Expenses for Hospital and Institutional Care During the Last Year of Life for Adults Who Died in 1964 or 1965 United States

Statistics on the expenses for care in hospitals and institutions during the last year of life for persons who died during 1964 and 1965 by age, sex, color, cause of death, geographic region and division, family income, living arrangements, marital status, number of episodes, and type of episode. Based on data collected in a mail survey with questionnaires sent to the informant for the death certificate and to the medical facilities which provided the care.

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IN THIS REPORT statistics are presented on expenses for hospital and institutional care during the 12 months before death for adults aged 25 years or older who died during 1964 or 1965.

These statistics are based on the data collected in a mail survey on questionnaires sent to the person who provided the funeral director with the decedent's personal information for recording on the death certificate and to any hospitals or institutions in which the decedent received care during the year before his death.

The decedents about whom information is presented in this report are classified by age, color, sex, marital status, geographic region, living arrangements, family income during the last full calendar year before death, and cause of death. Also included is information on the number of hospital or institutional episodes, the average length of stay, and whether the care was received in a short-stay hospital or an institution.

About 73 percent of the adult decedents were reported to have had hospital or institutional care in the year before death. Of those who had care in a medical facility, about 43 percent had bills of \$500 or less and 57 percent had bills of \$500 or more. Approximately 38 percent of them had bills amounting to \$1,000 or more.

Expenses were higher for female decedents and for white decedents than for all other decedents. Decedents in the South had lower expenses for care in medical facilities than did decedents in other regions.

Of the variables included in this report, the one with the greatest effect on the expenses for hospital and institutional care was cause of death. The median cost for care in a medical facility for persons who died of malignant neoplasms was over \$1,000, while the lowest median cost, \$457, was for persons who died from accidents, homicide, or suicide.

The expenses for care in medical facilities were also higher for decedents who had episodes in both short-stay hospitals and in institutions than for decedents who had only short-stay episodes or institutional episodes.

EXPENSES FOR HOSPITAL AND INSTITUTIONAL CARE DURING THE LAST YEAR OF LIFE

FOR ADULTS WHO DIED IN 1964 OR 1965

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INTRODUCTION

The data presented in this report were obtained from the National Mortality Survey which was based on the probability sample drawn from the monthly Current Mortality Sample representing the deaths registered in the United States during 1964 and 1965.

This report presents statistics on the expenses incurred by decedents for hospital or institutional care in the 12-month period before death. Data on hospital and institutional expenses have become increasingly important because of the continuous rise in medical care costs since the 1940's. Prior to World War II the average bill for short-stay hospitalization was approximately \$7.00 a day, but by 1965 the average had increased to \$44.48 a day.

The estimates of expenses which are usually published measure the expenses for inpatient care for the living, noninstitutional population. Such estimates can be good estimates of expenditures for younger age groups, where the death rates are low and few persons are residents of institutions. For the older population, however, this method of estimating expenses means missing many persons who received care during the year. Not only are death rates high for the aged but a measurable proportion of aged persons are residents of institutions (table A). Estimates of expenditures for care during a year derived from

Table A. Average death rates for 1964-65 and rates of institutionalization for 1963: United States

Age	Deaths per 1,000 popula- tion ¹	Institutional residents per 1,000 population ²
All ages, 25+ years	11.6	5
25-44 years 45-54 years 55-64 years	2.3 7.4 16.9 37.8	1 9
65-74 years 75-84 years	81.7	43
85 years and over	200.4	147

¹Sources: <u>Vital Statistics of the United</u> <u>States</u> for 1964 and 1965.

interviewing the surviving members of a household are thus particularly limited for the aged population.

The data presented here therefore differ from other estimates because they are the expenses during the last year of life for persons who died and because decedents who were residents of institutions are included. The amount of care and the expenses for hospital and institutional care in the last year of life are generally high and place a

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²Source: PHS Pub. No. 1000, Series 12, No. 8.

great economic burden on the families of the persons who die,

This report, which is in two parts, presents data on hospital and institutional bills, shown by five intervals, for all decedents 25 years or older. In the first part of this report the expense data are related to certain socioeconomic and demographic characteristics of the decedents. The second part is an analysis of the expenses for care in medical facilities only for those decedents who were reported to have had some expenses for hospital or institutional care. The second half also includes information on whether the care was received in a hospital, in an institution, or in both, and on the amount of care received as measured by the average number of days of care and the number of episodes in the year before death. No data were collected to measure the quality of the care or the amount or type of care received. In the following analysis the term "care" is defined to include care in both shortstay hospitals and resident institutions.

A previous report in this series presented data on the extent of health insurance coverage for decedents who were aged 25 or older at the time of death.² The beginning of this report is designed to give the rate of and expense for hospitalization for the same decedents, so the two reports are complementary.

SELECTED FINDINGS

Of the annual average 1,649,000 adults aged 25 or older who died during 1964 or 1965, 73 percent had some hospital or institutional care in the 12 months before death. Of those who received care in a medical facility, 15 percent had bills under \$100, 12 percent had bills of \$100-\$249, 16 percent had bills of \$250-\$499, 19 percent had bills of \$500-\$999, and 38 percent had bills of \$1,000 and over.

In general, younger decedents who received care in a medical facility had higher bills than older decedents. The highest median bill (over \$1,000) was reported for decedents aged 25-44; the lowest median bill (\$621) was reported for decedents aged 75-84.

Female decedents and white decedents received care in medical facilities more frequently and had higher bills than male decedents or decedents who were members of other color groups. About 40 percent of the females and the white decedents incurred expenses of \$1,000 or more. The proportions with comparable expenses were 37 percent for male decedents and 26 percent for all other decedents.

There were marked differences in the amount and expense of care when cause of death was considered. Almost 92 percent of the decedents whose deaths were attributed to malignant neoplasms received hospital or institutional care during the last year of life; of those who did, 53 percent had bills of \$1,000 or more. Only 30 percent of the decedents whose deaths were attributed to accidents received such care; of those who did, 34 percent had bills of \$1,000 or more.

The South differed from all other regions with regard to the rate of receiving care in medical facilities and the expenses for care. About 41 percent of the decedents receiving care in the Northeast, North Central, and West Regions had bills amounting to \$1,000 or more. In the South, however, only 31 percent of the decedents receiving care had comparable costs. The South also reported the highest proportion of decedents who were not charged for care or whose bills amounted to less than \$100.

A higher proportion of decedents who lived with a spouse but no other relatives had bills over \$500 than did decedents who lived either with other relatives, with nonrelatives, or alone.

On the average, divorced decedents had higher expenses for care in medical facilities than decedents of any other marital status, even though divorced decedents were less likely to receive care than other decedents. About 43 percent of the divorced decedents who received care had bills of \$1,000 or more, while about 38 percent of decedents of any other marital status who received care were in the highest cost interval.

The expenditures for care in medical facilities were directly proportional to family income. A larger proportion of decedents at the higher income levels had bills of \$1,000 or more than those at lower income levels. However, even at the lowest income level (less than \$2,000), over one-third of the decedents who received care were reported to have had bills of \$1,000 or more.

Among the annual average 1,207,000 decedents with reported expenses, those decedents who had three or more episodes in the last year of life had the highest bills. Twenty-seven percent of the decedents with one episode, 43 percent of the decedents with two episodes, and 59 percent of the decedents with three or more episodes had bills of \$1,000 or more.

Persons whose care was received in both short-stay hospitals and in institutions had higher bills than persons who had only short-stay hospital episodes or only institutional episodes. Proportions of decedents with bills of \$1,000 or more were 35 percent for those with short-stay hospital episodes, 52 percent for those with both short-stay and institutional episodes, and 41 percent for those with institutional episodes only.

The bills for care were higher for persons who spent between 57 and 91 days in a hospital or institution than for those with shorter or longer stays. Over 60 percent of these decedents incurred expenses of \$1,000 or more in their last year of life.

SOURCES AND LIMITATIONS OF THE DATA

The 10,408 decedents aged 1 year or older who were included in the National Mortality Survey (NMS) were selected from the Current Mortality Sample of death certificates filed monthly with the National Center for Health Statistics by each State and registration area. The NMS sample is a one in 330 probability sample of all persons aged 1 or older who died in the United States during 1964 and 1965.

In addition to the basic information recorded on the death certificate, the information about the decedents presented in this report was obtained from two sources. The first source was a questionnaire mailed to the death certificate informant—the person who provided the funeral director with the personal information about the deceased for recording on the certificate. The informant, who was usually a close relative of the decedent, was asked to provide information on the amount of the bill for hospitalization and on socioeconomic characteristics of the decedents. The informant was also asked to identify all hospitals

and institutions which may have provided care to the decedent during the year before his death.

The second source of information was a questionnaire mailed to the hospitals or institutions named either by the informant or on the death certificate as places where the decedent received care in his last year of life. All medical facilities were asked to provide information about the number and length of the episodes and whether or not the decedent had an operation. They were also asked to name any other hospitals or institutions where the decedent received care.

A description of the survey procedures for the 1964-65 National Mortality Survey as well as a description of the estimation procedures is in appendix I. Since the data in this report are estimates based on a sample, they are subject to sampling error. Tables of approximate sampling errors and instructions for their use are also in appendix I.

In any data collection system a possible source of error is that associated with nonresponse. Of the 10,408 decedents aged 1 or older included in the NMS, there was no response from the informant for 938 cases (9.0 percent). For decedents aged 25 or older, the nonresponse rate was 8.7 percent. For these cases, information about the decedent was imputed. A discussion of the imputation procedures and of some measures relating to bias in the survey procedures for the National Mortality Survey are also discussed in appendix I.

In addition, the quality of survey data can be affected by other sources of error. The respondent may have misunderstood some of the questions and may therefore have reported erroneous data, or he may have understood the question but not have known the answer. Since the information about the decedent had to be provided by another person, the second type of error was probably more common in this survey.

Statistics on expenses, in particular, may be affected by the respondent's lack of knowledge. Questions on the expenses for care in medical facilities are subject to a high rate of unknown responses because of the various ways of paying bills. When welfare or insurance pays for some part of the bill it is common for the agency to make payment directly to the hospital. In these

cases, the respondent may not know the amount of the total bill. Also if the decedent paid the bill himself for a nonterminal episode, the respondent may not know how much was paid.

Of the 10,019 decedents aged 25 or older in the sample for the 1964-65 National Mortality Survey, there were 262 cases where the informant reported expenses for the decedent but the hospital or institution did not report any inpatient episodes for the decedent. The amount reported for these decedents are probably charges for emergency room treatment; for outpatient services such as radium treatments, physical therapy, X-rays, or laboratory tests; or for any other charges where the person was never formally admitted as a patient.

Definitions of the terms used in this report are given in appendix II, and facsimiles of the Standard Certificate of Death and of the informant questionnaires are shown in appendix III.

NATURE OF THE POPULATION

An annual average of 1,649,000 adults aged 25 or older died in the United States during 1964 and 1965. Table B compares the decedent population included in this report with the civilian, noninstitutional population of the United States in January 1965. Of the adults aged 25 or older who died during 1964-65, about 66 percent were aged 65 or older at the time of death. Of the noninstitutionalized living persons aged 25 or older, only about 17 percent were 65 or older.

There was a marked difference between the two populations when family income was considered. The median income during the previous calendar year for families and unrelated individuals in the living population (\$6,109) was more than twice as high as the median income during the last calendar year before death for families and unrelated individuals in the decedent popu-

Table B. Comparison of decedent population, 1964-65, with civilian noninstitutional population, January 1965, by selected characteristics: United States

Characteristics	Civilian non- institutional population 1	Decedent population, 25 years and over
Median family income	² 56,109	\$2,590
	Per	cent
All ages, 25 years and over	100.0	100.0
25-64 years65 years and over	82.8 17.2	33.7 66.3
Hospital experience for person aged 25 years and over	100.0	100.0
No episodes1 or more episodes	87.4 12.6	26.8 73.2
Amount of the hospital bill for persons aged 25 years and over	100.0	100.0
Under \$100 \$100-\$249	14.1 32.3 28.6 25.1	15.3 11.8 15.7 57.1

 $^{^{1}}_{2}$ Source: Unpublished data from the Health Interview Survey for July 1964-June 1965. Based on persons of all ages.

lation (\$2,590). The low family income reported for decedents may be due in part to their advanced age, to illness, and to the generally low incomes associated with retirement.

The decedent population also differed from the living population in the proportion of persons receiving care in hospitals or institutions during a 12-month period. About 73 percent of the adult decedents who died in 1964 or 1965 had at least one hospital or institutional episode in the year preceding death; among the living, noninstitutional population, only 13 percent of the adults aged 25 or older had one or more episodes from July 1964 through June 1965.

Not only did a higher proportion of the decedents receive care in medical facilities than persons in the living population, but the bills for their care were also higher. About 57 percent of the decedents as compared with only 25 percent of the living population who had care in medical facilities had bills of \$500 or more. The median amount of the bill for decedents (\$691) was much higher than the median for the living population (\$259).

EXPENSES FOR CARE— ALL DECEDENTS

Sex and Age

Of the annual average of 1,649,000 adults aged 25 or older who died during 1964 or 1965, about 56 percent were males and 44 percent were females. Only 62 percent of the males as compared with 72 percent of the females were 65 years or older. The median age for males aged 25 or older at time of death was 69 years; the median age at death for females aged 25 or older was 74 years.

About 73 percent of adult decedents had hospital or institutional care in the 12 months before death (table 1). About 15 percent of those who received care had bills of \$100 or less; 12 percent had bills of \$100-\$249; 16 percent had bills of \$250-\$499; 19 percent had bills of \$500-\$999; and 38 percent had bills of \$1,000 or more.

The proportion of decedents who received care in medical facilities was higher in each successive age group. The proportion reported to

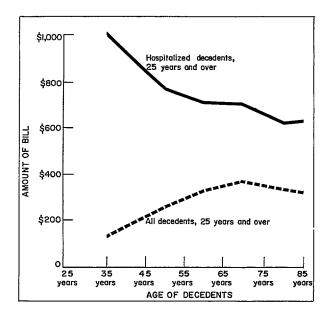


Figure I. Median expenses for care in hospitals and institutions for all decedents 25 years and over and for hospitalized decedents.

have had care in the last year of life was 58 percent for decedents aged 25-44, 67 percent for those aged 45-54, and 73 percent for those aged 55-64. About 75 percent of the decedents aged 65-74 and 76 percent of those aged 75 or older received care during the last year of life.

The amount of the bill for persons with care in medical facilities was inversely proportional to the age of death. Although a higher proportion of older decedents received care than didyounger decedents, the expenses for those who had care were lower for older decedents than for younger decedents. About 17 percent of the decedents 85 years of age or older had bills under \$100 as compared with 11 percent of the decedents aged 25-44. Conversely, only 38 percent of the decedents aged 85 or older had bills of \$1,000 or more, while 50 percent of those aged 25-44 had bills that high.

The effect of the proportion receiving care on the amount of the bill reported for each age group can be seen in the medians shown in figure 1. When all decedents are used as the base, the median is higher in each successive age group through 65-74. However, when only decedents who received care are used as the base, the median is generally lower in each successive age group.

The difference in the trends may be a reflection of the differences in the medical conditions affecting the younger and older age groups. Also, at the younger ages, more expensive measures may be taken to save the life of the person. In addition, the smaller median bill at ages 65 and over may reflect the place where the care was received. Older decedents were more likely to receive their medical care in institutions than younger decedents. Since the charges per day are less in nursing homes than in short-stay hospitals, the older decedents would have lower costs for hospitalization than the younger decedents. ³

A higher proportion of female decedents aged 25 or older received care in medical facilities than male decedents. About 77 percent of the females as compared with only 70 percent of the males had at least one episode during the 12 months before death. Part of the difference between the proportion of males and females re-

ceiving care may be due to the fact that, in general, females were older.

The largest difference between the sexes with regard to the proportion receiving care is at the younger ages. Figure 2 shows that in each successive age group the difference is less. Part of the explanation may be the cause of death since, as will be shown later in the report, the causes of death were different for males and females particularly among younger decedents. For example, males in the 25-54 year age groups were more likely to have died from violent causes or cardiovascular attacks than were females; such deaths usually do not entail extensive care in hospitals or institutions.

Not only did more females receive care in medical facilities than males, but the bills for those who did receive care were higher. About 59 percent of the females with care, as compared with 56 percent of the males, incurred expenses

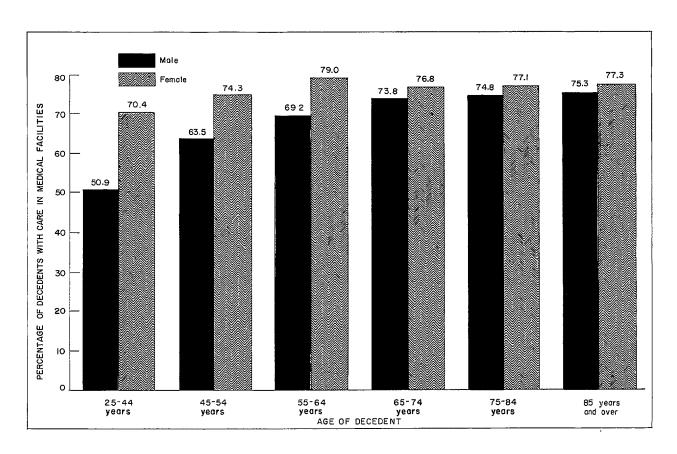


Figure 2. Percentage of decedents 25 years and over who had some care in medical facilities during the last year of life, by age and sex.

of \$500 or more in the last year of life. About 40 percent of the females and 37 percent of the males had bills of \$1,000 or more.

The fact that females who are residents of institutions incur greater expenses than males had been discussed in a report from the Resident Places Survey.³ In all types of institutions it was found that the charges for females in 1964 were higher than for males regardless of the other variables considered. Again the older ages of females may explain part of the higher charges; because of their age, females may require more expensive care. It is also possible that females may desire extra services and these would increase the amount of the bill.

Color and Age

Of the decedents aged 25 or older who died during 1964-65, about 89 percent were white (table 2). Their median age at death was 72 years. About 74 percent of the white decedents had at least one episode in a medical facility in the year before death. White decedents who received care also had high expenses. Only 14 percent were reported to have had hospital bills under \$100, and about 40 percent incurred bills of \$1,000 or more.

The median age at death for all other decedents aged 25 or older was only 64 years. About 66 percent of these decedents received care in hospitals or institutions in the last year of life. Not only did fewer of them have hospital care, but the expenses reported for Negro and all other decedents were less than the expenses reported for white decedents. About 60 percent of the Negro and other decedents who received care incurred bills under \$500; almost 29 percent were reported to have had bills under \$100. This high proportion in the lowest interval may be due to free care provided to persons under public assistance programs. Only 26 percent of those who received care had bills amounting to \$1,000 or more.

The older ages of the white decedents only account in part for the fact that white decedents received more care and had higher bills than decedents of other races. As age-specific comparison shows, both the rate of care in hospitals and institutions and the expense for those persons with care were higher in each age group for white decedents than for other decedents.

Cause of Death

About 43 percent of the deaths of adults aged 25 or older were attributed to conditions of the heart, 17 percent to malignant neoplasms, and 12 percent to vascular lesions affecting the central nervous system. These three causes of death accounted for about 72 percent of the deaths. Table 3 shows the proportion of decedents receiving care and the amount of the bill for care for persons whose deaths were ascribed to one of the leading causes of death with additional detail for diseases of the heart and malignant neoplasms.

Among the causes shown in table 3, there were differences both in the proportion of decedents who had care during the 12 months before death and in the expenses incurred by those decedents. Adults dying from malignant neoplasms had the highest rate of care; over 90 percent of them had at least one hospital or institutional episode in the last year of life. Persons dying of malignant neoplasms also had the highest bills. About 72 percent of those receiving care incurred expenses of \$500 or more; 53 percent had expenses of \$1,000 or more.

Of the adults whose deaths were attributed to diseases of the heart, 64 percent received care in medical facilities. Decedents who suffered violent deaths (accidents, homicides, and suicides) were less likely to have received care than all other decedents. Only 30 percent of the persons who died as a result of accidents were reported to have received care in a medical facility in the 12 months before death. Comparable figures for adults whose deaths were classified as homicide or suicide were 28 and 52 percent, respectively.

Table C shows the median bill for decedents with care for the five leading causes of death. Differences in the median expense for hospital or institutional care for decedents in each cause-of-death classification may be due to the types of treatment for the disease and to the length of stay. The highest median was reported for persons whose deaths were attributed to malignant neoplasms. Very often cancer patients undergo surgery and their bills would reflect charges for the operating room, the anesthetist, and X-rays. In addition, persons with malignant neoplasms may require radium treatment and physical therapy.

Table C. Median bill for care in hospitals and institutions in the last year of life for decedents 25 years and over, by five leading causes of death: United States, 1964-65 deaths

Cause of death	Median bill
All causes	\$691
Arteriosclerotic heart disease(420) All other diseases of heart(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting the central nervous system(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	\$563 \$476 \$1,000+ \$530 \$457 \$658

In contrast, the treatment for patients with cardiovascular conditions does not usually include surgery or the use of appliances. Hence the typical bill for care in medical facilities for persons whose deaths were attributed to diseases of the heart would be less than the expenses reported for persons dying from malignant neoplasms.⁴

Table D, derived from table 4, shows that a larger proportion of the male decedents died from arteriosclerotic heart disease or from violent causes than of the female decedents. Deaths of females were more frequently attributed to malignant neoplasms and vascular lesions of the central nervous system. These differences in the cause of death for males and females may explain in part the differences in the expenses for care for males and females. As shown in table C, the causes of death reported most frequently for women were the causes with the highest median bills.

Figure 3, based on table 4, shows the distribution by five leading causes of death for each age group. Part of the difference between the age groups in the expenses for care is due to the variation in the distributions by cause of death. For example, a relatively high proportion of the decedents aged 25-44 died from violent causes (accidents, suicides, homicides) for which the rate of care in hospitals or institutions was low.

For persons whose deaths were attributed to arteriosclerotic heart disease, the proportion of decedents with care whose bills exceeded \$1,000 was fairly constant regardless of age. For persons whose deaths were attributed to malignant neoplasms, the proportion of decedents with care whose bills exceeded \$1,000 was lower in each succeeding age group.

Table D. Percent distribution of decedents aged 25 years and over by cause of death, according to sex: United States, 1964-65 deaths

Cause of death	Both sexes	Male	Female
	Percen	nt distr	ibution
All causes	100.0	100.0	100.0
Arteriosclerotic heart disease(420) All other diseases of heart(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting the central nervous system(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	17.4	7.7 16.5 10.1 4.4	30.1 11.1 18.5 14.7 2.2 23.3

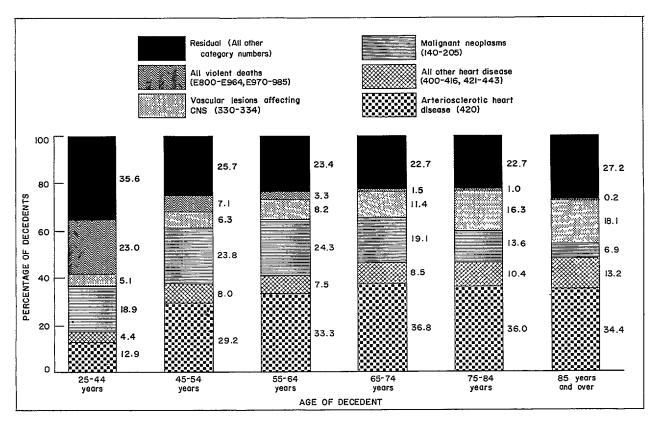


Figure 3. Percentage of decedents 25 years and over, by cause of death and age.

Region and Division

As seen in table 5, adult decedents in the South Region differed from decedents in all other regions both in the proportion who had care in the last year of life and in the expenses for that care. Only 71 percent of the decedents in the South had care in hospitals or institutions. The proportions with care in the other regions were 76 percent in the North Central Region, 74 percent in the West, and 73 percent in the Northeast.

The bills for decedents in the South with care were also less than those for decedents with care in the other regions. Only 31 percent of the decedents in the South who received care in medical facilities had bills of \$1,000 or more. In contrast, at least 40 percent of the decedents with care incurred bills of \$1,000 or more in each of the other three regions.

The New England Division, comprised of Maine, New Hampshire, Vermont, Massachusetts,

Connecticut, and Rhode Island, had the highest proportion (47 percent) of decedents with care who had bills of \$1,000 or more.

The division where the lowest expenses were reported was the East South Central (Tennessee, Kentucky, Alabama, and Mississippi). In this division only 67 percent of the decedents had care in the last year of life and only 29 percent of those were reported to have had bills of \$1,000 or more.

Table 6 shows the proportion of decedents with care in medical facilities and the expenses in each region with the decedents classified by whether they were under or over 65 years of age at the time of death. The differing age distribution among the regions does not account for the regional differences in expenses. Bills were lower in the South than in the other regions both for decedents under 65 and for those 65 or older. Therefore the observed regional differences are probably due to factors other than age at death.

Because the expenses for care are so closely related to the cause of death, these expenses for adult decedents are shown for each of the five leading causes for each region in table 7. For decedents with care whose deaths were attributed to arteriosclerotic or other heart disease, bills were highest in the Northeast. For decedents with care whose deaths were attributed to malignant neoplasms, bills were highest in the North Central Region and the West. For those whose deaths were attributed to vascular lesions of the central nervous system, bills were highest in the West.

In each region, more decedents whose deaths were attributed to malignant neoplasms received care than decedents who died of any other cause, and expenses were higher for these decedents than for any others.

Living Arrangements and Family Income

Among decedents aged 25 or older, those with a family income of less than \$2,000 had a higher rate of care in hospitals or institutions than other decedents. About 78 percent received care, while the rate for decedents in other income classes ranged from 68 to 71 percent. However, among those who received care, the proportion who had bills of \$1,000 or more was highest for decedents with a family income of \$7,000 or more.

Family income, as defined for this survey, refers to the income of all persons related by blood or marriage who lived in the same household as the decedent. Therefore for the decedents who lived alone or with nonrelatives, it is the income of one person; for decedents who lived with a spouse or with other relatives, it is the income of two or more persons. Because the kind of family is important in interpreting any data when the decedents are classified by family income, table 8 shows the four most common living arrangements as well as the income classes.

Among adult decedents who were not residents of institutions, decedents who lived only with a spouse had a higher rate of care than decedents who either lived with other relatives or who lived alone or with nonrelatives regardless of income. The ability of the decedents to care for

themselves or younger members of the family to care for them probably accounts for the lower rate of the latter groups. Once receiving care, the decedents who lived with only a spouse had higher expenses than decedents in the other two groups.

It should particularly be noted that even in the lowest income category—under \$2,000—over one-fourth of the decedents who received care in medical facilities at some time during the year before death incurred bills of \$1,000 or more.

The residents of institutions almost all of whom, by definition, received care, had very little income and very high bills. Among the 306,000 decedents whose usual place of residence was an institution, 252,000 had less than \$2,000 income and 47 percent had hospital bills of \$1,000 or more.

Marital Status

Decedents who had been divorced had a lower rate of care in medical facilities than adult decedents who were married, widowed, or never married (table 9). The low rate for divorced decedents is mostly due to the low rate for decedents under age 65—a high proportion of all divorced decedents. Divorced decedents who were 65 years or older had a high rate of care and about 43 percent of those with care had bills of \$1,000 or more.

Among adult decedents who died before their 65th birthday, 72 percent were married. Among decedents aged 25-64, the bills for married decedents who received care were higher than the bills for decedents who were not married.

Among those decedents who were 65 years or older, only 42 percent were married, about 46 percent were widowed, and the rest were single or divorced. Both the rate of care and the expenses for those with care were similar for the married and the widowed decedents who were 65 years or older. Both the rate of care and the proportion of those with care who had bills of \$1,000 or more were high for the single and divorced decedents. It is likely that many of these decedents, particularly those who had never married, were actually residents of institutions.

EXPENSES FOR CARE—DECEDENTS WITH REPORTED EXPENSES

Introduction

In this section discussion of the expenses for hospital or institutional care is restricted to those decedents aged 25 or older who were reported to have had expenses for care in hospitals or medical facilities in the last year of life. On the average, about 73 percent of all adult decedents aged 25 or older were reported to have had expenses. Of those who did, about 54 percent were males, 69 percent were 65 years or older, and 22 percent died of malignant neoplasms.

Included among the 1,207,000 decedents discussed in this section are approximately 43,500 decedents who were reported by the informant to have had expenses but who were not reported by the hospital or institution as having had any episodes within the last 12 months of life. The expenses which the informants reported for these decedents may reflect charges for outpatient care rather than for expenses after formal admission. In a few cases, the expense information may refer to money paid during the 12-month period even though the episode actually occurred before the period. In a very few cases they may represent actual episodes which the hospital or institution failed to report. For the tabulations by days of care, these decedents have been included in the category "I day or less."

Number of Episodes

About 50 percent of the decedents with reported expenses had only one episode in a hospital or institution during their last year of life, 25 percent had two episodes, and 21 percent had three or more episodes. About 4 percent of the decedents with reported expenses did not have any episodes reported by a hospital or institution in the year before death. Table 10 shows that as the number of episodes increased, the proportion of decedents with expenses who had bills of \$1,000 or more also increased. Only 27 percent of the decedents with one episode had bills of \$1,000 or more. Among decedents with two episodes, the proportion with comparable bills was 43 percent, and among those with three or more episodes, the proportion was 59 percent.

Among decedents with expenses but no episodes, 34 percent had bills of \$1,000 or more.

Conversely, the proportion of decedents in the intervals under \$500 decreased as the number of episodes increased. For decedents with only one episode the proportion with bills under \$500 was 55 percent, while for decedents with three or more episodes the proportion with comparable bills was only 24 percent.

Regardless of the number of episodes, a higher proportion of the decedents aged 25-64 (42 percent) had bills amounting to \$1,000 or more than did decedents aged 65 or older (37 percent).

The average number of days of care for decedents with one episode was 76 days, for decedents with two episodes it was 78 days, and for decedents with three or more episodes it was 110 days. These estimates of average number of days of care may seem high; it must be remembered, however, that this report includes decedents who were residents of institutions. Since the days in long-stay institutions were included in the calculation of average days of care, these figures are higher than would be expected had they been calculated only for episodes in short-stay hospitals.

Figure 4 shows the average number of days of care by number of episodes and age of decedent. In general as age increased, the average number of days spent in a hospital or institution also increased regardless of the number of episodes. On the average, the number of days of care was greater for persons with more episodes and for persons in the older age groups. The average number of days for persons aged 85 or older was about three times as great as that for decedents under age 65. The expense of hospitalization by days of care and age of decedent does not show a corresponding increase with age. As shown earlier, younger decedents had higher expenses than older decedents even though their average stays were shorter. This was due at least partly to a higher proportion of older decedents who received their care in long-term institutions.

As shown in table 11, there was little difference in the proportion of males and females who had one, two, or three or more episodes. Regardless of the number of episodes a higher proportion of female decedents (40 percent) had

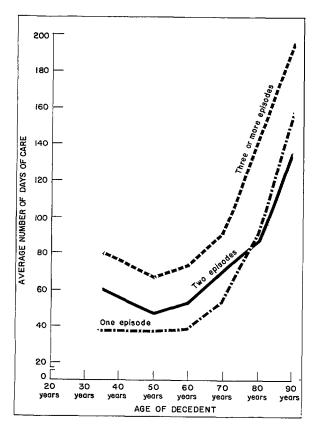


Figure 4. Average number of days of care, by age of decedent and number of episodes.

bills of \$1,000 or more than did male decedents (37 percent).

White decedents with reported expenses had more hospital episodes than all other decedents. Table E shows the percent distribution of decedents who had episodes by color and the number of episodes. About 48 percent of the white decedents with reported expenses had two or more episodes, but only 37 percent of the other decedents had two or more episodes. The average number of days of care during the 12 months was 84 days for the white decedents; for other decedents the average was 55 days.

Partly because they had experienced more care in medical facilities on the average, the white decedents incurred more expenses for care than other decedents. About 40 percent of the white decedents with reported expenses but only 26 percent of all other decedents had hospital bills of \$1,000 or more. Also the proportion of decedents who were reported to have had no charge for care or hospital bills under \$100 was twice as high for all other decedents as for white decedents. Only 14 percent of the white decedents as compared with 29 percent of all other decedents were in the lowest interval.

Among the white decedents with expenses, a larger proportion of females (42 percent) than males (38 percent) had hospital bills over \$1,000. Among the decedents of all other colors, however,

Table E. Percent distribution of decedents 25 years and over with reported expenses by number of episodes and average number of days of care, according to color: United States, 1964-65 deaths

	Number of	Nu	Number of episodes					
Color	decedents in thousands	All episodes	None	One	Two	Three or more	Average number of days of care	
	Percent distribution							
Total	1,207	100.0	3.6	49.5	25.4	21.4	80.9	
WhiteAll other	1,086 120	100.0 100.0	3.4 5.0	48.6 58.3	25.9 21.7	22.1 15.0	83.7 55.3	

the proportion of males in each interval except none or under \$100 was higher than the proportion of females.

Type of Hospital Episodes

Of the 1,207,000 adult decedents for whom hospital expenses were reported, 69 percent had only short-stay episodes, 14 percent had episodes in both short-stay hospitals or institutions, and 13 percent had only institutional episodes (table 12).

On the average, decedents who had short-stay episodes only were hospitalized for 31.5 days. About 56 percent had hospital bills of \$500 or more, and 35 percent had bills of \$1,000 or more.

Decedents who had episodes only in institutions had an average length of stay during the 12 months of 260 days. Approximately 54 percent had bills of \$500 or more and 41 percent had bills of \$1,000 or more. The highest expenses were incurred by decedents who received care in both short-stay hospitals and in institutions. They had, on the average, 179 days of care. Approximately 69 percent had bills of \$500 or more and 52 percent had bills of \$1,000 or more.

The high proportion of decedents who had hospital bills of \$1,000 or more is not surprising in view of the amount of time they spent in a hospital or institution. In 1964 the average charge per day in short-stay hospitals was about \$40;¹ the average monthly charge for residents of institutions was \$186.³ Using those figures, the average bill for decedents who had short-stay hospitalization only would be \$1,260; the average bill for decedents who were in institutions but had no short-stay hospitalization would be \$1,561 (based on a 31-day month). The same estimate cannot be made for those with both types of hospitalization because the days were not tabulated separately.

When the average number of days of care and type of hospitalization are considered, one explanation of the higher bills for female decedents noted earlier emerges. Among decedents who had only short-stay hospitalization, the average number of days of care was about the same for males and females and the proportion who had bills of \$1,000 and over was also similar. Among decedents who were in both short-stay hospitals and in

institutions, the average length of stay for females was 183 days and the proportion with bills of \$1,000 or more was 54 percent; the average length of stay for males was 174 days and the proportion with bills of \$1,000 or more was 50 percent.

Moreover, female decedents who were in institutions with no short-stay hospitalization had an average of 275 days as compared with 240 days for males and 45 percent of the female decedents had bills of \$1,000 or more as compared to 35 percent of the male decedents. In addition, approximately 12.5 percent of the female decedents but only 7.1 percent of the male decedents had institutional episodes without shortstay episodes during the last 12 months of life. As shown in table F, the higher proportion of female decedents with bills of \$1,000 or more is accounted for in large part by the higher proportion and longer stay in institutions. If care in medical facilities is limited to episodes in short-stay hospitals, expenses for males and females would be comparable. It is only when the care in institutions is included that the higher expenses for females become apparent.

Table 13 shows the expense of hospitalization and the average number of days of care by type of hospitalization for the major causes of death. As shown earlier, persons whose deaths were attributed to malignant neoplasms not only had the highest rate of care in medical facilities but also the highest bills. Because expenses are related to the number of days of care and to whether the care was in a short-stay hospital or in an institution, it is important that about 81 percent of the persons whose deaths were attributed to malignant neoplasms had only short-stay hospitalization as compared with 66 percent of those decedents whose deaths were attributed to arteriosclerotic heart disease. Moreover, the 214,000 decedents whose deaths were attributed to malignant neoplasms and who had only shortstay hospitalization had an average of 43 days of hospitalization. The average for the 225,000 decedents with only short-stay hospitalization who died of arteriosclerotic heart disease was 24 days. Using \$40 as the average daily charge, the average bill for the person who died of a malignant neoplasm and who received care only in a shortstay hospital would be \$1,708 (the median reported was over \$1,000), and the average bill for the person who died of arteriosclerotic heart disease

Table F. Average annual number of decedents 25 years and over, percent distribution, average number of days of care, and proportion with bills of \$1,000 or more by type of episode and sex: United States, 1964-65 deaths

		Type of episode					
Sex	Total	No epi- sode	Short- stay only	Short-stay and institution	Insti- tution only	No admis- sion	
All decedents							
Number in thousands Percent distribution Average number of days of care Proportion of bills \$1,000+	1,649 100.0 28.1	442 26.8	836 50.7 31.5 35.3	171 10.4 179.1 52.2	156 9.5 260.2 41.0	44 2.7 34.2	
<u>Male</u>							
Number in thousands Percent distribution Average number of days of care Proportion of bills \$1,000+	928 100.0 26.0	274 29.5	483 52.0 31.3 35.2	79 8.5 174.1 50.4	66 7.1 240.0 35.2	26 2.8 30.9	
<u>Female</u>							
Number in thousands Percent distribution Average number of days of care Proportion of bills \$1,000+	721 100.0 30.9	168 23.3	353 49.0 31.7 35.6	93 12.9 183.4 53.6	90 12.5 275.0 45.2	18 2.5 39.0	

would be \$960 (the median reported was about \$500).

However, the average number of days of care for all decedents with reported expenses who died of arteriosclerotic heart disease (83 days) was greater than for those whose deaths were attributed to malignant neoplasms (63 days) because of the higher proportion in the former group with care in institutions.

Table 14 shows the expenses for care in medical facilities for decedents with reported expenses by region and type of episode. A larger proportion in the Northeast and South Regions had episodes only in short-stay hospitals than in the North Central and West Regions. About 73 percent of the decedents in the South and 70 percent of the decedents in the Northeast had only short-stay episodes. For the North Central and West Regions the proportions were 67 and 64 percent, respectively.

Although a higher proportion of decedents in the South who had care were hospitalized in

short-stay hospitals than decedents in other regions, their expenses were lower. In the South, 28 percent of the decedents with only short-stay episodes incurred hospital bills of \$1,000 or more as compared with 37-40 percent in the other regions.

Part of the difference in the expenses of hospitalization in the South is due to the fact that the average stay for decedents who had only short-stay hospital episodes was 26 days. In all other regions the average stay in short-stay hospitals was between 33 and 34 days.

Among decedents who had care in institutions, with or without care in short-stay hospitals, the highest proportion with bills of \$1,000 or more was reported in the Northeast (51 percent) but the highest average number of days of care was in the North Central Region (233 days).

Among the decedents who were not residents of institutions, there was little variation in the proportion who had episodes in short-stay hospitals when the decedents were classified by usual living arrangements (table 15). Over 90 percent of the decedents with reported expenses who were not residents of institutions had only short-stay hospital episodes regardless of whether they lived with a spouse only, with other relatives, or with nonrelatives or alone.

Among decedents who were not residents of institutions, the proportion whose bills were \$1,000 or over was also very similar for all living arrangements. Among decedents who had only short-stay hospital episodes, the proportions with expenses of \$1,000 or more were 36 percent for decedents who lived only with spouses, 36 percent for decedents who lived with other relatives, and 32 percent for decedents who either lived with nonrelatives or alone. The average number of days in short-stay hospitals varied from 29 to 32 days.

The meaning of institution when referring to living arrangements is not the same as when referring to places where care is received. Residents of institutions were usually, but not necessarily, residents of medical institutions. Thus a few of the residents of institutions were accurately reported as having no episodes or episodes in short-stay hospitals only. However, 301,000 out of the 306,000 residents of institutions were reported to have had care in an institution for medical care as defined in appendix II. About 47 percent of them had expenses of \$1,000 or more. Their average length of stay during the 12 months preceding death was 227 days. Expenses were higher and the average stay was shorter for institutional residents who received additional care in a short-stay hospital than for residents who received all their care in an institution.

As shown in table 16, the proportion of decedents with reported expenses who had only short-stay hospital episodes increased as family income increased. Only one-half of the decedents with reported expenses whose family income was under \$2,000 had short-stay hospital episodes. The comparable proportions for the other levels of income were 80 percent for decedents whose family income was \$2,000-3,999, 87 percent for decedents whose family income was \$4,000-6,999, and 90 percent for decedents whose family income was \$7,000 or more.

When using data relating to family income, the interrelationship between family income and living arrangements should be kept in mind. For example,

82 percent of decedents who were residents of institutions had family incomes under \$2,000. Since almost no residents of institutions had short-stay episodes only, the probability of having short-stay episodes only would be lower in the under \$2,000 income classes than in the other three income classes. Conversely, among decedents with expenses, the probability of having received care in a short-stay hospital would be higher for decedents with incomes of \$2,000 or more than for decedents with incomes under \$2,000.

As family income increased, the proportion of decedents with bills of \$1,000 or more also increased. For decedents hospitalized in only short-stay hospitals whose family income was under \$2,000, only 28 percent had expenses of \$1,000 or more and 21 percent had expenses of less than \$100. For decedents hospitalized only in short-stay hospitals whose family income was \$7,000 or more, 48 percent had bills of \$1,000 or more and 8 percent had bills of under \$100. The average number of days in short-stay hospitals for decedents with the lowest income was 34 days; for the highest income, 30 days.

At the lowest income level, the expenses for decedents with episodes in institutions were less than the expenses for institutional care incurred by decedents in the other levels of income, even though the decedents with incomes under \$2,000 had on the average more days of care. About 44 percent of the decedents with the lowest income with institutional care had hospital bills of \$1,000 or more. They spent, on the average, 227 days in hospitals or institutions during the last 12 months of life. The proportion of decedents with some institutional care who had expenses of \$1,000 or more was 66 percent for those with family incomes of \$7,000 and over. They spent, on the average, 171 days in hospitals or institutions during the last 12 months of life.

Table G, based on tables 9 and 17, shows the differences in utilization of medical facilities by marital status. The proportion with expenses for care in any type of facility showed little variation—only between 70 and 75 percent. However, the proportion with expenses for care in institutions showed more variation. Only 10 percent of the married decedents received care in institutions in contrast to 31 percent of the single and the widowed decedents. Moreover, the married decedents who

Table G. Average annual number and percentage of decedents by marital status, according to whether they had expenses and whether they received care in institutions: United States, 1964-65 deaths

Marital status	All decedents	Decedents with expenses	Decedents with expenses for institutional care
	Numb	er in thous	sands
All decedents	1,649	1,207	328
Married Widowed Single Divorced	859 568 147 74	622 424 108 52	
		Percentage	ė
All decedents	100.0	73.2	19.9
Married	100.0 100.0 100.0 100.0	72.4 74.6 73.4 70.3	30.5 31.3

received care in institutions had an average stay of 163 days, widowed decedents had 236 days, and single decedents had 252 days. About 26 percent of the divorced decedents had care in institutions; their average stay was 227 days.

The differences by marital status reflect characteristics of the decedent population. Widowed decedents were, on the average, older than the other decedents and a higher proportion were females because of the lower average age of death for males. While single decedents were younger, it is possible that some of them had never married because of a medical reason leading to death or because they were residents of institutions.

Despite the fact that the average number of days of care for decedents with institutional care varied from 163 days for married decedents to 252 days for single decedents, the proportion of those who received care in institutions with bills of \$1,000 or more was 45-47 percent for decedents in each marital status. However, 27 percent of the single decedents had bills under \$100 as

compared with only 13 percent of the married decedents.

Among decedents with short-stay episodes only, a higher proportion (42 percent) of divorced decedents had bills of \$1,000 or more. Their average number of days of care (41 days) was also longer than the average for all decedents with short-stay episodes only (32 days).

Number of Days of Care

Table 18 shows the cost of care in medical facilities by the number of episodes in the last year of life and the days of care in intervals of days. For decedents with only one episode, the proportion of decedents with bills of \$1,000 or more was highest for those decedents whose stay was between 29 and 56 days (approximately 1-2 months); for those with two episodes, it was between 92-182 days (approximately 3-6 months); and for those with three or more episodes, it was between 57-91 days (approximately 2-3 months).

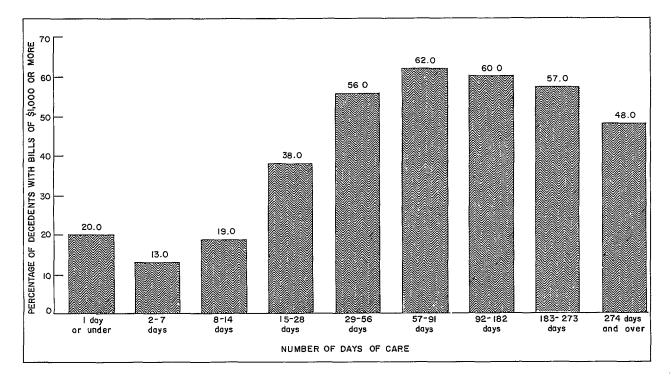


Figure 5. Percentage of decedents 25 years and over with hospital or institutional care and reported costs who had expenses of \$1,000 or more, by days-of-care intervals.

Table H. Percentage of decedents with expenses whose bills were \$1,000 or more, by number of days of care and number of episodes: United States, 1964-65 deaths

	Number of episodes			
Days-of-care intervals	All epi- sodes	One Two		Three or more
	Percentage			
All inter- vals	38	27	43	59
0-1 day 2-7 days 8-14 days 15-28 days 29-56 days 57-91 days 92-182 days 183-273 days 274 days	20 13 19 38 56 62 60 57	12 12 19 34 51 38 44 *	* 13 18 36 56 59 63 59	27 49 60 73 65
or more	48	48	48	49

Figure 5 shows the proportion of decedents with bills of \$1,000 or more by the days-of-care intervals. Regardless of the number of episodes, the highest proportion of decedents with bills of \$1,000 or more was found among those decedents with 57-91 days of care.

The proportion with bills of \$1,000 or more is shown by number of episodes for each days-of-care interval in table H. In general, for each interval, the proportion with bills of \$1,000 or more was higher for decedents with several episodes than for those with only one episode. The expense of hospitalization appears to depend not only on the number of days or the number of episodes but on a combination of both factors.

While it might be expected that expenses would increase directly with an increase in the number of days of care, this is not true because a higher proportion of the decedents with long stays had all or part of their care in institutions, where costs were generally lower than in short-stay hospitals. For example, 94 percent of the decedents who received care for 8-14 days were hospitalized in short-stay hospitals only, while 44 percent of those receiving care for 92-182

days were hospitalized in short-stay hospitals only (table 19).

The amount of the hospital bill for hospital care during the last year of life is dependent not only on the number of days of care but also on whether the care was in a short-stay hospital, in an institution, or in both. For any given daysof-care interval, the proportion of decedents with bills of \$1,000 or more was generally highest for those decedents who had care only in short-stay hospitals. However, as shown in Table J, the proportion receiving care only in short-stay hospitals varied. About 84 percent of the decedents who received care only in short-stay hospitals were hospitalized 8 weeks (56 days) or less, whereas 19 percent of those who received care only in institutions were inpatients for that short a period.

In general, younger decedents had higher bills for any given days-of-care interval than did older decedents (table 20). For example, among those with stays of 29-56 days, 73 percent of the decedents aged 25-44 had bills of \$1,000 or more, 62 percent of the decedents aged

45-54, 59 percent of the decedents aged 55-64, 55 percent of the decedents aged 65-74, 56 percent of the decedents aged 75-84, and 37 percent of the decedents aged 85 or older. There are several possible reasons for the difference by age. First, a higher proportion of the younger decedents had all or part of their care in short-stay hospitals than did older decedents, who received much of their care in institutions. Second, a higher proportion of the younger decedents died of malignant neoplasms and of violent causes which may have necessitated more intensive care.

It has already been noted that females had, on the average, more days of care and higher hospital bills than males. However, as shown in table 21, for each days-of-care interval through 56 days, the proportion of decedents with bills of \$1,000 or more was approximately the same for males as for females. For decedents with 57 days of care or more, the proportion who had bills of \$1,000 or more was higher for females than for males.

Table J. Percent distribution of decedents with expenses by number of days of care, according to type of episode: United States, 1964-65 deaths

	A11	GI t]	Instituti	nstitution					
Days-of-care intervals	A11 types of episodes	types of	types of	types of	types of	stay only	27.1	Total	With short- stay	Without short- stay
	Percent distribution									
All intervals	100.0	100.0	100.0	100.0	100.0					
0-1 day	10.5 13.6 12.4 16.2 16.2 8.3 6.6 2.7 13.5	9.8 18.9 16.8 21.4 19.1 7.8 4.2 0.9		0.4 2.3 6.5 14.7 15.1 19.1 10.7 31.3	6.7 5.4					

Also, white decedents with expenses had more days of care and higher hospital bills than other decedents. For decedents with 14 days of care or less, the proportion of decedents with bills of \$1,000 or more was approximately the same for all decedents. However, among those decedents with more than 14 days of care, the proportion of decedents with bills of \$1,000 was higher among white decedents than among all other decedents.

For reasons not apparent from the data available from this survey, the expenses of care in hospitals and institutions were relatively independent of both color and sex for the shortest days-of-care intervals. However, for the longer intervals, female decedents and white decedents had higher bills than male decedents or decedents of other races.

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	Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life, percent distribution by the amount of bill, and average number of days of care during the year, according to family income and type of episode: United States, 1964-65 deaths	16.
	Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life, percent distribution by the amount of bill, and average number of days of care during the year, according to marital status and type of episode: United States, 1964-65 deaths	17.
	Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life and percent distribution by the amount of bill, according to number of episodes and number of days of care: United States, 1964-65 deaths	18.
	Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life, and percent distribution by the amount of bill, according to type of episode and number of days of care: United States, 1964-65 deaths	19.
	Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life and percent distribution by the amount of bill, according to age and number of days of care: United States, 1964-65 deaths	20.
	Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life, and percent distribution by the amount of bill, according to color, sex, and number of days of care: United States, 1964-65 deaths	21.

Table 1. Average annual number of decedents 25 years and over, percent and number of decedents with expenses for care in hospitals and institutions during the last year of life, and percent distribution of decedents with expenses by amount of bill, according to sex and age: United States, 1964-65 deaths

Marital status	All decedents		ents with censes	Amount of bill						
and age	(in thousands)	Percent	Number in thousands	Total	Less than \$100	\$100-; \$249	\$250 - \$499	\$500 - \$999	\$1,000 or more	
Both sexes				Percent distribution						
All ages, 25 years and over	1,649	73.2	1,207	100.0	15.3	11.8	15.7	18.7	38.4	
25-44 years	108	58.3	63	100.0	11.0	13.0	10.7	15.0	50.3	
45-54 years	162	67.4	109	100.0	14.9	10.8	14.9	17.2	42.2	
55-64 years	285	72.7	207	100.0	15.3	10.8	15.8	19.0	39.0	
65 years and over	1,094	75.7	828	100.0	15.6	12.1	16.2	19.1	36.9	
65-74 years	432	75.0	324	100.0	15.9	10.8	14.9	20.7	37.8	
75-84 years	450	75.9	342	100.0	14.6	13.3	17.4	19.3	35.3	
85 years and over	212	76.5	162	100.0	17.2	12.5	16.4	15.6	38.3	
Male										
All ages, 25 years and over	928	70.5	645	100.0	15.2	12.4	16.6	19.0	36.8	
25-44 years	67	50.9	34	100.0	12.3	15.4	12.3	13.2	46.9	
45-54 years	103	63.5	66	100.0	17.4	11.8	15.4	14.9	40.5	
55-64 years	185	69.2	128	100.0	16.1	11.2	17.1	17.3	38.3	
65 years and over	572	74.4	425	100.0	14.8	12.6	17.0	20.5	35.0	
65-74 years	258	73.8	190	100.0	15.1	11.1	15.7	21.6	36.5	
75-84 years	228	74.8	171	100.0	13.7	13.5	18.0	21.0	33.9	
85 years and over	86	75.3	65	100.0	16.8	14.5	18.6	16.3	33.8	
Female						ļ				
All ages, 25 years and over	721	76.7	553	100.0	15.4	11.2	14.7	18.5	40.3	
25-44 years	41	70.4	29	100.0	9.3	10.3	8.9	17.2	54.3	
45-54 years	59	74.3	44	100.0	11.2	9.2	14.1	20.8	44.6	
55~64 years	99	79.0	79	100.0	14.1	10.2	13.8	21.8	40.1	
65 years and over	522	77.0	402	100.0	16.5	11.6	15.4	17.6	38.9	
65-74 years	174	76.8	134	100.0	16.9	10.2	13.7	19.5	39.7	
75-84 years	222	77.1	171	100.0	15.6	13.0	16.9	17.6	36.8	
85 years and over	126	77.3	97	100.0	17.5	11.1	14.9	15.1	41.3	

Table 2. Average annual number of decedents 25 years and over, percent and number of decedents with expenses for care in hospitals and institutions during the last year of life, and percent distribution of decedents with expenses by amount of bill, according to color and age: United States, 1964-65 deaths

	All decedents	Deceder expe	Amount of bill						
Color and age	(in thousands)	Percent	Number in thousands	Total	Less than \$100	\$100- \$249	\$250- \$499	\$500- \$999	\$1,000 or more
<u>Total</u>				Percent distribution					
All ages, 25 years and over	1,649	73.2	1,207	100.0	15.3	11.8	15.7	18.7	38.4
25-44 years	108	58.3	63	100.0	11.0	13.0	10.7	15.0	50.3
45-54 years	162	67.4	109	100.0	14.9	10.8	14.9	17.2	42.2
55-64 years	285	72.7	207	100.0	15.3	10.8	15.8	19.0	39.0
65 years and over	1,094	75.7	828	100.0	15.6	12.1	16.2	19.1	36.9
65-74 years	432	75.0	324	100.0	15.9	10.8	14.9	20.7	37.8
75-84 years	450	75.9	342	100.0	14.6	13.3	17.4	19.3	35.3
85 years and over	212	76.5	162	100.0	17.2	12.5	16.4	15.6	38.3
White									
All ages, 25 years								:	
and over	1,467	74.0	1,086	100.0	13.8	11.4	15.8	19.2	39.9
25-44 years	82	58.6	48	100.0	9.5	12.3	11.0	14.5	52.8
45-54 years	134	68.9	92	100.0	11.9	10.5	14.5	18.1	44.9
55-64 years	244	72.8	177	100.0	12.9	9.4	15.6	20.5	41.6
65 years and over	1,008	76.2	769	100.0	14.5	11.9	16.3	19.3	38.0
65-74 years	386	75.6	292	100.0	14.0	10.5	14.8	21.2	39.5
75-84 years	421	76.3	321	100.0	14.0	13.1	17.4	19.3	36.2
85 years and over	200	77.4	155	100.0	16.3	12.2	16.7	15.7	39.1
All other									
All ages, 25 years and over	181	66.4	120	100.0	28.8	15.6	15.5	14.6	25.5
25-44 years	26	57.2	15	100.0	15.8	15.4	9.8	16.8	42.2
45-54 years	28	60.3	17	100.0	31.4	12.1	16.9	12.4	27.2
55-64 years	41	71.6	29	100.0	30.3	19.4	17.2	10.2	22.9
65 years and over	86	68.8	59	100.0	30.7	14.8	15.6	16.9	21.9
65-74 years	46	70.1	32	100.0	32.5	13.0	15.3	16.4	22.7
75-84 years	28	70.3	20	100.0	25.1	16.8	18.3	19.1	20.8
85 years and over	11	60.0	7	100.0	*	*	*	*	*

Table 3. Average annual number of decedents 25 years and over, percent and number of decedents with expenses for care in hospitals and institutions during the last year of life, and percent distribution of decedents with expenses by amount of bill, according to cause of death: United States, 1964-65 deaths

	All		nts with enses		Ar	nount o	£ ъі11				
Cause of death (Seventh Revision of International Lists, 1955)	decedents (in thousands)	Percent	Number in thousands	Total	Less than \$100	\$100- \$249	\$250~ \$499	\$500- \$999	\$1,000 or more		
				Percent distribution							
			i		rerco	ent dis	cribucio	on			
All causes of death	1,649	73.2	1,207	100.0	15.3	11.8	15.7	18.7	38.4		
All diseases of heart(400-402, 410-416, 420-422, 430-434, 440-443)	701	63.7	446	100.0	17.1	13.8	17.6	18.0	33.4		
Arteriosclerotic heart disease, including coronary disease(420)	550	61.9	340	100.0	16.1	14.1	17.4	19.3	33.1		
Nonrheumatic chronic endocarditis and other myocardial degeneration(421-422)	52	68.2	35	100.0	20.5	10.7	18.5	14.8	35.5		
Other heart disease(400-402, 430-434,440-443)	99	71.7	71	100.0	20.4	14.2	18.4	13.4	33.7		
All malignant neoplasms(140-148,							1		1		
150-165, 170-181, 190-205)	286	91.8	263	100.0	9.5	6.7	11.3	19.7	52.8		
Malignant neoplasm of buccal cavity and pharynx(140-148) Malignant neoplasm of digestive organs and peritoneum, not specified as secondary(150-156A, 157-159)	6	92.3	6	100.0	*	sk:	*	*	*		
	93	90.8	84	100.0	8.9	5.7	10.4	19.4	55.6		
specified as secondary(160-164)	49	92.6	45		10.5	5.5	10.1	22.2	51.7		
Malignant neoplasm of breast(170) Malignant neoplasm of genital	27	89.7	25		10.1	9.4	11.6	17.9	51.0		
organs(171-179) Malignant neoplasm of urinary organs(180-181)	41	92.0	38	100.0	9.2	9.6	12.0	21.1	48.1		
organs(180-181) Malignant neoplasm of other and	13	95.1	12	100.0	6.4	5.4	8.0	21.6	58.6		
unspecified sites(156B, 165, 190-199) Leukemia and aleukemia(204) Lymphosarcoma and other neoplasms of lymphatic	32 11	92.9 94.1	30 10		11.1 6.1	7.8 8.0	13.1 19.2	18.7 19.1	49.3 47.5		
and hematopoietic tissues(200-203, 205)	14	91.8	13	100.0	10.3	2.5	8.3	17.7	61.1		
Vascular lesions affecting central nervous system(330-334)	200	78.3	157	100.0	17.3	13.1	18.5	17.4	33.7		
Influenza and pneumonia, except of newborn(480-493)	48	83.2	40	100.0	18.8	13.6	17.1	16.2	34.4		
General arteriosclerosis(450)	37	74.7	28	100.0	16.6	10.2	12.5	19.3	41.4		
General arteriosclerosis(450) Diabetes mellitus(260) Accidents(E800-E962)	32 31	80.8 29.8	26 9	100.0	15.4 14.4	14.8 21.4	13.5 14.3	20.2 16.1	36.1 33.8		
Other diseases of circulatory system(451-468)	26	81.2	21		20.3	13.9	10.8	19.4	35.5		
Other bronchopulmonic diseases (525-527)	24	86.2	20		10.5	8.0	20.1	25.8	35.6		
Cirrhosis of liver(581)	24	84.8	20	100.0	15.7	9.6	17.4	20.4	36.9		
Suicide(E963, E970-E979) Other hypertensive disease(444-447)	20 12	51.8 87.2		100.0	13.4	24.8 13.1	19.4 19.1	21.1	21.4		
Homicide(E964, E980-E985)	7	28.2	*	100.0	4.7	13.1	19.1	19.2			
All other causes(750-776, residual)	203	76.3	155	100.0	17.3	11.9	15.2	19.5	36.1		

Table 4. Average annual number of decedents 25 years and over, percent and number of decedents with expenses for care in hospitals and institutions during the last year of life, and percent distribution of decedents with expenses by amount of bill, according to sex, age, and cause of death: United States, 1964-65 deaths

	A11		ents with penses	Amount of bill						
Sex, age, and cause of death	decedents (in thousands)	Percent	Number in thousands	Total	Less than \$100	\$100- \$249	\$250- \$499	\$500- \$999	\$1,000 or more	
BOTH SEXES				Percent distribution						
All ages, 25 years and over										
All causes of death	1,649	73.2	1,207	100.0	15.3	11.8	15.7	18.7	38.4	
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	550 151 286 200 57 404	61.9 70.5 91.8 78.3 37.1 79.0	340 106 263 157 21 320	100.0 100.0 100.0 100.0 100.0	16.1 20.4 9.5 17.3 14.2 16.5	14.1 13.0 6.7 13.1 21.8 12.0	18.4 11.3 18.5 16.9	19.3 13.9 19.7 17.4 18.6 19.6	33.1 34.3 52.8 33.7 28.6 36.6	
<u>25-44 years</u>										
All causes of death	108	58.3	63	100.0	11.0	13.0	†	15.0	50.3	
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	14 5 20 6 25 39	31.5 73.5 91.4 61.3 28.1 67.6	4 19 * 7 26	100.0 100.0 100.0 100.0 100.0	8.5 * * 10.2	4.1 4.1 * *	4.9 *	12.8 * 12.8 * *	* 69.7 * 44.5	
45-54 years		<u> </u>								
All causes of death	162	67.4	109	100.0	14.9	10.8		17.2	42.2	
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting (RS(330-334)) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	47 13 39 10 11 42	52.0 62.3 94.8 64.0 41.5 69.2	25 8 37 7 5 29	100.0 100.0 100.0 100.0 100.0	16.8 6.1 2 4 19.4	12.6 * 7.0 * * 11.1	9.3	20.7 * 16.8 * 16.0	32.1 * 60.8 * * 39.6	
55-64 years										
All causes of death	285	72.7	207	100.0	15.3	10.8	15.8	19.0	39.0	
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	95 21 69 23 9 67	57.4 67.7 92.5 73.7 48.5 78.3	54 14 64 17 5 52	100.0 100.0 100.0 100.0 100.0 100.0	17.8 17.3 7.3 25.8 *	13.0 11.8 5.0 12.5 * 13.7	17.2 12.2 19.7	21.3 20.3 19.7 15.4 * 17.1	31.9 33.3 55.8 26.6 * 32.5	
65-74 years										
All causes of death	432	75.0	324	100.0	15.9	10.8	14.9	20.7	37.8	
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes	159 37 82 49 6 98	61.0 69.7 91.5 82.8 51.6 83.4	97 26 75 41 * 82	100.0 100.0 100.0 100.0 *	16.4 21.0 11.4 17.5 * 16.2	12.9 11.5 6.6 14.4 *	15.4 10.2 16.9	19.1 16.5 22.8 19.4 *	34.1 35.6 49.0 31.7 * 35.8	
75-84 years		İ								
All causes of death	450	75.9	342	100.0	14.6	13.3	17.4	19.3	35.3	
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	162 47 61 73 5 102	66.6 70.6 91.7 81.2 30.5 82.2	108 33 56 59 * 84	100.0 100.0 100.0 100.0	14.6 17.3 10.6 15.3 15.6	16.5 14.3 7.6 13.9 12.3	20.6 14.3 19.8	19.6 13.0 20.5 17.2 22.1	31.0 34.9 47.0 33.8 34.4	
85 years and over										
All causes of death	212	76.5	162	100.0	17.2	12.5	 	15.6	38.3	
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	73 28 15 38 *	71.3 76.8 83.3 76.2 *	52 21 12 29 47	100.0 100.0 100.0 100.0 100.0	16.1 23.5 14.8 15.1 4	12.6 16.0 16.4 10.0 10.9	19.0 14.8 15.4	17.0 10.6 16.4 16.9 *	37.6 30.9 37.6 42.6 *	

Table 4. Average annual number of decedents 25 years and over, percent and number of decedents with expenses for care in hospitals and institutions during the last year of life, and percent distribution of decedents with expenses by amount of bill, according to sex, age, and cause of death: United States, 1964-65 deaths--Con.

	All		lents with openses			Amount	of bill		
Sex, age, and cause of death	decedents (in thousands)	Percent	Number in thousands	Total	Less than \$100	\$100- \$249	\$250- \$499	\$500- \$999	\$1,000 or more
MALE				Percent distribution					
All ages, 25 years and over	028	70.5	645	700 0	1 15 0	104	ا مر دا	10.0	26.0
All causes of death(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	928 333 71 153 94 41 236	59.0 68.3 92.3 77.0 37.1 76.4	196 48 141 72 15 180	100.0 100.0 100.0 100.0 100.0 100.0	16.4 18.5 9.9 16.6 13.1	12.4 15.3 14.7 6.2 11.7 25.9 12.6	16.6 17.0 22.8 11.8 22.4 20.4 15.7	19.0 19.2 12.9 20.1 21.0 12.9 19.1	36.8 32.1 31.0 51.9 28.3 27.7 35.9
25-44 years				:					
All causes of death	67	50.9	34	100.0	12.3	15.4	12.3	13.2	46.9
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	11 3 9 3 18 24	26.6 81.6 87.8 * 27.4 62.0	3 2 8 * 5 15	100.0 100.0 100.0 * 100.0	26.7 * 11.9 * 3.2 12.7	15.8 2.0 * 36.2 17.0	21.3 * 5.6 * 15.8 9.5	5.4 * 15.8 * 9.3	30.8 * 64.8 * 35.4 45.0
45-54 years									
All causes of death	103	63.5	66	100.0	17.4	11.8	15.4	14.9	40.5
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	39 7 19 5 8 26	51.5 60.7 93.7 63.4 41.1 66.9	20 4 18 3 3 18	100.0 100.0 100.0 100.0 100.0 100.0	18.3 30.7 7.8 15.9 10.5 24.6	15.5 17.7 5.8 10.8 21.3 10.7	17.3 8.6 9.7 31.4 31.6 14.7	15.5 8.4 11.6 21.1 21.0 16.7	33.5 34.6 65.1 20.8 15.6 33.3
55-64 years									
All causes of death	185	69.2	128	100.0	16.1	11.2	17.1	17.3	38.3
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	70 12 39 13 7 44	55.9 62.7 94.5 71.5 50.1 72.6	39 8 36 9 4 32	100.0 100.0 100.0 100.0 100.0	19.8 16.6 8.0 22.4 9.2 19.7	13.2 12.6 4.4 13.8 31.8 13.0	15.7 22.8 12.8 27.5 27.2 18.1	18.2 10.3 19.1 19.1 9.2 16.2	33.1 37.7 55.6 17.2 22.7 33.0
65-74 years									
All causes of death(420)	258	73.8 58.9	190	100.0	15.1	11.1	15.7	21.6	36.5
All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	19 47 26 5 61	69.3 92.9 82.0 51.9 83.1	13 44 22 2 50	100.0 100.0 100.0 100.0 100.0	21.5 11.1 17.8 36.1 15.9	11.5 6.9 11.5 6.9 10.9	18.9 11.1 20.2 7.2 14.3	15.3 24.3 23.4 14.4 21.9	32.9 46.7 27.2 35.3 37.0
75-84 years									
All causes of death	228	74.8	171	100.0	 	13.5	18.0	21.0	33.9
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	83 20 34 32 3 55	65.3 67.9 90.8 80.5 * 81.4	54 14 31 26 * 45	100.0 100.0 100.0 100.0 *	14.3 14.1 11.3 13.4 * 14.1	18.2 16.5 5.3 13.5 *	15.9 27.9 14.7 26.0 *	21.5 15.5 21.7 19.1 * 22.9	30.2 26.0 47.1 28.0 *
85 years and over									
All causes of death	86	75.3	65	100.0	16.8	14.5	18.6	16.3	33.8
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CMS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	29 10 6 14 * 26	71.0 75.3 82.6 74.0 * 79.0	21 8 5 11 *	100.0 100.0 100.0 100.0 *	18.7 19.8 10.7 16.3 *	28.2 8.0 *	17.9 25.8 10.9 11.0 *	17.1 10.7 18.2 24.1 *	32.5 26.0 31.9 40.6 *

Table 4. Average annual number of decedents 25 years and over, percent and number of decedents with expenses for care in hospitals and institutions during the last year of life, and percent distribution of decedents with expenses by amount of bill, according to sex, age, and cause of death: United States, 1964-65 deaths--Con.

bill, according to sex, age, and cause of do	All	Deced	ents with penses		 :	Amount	of bill		
Sex, age, and cause of death	decedents (in thousands)	Percent	Number in thousands	Total	Less than \$100	\$100- \$249	\$250- \$499	\$500 - \$999	\$1,000 or more
FEMALE					P	ercent	distrib	ution	
All ages, 25 years and over			550	100.0	1	1 11 0	1 14 7	l 10 E 1	40.3
All causes of death	721	76.7 66.2	553 144	100.0		11.2	14.7	18.5	34.5
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	80 133 106 16 168	72.5 91.3 79.5 37.2 82.7	158 122 84 6 139	100.0 100.0 100.0 100.0 100.0	22.0 8.9 18.0 16.9	11.6 7.3 14.3 11.4 11.2	14.7 10.7 15.2 8.0 14.9	14.7 19.3 14.3 32.9 20.1	37.1 53.8 38.2 30.9 37.4
25-44 years	4.7	70.6	20	100.0	0.3	10.3	8.9	17.2	54.3
All causes of death	. 41	70.4	29	*	9.3	*	*	*	*
All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(30-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	2 11 3 7 15	94.2 ** 30.0 76.9	* 11 * 2 11	100.0 * 100.0 100.0	6.1 * 17.7 6.9	5.6 * 16.3 13.8	4.4 * 0.0 14.5	10.6 * 40.2 20.8	73.3 * 25.8 43.9
45-54 years									
All causes of death	59	74.3	44	100.0		0.0	20.3	43.2	26.0
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	9 6 20 5 3 15	54.1 64.0 95.7 64.6 * 73.0	5 4 19 3 *	100.0 100.0 100.0 100.0 100.0 *	32.6 4.6 23.7	0.0 8.1 25.4 *	31.1 9.0 19.8 *	8.3 21.7 19.9 *	28.0 56.6 11.2 * 49.4
55-64 years									
All causes of death	99	79.0	79	100.0	14.1	10.2	13.8	21.9	40.1
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	25 9 31 10 2 23	61.5 74.7 90.1 76.5 *	15 7 28 8 * 20	100.0 100.0 100.0 100.0 *	18.2 6.4 30.0 *	12.5 11.0 5.7 10.9 * 14.8	17.1 10.7 11.4 10.4 *	29.1 32.0 20.6 10.9 *	28.8 28.1 55.9 37.8 *
65-74 years			101		16.0		10.7	10.5	20.7
All causes of death	174	76.8	134	100.0	H	10.2	13.7	19.5	39.7
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	59 18 36 23 2 37	64.6 70.2 89.7 83.6 83.9	38 13 32 19 * 31	100.0 100.0 100.0 100.0 *	20.6 12.0 17.2 *	11.5 6.1 17.6 *	11.6 9.1 13.3 *	17.9 20.8 15.0 *	38.5 52.1 36.8 *
75-84 years									
All causes of death	222	77.1	171	100.0	₩	13.0	16.9	17.6	36.8
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	79 27 27 41 1 47	67.9 72.6 92.7 81.8 *	54 19 25 33 * 39	100.0 100.0 100.0 100.0 *	19.5 9.7 16.7 *	14.8 12.7 10.4 14.3 *	20.7 15.4 13.8 14.9 * 16.3	17.7 11.2 19.2 15.7 * 21.2	31.9 41.2 46.9 38.4 *
85 years and over									
All causes of death	126	77.3	97	100.0	H	11.1	14.9	15.1	41.3
Arteriosclerotic heart disease(420) All other heart disease(400-416, 421-443) Malignant neoplasms(140-205) Vascular lesions affecting CNS(330-334) All violent deaths(E800-E964, E970-E985) All other causes(Residual)	44 18 9 24 - 32	71.5 77.6 83.7 77.5 * 83.5	31 14 7 19 *	100.0 100.0 100.0 100.0 *	25.6 17.4 14.4 *	11.8 15.1 8.7 11.1 *	17.3 17.9	16.9 10.5 15.2 12.8 *	41.0 33.7 41.4 43.7 * 44.0

Table 5. Average annual number of decedents 25 years and over, percent and number of decedents with expenses for care in hospitals and institutions during the last year of life, and percent distribution of decedents with expenses by amount of bill, according to region and division: United States, 1964-65 deaths

Region and division	All		Decedents with expenses		Amount of bill						
	decedents (in thousands)	Percent	Number in thousands	Total	Less than \$100	\$100 - \$249	\$250 - \$499	\$500- \$999	\$1,000 or more		
					Pe	rcent d	listribu	tion			
All regions	1,649	73.2	1,207	100.0	15.3	11.8	15.7	18.7	38.4		
Northeast	462	72.6	336	100.0	14.6	11.5	14.2	17.8	41.8		
New England	104	76.3	79	100.0	12.1	11.4	13.2	16.0	47.3		
Middle Atlantic	358	71.6	257	100.0	15.4	11.6	14.5	18.4	40.1		
North Central	476	76.0	362	100.0	14.4	9.9	15.0	19.9	40.8		
East North Central-	331	74.7	247	100.0	13.8	9.5	15.4	20.2	41.1		
West North Central-	145	79.1	115	100.0	15.7	10.8	14.2	19.1	40.1		
South	474	70.5	334	100.0	17.0	14.4	18.5	18.9	31.2		
South Atlantic	226	70.5	160	100.0	17.2	13.5	17.1	18.7	33.5		
East South Central-	105	67.4	71	100.0	18.7	17.7	18.9	16.2	28.5		
West South Central-	142	72.8	103	100.0	15.5	13.5	20.6	20.9	29.5		
West	237	74.0	175	100.0	15.1	11.4	14.9	17.9	40.8		
Mountain	57	74.3	42	100.0	12.4	16.4	16.4	21.8	33.0		
Pacific	180	73.9	133	100.0	15.9	9.8	14.4	16.6	43.3		

Table 6. Average annual number of decedents 25 years and over, percent and number of decedents with expenses for care in hospitals and institutions during the last year of life, and percent distribution of decedents with expenses by amount of bill, according to region and age: United States, 1964-65 deaths

	All decedents		nts with enses	Amount of bill						
Region and age	(in thousands)	Percent	Number in thousands	Total	Less than \$100	\$100- \$249	\$250- \$499	\$500 - \$999	\$1,000 or more	
All regions				Percent distribution						
All ages, 25 years and over	1,649	73.2	1,207	100.0	15.3	11.8	15.7	18.7	38.4	
25-64 years65 years and over	555 1,094	68.3 75.7	379 828	100.0 100.0	14.5 15.6	11.2 12.1	14.7 16.2		41.8 36.9	
Northeast										
All ages, 25 years and over	462	72.6	336	100.0	14.6	11.5	14.2	17.8	41.8	
25-64 years	144	70.8	102	100.0	14.3	10.9	13.2	17.0	44.6	
65 years and over	318	73.5	234	100.0	14.7	11.8	14.6	18.2	40.6	
North Central	:									
All ages, 25 years and over	476	76.0	362	100.0	14.4	9.9	15.0	19.9	40.8	
25-64 years	144	71.3	103	100.0	14.6	8.0	12.7	18.3	46.4	
65 years and over	332	78.1	259	100.0	14.3	10.7	15.9	20.5	38.6	
South									:	
All ages, 25 years and over	474	70.5	334	100.0	17.0	14.4	18.5	18.9	31.2	
25-64 years	182	64.9	118	100.0	14.7	13.9	18.2	19.7	33.5	
65 years and over	292	74.0	216	100.0	18.3	14.7	18.7	18.4	29.9	
West										
All ages, 25 years and over	237	74.0	175	100.0	15.1	11.4	14.9	17.9	40.8	
25-64 years	85	1	1	1	14.4		13.6		45.7	
65 years and over	152	78.3	119	100.0	15.4	11.3	15.4	19.3	38.5	

Table 7. Average annual number of decedents 25 years and over, percent and number of decedents with expenses for care in hospitals and institutions during the last year of life, and percent distribution of decedents with expenses by amount of bill, according to region and cause of death: United States, 1964-65 deaths

penses by amount of bill, accordin	g to region a	and cause	of death:	United	States	, 1964-	65 deatl	ns	
Region and cause of death	All decedents		ents with enses			Amoun	t of bi	L1	*
(Seventh Revision of International Lists, 1955)	(in thousands)	Percent	Number in thousands	Total	Less than \$100	\$100- \$249	\$250- \$499	\$500- \$999	\$1,000 or more
All regions		j			De	mannt d	listribu		
All causes of death	1,649	73.2	1 207	100.0	al.		1		
mir dadasor degen	1,049	75.2	1,207	100.0	15.3	11.8	15.7	18.7	38.4
Arteriosclerotic heart disease-(420) All other heart	550	61.9	340	100.0	16.1	14.1	17.4	19.3	33.1
disease(400-416,421-443) Malignant neoplasms(140-205)	151 286	70.5 91.8	106 263		20.4 9.5	13.0 6.7	18.4 11.3	13.9 19.7	34.3 52.8
Vascular lesions affecting CNS(330-334)	200	78.3	157	100.0	17.3	13.1	18.5	17.4	33.7
All violent deaths(E800-E964,E970-E985)	57	37.1	21.	100.0	14.2	21.8	16.9	18.6	28.6
All other causes(Residual)	404	79.0	320		16.5	12.0	15.4	19.6	36.6
Northeast						,			33.0
All causes of death	462	72.7	336	100.0	14.6	11.5	14.2	17.8	41.8
Arteriosclerotic heart disease-(420) All other heart	170	60.4	103	100.0	16.6	13.6	15.0	17.3	37.4
disease(400-416,421-443) Malignant neoplasms(140-205) Vascular lesions affecting	39 88	71.0 90.5	28 80		14.8 9.4	12.9 6.7	17.8 10.9	13.0 19.9	41.6 53.1
CNS(330-334) All violent	46	74.1	34	100.0	16.9	10.3	15.6	16.3	40.9
deaths(E800-E964,E970-E985) All other	9	45.1	4	100.0	*	*	*	*	*
causes(Residual)	109	79.5	87	100.0	15.4	12.9	14.8	18.1	38.8
North Central									
All causes of death	476	76.0	362	100.0	14.4	9.9	15.0	19.9	40.8
Arteriosclerotic heart disease-(420) All other heart	163	64.0	104	100.0	16.1	13.1	15.9	21.0	33.9
disease(400-416,421-443) Malignant neoplasms(140-205) Vascular lesions affecting	43 84	75.8 92.7	33 78	100.0 100.0	23.7 8.8	13.1 4.5	17.3 9.7	12.0 19.6	34.0 57.4
CNS(330-334) All violent	59	81.3	48	100.0	13.5	10.7	19.6	21.6	34.6
deaths(E800-E964,E970-E985) All other	16	36.5	6	100.0	*	*	*	*	*
causes(Residual)	111	83.9	93	100.0	14.1	9.4	15.6	20.6	40.3
<u>South</u>	ŀ								
All causes of death	474	70.5	334	100.0	17.0	14.4	18.5	18.9	31.2
Arteriosclerotic heart disease-(420) All other heart	143	59.3	85	100.0	14.7	16.5	20.9	19.0	28.8
disease(400-416,421-443) Malignant neoplasms(140-205) Vascular lesions affecting	49 77	67.2 92.4	33 72	100.0 100.0	24.1 9.8	12.7 9.6	19.5 13.8	15.6 21.1	28.1 45.8
CNS(330-334) All violent	67	76.1	51	100.0	23.3	17.7	20.6	15.4	23.1
deaths(E800-E964,E970-E985)	20	36.3	7	100.0	*	*	*	*	*
causes(Residual)	117	73.6	86	100.0	19.7	13.5	18.4	20.3	28.1
West	Ì						1		
All causes of death	237	74.0	175	100.0	15.1	11.4	14.9	17.9	40.8
Arteriosclerotic heart disease-(420)	73	65.2	48	100.0	17.5	12.8	19.3	20.6	29.8
disease(400-416,421-443) Malignant neoplasms(140-205) Vascular lesions affecting	20 36	65.9 91.5	13 33	100.0	15.0 10.4	13.7 5.9	19.8 10.5	16.3 16.8	35.2 56.4
CNS(330-334)	28	84.5	23	100.0	12.7	12.4	16.0	14.7	44.2
deaths(E800-E964,E970-E985)	13	33.6	4	100.0	*	*	*	*	*
causes(Residual)	67	79.7	53	100.0	17.4	12.5	10.9	19.0	40.1
30									

Table 8. Average annual number of decedents 25 years and over, percent and number of decedents with expenses for care in hospitals and institutions during the last year of life, and percent distribution of decedents with expenses by amount of bill, according to living arrangements and family income: United States, 1964-65 deaths

## thousands Total \$100 \$249 \$499 \$999 or mor ### Percent distribution Percent distribution ### Percent distribution Percent distribution ### Per				- ****						
## All livomes Company All lincomes Company All lincomes Company All lincomes Company All lincomes Company	Living arrangements						Amoun	ıt of bi	i.11	
All incomes		(in	Percent	in	Total	than	\$100- \$249	\$250- \$499		\$1,000 or more
All incomes										
Under \$2,000					i	Pe	rcent d	istribu	ition	
\$2,000-\$3,999	All incomes	1,649	73.2	1,207	100.0	15.3	11.8	15.7	18.7	38.4
\$2,000-\$3,999	Under \$2,000	717	77.7	557	100.0	20.6	13.2	15.0	16.6	34.8
\$4,000-\$6,999	\$2,000-\$3,999	363	71.2	258	100.0	14.0		1	· ·	38.0
\$7,000 and over	\$4,000-\$6,999	301	68.2	205	100.0	11				39.5
All incomes ————————————————————————————————————		268	69.6	1	1	11	į.		l	48.7
Under \$2,000	Decedent and spouse only								'	
\$2,000-\$3,999	All incomes	451	71.0	320	100.0	12.2	11.1	18.0	22.6	36.1
\$4,000-\$6,999	Under \$2,000	149	69.0	103	100.0	14.9	15.8	22.4	21.3	25.6
\$4,000-\$6,999	\$2,000-\$3,999	147	72.2	106	100.0	12.5	10.0	17.0	24.9	35.6
\$7,000 and over	\$4,000-\$6,999	90	69.3	62	100.0	9.3	9.3	17.5	21.8	42.0
All incomes	\$7,000 and over	64	75.1	48	100.0	9.3	5.7	11.6	21.6	51.9
Under \$2,000	Lived with other relatives									
\$2,000-\$3,999	All incomes	616	65.4	403	100.0	14.3	12.9	17.7	18.6	36.5
\$2,000-\$3,999	Under \$2,000	126	62.9	79	100.0	25.9	15.5	16.7	16.3	25.6
\$4,000-\$6,999	\$2,000-\$3,999	136	63.2	86		ll i			ì	34.4
\$7,000 and over	\$4,000-\$6,999	174	66.4	115	100.0	10.8		-		35.6
All incomes	\$7,000 and over	180	68.0	123		7.1	12.5	1	i	46.0
Under \$2,000	Lived with nonrelatives									
\$2,000-\$3,999	All incomes	275	64.4	177	100.0	17.5	13.1	17.7	19.8	31.9
\$4,000-\$6,999	Under \$2,000	190	64.7	123	100.0	22.1	13.0	16.9	18.4	29.5
\$4,000-\$6,999	\$2,000-\$3,999	43	68.3	29	100.0	7.8	15.2	20.8	21.5	34.7
47 000	\$4,000-\$6,999	26	62.5	16		ì I				36.8
	\$7,000 and over	16	52.9	9	100.0	11.4	9.6	9.5	22.6	47.0
Lived in institution	Lived in institution		ļ							
All incomes 306 100.0 306 100.0 18.5 10.4 9.7 14.2 47.	All incomes	306	100.0	306	100.0	18.5	10.4	9.7	14.2	47.1
Under \$2,000 252 100.0 252 100.0 20.4 11.4 10.4 13.8 44.	Under \$2,000	252	100.0	252	100.0	20.4	11.4	10.4	13.8	44.0
30,000,000,000	\$2,000-\$3,999	37	100.0	37	100.0	12.2	5.9	7.8	1	55.9
At 200 44 200	\$4,000-\$6,999	11	100.0	11		5.9		1		70.4
	\$7,000 and over	7	100.0	7	100.0	*	1			*

Table 9. Average annual number of decedents 25 years and over, percent and number of decedents with expenses for care in hospitals and institutions during the last year of life, and percent distribution of decedents with expenses by amount of bill, according to marital status and age: United States, 1964-65 deaths

Marital status	All decedents		nts with enses			Amount	of bil	1	
and age	(in thousands)	Percent	Number in thousands	Total	Less than \$100	\$100- \$249	\$250~ \$499	\$500 - \$999	\$1,000 or more
All marital statuses				Percent distribution					
All ages, 25 years and over	1,649	73.2	1,207	100.0	15.3	11.8	15.7	18.7	38.4
25-64 years	555	68.3	379	100.0	14.5	11.2	14.7	17.9	41.8
65 years and over	1,094	75.7	828	100.0	15.6	12.1	16.2	19.1	36.9
Married									
All ages, 25 years and over	859	72.4	622	100.0	13.1	12.0	15.9	20.3	38.7
25-64 years	401	69.3	278	100.0	12.7	10.7	14.6	18.2	43.9
65 years and over	458	75.2	344	100.0	13.4	13.1	16.9	22.1	34.6
Widowed								:	
All ages, 25 years and over	568	74.6	424	100.0	16.7	11.5	16.3	17.9	37.5
25-64 years	62	71.8	45	100.0	20.2	11.8	16.2	17.4	34.3
65 years and over	506	75.0	379	100.0	16.3	11.5	16.4	18.0	37.8
Single									
All ages, 25 years and over	147	73 . 4	108	100.0	20.9	11.6	15.0	14.5	38.1
25-64 years	57	64.6	37	100.0	19.5	13.6	14.7	18.0	34.2
65 years and over	91	79.0	72	100.0	21.6	10.5	15.1	12.7	40.1
Divorced									
All ages, 25 years and over	74	70.3	52	100.0	18.1	13.0	11.0	14.9	43.0
25-64 years	35	57.3	20	100.0	17.9	12.3	12.8	14.0	42.9
65 years and over	39	82.2	32	100.0	18.3	13.4	9.9	15.4	43.1

Table 10. Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life, percent distribution by the amount of bill, and average number of days of care during the year, according to age and number of episodes: United States, 1964-65 deaths

Age and number	Number of decedents with			Amount	of bil	1		Average number	
of episodes	expenses (in thousands)	Total	Less than \$100	\$100- \$249	\$250- \$499	\$500 - \$999	\$1,000 or more	of days of care	
			Percent distribution						
All ages, 25 years and over	1,207	100.0	15.3	11.8	15.7	18.7	38.4	80.9	
No episodes	44 598 307 258	100.0 100.0 100.0 100.0	15.8 19.5 11.6 9.8	13.6 15.9 8.7 5.9	21.4 19.2 14.3 8.6	15.0 18.2 22.0 16.7	34.2 27.3 43.4 59.0	75.6 78.4 109.8	
25-44 years	63	100.0	11.0	13.0	10.7	15.0	50.3	54.7	
No episodes	* 23 16 21	* 100.0 100.0 100.0	12.1 11.2 9.2	21.8 11.3 5.1	* 11.3 14.2 7.0	23.1 10.1 12.1	* 31.7 53.2 66.6	37.4 60.5 79.2	
45-54 years	109	100.0	14.9	10.8	14.9	17.2	42.2	45.0	
No episodes 1 episodes 2 episodes 3 or more episodes	7 45 29 28	100.0 100.0 100.0 100.0	13.8 24.2 9.7 5.9	20.2 14.4 7.1 6.5	26.3 15.8 17.0 8.7	13.3 16.0 19.7 17.7	26.5 29.7 46.5 61.1	36.1 46.4 68.4	
55-64 years	207	100.0	15.3	10.8	15.8	19.0	39.0	48.1	
No episodes	10 99 51 46	100.0 100.0 100.0 100.0	17.9 21.2 9.2 9.2	14.5 14.9 7.8 4.6	17.6 20.5 15.0 6.3	21.0 17.9 28.1 11.0	29.0 25.5 39.9 69.0	38.2 53.1 74.3	
65 years and over	828	100.0	15.6	12.1	16.2	19.1	36.9	95.8	
No episodes	23 432 210 163	100.0 100.0 100.0 100.0	16.0 19.0 12.5 10.7	11.6 16.0 8.9 6.2	23.1 19.6 13.7 9.5	14.6 18.2 21.8 18.7	34.7 27.2 43.1 54.8	90.3 90.3 131.0	
65-74 years	324	100.0	15.9	10.8	14.9	20.7	37.8	64.5	
No episodes	11 162 82 69	100.0 100.0 100.0 100.0	11.0 20.5 11.5 10.9	9.2 15.2 7.3 4.8	21.3 18.8 13.4 6.5	15.7 20.6 22.8 19.3	42.8 25.0 44.9 58.5	54.0 70.7 91.7	
75-84 years	342	100.0	14.6	13.3	17.4	19.3	35.3	98.0	
No episodes	8 182 87 65	100.0 100.0 100.0 100.0	19.2 17.4 12.6 9.2	17.1 16.8 10.8 6.4	19.1 21.3 13.9 11.3	14.7 18.8 21.4 18.6	29.9 25.8 41.4 54.5	90.4 87.4 145.2	
85 years and over	162	100.0	17.2	12.5	16.4	15.6	38.3	154.0	
No episodes	* 88 41 28	100.0 100.0 100.0	19.4 14.4 13.9	15.8 8.0 9.3	* 17.7 14.0 12.7	* 12.9 20.5 17.4	34.2 43.1 46.7	156.8 136.2 194.4	

Table 11. Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life, and percent distribution by amount of bill and average number of days of care during the year, according to color, sex, and number of episodes: United States, 1964-65 deaths

	Number of decedents			Amount	of bill			
Color, sex, and number of episodes	with expenses (in thousands)	Total	Less than \$100	\$100- \$249	\$250 - \$499	\$500- \$999	\$1,000 or more	Average number of days of care
<u>Total</u>			Per	cent di	stribut	ion		
Both sexes	1,207	100.0	15.3	11.8	15.7	18.7	38.4	80.9
No episodes	44 598 307 258 654	100.0 100.0 100.0 100.0	15.8 19.5 11.6 9.8 15.2	13.6 15.9 8.7 5.9 12.4	21.4 19.2 14.3 8.6 16.6	15.0 18.2 22.0 16.7 19.0	34.2 27.3 43.4 59.0 36.8	75.6 78.4 109.8 68.4
No episodes	26 321 167 139 553	100.0 100.0 100.0 100.0	17.4 19.3 10.8 10.5	14.1 17.1 8.1 6.3 11.2	23.8 19.4 16.7 8.9 14.7	13.8 18.3 22.9 16.7	30.9 25.9 41.5 57.6 40.3	59.8 67.7 101.6 95.7
No episodes	18 277 140 119	100.0 100.0 100.0 100.0	13.5 19.6 12.6 9.0	12.9 14.5 9.4 5.3	17.8 18.9 11.4 8.3	16.7 18.1 21.0 16.7	39.0 28.9 45.7 60.7	94.0 91.1 119.4
Both sexes	1,086	100.0	13.8	11.4	15.8	19.2	39.9	83.7
No episodes	37 528 281 240 589	100.0 100.0 100.0 100.0	12.9 17.9 10.5 8.7 14.1	13.7 15.7 8.3 5.3	21.3 19.6 14.1 8.5	15.3 18.7 22.4 17.1	36.9 28.2 44.6 60.4 37.9	79.7 78.8 111.4 69.8
No episodes	23 284 153 129 498	100.0 100.0 100.0 100.0	15.4 18.2 10.0 9.8 13.3	13.8 17.0 7.6 5.7 10.8	26.3 19.6 16.7 8.7	12.6 18.9 23.2 16.9	32.0 26.3 42.4 58.9 42.2	62.1 66.2 103.2 100.2
No episodes	15 244 128 111	100.0 100.0 100.0 100.0	9.1 17.4 11.1 7.4	13.4 14.1 9.2 4.9	13.5 19.5 11.0 8.4	19.5 18.6 21.4 17.2	44.5 30.3 47.3 62.2	100.1 93.9 120.9
Both sexes	120	100.0	28.8	15.6	15.5	14.6	25.5	55.3
No episodes	6 70 26 18	100.0	23.3 25.0	* 17.7 12.3 13.4	16.2 15.7 10.1	14.2 18.2 11.5	20.5 30.5 40.0	45.2 73.5 88.0
Male No episodes 1 episode 2 episodes 3 or more episodes	* 38 14 10	100.0 100.0 100.0 100.0	24.7 * 27.6 19.2 19.3	16.4 18.2 12.9 14.6	16.0 * 17.9 15.9 12.3	15.6 * 14.0 20.0 12.9	27.3 * 22.3 32.0 40.8	55.0 41.8 83.4 80.2
Female No episodes 1 episode 2 episodes 3 or more episodes	55 * 33 12 8	* 100.0 100.0 100.0	33.6 * 35.9 28.3 32.3	14.8 17.0 11.6 11.7	14.9 * 14.3 15.4 7.3	13.5 * 14.4 15.9 9.6	23.3 * 18.5 28.8 39.0	55.6 49.0 61.3 98.0

Table 12. Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life, percent distribution by amount of bill, and average number of days of care during the year, according to color, sex, and type of episode: United States, 1964-65 deaths

	Number of decedents			Amount	of bil	L		Average	
Color, sex, and type of episode	with expenses (in thousands)	Total	Less than \$100	\$100- \$249	\$250- \$499	\$500- \$999	\$1,000 or more	number of days of care	
<u>Total</u>			Perc	ent dis	tributi	ion			
Both sexes-	1,207	100.0	15.3	11.8	15.7	18.7	38.4	80.9	
No episodes	836	100.0	15.8 14.2	13.6 12.3	21.4 17.8	15.0 20.4	35.3	31.5	
short-stay	328 171 156	100.0 100.0 100.0	17.8 13.7 22.4	10.4 7.9 13.2	9.8 9.4 10.3	15.1 16.8 13.2		217.8 179.1 260.2	
Male	654	100.0	15.2	12.4	16.6	19.0	36.8	68.4	
No episodes	26 483	100.0 100.0	17.4 14.3	14.1 12.4	23.8 18.2	13.8 19.9	30.9 35.2	31.3	
short-stay	145 79 66	100.0 100.0 100.0	17.8 12.4 24.2	11.9 8.1 16.5	10.1 10.3 9.7	16.8 18.7 14.4	43.5 50.4 35.2	204.1 174.1 240.0	
Female	553	100.0	15.4	11.2	14.7	18.5	40.3	95.7	
No episodes	18 353	100.0	13.5 14.2	12.9 12.1	17.8 17.2	16.7 21.0	39.0 35.6	31.7	
short-stay	183 93 90	100.0	17.9 14.8 21.0	9.3 7.8 10.8	9.6 8.6 10.7	13.7 15.1 12.3		228.6 183.4 275.0	
<u>White</u>									
Both sexes	1,086	100.0	13.8	11.4	15.8	19.2	39.9	83.7	
No episodes	37 742	100.0 100.0	12.9 12.4	13.7 11.8	21.3 18.0	15.3 21.1	36.9 36.7	31.4	
short-stay	307 162 145	100.0 100.0 100.0	17.1 13.5 21.1	10.1 7.2 13.3	9.8 9.2 10.5	15.1 16.9 13.0	47.9 53.2 42.1	220.3 181.1 264.3	
Male	589	100.0	14.1	11.9	16.7	19.3	37.9	69.8	
No episodesShort-stay episodes onlyInstitutional episodes with or without	23 432	100.0 100.0	15.4 13.1	13.8 12.0	26.3 18.4	12.6 20.5	32.0 36.1	зі.і	
short-stay	134 74 60	100.0 100.0 100.0	17.3 12.6 23.1	11.4 7.1 16.7	9.7 10.1 9.4	16.8 18.9 14.2	44.7 51.3 36.7	206.9 176.5 244.1	
Female	498	100.0	13.3	10.8	14.7	19.0	42.2	100.2	
No episodes	15 310	100.0 100.0	9.1 11.5	13.4 11.6	13.5 17.4	19.5 22.0	44.5 37.5	31.7	
short-stay	174 89 85		16.9 14.2 19.7	9.1 7.4 11.0	9.9 8.5 11.3	13.7 15.3 12.1	50.4 54.7 45.9	230.7 184.8 278.7	
All other									
Both sexes	120	100.0	28.8	15.6	15.5	14.6	25.5	55.3	
No episodes	6 94	100.0	28.3	15.8	16.2	14.6	25.0	32.4	
•	20	100.0	29.7	15.5	10.0	15.0	29.9	179.0	
MaleNo episodes	65	100.0	24.7	16.4	16.0	15.6	27.3	55.0	
Short-stay episodesInstitutional episodes with or without	51	100.0	24.4	16.0	17.1	15.1	27.4	33.4	
short-stay	11]	100.0	23.5	18.4	13.9	16.0	28.2	171.0	
Female	55	100.0	33.6	14.8	14.9	13.5	23.3	55.6	
No episodes	43 43 9	100.0	32.9 37.1	15.7 12.0	15.2 5.3	14.1 13.7	22.1 31.9	31.3 188.6	
	1				لـــــــــــــــــــــــــــــــــــــ			35	

Table 13. Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life, percent distribution by amount of bill, and average number of days of care during the year, according to the cause of death and type of episodes: United States, 1964-65 deaths

	Number of			Amount	of bill			
Cause of death (Seventh Revision of International Lists, 1955) and type of episode	decedents with expenses (in thousands)	Total	Less than \$100	\$100- \$249	\$250 - \$499	\$500- \$999	\$1,000 or more	Average number of days of care
			Per					
All causes of death	1,207	100.0	15.3	11.8	15.7	18.7	38.4	80.9
No episodesShort-stay episodes onlyInstitutional episodes with or	44 836	100.0 100.0	15.8 14.2	13.6 12.3	21.4 17.8	15.0 20.4	34.2 35.3	31.5
Institution with short-stay Institution without short stay	328 171 156	100.0 100.0 100.0	17.8 13.7 22.4	10.4 7.9 13.2	9.8 9.4 10.3	15.1 16.8 13.2	46.8 52.2 41.0	217.8 179.1 260.2
Arteriosclerotic heart disease(420)	340	100.0	16.1	14.1	17.4	19.3	33.1	82.5
No episodesShort-stay episodes onlyInstitutional episodes with or	18 225	100.0 100.0	15.4 15.1	14.0 15.5	21.8 20.3	18.0 20.8	30.8 28.3	24.0
institution with short-stay Institution without short-stay	97 46 51	100.0 100.0 100.0	18.5 16.0 20.7	10.8 7.8 13.5	9.9 9.9 9.9	16.1 18.5 14.0	44.7 47.8 41.9	232.7 195.8 266.0
All other heart diseases(400-416, 421-443)	106	100.0	20.4	13.0	18.4	13.9	34.3	94.8
No episodes	* 67	100.0	* 18.5	14.9	22.0	* 15.6	29.0	29.1
without short-stay	36	100.0	23.3	9.0	12.1	10.9	44.6	225.4
Malignant neoplasms (140-205)	263	100.0	9.5	6.7	11.3	19.7	52.8	62.8
No episodesShort-stay episodes onlyInstitutional episodes with or	* 214	100.0	8.7	6.2	11.7	21.5	* 52.0	42.7
without short-stay	44	100.0	13.5	9.3	9.6	11.2	56.4	167.4
Vascular lesions affecting CNS(330-334)	157	100.0	17.3	13.1	18.5	17.4	33.7	95.6
No episodes	97̈́	100.0	19.0	14.5	23.0	19.1	24.4	29.1
Institutional episodes with or without short-stay	57	100.0	14.6	11.2	10.3	14.7	49.2	214.2
All violent deaths-(E800-E964, E970-E985)	21	100.0	14.2	21.8	16.9	18.6	28.6	*
No episodes	* 15 *	100.0	12.4 *	23.4 *	14.1 *	21.8	28.3 *	*
All other causes(Residual)	320	100.0	16.5	12.0	15.4	19.6	36.6	86.0
No episodesShort-stay episodes onlyInstitutional episodes with or	11 217	100.0 100.0	17.7 15.4	14.7 12.4	23.6 17.8	11.9 20.7	32.2 33.6	30.9
without short-stay Institution with short-stay Institution without short-stay	91 48 43	100.0 100.0 100.0	19.0 15.3 23.1	10.6 9.8 11.4	8.5 8.2 8.8	17.8 18.8 16.7	44.2 47.8 40.0	227.4 193.5 265.2

Table 14. Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life, percent distribution by the amount of bill, and average number of days of care during the year, according to region and type of episode: United States, 1964-65 deaths

	Number of			Amount	of bill			
Region and type of episode	decedents with expenses (in thousands)	Total	Less than \$100	\$100~ \$249	\$250 - \$499	\$500- \$999	\$1,000 or more	Average number of days of care
			Per	cent di	.stribut	ion		
All regions	1,207	100.0	15.3	11.8	15.7	18.7	38.4	80.9
No episodes Short-stay episodes only Institutional episodes with or without short-	44 836	100.0 100.0	15.8 14.2	13.6 12.3	21.4 17.8	15.0 20.4	34.2 35.3	31.5
stay	328	100.0	17.8	10.4	9.8	15.1	46.8	217.8
stay	171	100.0	13.7	7.9	9.4	16.8	52.2	179.1
Institution without short-stay	156	100.0	22.4	13.2	10.3	13.2	41.0	260.2
Northeast	336	100.0	14.6	11.5	14.2	17.8	41.8	80.9
No episodes	12 236	100.0 100.0	12.8 13.8	15.7 12.0	15.5 16.2	18.5 19.3	37.5 38.7	33.6
stay	88	100.0	17.0	9.9	8.5	13.8	50.8	218.4
Institution with short-	45	100.0	10.4	6.7	7.7	14.5	60.8	175.9
Institution without short-stay	44	100.0	23.7	13.1	9.4	13.2	40.6	261.8
North Central	362	100.0	14.4	9.9	15.0	19.9	40.8	92.7
No episodesShort-stay episodes only Institutional episodes with or without short-	11 243	100.0 100.0	16.4 12.9	7.6 10.2	18.3 17.8	13.9 21.9	43.9 37.2	34.2
stay	108	100.0	17.6	9.5	8.6	15.9	48.4	233.0
stay	58	100.0	15.7	7.0	6.7	17.4	53.1	194.8
short-stay	50	100.0	19.8	12.4	10.8	14.1	43.0	277.6
South	334	100.0	17.0	14.4	18.5	18.9	31.2	67.5
No episodes	11 245	100.0 100.0	19.6 16.0	14.3 14.5	27.5 20.8	13.1 20.3	25.5 28.4	26.1
with or without short-	77	100.0	19.8	13.9	9.9	15.3	41.1	209.0
Institution with short-	41	100.0	14.6	11.2	12.7	17.8	43.7	167.7
Institution without short-stay	36	100.0	25.7	17.0	6.7	12.4	38.1	255.3
West	175	100.0	15.1	11.4	14.9	17.9	40.8	82.2
No episodesShort-stay episodes onlyInstitutional episodes	9 112	100.0 100.0	14.4 14.2	17.2 12.4	24.8 14.3	14.2 19.5	29.5 39.6	32.9
with or without short- stay	54	100.0	16.9	8.3	14.3	15.1	45.4	198.7

Table 15. Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life, percent distribution by the amount of bill, and average number of days of care during the year, according to living arrangements and type of episode: United States, 1964-65 deaths

	Number of decedents	.		Amount	of bill			Average		
Living arrangements and type of episode	with expenses (in thousands)	Total	Less than \$100	\$100 - \$249	\$250 - \$499	\$500- \$999	\$1,000 or more	number of days of care		
		:	Percent distribution							
All living arrangements	1,207	100.0	15.3	11.8	15.7	18.7	38.4	80.9		
No episodes	44 836	100.0 100.0	15.8 14.2	13.6 12.3	21.4 17.8	15.0 20.4	34.2 35.3	31.5		
stay	328	100.0	17.8	10.4	9.8	15.1	46.8	217.8		
Institution with short-	171	100.0	13.7	7.9	9.4	16.8	52.2	179.1		
Institution without short-stay	156	100.0	22.4	13.2	10.3	13.2	41.0	260.2		
Decedent and spouse only	320	100.0	12.2	11.1	18.0	22.6	36.1	28.9		
No episodesShort-stay episodes onlyInstitutional episodes	14 298	100.0 100.0	12.1 12.4	13.1 11.3	20.7 18.1	20.7 22.6	33.4 35.7	28.6		
with or without short- stay	8	100.0	4.1	2.1	10.7	27.2	55.9	91.5		
Lived with other relatives	403	100.0	14.3	12.9	17.7	18.6	36.5	30.6		
No episodesShort-stay episodes onlyInstitutional episodes	21 371	100.0 100.0	14.6 14.4	12.6 12.7	24.5 17.6	9.5 19.0	38.8 36.3	3 0.i		
with or without short- stay	11	100.0	9.2	21.3	7.7	21.4	40.4	108.3		
Lived with non- relatives or alone	177	100.0	17.5	13.1	17.7	19.8	31.9	35.5		
No episodesShort-stay episodes onlyInstitutional episodes	9 160	100.0 100.0	25.0 17.0	17.2 13.3	15.2 17.8	19.4 19.7	23.2 32.1	32.3		
with or without short- stay	8	100.0	18.6	4.0	18.4	22.5	36.5	138.4		
Lived in institution	306	100.0	18.5	10.4	9.7	14.2	47.1	227.7		
No episodes	* *	*	*	* *	* *	*	*	* * *		
stay Institution with short-	301	100.0	18.5	10.4	9.7	14.3	47.1	227.1		
stayInstitution without	150	100.0	14.2	8.1	9.2	15.6	52.9	187.2		
short-stay	151	100.0	22.7	12.8	10.1	13.0	41.3	266.9		

Table 16. Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life, percent distribution by the amount of bill, and average number of days of care during the year, according to family income and type of episode: United States, 1964-65 deaths

	Number of decedents			Arromago						
Family income and type of episode	with expenses (in thousands)	Total	Less than \$100	\$100 - \$249	\$250 - \$499	\$500 - \$999	\$1,000 or more	Average number of days of care		
			Percent distribution							
All family incomes	1,207	100.0	15.3	11.8	15.7	18.7	38.4	80,9		
No episodes	44 836	100.0 100.0	15.8 14.2	13.6 12.3	21.4 17.8	15.0 20.4	34.2 35.3	31.5		
with or without short- stay	328	100.0	17.8	10.4	9.8	15.1	46.8	217.8		
Institution with short- stay Institution without	171	100.0	13.7	7.9	9.4	16.8	52.2	179.1		
short-stay	156	100.0	22.4	13.2	10.3	13.2	41.0	260.2		
Less than \$2,000	557	100.0	20.6	13.2	15.0	16.6	34.8	122.2		
No episodes	15 284	100.0 100.0	22.6 20.7	19.1 14.4	19.4 18.7	15.9 18.6	23.0 27.5	33.9		
stay	258	100.0	20.3	11.4	10.5	14.3	43.5	226.6		
stayInstitution without	127	100.0	16.2	9.4	10.3	16.2	48.0	186.7		
short-stay	131	100.0	24.3	13.4	10.8	12.5	39.1	265.3		
\$2,000-\$3,999	258	100.0	14.0	10.7	16.3	21.0	38.0	56.2		
No episodes	11 206	100.0 100.0	17.6 14.3	6.1 11.8	20.1 18.1	13.9 21.8	42.3 34.1	30.0		
with or without short- stay	42	100.0	11.5	6.3	6.8	19.2	56.1	199.8		
\$4,000-\$6,999	205	100.0	9.4	10.9	18.9	21.2	39.5	39.3		
No episodes	10 178	100.0	6.8 10.0	13.2 11.3	28.7 19.3	17.1 21.7	34.1 37.7	30.4		
with or without short- stay	17	100.0	4.9	4.9	9.0	18.5	62.7	158.3		
\$7,000 or more	186	100.0	7.7	10.5	13.8	19.3	48.7	37.4		
No episodes	8 167	100.0	12.2 7.7	13.9 10.2	17.9 14.2	12.1 20.1	43.8 47.8	30.2		
with or without short- stay	11	100.0	4.3	11.7	5.9	11.9	66.1	170.8		

Table 17. Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life, percent distribution by the amount of bill, and average number of days of care during the year, according to marital status and type of episode: United States, 1964-65 deaths

	Number of decedents			Amount	of bill			Average	
Marital status and type of episode	with expenses (in thousands)	Total	Less than \$100	\$100- \$249	\$250 - \$499	\$500 - \$999	\$1,000 or more	number of days of care	
			Percent distribution						
All marital statuses	1,207	100.0	15.3	11.8	15.7	18.7	38.4	80.9	
No episodes	44 836	100.0 100.0	15.8 14.2	13.6 12.3	21.4 17.8	15.0 20.4	34.2 35.3	31.5	
with or without short- stay	328	100.0	17.8	10.4	9.8	15.1	46.8	217.8	
Institution with short-	171	100.0	13.7	7.9	9.4	16.8	52.2	179.1	
Institution without short- stay	156	100.0	22.4	13.2	10.3	13.2	41.0	260.2	
Married	622	100.0	13.1	12.0	15.9	20.3	38.7	48.0	
No episodes	25 508	100.0 100.0	12.7 13.1	15.1 12.0	19.2 16.9	16.1 20.6	37.0 37.4	30.2	
with or without short-	89	100.0	12.8	11.1	8.8	20.2	47.1	163.4	
Institution with short- stay	54	100.0	9.9	7.3	8.1	20.9	53.8	137.0	
Institution without short-stay	35	100.0	17.2	16.8	9.9	19.1	37.0	203.6	
Widowed	424	100.0	16.7	11.5	16.3	17.9	37.5	114.0	
No episodes	13 239	100.0 100.0	18.8 15.8	11.7 13.0	25.9 19.5	15.4 20.6	28.2 31.0	31.9	
stay Institution with short-	173	100.0	17.8	9.5	11.3	14.5	47.0	235.7	
stay	85	100.0	14.4	7.1	10.7	16.4	51.4	195.2	
Institution without short-stay	88	100.0	21.1	11.8	11.8	12.6	42.8	275.1	
Single	108	100.0	20.9	11.6	15.0	14.5	38.1	127.3	
No episodesShort-stay episodes onlyInstitutional episodes	* 58	* 100.0	15.9	* 13.2	21.0	18.1	31 . 9	35.9	
with or without short- stay	46	100.0	27.0	9.8	6.9	10.2	46.1	251.9	
Divorced	52	100.0	18.1	13.0	11.0	14.9	43.0	107.7	
No episodes	* 31	* 100.0	* 16.8	* 9.6	* 12.0	19.6	* 42.0	40.9	
with or without short- stay	19	100.0	19.5	18.0	8.6	8.6	45.3	226.5	

Table 18. Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life and percent distribution by the amount of bill, according to number of episodes and number of days of care: United States, 1964-65 deaths

	Number of decedents			Amount	of bil	1	
Number of episodes and number of days of care	with expenses (in thousands)	Total	Less than \$100	\$100- \$249	\$250 - \$499	\$500 - \$999	\$1,000 or more
All episodes			Pe	rcent d	istribu	tion	
All days	1,207	100.0	15.3	11.8	15.7	18.7	38.4
1 day or under	127 164 150 196 195 100 80 32 163	100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0	32.3 17.4 11.1 9.4 8.8 11.6 13.4 12.1	20.4 25.1 12.9 7.2 6.7 6.0 7.0 4.0 9.9	15.6 29.2 27.9 15.9 10.1 6.3 6.0 9.1	11.9 15.8 29.1 30.1 18.0 14.0 13.2 17.2	19.7 12.6 19.0 37.5 56.3 62.1 60.4 56.5 47.8
One episode All days	598	100.0	19.5	15.9	19.2	18.2	27.3
1 day or under	82 142 102 86 50 18 16 59	100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0	41.5 18.0 11.6 10.9 12.9 19.2 18.8 *	24.3 25.5 13.1 7.6 10.2 11.1 9.5 *	12.2 29.1 28.7 18.2 9.9 13.0 10.5 *	10.3 15.2 28.0 29.0 16.0 18.3 16.8 *	11.6 12.3 18.5 34.3 51.1 38.4 44.3 *
Two episodes All days	307	100.0	11.6	8.7	14.3	22.0	43.4
1 day or under	* 21 39 76 71 32 24 14 30	100.0 100.0 100.0 100.0 100.0	* 13.7 10.1 7.0 9.2 14.0 12.2 15.2 25.4	23.7 11.6 8.0 4.5 5.8 8.2 6.7 10.9	* 30.5 27.6 15.7 11.5 6.4 5.5 2.2 8.8	* 18.9 32.6 33.5 19.0 15.2 11.1 17.3 7.2	* 13.2 18.2 35.8 55.8 58.7 63.0 58.6 47.7
Three or more episodes All days	258	100.0	9.8	5.9	8.6	16.7	59.0
1 day or under	51	100.0 100.0 100.0 100.0 100.0 100.0	10.6 10.6 5.7 7.4 11.9 9.8 18.2	16.6 4.3 6.6 4.5 5.2 1.3	20.0 10.7 9.0 3.9 4.6 13.5 11.9	25.7 25.1 18.3 11.7 13.7 14.0	27.1 49.3 60.4 72.5 65.2 59.8 48.6
No episodes	44	100.0	15.8	13.6	21.4	15.0	34.2

Table 19. Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life, and percent distribution by the amount of bill, according to type of episode and number of days of care: United States, 1964-65 deaths

er oproduct and number of days of care. Officed	1	, 35 aca					
Type of opioods and	Number of decedents		п	Amount	of bill		
Type of episode and number of days of care	with expenses (in thousands)	Total	Less than \$100	\$100- \$249	\$250 - \$499	\$500- \$999	\$1,000 or more
			Perc	ent dis	tributi	on	
All types of episodes							
All days	1,207	100.0	15.3	11.8	15.7	18.7	38.4
1 day or under	127 164 150 196 195 100 80 32 163	100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0	32.3 17.4 11.1 9.4 8.8 11.6 13.4 13.3 22.1	20.4 25.1 12.9 7.2 6.7 6.0 7.0 4.0 9.9	15.6 29.2 27.9 15.9 10.1 6.3 6.0 9.1	11.9 15.8 29.1 30.1 18.0 14.0 13.2 17.2	19.7 12.6 19.0 37.5 56.3 62.1 60.4 56.5 47.8
Short-stay episodes only						}	
All days	836	100.0	14.2	12.3	17.8	20.4	35.3
1 day or under	82 158 141 178 159 65 35 7	100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0	40.6 16.6 10.4 8.6 8.2 11.8 16.7 18.1 15.1	24.2 25.0 12.9 6.3 5.2 5.2 3.7 2.3 8.3	12.9 29.7 28.5 16.1 9.2 5.4 5.7 13.4 11.8	10.1 16.2 29.2 30.4 17.5 9.7 11.8 15.2 15.2	12.2 12.5 19.0 38.7 59.8 67.8 62.2 51.0 49.6
Institutional episodes with or without short-stay							
All days	328	100.0	17.8	10.4	9.8	15.1	46.8
1 day or under	* 6 17 36 34 44 25	100.0 100.0 100.0 100.0 100.0 100.0 100.0	35.5 22.5 17.4 11.5 11.1 10.7 11.9 22.5	28.5 12.3 16.5 13.5 7.6 9.6 4.5	15.6 19.3 14.6 14.2 7.9 6.3 7.8 9.3	5.1 26.5 26.9 20.1 22.2 14.3 17.8 10.4	* 15.3 19.5 24.6 40.8 51.2 59.0 58.1 47.7
Institution with short-stay							
All days	171	100.0	13.7	7.9	9.4	16.8	52.2
1 day or under	* * * * * * * * * * * * * * * * * * *	* 100.0 100.0 100.0 100.0 100.0 100.0	* * 15.0 9.1 8.3 10.1 11.7 20.5	* * 10.5 11.7 4.4 7.5 5.2 7.9	* * * 13.5 14.2 6.6 5.6 6.2 9.8	* 35.8 21.2 21.8 11.5 16.1 11.0	* * 25.1 43.7 59.0 65.3 60.7 50.8
Institution without short-stay							
All days	156	100.0	22.4	13.2	10.3	13.2	41.0
1 day or under	* 6 5 10 8 12 7 100	* 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0	39.6 20.8 21.7 17.4 19.8 12.5 12.2 23.6	* 25.9 15.2 27.4 17.5 17.5 15.5 2.4 11.2	* 11.7 18.3 16.5 14.0 11.7 8.3 12.2 9.1	5.7 24.0 10.8 17.3 23.5 22.0 22.4 10.1	* 17.0 21.7 23.6 33.8 27.4 41.7 50.9 46.1
No episodes	44	100.0	15.8	13.6	21.4	15.0	34.2
			L				

Table 20. Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life and percent distribution by the amount of bill, according to age and number of days of care: United States, 1964-65 deaths

	 						
	Number of decedents		,	Amount	of bil	.1	
Age and number of days of care	with expenses (in thousands)	Total	Less than \$100	\$100- \$249	\$250 - \$499	\$500- \$999	\$1,000 or more
All ages, 25 years and over			Pe	rcent d	istribu	tion	
All days	1,207	100.0	15.3	11.8	15.7	18.7	38.4
1 day or under	127 164 150 196 195 100 80 32 163	100.0 100.0 100.0	32.3 17.4 11.1 9.4 8.8 11.6 13.4 13.3 22.1	20.4 25.1 12.9 7.2 6.7 6.0 7.0 4.0 9.9	15.6 29.2 27.9 15.9 10.1 6.3 6.0 9.1	11.9 15.8 29.1 30.1 18.0 14.0 13.2 17.2 10.7	19.7 12.6 19.0 37.5 56.3 62.1 60.4 56.5 47.8
<u>25-44 years</u>						_	
All days	63	100.0	11.0	13.0	10.7	15.0	50.3
1 day or under	10 9 7 9 13 6	100.0 100.0 100.0	19.8 5.3 4.8 10.2 7.0 18.0 13.1	19.2 33.9 11.6 1.8 3.7 14.4 11.5	9.9 14.5 21.7 13.3 6.0 4.4 8.7	10.7 15.2 33.0 15.2 10.8 7.1 17.9	40.5 31.1 28.9 59.5 72.6 56.2 48.9
45-54 years All days	109	100.0	14.9	10.8	14.9	17.2	42.2
1 day or under	17 15 14 18 23 10 7 5	100.0	30.3 13.8 11.6 5.9 8.5 14.2 16.5 33.8	17.3 22.4 15.6 7.1 5.2 5.0 4.4	20.2 27.0 21.9 16.8 8.6 3.3 2.4 6.0	12.2 11.8 27.9 23.3 15.8 18.1 11.6 12.9	20.0 25.0 22.9 47.0 61.8 59.4 65.1 47.2
<u>55-64 years</u>							
All days	207	100.0	15.3	10.8	15.8	19.0	39.0
1 day or under	27 30 28 38 39 20 11 *	100.0 100.0 100.0 100.0 100.0 100.0 100.0 *	36.1 18.9 7.1 8.7 6.7 11.5 14.2 *	18.1 22.9 9.5 7.0 7.2 1.7 6.0 *	13.2 26.2 31.2 15.4 11.8 4.7 1.5	12.8 17.0 29.8 28.7 15.6 12.2 13.8 *	19.9 15.0 22.4 40.3 58.7 70.0 64.6 * 36.0

Table 20. Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life and percent distribution by the amount of bill, according to age and number of days of care: United States, 1964-65 deaths—Con.

							
	Number of decedents			Amount	of bil	.1	
Age and number of days of care	with expenses (in thousands)	Total	Less than \$100	\$100- \$249	\$250 - \$499	\$500 - \$999	\$1,000 or more
65 years and over			Per	cent di	stribut	ion:	
All days	828	100.0	15.6	12.1	16.2	19.1	36.9
1 day or under	73 111 102 130 120 63 58 26 145	100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0	33.0 18.4 12.6 10.0 9.8 10.5 12.4 12.7 20.8	22.2 25.4 13.5 7.6 7.2 6.8 7.4 4.3 9.7	16.3 31.4 28.2 16.1 10.3 7.5 7.5 8.2 9.9	11.7 16.0 28.7 32.5 19.9 14.6 13.7 17.0 10.3	16.8 8.8 16.9 33.8 52.7 60.6 59.0 57.8 49.3
65-74 years							
All days~	324	100.0	15.9	10.8	14.9	20.7	37.8
1 day or under	36 45 42 61 54 27 22 9 28	100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0	31.2 24.5 11.7 10.0 10.1 10.0 14.2 16.6 18.7	21.0 23.0 9.8 4.1 5.8 4.3 3.9 7.2 15.7	14.8 24.7 28.7 13.8 8.4 7.3 7.7 11.2 7.0	13.7 17.9 31.5 31.5 20.3 12.8 14.7 16.7 8.8	19.3 9.9 18.3 40.6 55.4 65.7 59.5 48.3 49.8
75-84 years							
All days	342	100.0	14.6	13.3	17.4	19.3	35.3
1 day or under	26 49 43 52 48 25 24 12	100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0	33.3 14.2 11.7 10.8 8.1 8.6 10.8 10.8 22.3	25.1 26.8 15.3 8.8 6.7 8.7 11.4 4.0 9.5	16.0 36.7 29.4 16.8 10.7 7.7 8.1 8.1 9.6	10.0 15.6 27.5 35.6 18.6 15.8 11.2 17.7	15.6 6.7 16.1 28.0 55.9 59.4 58.5 59.3 46.4
85 years and over							
All days	162	100.0	17.2	12.5	16.4	15.6	38.3
1 day or under	11 16 17 18 11 12 56	100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0	38.9 14.0 17.5 7.5 13.3 16.3 12.5 10.2 20.2	18.7 28.0 18.8 16.3 12.5 8.6 5.7 7.0	22.0 34.0 23.8 22.4 15.2 7.4 5.8 3.2 11.7	9.4 12.1 24.7 26.5 22.4 16.4 16.9 15.8 9.0	11.0 12.0 15.2 27.3 36.6 51.3 59.1 70.8 52.1

Table 21. Average annual number of decedents 25 years and over with expenses for care inhospitals and institutions during the last year of life, and percent distribution by the amount of bill, according to color, sex, and number of days of care: United States, 1964-65 deaths

		T					
	Number of decedents	Amount of bill					
Color, sex, and number of days of care	with expenses (in thousands)	Total	Less than \$100	\$100- \$249	\$250- \$499	\$500- \$999	\$1,000 or more
TOTAL			Per	cent di	stribut	ion	
Both sexes						1 10 7	20.7
All days	1,207	100.0	15.3	11.8	15.7	18.7	38.4
1 day or under	127 164 150 196 195 100 80 32 163	100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0	32.3 17.4 11.1 9.4 8.8 11.6 13.4 13.3 22.1	20.4 25.1 12.9 7.2 6.7 6.0 7.0 4.0 9.9	15.6, 29.2 27.9 15.9 10.1 6.3 6.0 9.1	11.9 15.8 29.1 30.1 18.0 14.0 13.2 17.2	19.7 12.6 19.0 37.5 56.3 62.1 60.4 56.5
<u>Male</u> All days	654	100.0	15.2	12.4	16.6	19.0	36.8
1 day or under	76 94 87 112 111 51 40 15 68	100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0	31.7 17.6 10.4 8.1 9.2 14.2 12.1 13.0 24.2	21.2 24.5 13.3 7.1 7.7 4.4 8.6 5.2 10.9	17.1 29.0 29.6 15.5 10.4 7.4 5.8 12.8 8.8	11.0 16.0 28.0 28.9 17.1 16.1 15.7 18.9	19.0 12.8 18.8 40.4 55.7 57.9 57.7 50.1 45.0
<u>Female</u>		100.0	75.7	11.2	14.7	18.5	40.3
All days	51 71 63 84 83	100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0	15.4 33.3 17.0 12.2 11.0 8.4 8.8 14.6 13.5 20.5	19.2 25.9 12.4 7.2 5.5 7.7 5.3 2.8 9.3	13.4 29.4 25.7 16.4 9.8 5.1 6.2 5.7 10.0	13.3 15.5 30.5 31.7 19.2 11.8 10.6 15.7	20.8 12.2 19.2 33.7 57.1 66.6 63.2 62.3 49.8
Both sexes							
All days	1,086	100.0	13.8	11.4	15.8	19.2	39.9
1 day or under	144 134 173 178 92 72	100.0 100.0 100.0 100.0 100.0	15.0 9.5 7.6	21.1 24.8 11.9 6.8 6.2 5.6 6.8 3.9 9.9	15.6 31.1 28.9 15.1 9.7 5.9 6.2 8.0 9.7	12.2 16.5 30.4 31.6 18.4 14.4 12.8 16.0	19.7 12.4 19.3 39.0 58.5 63.9 62.3 59.9 48.7
All days	589	100.0	14.1	11.9	16.7	19.3	37.9
1 day or under	68 84 77 99 100 46 36	100.0 100.0 100.0 100.0 100.0 100.0	13.1 12.9 11.6	24.2 11.8 7.0 7.1 3.9 8.2 5.1		10.7 17.0 29.6 29.6 17.8 16.4 14.7 16.5	18.1 12.4 19.6 41.8 58.0 59.9 58.2 55.3 46.1

Table 21. Average annual number of decedents 25 years and over with expenses for care in hospitals and institutions during the last year of life, and percent distribution by the amount of bill, according to color, sex, and number of days of care: United States, 1964-65 deaths—Con.

	Number of decedents	Amount of bill					
Color, sex, and number of days of care	with expenses (in thousands)	Total	Less than \$100	\$100- \$249	\$250- \$499	\$500 - \$999	\$1,000 or more
White-Con.			Por	cent di	a twi but	i on	
<u>Female</u>			rei	Cent al	SLIIDUL	TOII	
All days	498	100.0	13.3	10.8	14.7	19.0	42.2
1 day or under	59 57 73 78 45 36	100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0	30.6 13.7 10.7 8.5 7.2 7.4 10.9 12.6 19.7	20.9 25.6 11.9 6.4 5.0 7.3 5.0 9.3	11.9 32.3 27.0 15.5 9.4 5.1 6.4 5.2 10.3	14.5 15.8 31.5 34.4 19.2 12.9 15.6 10.2	22.1 12.5 18.8 35.2 59.1 68.1 66.3 63.6 50.5
All days	120	100.0	28.8	15.6	15.5	14.6	25.5
1 day or under	21 17 23 17	100.0 100.0 100.0 100.0 100.0 100.0 100.0	38.1 34.0 24.5 22.5 25.8 26.8 26.9 *	15.7 27.4 21.4 10.2 12.9 11.8 8.4 *	15.8 14.2 19.6 22.3 14.8 10.7 4.5	10.3 10.7 17.9 18.7 13.3 9.6 16.6 *	20.1 13.7 16.7 26.2 33.2 41.0 43.6 * 31.2
<u>Male</u>			İ				
All days		100.0	24.7	16.4	16.0	15.6	27.3
1 day or under	10	100.0 100.0 100.0 100.0 100.0 100.0	28.3 33.8 24.2 17.8 26.7 24.5 20.3	22.2 27.5 24.8 8.1 13.3 9.7 11.3	10.3 14.6 23.4 21.9 14.6 9.5	13.8 7.0 14.9 23.2 10.4 12.8 23.3	25.5 17.2 12.7 29.0 35.0 38.3 35.6
<u>Female</u> All days		100.0	22.6	17. 0	1/- 0	10 -	92.0
1 day or under	8 11 7	100.0 100.0 100.0 100.0 100.0 100.0	33.6 46.8 34.1 24.9 28.0 24.1 38.3	14.8 10.8 27.3 16.4 12.5 12.1 8.2	20.8 13.9 14.0 22.8 15.2 5.0	7.2 13.8 22.3 13.6 19.1 10.0	23.3 14.5 10.8 22.3 23.1 29.6 38.5

APPENDIX I

TECHNICAL NOTES ON METHODS

Background of This Report

The data presented in this report were collected in the 1964 and 1965 National Mortality Surveys. The surveys, conducted by the Division of Vital Statistics, National Center for Health Statistics, were designed primarily to provide information about the decedent's hospital or institutional episodes during his last year of life and the expenses for these episodes. In addition, certain socioeconomic and demographic data which were thought to be relevant to the study were collected.

Sample Design

The sample design for the National Mortality Surveys takes advantage of the virtually complete registration of deaths in the United States. Each month the 54 registration areas forward a 10-percent systematic sample of all registered deaths to the Division of Vital Statistics, National Center for Health Statistics. This systematic sample is called the Current Mortality Sample (CMS). The sample for the National Mortality Survey is a probability sample subselected from the CMS at a rate of one out of 33 deaths. This procedure yields an overall selection rate of one out of 330 deaths. There were 5,153 deaths of persons aged 1 or older in the 1964 sample and 5,255 deaths in the 1965 sample. Because the samples are independent, they can be combined, giving a total sample size of 10,408.

Sources of the Data

The first source of data in the surveys was the death certificate. In addition, survey procedures included a questionnaire mailed to the informant who provided the funeral director with the personal information for recording on the death certificate and to the hospital or institution in which the decedent died. These sources of information identified on the death record are referred to as primary sources.

Each primary source was requested to identify other sources which might be able to furnish the necessary information if the primary source was unable to do so and to list all medical facilities which provided care to the decedent during the year prior to his death.

These additional sources of information are referred to as secondary sources. Identical questionnaires were sent to these secondary sources requesting the information concerning the decedent.

The data shown in this report are based on information obtained from the death certificate and from the responses to the questionnaires mailed to the death record informant and to the hospitals and institutions providing care to the decedent. Age, sex, color, geographic region, and cause of death were obtained from entries on the death certificate; the type of hospital, number of episodes, and number of days of care were obtained from entries on the hospital and other medical facilities questionnaire; the amount of the bill for care in hospitals and institutions, marital status, living arrangements, family size, and family income were obtained from entries on the informant questionnaire.

Death Certificate and Questionnaires

Facsimiles of the Standard Certificate of Death and of the questionnaires used to obtain the data in this report are shown in appendix III. Although not all States use the standard certificate, all States do include on their certificates items for the basic information used in this report.

The questionnaire sent to the death record informant was designed primarily to obtain the names and addresses of hospitals and institutions which provided care to the decedent during the year before his death. Additional questions concerned the amount of the hospital bill, health insurance coverage, household composition, financial assets, and family income.

In 1964 and 1965, three informant questionnaires were used for decedents agedlor older depending on the age at death and place of residence of the decedent. Similar information was collected with each questionnaire. However, the reference individual for certain questions on socioeconomic status differed.

When the decedent was a child (ages 1-13), the socioeconomic data requested referred to the status of the decedent's parents.

When the decedent was aged 14 or older and was not a resident of an institution at the time

of death, the socioeconomic data requested referred to the decedent's status.

When the decedent was aged 14 or older and was a resident of an institution at the time of death, the questions pertaining to be decedent's household composition were omitted.

All hospitals and institutions in which the decedent was a patient during the 12 months before death received the same questionnaire regardless of the decedent's age or residence.

Collection of the Data

Data for the 1964-65 National Mortality Surveys were collected primarily by mail. Regardless of the place of death, a questionnaire was sent to the person who had provided the funeral director with the decedent's personal information for recording on the certificate. This questionnaire requested socioeconomic information about the decedent as well as the names and addresses of hospitals and institutions which might have provided care to the decedent at any time during his last year of life.

If the death occurred in a hospital or institution, a hospital questionnaire was sent directly to the hospital

or institution asking for information about the care provided and for the names and addresses of other medical facilities providing care.

Responses from these two primary sources were cross-checked and questionnaires were mailed to any other hospitals or institutions named by the primary sources.

When the address of the informant or of the hospital or institution of death was not available on the death certificate, a letter was first sent to the funeral director requesting the address and then the appropriate questionnaire was mailed. When any of the sources failed to respond or was unable to provide the information, additional mailings were made. The mailing procedures used in the survey are shown in figure I. In addition, when the reported data were inadequate for certain essential items, special letters were sent to clarify the information.

These procedures resulted in a response rate in 1964-65 of 91 percent (table I).

In general, the rates of response were higher for white decedents than for other decedents. Within each color group the response rates were higher for older decedents than for younger decedents.

Table I. Response rates for 1964-65 National Mortality Survey, by selected characteristics:
United States, decedents aged 1 year and over

	Total		Total White		Nonwhite	
Characteristic	Number in sample	Percent responding	Number in sample	Percent responding	Number in sample	Percent responding
Total	10,408	91.0	9,222	91.4	1,186	87.6
Age 1-14 years	202 187 197 479 936 1,730 2,627 2,754 1,296	81.7 86.6 89.3 88.9 88.5 88.3 91.0 93.6	153 159 143 359 784 1,484 2,354 2,559 1,227	81.7 86.2 90.9 90.5 88.6 88.1 92.4 93.4 93.6	49 28 54 120 152 246 273 195 69	81.6 89.3 85.2 84.2 87.5 89.8 86.8 88.2 92.8
<u>Sex</u> Male Female	5,885 4,523	90.6 91.5	5,219 4,003	91.0 92.0	666 520	87.7 87.5
Region Northeast	2,874 3,002 3,014 1,518	90.5 92.1 91.8 88.1	2,676 2,800 2,338 1,408	91.3 92.5 92.3 88.2	198 202 676 110	79.8 87.1 90.2 86.4

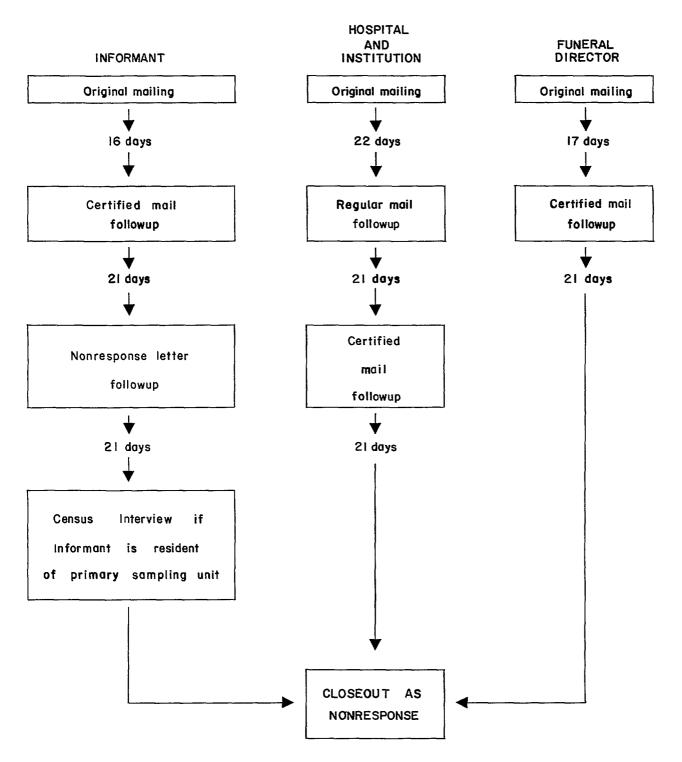


Figure I. Mailing procedures for National Mortality Survey.

Processing of the Data

The returned questionnaires were edited and coded in accordance with predetermined specifications. The questionnaires were checked both for completeness and for consistency of response. After the edited and coded data had been transcribed onto punchcards, the data were processed on electronic computers. The computer processing included range edits, consistency checks, imputation for missing data, and assignment of weights.

Nonresponse and Imputation for Missing Data

Failure to obtain a response represents one of the biggest problems in any data collection system. Of the 10,408 decedents aged 1 or older who were selected in the sample for 1964 and 1965, no information was obtained after all attempts to contact the informant for only 938 cases, or 9 percent of the sample. These represent "unit nonresponses."

Included among the 938 cases tabulated as unit non-response are cases where the informant refused to answer the questions, where no informant was located, and where no mailing was attempted because the decedent's usual place of residence as reported on the death certificate was outside the United States, even though the death occurred in the United States. In addition because New Mexico did not participate in the 1964-65 National Mortality Surveys, no mailings were made for decedents who were residents of that State.

In addition to unit nonresponse, there is also item nonresponse, i.e., the questionnaire was returned but part of the information was omitted. Item nonresponse for the information on hospitals was only about 3 percent. For these decedents, one or more episodes may not have been accounted for because (1) the informant did not list the names and addresses of any hospitals or institutions providing care to the decedent or (2) the hospital which he listed did not respond to the questionnaire.

Following are the response rates for the socioeconomic items from the questionnaires which are presented this report.

Response rate in percent

Amount of the bill for care in	
hospitals or institutions	90
Family income	98

Item nonresponse was not available for marital status and living arrangements since these variables were not asked directly in the questionnaire. Data for these items were derived from entries in the household listing of the questionnaire.

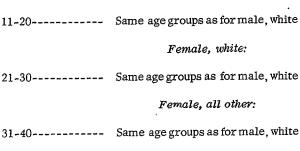
The highest rate of nonresponse for items included in this report was for the question on the amount of the bill for care in hospitals and institutions. It is likely that in many cases the informant really did not know the amount of the bill. If the bill had been paid by the decedent prior to his death, if part of it had been paid by hospital insurance, or if the bill had not yet been sent, the death certificate informant may not have known the amount.

Statistics from the National Mortality Surveys were adjusted for both unit and item nonresponse by imputing to decedents for whom no response was obtained characteristics of similar decedents for whom a response was obtained (similar decedents were defined by characteristics recorded on the death certificate). The array of 40 age, sex, and color groups which was created in the computer to establish similarity is as follows:

Sex, color, and age

Group

	Male, white:
1	Under 1 year
2	1-14 years
3	15-24 years
4	25-34 years
5	35-44 years
6	45-54 years
7	55-64 years
8	65-74 years
9	75-84 years
10	85 years and over
	7.7 7 77 47 44
	Male, all other:



Other variables were added to the array in the imputation of certain items in order to maintain internal consistency within the record. For example, in order to impute information on the number of children in the decedent's household it was necessary to control for such characteristics as the family size and the type of family.

Values in the cells of the array were continually replaced by successive known values as the file was processed. The values from the last known record in the cells were then imputed to the nonresponse record.

Weighting Procedures for National Estimates

Statistics shown in this report are national estimates prepared by use of a poststratified ratio estimation procedure. This estimation procedure, which takes the total number of registered deaths into account in the estimation process, reduces the sampling error by making the sample more closely representative of the population of all deaths than would be expected by random methods alone.

In each of the 40 groups that were used for imputation, the national count of deaths was obtained from Volume II of *Vital Statistics of the United States* for the appropriate year.

A weight for each group was then calculated by dividing the number of sample deaths into the number of registered deaths.

The products of the weight and the sample count thus equal the national total for the cell. The national estimates for 1964 and 1965 were averaged to produce the average annual estimates shown in this report.

Reliability of Estimates

Since the statistics presented in this report are based on a sample, they may differ from the results that would have been obtained had a census covering all decedents been undertaken using the same questionnaires and procedures. In addition, results are subject to errors in conceptual formulation, ambiguities in definitions and in the questionnaire construction, coding errors, biases due to nonresponse or incomplete response, mistakes in editing, and tabulation errors.

The probability design of the sample for the National Mortality Survey makes possible the calculation of sampling errors. The sampling error is a measure of the variation that occurs by chance because only a sample rather than the entire population is surveyed.

Estimates of sampling variability for the statistics derived from this survey were based on 20 random half-sample replications. This technique yields a measure of overall variability through observation of variability among random subsamples of the total sample. It reflects both the error that arises from sampling and a part of the measurement error, but it does not measure any systematic biases in the data. A general discussion of the development and evaluation of a replication technique for estimating variance has been published elsewhere.

Using the same questionnaires and collection procedures, the chances are about 68 out of 100 that an estimate from the sample differs from the value for the entire population by less than the standard error. The chances are about 95 out of 100 that the difference is less than twice the standard error.

Table II. Approximate standard errors for estimated numbers shown in this report

Size of estimate	Standard error	Relative standard error
5,000 10,000	610 900 1,550 2,350 3,100 4,900 6,300 6,900 7,500	12.2 9.0 6.2 4.7 3.1 2.0 1.3 0.9 0.8

Approximate standard errors for estimates presented in this report may be determined as follows:

- 1. Estimates of aggregates.—Approximate standard errors of estimates of numbers of decedents with a given characteristic are given in table II.
- 2. Estimates of percentages in a percent distribution.—Approximate standard errors for percentages are determined in one of the following ways, depending on the source of the base of the percentage:
 - a. where both the numerator and denominator are estimates from the sample data, the approximate standard errors are those shown in table III.
 - b. where the denominator is a value found in one of the 40 ratio estimate cells shown on page 48, the relative standard error of the percent is equivalent to the the relative standard error of the numerator since the denominator is not subject to sampling error.

These are given in table II.

Table III. Approximate standard errors for percentages shown in this report

	Estimated percent						
Base of percentage	2 or 98	5 or 95	10 or 90	25 or 75	50		
10,000	1.8 1.0 0.8 0.6 0.4 0.3 0.2 0.2	2.4 1.8 1.3 0.9 0.6 0.4 0.3 0.3	3.4 2.2 1.7 1.2 0.8 0.5 0.4	4.9 3.2 2.5 1.8 1.1 0.8 0.7 0.6	5.7 3.6 2.9 2.0 1.3 0.9 0.8		

- 3. Estimates of the number of episodes.—Approximate standard errors for the number of episodes are given in table IV.
- 4. Estimates of the number of days of care.— Approximate standard errors for the number of days of care are given in table V.
- 5. Differences between two sample estimates.— The standard error of a difference between two sample estimates is approximately the square root of the sum of the squares of each standard error considered separately. This formula will represent the actual standard error quite accurately for the difference between separate and uncorrelated characteristics. Since the data presented here are usually correlated to some degree, this method is only a rough approximation in most cases.

Table IV. Approximate standard errors for estimated number of episodes shown in this report

Number of episodes	Standard error	Relative standard error
10,000	1,200 2,800 3,500 4,100 5,000 5,800 6,600 7,300 10,300 10,800 11,500 11,500 11,400 13,000 13,400 13,400 14,200 14,800	12.0 8.0 5.6 4.7 4.1 3.3 2.9 2.6 2.4 2.2 2.0 2.0 1.8 1.7 1.6 1.5 1.5

Rounding of Numbers

Although the published tables show aggregates rounded to the nearest thousand, the tabulations on which the tables are based contain figures to the nearest unit. All computations were made using the unrounded data. Therefore computations using the published tables may not be exactly the same as the computations made with the unrounded data.

Table V. Approximate standard errors for estimated number of days of care shown in this report

Number of days	Standard error	Relative standard error
50,000	22,300 31,500 38,500 45,300 50,700 56,500 61,000 66,400 75,500 92,500 92,500 100,500 111,200 116,000 116,500 204,400 237,900 268,000 295,900 326,600 356,600 385,800	44.5 31.5 25.7 20.3 18.8 17.4 15.6 15.1 14.0 13.5 12.8 12.8 12.2 12.0 11.7 11.6 8.3 6.8 5.4 4.7 4.7
10,000,000	414,500	4.1

APPENDIX II

DEFINITIONS OF CERTAIN TERMS USED IN THIS REPORT

Information From the Death Certificate

Color.—The category "white" includes those individuals reported on the death certificate as white, Mexican, Puerto Rican, and Cuban. The category "all other" includes those reported as Negro, American Indian, Chinese, Japanese, Hawaiian, Part-Hawaiian, and "other nonwhite."

Age.—Age is recorded on the death record as age or date of birth. If recorded as date of birth, it is used to compute the decedent's age at last birthday.

Sex.—Sex is coded from entries on the death certificate.

Cause of death.—The cause of death and corresponding category numbers are in accord with the International Classification of Diseases, Adapted, 7th revision.

Institutional residence.—If the decedent's usual place of residence was reported to be a hospital, nursing home, or other resident institution, the decedent's living arrangement was coded as "resident of institution."

Region and division.—The States in which the deaths occurred are classified into four regions which are further subdivided into nine divisions corresponding to those used by the Bureau of the Census. These regions and divisions are as follows:

Region	Division	States Included
Northeast	New England	Maine, New Hampshire, Vermont, Massachusetts, Rhode Island, Connecticut
	Middle Atlantic	New York, New Jersey, Pennsylvania
North Central	East North Central	Ohio, Indiana, Illinois, Michigan, Wisconsin
	West North Central	Minnesota, Iowa, Missouri, North Dakota, South Dakota, Nebraska, Kansas
South	South Atlantic	Delaware, Maryland, District of Columbia, Virginia, West Virginia, North Carolina, South Carolina, Georgia, Florida
	East South Central	Kentucky, Tennessee, Alabama, Mississippi
	West South Central	Arkansas, Louisiana, Oklahoma, Texas
West	- Mountain	Montana, Idaho, Wyoming, Colorado, New Mexico, Arizona, Utah, Nevada
	Pacific	Washington, Oregon, California, Alaska, Hawaii

Information From the Informant Questionnaire

Expenses for care in hospitals and institutions.— The expenses for care refer to the total amount of the bill(s) for all episodes the decedent had in a hospital or institution during the 12 months before his death. This does not include the physician's or surgeon's bill.

Living arrangements.—For those decedents who were not residents of institutions, the household listing on the questionnaire, which included space for entries on marital status and the relationship of each member to the decedent, was used to determine the living arrangements used in this report. Living arrangements refer to whether the decedent lived with spouse, with other relatives, alone or with nonrelatives, or lived in an institution at the time of death.

family income.—Family income refers to the total of all income received during the last full calendar year by all persons related to the decedent by blood, marriage, or adoption and living in the same household as the decedent at the time of his death. If the decedent alone, lived with nonrelatives, or was institutionalized, the income refers only to his individual income. For persons dying in 1964, the income shown here was that received in 1963; for those dying in 1965, the income was that received in 1964.

Marital status.—Although this item is reported on the death certificate, the marital status used in this report was coded from the entries in the household listing on the questionnaire. The decedents classified as married include decedents who were reported to be separated.

Information From the Hospital Questionnaire

Hospitals and institutions.—In this report "hospitals and institutions" refers to facilities providing medical or personal care, such as hospitals listed in the Guide Issue of Hospitals or the Journal of the American Hospital Association, and includes homes for the mentally retarded, nursing homes, other homes for the aged, and other places providing medical, nursing, personal, or domiciliary care. Questionnaires returned by establishments claiming to have provided

care to decedents as inpatients or inmates were accepted as reports of hospitals and institutions regardless of whether the establishments could be located in one or more of the several listings of such places which were used in connection with the processing of the survey data. These listings included: American Hospital Association Directory, Modern Hospital Directory, and National Office of Vital Statistic Substitution List.

Short-stay hospital.—A short-stay hospital is a facility for which the type of service—a classification of hospitals according to the predominant types of cases for which they provide care—is general; maternity; eye, ear, nose, and throat; children's; and / or osteopathic. The type-of-service category to which an individual hospital is assigned and the definition of these categories follows the usage of the American Hospital Association.

Resident institution.—A resident institution is a facility for which the type of service is psychiatric, tuberculosis, orthopedic, or contagious disease and/or convalescent, including the hospital department of any of the above. Also included are homes for the mentally retarded, nursing or convalescent homes, other homes for the aged, and other places which provide medical, nursing, personal, or domiciliary care.

Episode.—An episode is defined as any continuous period of inpatient care or inmate experience for which there is a known date of admission and for which there is a known date of discharge within the 12-month period before death. The episode may have begun prior to the 12-month period before death.

Terminal episode.—A terminal episode is defined as an episode for which the date of discharge is the same as the date of death. Terminal episodes do not include those cases recorded as DOA on the death certificate of the hospital questionnaire.

Day of care.—A day of care is a period of time in which a person is confined to a short-stay hospital as a resident. The day is counted as a day of care only if the patient stays overnight. Thus a patient who enters the hospital or institution on Monday afternoon and leaves Wednesday noon is considered to have had 2 days of care in the hospital or institution.

APPENDIX III

SOURCE FORMS

Death Certificate

В	IRTH NO.	STATE OF		V		STATE	FILE	No	Budget	Bureau No. 68-R375 2
	PLACE OF DEATH d. COUNTY				1			ere deceased lived. If institu b. COUNTY	tion: Roud	ence before admission)
Γ	b. CITY, TOWN, OR I	OCATION		c. LENGTH OF STAY	IN 15	c. CITY, TOWN, OR	LOCATI	ON		
	d. NAME OF (HOSPITAL OR INSTITUTION	If not in hospital, give str	eet addres	12)	_	d. STREET ADDRES	s			
┢	e. IS PLACE OF DEAT	H INSIDE CITY LIMITS?			-	e. IS RESIDENCE IN	ISIDE C	ITY LIMITS?	f. IS RES	IDENCE ON A FARM?
	YES NO					YES 🔲 🙀	• 🗆		YES	5 □ NO □
l .	NAME OF DECEASED (Type or print)	First	-	Middle		Last		4. DATE 3 OF DEATH	Sonth	Day Year
5.	SEX	6 COLOR OR RACE		IED NEVER MARRI		DATE OF BIRTH		9. AGE (In years last birthday)		YEAR OF UNDER 24 HRS. Dogs Hours Min.
100	z. USUAL OCCUPATION during most of wor	(Give kind of work done king life, even if retired)		OF BUSINESS OR INDU		1 BIRTHPLACE (State	or fore	ign country)	12. CITIZEI	OF WHAT COUNTRY?
13.	FATHER'S NAME		<u>. </u>		1	4. MOTHER'S MAIDE	NAME			
15. (Y	WAS DECEASED EVER	R IN U. S. ARMED FORCE	S7 raice)	16 SOCIAL SECURITY	Y NO. 1	7 INFORMANT		Addr	ess	
z	Conditions, i which gave above cause stating the u lying cause	(a), inder- last. DUE TO (c)_								
CATIO	PART II OTHE	R SIGNIFICANT CONDITIONS	CONTRIBUTI	ING TO DEATH BUT NOT F	RELATED '	TO THE TERMINAL DISEAS	E CONDI	ition given in Part I(a)		19. WAS AUTOPSY PERFORMED? YES NO
CERTIFICATION	20a. ACCIDENT	SUICIDE HOMICIDE	206. DES	CRIBE HOW INJURY OF	CCURRE	Enter nature of	njury i	n Part I or Part II of it	em 18.)	
MEDICAL	20c. TIME OF Hot INJURY a.: p. 1	78.								
MEDICAL CERTIFICATION	20d INJURY OCCUR WHILE AT ONC WORK AT	T WHILE CORK PLACE	E OF INJU , factory,	RY (e.g., in or about street, office bidg., etc.	home,)	20/. CITY, TOWN, OI	LOCAT	rion C	YTNUC	STATE
	21. I attended th	e deceased from		, te				nd last saw her aliv	e on	
1	Death occurs	ed at			date		to the	best of my knowled	ige, fron	
	22a. SIGNATURE		(Degree o	or title)		22b ADDRESS				22c, DATE SIGNED
230	REMOVAL (Specify)	236 DATE	23	c. NAME OF CEMETERY	Y OR CR	EMATORY	23d. L	OCATION (City, town, or	county)	(State)
24	, FUNERAL DIRECTOR	AD	DRESS		25. DA	TE RECD. BY LOCAL RI	EG.	26. REGISTRAR'S SIGNA'	TURE	

Informant Questionnaires

Death Outside Institution



DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE
WASHINGTON, D.C. 20201

NATIONAL CENTER FOR HEALTH STATISTICS

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The U. S. Public Health Service is conducting a survey to obtain information about people who died during 1965. The survey is being conducted as part of a program to collect urgently needed information about the health problems of the Nation. This study will provide information about the health of the American people. What is learned may help to reduce the hazards of disabling illness and avoidable deaths.

For one out of every 330 deaths occurring throughout the country, facts are being collected about health insurance coverage, use of hospitals and institutions, and finances during the year prior to death. The sample for this survey was scientifically designed so that every person dying during 1965 had the same chance of being selected.

The person named below is in the sample and our records indicate that you are most likely to have the information we need. If you do not have the exact answer to a question, give your best estimate. Your reply will be held strictly confidential and will be used to get total figures only. The identity of individuals will not be disclosed for any purpose.

The success of this study depends upon our having information about every death. Your reply is important. Even if you have not answered all the questions, please mail the completed form within five days in the enclosed envelope which requires no postage. Your cooperation and prompt attention to this request will be appreciated.

Monus J. Serher Monroe G. Sirken, Ph. D. Chief, Division of Health Records Statistics

Name	of	Deceased	Person	 File	Number	
						I1_1_5

NATIONAL MORTALITY SAMPLE SURVEY - 1965

PART I. HEALTH INSURANCE					
	period before death. Pleas	d person was covered by health insurance at any time se report on each kind of health insurance protection			
During the 12-month per deceased person have he hospital care?	riod before death, did the ealth insurance to pay for	What about a surgeon's bill? During the 12-month period before death, did the deceased person have health insurance to pay surgeons' bills?			
Yes 1	No	Yes No			
PART II. HOSI	PITAL AND INSTITUTION	ON CARE IN LAST YEAR OF LIFE			
In this part, we are int about the hospitals, nur iums, and similar pla medical or personal car ceased person during before death. We are als out about the bills a	sing homes, sanator- aces which provided re services to the de- the 12-month period to interested in finding	4. Was any part of the bills paid by the deceased person's children or other relatives (other than spouse, if married) who usually lived in the household with the deceased person?			
1. Sincetime just before death; son a patient in any home for the aged,	(including the , was the deceased per- hospital, nursing home, or other type of insti- edical or personal care?	5. Was any part of the bills paid by the deceased person's children or other relatives NOT living in the household with the deceased person, or by friends? Yes No			
Yes (continue below)	No (skip to part III on next page)	6. Did the deceased person receive care in places during the 12-month period before death which was provided free, or which was paid for by any of the following?			
Write name and loca	tion of each place	(check as many as apply)			
Name	City and State	☐ Veterans Administration			
		Medical assistance for the aged or other public assistance			
		Public Health Department			
		☐ Non-profit health agency, such as "Polio Foundation"			
		Other welfare organization			
		☐ Workmens' Compensation			
2. During the 12-month pe how much did the hosp		 A public hospital, nursing home, or clinic 			
come to; that is, amoun person, by health insu	rance, or by relatives	Some other hospital, nursing home, or clinic			
or friends of the deceased person? (Do not include any part provided by public or private agencies.)		☐ Other What was that? (Write in)			
If exact amount not known, please check	Less than \$100				
your best estimate.	☐ \$100 - \$249 ☐ \$250 - \$499	7. Were any operations performed on the deceased person during the 12-month period before death?			
	\$500 - \$999 \$1,000 and over	Yes No			
What part of the hospite person was paid by healt		What part of the surgeon's (doctor's) bill was paid by any kind of insurance?			
☐ None ☐ Less than 1/2	1/2 up to 3/4 3/4 or more	☐ None ☐ 1/2 up to 3/4 ☐ Less than 1/2 ☐ 3/4 or more			

PART III	. HOUSEHOL	D COMP	OSITION	
This part is concerned with experson at the time of death. (Include			n the same hou	sehold with the deceased
How many people were living to same household as the deceased of death, including the deceased pe	at the time	2. Who w	ras head of this The deceased Another per	•
3. On the following lines, enter t sons who usually lived in the sam	the names and price household as the	rovide the in e deceased	nformation requests on at the times.	uested below for all per- me of death.
(LAST NAME) (FIRST NAME)	Relationship to the deceased person (son, mother-in-law, step-daughter,	Male or Female	Birth Date	Marital status at time of deceased person's death— Married Divorced Widowed Separated Single (never married)
(1)	Deceased person	ı		
(2)				
(3)				
(4)				
(5)				
(6)	,			····
(7)				
(8)				
(9)				
(10)				
(11)				
(If more spa	ace is needed, con	itinue on a s	separate sheet)	
	PART IV. A	SSETS		
This part is concerned with the total v things owned by the deceased person deceased person was married and was with spouse, answer for both husband at together.	If the living	assets estate	such as stocks investments, e	son (and spouse) have other and bonds, business or real etc., at the time of death?
1. Did the deceased person and spouse ried and living together, own a hom buying) at the time of death?		5. Did the deceased (and spouse) have any other kind of assets such as an automobile, jewelry, etc.?		
Yes No		(☐ Yes [□№
2. Did the deceased person (and spouse money in banks, credit unions, saving associations, etc.? Yes No		things	owned by the de	e to be the total value of ceased person (and spouse) mortgages were paid off?
3. Did the deceased person (and spour business or farm?	se) own a	(check		agrees with your estimate) \$5,000-\$9,999
Yes No		Un Un	der \$1,000 ,000-\$4,999	\$10,000-\$9,7999 \$10,000-\$24,999 \$25,000 and over

PART V. INCOME

This part is about the income of the deceased person and other related persons living with the deceased at the time of death. 1. State whether the deceased person (and spouse, 3a. Were there family members who usually if married and living together) received income lived in the same household with the deduring 1964 from any of the following sources: ceased person (not counting the spouse of (check "yes" or "no" for each item) the deceased person) who had money income in 1964? Yes No Yes (continue No (skip to Part Wages, salary, or commission below) VI below) Own business, professional practice or partnership, or working on own farm 3b. How much did the income of the family members amount to in 1964? Dividends, interest on savings accounts or bonds, or income from annuities, estates, or trusts Under \$2,000 П Rental of property, or boarders \$2,000 - \$3,999 or lodgers Social Security **\$4,000 - \$6,999** П Veterans payments or other \$7,000 or over government or private pensions Welfare payments 3c. Taken together then, what was the total money Other sources including unemincome of the family from all sources in 1964? ployment or sickness benefits, regular contributions from non-(Check the box which agrees with your best resident relatives, alimony, etc. estimate) Other → What was that? (Write in) ☐ Under \$1,000 Include income .of the 2. What was the total money income of the deceased deceased person, spouse, \$1,000-\$1,499 person (and spouse, if married and living toand other family members \$1,500-\$1,999 who usually lived with the gether) from all sources in 1964? (Check the box deceased person. \$2,000-\$2,999 that agrees with your best estimate) ☐ None \$3,000-\$3,999 **\$3,000-\$3,999** Under \$1,000 **\$4,000-\$4.999 \$4,000-\$4,999** \$1,000-\$1,499 \$5,000-\$6,999 \$5,000-\$6,999 \$1,500-\$1,999 \$7,000-\$9,999 \$7,000-\$9,999 \$2,000-\$2,999 \$10,000 and over \$10,000 and over PART VI. SOURCES OF INFORMATION Please answer the questions in this part about 2. Is there another person who might be able to add yourself and about another person who could to the information you have provided? provide additional information about the de-☐ No ceased person. □ Үев 1. Who completed this form? Name Name Street Address Street Address City and State City and State Telephone Number Was the deceased person related to this person? Was the deceased person related to you? Yes □ No □ No

(relationship)

Deceased person was this person's .

Yes

Deceased person was your

(relationship)



DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE PUBLIC HEALTH SERVICE WASHINGTON, D.C. 20201

HATIONAL CENTER FOR HEALTH STATISTICS

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The U. S. Public Health Service is conducting a survey to obtain information about people who died during 1965. The survey is being conducted as part of a program to collect urgently needed information about the health of the American people. What is learned may help to reduce the hazards of disabling illness and avoidable deaths.

For one out of every 330 deaths occurring throughout the country, facts are being collected about health insurance coverage, use of hospitals and institutions, and finances during the year prior to death. The sample for this survey was scientifically designed so that every person dying during 1965 has the same chance of being selected.

The person named below is in the sample and our records indicate that you are most likely to have the information we need. If you do not have the exact answer to a question, give your best estimate. Your reply will be held strictly confidential and will be used to get total figures only. The identity of individuals will not be disclosed for any purpose.

The success of this study depends upon getting information on every death. Your reply is important. Even if you have not answered all the questions, please mail the completed form within five days in the enclosed envelope which requires no postage. Your cooperation and prompt attention to this request will be appreciated.

Monroe G. Sirken, Ph. D. Chief, Division of Health Records Statistics

Name ·	of	Deceased	File	Number
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I4-1-5

NATIONAL MORTALITY SAMPLE SURVEY - 1965

	PART I. HEALTH	INSURANCE			
We are interested in find during the 12-month peri whether or not the insurance	od before death. Please	person was covered by health insurance at any time report on each kind of health insurance protection			
1. During the 12-month periodeceased person have hea hospital care?	od before death, did the	 What about the surgeon's bill? During the 12- month period before death, did the deceased per- son have health insurance to pay surgeons' bills: 	_		
Yes No		Yes No			
PART II. HOSPITA	L AND INSTITUTION	ON CARE IN LAST YEAR OF LIFE			
In this part, we are interested in finding out about the hospitals, nursing homes, sanitoriums, and similar places which provided medical or personal care services to the deceased person during the 12-month period before death. We are also interested in finding out about the bills and who paid them.					
Complete the information tion in which the decease at the time of death.		3. During the 12-month period before death, about how much did the bills for care in these places come to, not counting any part provided by public or private agencies? (Include amounts paid by the			
Name of Institution		deceased person and spouse, by health insurance or by relatives or friends of the deceased person			
When did the deceased end Month 2. During the 12-month per	Day Year	If exact amount not known, please check your best estimate. Include bills for care in hospitals, nursing homes, homes for the aged, and other institutions providing health or personal care If exact amount not known, please the strength of the aged, so the strength of the strength of the deceased person) \$100 - \$299 \$300 - \$499 \$500 - \$999 \$1,000 and over			
the deceased person a pat tal, nursing home, home type of institution that pro sonal care? Yes No Write name and location of	ient in any other hospi- for the aged, or other vided medical or per-	4. What part of these hospital bills was paid by health insurance? None Less than 1/2 1/2 up to 3/4 3/4 or more 5. Was any part of the bills paid by the deceased			
Name City and State		person's children or other relatives (other than spouse, if married), or by friends?			
		☐ Yes ☐ No			

TAKI II. HOSHIAL AND INSTITUTION C	CARE IN LAST YEAR OF LIFE (continued)					
6. During the 12-month period before death, did the deceased person receive hospital care which was provided free, or which was paid for, by any of the following? (Check as many as apply) Veterans Administration Medical assistance for the aged or other public assistance Public Health Department Non-profit health agency Other welfare organization Workmens' Compensation A public hospital, nursing home or clinic Some other hospital, nursing home, or clinic	7. Were any operations performed on the deceased person during the 12-month period before death? Yes No What part of the surgeon's (doctor's) bill was paid by any kind of insurance? None Less than 1/2 1/2 up to 3/4 3/4 or more					
Other						
What was that? (Write in)						
PART III. INFORMATION ABO	PART III. INFORMATION ABOUT THE DECEASED PERSON					
1. When was the deceased person born?	2. At the time of death, was the deceased person:					
Month Year	☐ Married ☐ Divorced ☐ Widowed ☐ Legally separated ☐ Single (never married)					
PART IV.	ASSETS					
This part is concerned with the total value of things owned by the deceased person (and spouse, if married).	Did the deceased person (and spouse) have other assets such as stocks and bonds, business or real estate investments, etc., at the time of death?					
1. Did the deceased person (and spouse) own a home (include buying) at the time of death?	□Yes □No					
☐ Yes ☐ No	5. Did the deceased (and spouse) have any other kind of assets such as an automobile, jew- elry, etc.?					
Did the deceased person (and spouse) have any money in banks, credit unions, savings and loan	☐ Yes ☐ No					
associations, etc.?	What would you judge to be the total value of things owned by the deceased person (and spouse) after any debts or mortgages were paid off?					
	(Check the box which agrees with your estimate)					
Did the deceased person (and spouse) own a business or farm?	□ None □ \$5,000-\$9,999					
	Under \$1,000 \$10,000-\$24,999					
Yes No	\$1,000-\$4,999 \$25,000 and over					

PART V.	INCOME
This part is about the income of the deceased person.	What was the total money income of the deceased person from all sources in 1964?
 State whether the deceased person received income during 1964 from the following sources: 	(Check the box that agrees with your best estimate)
(Check "yes" or "no" for each item)	Under \$1,000
Yes No Wages, salary or commission Own business, professional practice or partnership, or working on own farm Dividends, interest on savings accounts or bonds, or income from annuities, estates or trusts Rental of property, or boarders or lodgers Social Security Veterans payments or other government or private pensions Welfare payments Other sources including unemployment or sickness benefits, regular contributions from relatives, alimony, etc.	\$1,000 - \$1,499 \$1,500 - \$1,999 \$2,000 - \$2,999 \$3,000 - \$3,999 \$4,000 - \$4,999 \$5,000 - \$6,999 \$7,000 - \$9,999 \$10,000 and over
PART VI. SOURCES	OF INFORMATION
Please answer the questions in this part about yourself and about another person who could provide additional information about the deceased person. 1. Who completed this form? Name Street Address	2. Is there another person who might be able to add to the information you have provided? Yes No Name Street Address
City and State	City and State
Telephone Number	Was the deceased person related to this person? ☐ Yes ☐ No
Was the deceased person related to you? Yes No Deceased person was your (relationship)	Deceased person was this person's (relationship)

Use the space below for additional comments.

Hospital and Institutional Questionnaires

Nonterminal Episode

Address of the Deceased.....

CONFIDENTIALITY has been assured the individual as published in the Federal Register May 20, 1959

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
Public Health Service - NCHS
Washington, D. C. 20201

Form Approved
Budget Bureau No. 68-R783

..... Date of Birth.....

NATIONAL MORTALITY SAMPLE SURVEY - 1965

• • • • • • • •		• • • • • • • • • • • • • • • • • • • •	Date of Death	• • • • • • • • • • • • • • • • • • • •
Hospital	or Institution in which	ch the Deceased was a l	Patient	
Approxima	ate Date of Last Discha	arge		
	PA	ART I. CARE IN THIS HO	OSPITAL OR INSTITUTION	
Was the p 1964?	person whose name appea	ars above discharged fi	rom this hospital or institution SI	INCE JANUARY 1,
Yes-	То□			
disc	Please complete a sec charges, please attach	etion below for each of a separate sheet.	f these discharges. If there were	more than three
PERIODS OF CARE	ADMITTED ON	DISCHARGED ON	FINAL DIAGNOSES	OPERATIONS PERFORMED
	Month	Month		•••••
I	Year	Year		Check if none
II	Month Dey Year	Month Day Year		Check if none
III	Month Day Year	Month Day Year		

PLEASE TURN PAGE

Rev. 2-65

PART II. CARE IN OTHER HOSPITALS OR INSTITUTIONS

According to your records or to your personal knowledge, was the deceased a patient in any other hospital, or in a medical institution (including nursing homes), SINCE JANUARY 1, 1964?
Yes No Unknown
Please list below each hospital or institution in which the deceased was a patient SINCE JANUARY 1, 1964?
OTHER HOSPITALS OR INSTITUTIONS IN WHICH THE DECEASED WAS A PATIENT
1. Name of Hospital or Institution
Street Address
City or Place State State
Approximate Discharge Date
2. Name of Hospital or Institution
Street Address
City or Place State
Approximate Discharge Date
3. Name of Hospital or Institution
Street Address
City or Place State State
Approximate Discharge Date
Remarks:
Signature of person completing this form
Name of this hospital or institution
Your position in this hospital or institution

CONFIDENTIALITY has been assured the individual as published in the Federal Register May 20, 1959

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE Public Health Service - NCHS Washington, D. C. 20201

Form Approved Budget Bureau No. 68-R783

NATIONAL MORTALITY SAMPLE SURVEY - 1965

Mame of the Deceased						
Bate of Death	Name of	the Deceased		•••••	File Number	
Bospital in which the Decessed Died. PART I. CARE IN THIS HOSPITAL	Address	of the Deceased			Date of Bir	th
A. Terminal Hospital Episode Flease give the following information about the period of care in this hospital which was terminated by the death of the deceased person named above. 1. The deceased was (check one): Regular Admission		•••••			Date of Dea	th
A. Terminal Hospital Episode Flesse give the following information about the period of care in this hospital which was terminated by the death of the deceased person named above. 1. The deceased was (check one): Regular Admitsion	Hospital	in which the Deceased	Died		· · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • • • • • • • • • •
Please give the following information about the period of care in this hospital which was terminated by the death of the deceased person massed above. 1. The deceased was (check one): Regular Admission			PART I. CARE IN	THIS HOSPITAL		
by the desth of the deceased person named above. 1. The deceased was (check one): Regular Admission	A. Termi	nal Hospital Episode				
1. The deceased was (check one): Regular Admission	Pleas by th	e give the following i	nformation about the p	eriod of care in this	hospital who	ich was terminated
Admitted to Beergency Room Only Day. Year. 2. Final Diagnoses: No				ion Date	e of Admissi	on;
Emergency Room Only Day			DOA		Month	• • • • • • • • • • • • • • • • •
2. Final Diagnoses: 3. Were any operations performed during this period of care? Yes				Only	Day	
2. Final Diagnoses: 3. Were any operations performed during this period of care? Yes						
3. Were any operations performed during this period of care? Yes	2. Fi	nal Diagnoses:				
Person of the spital Episodes Exclusive of the discharge due to death, was this person discharged from this hospital at any other time SINCE JANUARY 1, 1964? Yes.— Please complete a section below for each of these discharges. If there were more than three discharges, please attach a separate sheet. PERIODS ADMITTED DISCHARGED ON FINAL DIAGNOSES OPERATIONS PERFORMED Month. Mon			••••			• • • • • • • • • • • • • • • • • • • •
Person of the spital Episodes Exclusive of the discharge due to death, was this person discharged from this hospital at any other time SINCE JANUARY 1, 1964? Yes.— Please complete a section below for each of these discharges. If there were more than three discharges, please attach a separate sheet. PERIODS ADMITTED DISCHARGED ON FINAL DIAGNOSES OPERATIONS PERFORMED Month. Mon	3. We	re any operations perf	Ormed during this perio	od of sever		, , , , , , , , , , , , , , , , , , , ,
Please specify: B. Other Hospital Episodes Exclusive of the discharge due to death, was this person discharged from this hospital at any other time SINCE JANUARY 1, 1964? Yes				or or care!		
B. Other Hospital Episodes Exclusive of the discharge due to death, was this person discharged from this hospital at any other time SINCE JANUARY 1, 1964? Yes	10:	No	ì			
B. Other Hospital Episodes Exclusive of the discharge due to death, was this person discharged from this hospital at any other time SINCE JANUARY 1, 1964? Yes		Please specify:				
Exclusive of the discharge due to death, was this person discharged from this hospital at any other time SINCE JANUARY 1, 1964? Yes		· · · · · · · · · · · · · · · · · · ·				
Exclusive of the discharge due to death, was this person discharged from this hospital at any other time SINCE JANUARY 1, 1964? Yes	•		• • • • • • • • • • • • • • • • • • • •			••••••
Yes						
Please complete a section below for each of these discharges. If there were more than three discharges, please attach a separate sheet. PERIODS AIMITTED ON DISCHARGED ON FINAL DIAGNOSES OPERATIONS FERFORMED Month. Month. Month. I Day. Day. Check if none Month. Month. Month. II Day. Day. Check if none Month. Month. Month. Check if none Month. Month. Month. Check if none Tear Year Year Check if none The complete a section below for each of these discharges. If there were more than three more than three discharges. If there were more than three more than three discharges. If there were more than three discharges.	Exclustime S	sive of the discharge of SINCE JANUARY 1, 1964?	ue to death, was this	person discharged fro	m this hospi	tal at any other
Almitted ON DISCHARGED FINAL DIAGNOSES OPERATIONS PERFORMED Month	Yes	No				
Almitted ON DISCHARGED FINAL DIAGNOSES OPERATIONS PERFORMED Month		1				
OF CARE ON ON FINAL DIAGNOSES PERFORMED Month	discha	Please complete a sect: arges, please attach a	ion below for each of t separate sheet.	hese discharges. If	there were m	ore than three
OF CARE ON ON ON FINAL DRINGSS FERFORMED Month	PERIODS	ADMITTED	DISCHARGED	ETNAT DIAGNOC	THO.	OPERATIONS
I Day. Day. Year. Check if none Month. Month. Day. Check if none Wonth. Month. Check if none TI Day. Day. Check if none Wonth. Month. Check if none TII Day. Day. Check if none TIII Day. Year. Year. Check if none TIII Day. Tear. Tear. OF CARE	ON	OIN	FINAL DIAGNOS	·ED	PERFORMED	
I Day						
Year		Month	Month	***************************************	***********	•••••
Month	I	Day	Day	••••••••••	•••••	*************
Month. Month. Month.		Year	Year	•••••	• • • • • • • • • • • • • • • • • • • •	•••••
Till Dey. Dey. Check if none				•••••	• • • • • • • • • • • • • • • • • • • •	Check if none
Till Dey. Dey. Check if none		Momth	Man +1	.,		
Year Year Check if none	~~					
Month. Month. Day. Day. Check if none Tear. Check if none Control Check if none Ch	11					
Month		Year	Year	***************************************	***********	
Day				***************************************		Check if none
Day		Month	Month			
Year	₁₇₇			,		•••••
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	PHS-4670-2					11 more [

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PART II. CARE IN OTHER HOSPITALS OR INSTITUTIONS
According to your records or to your personal knowledge, was the deceased a patient in any other hospital, or in a medical institution (including nursing homes), SINCE JANUARY 1, 1964.
Yes No Unknown
Please list below each hospital or institution in which the deceased was a patient SINCE JANUARY 1, 1964.
OTHER HOSPITALS OR INSTITUTIONS IN WHICH THE DECEASED WAS A PATIENT
1. Name of Hospital or Institution
Street Address
City or Place State
Approximate Discharge Date
2. Name of Hospital or Institution
Street Address
City or Place State State
Approximate Discharge Date
3. Name of Hospital or Institution
Street Address
City or Place State
Approximate Discharge Date
Remarks:

Signature of person completing this form	
Same of Hospital	• • • • • • • • • •
Cour position in this hospital	* * * * * * * * * * * * * * * * * * *

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