Bibliography

2006

Ciol MA, Hoffman JM, Dudgeon BJ, Shumway-Cook A, Yorkston KM, Chan L, "Understanding the use of weights in the
analysis of data from multistage surveys," <u>Archives of physical medicine and rehabilitation</u>, Vol. 87, No. 2 (February 2006): 299-303.
Large national surveys are powerful tools with which to examine a variety of important rehabilitation-related issues and are currently the only feasible method to study disability trends over time. Because it is impractical to draw simple random samples from the entire United States, national surveys, such as the Medicare Current Beneficiary Survey (MCBS), select random samples of subgroups of a population. Surveys such as the MCBS are rich sources of data for rehabilitation medicine, and it can be expected that more research will be conducted using these data sources.

Hill J, Fillit H, Thomas SK, Chang S, "Functional impairment, healthcare costs and the prevalence of institutionalisation
in patients with Alzheimer's disease and other dementias," <u>Pharmacoeconomics</u>, Vol. 24, No. 3 (2006): 265-80.
This study estimated the relationship between the degree of functional impairment in patients with ADOD and their healthcare costs and prevalence of institutionalisation. Retrospective cross-sectional analyses of the Medicare Current Beneficiary Survey (MCBS) were performed. A nationally representative sample of Medicare beneficiaries with ADOD was identified from the 1995-8 waves of the MCBS (n = 3138): 34% in the community, 57% institutionalised and 9% residing in both settings during the year. The data from this study suggest a strong relationship between
functional impairment and healthcare costs, specifically in patients with dementia. Even IADL impairments, which are common in mild to moderate dementia, may significantly raise costs.

Lundy J, Craig BM, "The use of disease-modifying agents among multiple sclerosis patients enrolled in medicare
from 1995 to 2002 and the impact of medicare part D: analysis of claims data from the medicare current beneficiary survey," <u>Clinical therapeutics</u>, Vol. 28, No. 1 (January 2006): 140-5.
Identifies the prevalence of access barriers to disease-modifying agents (DMAs) used in the United States for the treatment of multiple sclerosis (MS), identifies the relationship between patient characteristics and use of DMAs, and interprets the results in the context of Medicare Part D, using claims data from the Medicare Current Beneficiary Survey (MCBS) 1992 to 2001.

Skaar DD, Hardie NA, "Demographic factors associated with dental utilization among community dwelling elderly
in the United States, 1997," <u>Journal of public health dentistry</u>, Vol. 66, No. 1 (Winter 2006): 67-71.

The purpose of this study was to characterize dental service utilization in 1997 by community dwelling Medicare beneficiaries. Univariate comparisons of MCBS data were made between dependent variables (dental utilization and types of dental services) by each of the independent variables (age group, gender, race, income, education, population density, marital status and U.S. Census Bureau regions using weighted proportions to test for independence between dependent and independent variables. This descriptive study provides important information about dental utilization and services in the American elderly population. Younger, high income, white or educated elderly Americans had higher dental utilization.