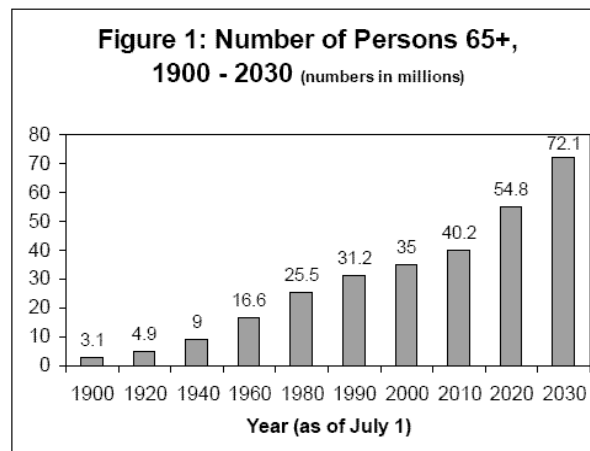


PROFILE OF OLDER AMERICANS

July 2011

THE FUTURE GROWTH OF THE OLDER POPULATION

- The 65+ population will increase from 35 million in 2000 to 40 million in 2010 and to 55 million in 2020.
- The 85+ population will increase from 4.2 million in 2000 to 5.7 million in 2010 and to 6.6 million in 2020.
- Between 2008 and 2030, the white population 65+ is projected to increase by 64% compared with other older minorities including: Hispanics (224%), African-Americans (120%), American Indians, Eskimos, and Aleuts (153%), and Asians and Pacific Islanders (199%).



RACIAL AND ETHNIC COMPOSITION

- In 2008, 19.6% of persons 65+ were minorities (8.3% African-Americans., 6.8% persons of Hispanic origin, 3.4% Asian or Pacific Islander, and less than 1% American Indian or Native Alaskan). In addition, 0.6% of persons 65+ identified themselves as being of two or more races.
- Minority populations are projected to increase from 5.7 million in 2000 (16.3% of the elder population) to 8 million in 2010 (20.1% of elders) and 12.9 million in 2020 (23.6%).

GENERAL HEALTH

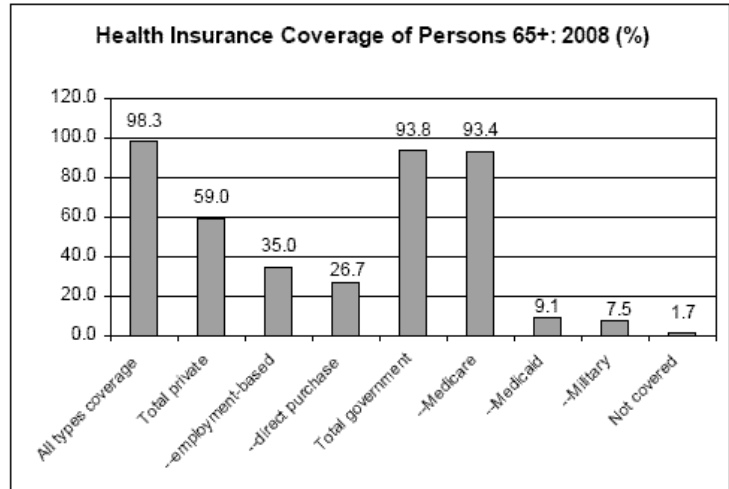
- In 2008, 39.1% of non-institutionalized older persons rated their health as excellent or very good.
- Older African-Americans, older American Indians/Alaska Natives and older Hispanics were less likely to rate their health as excellent or very good than were older Whites or older Asians.
- The most frequently occurring chronic conditions among older persons in 2005-2007 were: hypertension (41%), diagnosed arthritis (49%), all types of heart disease (31%), any cancer (22%), diabetes (18%), and sinusitis (15%).
- About 27% of older persons reported height/weight combinations that classified them as obese; 9% reported that they are current smokers; and 5% reported excessive alcohol consumption.
- Over 25% of persons aged 65-74 and 19% of persons 75+ reported that they engage in regular physical activity.

HOSPITAL VISITS AND HEALTH CARE COSTS

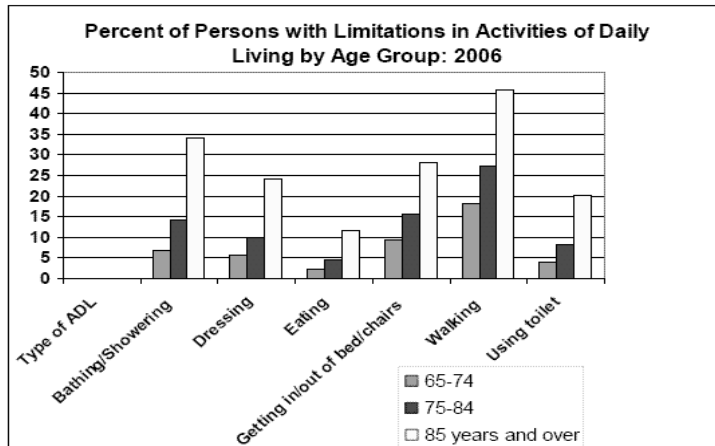
- The average length of stay for persons aged 65+ was 5.5 days, a decrease of 5 days since 1980.
- In 2005, older persons averaged more office visits with doctors: 6.5 office visits for those aged 65-74 and 7.7 office visits for persons over 75, while persons aged 45-65 averaged 3.9 office visits.
- Older Americans spent 12.5% of their total expenditures on health, more than twice the proportion spent by all consumers (5.9%).
- Average health costs incurred by older consumers in 2008 consisted of \$2,844 (62%) for insurance, \$793 (17%) for medical services, \$821 (18%) for drugs, and \$145 (3%) for medical supplies.

HEALTH INSURANCE

- In 2007, almost all (93%) non-institutionalized persons 65+ were covered by Medicare. Medicare covers mostly acute care services and requires beneficiaries to pay part of the cost, leaving about half of health spending to be covered by other sources.
- Among other sources of coverage, 59% had private health insurance; 7% had military-based health insurance; and 9% of the non-institutionalized elderly were covered by Medicaid. Only 1.7% did not have coverage of some kind.
- Approximately 87% of non-institutionalized Medicare beneficiaries in 2007 had some type of supplementary coverage.
- Among Medicare beneficiaries residing in nursing homes, about half were covered by Medicaid.



DISABILITY AND ACTIVITY LIMITATIONS



- In 2008, 38% of older persons reported some type of disability, many of whom needed some type of assistance as a result.
- The most frequently reported limitation across the aging spectrum is walking.
- Reported disability increases with age.

CAREGIVING

- In 1999, about 11% (3.7 million) of Medicare enrollees received personal care from a paid or unpaid source.
- Almost 90% of all community-residing older persons with chronic disabilities received either informal care (from family or friends) and/or formal care (from service provider agencies).

SOURCE: The data reported in this document were retrieved from the Administration on Aging's 2009 issue of [Profile of Older Americans](#).