

Dental Services: Use, Expenses, and
Sources of Payment, 1996-2000

MEPS

Research #20 Findings

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Abstract

This report from the Agency for Healthcare Research and Quality (AHRQ) characterizes how the civilian noninstitutionalized population used and paid for dental care from 1996 through 2000, using data from the Medical Expenditure Panel Survey (MEPS). The percent of people with any use of dental services each year as well as the average number of visits per year are presented. Estimates include annual expenses and sources of payment (including out-of-pocket amounts). These estimates are presented for the total population as well as for specific population groups categorized in terms of insurance coverage, income, employment, and Census region. The report emphasizes change over time.

The estimates in this report are based on the most recent data available at the time the report was written. However, selected elements of MEPS data may be revised on the basis of additional analyses, which could result in slightly different estimates from those shown here. Please check the MEPS Web site for the most current file releases.

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Research #20 Findings

U.S. Department of Health and Human Services
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The Medical Expenditure Panel Survey (MEPS)

Background

The Medical Expenditure Panel Survey (MEPS) is conducted to provide nationally representative estimates of health care use, expenditures, sources of payment, and insurance coverage for the U.S. civilian noninstitutionalized population. MEPS is cosponsored by the Agency for Healthcare Research and Quality (AHRQ), formerly the Agency for Health Care Policy and Research, and the National Center for Health Statistics (NCHS).

MEPS comprises three component surveys: the Household Component (HC), the Medical Provider Component (MPC), and the Insurance Component (IC). The HC is the core survey, and it forms the basis for the MPC sample and part of the IC sample. Together these surveys yield comprehensive data that provide national estimates of the level and distribution of health care use and expenditures, support health services research, and can be used to assess health care policy implications.

MEPS is the third in a series of national probability surveys conducted by AHRQ on the financing and use of medical care in the United States. The National Medical Care Expenditure Survey (NMCES) was conducted in 1977, the National Medical Expenditure Survey (NMES) in 1987. Beginning in 1996, MEPS continues this series with design enhancements and efficiencies that provide a more current data resource to capture the changing dynamics of the health care delivery and insurance system.

The design efficiencies incorporated into MEPS are in accordance with the Department of Health and Human Services (DHHS) Survey Integration Plan of June 1995, which focused on consolidating DHHS surveys, achieving cost efficiencies, reducing respondent burden, and enhancing analytical capacities. To accommodate these goals, new MEPS design features include linkage with the National Health Interview Survey (NHIS), from which the sample for the MEPS HC is drawn, and enhanced longitudinal data collection for core survey components. The MEPS HC augments NHIS by selecting a sample of NHIS respondents, collecting additional data on their health care

expenditures, and linking these data with additional information collected from the respondents' medical providers, employers, and insurance providers.

Household Component

The MEPS HC, a nationally representative survey of the U.S. civilian noninstitutionalized population, collects medical expenditure data at both the person and household levels. The HC collects detailed data on demographic characteristics, health conditions, health status, use of medical care services, charges and payments, access to care, satisfaction with care, health insurance coverage, income, and employment.

The HC uses an overlapping panel design in which data are collected through a preliminary contact followed by a series of five rounds of interviews over a 2¹/₂-year period. Using computer-assisted personal interviewing (CAPI) technology, data on medical expenditures and use for 2 calendar years are collected from each household. This series of data collection rounds is launched each subsequent year on a new sample of households to provide overlapping panels of survey data and, when combined with other ongoing panels, will provide continuous and current estimates of health care expenditures.

The sampling frame for the MEPS HC is drawn from respondents to NHIS, conducted by NCHS. NHIS provides a nationally representative sample of the U.S. civilian noninstitutionalized population, with oversampling of Hispanics and blacks.

Medical Provider Component

The MEPS MPC supplements and validates information on medical care events reported in the MEPS HC by contacting medical providers and pharmacies identified by household respondents. The MPC sample includes all hospitals, hospital physicians, home health agencies, and pharmacies reported in the HC. Also included in the MPC are all office-based physicians:

- Providing care for HC respondents receiving Medicaid.
- Associated with a 75-percent sample of households receiving care through an HMO (health maintenance organization) or managed care plan.

- Associated with a 25-percent sample of the remaining households.

Data are collected on medical and financial characteristics of medical and pharmacy events reported by HC respondents, including:

- Diagnoses coded according to ICD-9 (9th Revision, International Classification of Diseases) and DSM-IV (Fourth Edition, Diagnostic and Statistical Manual of Mental Disorders).
- Physician procedure codes classified by CPT-4 (Current Procedural Terminology, Version 4).
- Inpatient stay codes classified by DRG (diagnosis-related group).
- Prescriptions coded by national drug code (NDC), medication names, strength, and quantity dispensed.
- Charges, payments, and the reasons for any difference between charges and payments.

The MPC is conducted through telephone interviews and mailed survey materials.

Insurance Component

The MEPS IC collects data on health insurance plans obtained through private and public-sector employers. Data obtained in the IC include the number and types of private insurance plans offered, benefits associated with these plans, premiums, contributions by employers and employees, and employer characteristics.

Establishments participating in the MEPS IC are selected through three sampling frames:

- A list of employers or other insurance providers identified by MEPS HC respondents who report having private health insurance at the Round 1 interview.
- A Bureau of the Census list frame of private-sector business establishments.
- The Census of Governments from the Bureau of the Census.

To provide an integrated picture of health insurance, data collected from the first sampling frame (employers and other insurance providers) are linked back to data provided by the MEPS HC respondents. Data from the other three sampling frames are collected to provide annual national and State estimates of the supply of private health insurance available to American workers

and to evaluate policy issues pertaining to health insurance. Since 2000, the Bureau of Economic Analysis has used national estimates of employer contributions to group health insurance from the MEPS IC in the computation of Gross Domestic Product (GDP).

The MEPS IC is an annual panel survey. Data are collected from the selected organizations through a prescreening telephone interview, a mailed questionnaire, and a telephone followup for nonrespondents.

Survey Management

MEPS data are collected under the authority of the Public Health Service Act. They are edited and published in accordance with the confidentiality provisions of this act and the Privacy Act. NCHS provides consultation and technical assistance.

As soon as data collection and editing are completed, the MEPS survey data are released to the public in staged releases of summary reports and microdata files. Summary reports are released as printed documents and electronic files. Microdata files are released on CD-ROM and/or as electronic files.

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Dental Services: Use, Expenses, and Sources of Payment, 1996-2000

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Introduction

This report presents estimates from the Medical Expenditure Panel Survey (MEPS) on the use of dental services as well as expenses and payments for those services from 1996 through 2000. MEPS is an ongoing annual survey of the civilian noninstitutionalized population of the United States. MEPS collects information on how Americans use and pay for health care, their health insurance coverage, and their access to and quality of health care. This report, presenting data on use of and expenses for dental care, is similar to earlier reports prepared with data from the 1987 National Medical Expenditure Survey (Moeller and Levy, 1996; Hahn and Lefkowitz, 1992). While estimates are presented for each year from 1996 through 2000, the focus of this report is on the 2000 estimates and changes in dental use and expenses between 1996 and 2000.

Only differences in estimates that are statistically significant at the $p \leq .05$ level are discussed in the text. The technical appendix provides substantial detail on the sample design and definitions of measures used in this report.

Findings

Use of Dental Care

In 2000, less than half (41.6 percent) of the civilian noninstitutionalized population of the United States obtained dental care from a dentist, dental technician, dental hygienist, dental surgeon, orthodontist, endodontist, or periodontist (Table 1). From 1996 to 2000, the percent of people with a dental visit in each year remained comparatively stable (Table 1).

In 2000, the mean number of dental visits for people who received any dental care was 2.5 (Table 2). This translates into about 290 million dental care visits, or an average of about 1.0 visit per person in the civilian noninstitutionalized population of 278.4 million people in 2000. From 1996 through 2000, the mean number of dental visits per person remained stable (Table 2).

Demographic Characteristics

In 2000, children under age 6 were the age group least likely to receive dental care (21.1 percent), while those ages 6-18 were the most likely to use dental care (Table 1). Although overall the percent of the population using any dental care remained stable during the 5-year period, the proportion among adults ages 19-44 declined from 41.1 percent in 1996 to 38.3 percent in 2000 (Table 1).

During 2000, among people with any dental care during the year, the average number of visits was higher for children ages 6-18 (2.9 visits), adults 45-64 (2.6 visits), and those 65 years and over (2.8 visits) than for younger adults ages 19-44 (2.1 visits) or children under 6 (1.6 visits). Between 1996 and 2000, the average number of dental visits per person remained relatively stable.

In each year, females were more likely than males to use dental services. For example, in 2000, 44.9 percent of females had at least one dental visit, compared with 38.2 percent of males (Table 1). In three of the five years (2000, 1998, and 1997), females had a higher mean number of total visits per person with a visit than males—2.6 and 2.4, respectively (Table 2).

A higher proportion of whites (46.7 percent) than blacks (26.8 percent) or Hispanics (25.7 percent) had at least one dental visit in 2000 (Table 1). The difference between blacks and Hispanics in the proportion of the population receiving dental care during 2000 is not significant. Among people who received dental care during 2000, whites had more visits per user (2.6) than either Hispanics (2.1) or blacks (2.1). This relationship was observed in each year from 1996 through 2000 (Table 2).

Insurance Coverage

In this report, insurance coverage refers to general health insurance coverage and does not necessarily

Approximately 42 percent of the civilian noninstitutionalized population received dental care in 2000, making about 290 million visits.

reflect the presence of dental benefits. In 2000, people with private insurance were more likely to have at least one dental visit during the year (Table 1). Among people under age 65, 47.8 percent of those with any private insurance during 2000 had at least one dental visit, compared to 28.9 percent of those with public insurance and only 19.2 percent of those who were uninsured for the full year. A similar pattern was observed for people age 65 and over: 48.7 percent of the elderly with private insurance as well as Medicare had at least one dental visit, while 34.0 percent of those with Medicare only and 17.1 percent of those with public insurance in addition to Medicare received any dental care in 2000 (Table 1).

The relationship between any use of dental care and insurance coverage generally remained stable over the period 1996-2000. However, among people under 65 with private insurance, the percent receiving any dental care declined from 50.0 percent in 1996 to 47.8 percent in 2000 (Table 1).

Income and Employment

In 2000, people with high or middle family incomes were more likely to have a dental visit (53.5 and 40.4 percent, respectively) than people with family incomes categorized as low income, near poor, or poor (29.9, 26.7, and 25.7 percent, respectively; Table 1). The relationship between family income and the probability of use exhibited a consistent pattern each year. However, the likelihood of having a dental visit decreased from 1996 to 2000 for families with middle or high incomes: from 44.9 percent in 1996 to 40.4 percent in 2000 for people in middle-income families and from 56.6 percent to 53.5 percent for people in high-income families (Table 1). People with family incomes categorized as poor had fewer mean visits than those with higher family incomes—low income, middle income, and high income (Table 2). The mean number of visits per user for people in families below the poverty line in 2000 was 2.0 visits. From 1996 through 2000, the mean number of dental visits per person for each income category remained stable (Table 2).

People 16 and over who were employed during 2000 were more likely than their counterparts who were not employed to have at least one dental visit (43.4 percent and 37.8 percent, respectively; Table 1). In contrast, in every year except 1999, the average number of dental visits for people who had a visit was slightly higher for people who were not employed than for those

who were employed (Table 2). The rate at which employed people received any dental care declined from 45.8 percent in 1996 to 43.4 percent in 2000 (Table 1).

Region

The percent of people using any dental services remained constant in each Census region between 1996 and 2000. In 2000, residents of the West and South were less likely to have at least one dental care visit than people living in the Northeast and Midwest. During 2000, people living in the Northeast had a higher average number of visits per user (2.7) than people in all other regions.

Expenses and Sources of Payment

Annual expenses and sources of payment are shown in Tables 3-7. In 2000, 115.8 million people in the civilian noninstitutionalized population of the United States spent nearly 56 billion dollars on dental care (not shown). The average dental expense in 2000 for people with a visit was \$480 (Table 7). This represents a 28-percent increase in spending over the annual average expense in 1996 (\$374; Table 3). About half of expenses for dental care were paid out of pocket each year. These out-of-pocket payments by self or family also accounted for the highest share of payments each year, followed by private health insurance payments, other sources, and Medicaid (Tables 3-7).

Demographic Characteristics

Among people using dental care during 2000, children ages 6-18 had the highest total annual dental expense (\$607), while children under 6 had the lowest annual expense (\$184). Medicaid contributed about one-quarter of the payments for dental care for children under 6—more than for any other age group. Out-of-pocket contributions were highest among the elderly, who paid more than three-quarters of their incurred expenses out of pocket. As a percent of total expense for dental care, private health insurance payments were lowest for the elderly (14.9 percent) and highest for adults ages 19-44 (49.0 percent). Between 1996 and 2000, mean total expenses for people with a dental visit increased significantly except for the elderly.

The mean expense per person for people who received dental care was \$480 in 2000.

In 2000, there were no significant differences in mean dental expenses between males and females. For persons with a visit, mean expenses rose for both sexes between 1996 and 2000 (Tables 3 and 7). Average expenses for males with a dental visit rose from \$362 in 1996 to \$449 in 2000. During the same period, expenses for females rose from \$384 to \$505. Consistently over the 5-year period, about half of expenses were paid out of pocket for both sexes. Private health insurance was the next largest payer, accounting for 40.2 percent of expenses for males and 43.3 percent of expenses for females in 2000. A similar ranking of payment sources was seen for all five years (Tables 3-7).

During 2000, mean total dental expenses were lower for blacks (\$343) and Hispanics (\$337) than whites (\$506). In each of the five years, expenses incurred by whites were higher than those incurred by blacks. Whites had significantly higher expenses than Hispanics in four of the five years from 1996 to 2000. In every year studied in this report, whites had a lower percent of their expenses paid for by Medicaid than either Hispanics or blacks.

Insurance Status

Among people under 65 who received dental services, those having any private insurance coverage and those who were uninsured for all of 2000 had higher mean dental expenses than people with public insurance. Interestingly, while they were less likely to receive dental services, the uninsured did not significantly differ in mean dental expenses from the privately insured population during 2000. Among people under 65, the uninsured paid nearly 80 percent of their dental health expenses out of pocket, with 20 percent coming from other sources. Medicaid covered 66.4 percent of the expenses of people with public insurance, while private health insurance picked up about half the expenses incurred by people with private coverage during 2000 (Table 7).

Over the period 1996-2000, mean expenses increased for individuals under 65 who were either privately or publicly insured (Tables 3 and 7). The distribution of sources of payment exhibited a consistent pattern over the time period.

Income and Employment

During 2000, people in families with middle or high incomes had higher mean total dental expenses than people in poor families (Table 7). Between 1996 and

2000, annual expenses for people in low, middle, and high-income families increased. Mean expenses also increased for people in poor and near-poor families during that time period, but the difference was not statistically significant.

Between 1996 and 2000, people in low and middle-income families experienced a decrease in the proportion of their dental expenses paid for by private health insurance. People in low-income families saw the percent of their expenses paid for by private insurance drop from 37.1 percent in 1996 to 24.4 percent in 2000. For these people, the percent paid out of pocket was unchanged. For people in middle-income families, the percent of dental expenses paid for by private insurance dropped from 44.9 percent to 40.0 percent.

Among people 16 and over, average annual dental expenses increased from 1996 to 2000 for both people who were employed with those who were not (Tables 3 and 7). During 2000, employed people paid for less than half (47.0 percent) of their dental expenses out of pocket, while people who were not employed paid for 63.7 percent of their dental expenses out of pocket (Table 7). In each of the five years, people who were not employed paid a higher share of their annual dental expenses out of pocket than those who were employed (Tables 3-7).

Region

Between 1996 and 2000, average annual dental expenses rose in each of the four Census regions. There was a decline in the portion of dental expenses paid for by private health insurance in the Midwest: from more than half (51.4 percent) in 1996 to 45.7 percent in 2000.

Out-of-Pocket Expenses

Out-of-pocket dental expenses for 1996-2000 are shown in Tables 8-12. Between 1996 and 2000, the average out-of-pocket expense for people with a dental visit increased from \$192 to \$237. At the same time, the percent of the population incurring no expense increased slightly, from 30.2 percent to 31.6 percent. The percent of the population incurring \$200 or more in out-of-pocket expenses also increased over the period, from 20.4 percent in 1996 to 23.0 percent in 2000 (Tables 8 and 12)

Demographic Characteristics

In 2000, children under 6 incurred the lowest annual out-of-pocket expenses for dental care (\$47) and were

the most likely to incur no expense at all (52.2 percent). People 65 and over had the highest annual out-of-pocket expenses, an average of \$400. Only 10.5 percent of the elderly paid no out-of-pocket expenses for dental care,

and 39.1 percent paid \$200 or more out of pocket (Table 12).

Also in 2000, while males and females had similar mean out-of-pocket expenses and a similar distribution of out-of-pocket expenses, there were differences by race and ethnicity. Because of their

higher use of dental care and lower rates of reimbursement from public programs (Tables 8-12), whites had higher mean out-of-pocket expenses (\$252) than either blacks (\$138) or Hispanics (\$174). Whites were also less likely to incur no out-of-pocket expense and more likely to have out-of-pocket expenses of \$200 or more. These patterns were unchanged over the 1996-2000 period.

Almost half of all dental expenses were paid for out of pocket in 2000.

Insurance Status

During 2000, people under 65 with public insurance coverage only had lower out-of-pocket expenses (\$75) than either the uninsured (\$322) or those with private coverage (\$220). Nearly four-fifths (79.5 percent) of those with public coverage incurred no out-of-pocket expense, although 7.3 percent incurred \$200 or more in out-of-pocket expenses.

Among people age 65 and over who had dental care during 2000, those with Medicare only had the highest level of out-of-pocket expenses (\$550), while those with Medicare and other public coverage had the lowest (\$164). Among the elderly with only Medicare coverage who had dental care, there was an increase in the average out-of-pocket expenses for dental services: from \$384 in 1996 to \$550 in 2000 (Tables 8 and 12).

Income and Employment

During 2000, people in families with incomes categorized as poor had the lowest level of out-of-pocket dental expenses and were the most likely to incur no expense out of pocket. Among people who used dental services in 2000, there were no significant differences in the average out-of-pocket expense for people in low, middle, and high-income families.

People ages 16 and over who were employed had lower mean out-of-pocket expenses in 2000 and were more likely to incur no out-of-pocket expense at all than people who were not employed. Mean out-of-pocket expenses for dental services rose significantly from 1996 to 2000 for both employed and unemployed people (Tables 8 and 12).

Region

Average out-of-pocket expenses for people with at least one dental visit in 2000 were highest in the Northeast and lowest in the Midwest. Looking at the proportion of people with no out-of-pocket expenses, it was largest in the South (25.8 percent) and highest in the West (38.8 percent). Residents of the South, Midwest, and West who had a dental visit experienced a substantial increase in their mean out-of-pocket expense from 1996 to 2000 (Tables 8 and 12). A decline in the percent of residents who paid only \$1-\$99 out of pocket for dental services was observed for the Midwest, South, and West from 1996 to 2000 (Tables 8 and 12).

Summary and Conclusions

About 42 percent of the civilian noninstitutionalized population had at least one dental care visit in 2000. This represents an average of 2.5 visits per person with a visit, or about 1.0 visit per person overall. The percent of the population with at least one dental visit remained stable between 1996 and 2000.

Consistently, between 1996 and 2000, children ages 6-18 who had at least one visit annually maintained high rates of use for dental services. In that time period, among the elderly, people with private supplemental coverage were more likely to use dental services than those with Medicaid and Medicare or those with Medicare alone. Females were more likely than males to use dental services. In each of the years included in this report, whites had higher rates of dental care use than either blacks or Hispanics.

Employed people were more likely to use dental care than people who were unemployed. Employed people also had a greater share of their expenses paid for by private health insurance. Income, too, was related to use of dental care. People in middle and high-income families were the most likely to use dental care.

The mean expense per person with a dental care visit in 2000 was \$480, and almost half (49.3 percent) of

dental expenses were paid for out of pocket. Private health insurance covered 42 percent, with Medicaid and other sources picking up the remainder.

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Table I. Dental services: Annual percent of population with a visit, by selected population characteristics, United States, 1996-2000

Population characteristic	1996		1997		1998		1999		2000	
	Total population in thousands	Percent with a visit	Total population in thousands	Percent with a visit	Total population in thousands	Percent with a visit	Total population in thousands	Percent with a visit	Total population in thousands	Percent with a visit
Total	268,905	42.9	271,279	41.8	273,534	42.4	276,411	43.1	278,406	41.6
Age in years										
Under 6	23,861	21.1	23,791	18.5	23,732	21.7	23,849	19.8	24,126	21.1
6-18	51,465	52.4	51,846	51.5	52,838	51.5	52,834	51.9	52,502	52.7
19-44	105,318	41.1	105,160	40.2	104,625	39.9	104,913	41.2	104,924	38.3
45-64	54,212	48.8	56,295	47.2	58,029	48.8	0,139	48.2	62,072	46.4
65 and over	34,050	40.3	34,185	39.4	34,309	39.6	34,676	42.1	34,782	40.5
Sex										
Male	131,527	39.7	132,605	38.6	133,614	38.8	134,603	39.4	135,882	38.2
Female	137,379	46.0	138,673	44.9	139,919	45.8	141,808	46.6	142,524	44.9
Race/ethnicity										
White and other ^a	205,258	47.8	206,082	46.6	207,018	47.4	208,599	48.5	209,401	46.7
Black	33,668	26.1	34,086	26.3	34,458	28.2	34,781	27.8	35,049	26.8
Hispanic	29,979	28.5	31,111	26.8	32,058	25.7	33,031	25.0	33,955	25.7
Insurance status										
Under age 65:										
Any private ^b	174,231	50.0	176,046	48.5	178,020	49.9	184,520	49.6	182,658	47.8
Public only	27,845	28.1	27,743	27.6	28,918	27.7	27,148	26.8	28,622	28.9
Uninsured	32,780	20.4	33,304	20.8	32,286	17.1	30,067	18.7	32,344	19.2
Age 65 and over:										
Medicare only	7,535	31.8	8,550	31.9	10,123	35.4	10,853	33.6	11,515	34.0
Medicare and private	22,811	47.1	22,028	46.0	19,835	46.9	19,884	50.8	19,570	48.7
Medicare and other public	3,555	16.1	3,434	16.1	4,200	15.7	3,808	21.1	3,568	17.1

Continued

Table 1. Dental services: Annual percent of population with a visit, by selected population characteristics, United States, 1996-2000 (continued)

Population characteristic	1996		1997		1998		1999		2000	
	Total population in thousands	Percent with a visit	Total population in thousands	Percent with a visit	Total population in thousands	Percent with a visit	Total population in thousands	Percent with a visit	Total population in thousands	Percent with a visit
Income^c										
Poor	38,298	26.2	36,415	24.2	35,303	26.0	32,795	26.7	32,356	25.7
Near poor	12,946	25.6	12,233	24.7	11,611	27.1	12,322	26.8	12,414	26.7
Low income	40,460	29.9	38,723	31.5	36,826	27.0	38,928	26.7	37,751	29.9
Middle income	88,262	44.9	89,981	42.1	88,324	42.0	86,182	42.1	90,306	40.4
High income	88,939	56.6	93,926	54.8	101,470	55.8	106,184	56.8	105,578	53.5
Employment status^d										
Employed	132,355	45.8	134,556	45.0	135,425	45.2	138,999	45.8	140,017	43.4
Not employed	73,440	39.0	73,648	37.4	74,874	38.5	73,077	39.1	74,011	37.8
Census region										
Northeast	51,965	44.4	52,394	43.8	52,503	44.1	51,867	46.1	52,636	46.9
Midwest	62,673	49.3	63,090	47.3	63,871	48.3	64,230	47.7	64,536	46.2
South	93,901	37.6	94,929	35.9	95,475	37.1	97,176	38.4	97,373	36.9
West	60,366	43.4	60,865	43.5	61,685	43.0	63,138	43.0	63,861	39.8

^a Includes all other ethnic/racial groups not shown separately.

^b Includes population with private and public coverage.

^c Poor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^d For individuals ages 16 and over.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table 2. Dental services: Annual total mean visits per person with a visit, by selected population characteristics, United States, 1996-2000

Population characteristic	1996		1997		1998		1999		2000	
	Population with a visit in thousands	Mean visits per person with a visit	Population with a visit in thousands	Mean visits per person with a visit	Population with a visit in thousands	Mean visits per person with a visit	Population with a visit in thousands	Mean visits per person with a visit	Population with a visit in thousands	Mean visits per person with a visit
Total	115,429	2.6	113,380	2.5	115,985	2.5	119,002	2.5	115,819	2.5
Age in years										
Under 6	5,027	1.5	4,406	1.6	5,150	1.6	4,725	1.5	5,087	1.6
6-18	26,975	3.0	26,718	2.9	27,199	2.8	27,413	2.9	27,669	2.9
19-44	43,254	2.2	42,229	2.2	41,728	2.2	43,268	2.2	40,165	2.1
45-64	26,464	2.7	26,564	2.7	28,331	2.6	29,004	2.6	28,822	2.6
65 and over	13,709	2.9	13,464	2.9	13,577	2.8	14,591	2.8	14,076	2.8
Sex										
Male	52,198	2.5	51,122	2.4	51,864	2.4	52,976	2.4	51,851	2.4
Female	63,231	2.6	62,259	2.6	64,122	2.6	66,026	2.5	63,968	2.6
Race/ethnicity										
White and other ^a	98,108	2.6	96,082	2.6	98,025	2.6	101,077	2.5	97,697	2.6
Black	8,777	2.0	8,974	2.1	9,711	2.0	9,652	2.1	9,408	2.1
Hispanic	8,545	2.2	8,324	2.3	8,249	2.2	8,273	2.3	8,714	2.1
Insurance status										
Under age 65:										
Any private ^b	87,197	2.6	85,324	2.5	88,870	2.5	91,523	2.5	87,258	2.5
Public only	7,834	2.0	7,652	2.1	8,004	2.0	7,263	2.1	8,277	2.3
Uninsured	6,689	2.4	6,940	2.1	5,534	2.5	5,624	2.2	6,208	2.2
Age 65 and over:										
Medicare only	2,400	3.1	2,726	3.0	3,585	2.6	3,644	2.5	3,911	2.9
Medicare and private	10,737	2.9	10,142	2.9	9,310	2.9	10,110	2.9	9,529	2.7
Medicare and other public	572	2.4	553	2.3	661	2.7	804	3.3	608	3.2

Continued

Table 2. Dental services: Annual total mean visits per person with a visit, by selected population characteristics, United States, 1996-2000 (continued)

Population characteristic	1996		1997		1998		1999		2000	
	Population with a visit in thousands	Mean visits per person with a visit	Population with a visit in thousands	Mean visits per person with a visit	Population with a visit in thousands	Mean visits per person with a visit	Population with a visit in thousands	Mean visits per person with a visit	Population with a visit in thousands	Mean visits per person with a visit
Income^c										
Poor	10,043	2.1	8,807	2.3	9,187	2.2	8,749	2.2	8,309	2.0
Near poor	3,310	2.4	3,017	2.0	3,142	2.1	3,299	2.1	3,311	2.7
Low income	12,113	2.4	12,185	2.2	9,936	2.3	10,376	2.4	11,275	2.5
Middle income	39,650	2.6	37,869	2.6	37,093	2.5	36,292	2.4	36,461	2.4
High income	50,313	2.7	51,503	2.7	56,625	2.6	60,285	2.6	56,464	2.6
Employment status^d										
Employed	60,600	2.4	60,494	2.4	61,189	2.4	63,731	2.4	60,813	2.3
Not employed	28,624	2.7	27,559	2.7	28,838	2.6	28,578	2.6	27,967	2.7
Census region										
Northeast	23,065	2.7	22,957	2.7	23,178	2.5	23,934	2.7	24,703	2.7
Midwest	30,906	2.4	29,840	2.5	30,866	2.5	30,633	2.4	29,827	2.4
South	35,276	2.5	34,098	2.5	35,447	2.4	37,277	2.4	35,902	2.4
West	26,183	2.6	26,486	2.5	26,494	2.6	27,157	2.5	25,387	2.5

^a Includes all other ethnic/racial groups not shown separately.

^b Includes population with private and public coverage.

^c Poor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^d For individuals ages 16 and over.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table 3. Dental services: Mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 1996

Population characteristic	Population with a visit in thousands	Mean expense per person with a visit	Source of payment			
			Out of pocket	Private health insurance	Medicaid	Other ^a
Percent distribution						
Total	115,429	\$374	51.5	42.5	2.8	3.2
Age in years						
Under 6	5,027	124	35.1	47.9	14.2	2.8
6-18	26,975	421	47.7	44.4	4.5	3.4
19-44	43,254	321	45.4	49.6	2.8	2.1
45-64	26,464	425	51.1	44.3	1.6	3.0
65 and over	13,709	438	75.1	8.4	*0.8	5.7
Sex						
Male	52,198	362	50.6	42.9	2.8	3.6
Female	63,231	384	52.1	42.1	2.9	2.9
Race/ethnicity						
White and other ^b	98,108	385	52.2	42.8	2.1	2.9
Black	8,777	299	46.6	40.0	7.7	5.7
Hispanic	8,545	317	45.5	40.3	8.5	5.7
Insurance status						
Under age 65:						
Any private ^c	87,197	382	46.5	51.7	*0.3	1.5
Public only	7,834	198	26.0	0.0	69.3	*4.7
Uninsured	6,689	339	79.0	0.0	0.0	21.0
Age 65 and over:						
Medicare only	2,400	457	84.1	0.0	0.0	15.9
Medicare and private	10,737	434	73.5	23.7	0.0	*2.8
Medicare and other public	572	431	65.7	0.0	*18.3	*16.0
Income^d						
Poor	10,043	268	45.4	16.1	32.3	6.2
Near poor	3,310	283	56.8	23.5	*14.2	*5.4
Low income	12,113	282	58.2	37.1	*2.4	2.2
Middle income	39,650	384	50.8	44.9	*0.7	3.6
High income	50,313	415	51.4	45.8	*0.1	2.6
Employment status^e						
Employed	60,600	372	46.9	49.4	*0.9	2.7
Not employed	28,624	400	64.0	27.8	4.2	4.0

Continued

Table 3. Dental services: Mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 1996 (continued)

Population characteristic	Population with a visit in thousands	Mean expense per person with a visit	Source of payment			
			Out of pocket	Private health insurance	Medicaid	Other ^a
			Percent distribution			
Census region						
Northeast	23,065	\$440	56.1	38.0	2.9	2.9
Midwest	30,906	313	44.6	51.4	1.7	2.2
South	35,276	340	59.3	34.5	3.0	3.1
West	26,183	433	44.9	47.2	3.5	4.5

^a Includes the Department of Veterans Affairs; CHAMPUS or TRICARE (Armed-Forces-related coverage); Indian Health Service; military treatment facilities; Federal, State, and local programs other than Medicaid; and other kinds of insurance not specified.

^b Includes all other ethnic/racial groups not shown separately.

^c Includes population with private and public coverage.

^d Poor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^e For individuals ages 16 and over.

* Relative standard error is greater than or equal to 30 percent.

Note: Percents may not add to 100 because of rounding.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table 4. Dental services: Mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 1997

Population characteristic	Population with a visit in thousands	Mean expense per person with a visit	Source of payment			
			Out of pocket	Private health insurance	Medicaid	Other ^a
Percent distribution						
Total	113,380	\$392	51.1	41.5	3.0	4.4
Age in years						
Under 6	4,406	143	28.7	45.0	22.6	3.6
6-18	26,718	408	47.7	41.4	6.3	4.6
19-44	42,229	353	44.9	49.1	2.1	3.9
45-64	26,564	461	53.8	42.3	1.0	2.9
65 and over	13,464	431	70.3	20.0	*1.4	8.3
Sex						
Male	51,122	378	52.7	40.1	2.6	4.6
Female	62,259	404	49.9	42.5	3.3	4.2
Race/ethnicity						
White and other ^b	96,082	403	52.1	41.7	2.1	4.1
Black	8,974	281	45.7	37.6	10.4	6.2
Hispanic	8,324	388	43.4	41.1	9.0	6.4
Insurance status						
Under age 65:						
Any private ^c	85,324	409	47.8	49.6	*0.4	2.2
Public only	7,652	216	23.1	0.0	68.0	8.9
Uninsured	6,940	310	73.8	0.0	0.0	26.2
Age 65 and over:						
Medicare only	2,726	485	78.4	0.0	0.0	*21.6
Medicare and private	10,142	425	68.6	27.0	*0.4	4.0
Medicare and other public	553	307	*49.3	0.0	*38.7	12.0
Income^d						
Poor	8,807	336	40.9	17.4	35.6	6.2
Near poor	3,017	264	53.3	28.8	9.6	*8.3
Low income	12,185	324	57.0	31.4	3.1	8.4
Middle income	37,869	361	50.7	43.8	0.4	5.0
High income	51,503	449	51.6	45.3	*0.2	2.9
Employment status^e						
Employed	60,494	401	48.5	47.0	0.8	3.6
Not employed	27,559	406	60.3	29.3	3.7	6.7

Continued

Table 4. Dental services: Mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 1997 (continued)

Population characteristic	Population with a visit in thousands	Mean expense per person with a visit	Source of payment			
			Out of pocket	Private health insurance	Medicaid	Other ^a
			Percent distribution			
Census region						
Northeast	22,957	\$404	56.6	36.2	4.0	3.2
Midwest	29,840	347	49.2	44.3	2.3	4.2
South	34,098	383	54.7	38.6	2.2	4.4
West	26,486	446	44.5	46.3	3.8	5.4

^a Includes the Department of Veterans Affairs; CHAMPUS or TRICARE (Armed-Forces-related coverage); Indian Health Service; military treatment facilities; Federal, State, and local programs other than Medicaid; and other kinds of insurance not specified.

^b Includes all other ethnic/racial groups not shown separately.

^c Includes population with private and public coverage.

^d Poor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^e For individuals ages 16 and over.

* Relative standard error is greater than or equal to 30 percent.

Note: Percents may not add to 100 because of rounding.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table 5. Dental services: Mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 1998

Population characteristic	Population with a visit in thousands	Mean expense per person with a visit	Source of payment			
			Out of pocket	Private health insurance	Medicaid	Other ^a
Percent distribution						
Total	115,985	\$423	51.7	41.7	3.1	3.6
Age in years						
Under 6	5,150	150	29.1	46.6	20.0	*4.2
6-18	27,199	449	42.2	49.1	6.4	2.4
19-44	41,728	378	48.2	46.0	2.5	3.3
45-64	28,331	483	52.2	42.7	1.0	4.1
65 and over	13,577	485	79.1	14.8	*0.4	5.6
Sex						
Male	51,864	412	50.3	42.3	3.1	4.3
Female	64,122	432	52.7	41.2	3.0	3.1
Race/ethnicity						
White and other ^b	98,025	440	52.4	42.2	1.9	3.5
Black	9,711	309	44.9	39.6	10.4	5.0
Hispanic	8,249	349	47.7	36.1	12.0	4.3
Insurance status						
Under age 65:						
Any private ^c	88,870	430	45.9	50.9	0.4	2.8
Public only	8,004	216	19.2	0.0	76.5	4.3
Uninsured	5,534	449	90.0	0.0	0.0	10.0
Age 65 and over:						
Medicare only	3,585	493	85.2	0.0	0.0	14.8
Medicare and private	9,310	497	77.0	21.1	*0.0	1.9
Medicare and other public	661	284	74.5	0.0	*14.1	*11.4
Income^d						
Poor	9,187	311	50.8	11.7	32.4	5.2
Near poor	3,142	291	59.2	22.0	*17.9	*1.0
Low income	9,938	368	61.9	26.5	7.3	*4.3
Middle income	37,093	407	53.6	42.3	0.8	3.3
High income	56,625	468	49.0	47.3	0.1	3.6
Employment status^e						
Employed	61,189	423	48.4	47.6	0.9	3.1
Not employed	28,838	450	66.6	24.5	3.5	5.4

Continued

Table 5. Dental services: Mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 1998 (continued)

Population characteristic	Population with a visit in thousands	Mean expense per person with a visit	Source of payment			
			Out of pocket	Private health insurance	Medicaid	Other ^a
			Percent distribution			
Census region						
Northeast	23,178	\$447	52.6	39.7	3.8	3.9
Midwest	30,866	352	46.2	49.0	1.7	3.0
South	35,447	402	58.3	35.4	1.9	4.4
West	26,494	512	48.3	43.9	4.7	3.0

^aIncludes the Department of Veterans Affairs; CHAMPUS or TRICARE (Armed-Forces-related coverage); Indian Health Service; military treatment facilities; Federal, State, and local programs other than Medicaid; and other kinds of insurance not specified.

^bIncludes all other ethnic/racial groups not shown separately.

^cIncludes population with private and public coverage.

^dPoor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^eFor individuals ages 16 and over.

* Relative standard error is greater than or equal to 30 percent.

Note: Percents may not add to 100 because of rounding.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table 6. Dental services: Mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 1999

Population characteristic	Population with a visit in thousands	Mean expense per person with a visit	Source of payment			
			Out of pocket	Private health insurance	Medicaid	Other ^a
Percent distribution						
Total	119,002	\$439	50.2	42.7	3.1	4.0
Age in years						
Under 6	4,725	151	30.2	41.6	*24.9	*3.4
6-18	27,413	491	45.0	46.0	5.5	3.5
19-44	43,268	372	44.1	48.8	3.2	3.9
45-64	29,004	513	50.1	45.2	0.7	4.0
65 and over	14,591	483	76.1	17.6	*0.9	5.3
Sex						
Male	52,976	434	49.7	42.9	3.2	4.2
Female	66,026	443	50.6	42.6	3.0	3.8
Race/ethnicity						
White and other ^b	101,077	452	51.2	42.4	2.4	3.9
Black	9,652	337	36.6	51.1	8.8	*3.5
Hispanic	8,273	391	48.8	39.5	6.2	5.6
Insurance status						
Under age 65:						
Any private ^c	91,523	452	45.4	51.0	*0.6	3.1
Public only	7,263	263	24.7	0.0	68.0	*7.3
Uninsured	5,624	339	84.0	0.0	0.0	16.0
Age 65 and over:						
Medicare only	3,644	515	92.1	0.0	0.0	7.9
Medicare and private	10,110	482	70.3	25.5	0.0	4.1
Medicare and other public	804	276	61.0	0.0	*28.8	*10.2
Income^d						
Poor	8,749	328	45.3	21.5	27.6	5.6
Near poor	3,299	274	59.3	11.2	24.1	*5.4
Low income	10,376	360	54.4	31.4	8.5	5.7
Middle income	36,292	426	50.2	43.6	*1.5	4.6
High income	60,285	485	49.8	46.8	*0.1	3.3
Employment status^e						
Employed	63,731	440	47.3	47.9	1.0	3.8
Not employed	28,578	434	63.3	28.0	3.9	4.8

Continued

Table 6. Dental services: Mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 1999 (continued)

Population characteristic	Population with a visit in thousands	Mean expense per person with a visit	Source of payment			
			Out of pocket	Private health insurance	Medicaid	Other ^a
			Percent distribution			
Census region						
Northeast	23,934	\$507	53.4	38.4	4.2	4.0
Midwest	30,633	378	46.2	48.3	1.2	4.2
South	37,277	391	53.8	40.5	2.2	3.4
West	27,157	511	46.8	44.2	4.5	4.4

^aIncludes the Department of Veterans Affairs; CHAMPUS or TRICARE (Armed-Forces-related coverage); Indian Health Service; military treatment facilities; Federal, State, and local programs other than Medicaid; and other kinds of insurance not specified.

^bIncludes all other ethnic/racial groups not shown separately.

^cIncludes population with private and public coverage.

^dPoor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^eFor individuals ages 16 and over.

* Relative standard error is greater than or equal to 30 percent.

Note: Percents may not add to 100 because of rounding.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table 7. Dental services: Mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 2000

Population characteristic	Population with a visit in thousands	Mean expense per person with a visit	Source of payment			
			Out of pocket	Private health insurance	Medicaid	Other ^a
			Percent distribution			
Total	115,819	\$480	49.3	42.0	4.0	4.6
Age in years						
Under 6	5,087	184	25.4	42.3	25.6	*6.7
6-18	27,669	607	44.0	47.5	6.4	2.1
19-44	40,165	388	41.9	49.0	*4.6	4.5
45-64	28,822	516	51.2	41.9	1.1	5.8
65 and over	14,076	522	76.7	14.9	0.4	7.9
Sex						
Male	51,851	449	49.8	40.2	*4.6	5.4
Female	63,968	505	49.0	43.3	3.6	4.0
Race/ethnicity						
White and other ^b	97,697	506	49.8	42.1	3.6	4.5
Black	9,408	343	40.3	47.1	7.1	5.5
Hispanic	8,714	337	51.7	35.3	7.3	5.7
Insurance status						
Under age 65:						
Any private ^c	87,258	498	44.1	51.2	*1.6	3.0
Public only	8,277	277	26.9	0.0	66.4	6.7
Uninsured	6,208	404	79.8	0.0	0.0	20.2
Age 65 and over:						
Medicare only	3,911	634	86.8	0.0	0.0	13.2
Medicare and private	9,529	483	72.6	23.8	*0.0	3.6
Medicare and other public	608	363	45.1	0.0	*14.1	*40.9
Income^d						
Poor	8,309	322	41.8	23.7	22.8	11.7
Near poor	3,311	468	*35.5	*24.1	*34.8	*5.5
Low income	11,275	395	59.6	24.4	10.9	5.1
Middle income	36,461	467	51.6	40.0	*3.1	5.3
High income	56,464	529	47.9	48.4	*0.3	3.5
Employment status^e						
Employed	60,813	448	47.0	45.8	*2.1	5.0
Not employed	27,967	495	63.7	26.8	3.6	5.9

Continued

Table 7. Dental services: Mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 2000 (continued)

Population characteristic	Population with a visit in thousands	Mean expense per person with a visit	Source of payment			
			Out of pocket	Private health insurance	Medicaid	Other ^a
			Percent distribution			
Census region						
Northeast	24,703	\$505	51.6	39.4	3.9	5.1
Midwest	29,827	437	46.7	45.7	*3.3	4.3
South	35,902	453	54.1	39.9	1.3	4.7
West	25,387	543	44.2	43.4	8.0	4.4

^aIncludes the Department of Veterans Affairs; CHAMPUS or TRICARE (Armed-Forces-related coverage); Indian Health Service; military treatment facilities; Federal, State, and local programs other than Medicaid; and other kinds of insurance not specified.

^bIncludes all other ethnic/racial groups not shown separately.

^cIncludes population with private and public coverage.

^dPoor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^eFor individuals ages 16 and over.

* Relative standard error is greater than or equal to 30 percent.

Note: Percents may not add to 100 because of rounding.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table 8. Dental services: Mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 1996

Population characteristic	Population with a visit in thousands	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
			None	\$1-\$99	\$100-\$199	\$200 or more
			Percent distribution			
Total	115,429	\$192	30.2	36.6	12.8	20.4
Age in years						
Under 6	5,027	44	50.3	36.6	9.2	3.8
6-18	26,975	201	41.1	33.9	9.5	15.6
19-44	43,254	146	29.9	40.3	12.2	17.6
45-64	26,464	217	24.7	36.1	14.0	25.2
65 and over	13,707	329	12.7	31.3	20.5	35.5
Sex						
Male	52,198	183	29.7	37.0	13.6	19.7
Female	63,231	200	30.6	36.3	12.1	21.0
Race/ethnicity						
White and other ^a	98,108	201	28.1	37.1	13.4	21.4
Black	8,777	140	42.7	34.3	9.3	13.7
Hispanic	8,545	144	41.4	33.4	10.1	15.2
Insurance status						
Under age 65:						
Any private ^b	87,197	178	30.2	39.1	12.0	18.8
Public only	7,834	52	73.7	16.8	3.8	5.7
Uninsured	6,689	268	15.6	38.9	18.9	26.6
Age 65 and over:						
Medicare only	2,400	384	12.1	22.2	25.0	40.7
Medicare and private	10,737	319	11.5	33.5	20.0	35.0
Medicare and other public	572	*283	38.1	29.9	*9.7	22.3
Income^c						
Poor	10,043	122	50.5	28.2	7.0	14.3
Near poor	3,310	161	36.2	29.7	16.5	17.6
Low income	12,113	164	30.4	37.8	13.2	18.6
Middle income	39,650	195	28.5	37.9	13.3	20.4
High income	50,313	213	27.0	37.5	13.3	22.2
Employment status^d						
Employed	60,600	174	27.2	39.0	13.1	20.6
Not employed	28,624	256	24.4	33.7	15.2	26.6

Continued

Table 8. Dental services: Mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 1996 (continued)

Population characteristic	Population with a visit in thousands	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
			None	\$1-\$99	\$100-\$199	\$200 or more
			Percent distribution			
Census region						
Northeast	23,065	\$247	33.1	32.3	13.8	20.8
Midwest	30,906	139	31.1	40.5	11.7	16.7
South	35,276	202	24.7	39.3	13.0	22.9
West	26,183	194	33.9	32.1	13.1	20.9

^a Includes all other ethnic/racial groups not shown separately.

^b Includes population with private and public coverage.

^c Poor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^d For individuals ages 16 and over.

* Relative standard error is greater than or equal to 30 percent.

Note: Percents may not add to 100 because of rounding.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table 9. Dental services: Mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 1997

Population characteristic	Population with a visit in thousands	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
			None	\$1-\$99	\$100-\$199	\$200 or more
			Percent distribution			
Total	113,380	\$201	31.2	35.7	12.5	20.6
Age in years						
Under 6	4,406	41	50.3	40.0	5.3	4.4
6-18	26,718	195	42.4	35.0	8.3	14.3
19-44	42,229	158	31.5	38.2	11.9	18.4
45-64	26,564	248	25.3	33.3	14.9	26.5
65 and over	13,464	303	13.8	32.0	20.0	34.2
Sex						
Male	51,122	199	31.9	36.0	12.5	19.6
Female	62,259	202	30.7	35.4	12.4	21.5
Race/ethnicity						
White and other ^a	96,082	210	29.2	36.1	13.1	21.5
Black	8,974	128	43.2	36.1	8.5	12.1
Hispanic	8,324	169	41.6	29.9	9.0	19.5
Insurance status						
Under age 65:						
Any private ^b	85,324	196	31.3	37.6	11.7	19.5
Public only	7,652	50	75.2	15.6	4.1	5.1
Uninsured	6,940	229	16.1	41.6	16.5	25.8
Age 65 and over:						
Medicare only	2,726	380	9.2	30.9	19.2	40.7
Medicare and private	10,142	292	13.4	32.5	20.7	33.4
Medicare and other public	*533	151	46.1	25.9	*9.8	*18.3
Income^c						
Poor	8,807	137	52.5	27.0	7.4	13.1
Near poor	3,017	141	43.2	29.5	10.9	16.4
Low income	12,185	185	31.2	37.5	12.5	18.8
Middle income	37,869	183	29.8	37.6	12.5	20.1
High income	51,503	232	28.0	35.6	13.4	23.0
Employment status^d						
Employed	60,494	195	28.3	36.8	13.5	21.4
Not employed	27,559	245	25.1	33.0	15.1	26.8

Continued

Table 9. Dental services: Mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 1997 (continued)

Population characteristic	Population with a visit in thousands	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
			None	\$1-\$99	\$100-\$199	\$200 or more
			Percent distribution			
Census region						
Northeast	22,957	\$229	32.7	33.4	13.0	20.8
Midwest	29,840	171	34.5	35.5	12.9	17.1
South	34,098	209	25.4	39.8	12.6	22.1
West	26,486	198	33.8	32.4	11.3	22.5

^a Includes all other ethnic/racial groups not shown separately.

^b Includes population with private and public coverage.

^c Poor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^d For individuals ages 16 and over.

* Relative standard error is greater than or equal to 30 percent.

Note: Percents may not add to 100 because of rounding.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table 10. Dental services: Mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 1998

Population characteristic	Population with a visit in thousands	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
			None	\$1-\$99	\$100-\$199	\$200 or more
			Percent distribution			
Total	115,985	\$219	31.4	34.2	13.0	21.3
Age in years						
Under 6	5,150	44	53.0	35.4	8.2	*3.5
6-18	27,199	189	42.2	33.6	8.7	15.5
19-44	41,728	182	32.0	35.5	12.6	19.9
45-64	28,331	252	24.5	34.3	15.0	26.2
65 and over	13,577	384	14.2	31.1	21.0	33.7
Sex						
Male	51,864	207	31.7	35.3	13.0	19.9
Female	64,122	228	31.2	33.3	13.0	22.5
Race/ethnicity						
White and other ^a	98,025	231	29.2	34.7	13.7	22.4
Black	9,711	139	45.1	30.8	9.9	14.2
Hispanic	8,249	167	41.3	33.2	9.1	16.4
Insurance status						
Under age 65:						
Any private ^b	88,870	198	31.2	36.1	12.5	20.2
Public only	8,004	41	74.3	16.9	4.3	4.4
Uninsured	5,534	404	14.9	36.9	15.4	32.8
Age 65 and over:						
Medicare only	3,585	420	13.3	27.4	27.2	32.1
Medicare and private	9,310	383	13.1	32.7	19.4	34.9
Medicare and other public	661	211	35.3	27.4	*10.1	27.2
Income^c						
Poor	9,187	158	53.9	22.2	9.2	14.6
Near poor	3,142	172	46.2	24.0	14.3	15.5
Low income	9,938	228	29.9	36.1	14.4	19.6
Middle income	37,093	218	28.7	36.7	12.8	21.8
High income	56,625	230	29.0	34.8	13.5	22.7
Employment status^d						
Employed	61,189	205	28.6	35.8	13.3	22.4
Not employed	28,838	300	25.1	31.0	16.3	27.6

Continued

Table 10. Dental services: Mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 1998 (continued)

Population characteristic	Population with a visit in thousands	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
			None	\$1-\$99	\$100-\$199	\$200 or more
			Percent distribution			
Census region						
Northeast	23,178	\$235	33.3	33.8	12.8	20.2
Midwest	30,866	163	33.8	34.6	12.6	18.9
South	35,447	235	24.6	37.9	14.7	22.8
West	26,494	247	36.2	29.3	11.5	23.1

^a Includes all other ethnic/racial groups not shown separately.

^b Includes population with private and public coverage.

^c Poor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^d For individuals ages 16 and over.

* Relative standard error is greater than or equal to 30 percent.

Note: Percents may not add to 100 because of rounding.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table 11. Dental services: Mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 1999

Population characteristic	Population with a visit in thousands	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
			None	\$1-\$99	\$100-\$199	\$200 or more
			Percent distribution			
Total	119,002	\$220	30.7	34.5	13.1	21.8
Age in years						
Under 6	4,725	46	54.0	32.8	8.6	4.6
6-18	27,413	221	42.2	31.5	9.7	16.6
19-44	43,268	164	31.9	38.1	11.5	18.5
45-64	29,004	257	24.2	34.1	14.9	26.8
65 and over	14,591	368	10.6	30.7	22.1	36.6
Sex						
Male	52,976	215	30.5	35.6	12.3	21.6
Female	66,026	224	30.8	33.5	13.8	21.9
Race/ethnicity						
White and other ^a	101,077	232	28.8	34.6	13.8	22.7
Black	9,652	123	42.4	34.4	9.3	13.8
Hispanic	8,273	191	39.5	32.4	9.0	19.1
Insurance status						
Under age 65:						
Any private ^b	91,523	205	31.2	36.4	12.2	20.2
Public only	7,263	65	75.6	13.4	3.4	7.7
Uninsured	5,624	284	16.1	39.1	17.2	27.5
Age 65 and over:						
Medicare only	3,644	474	8.3	32.7	23.4	35.6
Medicare and private	10,110	339	9.2	30.8	22.2	37.7
Medicare and other public	804	168	38.4	21.6	16.1	23.9
Income^c						
Poor	8,749	149	50.3	24.0	9.2	16.6
Near poor	3,299	162	42.6	28.6	10.4	18.4
Low income	10,376	196	27.8	34.7	15.5	22.0
Middle income	36,292	214	28.6	38.0	12.9	20.5
High income	60,285	242	28.9	34.1	13.5	23.4
Employment status^d						
Employed	63,731	208	28.2	37.1	12.6	22.1
Not employed	8,578	275	23.5	30.8	17.4	28.2

Continued

Table 11. Dental services: Mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 1999 (continued)

Population characteristic	Population with a visit in thousands	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
			None	\$1-\$99	\$100-\$199	\$200 or more
			Percent distribution			
Census region						
Northeast	23,934	\$271	32.4	30.3	12.6	24.6
Midwest	30,633	175	33.2	35.7	12.9	18.2
South	37,277	211	25.2	39.2	14.3	21.3
West	27,157	240	33.8	30.2	12.1	23.9

^a Includes all other ethnic/racial groups not shown separately.

^b Includes population with private and public coverage.

^c Poor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^d For individuals ages 16 and over.

Note: Percents may not add to 100 because of rounding.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table 12. Dental services: Mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 2000

Population characteristic	Population with a visit in thousands	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
			None	\$1-\$99	\$100-\$199	\$200 or more
Total	115,819	\$237	31.6	31.8	13.6	23.0
Age in years						
Under 6	5,087	47	52.2	34.9	7.8	5.1
6-18	27,669	267	42.6	30.3	9.8	17.3
19-44	40,165	163	32.2	35.7	13.2	19.0
45-64	28,822	264	26.9	29.9	13.8	29.4
65 and over	14,076	400	10.5	26.6	23.8	39.1
Sex						
Male	51,851	223	32.6	32.5	12.8	22.2
Female	63,968	247	30.8	31.3	14.2	23.7
Race/ethnicity						
White and other ^a	97,697	252	29.7	31.7	14.1	24.5
Black	9,408	138	45.1	31.9	8.9	14.1
Hispanic	8,714	174	38.6	32.9	12.4	16.1
Insurance status						
Under age 65:						
Any private ^b	87,258	220	31.2	34.7	12.5	21.6
Public only	8,277	75	79.5	10.7	2.5	7.3
Uninsured	6,208	322	20.4	31.6	20.7	27.2
Age 65 and over:						
Medicare only	3,911	550	8.8	26.9	23.2	41.0
Medicare and private	9,529	351	9.2	27.1	24.4	39.4
Medicare and other public	608	164	43.0	17.3	20.0	19.6
Income^c						
Poor	8,309	134	52.4	25.1	10.0	12.5
Near poor	3,311	166	42.1	26.7	11.7	19.5
Low income	11,275	235	33.1	27.7	16.4	22.8
Middle income	36,461	241	29.8	32.9	14.0	23.3
High income	56,464	253	28.8	33.2	13.4	24.6
Employment status^d						
Employed	60,813	211	29.5	34.3	13.1	23.1
Not employed	27,967	315	23.6	26.9	19.0	30.5

Continued

Table 12. Dental services: Mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 2000 (continued)

Population characteristic	Population with a visit in thousands	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
			None	\$1-\$99	\$100-\$199	\$200 or more
			Percent distribution			
Census region						
Northeast	24,703	\$261	31.0	28.7	15.7	24.6
Midwest	29,827	\$204	32.9	35.7	12.1	19.3
South	35,902	\$245	25.8	35.2	14.4	24.6
West	25,387	\$240	38.8	25.5	12.1	23.6

^a Includes all other ethnic/racial groups not shown separately.

^b Includes population with private and public coverage.

^c Poor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^d For individuals ages 16 and over.

Note: Percents may not add to 100 because of rounding.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Technical Appendix

The data used in this report were obtained from interviews conducted as part of the Household Component of the Medical Expenditure Panel Survey (MEPS) for 1996, 1997, 1998, 1999, and 2000. MEPS is an ongoing annual survey of the civilian noninstitutionalized population. MEPS collects detailed information on health care use and expenditures (including sources of payment), health insurance, health status, access, and quality. It also collects detailed demographic and economic information on the persons and households surveyed. More information about MEPS can be found at <http://www.meps.ahrq.gov>. For a detailed description of the survey and its methodology, also see J. Cohen (1997) and S. Cohen (1997).

Survey Design

Each year, the MEPS sample is drawn from households that completed the prior year's National Health Interview Survey (NHIS). Households selected for participation in the 1996 MEPS completed interviews in the 1995 NHIS, the 1997 MEPS sample was drawn from the 1996 NHIS, and so on. Because NHIS is used as a sampling frame, the MEPS design is not only nationally representative of the civilian noninstitutionalized population but also includes an oversampling of Hispanics and blacks.

MEPS collects data in an overlapping panel design. Each household completes five interviews ("rounds" of data collection) over a period of 2½ years, providing data for two full calendar years of estimates. Data from Rounds 1, 2, and 3 provide information for the first year of estimation, and data from Rounds 3, 4, and 5 provide data for the second year of estimates. For example, estimates for 2000 are derived from combining Rounds 3, 4, and 5 of the 1999 panel and Rounds 1, 2, and 3 of the 2000 panel. An exception is 1996, when the MEPS longitudinal data collection was initiated. For that year, a single panel's data were used for estimation. In MEPS, a single respondent provides most of the information to an interviewer using computer-assisted personal interviewing (CAPI). In addition to the CAPI interview, beginning in 2000, limited data have been collected using a self-administered questionnaire (SAQ).

Definitions

Dental services/visit. This refers to care by or visits to any type of dental care provider, including general dentists, dental hygienists, dental technicians, dental surgeons, orthodontists, endodontists, and periodontists.

Dental expenditures (expenses). In this report, expenditures are the amount actually paid for dental services. More specifically, in MEPS, expenditures are defined as the sum of payments for care received, including out-of-pocket payments and payments made by private insurance, Medicaid, Medicare, and other sources.

This definition of expenditures differs somewhat from the definition used in predecessor surveys, the 1987 National Medical Expenditure Survey (NMES) and the 1977 National Medical Care Expenditure Survey, in which charges rather than payments were used to measure medical expenditures. Users who wish to compare the expenditure data presented in this report with data from the 1987 and/or 1977 surveys should consult Monheit, Wilson, and Arnett (1999). AHRQ has developed factors to apply to the 1987 NMES expenditure data to facilitate longitudinal analysis. These can be accessed via the CFACT Data Center. See <http://www.meps.ahrq.gov/datacenter.htm> for more information. Details on the editing and imputation methodology used to develop the dental expenditure variables presented in this report can be found in the documentation for the dental event files. See <http://www.meps.ahrq.gov/puffiles/h51b/h51bdoc.htm> for the 2000 dental event file link.

It should also be noted that it is common for several dental visits to be included in a single fee. These "flat fees" are particularly common for orthodontia and some types of dental reconstruction and surgery. These flat fee groups may cross calendar years. For flat fees, expenses for the entire episode are placed on the initial event.

Sources of payment. In this report, categories of payments that sum to total expenditures are reported. Out-of-pocket payments are payments made by the user or the user's family. Private health insurance includes employment-related as well as directly purchased insurance, including any dental benefit plans. In this report, the "other" category includes Federal programs such as programs of the Department of Veterans Affairs, TRICARE (Armed-Forces-related coverage), the Indian

Health Service, and military facilities; State and local programs other than Medicaid; and other sources such as Workers' Compensation, automobile insurance, and other kinds of insurance not specified.

Age. In this report age is the sampled person's age as of December 31st of the reported year.

Race/ethnicity. Classification by race and ethnicity was based on information provided by the household respondent for each household member. The respondent was asked if each person's race was best described as black, white, Asian or Pacific Islander, American Indian, or Alaska Native. The respondent was also asked if each person's main national origin or ancestry was Puerto Rican, Cuban, Mexican, Mexicano, Mexican American, or Chicano; other Latin American; or other Spanish. Persons claiming a main national origin or ancestry in one of these Hispanic groups, regardless of racial background, were classified as Hispanic. Since the Hispanic grouping can include persons of any race, the race categories of black and white/other exclude Hispanics.

Insurance status. Respondents were asked about health insurance coverage for themselves and all household members at each round of interviewing. The insurance variables reflect having general medical insurance, which may or may not include coverage of dental care.

Persons under 65 were classified according to whether they had private health insurance, had public coverage only, or were uninsured all year.

- *Any private insurance.* This group includes those who, at any time in the survey year, had individual or group plan coverage for medical or related expenses, including prepaid health plans such as health maintenance organizations but excluding extra cash coverage plans, medical benefits linked only to specific diseases (dread disease plans), and casualty benefit plans (such as automobile insurance).
- *Public insurance only.* This group includes persons who were never covered by private insurance during the year but who were covered at any time by Medicare, TRICARE (which covers retired members of the uniformed services and the spouses and children of active-duty military), Medicaid, and other State and local medical assistance programs.
- *Uninsured all year.* This refers to all persons under age 65 with neither public nor private insurance coverage throughout the calendar year.

In this report, persons over age 65 were classified by whether they were covered by Medicare only, by Medicare and other public coverage, or by Medicare and private insurance programs.

Employment status. For each year of the report, persons 16 years old and over were asked whether they were currently employed. Persons with a job at any time during the year were considered employed in this report.

Income. Each year, persons were classified according to their family's income in terms of poverty status. In this report, poverty status is the ratio of the family's income to the Federal poverty thresholds, which control for the size of the family and the age of the head of the family. In this report, the following classification of poverty status was used.

- *Poor*—Persons in families with income less than 100 percent of the poverty line, including those who reported negative income.
- *Near poor*—Persons in families with income from 100 percent to less than 125 percent of the poverty line.
- *Low income*—Persons in families with income from 125 percent to less than 200 percent of the poverty line.
- *Middle income*—Persons in families with income from 200 percent to less than 400 percent of the poverty line.
- *High income*—Persons in families with income over 400 percent of the poverty line.

In MEPS, personal income from each household member was summed to create family income. Potential income sources asked about in the survey interview include annual earnings from wages, salaries, bonuses, tips, and commissions; business and farm gains and losses; unemployment and Workers' Compensation payments; interest and dividends; alimony, child support, and other private cash transfers; private pensions; individual retirement account (IRA) withdrawals; Social Security and Department of Veterans Affairs payments; Supplemental Security Income and cash welfare payments from public assistance, TANF (Temporary Assistance for Needy Families; formerly known as Aid to Families with Dependent Children, or AFDC); gains or losses from estates, trusts, partnerships, S corporations, rent, and royalties; and a small amount of "other" income.

Region of residence. Each MEPS sampled person was classified as living in one of the following four regions as defined by the U.S. Census Bureau.

- *Northeast*—Maine, New Hampshire, Vermont, Massachusetts, Rhode Island, Connecticut, New York, New Jersey, and Pennsylvania.
- *Midwest*—Ohio, Indiana, Illinois, Michigan, Wisconsin, Minnesota, Iowa, Missouri, South Dakota, North Dakota, Nebraska, and Kansas.
- *South*—Delaware, Maryland, District of Columbia, Virginia, West Virginia, North Carolina, South Carolina, Georgia, Florida, Kentucky, Tennessee, Alabama, Mississippi, Arkansas, Louisiana, Oklahoma, and Texas.
- *West*—Montana, Idaho, Wyoming, Colorado, New Mexico, Arizona, Utah, Nevada, Washington, Oregon, California, Alaska, and Hawaii.

Sample Design and Accuracy of Estimates

The statistics presented in this report are affected by both sampling error and sources of nonsampling error, which include nonresponse bias, respondent reporting errors, interviewer effects, and data processing misspecifications. The MEPS person-level estimation weights include nonresponse adjustments and poststratification adjustments to population estimates

derived from the Current Population Survey based on cross-classifications by region, metropolitan statistical area, age, race/ethnicity, and sex. The overall MEPS response rate reflects response to both the MEPS and NHIS interview. The sample size and annual response rates are:

Calendar year	Sample size	Pooled annual response rate
1996	21,571	70.2
1997	32,636	66.4
1998	22,953	67.9
1999	23,565	64.3
2000	23,839	65.3

Rounding

Estimates presented in the tables were rounded to the nearest 0.1 percent. Population estimates were rounded to the nearest thousand. Because of this (as well as conventions for displaying missing data, as indicated in each table), some of the subpopulation estimates presented in the tables will not sum exactly to the overall population total. Standard errors, presented in Tables A-L, were rounded to the nearest 0.01.

Standard Error Tables

Table A. Dental services: Standard errors for annual percent of population with a visit, by selected population characteristics, United States, 1996-2000
Corresponds to Table 1

Population characteristic	1996		1997		1998		1999		2000	
	Total population in thousands	Percent with a visit	Total population in thousands	Percent with a visit	Total population in thousands	Percent with a visit	Total population in thousands	Percent with a visit	Total population in thousands	Percent with a visit
Total	5,858	0.70	4,692	0.60	6,518	0.73	7,791	0.62	11,667	0.74
Age in years					Standard error					
Under 6	901	1.07	727	0.93	924	1.10	930	1.06	1,219	1.30
6-18	1,747	1.26	1,295	1.07	1,502	1.25	1,772	1.16	2,444	1.18
19-44	2,686	0.78	2,158	0.73	2,878	0.90	3,369	0.77	4,832	0.82
45-64	1,485	1.03	1,303	0.93	1,821	1.07	2,054	0.99	2,996	1.42
65 and over	1,141	1.37	997	1.22	1,235	1.38	1,180	1.34	1,385	1.28
Sex										
Male	2,939	0.81	2,484	0.68	3,399	0.78	4,059	0.66	5,984	0.74
Female	3,144	0.74	2,471	0.67	3,363	0.87	3,931	0.74	5,841	0.87
Race/ethnicity										
White and other ^a	4,999	0.82	4,366	0.69	6,083	0.82	7,064	0.72	10,629	0.83
Black	2,032	1.09	1,508	1.00	2,156	1.37	2,272	1.35	2,965	1.32
Hispanic	1,556	1.13	1,327	0.94	1,605	1.02	1,725	0.99	2,829	1.12
Insurance status										
Under age 65:										
Any private ^b	4,618	0.77	3,805	0.66	5,081	0.78	6,121	0.75	8,688	0.87
Public only	1,401	1.35	1,123	1.04	1,375	1.21	1,313	1.23	1,863	1.35
Uninsured	1,394	1.05	1,060	0.90	1,344	0.94	1,317	1.06	1,710	1.15
Age 65 and over:										
Medicare only	480	2.35	430	2.02	592	2.10	576	2.26	729	2.07
Medicare and private	906	1.65	809	1.60	874	1.77	836	1.63	971	1.66
Medicare and other public	271	2.22	228	2.24	320	2.03	298	2.46	280	2.20

Continued

Table A. Dental services: Standard errors for annual percent of population with a visit, by selected population characteristics, United States, 1996-2000 (continued)
Corresponds to Table 1

Population characteristic	1996			1997			1998			1999			2000		
	Total population in thousands	Percent with a visit	Standard error	Total population in thousands	Percent with a visit	Standard error	Total population in thousands	Percent with a visit	Standard error	Total population in thousands	Percent with a visit	Standard error	Total population in thousands	Percent with a visit	Standard error
Income^c															
Poor	1,554	1.10		1,427	0.86		1,720	1.18		1,528	1.13		1,971	1.11	
Near poor	759	1.99		654	1.48		706	2.30		775	2.03		960	2.07	
Low income	1,647	1.24		1,294	1.11		1,497	1.23		1,536	1.18		1,816	1.17	
Middle income	2,855	0.86		2,326	0.83		2,659	1.01		3,269	0.94		4,555	0.93	
High income	3,047	0.95		2,735	0.89		3,462	0.94		3,946	0.94		5,245	1.11	
Employment status^d															
Employed	3,219	0.74		2,713	0.67		3,777	0.82		4,471	0.70		6,420	0.87	
Not employed	1,828	0.96		1,547	0.85		1,903	1.02		2,117	0.91		3,103	1.00	
Census region															
Northeast	2,134	1.54		2,000	1.36		3,362	1.51		2,722	1.36		3,200	1.68	
Midwest	2,835	1.42		2,366	1.20		2,625	1.81		2,519	1.40		2,966	1.59	
South	4,375	1.17		3,334	1.04		3,792	1.18		4,718	1.01		6,187	1.15	
West	2,329	1.40		1,946	1.14		3,351	1.32		5,020	1.17		8,687	1.41	

^a Includes all other ethnic/racial groups not shown separately.

^b Includes population with private and public coverage.

^c Poor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^d For individuals ages 16 and over.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table B. Dental services: Standard errors for annual total mean visits per person with a visit, by selected population characteristics, United States, 1996-2000
 Corresponds to Table 2

Population characteristic	1996		1997		1998		1999		2000	
	Population with a visit in thousands	Mean visits per person with a visit	Population with a visit in thousands	Mean visits per person with a visit	Population with a visit in thousands	Mean visits per person with a visit	Population with a visit in thousands	Mean visits per person with a visit	Population with a visit in thousands	Mean visits per person with a visit
Total	3,200	0.03	2,708	0.03	3,586	0.03	3,972	0.03	5,709	0.03
Age in years										
Under 6	321	0.05	248	0.05	330	0.06	315	0.04	372	0.04
6-18	1,093	0.08	894	0.07	1,007	0.08	1,171	0.08	1,482	0.08
19-44	1,379	0.04	1,233	0.04	1,534	0.04	1,615	0.04	2,247	0.05
45-64	980	0.06	860	0.05	1,233	0.05	1,283	0.06	1,900	0.07
65 and over	700	0.09	604	0.08	686	0.11	731	0.09	774	0.08
Sex										
Male	1,581	0.05	1,369	0.04	1,756	0.04	1,853	0.04	2,658	0.04
Female	1,806	0.04	1,565	0.04	2,070	0.04	2,252	0.04	3,157	0.04
Race/ethnicity										
White and other ^a	3,015	0.04	2,604	0.03	3,488	0.04	3,748	0.04	5,373	0.04
Black	591	0.08	528	0.07	647	0.06	748	0.08	1,050	0.10
Hispanic	493	0.07	386	0.07	399	0.07	514	0.09	705	0.06
Insurance status										
Under age 65:										
Any private ^b	2,886	0.04	2,320	0.03	3,096	0.04	3,496	0.04	4,752	0.04
Public only	568	0.08	396	0.08	477	0.07	506	0.09	741	0.17
Uninsured	420	0.12	363	0.08	370	0.17	390	0.10	516	0.12
Age 65 and over:										
Medicare only	217	0.20	231	0.20	317	0.18	334	0.14	333	0.16
Medicare and private	618	0.11	558	0.10	560	0.12	574	0.11	610	0.08
Medicare and other public	93	0.29	89	0.20	96	0.26	112	0.67	88	0.29

Continued

Table B. Dental services: Standard errors for annual total mean visits per person with a visit, by selected population characteristics, United States, 1996-2000 (continued)
Corresponds to Table 2

Population characteristic	1996		1997		1998		1999		2000	
	Population with a visit in thousands	Mean visits per person with a visit	Population with a visit in thousands	Mean visits per person with a visit	Population with a visit in thousands	Mean visits per person with a visit	Population with a visit in thousands	Mean visits per person with a visit	Population with a visit in thousands	Mean visits per person with a visit
Standard error										
Income^c										
Poor	565	0.08	418	0.12	560	0.08	594	0.08	639	0.07
Near poor	321	0.15	258	0.11	340	0.14	332	0.18	397	0.36
Low income	661	0.09	613	0.08	573	0.09	638	0.10	737	0.10
Middle income	1,510	0.06	1,273	0.05	1,385	0.05	1,593	0.06	2,084	0.05
High income	2,138	0.05	1,769	0.04	2,348	0.05	2,507	0.05	3,391	0.05
Employment status^d										
Employed	1,889	0.04	1,637	0.03	2,216	0.04	2,444	0.04	3,412	0.04
Not employed	999	0.06	877	0.06	1,027	0.06	1,109	0.06	1,439	0.07
Census region										
Northeast	1,449	0.07	1,315	0.07	1,743	0.09	1,606	0.09	2,138	0.08
Midwest	1,582	0.06	1,369	0.05	1,742	0.06	1,509	0.06	1,852	0.07
South	2,210	0.06	1,675	0.06	2,055	0.06	2,136	0.06	2,645	0.06
West	1,152	0.06	1,142	0.05	1,676	0.07	2,538	0.07	4,070	0.04

^a Includes all other ethnic/racial groups not shown separately.

^b Includes population with private and public coverage.

^c Poor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^d For individuals ages 16 and over.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table C. Dental services: Standard errors for mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 1996

Corresponds to Table 3

Population characteristic	Mean expense per person with a visit	Source of payment			
		Out of pocket	Private health insurance	Medicaid	Other ^a
		Standard error			
Total	9.6	0.9	1.0	0.4	0.5
Age in years					
Under 6	8.8	3.4	3.5	2.6	0.9
6-18	27.2	2.1	2.1	0.7	1.2
19-44	12.4	1.4	1.4	0.6	0.3
45-64	16.2	1.5	1.5	0.5	0.7
65 and over	27.2	2.1	1.7	0.3	1.8
Sex					
Male	14.9	1.3	1.4	0.5	0.7
Female	12.6	1.2	1.1	0.4	0.6
Race/ethnicity					
White and other ^b	10.7	1.0	1.1	0.4	0.5
Black	31.8	3.6	2.9	1.9	2.4
Hispanic	23.8	2.8	2.7	1.5	2.3
Insurance status					
Under age 65:					
Any private ^c	11.4	1.0	1.1	0.1	0.3
Public only	16.4	4.1	0.0	4.4	1.5
Uninsured	34.3	5.0	0.0	0.0	5.0
Age 65 and over:					
Medicare only	60.2	4.5	0.0	0.0	4.5
Medicare and private	31.6	2.5	2.0	0.0	2.0
Medicare and other public	119.7	12.2	0.0	7.4	9.0
Income^d					
Poor	21.9	4.3	3.0	4.3	1.7
Near poor	35.1	5.6	3.7	4.6	2.1
Low income	17.2	2.8	2.7	0.8	0.5
Middle income	17.4	1.5	1.6	0.3	0.9
High income	16.4	1.3	1.3	0.1	0.7
Employment status^e					
Employed	11.9	1.1	1.1	0.3	0.5
Not employed	20.1	2.0	1.8	0.7	1.0

Continued

Table C. Dental services: Standard errors for mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 1996 (continued)

Corresponds to Table 3

Population characteristic	Mean expense per person with a visit	Source of payment			
		Out of pocket	Private health insurance	Medicaid	Other ^a
		Standard error			
Census region					
Northeast	24.7	1.9	1.8	0.7	0.8
Midwest	20.1	1.9	2.1	0.4	0.3
South	13.6	1.8	1.6	0.7	0.6
West	21.2	1.5	1.8	0.9	1.3

^aIncludes the Department of Veterans Affairs; CHAMPUS or TRICARE (Armed-Forces-related coverage); Indian Health Service; military treatment facilities; Federal, State, and local programs other than Medicaid; and other kinds of insurance not specified.

^bIncludes all other ethnic/racial groups not shown separately.

^cIncludes population with private and public coverage.

^dPoor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^eFor individuals ages 16 and over.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table D. Dental services: Standard errors for mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 1997

Corresponds to Table 4

Population characteristic	Mean expense per person with a visit	Source of payment			
		Out of pocket	Private health insurance	Medicaid	Other ^a
		Standard error			
Total	9.2	1.0	1.0	0.3	0.4
Age in years					
Under 6	8.7	3.0	3.6	3.5	1.0
6-18	20.0	1.6	1.9	0.9	0.9
19-44	11.8	1.4	1.4	0.3	0.5
45-64	25.1	2.5	2.3	0.2	0.5
65 and over	23.2	2.3	1.8	0.8	1.9
Sex					
Male	15.9	1.8	1.6	0.4	0.5
Female	11.0	1.0	1.0	0.4	0.6
Race/ethnicity^b					
White	10.4	1.1	1.1	0.3	0.4
Black	26.9	3.8	3.2	2.0	1.2
Hispanic	28.4	2.5	2.7	1.5	1.9
Insurance status					
Under age 65:					
Any private ^c	11.6	1.2	1.2	0.2	0.3
Public only	16.0	4.5	0.0	4.4	2.0
Uninsured	28.1	3.4	0.0	0.0	3.4
Age 65 and over:					
Medicare only	56.6	6.6	0.0	0.0	6.6
Medicare and private	26.7	2.4	2.2	0.4	1.0
Medicare and other public	82.9	15.1	0.0	17.9	4.6
Income^d					
Poor	24.4	4.1	2.5	4.2	1.5
Near poor	32.5	5.7	5.7	1.8	3.5
Low income	22.8	2.7	2.3	0.7	2.8
Middle income	11.7	1.6	1.6	0.1	0.7
High income	17.3	1.6	1.5	0.1	0.4
Employment status^e					
Employed	13.2	1.6	1.5	0.1	0.5
Not employed	16.1	1.4	1.4	0.6	0.9

Continued

Table D. Dental services: Standard errors for mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 1997 (continued)

Corresponds to Table 4

Population characteristic	Mean expense per person with a visit	Source of payment			
		Out of pocket	Private health insurance	Medicaid	Other ^a
		Standard error			
Census region					
Northeast	27.4	2.9	2.6	0.7	0.4
Midwest	13.3	1.9	2.0	0.7	0.8
South	15.2	1.7	1.8	0.3	0.9
West	19.4	1.5	1.3	0.7	0.9

^aIncludes the Department of Veterans Affairs; CHAMPUS or TRICARE (Armed-Forces-related coverage); Indian Health Service; military treatment facilities; Federal, State, and local programs other than Medicaid; and other kinds of insurance not specified.

^bIncludes all other ethnic/racial groups not shown separately.

^cIncludes population with private and public coverage.

^dPoor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^eFor individuals ages 16 and over.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table E. Dental services: Standard errors for mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 1998

Corresponds to Table 5

Population characteristic	Mean expense per person with a visit	Source of payment			
		Out of pocket	Private health insurance	Medicaid	Other ^a
		Standard error			
Total	13.3	1.1	1.1	0.3	0.4
Age in years					
Under 6	10.6	3.5	3.4	3.1	1.5
6-18	31.0	2.3	2.2	1.0	0.5
19-44	15.4	1.7	1.7	0.5	0.7
45-64	22.5	1.6	1.6	0.3	0.8
65 and over	51.0	2.4	2.1	0.2	1.2
Sex					
Male	18.4	1.8	1.7	0.5	0.7
Female	17.2	1.4	1.3	0.4	0.4
Race/ethnicity^b					
White	14.9	1.3	1.3	0.3	0.4
Black	22.2	3.1	2.9	1.6	1.3
Hispanic	25.9	3.4	2.8	1.9	1.2
Insurance status					
Under age 65:					
Any private ^c	14.4	1.1	1.2	0.1	0.4
Public only	15.4	3.2	0.0	3.4	1.1
Uninsured	51.2	2.0	0.0	0.0	2.0
Age 65 and over:					
Medicare only	105.8	3.6	0.0	0.0	3.6
Medicare and private	55.1	3.1	2.8	0.0	0.5
Medicare and other public	45.4	7.4	0.0	4.8	6.3
Income^d					
Poor	28.0	5.2	2.3	4.7	1.5
Near poor	48.8	6.2	4.4	5.3	0.3
Low income	36.5	4.2	3.4	1.9	1.3
Middle income	20.6	2.1	2.2	0.2	0.6
High income	18.5	1.3	1.4	0.0	0.6
Employment status^e					
Employed	14.6	1.3	1.4	0.2	0.5
Not employed	28.0	2.1	1.7	0.6	1.0

Continued

Table E. Dental services: Standard errors for mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 1998 (continued)

Corresponds to Table 5

Population characteristic	Mean expense per person with a visit	Source of payment			
		Out of pocket	Private health insurance	Medicaid	Other ^a
		Standard error			
Census region					
Northeast	34.4	2.1	2.0	0.8	0.8
Midwest	17.5	2.2	2.2	0.4	0.5
South	23.0	1.9	1.9	0.3	0.8
West	30.3	2.3	2.3	0.9	0.7

^aIncludes the Department of Veterans Affairs; CHAMPUS or TRICARE (Armed-Forces-related coverage); Indian Health Service; military treatment facilities; Federal, State, and local programs other than Medicaid; and other kinds of insurance not specified.

^bIncludes all other ethnic/racial groups not shown separately.

^cIncludes population with private and public coverage.

^dPoor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^eFor individuals ages 16 and over.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table F. Dental services: Standard errors for mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 1999

Corresponds to Table 6

Population characteristic	Mean expense per person with a visit	Source of payment			
		Out of pocket	Private health insurance	Medicaid	Other ^a
		Standard error			
Total	13.4	1.2	1.1	0.4	0.4
Age in years					
Under 6	17.1	4.7	5.6	8.5	1.4
6-18	35.4	2.2	2.2	1.0	0.6
19-44	14.0	1.5	1.5	0.7	0.5
45-64	21.3	1.7	1.6	0.2	0.7
65 and over	32.5	2.5	2.1	0.4	0.9
Sex					
Male	16.2	1.7	1.7	0.6	0.4
Female	16.7	1.3	1.2	0.5	0.5
Race/ethnicity^b					
White	14.8	1.3	1.2	0.4	0.4
Black	30.5	3.3	3.7	2.4	1.1
Hispanic	23.5	2.8	2.6	1.0	1.1
Insurance status					
Under age 65:					
Any private ^c	15.0	1.3	1.2	0.2	0.4
Public only	24.7	4.2	0.0	4.6	2.2
Uninsured	31.0	3.1	0.0	0.0	3.1
Age 65 and over:					
Medicare only	94.5	2.0	0.0	0.0	2.0
Medicare and private	31.6	3.0	2.6	0.0	1.1
Medicare and other public	41.6	9.0	0.0	8.7	4.0
Income^d					
Poor	26.6	3.8	3.1	4.3	1.5
Near poor	33.6	7.0	3.0	6.9	3.2
Low income	25.0	3.1	3.1	2.2	1.3
Middle income	18.2	1.9	1.8	0.6	0.6
High income	20.4	1.7	1.6	0.1	0.5
Employment status^e					
Employed	13.6	1.2	1.3	0.3	0.4
Not employed	20.2	2.0	1.8	0.8	0.6

Continued

Table F. Dental services: Standard errors for mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 1999 (continued)

Corresponds to Table 6

Population characteristic	Mean expense per person with a visit	Source of payment			
		Out of pocket	Private health insurance	Medicaid	Other ^a
		Standard error			
Census region					
Northeast	29.8	2.7	2.1	1.0	0.6
Midwest	16.4	2.3	2.2	0.3	0.7
South	17.1	1.9	1.7	0.5	0.6
West	40.7	2.4	2.5	1.0	0.9

^aIncludes the Department of Veterans Affairs; CHAMPUS or TRICARE (Armed-Forces-related coverage); Indian Health Service; military treatment facilities; Federal, State, and local programs other than Medicaid; and other kinds of insurance not specified.

^bIncludes all other ethnic/racial groups not shown separately.

^cIncludes population with private and public coverage.

^dPoor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^eFor individuals ages 16 and over.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table G. Dental services: Standard errors for mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 2000

Corresponds to Table 7

Population characteristic	Mean expense per person with a visit	Source of payment			
		Out of pocket	Private health insurance	Medicaid	Other ^a
		Standard error			
Total	14.2	1.1	1.1	0.9	0.4
Age in years					
Under 6	20.5	3.3	4.2	6.7	2.6
6-18	45.0	2.8	3.3	1.6	0.4
19-44	17.1	1.8	2.0	2.5	0.8
45-64	23.0	1.5	1.6	0.3	0.8
65 and over	34.0	2.2	1.8	0.1	1.1
Sex					
Male	17.4	1.3	1.5	1.6	0.7
Female	22.2	1.6	1.7	0.8	0.4
Race/ethnicity^b					
White	15.9	1.2	1.2	1.0	0.4
Black	38.7	4.1	4.7	1.6	1.1
Hispanic	31.2	3.1	2.6	1.1	1.2
Insurance status					
Under age 65:					
Any private ^c	19.2	1.3	1.1	0.8	0.4
Public only	30.2	4.6	0.0	4.7	1.9
Uninsured	46.7	3.7	0.0	0.0	3.7
Age 65 and over:					
Medicare only	70.8	3.0	0.0	0.0	3.0
Medicare and private	37.9	2.6	2.4	0.0	0.7
Medicare and other public	106.5	11.4	0.0	4.7	14.5
Income^d					
Poor	34.6	4.0	4.7	4.5	3.3
Near poor	128.4	10.7	8.4	16.5	2.6
Low income	29.3	3.0	2.4	2.6	1.3
Middle income	25.3	2.2	1.9	1.4	0.8
High income	27.1	1.6	1.6	0.1	0.5
Employment status^e					
Employed	14.4	1.3	1.3	1.3	0.6
Not employed	26.8	1.6	1.6	1.1	0.8

Continued

Table G. Dental services: Standard errors for mean expense per person with a visit and percent distribution of sources of payment, by selected population characteristics, United States, 2000 (continued)

Corresponds to Table 7

Population characteristic	Mean expense per person with a visit	Source of payment			
		Out of pocket	Private health insurance	Medicaid	Other ^a
		Standard error			
Census region					
Northeast	26.5	1.7	2.0	1.1	0.9
Midwest	24.7	1.5	1.6	1.4	0.8
South	26.9	2.6	2.7	0.2	0.8
West	42.8	2.9	2.3	3.0	0.6

^aIncludes the Department of Veterans Affairs; CHAMPUS or TRICARE (Armed-Forces-related coverage); Indian Health Service; military treatment facilities; Federal, State, and local programs other than Medicaid; and other kinds of insurance not specified.

^b Includes all other ethnic/racial groups not shown separately.

^c Includes population with private and public coverage.

^d Poor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^e For individuals ages 16 and over.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table H. Dental services: Standard errors for mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 1996

Corresponds to Table 8

Population characteristic	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
		None	\$1-\$99	\$100-\$199	\$200 or more
		Standard error			
Total	6.4	0.9	0.8	0.5	0.5
Age in years					
Under 6	5.6	3.3	3.2	1.8	1.0
6-18	16.0	1.5	1.4	0.8	1.0
19-44	8.2	1.2	1.0	0.6	0.8
45-64	11.8	1.2	1.2	0.8	1.0
65 and over	21.2	1.3	1.8	1.4	1.7
Sex					
Male	9.1	1.0	1.0	0.6	0.7
Female	8.9	1.0	0.9	0.6	0.8
Race/ethnicity^a					
White	7.1	0.9	0.8	0.5	0.6
Black	22.8	2.9	2.5	1.1	1.4
Hispanic	15.1	2.0	1.9	1.1	1.3
Insurance status					
Under age 65:					
Any private ^b	7.1	0.9	0.9	0.5	0.6
Public only	9.0	2.2	1.9	0.9	0.9
Uninsured	29.2	1.7	2.4	2.0	2.3
Age 65 and over:					
Medicare only	47.0	2.3	3.3	3.3	3.9
Medicare and private	25.0	1.5	2.0	1.6	1.9
Medicare and other public	115.8	8.5	7.5	4.5	6.4
Income^c					
Poor	17.9	2.5	1.9	1.1	1.5
Near poor	27.8	5.0	3.6	2.8	3.0
Low income	14.6	2.2	2.3	1.4	1.5
Middle income	11.0	1.4	1.3	0.8	0.9
High income	10.7	1.1	1.1	0.7	0.8
Employment status^d					
Employed	7.2	0.9	0.9	0.6	0.7
Not employed	14.0	1.2	1.2	0.9	1.1

Continued

Table H. Dental services: Standard errors for mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 1996 (continued)

Corresponds to Table 8

Population characteristic	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
		None	\$1-\$99	\$100-\$199	\$200 or more
		Standard error			
Census region					
Northeast	18.3	1.5	1.3	1.0	1.2
Midwest	10.5	1.6	1.4	0.8	1.1
South	10.8	1.7	1.4	0.8	1.0
West	12.5	2.0	1.8	0.9	1.1

^a Includes all other ethnic/racial groups not shown separately.

^b Includes population with private and public coverage.

^c Poor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^d For individuals ages 16 and over.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table I. Dental services: Standard errors for mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 1997

Corresponds to Table 9

Population characteristic	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
		None	\$1-\$99	\$100-\$199	\$200 or more
		Standard error			
Total	7.3	0.7	0.7	0.4	0.5
Age in years					
Under 6	5.0	2.9	2.9	1.3	1.1
6-18	12.1	1.2	1.3	0.6	0.8
19-44	8.2	1.0	1.0	0.6	0.7
45-64	23.4	1.1	1.1	0.8	1.0
65 and over	17.5	1.1	1.6	1.3	1.6
Sex					
Male	13.9	0.8	0.8	0.5	0.7
Female	7.3	0.8	0.8	0.5	0.6
Race/ethnicity					
White and other ^a	8.3	0.7	0.7	0.4	0.6
Black	20.1	2.3	2.2	1.1	1.2
Hispanic	16.0	1.8	1.6	0.8	1.4
Insurance status					
Under age 65:					
Any private ^b	9.1	0.8	0.8	0.4	0.6
Public only	11.7	2.0	1.8	0.7	0.9
Uninsured	22.2	1.6	2.4	1.6	2.1
Age 65 and over:					
Medicare only	43.7	1.8	4.1	2.8	3.8
Medicare and private	20.3	1.2	1.7	1.5	1.8
Medicare and other public	54.8	7.8	6.9	4.3	6.0
Income^c					
Poor	20.5	2.1	1.7	0.9	1.3
Near poor	24.3	3.2	3.0	1.8	2.4
Low income	15.5	2.3	2.0	1.1	1.5
Middle income	9.4	1.2	1.1	0.6	0.9
High income	13.9	1.0	0.9	0.6	0.8
Employment status^d					
Employed	11.3	0.9	0.8	0.6	0.7
Not employed	11.7	1.0	1.1	0.8	1.0

Continued

Table I. Dental services: Standard errors for mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 1997 (continued)

Corresponds to Table 9

Population characteristic	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
		None	\$1-\$99	\$100-\$200	\$200 or more
		Standard error			
Census region					
Northeast	25.6	1.3	1.4	0.8	1.0
Midwest	10.5	1.6	1.5	0.8	0.9
South	10.8	0.9	1.1	0.6	0.9
West	12.4	1.5	1.3	0.7	1.0

^a Includes all other ethnic/racial groups not shown separately.

^b Includes population with private and public coverage.

^c Poor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^d For individuals ages 16 and over.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table J. Dental services: Standard errors for mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 1998

Corresponds to Table 10

Population characteristic	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
		None	\$1-\$99	\$100-\$199	\$200 or more
		Standard error			
Total	9.4	0.8	0.9	0.5	0.6
Age in years					
Under 6	7.1	3.3	3.2	1.7	1.1
6-18	18.0	1.5	1.6	0.8	1.0
19-44	10.7	1.2	1.3	0.7	0.9
45-64	14.4	1.4	1.2	1.1	1.2
65 and over	46.2	1.4	1.8	1.7	2.1
Sex					
Male	13.8	1.0	1.2	0.6	0.9
Female	12.0	0.8	1.0	0.6	0.8
Race/ethnicity					
White and other ^a	10.8	0.8	1.0	0.5	0.7
Black	15.1	2.5	2.2	1.2	1.3
Hispanic	20.0	2.2	2.0	1.0	1.3
Insurance status					
Under age 65:					
Any private ^b	8.8	0.9	1.0	0.5	0.7
Public only	7.2	2.2	1.9	0.9	0.9
Uninsured	49.3	2.0	2.6	2.3	2.8
Age 65 and over:					
Medicare only	91.2	2.4	3.2	3.7	3.2
Medicare and private	52.0	1.7	2.4	2.0	2.5
Medicare and other public	45.3	5.9	5.8	4.3	5.7
Income^c					
Poor	27.7	2.4	2.0	1.2	1.8
Near poor	43.1	5.0	3.4	2.5	3.1
Low income	32.8	2.4	2.2	1.6	1.7
Middle income	16.6	1.2	1.2	0.8	1.0
High income	12.2	1.2	1.3	0.6	0.9
Employment status^d					
Employed	9.7	0.9	1.0	0.6	0.9
Not employed	25.1	1.2	1.4	1.0	1.2

Continued

Table J. Dental services: Standard errors for mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 1998 (continued)

Corresponds to Table 10

Population characteristic	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
		None	\$1-\$99	\$100-\$199	\$200 or more
		Standard error			
Census region					
Northeast	22.9	1.5	2.3	0.8	1.8
Midwest	10.5	1.7	1.5	0.8	1.0
South	19.1	1.2	1.6	1.0	1.0
West	21.1	1.5	2.0	0.8	1.6

^a Includes all other ethnic/racial groups not shown separately.

^b Includes population with private and public coverage.

^c Poor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^d For individuals ages 16 and over.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table K. Dental services: Standard errors for mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 1999

Corresponds to Table 11

Population characteristic	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
		None	\$1-\$99	\$100-\$199	\$200 or more
		Standard error			
Total	8.7	0.8	0.8	0.5	0.6
Age in years					
Under 6	7.5	3.2	2.7	1.9	1.2
6-18	21.3	1.7	1.5	0.8	1.0
19-44	8.4	1.1	1.1	0.7	0.8
45-64	15.1	1.2	1.3	0.8	1.1
65 and over	31.5	1.0	1.7	1.6	1.8
Sex					
Male	11.3	1.0	1.1	0.6	0.8
Female	11.3	0.9	0.9	0.6	0.7
Race/ethnicity					
White and other ^a	9.8	0.9	0.9	0.5	0.6
Black	14.7	2.4	2.1	1.3	1.7
Hispanic	18.3	1.8	1.8	0.9	1.1
Insurance status					
Under age 65:					
Any private ^b	9.2	0.9	0.9	0.5	0.6
Public only	12.4	2.2	1.7	0.9	1.4
Uninsured	29.9	2.5	2.9	2.1	2.3
Age 65 and over:					
Medicare only	94.5	1.7	3.5	3.0	3.7
Medicare and private	28.6	1.2	2.1	1.9	2.0
Medicare and other public	36.5	6.3	5.7	4.3	5.9
Income^c					
Poor	17.8	2.5	1.8	1.2	1.7
Near poor	31.3	4.3	4.0	2.6	3.0
Low income	16.3	2.1	2.1	1.7	1.6
Middle income	14.1	1.1	1.2	0.8	1.1
High income	13.8	1.2	1.1	0.6	0.8
Employment status^d					
Employed	9.0	1.0	1.0	0.6	0.8
Not employed	18.3	1.1	1.2	1.0	1.3

Continued

Table K. Dental services: Standard errors for mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 1999 (continued)

Corresponds to Table 11

Population characteristic	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
		None	\$1-\$99	\$100-\$199	\$200 or more
		Standard error			
Census region					
Northeast	25.7	1.7	1.6	0.9	1.6
Midwest	11.0	1.8	1.6	0.8	0.9
South	11.9	1.4	1.5	0.9	0.9
West	2.0	1.7	1.6	1.0	1.1

^a Includes all other ethnic/racial groups not shown separately.

^b Includes population with private and public coverage.

^c Poor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^d For individuals ages 16 and over.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

Table L. Dental services: Standard errors for mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 2000

Corresponds to Table 12

Population characteristic	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
		None	\$1-\$99	\$100-\$199	\$200 or more
		Standard error			
Total	8.1	0.8	0.7	0.5	0.6
Age in years					
Under 6	6.8	3.6	3.1	1.6	1.2
6-18	25.0	1.4	1.2	0.8	1.1
19-44	7.7	1.0	1.1	0.9	0.8
45-64	16.6	1.2	1.0	0.9	1.2
65 and over	26.0	1.2	1.6	1.3	2.0
Sex					
Male	9.9	0.9	0.9	0.6	0.7
Female	12.9	0.9	0.8	0.7	0.7
Race/ethnicity					
White and other ^a	9.2	0.8	0.7	0.5	0.6
Black	18.6	2.9	2.6	1.0	1.6
Hispanic	21.2	2.1	1.8	1.3	1.3
Insurance status					
Under age 65:					
Any private ^b	9.3	0.9	0.8	0.5	0.7
Public only	15.1	1.9	1.4	0.7	1.2
Uninsured	41.2	2.0	2.3	2.0	2.0
Age 65 and over:					
Medicare only	62.5	1.9	3.0	2.6	3.4
Medicare and private	26.8	1.3	2.0	1.7	2.2
Medicare and other public	33.3	6.0	4.0	5.7	4.3
Income^c					
Poor	18.0	2.8	2.1	1.4	1.4
Near poor	26.9	4.7	3.4	2.3	3.0
Low income	22.4	2.2	2.2	1.7	1.7
Middle income	15.3	1.4	1.1	0.8	1.0
High income	1.2	1.0	0.9	0.7	0.9
Employment status^d					
Employed	8.3	0.9	0.8	0.6	0.8
Not employed	19.0	1.0	1.2	0.9	1.2

Continued

Table L. Dental services: Standard errors for mean out-of-pocket expense per person with a visit and percent distribution of amount of out-of-pocket expense per person with a visit, by selected population characteristics: United States, 2000 (continued)

Corresponds to Table 12

Population characteristic	Mean out-of-pocket expense per person with a visit	Out-of-pocket expense			
		None	\$1-\$99	\$100-\$199	\$200 or more
		Standard error			
Census region					
Northeast	16.8	1.8	1.9	1.1	1.2
Midwest	14.8	1.5	1.1	0.8	0.9
South	12.6	1.3	1.0	0.8	1.0
West	21.6	2.0	1.5	1.1	1.4

^a Includes all other ethnic/racial groups not shown separately.

^b Includes population with private and public coverage.

^c Poor refers to persons living in families with incomes below the Federal poverty line; near poor, over the poverty line through 125 percent of the poverty line; low income, over 125 percent through 200 percent of the poverty line; middle income, over 200 percent through 400 percent of the poverty line; and high income, over 400 percent of the poverty line.

^d For individuals ages 16 and over.

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey, 1996-2000.

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