

Discrimination in Health Care

Evidence from the Health and Retirement Study (HRS) and Medicare Claims Data

THE EVIDENCE

Nearly **1 in 5 older adults** reported experiencing discrimination in health care

19% of adults age 50+ reported discrimination in 2020-2022 (up from 15.5% in 2012)

Common Reasons Older Adults Report Discrimination



Age **38.5%**



Race/Ethnicity **31.3%**



Gender **14.5%**

Impact on the Care Experience

- ✓ Lower Satisfaction with Care
- ✓ Care Preferences ignored
- ✓ Less likely usual source of care

Discrimination Drives Higher Health Care Costs



Older adults who reported discrimination had **31%** higher odds of incurring above-average Medicare costs



Differences were driven by inpatient spending

Repeated Discrimination Raises Costs Over Time

Each report of discrimination was associated with **\$1,100** excess Medicare spending



The National Cost of Health Care Discrimination

In 2022, excess Medicare spending attributable to health care discrimination reached **\$14.2 Billion**



..and cumulatively between 2012-2022 **\$73.2 Billion**



In 2025, excess costs rise to **\$17.4 billion over 2 years**



..with cumulative excess approaching **\$89.6 Billion**

Reducing discrimination can improve equity and reduce *avoidable* spending.