

**Table 3: Individual annual incremental medical costs attributable to obesity by weight cohort (\$2009)**

Overweight	\$346
Moderately obese	\$807
Severely obese	\$1,566
Morbidly obese	\$2,845

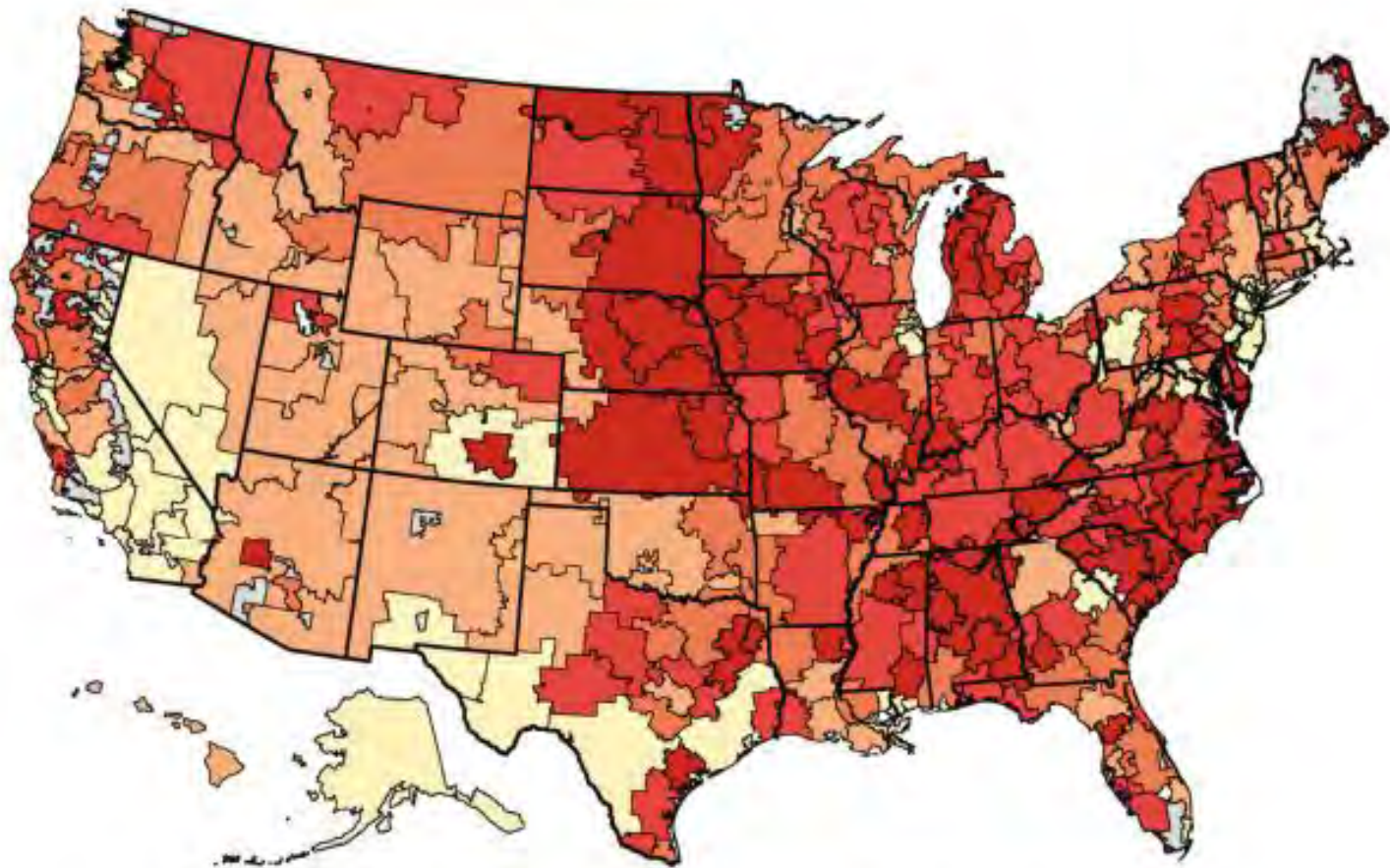
Source: Arterburn et al. (2005)

**Table 4: Individual annual medical costs and share of overall medical costs attributable to obesity in 2006 by expenditure type**

	Incremental costs in 2006 (\$2009)	Share of costs attributable to obesity (%)	% increase attributable to obesity from 1998 – 2006
Inpatient	\$433	10.3	45.5
Non-inpatient*	\$458	5.9	26.9
Prescription drug	\$586	15.2	80.4
Total	\$1,474	9.1	

\*Non-inpatient care includes outpatient, office-based, dental, and home health care, emergency room, vision, and other (excluding prescription drug expenditures).

Source: Finkelstein (2009)



**Map 1. Average annual percent of Medicare beneficiaries who had at least one visit to a primary care clinician among hospital referral regions (2003-07)**

Rates are adjusted for age, sex and race using the indirect method, with the corresponding population as the standard. The standard population is the U.S. Medicare population age 65 to 99 with Medicare Parts A and B entitlement and no HMO enrollment during the measurement period.

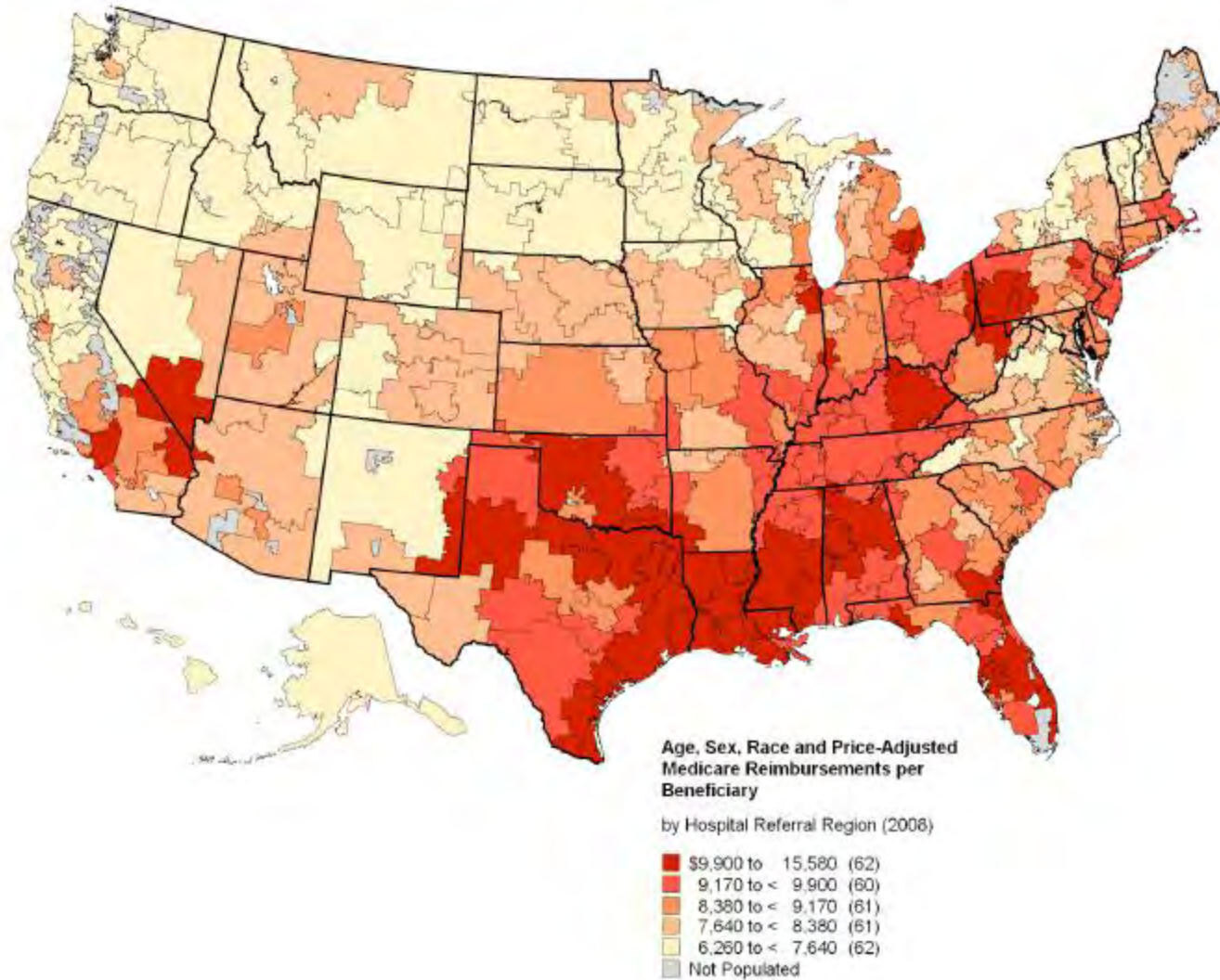
**Average Annual Percent of Medicare Beneficiaries Who Had At Least One Visit to a Primary Care Clinician**

by Hospital Referral Region (2003-07)

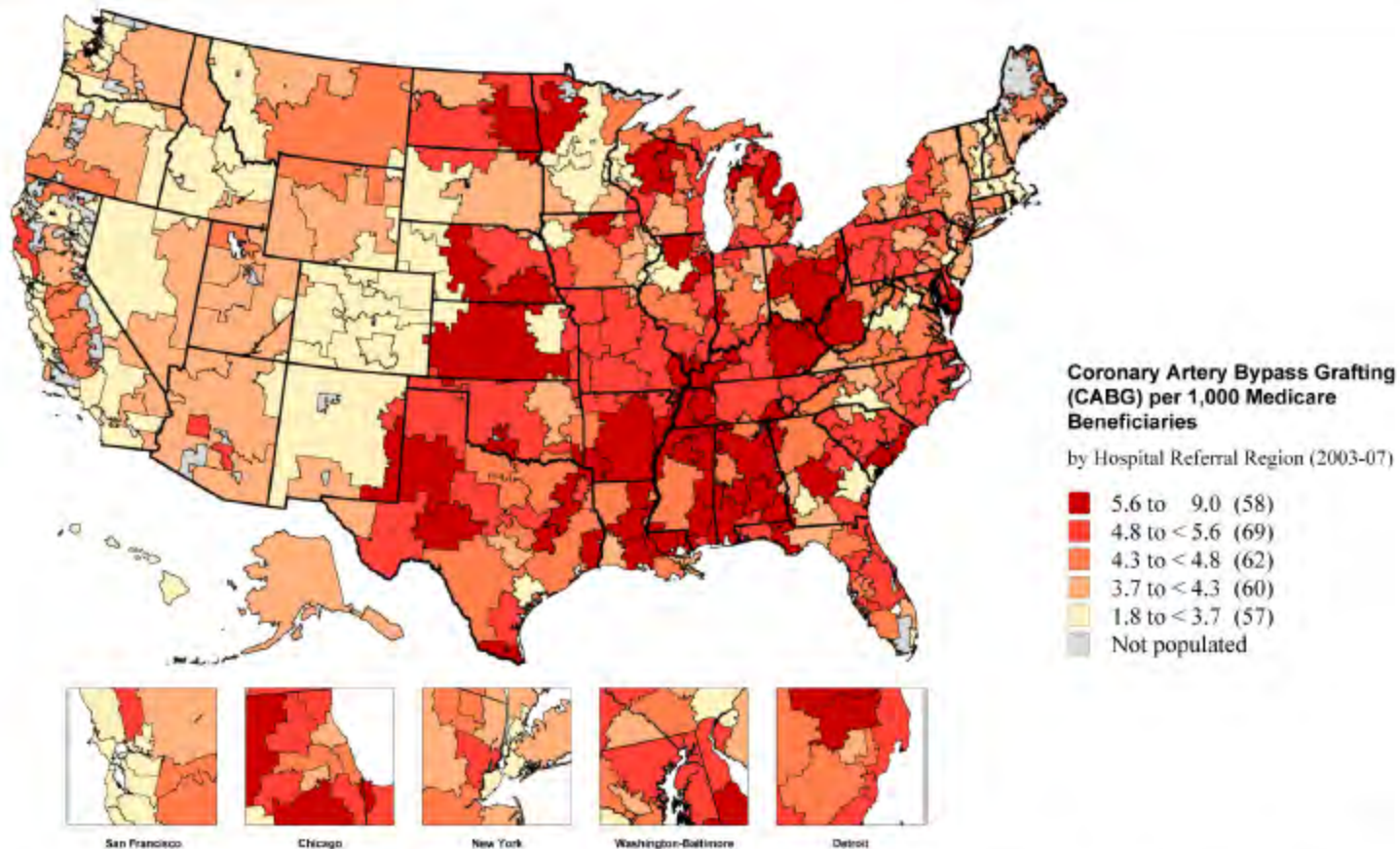
- 82% to 89% (71)
- 80% to < 82% (70)
- 78% to < 80% (63)
- 75% to < 78% (48)
- 60% to < 75% (54)
- Not populated



Map 1. Price-adjusted Medicare expenditures per beneficiary by hospital referral region (2008)



A New Series of Medicare Expenditure Measures by Hospital Referral Region

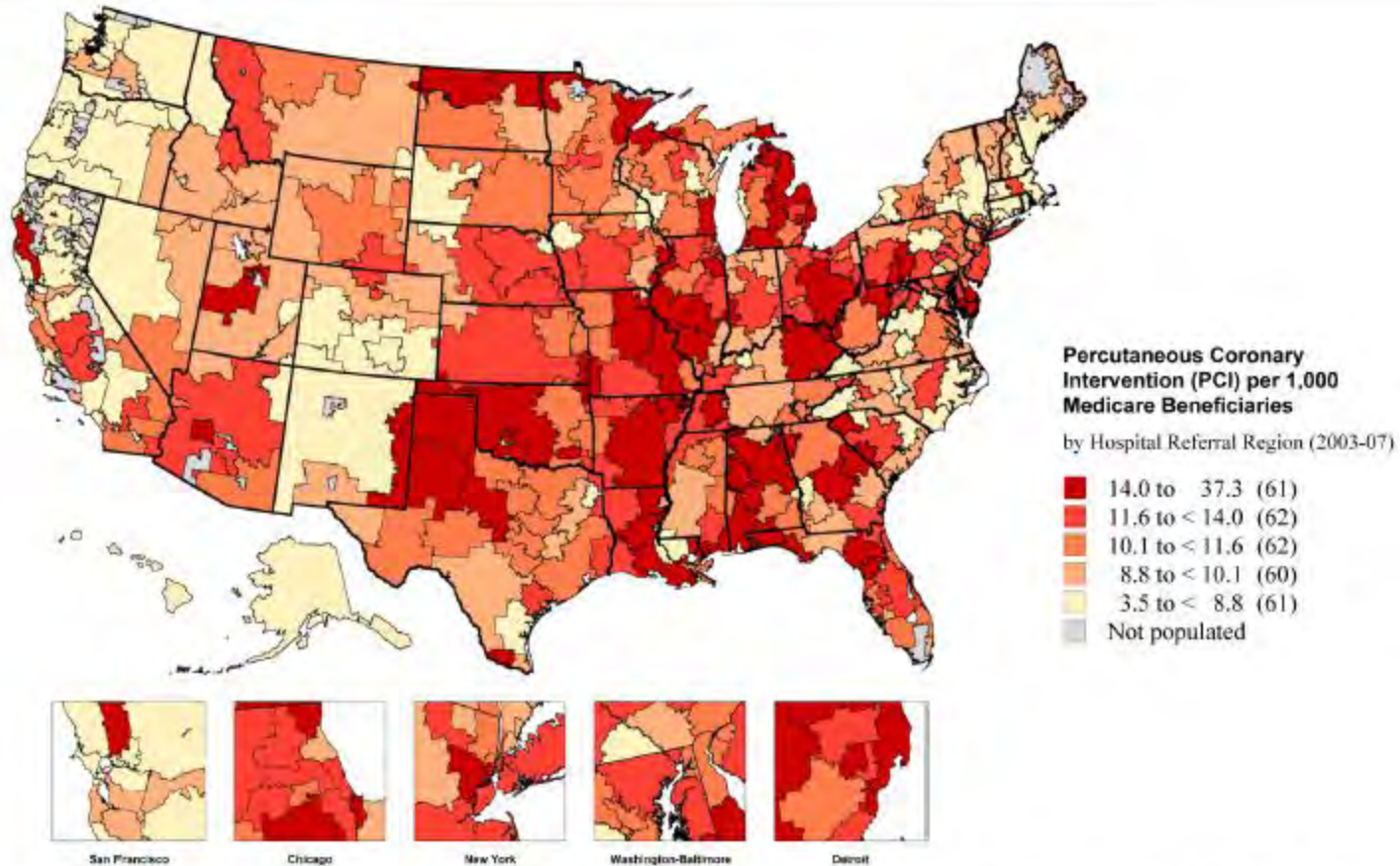


**Map 2. Coronary artery bypass surgery (CABG) per 1,000 Medicare beneficiaries among hospital referral regions (2003-07)**

The colors on the map represent the rates of CABG surgery per 1,000 Medicare beneficiaries in each HRR. Rates are adjusted for age, sex and race. The highest rate, 8.9 procedures per 1,000 beneficiaries, was seen in McAllen, Texas. The lowest rate, 1.9 procedures per 1,000, was seen in Pueblo, Colorado. In other words, patients in the McAllen HRR were more than four times more likely than patients in the Pueblo HRR to undergo CABG during 2003-07. The national average rate of CABG was 4.6 per 1,000. The greatest variation within a single HRR was seen in Denver, where the rate of CABG surgery ranged from less than 2 per 1,000 beneficiaries in the Steamboat Springs, Colorado HSA to more than 7 per 1,000 in the McCook, Nebraska HSA.<sup>v</sup>

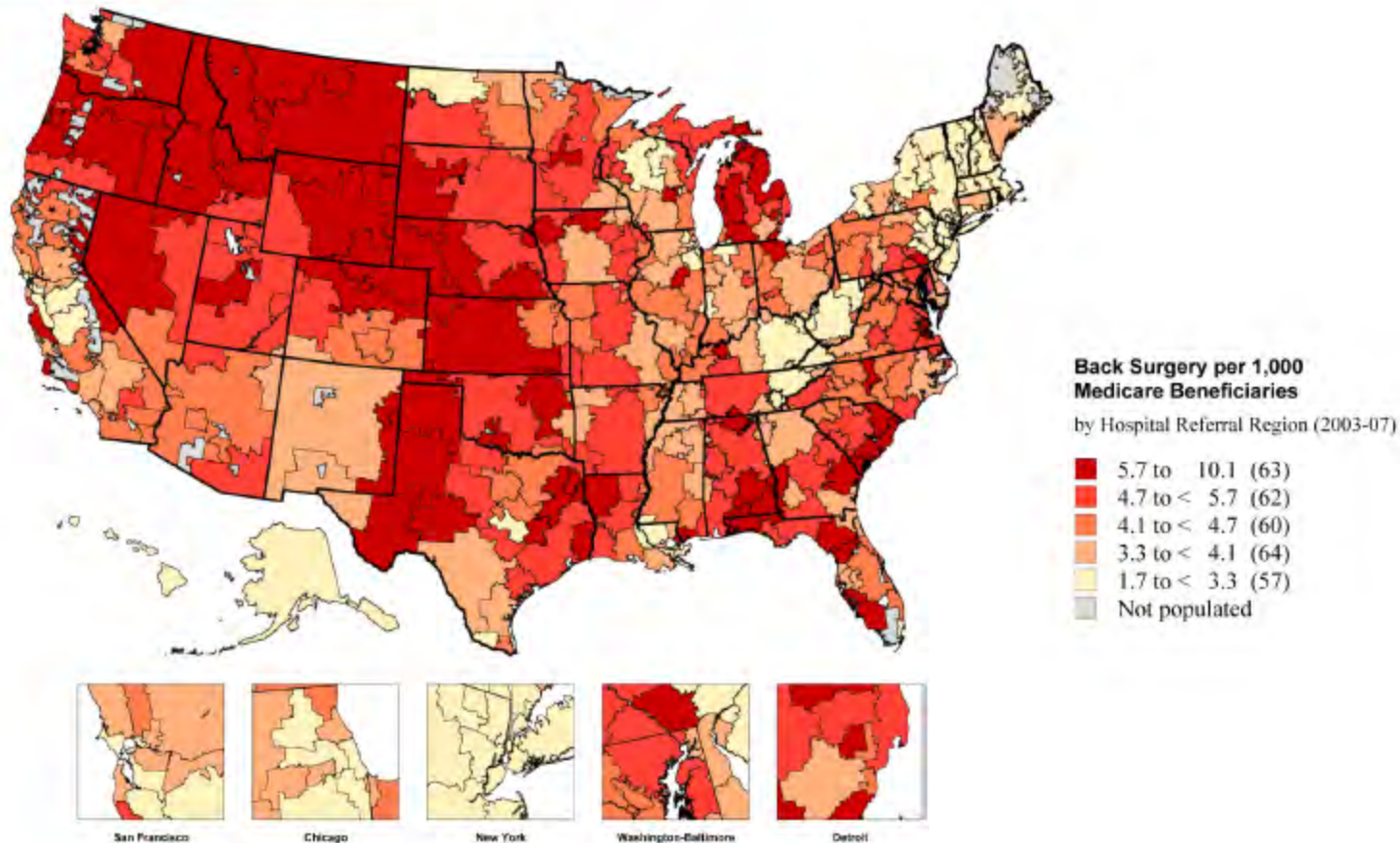
<sup>v</sup>Hospital service areas can belong to hospital referral regions in different states if patients frequently cross state lines to receive care at the closest tertiary care hospital.





**Map 3. Percutaneous coronary intervention (PCI) per 1,000 Medicare beneficiaries among hospital referral regions (2003-07)**

The different colors represent the rates of PCI per 1,000 Medicare beneficiaries in each HRR. Rates are adjusted for age, sex and race. The highest rate, 37.3 procedures per 1,000 beneficiaries, was seen in the Elyria, Ohio HRR. The lowest rate, 3.6 procedures per 1,000, was seen in Honolulu. Medicare beneficiaries living in the Elyria HRR were more than ten times more likely to undergo PCI than beneficiaries living in Honolulu. The rate in Elyria was also more than three times the average rate across the entire U.S (11.3 per 1,000). The greatest variation within a single HRR was seen in Napa, California, where the rate of PCI ranged from a little more than 5 per 1,000 beneficiaries in the Fort Bragg HSA to nearly 42 in the Clearlake HSA.

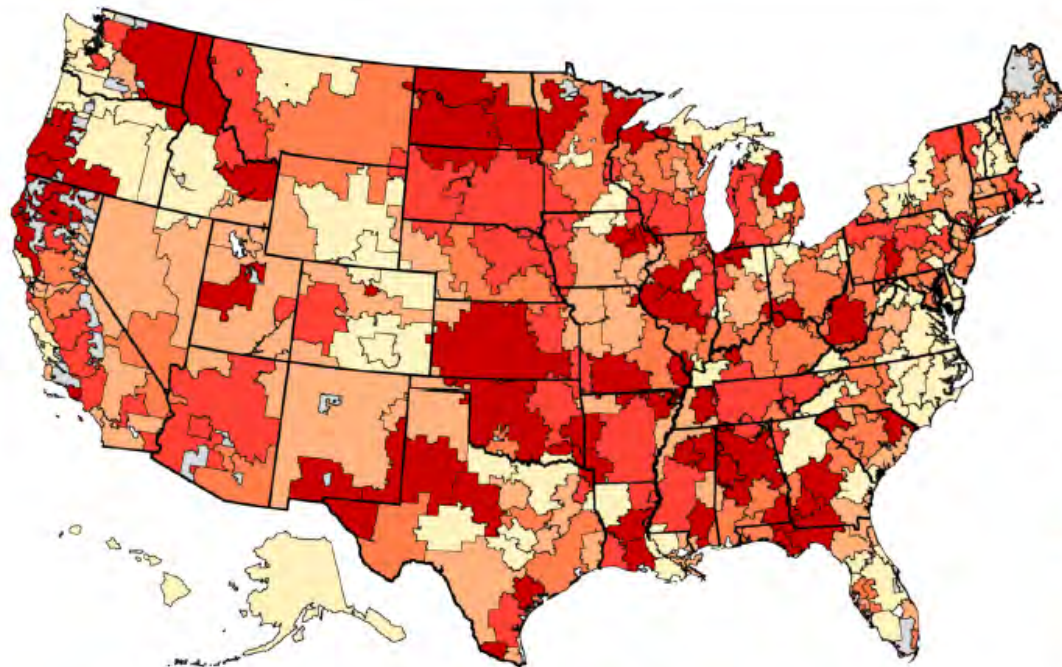


**Map 4. Back surgery per 1,000 Medicare beneficiaries among hospital referral regions (2003-07)**

The colors on the map represent the rates of back surgery per 1,000 Medicare beneficiaries in each HRR. Rates are adjusted for age, sex and race. The highest rate, 10.0 surgeries per 1,000 Medicare beneficiaries, was seen in Casper, Wyoming. This rate was nearly six times higher than the lowest rate, 1.7 surgeries per 1,000, seen in the Honolulu HRR. The average rate of back surgery in the entire U.S. was 4.3 per 1,000.

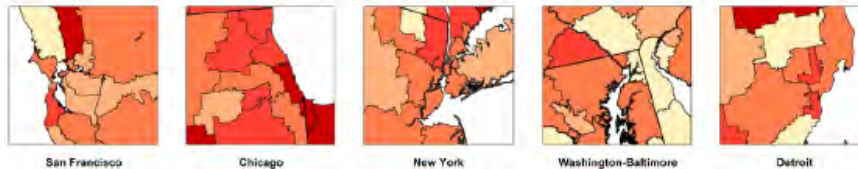
The greatest variation within a single region was seen in Lexington, Kentucky, where the rate of back surgery ranged from 0.8 per 1,000 beneficiaries in the Jackson HSA to 5.4 per 1,000 in the Somerset HSA.





**Transurethral Prostatectomy for Benign Prostatic Hyperplasia per 1,000 Male Medicare Beneficiaries**  
by Hospital Referral Region (2003-07)

- 5.3 to 9.6 (58)
- 4.5 to < 5.3 (55)
- 4.0 to < 4.5 (65)
- 3.4 to < 4.0 (61)
- 1.7 to < 3.4 (67)
- Not populated



San Francisco

Chicago

New York

Washington-Baltimore

Detroit

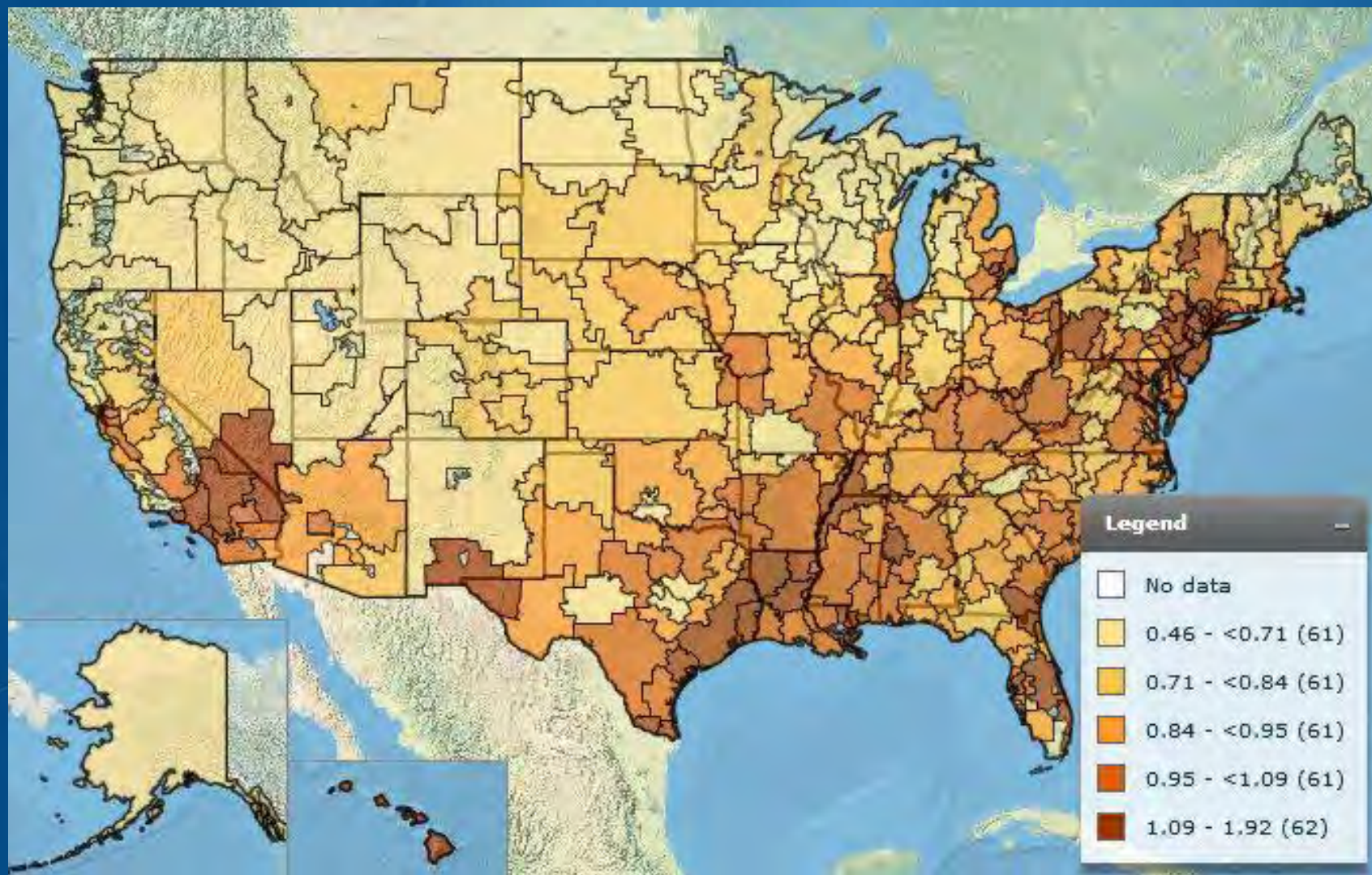
**Map 9. Transurethral resection of the prostate (TURP) for benign prostatic hyperplasia (BPH) per 1,000 male Medicare beneficiaries among hospital referral regions (2003-07)**

The colors on the map represent the rates of TURP for BPH per 1,000 male Medicare beneficiaries in each HRR. Rates are adjusted for age and race. Rates of TURP varied widely across the U.S. during 2003-07. The highest rate, 9.5 procedures per 1,000 male Medicare beneficiaries, was seen in the Idaho Falls, Idaho HRR. This rate was more than five times higher than the lowest rate, 1.7 surgeries per 1,000, in the Terre Haute, Indiana HRR. The national average rate of TURP was 4.3 per 1,000.

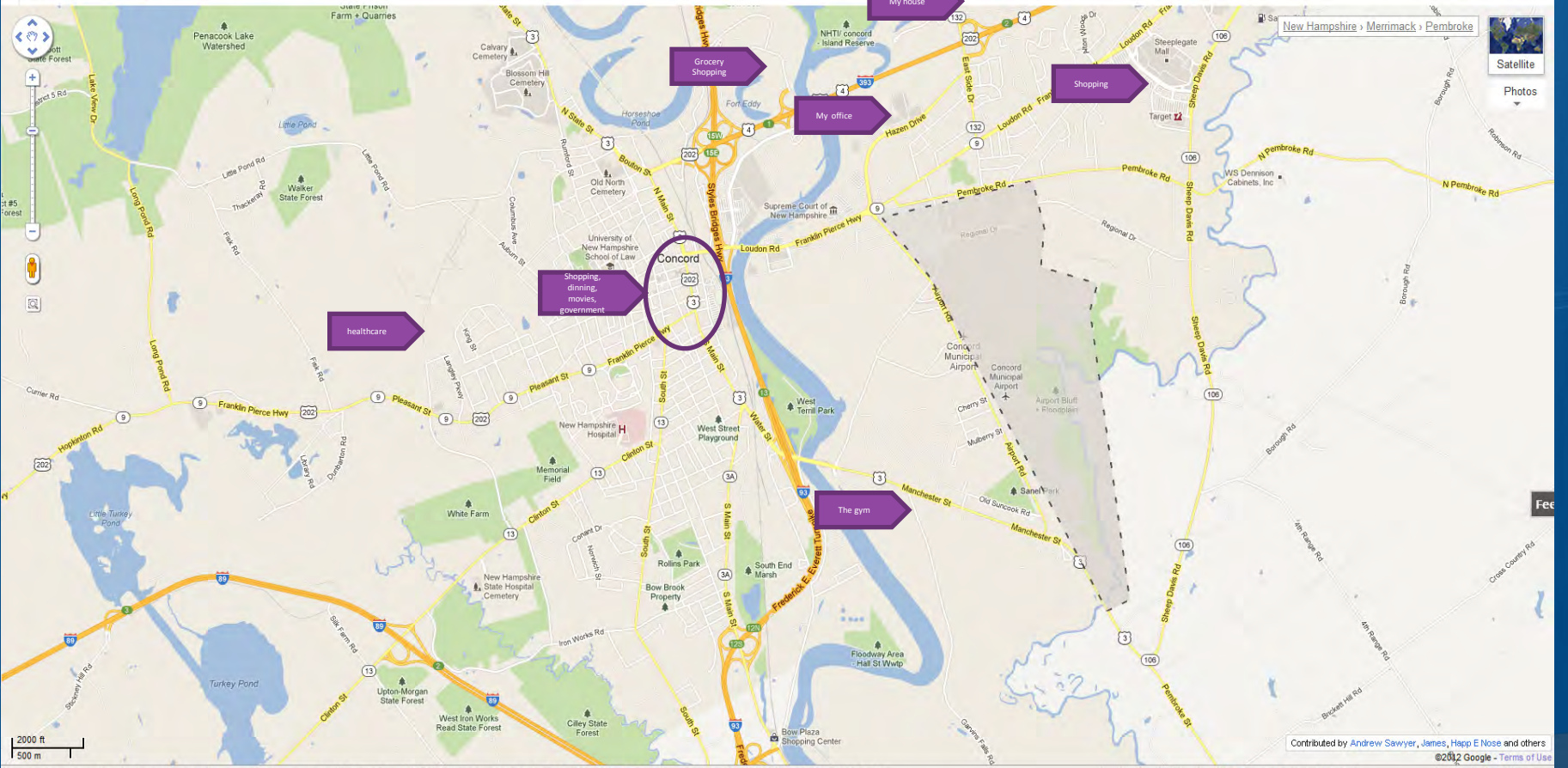
The greatest variation within a single hospital referral region was seen in Salt Lake City, where the rate of surgery ranged from less than 1 per 1,000 male beneficiaries in the St. George, Utah HSA to more than 11 per 1,000 male beneficiaries in the Rock Springs, Wyoming HSA.



# Hospital Care Intensity Index, Last Two Years of Life, by Component (Component: Overall Index; Year: 2003-2007; Region Level: HRR)







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Healthy, Young,  
middle aged,  
Hispanic,  
Overweight/obese

Built environment  
Health behaviors  
Social support  
Access to care

Healthy Community  
Walkable?  
Food access and choices  
Community resources  
Access to technology

Diabetes,  
CV health,  
Colon  
Prostate  
Back pain

Diabetes  
High Cholesterol  
CV disease  
Elevated PSA

Diabetes care:  
endocrinologist,  
podiatrist, neurologist,  
ophthalmologist,  
diabetes  
educator, etc.  
CV: medications,  
catheterism, etc  
Prostate imaging,  
surgery.

Health care infrastructure  
Health care coverage

Type of coverage  
Out of Pocket expenses  
Type, variety and quality of disease care  
resources: Center of Excellence (PCP)