technical degree	71	29	63	37
College graduate	74	26	66	34
Post-graduate work	86	14	80	20
Income – Married				
Under $12,000	69*	31	33*	67
$12,001-$20,000	70	30	57	43
$20,001-$25,000	66	34	57	43
$25,001-$30,000	73	27	71	29
$30,001-$40,000	79	21	78	22
$40,001-$50,000	75	25	74	26
$50,001-$60,000	91	9	89	11
$60,001-75,000	84	16	81	19
Over $75,000	89	11	86	14
Income - Single				
Under $9,000	78	22	44*	56
$9,001-$15,000	74	25	48	52
$15,001-20,000	65	35	56	44
$20,001-$25,000	71	29	62	38
$25,001-$30,000	81	19	78	22
$30,001-$40,000	79	21	73	27
$40,001-$50,000	90	10	90	10
$50,001-$60,000	92	8	92	8
$60,001-75,000	86	14	86	14
Over $75,000	70	30	71	29

Table 4: continued

	Any source?		Health insurance?	
	Yes	**No**	**Yes**	**No**
Marital status				
Married	75	25	69*	31
Divorced	70	30	53	47
Widowed	74	26	60	40
Married/living separately	100	-	78	22
Never married	73	27	53	47
Number of prescription drugs used in the last month				
None	61*	39	57*	43
One	65	35	56	44
Two	72	28	65	35
Three	71	29	62	38
Four	75	25	62	38
Five	79	21	67	33
Six or more	85	15	71	29
Region				
Northwest	75*	25	61*	39
North Central	69	31	53	47
Northeast	67	33	55	45
Southwest	80	20	73	27
South Central	68	32	55	45
Southeast	76	24	66	34
Allegheny	84	16	80	20
Philadelphia	73	27	63	37

* Denotes statistically significant differences within categories at the .05 level or better. Numbers may not total to 100% due to rounding and/or missing data.

Of interest also is the fact that there appears to be statistically significant differences within the category of "number of prescriptions used in the month prior to the survey." Those who report being covered, either in the "combined" category or just examining the "through health insurance" category on its own, also report a higher number of prescriptions used.

Finally, Table 4 indicates differences by region, with a higher percentage of individuals reporting coverage for their prescription drugs residing in the Southwest region of the Commonwealth, and within the Pittsburgh area (Allegheny county).

Table 5 is yet another way of looking at prescription drug coverage among Pennsylvania's seniors, and duplicates some previously reported information. Sixteen percent reported getting prescription drugs from PACE/PACENET or some other type of public assistance program, and only nine percent reported receiving assistance with their prescription drug expenses from some non-insurance, drug discount plan.

Table 5: Type of Prescription Drug Assistance Used by Pennsylvania's Senior Population

Do you receive any type of assistance with your prescription drug costs from any of the following sources…..

	Yes		No	
	Number	**Percent**	**Number**	**Percent**
Under your health insurance plan?	928	64	517	36
PACE/PACENET or some other public program?	234	16	1247	84
A non-insurance, drug discount plan?	130	9	1333	91

Of the 376 respondents who reported that they do not have any type of prescription drug coverage:

	Yes		No	
	Number	**Percent**	**Number**	**Percent**
Regularly get samples from your doctor?	137	36	239	64
Other sources (family, friends, etc.)	9	2	367	98

To make sure that the evidence was clear as to those who do not have any type of drug coverage, a follow up question asked respondents to indicate again whether they did indeed have that particular type of coverage or assistance. Of the 376 respondents who responded "no" to that follow up question, as shown in Table 5, 36% said that they get assistance with obtaining their prescription drugs through getting samples from their doctor on a regular basis. Another 2% (only nine individuals) said that they get assistance from some other source.

The Extent and Nature of Rx Coverage Through the Department of Veteran's Affairs

A series of questions were asked addressing the issue of prescription drug coverage for veterans or spouses of veterans. As shown in Table 6, 27% of respondents reported being a veteran, and 57% reported being the spouse of a veteran. Thirty-six percent of veterans said that they are currently registered to receive health care of health services at a VA facility. Only 3% of veteran's spouses reported that they were registered through the VA to receive such services. Only 98 veterans, and 6 spouses of veterans, said that they get their prescription drugs through the VA. In order to receive assistance with prescription drugs, veterans must be registered with the VA.

Table 6: The Extent and Nature of Veteran's and Their Spouses Rx Coverage Through the Department of Veteran's Affairs or a VA Facility

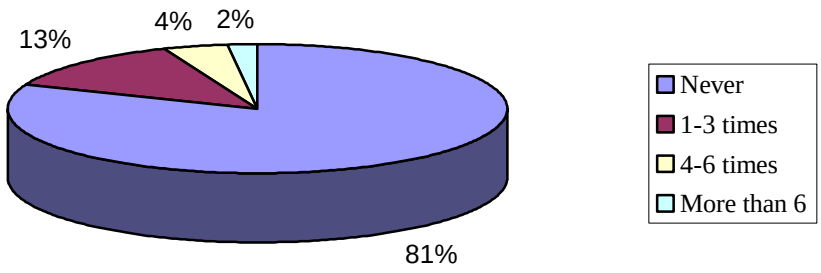
	Yes		No	
Question	**Number**	**Percent**	**Number**	**Percent**
Are you a veteran?	**392**	**27**	**1089**	**73**
Are you currently registered to receive health care or health services at a VA facility?	141	36	249	64
Do you get your prescriptions through the VA?	98	70	43	30
Are you a veteran's spouse?	**621**	**57**	**468**	**43**
Are you currently registered to receive health care or health services at a VA facility?	18	3	591	97
Do you get your prescriptions through the VA?	6	33	12	67

FAILURE TO FILL PRESCRIPTIONS DUE TO COST

To examine the issue of failure to get a prescription filled because of costs, a question asked seniors to tell us the "number of times in the last year you failed to fill a prescription due to costs." As shown in Figure 1, 13% of respondents reported one to three times, 4% reported four to six times, and 2% reported more than six times.

Generalizing the findings from the Statewide-2003 Study to the general population, it could be estimated that about 364,641 Pennsylvanians aged 65 or over failed to get a prescription filled in the year prior to the survey at least once. [4]

Figure 1: Number of Times in the Last Year Failed to Fill a Prescription Due to Costs



USE OF FOREIGN PHARMACY SERVICES

A set of questions asked respondents about whether, in the year prior to the survey, they had purchased prescription drugs from providers outside the United States. Only 49 individuals (3% of the sample) responded "yes" to that question, with 43 of those respondents (88%) saying that they had purchased prescription drugs from Canada. The remaining countries mentioned were Mexico (two respondents), Africa (one respondent), and Japan (one respondent), Britain (one respondent), and one county not named by the respondent. Whereas 97% of those respondents who reported purchasing prescription drugs from Canada said they did so to "save money," only 50% of those who purchased their drugs from Mexico did so. All of the remaining individuals who reported purchasing their prescription drugs outside the U.S. said they did so to "save money."

[4] Calculated as 19% of 1,919,165 (2000 Census data estimate of the 65 and over Pennsylvania population).

COPAYS AND DEDUCTIBLES RELATED TO PRESCRIPTION DRUG COSTS

A series of questions asked respondents about copays and deductibles for prescription drugs. Copays were defined as "having to pay a certain amount of money out-of-pocket each time a prescription is filled." Deductible was defined as "having to pay up to a certain amount on your own before your prescription coverage benefits begin." Several "copay" questions examined in depth the nature of copays. Responses to the copayment questions demonstrate the uncertainty about copay amounts among seniors with an increasing rate of respondents indicating either "don't know" or "not sure" as the questions became more specific during this module of the survey. Table 7 delineates the responses given to the copay series.

Table 7: Copays Related to Prescription Drug Costs

	Percent reporting		
	Yes	**No**	**Don't know/ Not sure**
For seniors with Rx coverage, Do you have a copay?	84	13	3
For seniors with copays, Do you have different copays for different drugs?	44	48	8

	Percent reporting		
	$-based	**%-based**	**Don't know/ Not sure**
For seniors with the same copay for all drugs, Is the copay dollar amount-based or percentage-based?	61	23	15

Table 7: Continued

	Percent reporting		
	Yes	**No**	**Don't know/ Not sure**
For seniors with different copays for different drugs,			
Do you have a brand copay?	89	6	4
Do you have a generic copay?	90	4	6
Do you have a copay for drugs not on a preferred drug list?	22	41	37

For seniors with the different copays for different drugs, Is the copay dollar amount-based or percentage-based for . . .	Percent reporting **$-based**	**%-based**	**Don't know/ Not sure**
Brand drugs?	63	16	21
Generic drugs?	67	14	19
Drugs not on a preferred list?	64	13	23

	Average amounts **$-based**	**%-based**
Average copays for seniors with one copay for all drugs,	$19.57	40%
Average copays for seniors with different copays for different drugs,		
Brand	$25.00	35%
Generic	$16.39	33%
Drug not on preferred list	$57.00	36%

Overall, 84% of seniors reported having a copay for prescription drugs. For those with tiered copays, about one in five (22%) of respondents said that they have a third co-pay for drugs that are not on the preferred drug list of their insurer. Related to brand drugs, almost two-thirds (63%) of seniors with different copays reported that their co-pays were based on a dollar amount, with an average co-pay being about $25.00. For those who said that their copay for brand drugs is based on a percentage amount, the average copay is 35% of the cost of the drug. Also shown in Table 7, for those seniors who said that they have only one copay for all prescription drugs, the average dollar amount is $19.57, and when the copay is based on a percentage, the average is 40%.

Overwhelmingly, those respondents who reported having a tiered copay for generic drugs reported those expenses as based on a dollar amount (67%), with a mean of $16.39. The average percentage amount equals 33 for those seniors who reported having a copay for generic drugs based on a certain percentage of their drug costs. Similarly, 64% of seniors who reported a copay for non-preferred drugs said that their copay is based on a dollar amount, with an average of $57.00. For those who said that their copay is based on a percentage amount, that average is 36%.

Twenty-three percent of Pennsylvania's seniors reported having a deductible for prescription drug coverage, and overwhelmingly (87%), they report having to meet that deductible annually. The range for the question, "What is the amount of your deductible," is "$50 or less" to $500 or above. Thirty-seven percent of seniors reported a deductible of up to $200, 31% in the $201 - $250 range, and the remaining 32% reported their deductible as $251 or higher.

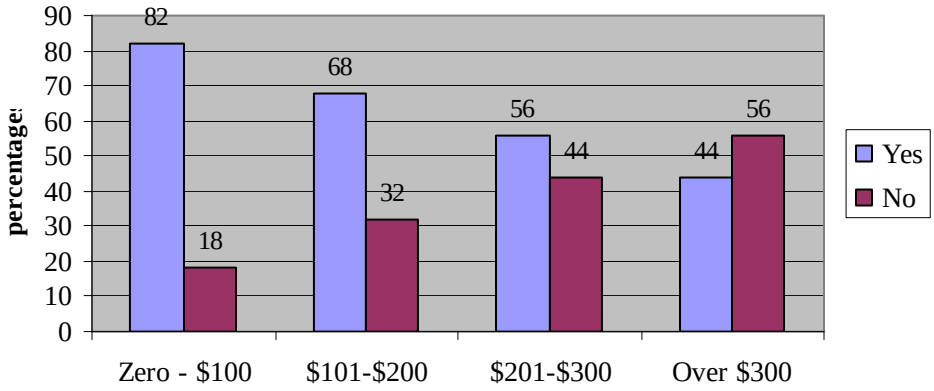
OUT-OF-POCKET COSTS

When asked about out-of-pocket drug expenses, approximately 5% of seniors said that they had no such expense in the month prior to the survey. Sixty-seven percent of seniors said that they had paid up to $100 in the last month for their prescription drugs out of their own pockets. Seventeen percent reported having out-of-pocket expenses at $101 to $200, 7% at $201 to $300, and only 4% reported spending over $300 of their own money for prescription drugs.

A follow up question asked respondents to tell us whether the amount of money they had paid out of their own pockets for prescription drugs in the last month represented a "typical" or "not a typical" picture of their expenses. Eighty-eight percent of respondents described the prior month's drug expenses as "typical," and 12% as "not typical." Almost 59% of respondents indicating "not typical" said the money they had spent out of pocket on prescription drugs in the "last month" was either "much" or "somewhat" higher than usual.

As shown in Figure 2 below, there are statistically significant differences by total amount of out-of-pocket expenses seniors report for prescription drugs and whether they report having prescription coverage. Those respondents who say that they paid less than $300 total out-of-pocket expenses for prescription drugs in the month prior to the survey were more likely to say that they were covered for their drugs then were those who reported paying over $300 for out-of-pocket expenses.

Figure 2: Rx Coverage by Out-of-Pocket Expenses for the Previous Month*



*Differences significant at ≤ .05.

QUALITY OF LIFE ISSUES FOR PENNSYLVANIA'S ELDERLY POPULATION

A series of questions were included in the Statewide-2003 Study to examine the overall physical and mental health of Pennsylvania's 65 and over population. Those questions are listed in Table 8 below. Citizens were asked to describe their health along three dimensions, with responses of "excellent," "very good," "good," "fair," and "poor."

An additional question related to "quality of life" for Pennsylvania's seniors asked, "During the past four weeks, how much did pain interfere with your normal activities?" About 40% of respondents said, "not at all," 25% reported "a little bit," 19% "moderately," and 16% of seniors said that pain interfered with their normal activities "quite a bit" or "extremely."

Table 8: Quality of Life Issues for Pennsylvania's 65 and Older Population

Question: Please tell us how you would describe your general physical, your mental and emotional health, and your ability to think clearly and remember things.

	Percentages reported		
	Excellent/very good	**Good**	**Fair/Poor**
Your general physical health?	40	34	25
Your mental and emotional health?	64	29	7
Your ability to think clearly and remember things?	53	37	11

Reported below are findings of differences on questions of physical and mental health by type of prescription drug coverage (see Table 9 below). The only statistically significant differences within groups were found for the following:

- Those respondents who reported being covered through PACE/PACENET were more likely to report their general physical health as "fair or poor" (38%).

- When it comes to mental and emotional health, 13% of PACE/PACENET enrollees reported their status as "fair/poor."

- On the "ability to think clearly and remember things" question, 9% of respondents who reported being covered for prescription drug coverage through their general health insurance reported their status as "fair/poor"; 16% of PACE/PACENET enrollees did so; and, 14% of veterans did so.

Table 9. Respondents' Assessment of Their Physical and Mental Health by Type of Prescription Drug Coverage

	Percent responding "yes"		
	Excellent/very good	**Good**	**Fair/poor**
General physical health….			
Under general health insurance plan?	42	35	24
Through PACE?*	25	37	38
Through Veterans Affairs?	35	38	27
Through any source?	39	35	25
Mental and emotional health…			
Under general health insurance plan?	66	27	7
Through PACE?*	55	32	13
Through Veterans Affairs?	55	38	6
Through any source?	64	29	8
Your ability to think clearly and remember things?			
Under general health insurance plan?*	55	35	9
Through PACE?*	37	47	16
Through Veterans Affairs?*	42	44	14
Through any source?	53	38	10

*Differences significant at $\leq$ .05.

Just examining the "fair/poor" category in Table 9, it does appear that there are some substantive differences based on type of coverage for these three physical and mental health questions. It appears that PACE/PACENET enrollees are more likely to report a problem with their physical and/or mental health than are respondents covered for prescription drugs through some other source.

SENIORS' FAMILIARITY WITH PACE/PACENET AND REASONS FOR NOT BEING ENROLLED IN THE PROGRAM

About 16% of respondents said that they have not heard or read about the Pennsylvania PACE/PACENET Program. Respondents who knew about the Program and who were not enrolled were asked about reasons for not enrolling. Reasons for not enrolling in the Program included:

- I know that I am over the income limit (82%);
- I have other insurance and don't need the program (37%);
- I like my independence and don't want handouts (19%);
- I don't know how to apply (12%);
- Co-payments or deductibles are too high so there are no savings for me (7%);
- It's too much of a bother to enroll (5%);
- I cannot get to a place to apply and cannot get an application (3%); and,
- I forgot or didn't get around to enrolling (3%).

SENIORS' PERCEPTIONS OF FEDERAL PROPOSALS RELATED TO PRESCRIPTION DRUG COVERAGE

Two questions were included in the present study to examine the extent to which Pennsylvania's seniors were familiar with various prescription drug-related proposals that were being discussed by the U.S. Congress during the time the survey was underway. As shown in Table 10, about half (50%) of respondents said that they were either "not too familiar" or "not at all familiar" with the various proposals that were being discussed. Further, 25% of seniors said that based on the information they had at the time about such proposals, they thought that should they become law, the new policy would not be "too helpful" for them, with another 23% saying that they thought any new policy about which they had heard would be "not at all helpful" for them.

Table 10: Seniors Report Familiarity with Proposals Being Discussed in Washington Related to Prescription Drug Coverage

Question: Are you familiar with the various proposals being discussed in Washington that would help seniors pay for prescription drugs? Would you say that you are ….

	Number	Percentage
Very familiar	134	9
Somewhat familiar	599	41
Not too familiar	435	30
Not at all familiar	284	20

*Question: Based on what you know about these proposals, if one of them becomes law, do you think it will be:**

Very helpful	137	14
Somewhat helpful	360	38
Not too helpful	237	25
Not at all helpful	224	23

Based on responses of those individuals who said that they were either "somewhat", "not too", or "very" familiar with the proposals being discussed in Washington during the time that the survey was in the field.

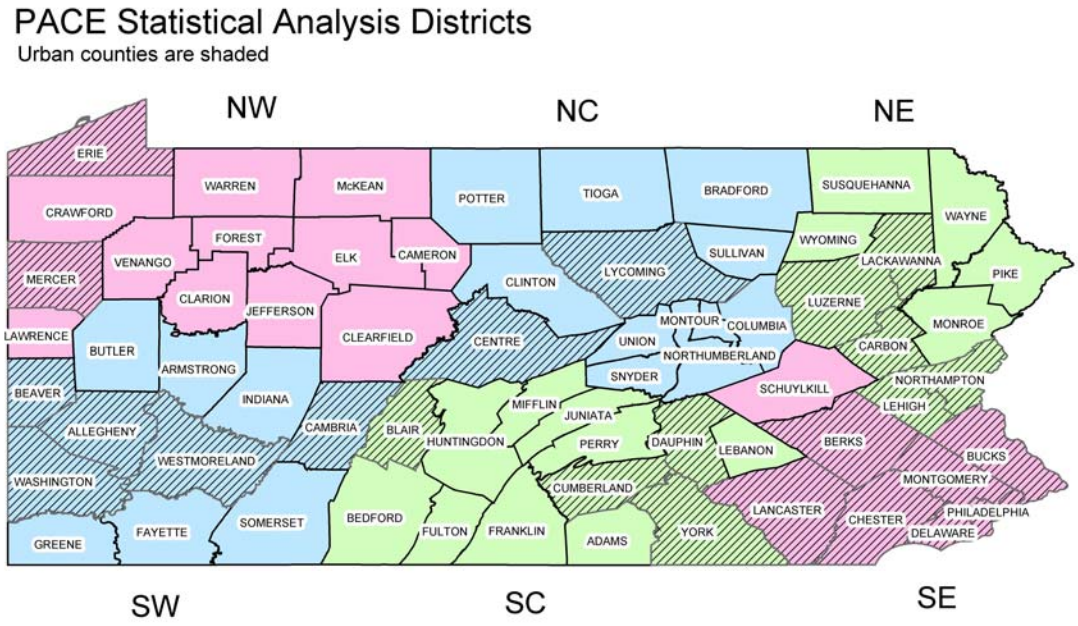
APPENDIX A - TABLE 1: PROFILE OF RESPONDENTS TO THE STATEWIDE – 2003 STUDY (N = 1481)*

	Number	Percentage
Gender		
Male	536	36
Female	936	64
Age		
65-70	480	33
71-75	384	26
76-80	331	23
Over 80	263	18
Race/Ethnicity		
White	1391	96
Black/African-American/Other	55	4
Education		
Less than high school	221	15
High school graduate	657	45
Some college/tech degree	302	21
College graduate	146	10
Post-graduate work	143	10
Marital Status		
Married	787	54
Divorced	102	7
Widowed	514	35
Married, but separated	9	Less than 1%
Never married	56	4
Income - Married		
Under $12,000	16	3
$12,000 - $20,000	124	20
$20,001 - $25,000	125	20
$25,001 - $30,000	82	13
$30,001 - $40,000	97	15
$40,001 - $50,000	69	11
$50,001 - $60,000	35	6
$60,001 - $75,000	31	5
Over $75,000	52	8
Income – Single		
Under $9,000	67	12
$9,001 - $15,000	191	34
$15,001 - $20,000	116	20
$20,001 - $25,000	55	10
$25,001 - $30,000	37	7
$30,001 - $40,000	34	6
$40,001 - $50,000	29	5
$50,001 - $60,000	13	2
$60,001 - $75,000	7	1
Over $75,000	20	4
Household Size		
Single-member household	555	38
Two-member household	768	52
Three- or more member household	143	10

Table 1. Continued

	Number	Percentage
Employment Status		
Retired, but working	160	11
Retired, not working	1183	80
Not retired, working	55	4
Not retired, not working/ homemaker	73	5
Region		
Northwest	143	10
North Central	77	5
North East	165	11
Southwest	205	14
South Central	236	16
Southeast	355	24
Allegheny County	185	13
Philadelphia County	93	6

*Numbers may not total to 1481 and percentages may not total to 100% due to missing data and/or rounding procedures.

APPENDIX B

PENNSYLVANIA COUNTIES BY REGION AND URBANICITY