Years	45 and over		45–64		65–74		75 and over	
	Percent	SE	Percent	SE	Percent	SE	Percent	SE
2010	19	1	16	1	24	1	22	1
2011	18	1	15	1	24	1	20	1
2012	18	1	15	1	25	2	21	1
2013	19	1	17	1	26	2	20	1
2014	21	1	18	1	28	2	24	2
2015	24	1	20	1	32	2	27	2

Data table for Figure 1. Percentage of all emergency department visits for patients aged 45 and over made by those with diabetes, by age and year: United States, 2010–2015

NOTES: To be counted as an emergency department visit by a patient with diabetes, the medical record had to contain International Classification of Diseases, Ninth Revision, Clinical Modification (ICD–9–CM) code 249 or 250 in at least one of the diagnostic fields, or have an indication elsewhere in the medical record that the patient had diabetes. SE is standard error. SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2010–2015.

Data table for Figure 2. Rate of emergency department visits by patients aged 45 and over with diabetes, by age: United States, 2015

Age group (years)	ED visits per 1,000 persons with diabetes	SE	
45 and over	92	7	
45–64	69	6	
65–74	114	10	
75 and over	164	17	

NOTES: ED is emergency department. To be counted as an ED visit by a patient with diabetes, the medical record had to contain *International Classification of Diseases, Ninth Revision, Clinical Modification* (ICD–9–CM) code 249 or 250 in at least one of the diagnostic fields, or have an indication elsewhere in the medical record that the patient had diabetes. Visit rates are based on estimates of the noninstitutionalized civilian population as reported by the U.S. Census Bureau, Population Division. SE is standard error.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2015.

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	With o	diabetes	Without diabetes	
Primary expected source of payment	Percent	SE	Percent	SE
ED visits for those aged 45–64	100		100	
Private insurance	32	2	38	2
Medicare	24	2	14	1
Medicaid/CHIP or other state-based program	27	2	22	2
Uninsured	8	2	10	1
Other/unknown	8	2	16	2
D visits for those aged 65 and over	100		100	
Private insurance	9	2	9	1
Medicare	77	3	78	2
Medicaid/CHIP or other state-based program	5	1	4	1
Uninsured	1	Less than 1	1	Less than 1
Other/unknown	8	2	9	1

Data table for Figure 3. Distribution of primary expected source of payment for emergency department visits made by those aged 45–64 and 65 and over, by diabetes status: United States, 2015

... Category not applicable.

NOTES: ED is emergency department. To be counted as an ED visit by a patient with diabetes, the medical record had to contain *International Classification of Diseases, Ninth Revision, Clinical Modification* (ICD–9–CM) code 249 or 250 in at least one of the diagnostic fields, or have an indication elsewhere in the medical record that the patient had diabetes. CHIP is Children's Health Insurance Program. Uninsured includes self-pay and no charge or charity. Other/unknown includes worker's compensation, other payment source, unknown, and blank. Percentages may not always add to 100 due to rounding. SE is standard error.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2015.

	With diabetes		Without diabetes	
Discharge disposition	Percent	SE	Percent	SE
45 and over	100		100	
Admitted to hospital	28	2	17	1
Not admitted to hospital	72	2	83	1
45–64	100		100	
Admitted to hospital	22	2	12	1
Not admitted to hospital	78	2	88	1
65 and over	100		100	
Admitted to hospital	34	2	26	2
Not admitted to hospital	66	2	74	2

Data table for Figure 4. Percentage of emergency department visits made by patients aged 45 and over that resulted in a hospital admission, by diabetes status: United States, 2015

... Category not applicable.

NOTES: To be counted as an emergency department (ED) visit by a patient with diabetes, the medical record had to contain International Classification of Diseases, Ninth Revision, Clinical Modification (ICD–9–CM) code 249 or 250 in at least one of the diagnostic fields, or have an indication elsewhere in the medical record that the patient had diabetes. Hospital admission included those ED visits where patients were admitted as an inpatient to the same hospital, and those visits after which the patient was transferred to another nonpsychiatric hospital. SE is standard error.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2015.