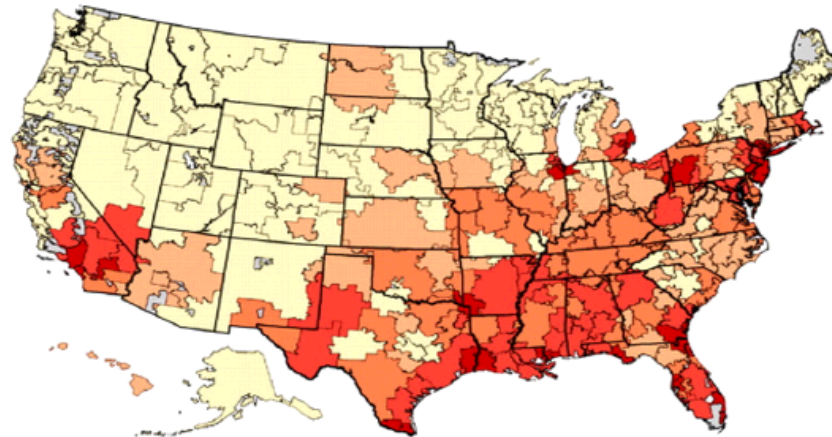


Average per capita Medicare spending, health care resource levels, and other key attributes of U.S. hospital referral regions according to quintiles of spending



Attributes of U.S. HRRs in Different Quintiles of the EOL-EI*

Variable	Quintile of EOL-EI					Ratio (Highest to Lowest)
	1 (Lowest)	2	3	4	5 (Highest)	
EOL-EI, \$ [†]	9074	10 636	11 559	12 598	14 644	1.61
Per capita Medicare spending, \$ [‡]	3922	4439	4940	5444	6304	1.61
Hospital characteristics[§]						
Overall supply (beds per 1000), <i>n</i>	2.4	2.6	2.9	2.9	3.2	1.32
Beds in teaching hospitals, %	10.2	18.1	13.8	20.8	28.1	2.76
Beds in hospitals with > 300 beds, %	31.6	37.4	38.7	43.8	57.2	1.81
Physician supply (per 10 000), <i>n</i>[§]						
Medical specialists	184.8	189.4	184.4	204.6	242.4	1.31
General internists	26.9	28.8	28.6	34.8	44.4	1.65
Family practitioner/GP	21.3	23.4	22.6	28.5	37.3	1.75
Surgeons	35.9	31.3	29.6	25.9	26.5	0.74
All other specialties	43.8	45.6	46	50.3	56.4	1.29
Medicare enrollees in HMOs, %	56.8	60.3	57.5	65.1	77.7	1.37
Residents in metropolitan areas, %	12.1	6.8	7.3	7.7	15.3	1.26
Residents in metropolitan areas, %	77.5	81.9	82.3	79.2	97.4	1.26

* EOL-EI = End-of-Life Expenditure Index; GP = general practitioner; HMO = health maintenance organization; HRR = hospital referral region.

[†] Average age-sex-race-adjusted per capita fee-for-service spending on hospital and physician services in the HRRs within each quintile for Medicare enrollees age 65–99 years who were in their last 6 months of life. For details, see Methods.

[‡] Average age-sex-race-adjusted 1996 annual per capita fee-for-service spending in the HRRs within each quintile on all Medicare services among enrollees age 65–99 years (9).

[§] Key attributes and average per capita supply of the specified medical resource in the HRRs within that quintile. Per capita supply is calculated per 1000 or per 10 000 residents of the general population within the HRRs (9).

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