Alabama

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**46**	**44**
Access & Affordability	33	27
Prevention & Treatment	38	20
Avoidable Hospital Use & Cost	47	46
Equity[b]	38	43
Healthy Lives	48	49

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	33	100%
State rate improved[c]	7	21%
State rate worsened[c]	16	48%
No change in state rate[d]	10	30%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	41	100%
Top 5 states	2	5%
Top quartile	2	5%
2nd quartile	9	22%
3rd quartile	8	20%
Bottom quartile	22	54%
Bottom 5 states	13	32%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	38	43	16	6	7	3
Low-Income	32	37	7	1	4	2
Race/Ethnicity	42	43	9	5	3	1

ESTIMATED IMPACT If Alabama improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	408,759	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	323,029	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	143,490	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	176,414	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	36,326	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	2,580	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	3,929	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	29,104	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	355,445	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	19	20	5	22	2007-08	16	17	-3	Worsened
Children ages 0–18 uninsured	2011-12	8	8	3	20	2007-08	6	9	-2	Worsened
Adults who went without care because of cost in past year	2012	20	15	9	44	2007	15	12	-5	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	19	16	10	42	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	13	14	6	20	2007	11	14	-2	Worsened
Adults without a dental visit in past year	2012	18	15	10	41	2006	15	14	-3	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	80	78	89	21	2007	82	82	-2	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	43	43	52	22	2006	39	44	4	Improved
Children with a medical home	2011/12	54	57	69	38	2007	56	61	-2	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	70	69	81	18	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	54	63	86	42	2007	62	63	-8	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	71	69	80	22	2009	47	43	24	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	29	19	12	50	2007	42	28	13	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	29	21	14	51	2007	27	19	-2	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	74	76	80	40	2007	75	75	-1	Worsened
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.1	12.8	11.9	38	07/2005 - 06/2008	12.6	12.6	-0.5	Worsened
Hospitalized patients given information about what to do during their recovery at home	2011	81	84	89	41	2007	87	80	-6	Worsened
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	67	66	71	20	2007	69	63	-2	Worsened
Home health patients who get better at walking or moving around	04/2012 - 03/2013	63	59	63	1	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	92	89	95	4	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	6	6	3	19	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	25	21.5	12	40	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	*	114	26	*	2004	*	137	--	*
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	38	27	13	45	2008	47	34	9	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	81	68	41	44	2008	100	80	19	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	50	45	26	32	2008	64	51.5	14	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	22	20	12	33	2006	21	20	-1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	21	19	7	36	2006	23	19	2	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	18	17	14	42	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	191	183.5	129	31	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$6,043	$5,501	$4,180	47	2008	$5,042	$4,505	-$1,001	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$9,336	$8,526	$5,406	42	2008	$8,922	$7,942	-$414	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	114	82	57	47	2004-05	117	90.5	3	No Change
Years of potential life lost before age 75	2010	9,254	6,567	4,900	50	2005	9,776	7,252	522	No Change
Breast cancer deaths per 100,000 female population	2010	23.6	22.2	14.8	42	2005	27.4	23.9	3.8	Improved
Colorectal cancer deaths per 100,000 population	2010	17.1	16.2	12.0	34	2005	18.8	18.1	1.7	Improved
Suicide deaths per 100,000 population	2010	14.0	13.5	6.9	29	2005	11.5	11.8	-2.5	Worsened
Infant mortality, deaths per 1,000 live births	2009	8.3	6.4	4.6	48	2004	8.7	6.8	0.4	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	36	27	19	51	2007	30	24	-6	Worsened
Adults who smoke	2012	24	19	10	43	2007	22	19	-2	Worsened
Adults ages 18–64 who are obese (BMI >= 30)	2012	34	28	21	47	2007	32	27	-2	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	35	30.5	22	42	2007	36	31	1	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	17	10	5	48	2006	16	10	-1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	42	18	-24	47	2007-08	30	17	-13	-12	Worsened
Adults who went without care because of cost in past year	2012	34	17	-17	48	2007	42	13	-29	8	Improved
At risk adults without a doctor visit	2012	19	14	-5	17	2007	24	14	-10	5	Improved
Adults without a usual source of care	2012	29	22	-7	11	2007	43	20	-23	14	Improved
Older adults without recommended preventive care	2012	66	58	-8	20	2006	65	56	-9	-1	No Change
Children without a medical home	2011/12	62	46	-16	29	2007	59	42	-17	-3	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	39	32	-7	21	--	--	--	--	--	--
Mortality amenable to health care	2009-10	180	86	-94	30	2004-05	189	96	-93	9	No Change
Infant mortality, deaths per 1,000 live births	2008-09	13	6.5	-6.5	28	2003-04	13.2	6.8	-6.4	0.2	No Change
Adults with poor health-related quality of life	2012	41	27	-14	46	2007	38	24	-14	-3	No Change
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	28	18	-10	23	2007-08	27	17	-10	-1	No Change
Adults who went without care because of cost in past year	2012	35	17	-18	46	2007	29	13	-16	-6	Worsened
At risk adults without a doctor visit	2012	12	14	2	8	2007	15	14	-1	3	Improved
Adults without a usual source of care	2012	22	22	0	15	2007	23	20	-3	1	Improved
Older adults without recommended preventive care	2012	66	58	-8	11	2006	69	56	-13	3	Improved
Children without a medical home	2011/12	58	46	-12	38	2007	59	42	-17	1	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	37	32	-5	20	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	44	25	-19	49	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	52	27	-25	50	2007	44	24	-20	-8	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Alaska

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**31**	**27**
Access & Affordability	31	43
Prevention & Treatment	43	20
Avoidable Hospital Use & Cost	12	9
Equity[b]	29	26
Healthy Lives	29	31

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	31	100%
State rate improved[c]	11	35%
State rate worsened[c]	7	23%
No change in state rate[d]	13	42%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	40	100%
Top 5 states	5	13%
Top quartile	7	18%
2nd quartile	15	38%
3rd quartile	8	20%
Bottom quartile	10	25%
Bottom 5 states	7	18%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	29	26	15	3	7	5
Low-Income	35	42	7	2	4	1
Race/Ethnicity	25	10	8	1	3	4

ESTIMATED IMPACT If Alaska improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	81,261	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	135,835	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	27,549	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	32,444	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	1,067	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	117	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	34	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	2,469	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	18,489	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	23	20	5	38	2007-08	23	17	0	No Change
Children ages 0–18 uninsured	2011-12	14	8	3	47	2007-08	13	9	-1	No Change
Adults who went without care because of cost in past year	2012	14	15	9	18	2007	14	12	0	No Change
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	15	16	10	20	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	19	14	6	44	2007	21	14	2	Improved
Adults without a dental visit in past year	2012	14	15	10	17	2006	16	14	2	Improved
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	63	78	89	51	2007	72	82	-9	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	39	43	52	37	2006	40	44	-1	No Change
Children with a medical home	2011/12	52	57	69	42	2007	52	61	0	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	59	69	81	48	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	63	63	86	25	2007	63	63	0	No Change
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	60	69	80	51	2009	53	43	7	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	19	19	12	23	2007	26	28	7	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	21	21	14	27	2007	16	19	-5	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	76	76	80	21	2007	75	75	1	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.9	12.8	11.9	28	07/2005 - 06/2008	12.4	12.6	-0.5	Worsened
Hospitalized patients given information about what to do during their recovery at home	2011	85	84	89	13	2007	82	80	3	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	67	66	71	20	2007	63	63	4	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	49	59	63	51	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	82	89	95	50	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	5	6	3	5	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	13	21.5	12	2	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	54	114	26	3	2004	*	137	--	*
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	21	27	13	9	2008	26	34	5	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	52	68	41	8	2008	68	80	16	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	29	45	26	5	2008	34	51.5	5	No Change
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	*	20	12	*	2006	*	20	--	*
Long-stay nursing home residents hospitalized within a six-month period	2010	*	19	7	*	2006	*	19	--	*
Home health patients also enrolled in Medicare with a hospital admission	2012	17	17	14	25	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	181	183.5	129	25	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,742	$5,501	$4,180	38	2008	$4,096	$4,505	-$1,646	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$5,406	$8,526	$5,406	1	2008	$5,631	$7,942	$225	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	74	82	57	16	2004-05	77	90.5	3	No Change
Years of potential life lost before age 75	2010	7,144	6,567	4,900	34	2005	7,311	7,252	167	No Change
Breast cancer deaths per 100,000 female population	2010	21.7	22.2	14.8	21	2005	17.9	23.9	-3.8	Worsened
Colorectal cancer deaths per 100,000 population	2010	17.4	16.2	12.0	39	2005	15.2	18.1	-2.2	Worsened
Suicide deaths per 100,000 population	2010	22.8	13.5	6.9	51	2005	19.9	11.8	-2.9	Worsened
Infant mortality, deaths per 1,000 live births	2009	6.9	6.4	4.6	29	2004	6.6	6.8	-0.3	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	26	27	19	19	2007	27	24	1	No Change
Adults who smoke	2012	20	19	10	27	2007	22	19	2	Improved
Adults ages 18–64 who are obese (BMI >= 30)	2012	26	28	21	11	2007	28	27	2	Improved
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	30	30.5	22	21	2007	34	31	4	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	9	10	5	13	2006	10	10	1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	29	18	-11	22	2007-08	31	17	-14	2	Improved
Adults who went without care because of cost in past year	2012	28	17	-11	26	2007	21	13	-8	-7	Worsened
At risk adults without a doctor visit	2012	23	14	-9	27	2007	18	14	-4	-5	Worsened
Adults without a usual source of care	2012	51	22	-29	49	2007	34	20	-14	-17	Worsened
Older adults without recommended preventive care	2012	64	58	-6	16	2006	66	56	-10	2	Improved
Children without a medical home	2011/12	56	46	-10	10	2007	64	42	-22	8	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	44	32	-12	38	--	--	--	--	--	--
Mortality amenable to health care	2009-10	*	86	*	*	2004-05	112	96	-16	*	*
Infant mortality, deaths per 1,000 live births	2008-09	10.8	6.5	-4.3	12	2003-04	8.8	6.8	-2	-2.0	Worsened
Adults with poor health-related quality of life	2012	35	27	-8	26	2007	32	24	-8	-3	No Change
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	31	18	-13	33	2007-08	32	17	-15	1	Improved
Adults who went without care because of cost in past year	2012	25	17	-8	16	2007	30	13	-17	5	Improved
At risk adults without a doctor visit	2012	29	14	-15	50	2007	31	14	-17	2	Improved
Adults without a usual source of care	2012	42	22	-20	50	2007	35	20	-15	-7	Worsened
Older adults without recommended preventive care	2012	69	58	-11	24	2006	69	56	-13	0	No Change
Children without a medical home	2011/12	57	46	-11	35	2007	57	42	-15	0	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	48	32	-16	48	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	23	25	2	13	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	36	27	-9	6	2007	40	24	-16	4	Improved

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Arizona

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**36**	**40**
Access & Affordability	42	39
Prevention & Treatment	45	48
Avoidable Hospital Use & Cost	17	15
Equity[b]	44	39
Healthy Lives	23	27

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	13	38%
State rate worsened[c]	7	21%
No change in state rate[d]	14	41%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	1	2%
Top quartile	9	21%
2nd quartile	10	24%
3rd quartile	13	31%
Bottom quartile	10	24%
Bottom 5 states	5	12%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	44	39	16	2	6	8
Low-Income	45	43	7	0	3	4
Race/Ethnicity	39	26	9	2	3	4

ESTIMATED IMPACT If Arizona improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	719,149	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	690,486	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	372,214	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	374,699	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	12,103	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	1,067	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	1,497	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	20,351	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	203,922	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	23	20	5	38	2007-08	23	17	0	No Change
Children ages 0–18 uninsured	2011-12	14	8	3	47	2007-08	15	9	1	No Change
Adults who went without care because of cost in past year	2012	20	15	9	44	2007	13	12	-7	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	16	16	10	26	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	17	14	6	37	2007	15	14	-2	Worsened
Adults without a dental visit in past year	2012	17	15	10	38	2006	16	14	-1	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	75	78	89	39	2007	76	82	-1	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	35	43	52	49	2006	42	44	-7	Worsened
Children with a medical home	2011/12	46	57	69	49	2007	50	61	-4	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	65	69	81	33	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	60	63	86	29	2007	62	63	-2	No Change
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	68	69	80	28	2009	37	43	31	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	19	19	12	23	2007	28	28	9	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	18	21	14	10	2007	18	19	0	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	74	76	80	40	2007	72	75	2	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.5	12.8	11.9	11	07/2005 - 06/2008	12.5	12.6	0.0	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	84	84	89	20	2007	78	80	6	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	65	66	71	33	2007	61	63	4	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	56	59	63	41	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	84	89	95	46	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	7	6	3	30	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	22	21.5	12	27	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	121	114	26	27	2004	131	137	10	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	20	27	13	7	2008	24	34	4	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	51	68	41	7	2008	62	80	11	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	38	45	26	14	2008	47	51.5	9	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	22	20	12	33	2006	22	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	12	19	7	4	2006	10	19	-2	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	16	17	14	11	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	175	183.5	129	19	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,082	$5,501	$4,180	12	2008	$4,122	$4,505	-$960	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,004	$8,526	$5,406	18	2008	$7,498	$7,942	-$506	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	74	82	57	16	2004-05	88	90.5	14	Improved
Years of potential life lost before age 75	2010	6,539	6,567	4,900	25	2005	7,648	7,252	1,109	Improved
Breast cancer deaths per 100,000 female population	2010	19.6	22.2	14.8	7	2005	21.2	23.9	1.6	Improved
Colorectal cancer deaths per 100,000 population	2010	14.2	16.2	12.0	8	2005	15.6	18.1	1.4	Improved
Suicide deaths per 100,000 population	2010	17.0	13.5	6.9	42	2005	16.4	11.8	-0.6	No Change
Infant mortality, deaths per 1,000 live births	2009	6.0	6.4	4.6	19	2004	6.7	6.8	0.7	Improved
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	29	27	19	34	2007	25	24	-4	Worsened
Adults who smoke	2012	17	19	10	10	2007	20	19	3	Improved
Adults ages 18–64 who are obese (BMI >= 30)	2012	27	28	21	17	2007	28	27	1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	37	30.5	22	47	2007	31	31	-6	Worsened
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	10	10	5	23	2006	9	10	-1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	31	18	-13	28	2007-08	31	17	-14	0	No Change
Adults who went without care because of cost in past year	2012	31	17	-14	38	2007	26	13	-13	-5	Worsened
At risk adults without a doctor visit	2012	21	14	-7	22	2007	24	14	-10	3	Improved
Adults without a usual source of care	2012	37	22	-15	21	2007	39	20	-19	2	Improved
Older adults without recommended preventive care	2012	71	58	-13	41	2006	66	56	-10	-5	Worsened
Children without a medical home	2011/12	69	46	-23	45	2007	65	42	-23	-4	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	38	32	-6	17	--	--	--	--	--	--
Mortality amenable to health care	2009-10	126	86	-40	7	2004-05	146	96	-50	20	Improved
Infant mortality, deaths per 1,000 live births	2008-09	15.1	6.5	-8.6	45	2003-04	11.5	6.8	-4.7	-3.6	Worsened
Adults with poor health-related quality of life	2012	35	27	-8	26	2007	31	24	-7	-4	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	32	18	-14	38	2007-08	37	17	-20	5	Improved
Adults who went without care because of cost in past year	2012	37	17	-20	51	2007	26	13	-13	-11	Worsened
At risk adults without a doctor visit	2012	20	14	-6	31	2007	22	14	-8	2	Improved
Adults without a usual source of care	2012	31	22	-9	42	2007	35	20	-15	4	Improved
Older adults without recommended preventive care	2012	74	58	-16	46	2006	70	56	-14	-4	Worsened
Children without a medical home	2011/12	67	46	-21	49	2007	62	42	-20	-5	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	41	32	-9	31	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	27	25	-2	21	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	43	27	-16	29	2007	38	24	-14	-5	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Arkansas

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**50**	**49**
Access & Affordability	49	45
Prevention & Treatment	50	48
Avoidable Hospital Use & Cost	37	42
Equity[b]	51	49
Healthy Lives	48	44

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	12	35%
State rate worsened[c]	13	38%
No change in state rate[d]	9	26%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	0	0%
Top quartile	2	5%
2nd quartile	2	5%
3rd quartile	14	33%
Bottom quartile	24	57%
Bottom 5 states	18	43%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	51	49	16	4	6	6
Low-Income	50	45	7	2	1	4
Race/Ethnicity	50	50	9	2	5	2

ESTIMATED IMPACT If Arkansas improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	363,210	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	243,875	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	180,037	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	96,884	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	24,305	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	1,611	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	2,788	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	19,013	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	193,080	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	26	20	5	44	2007-08	24	17	-2	No Change
Children ages 0–18 uninsured	2011-12	9	8	3	30	2007-08	8	9	-1	No Change
Adults who went without care because of cost in past year	2012	21	15	9	47	2007	16	12	-5	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	20	16	10	47	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	17	14	6	37	2007	20	14	3	Improved
Adults without a dental visit in past year	2012	19	15	10	48	2006	16	14	-3	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	78	78	89	26	2007	84	82	-6	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	34	43	52	51	2006	37	44	-3	Worsened
Children with a medical home	2011/12	55	57	69	35	2007	61	61	-6	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	62	69	81	40	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	67	63	86	10	2007	56	63	11	Improved
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	66	69	80	37	2009	34	43	32	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	25	19	12	44	2007	40	28	15	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	26	21	14	44	2007	23	19	-3	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	72	76	80	51	2007	75	75	-3	Worsened
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.5	12.8	11.9	50	07/2005 - 06/2008	13.6	12.6	0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	81	84	89	41	2007	77	80	4	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	66	66	71	26	2007	64	63	2	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	58	59	63	28	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	90	89	95	18	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	7	6	3	30	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	26	21.5	12	45	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	70	114	26	8	2004	117	137	47	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	35	27	13	41	2008	41	34	6	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	82	68	41	45	2008	103	80	21	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	51	45	26	33	2008	59	51.5	8	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	24	20	12	46	2006	24	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	27	19	7	46	2006	28	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	18	17	14	42	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	185	183.5	129	28	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,235	$5,501	$4,180	17	2008	$4,605	$4,505	-$630	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,635	$8,526	$5,406	30	2008	$8,056	$7,942	-$579	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	116	82	57	48	2004-05	121	90.5	5	No Change
Years of potential life lost before age 75	2010	8,768	6,567	4,900	45	2005	9,272	7,252	504	No Change
Breast cancer deaths per 100,000 female population	2010	22.9	22.2	14.8	33	2005	24.4	23.9	1.5	Improved
Colorectal cancer deaths per 100,000 population	2010	19.4	16.2	12.0	49	2005	18.8	18.1	-0.6	No Change
Suicide deaths per 100,000 population	2010	15.5	13.5	6.9	37	2005	14.3	11.8	-1.2	No Change
Infant mortality, deaths per 1,000 live births	2009	7.6	6.4	4.6	39	2004	8.4	6.8	0.8	Improved
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	33	27	19	47	2007	28	24	-5	Worsened
Adults who smoke	2012	25	19	10	48	2007	22	19	-3	Worsened
Adults ages 18–64 who are obese (BMI >= 30)	2012	37	28	21	51	2007	30	27	-7	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	34	30.5	22	37	2007	37	31	3	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	16	10	5	45	2006	13	10	-3	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	34	18	-16	33	2007-08	40	17	-23	6	Improved
Adults who went without care because of cost in past year	2012	32	17	-15	43	2007	29	13	-16	-3	No Change
At risk adults without a doctor visit	2012	26	14	-12	35	2007	29	14	-15	3	Improved
Adults without a usual source of care	2012	41	22	-19	28	2007	45	20	-25	4	Improved
Older adults without recommended preventive care	2012	77	58	-19	48	2006	76	56	-20	-1	No Change
Children without a medical home	2011/12	69	46	-23	45	2007	63	42	-21	-6	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	48	32	-16	44	--	--	--	--	--	--
Mortality amenable to health care	2009-10	202	86	-116	36	2004-05	219	96	-123	17	Improved
Infant mortality, deaths per 1,000 live births	2008-09	12.3	6.5	-5.8	23	2003-04	13.3	6.8	-6.5	1.0	Improved
Adults with poor health-related quality of life	2012	45	27	-18	49	2007	40	24	-16	-5	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	32	18	-14	38	2007-08	31	17	-14	-1	No Change
Adults who went without care because of cost in past year	2012	36	17	-19	49	2007	33	13	-20	-3	No Change
At risk adults without a doctor visit	2012	21	14	-7	34	2007	26	14	-12	5	Improved
Adults without a usual source of care	2012	28	22	-6	32	2007	24	20	-4	-4	Worsened
Older adults without recommended preventive care	2012	77	58	-19	51	2006	72	56	-16	-5	Worsened
Children without a medical home	2011/12	55	46	-9	31	2007	50	42	-8	-5	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	42	32	-10	36	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	42	25	-17	47	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	46	27	-19	38	2007	42	24	-18	-4	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

California

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**26**	**29**
Access & Affordability	37	34
Prevention & Treatment	41	42
Avoidable Hospital Use & Cost	14	12
Equity[b]	32	38
Healthy Lives	7	10

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	15	44%
State rate worsened[c]	7	21%
No change in state rate[d]	12	35%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	5	12%
Top quartile	14	33%
2nd quartile	10	24%
3rd quartile	10	24%
Bottom quartile	8	19%
Bottom 5 states	2	5%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	32	38	16	6	7	3
Low-Income	44	43	7	3	3	1
Race/Ethnicity	20	25	9	3	4	2

ESTIMATED IMPACT If California improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	4,673,574	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	4,529,062	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	1,234,634	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	2,238,640	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	84,097	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	6,466	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	9,969	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	78,677	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	479,015	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	25	20	5	42	2007-08	24	17	-1	No Change
Children ages 0–18 uninsured	2011-12	11	8	3	40	2007-08	11	9	0	No Change
Adults who went without care because of cost in past year	2012	17	15	9	33	2007	13	12	-4	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	15	16	10	20	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	16	14	6	34	2007	16	14	0	No Change
Adults without a dental visit in past year	2012	16	15	10	32	2006	16	14	0	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	73	78	89	44	2007	72	82	1	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	41	43	52	29	2006	38	44	3	Improved
Children with a medical home	2011/12	45	57	69	50	2007	50	61	-5	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	65	69	81	33	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	63	63	86	25	2007	54	63	9	Improved
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	67	69	80	31	2009	50	43	17	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	19	19	12	23	2007	26	28	7	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	22	21	14	30	2007	20	19	-2	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	74	76	80	40	2007	72	75	2	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.5	12.8	11.9	11	07/2005 - 06/2008	12.9	12.6	0.4	Improved
Hospitalized patients given information about what to do during their recovery at home	2011	81	84	89	41	2007	76	80	5	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	62	66	71	45	2007	57	63	5	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	58	59	63	28	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	91	89	95	9	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	7	6	3	30	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	19	21.5	12	10	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	93	114	26	16	2004	105	137	12	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	21	27	13	9	2008	26	34	5	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	55	68	41	9	2008	70	80	15	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	43	45	26	24	2008	49	51.5	6	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	20	20	12	22	2006	20	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	21	19	7	36	2006	19	19	-2	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	15	17	14	2	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	166	183.5	129	7	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$4,180	$5,501	$4,180	1	2008	$3,300	$4,505	-$880	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,315	$8,526	$5,406	23	2008	$7,719	$7,942	-$596	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	75	82	57	20	2004-05	86	90.5	11	Improved
Years of potential life lost before age 75	2010	5,191	6,567	4,900	6	2005	6,147	7,252	956	Improved
Breast cancer deaths per 100,000 female population	2010	20.9	22.2	14.8	13	2005	22.8	23.9	1.9	Improved
Colorectal cancer deaths per 100,000 population	2010	14.5	16.2	12.0	12	2005	16.1	18.1	1.6	Improved
Suicide deaths per 100,000 population	2010	10.3	13.5	6.9	8	2005	9.1	11.8	-1.2	No Change
Infant mortality, deaths per 1,000 live births	2009	4.9	6.4	4.6	3	2004	5.2	6.8	0.3	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	30	27	19	39	2007	26	24	-4	Worsened
Adults who smoke	2012	12	19	10	2	2007	14	19	2	Improved
Adults ages 18–64 who are obese (BMI >= 30)	2012	26	28	21	11	2007	24	27	-2	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	30	30.5	22	21	2007	31	31	1	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	7	10	5	3	2006	8	10	1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	29	18	-11	22	2007-08	29	17	-12	0	No Change
Adults who went without care because of cost in past year	2012	26	17	-9	16	2007	21	13	-8	-5	Worsened
At risk adults without a doctor visit	2012	21	14	-7	22	2007	20	14	-6	-1	Worsened
Adults without a usual source of care	2012	41	22	-19	28	2007	42	20	-22	1	Improved
Older adults without recommended preventive care	2012	68	58	-10	28	2006	75	56	-19	7	Improved
Children without a medical home	2011/12	66	46	-20	39	2007	62	42	-20	-4	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	36	32	-4	14	--	--	--	--	--	--
Mortality amenable to health care	2009-10	150	86	-64	15	2004-05	175	96	-79	25	Improved
Infant mortality, deaths per 1,000 live births	2008-09	10.2	6.5	-3.7	9	2003-04	11.1	6.8	-4.3	0.9	Improved
Adults with poor health-related quality of life	2012	36	27	-9	33	2007	35	24	-11	-1	No Change
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	33	18	-15	43	2007-08	33	17	-16	0	No Change
Adults who went without care because of cost in past year	2012	28	17	-11	25	2007	23	13	-10	-5	Worsened
At risk adults without a doctor visit	2012	20	14	-6	31	2007	21	14	-7	1	Improved
Adults without a usual source of care	2012	39	22	-17	48	2007	41	20	-21	2	Improved
Older adults without recommended preventive care	2012	73	58	-15	43	2006	77	56	-21	4	Improved
Children without a medical home	2011/12	70	46	-24	51	2007	66	42	-24	-4	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	45	32	-13	41	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	27	25	-2	21	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	41	27	-14	18	2007	38	24	-14	-3	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Colorado

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**12**	**15**
Access & Affordability	33	32
Prevention & Treatment	8	8
Avoidable Hospital Use & Cost	10	12
Equity[b]	24	41
Healthy Lives	6	7

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	16	47%
State rate worsened[c]	6	18%
No change in state rate[d]	12	35%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	9	21%
Top quartile	19	45%
2nd quartile	13	31%
3rd quartile	8	19%
Bottom quartile	2	5%
Bottom 5 states	0	0%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	24	41	16	4	8	4
Low-Income	37	39	7	1	3	3
Race/Ethnicity	11	33	9	3	5	1

ESTIMATED IMPACT If Colorado improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	463,721	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	452,981	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	121,860	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	175,424	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	8,739	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	238	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	394	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	14,217	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	63,239	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	20	20	5	27	2007-08	19	17	-1	No Change
Children ages 0–18 uninsured	2011-12	9	8	3	30	2007-08	13	9	4	Improved
Adults who went without care because of cost in past year	2012	16	15	9	31	2007	13	12	-3	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	17	16	10	31	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	18	14	6	40	2007	20	14	2	Improved
Adults without a dental visit in past year	2012	16	15	10	32	2006	13	14	-3	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	77	78	89	31	2007	79	82	-2	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	44	43	52	16	2006	47	44	-3	Worsened
Children with a medical home	2011/12	55	57	69	35	2007	59	61	-4	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	70	69	81	18	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	65	63	86	19	2007	65	63	0	No Change
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	72	69	80	17	2009	47	43	25	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	19	19	12	23	2007	26	28	7	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	19	21	14	15	2007	18	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	76	76	80	21	2007	75	75	1	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.3	12.8	11.9	6	07/2005 - 06/2008	12.1	12.6	-0.2	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	86	84	89	7	2007	81	80	5	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	68	66	71	10	2007	63	63	5	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	60	59	63	14	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	89	89	95	23	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	5	6	3	5	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	19	21.5	12	10	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	129	114	26	29	2004	167	137	38	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	16	27	13	2	2008	23	34	7	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	50	68	41	6	2008	68	80	18	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	31	45	26	7	2008	41	51.5	10	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	15	20	12	5	2006	17	20	2	Improved
Long-stay nursing home residents hospitalized within a six-month period	2010	12	19	7	4	2006	12	19	0	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	16	17	14	11	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	176	183.5	129	21	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,153	$5,501	$4,180	14	2008	$4,203	$4,505	-$950	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$7,467	$8,526	$5,406	12	2008	$7,202	$7,942	-$265	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	62	82	57	4	2004-05	72	90.5	10	Improved
Years of potential life lost before age 75	2010	5,615	6,567	4,900	11	2005	6,204	7,252	589	No Change
Breast cancer deaths per 100,000 female population	2010	20.0	22.2	14.8	9	2005	22.3	23.9	2.3	Improved
Colorectal cancer deaths per 100,000 population	2010	13.7	16.2	12.0	5	2005	16.7	18.1	3.0	Improved
Suicide deaths per 100,000 population	2010	16.8	13.5	6.9	41	2005	17.2	11.8	0.4	No Change
Infant mortality, deaths per 1,000 live births	2009	6.2	6.4	4.6	23	2004	6.2	6.8	0.0	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	26	27	19	19	2007	23	24	-3	Worsened
Adults who smoke	2012	17	19	10	10	2007	19	19	2	Improved
Adults ages 18–64 who are obese (BMI >= 30)	2012	21	28	21	1	2007	20	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	23	30.5	22	2	2007	27	31	4	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	7	10	5	3	2006	6	10	-1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	28	18	-10	20	2007-08	35	17	-18	7	Improved
Adults who went without care because of cost in past year	2012	28	17	-11	26	2007	22	13	-9	-6	Worsened
At risk adults without a doctor visit	2012	26	14	-12	35	2007	28	14	-14	2	Improved
Adults without a usual source of care	2012	37	22	-15	21	2007	37	20	-17	0	No Change
Older adults without recommended preventive care	2012	63	58	-5	12	2006	63	56	-7	0	No Change
Children without a medical home	2011/12	57	46	-11	13	2007	58	42	-16	1	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	39	32	-7	21	--	--	--	--	--	--
Mortality amenable to health care	2009-10	111	86	-25	3	2004-05	128	96	-32	17	Improved
Infant mortality, deaths per 1,000 live births	2008-09	12.3	6.5	-5.8	23	2003-04	16.8	6.8	-10	4.5	Improved
Adults with poor health-related quality of life	2012	35	27	-8	26	2007	35	24	-11	0	No Change
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	32	18	-14	38	2007-08	39	17	-22	7	Improved
Adults who went without care because of cost in past year	2012	31	17	-14	34	2007	27	13	-14	-4	No Change
At risk adults without a doctor visit	2012	23	14	-9	41	2007	31	14	-17	8	Improved
Adults without a usual source of care	2012	29	22	-7	34	2007	33	20	-13	4	Improved
Older adults without recommended preventive care	2012	72	58	-14	35	2006	67	56	-11	-5	Worsened
Children without a medical home	2011/12	59	46	-13	41	2007	53	42	-11	-6	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	38	32	-6	26	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	27	25	-2	21	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	41	27	-14	18	2007	37	24	-13	-4	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Connecticut

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**6**	**5**
Access & Affordability	2	3
Prevention & Treatment	8	8
Avoidable Hospital Use & Cost	26	24
Equity[b]	6	8
Healthy Lives	3	2

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	11	32%
State rate worsened[c]	10	29%
No change in state rate[d]	13	38%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	11	26%
Top quartile	24	57%
2nd quartile	11	26%
3rd quartile	5	12%
Bottom quartile	2	5%
Bottom 5 states	0	0%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	6	8	16	3	7	6
Low-Income	8	9	7	2	3	2
Race/Ethnicity	6	8	9	1	4	4

ESTIMATED IMPACT If Connecticut improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	128,540	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	81,259	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	62,386	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	88,964	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	3,404	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	330	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	2,977	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	24,030	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	66,170	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	11	20	5	2	2007-08	12	17	1	No Change
Children ages 0–18 uninsured	2011-12	5	8	3	4	2007-08	6	9	1	No Change
Adults who went without care because of cost in past year	2012	12	15	9	10	2007	9	12	-3	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	12	16	10	5	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	10	14	6	7	2007	11	14	1	No Change
Adults without a dental visit in past year	2012	11	15	10	2	2006	10	14	-1	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	86	78	89	8	2007	87	82	-1	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	47	43	52	5	2006	51	44	-4	Worsened
Children with a medical home	2011/12	58	57	69	21	2007	62	61	-4	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	79	69	81	2	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	65	63	86	19	2007	79	63	-14	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	77	69	80	4	2009	34	43	43	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	14	19	12	8	2007	20	28	6	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	17	21	14	7	2007	17	19	0	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	77	76	80	10	2007	74	75	3	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.4	12.8	11.9	8	07/2005 - 06/2008	12.1	12.6	-0.3	Worsened
Hospitalized patients given information about what to do during their recovery at home	2011	82	84	89	34	2007	80	80	2	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	63	66	71	44	2007	61	63	2	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	57	59	63	37	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	89	89	95	23	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	5	6	3	5	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	24	21.5	12	34	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	110	114	26	19	2004	149	137	39	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	26	27	13	22	2008	31	34	5	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	75	68	41	39	2008	84	80	9	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	52	45	26	36	2008	58	51.5	6	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	19	20	12	18	2006	19	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	19	19	7	23	2006	18	19	-1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	17	17	14	25	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	195	183.5	129	40	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$4,817	$5,501	$4,180	6	2008	$3,848	$4,505	-$969	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,950	$8,526	$5,406	35	2008	$8,231	$7,942	-$719	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	67	82	57	9	2004-05	77	90.5	10	Improved
Years of potential life lost before age 75	2010	5,130	6,567	4,900	5	2005	5,618	7,252	488	No Change
Breast cancer deaths per 100,000 female population	2010	21.1	22.2	14.8	16	2005	23.6	23.9	2.5	Improved
Colorectal cancer deaths per 100,000 population	2010	12.6	16.2	12.0	2	2005	15.4	18.1	2.8	Improved
Suicide deaths per 100,000 population	2010	9.4	13.5	6.9	7	2005	8.1	11.8	-1.3	No Change
Infant mortality, deaths per 1,000 live births	2009	5.6	6.4	4.6	14	2004	5.4	6.8	-0.2	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	23	27	19	6	2007	20	24	-3	Worsened
Adults who smoke	2012	16	19	10	4	2007	15	19	-1	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	26	28	21	11	2007	23	27	-3	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	30	30.5	22	21	2007	26	31	-4	Worsened
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	8	10	5	9	2006	7	10	-1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	17	18	1	4	2007-08	21	17	-4	4	Improved
Adults who went without care because of cost in past year	2012	24	17	-7	9	2007	22	13	-9	-2	No Change
At risk adults without a doctor visit	2012	20	14	-6	18	2007	16	14	-2	-4	Worsened
Adults without a usual source of care	2012	27	22	-5	9	2007	40	20	-20	13	Improved
Older adults without recommended preventive care	2012	63	58	-5	12	2006	68	56	-12	5	Improved
Children without a medical home	2011/12	67	46	-21	41	2007	56	42	-14	-11	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	28	32	4	3	--	--	--	--	--	--
Mortality amenable to health care	2009-10	123	86	-37	6	2004-05	137	96	-41	14	Improved
Infant mortality, deaths per 1,000 live births	2008-09	12.4	6.5	-5.9	25	2003-04	11.4	6.8	-4.6	-1.0	Worsened
Adults with poor health-related quality of life	2012	35	27	-8	26	2007	30	24	-6	-5	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	19	18	-1	5	2007-08	22	17	-5	3	Improved
Adults who went without care because of cost in past year	2012	24	17	-7	10	2007	23	13	-10	-1	No Change
At risk adults without a doctor visit	2012	13	14	1	10	2007	15	14	-1	2	Improved
Adults without a usual source of care	2012	19	22	3	8	2007	28	20	-8	9	Improved
Older adults without recommended preventive care	2012	67	58	-9	18	2006	62	56	-6	-5	Worsened
Children without a medical home	2011/12	58	46	-12	38	2007	57	42	-15	-1	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	29	32	3	3	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	20	25	5	4	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	43	27	-16	29	2007	38	24	-14	-5	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Delaware

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**10**	**13**
Access & Affordability	7	6
Prevention & Treatment	8	8
Avoidable Hospital Use & Cost	22	22
Equity[b]	5	16
Healthy Lives	29	35

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	33	100%
State rate improved[c]	10	30%
State rate worsened[c]	7	21%
No change in state rate[d]	16	48%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	41	100%
Top 5 states	7	17%
Top quartile	15	37%
2nd quartile	14	34%
3rd quartile	9	22%
Bottom quartile	3	7%
Bottom 5 states	2	5%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	5	16	16	6	8	2
Low-Income	5	10	7	3	3	1
Race/Ethnicity	6	22	9	3	5	1

ESTIMATED IMPACT If Delaware improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	49,333	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	13,945	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	12,659	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	26,705	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	3,373	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	280	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	513	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	5,129	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	28,205	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	14	20	5	7	2007-08	14	17	0	No Change
Children ages 0–18 uninsured	2011-12	8	8	3	20	2007-08	8	9	0	No Change
Adults who went without care because of cost in past year	2012	13	15	9	12	2007	11	12	-2	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	13	16	10	7	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	6	14	6	1	2007	7	14	1	No Change
Adults without a dental visit in past year	2012	12	15	10	7	2006	10	14	-2	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	87	78	89	5	2007	90	82	-3	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	48	43	52	2	2006	52	44	-4	Worsened
Children with a medical home	2011/12	56	57	69	30	2007	60	61	-4	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	72	69	81	15	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	67	63	86	10	2007	77	63	-10	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	73	69	80	10	2009	39	43	34	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	18	19	12	21	2007	26	28	8	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	16	21	14	2	2007	19	19	3	Improved
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	79	76	80	2	2007	78	75	1	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.2	12.8	11.9	2	07/2005 - 06/2008	12.4	12.6	0.2	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	82	84	89	34	2007	80	80	2	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	64	66	71	40	2007	62	63	2	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	57	59	63	37	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	84	89	95	46	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	5	6	3	5	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	20	21.5	12	14	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	*	114	26	*	2004	*	137	--	*
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	27	27	13	24	2008	26	34	-1	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	68	68	41	26	2008	69	80	1	No Change
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	42	45	26	23	2008	51	51.5	9	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	20	20	12	22	2006	22	20	2	Improved
Long-stay nursing home residents hospitalized within a six-month period	2010	19	19	7	23	2006	20	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	16	17	14	11	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	175	183.5	129	19	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,231	$5,501	$4,180	16	2008	$4,434	$4,505	-$797	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,513	$8,526	$5,406	26	2008	$8,136	$7,942	-$377	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	90	82	57	31	2004-05	97	90.5	7	No Change
Years of potential life lost before age 75	2010	7,154	6,567	4,900	35	2005	7,560	7,252	406	No Change
Breast cancer deaths per 100,000 female population	2010	23.2	22.2	14.8	37	2005	23.6	23.9	0.4	No Change
Colorectal cancer deaths per 100,000 population	2010	15.0	16.2	12.0	18	2005	18.1	18.1	3.1	Improved
Suicide deaths per 100,000 population	2010	11.3	13.5	6.9	11	2005	9.7	11.8	-1.6	No Change
Infant mortality, deaths per 1,000 live births	2009	8.0	6.4	4.6	46	2004	8.6	6.8	0.6	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	24	27	19	13	2007	25	24	1	No Change
Adults who smoke	2012	20	19	10	27	2007	19	19	-1	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	27	28	21	17	2007	29	27	2	Improved
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	32	30.5	22	31	2007	33	31	1	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	10	10	5	23	2006	10	10	0	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	29	18	-11	22	2007-08	33	17	-16	4	Improved
Adults who went without care because of cost in past year	2012	22	17	-5	5	2007	23	13	-10	1	Improved
At risk adults without a doctor visit	2012	9	14	5	2	2007	13	14	1	4	Improved
Adults without a usual source of care	2012	25	22	-3	7	2007	19	20	1	-6	Worsened
Older adults without recommended preventive care	2012	52	58	6	2	2006	51	56	5	-1	No Change
Children without a medical home	2011/12	58	46	-12	18	2007	62	42	-20	4	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	41	32	-9	28	--	--	--	--	--	--
Mortality amenable to health care	2009-10	146	86	-60	13	2004-05	148	96	-52	2	No Change
Infant mortality, deaths per 1,000 live births	2008-09	16.4	6.5	-9.9	48	2003-04	16.5	6.8	-9.7	0.1	No Change
Adults with poor health-related quality of life	2012	26	27	1	3	2007	37	24	-13	11	Improved
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	21	18	-3	7	2007-08	24	17	-7	3	Improved
Adults who went without care because of cost in past year	2012	24	17	-7	10	2007	21	13	-8	-3	No Change
At risk adults without a doctor visit	2012	8	14	6	3	2007	5	14	9	-3	No Change
Adults without a usual source of care	2012	19	22	3	8	2007	16	20	4	-3	No Change
Older adults without recommended preventive care	2012	62	58	-4	2	2006	57	56	-1	-5	Worsened
Children without a medical home	2011/12	53	46	-7	22	2007	55	42	-13	2	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	37	32	-5	20	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	25	25	0	17	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	38	27	-11	10	2007	39	24	-15	1	Improved

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

District of Columbia

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**21**	**24**
Access & Affordability	5	9
Prevention & Treatment	17	16
Avoidable Hospital Use & Cost	42	43
Equity[b]	7	19
Healthy Lives	35	37

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	31	100%
State rate improved[c]	10	32%
State rate worsened[c]	7	23%
No change in state rate[d]	14	45%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	39	100%
Top 5 states	12	31%
Top quartile	14	36%
2nd quartile	8	21%
3rd quartile	5	13%
Bottom quartile	12	31%
Bottom 5 states	9	23%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	7	19	16	3	11	2
Low-Income	4	18	7	0	7	0
Race/Ethnicity	11	22	9	3	4	2

ESTIMATED IMPACT If District of Columbia improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	25,696	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	51,006	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	13,678	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	20,817	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	914	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	362	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	568	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	5,941	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	8,669	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	11	20	5	2	2007-08	12	17	1	No Change
Children ages 0–18 uninsured	2011-12	4	8	3	2	2007-08	6	9	2	Improved
Adults who went without care because of cost in past year	2012	12	15	9	10	2007	10	12	-2	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	10	16	10	1	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	7	14	6	3	2007	9	14	2	Improved
Adults without a dental visit in past year	2012	16	15	10	32	2006	16	14	0	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	79	78	89	22	2007	80	82	-1	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	44	43	52	16	2006	43	44	1	No Change
Children with a medical home	2011/12	50	57	69	45	2007	50	61	0	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	77	69	81	5	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	59	63	86	32	2007	56	63	3	No Change
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	73	69	80	10	2009	48	43	25	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	17	19	12	18	2007	19	28	2	No Change
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	19	21	14	15	2007	14	19	-5	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	79	76	80	2	2007	75	75	4	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.2	12.8	11.9	2	07/2005 - 06/2008	11.8	12.6	-0.4	Worsened
Hospitalized patients given information about what to do during their recovery at home	2011	77	84	89	51	2007	76	80	1	No Change
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	57	66	71	51	2007	55	63	2	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	58	59	63	28	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	95	89	95	1	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	9	6	3	49	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	18	21.5	12	5	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	*	114	26	*	2004	*	137	--	*
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	37	27	13	43	2008	45	34	8	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	73	68	41	31	2008	80	80	7	No Change
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	65	45	26	51	2008	70	51.5	5	No Change
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	*	20	12	*	2006	*	20	--	*
Long-stay nursing home residents hospitalized within a six-month period	2010	*	19	7	*	2006	*	19	--	*
Home health patients also enrolled in Medicare with a hospital admission	2012	17	17	14	25	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	263	183.5	129	51	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,292	$5,501	$4,180	19	2008	$4,637	$4,505	-$655	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,894	$8,526	$5,406	34	2008	$8,279	$7,942	-$615	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	119	82	57	49	2004-05	158	90.5	39	Improved
Years of potential life lost before age 75	2010	8,813	6,567	4,900	46	2005	12,276	7,252	3,463	Improved
Breast cancer deaths per 100,000 female population	2010	29.9	22.2	14.8	51	2005	29.2	23.9	-0.7	No Change
Colorectal cancer deaths per 100,000 population	2010	19.4	16.2	12.0	49	2005	21.0	18.1	1.6	Improved
Suicide deaths per 100,000 population	2010	6.9	13.5	6.9	1	2005	5.4	11.8	-1.5	No Change
Infant mortality, deaths per 1,000 live births	2009	10.4	6.4	4.6	51	2004	12.2	6.8	1.8	Improved
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	24	27	19	13	2007	22	24	-2	Worsened
Adults who smoke	2012	19	19	10	22	2007	17	19	-2	Worsened
Adults ages 18–64 who are obese (BMI >= 30)	2012	23	28	21	2	2007	22	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	35	30.5	22	42	2007	35	31	0	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	7	10	5	3	2006	8	10	1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	15	18	3	3	2007-08	31	17	-14	16	Improved
Adults who went without care because of cost in past year	2012	27	17	-10	21	2007	21	13	-8	-6	Worsened
At risk adults without a doctor visit	2012	8	14	6	1	2007	15	14	-1	7	Improved
Adults without a usual source of care	2012	43	22	-21	38	2007	38	20	-18	-5	Worsened
Older adults without recommended preventive care	2012	63	58	-5	12	2006	63	56	-7	0	No Change
Children without a medical home	2011/12	59	46	-13	21	2007	65	42	-23	6	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	39	32	-7	21	--	--	--	--	--	--
Mortality amenable to health care	2009-10	170	86	-84	24	2004-05	220	96	-124	50	Improved
Infant mortality, deaths per 1,000 live births	2008-09	15.9	6.5	-9.4	47	2003-04	15.9	6.8	-9.1	0.0	No Change
Adults with poor health-related quality of life	2012	32	27	-5	13	2007	29	24	-5	-3	No Change
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	14	18	4	2	2007-08	17	17	0	3	Improved
Adults who went without care because of cost in past year	2012	14	17	3	1	2007	22	13	-9	8	Improved
At risk adults without a doctor visit	2012	3	14	11	1	2007	10	14	4	7	Improved
Adults without a usual source of care	2012	20	22	2	11	2007	29	20	-9	9	Improved
Older adults without recommended preventive care	2012	65	58	-7	8	2006	73	56	-17	8	Improved
Children without a medical home	2011/12	62	46	-16	47	2007	64	42	-22	2	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	28	32	4	2	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	21	25	4	7	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	39	27	-12	12	2007	42	24	-18	3	Improved

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Florida

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**41**	**40**
Access & Affordability	46	38
Prevention & Treatment	38	38
Avoidable Hospital Use & Cost	33	32
Equity[b]	40	36
Healthy Lives	23	26

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	13	38%
State rate worsened[c]	10	29%
No change in state rate[d]	11	32%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	2	5%
Top quartile	6	14%
2nd quartile	8	19%
3rd quartile	16	38%
Bottom quartile	12	29%
Bottom 5 states	9	21%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	40	36	16	3	6	7
Low-Income	45	39	7	2	2	3
Race/Ethnicity	32	26	9	1	4	4

ESTIMATED IMPACT If Florida improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	2,737,585	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	1,955,220	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	944,852	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	754,587	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	58,069	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	4,561	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	17,010	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	81,981	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	814,210	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	29	20	5	48	2007-08	25	17	-4	Worsened
Children ages 0–18 uninsured	2011-12	14	8	3	47	2007-08	18	9	4	Improved
Adults who went without care because of cost in past year	2012	21	15	9	47	2007	15	12	-6	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	17	16	10	31	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	15	14	6	28	2007	10	14	-5	Worsened
Adults without a dental visit in past year	2012	18	15	10	41	2006	15	14	-3	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	76	78	89	34	2007	78	82	-2	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	39	43	52	37	2006	41	44	-2	Worsened
Children with a medical home	2011/12	50	57	69	45	2007	57	61	-7	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	60	69	81	45	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	58	63	86	35	2007	52	63	6	Improved
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	69	69	80	25	2009	49	43	20	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	19	19	12	23	2007	30	28	11	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	22	21	14	30	2007	20	19	-2	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	76	76	80	21	2007	73	75	3	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.7	12.8	11.9	22	07/2005 - 06/2008	12.5	12.6	-0.2	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	81	84	89	41	2007	75	80	6	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	61	66	71	46	2007	55	63	6	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	63	59	63	1	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	92	89	95	4	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	6	6	3	19	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	23	21.5	12	30	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	147	114	26	33	2004	183	137	36	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	28	27	13	30	2008	31	34	3	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	68	68	41	26	2008	76	80	8	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	54	45	26	38	2008	57	51.5	3	No Change
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	21	20	12	27	2006	21	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	25	19	7	43	2006	24	19	-1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	16	17	14	11	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	172	183.5	129	16	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,527	$5,501	$4,180	28	2008	$4,820	$4,505	-$707	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$10,593	$8,526	$5,406	50	2008	$10,064	$7,942	-$529	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	83	82	57	28	2004-05	91	90.5	8	No Change
Years of potential life lost before age 75	2010	6,886	6,567	4,900	29	2005	7,714	7,252	828	Improved
Breast cancer deaths per 100,000 female population	2010	21.5	22.2	14.8	19	2005	22.4	23.9	0.9	No Change
Colorectal cancer deaths per 100,000 population	2010	14.5	16.2	12.0	12	2005	16.5	18.1	2.0	Improved
Suicide deaths per 100,000 population	2010	13.7	13.5	6.9	27	2005	12.5	11.8	-1.2	No Change
Infant mortality, deaths per 1,000 live births	2009	6.9	6.4	4.6	29	2004	7.0	6.8	0.1	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	30	27	19	39	2007	23	24	-7	Worsened
Adults who smoke	2012	17	19	10	10	2007	19	19	2	Improved
Adults ages 18–64 who are obese (BMI >= 30)	2012	26	28	21	11	2007	25	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	28	30.5	22	13	2007	33	31	5	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	12	10	5	36	2006	12	10	0	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**				**2009 Revised Scorecard[a]**				
Uninsured ages 0–64	2011-12	34	18	-16	33	2007-08	36	17	-19	2	Improved
Adults who went without care because of cost in past year	2012	29	17	-12	32	2007	23	13	-10	-6	Worsened
At risk adults without a doctor visit	2012	24	14	-10	31	2007	14	14	0	-10	Worsened
Adults without a usual source of care	2012	37	22	-15	21	2007	37	20	-17	0	No Change
Older adults without recommended preventive care	2012	66	58	-8	20	2006	72	56	-16	6	Improved
Children without a medical home	2011/12	68	46	-22	42	2007	56	42	-14	-12	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	44	32	-12	38	--	--	--	--	--	--
Mortality amenable to health care	2009-10	145	86	-59	10	2004-05	167	96	-71	22	Improved
Infant mortality, deaths per 1,000 live births	2008-09	12.6	6.5	-6.1	27	2003-04	13	6.8	-6.2	0.4	Improved
Adults with poor health-related quality of life	2012	35	27	-8	26	2007	30	24	-6	-5	Worsened
LOW-INCOME			**2014 Scorecard**				**2009 Revised Scorecard[a]**				
Uninsured ages 0–64	2011-12	39	18	-21	49	2007-08	41	17	-24	2	Improved
Adults who went without care because of cost in past year	2012	32	17	-15	38	2007	30	13	-17	-2	No Change
At risk adults without a doctor visit	2012	21	14	-7	34	2007	14	14	0	-7	Worsened
Adults without a usual source of care	2012	29	22	-7	34	2007	34	20	-14	5	Improved
Older adults without recommended preventive care	2012	70	58	-12	26	2006	70	56	-14	0	No Change
Children without a medical home	2011/12	62	46	-16	47	2007	52	42	-10	-10	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	48	32	-16	48	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	32	25	-7	32	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	46	27	-19	38	2007	37	24	-13	-9	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Georgia

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**45**	**35**
Access & Affordability	39	30
Prevention & Treatment	43	45
Avoidable Hospital Use & Cost	33	28
Equity[b]	46	27
Healthy Lives	38	31

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	13	38%
State rate worsened[c]	12	35%
No change in state rate[d]	9	26%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	1	2%
Top quartile	3	7%
2nd quartile	6	14%
3rd quartile	18	43%
Bottom quartile	15	36%
Bottom 5 states	3	7%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	46	27	16	6	5	5
Low-Income	37	36	7	5	2	0
Race/Ethnicity	48	22	9	1	3	5

ESTIMATED IMPACT If Georgia improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	1,268,385	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	1,000,062	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	169,356	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	431,708	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	47,268	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	4,304	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	4,075	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	49,716	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	492,239	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	26	20	5	44	2007-08	22	17	-4	Worsened
Children ages 0–18 uninsured	2011-12	12	8	3	43	2007-08	11	9	-1	No Change
Adults who went without care because of cost in past year	2012	20	15	9	44	2007	16	12	-4	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	17	16	10	31	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	14	14	6	24	2007	14	14	0	No Change
Adults without a dental visit in past year	2012	16	15	10	32	2006	13	14	-3	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	75	78	89	39	2007	80	82	-5	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	46	43	52	9	2006	45	44	1	No Change
Children with a medical home	2011/12	52	57	69	42	2007	58	61	-6	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	65	69	81	33	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	53	63	86	45	2007	51	63	2	No Change
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	75	69	80	5	2009	46	43	29	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	25	19	12	44	2007	39	28	14	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	24	21	14	41	2007	25	19	1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	76	76	80	21	2007	72	75	4	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.1	12.8	11.9	38	07/2005 - 06/2008	13.1	12.6	0.0	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	81	84	89	41	2007	78	80	3	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	66	66	71	26	2007	62	63	4	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	60	59	63	14	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	89	89	95	23	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	7	6	3	30	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	25	21.5	12	40	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	91	114	26	15	2004	145	137	54	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	31	27	13	35	2008	37	34	6	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	73	68	41	31	2008	85	80	12	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	45	45	26	26	2008	51	51.5	6	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	23	20	12	39	2006	21	20	-2	Worsened
Long-stay nursing home residents hospitalized within a six-month period	2010	20	19	7	28	2006	21	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	17	17	14	25	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	194	183.5	129	35	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,594	$5,501	$4,180	33	2008	$4,511	$4,505	-$1,083	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,837	$8,526	$5,406	33	2008	$7,915	$7,942	-$922	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	103	82	57	42	2004-05	114	90.5	11	Improved
Years of potential life lost before age 75	2010	7,312	6,567	4,900	39	2005	8,267	7,252	955	Improved
Breast cancer deaths per 100,000 female population	2010	23.8	22.2	14.8	43	2005	23.6	23.9	-0.2	No Change
Colorectal cancer deaths per 100,000 population	2010	16.6	16.2	12.0	29	2005	17.8	18.1	1.2	Improved
Suicide deaths per 100,000 population	2010	11.7	13.5	6.9	12	2005	10.6	11.8	-1.1	No Change
Infant mortality, deaths per 1,000 live births	2009	7.3	6.4	4.6	38	2004	8.5	6.8	1.2	Improved
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	27	27	19	26	2007	23	24	-4	Worsened
Adults who smoke	2012	20	19	10	27	2007	16	19	-4	Worsened
Adults ages 18–64 who are obese (BMI >= 30)	2012	29	28	21	29	2007	27	27	-2	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	35	30.5	22	42	2007	37	31	2	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	13	10	5	38	2006	10	10	-3	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	43	18	-25	49	2007-08	45	17	-28	2	Improved
Adults who went without care because of cost in past year	2012	30	17	-13	34	2007	24	13	-11	-6	Worsened
At risk adults without a doctor visit	2012	30	14	-16	43	2007	14	14	0	-16	Worsened
Adults without a usual source of care	2012	48	22	-26	46	2007	31	20	-11	-17	Worsened
Older adults without recommended preventive care	2012	66	58	-8	20	2006	62	56	-6	-4	Worsened
Children without a medical home	2011/12	73	46	-27	48	2007	56	42	-14	-17	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	48	32	-16	44	--	--	--	--	--	--
Mortality amenable to health care	2009-10	163	86	-77	20	2004-05	190	96	-94	27	Improved
Infant mortality, deaths per 1,000 live births	2008-09	12	6.5	-5.5	19	2003-04	13.7	6.8	-6.9	1.7	Improved
Adults with poor health-related quality of life	2012	28	27	-1	4	2007	27	24	-3	-1	No Change
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	35	18	-17	45	2007-08	36	17	-19	1	Improved
Adults who went without care because of cost in past year	2012	34	17	-17	44	2007	33	13	-20	-1	No Change
At risk adults without a doctor visit	2012	15	14	-1	18	2007	15	14	-1	0	No Change
Adults without a usual source of care	2012	29	22	-7	34	2007	32	20	-12	3	Improved
Older adults without recommended preventive care	2012	66	58	-8	11	2006	65	56	-9	-1	No Change
Children without a medical home	2011/12	57	46	-11	35	2007	53	42	-11	-4	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	44	32	-12	39	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	40	25	-15	44	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	41	27	-14	18	2007	39	24	-15	-2	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Hawaii

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**5**	**2**
Access & Affordability	14	14
Prevention & Treatment	20	20
Avoidable Hospital Use & Cost	1	1
Equity[b]	1	1
Healthy Lives	4	3

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	32	100%
State rate improved[c]	9	28%
State rate worsened[c]	8	25%
No change in state rate[d]	15	47%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	40	100%
Top 5 states	17	43%
Top quartile	25	63%
2nd quartile	6	15%
3rd quartile	5	13%
Bottom quartile	4	10%
Bottom 5 states	3	8%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	1	1	15	7	5	3
Low-Income	3	2	7	5	2	0
Race/Ethnicity	1	1	8	2	3	3

ESTIMATED IMPACT If Hawaii improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	48,789	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	41,197	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	38,219	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	37,179	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	4,212	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	263	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	0	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	0	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	8,359	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	11	20	5	2	2007-08	10	17	-1	No Change
Children ages 0–18 uninsured	2011-12	4	8	3	2	2007-08	5	9	1	No Change
Adults who went without care because of cost in past year	2012	9	15	9	1	2007	6	12	-3	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	15	16	10	20	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	15	14	6	28	2007	15	14	0	No Change
Adults without a dental visit in past year	2012	15	15	10	25	2006	14	14	-1	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	85	78	89	9	2007	88	82	-3	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	44	43	52	16	2006	41	44	3	Improved
Children with a medical home	2011/12	57	57	69	24	2007	60	61	-3	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	73	69	81	10	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	58	63	86	35	2007	63	63	-5	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	80	69	80	1	2009	47	43	33	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	21	19	12	35	2007	22	28	1	No Change
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	18	21	14	10	2007	15	19	-3	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	77	76	80	10	2007	77	75	0	No Change
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.1	12.8	11.9	38	07/2005 - 06/2008	13.2	12.6	0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	81	84	89	41	2007	74	80	7	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	64	66	71	40	2007	57	63	7	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	53	59	63	50	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	81	89	95	51	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	3	6	3	1	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	12	21.5	12	1	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	56	114	26	4	2004	88	137	32	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	13	27	13	1	2008	20	34	7	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	41	68	41	1	2008	48	80	7	No Change
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	26	45	26	1	2008	31	51.5	5	No Change
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	*	20	12	*	2006	*	20	--	*
Long-stay nursing home residents hospitalized within a six-month period	2010	*	19	7	*	2006	*	19	--	*
Home health patients also enrolled in Medicare with a hospital admission	2012	15	17	14	2	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	129	183.5	129	1	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$4,454	$5,501	$4,180	3	2008	$3,361	$4,505	-$1,093	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$5,417	$8,526	$5,406	2	2008	$5,149	$7,942	-$268	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	78	82	57	23	2004-05	80	90.5	2	No Change
Years of potential life lost before age 75	2010	5,619	6,567	4,900	12	2005	5,877	7,252	258	No Change
Breast cancer deaths per 100,000 female population	2010	14.8	22.2	14.8	1	2005	19.5	23.9	4.7	Improved
Colorectal cancer deaths per 100,000 population	2010	13.1	16.2	12.0	3	2005	14.8	18.1	1.7	Improved
Suicide deaths per 100,000 population	2010	15.0	13.5	6.9	36	2005	8.1	11.8	-6.9	Worsened
Infant mortality, deaths per 1,000 live births	2009	5.9	6.4	4.6	17	2004	5.8	6.8	-0.1	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	23	27	19	6	2007	22	24	-1	No Change
Adults who smoke	2012	15	19	10	3	2007	17	19	2	Improved
Adults ages 18–64 who are obese (BMI >= 30)	2012	26	28	21	11	2007	23	27	-3	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	27	30.5	22	9	2007	28	31	1	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	6	10	5	2	2006	7	10	1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	10	18	8	2	2007-08	9	17	8	-1	No Change
Adults who went without care because of cost in past year	2012	19	17	-2	2	2007	10	13	3	-9	Worsened
At risk adults without a doctor visit	2012	17	14	-3	16	2007	20	14	-6	3	Improved
Adults without a usual source of care	2012	18	22	4	4	2007	15	20	5	-3	No Change
Older adults without recommended preventive care	2012	58	58	0	4	2006	60	56	-4	2	Improved
Children without a medical home	2011/12	51	46	-5	5	2007	42	42	0	-9	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	29	32	3	4	--	--	--	--	--	--
Mortality amenable to health care	2009-10	*	86	*	*	2004-05	68	96	28	*	*
Infant mortality, deaths per 1,000 live births	2008-09	7.3	6.5	-0.8	1	2003-04	15.5	6.8	-8.7	8.2	Improved
Adults with poor health-related quality of life	2012	34	27	-7	20	2007	25	24	-1	-9	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	15	18	3	3	2007-08	15	17	2	0	No Change
Adults who went without care because of cost in past year	2012	15	17	2	2	2007	12	13	1	-3	No Change
At risk adults without a doctor visit	2012	15	14	-1	18	2007	17	14	-3	2	Improved
Adults without a usual source of care	2012	17	22	5	6	2007	14	20	6	-3	No Change
Older adults without recommended preventive care	2012	66	58	-8	11	2006	70	56	-14	4	Improved
Children without a medical home	2011/12	53	46	-7	22	2007	51	42	-9	-2	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	36	32	-4	15	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	19	25	6	2	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	33	27	-6	1	2007	30	24	-6	-3	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Idaho

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**31**	**33**
Access & Affordability	42	45
Prevention & Treatment	38	42
Avoidable Hospital Use & Cost	3	4
Equity[b]	47	46
Healthy Lives	15	14

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	33	100%
State rate improved[c]	10	30%
State rate worsened[c]	9	27%
No change in state rate[d]	14	42%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	41	100%
Top 5 states	10	24%
Top quartile	16	39%
2nd quartile	8	20%
3rd quartile	6	15%
Bottom quartile	11	27%
Bottom 5 states	5	12%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	47	46	15	4	4	7
Low-Income	43	48	7	3	2	2
Race/Ethnicity	45	46	8	1	2	5

ESTIMATED IMPACT If Idaho improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	162,229	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	206,436	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	85,288	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	51,283	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	6,174	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	149	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	0	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	5,044	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	27,816	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	23	20	5	38	2007-08	20	17	-3	Worsened
Children ages 0–18 uninsured	2011-12	11	8	3	40	2007-08	10	9	-1	No Change
Adults who went without care because of cost in past year	2012	18	15	9	34	2007	17	12	-1	No Change
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	22	16	10	50	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	23	14	6	51	2007	21	14	-2	Worsened
Adults without a dental visit in past year	2012	13	15	10	12	2006	15	14	2	Improved
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	71	78	89	46	2007	73	82	-2	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	35	43	52	49	2006	37	44	-2	Worsened
Children with a medical home	2011/12	57	57	69	24	2007	56	61	1	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	59	69	81	48	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	56	63	86	40	2007	63	63	-7	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	63	69	80	46	2009	34	43	29	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	22	19	12	38	2007	32	28	10	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	24	21	14	41	2007	21	19	-3	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	74	76	80	40	2007	73	75	1	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.9	12.8	11.9	28	07/2005 - 06/2008	13.4	12.6	0.5	Improved
Hospitalized patients given information about what to do during their recovery at home	2011	87	84	89	3	2007	82	80	5	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	69	66	71	4	2007	62	63	7	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	60	59	63	14	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	90	89	95	18	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	4	6	3	2	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	23	21.5	12	30	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	*	114	26	*	2004	*	137	--	*
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	17	27	13	3	2008	23	34	6	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	45	68	41	3	2008	63	80	18	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	26	45	26	1	2008	30	51.5	4	No Change
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	14	20	12	3	2006	14	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	12	19	7	4	2006	13	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	15	17	14	2	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	169	183.5	129	12	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$4,830	$5,501	$4,180	7	2008	$4,466	$4,505	-$364	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$7,196	$8,526	$5,406	9	2008	$6,714	$7,942	-$482	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	67	82	57	9	2004-05	74	90.5	7	No Change
Years of potential life lost before age 75	2010	5,943	6,567	4,900	19	2005	6,212	7,252	269	No Change
Breast cancer deaths per 100,000 female population	2010	21.8	22.2	14.8	23	2005	19.4	23.9	-2.4	Worsened
Colorectal cancer deaths per 100,000 population	2010	13.6	16.2	12.0	4	2005	15.7	18.1	2.1	Improved
Suicide deaths per 100,000 population	2010	18.8	13.5	6.9	46	2005	16.5	11.8	-2.3	Worsened
Infant mortality, deaths per 1,000 live births	2009	5.5	6.4	4.6	13	2004	6.1	6.8	0.6	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	27	27	19	26	2007	25	24	-2	Worsened
Adults who smoke	2012	16	19	10	4	2007	19	19	3	Improved
Adults ages 18–64 who are obese (BMI >= 30)	2012	27	28	21	17	2007	26	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	28	30.5	22	13	2007	28	31	0	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	8	10	5	9	2006	9	10	1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	42	18	-24	47	2007-08	34	17	-17	-8	Worsened
Adults who went without care because of cost in past year	2012	34	17	-17	48	2007	26	13	-13	-8	Worsened
At risk adults without a doctor visit	2012	43	14	-29	50	2007	30	14	-16	-13	Worsened
Adults without a usual source of care	2012	47	22	-25	43	2007	44	20	-24	-3	Worsened
Older adults without recommended preventive care	2012	70	58	-12	39	2006	81	56	-25	11	Improved
Children without a medical home	2011/12	54	46	-8	8	2007	66	42	-24	12	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	42	32	-10	31	--	--	--	--	--	--
Mortality amenable to health care	2009-10	*	86	*	*	2004-05	*	96	*	*	*
Infant mortality, deaths per 1,000 live births	2008-09	8.2	6.5	-1.7	3	2003-04	5.5	6.8	1.3	-2.7	Worsened
Adults with poor health-related quality of life	2012	33	27	-6	15	2007	33	24	-9	0	No Change
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	32	18	-14	38	2007-08	28	17	-11	-4	Worsened
Adults who went without care because of cost in past year	2012	34	17	-17	44	2007	31	13	-18	-3	No Change
At risk adults without a doctor visit	2012	34	14	-20	51	2007	27	14	-13	-7	Worsened
Adults without a usual source of care	2012	31	22	-9	42	2007	35	20	-15	4	Improved
Older adults without recommended preventive care	2012	76	58	-18	49	2006	75	56	-19	-1	No Change
Children without a medical home	2011/12	50	46	-4	11	2007	53	42	-11	3	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	41	32	-9	31	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	35	25	-10	40	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	37	27	-10	7	2007	35	24	-11	-2	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Illinois

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**26**	**35**
Access & Affordability	24	28
Prevention & Treatment	23	33
Avoidable Hospital Use & Cost	39	43
Equity[b]	18	31
Healthy Lives	27	27

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	33	100%
State rate improved[c]	10	30%
State rate worsened[c]	6	18%
No change in state rate[d]	17	52%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	0	0%
Top quartile	6	14%
2nd quartile	13	31%
3rd quartile	17	40%
Bottom quartile	6	14%
Bottom 5 states	3	7%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	18	31	16	4	9	3
Low-Income	20	25	7	3	3	1
Race/Ethnicity	17	36	9	1	6	2

ESTIMATED IMPACT If Illinois improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	1,159,562	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	576,337	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	528,811	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	403,656	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	21,173	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	3,975	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	14,714	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	80,386	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	316,780	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	20	20	5	27	2007-08	17	17	-3	Worsened
Children ages 0–18 uninsured	2011-12	7	8	3	13	2007-08	7	9	0	No Change
Adults who went without care because of cost in past year	2012	14	15	9	18	2007	13	12	-1	No Change
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	16	16	10	26	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	15	14	6	28	2007	16	14	1	No Change
Adults without a dental visit in past year	2012	15	15	10	25	2006	16	14	1	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	83	78	89	12	2007	82	82	1	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	39	43	52	37	2006	38	44	1	No Change
Children with a medical home	2011/12	56	57	69	30	2007	56	61	0	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	74	69	81	8	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	55	63	86	41	2007	53	63	2	No Change
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	69	69	80	25	2009	54	43	15	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	15	19	12	12	2007	24	28	9	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	19	21	14	15	2007	17	19	-2	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	77	76	80	10	2007	*	75	--	*
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.5	12.8	11.9	11	07/2005 - 06/2008	12.3	12.6	-0.2	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	83	84	89	28	2007	79	80	4	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	65	66	71	33	2007	61	63	4	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	59	59	63	21	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	88	89	95	30	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	7	6	3	30	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	26	21.5	12	45	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	116	114	26	24	2004	129	137	13	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	31	27	13	35	2008	40	34	9	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	73	68	41	31	2008	95	80	22	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	58	45	26	45	2008	74	51.5	16	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	23	20	12	39	2006	23	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	25	19	7	43	2006	26	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	17	17	14	25	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	191	183.5	129	31	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,375	$5,501	$4,180	23	2008	$4,618	$4,505	-$757	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$9,253	$8,526	$5,406	41	2008	$8,583	$7,942	-$670	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	90	82	57	31	2004-05	101	90.5	11	Improved
Years of potential life lost before age 75	2010	6,229	6,567	4,900	22	2005	6,911	7,252	682	Improved
Breast cancer deaths per 100,000 female population	2010	22.7	22.2	14.8	32	2005	25.8	23.9	3.1	Improved
Colorectal cancer deaths per 100,000 population	2010	17.1	16.2	12.0	34	2005	18.8	18.1	1.7	Improved
Suicide deaths per 100,000 population	2010	9.0	13.5	6.9	6	2005	8.6	11.8	-0.4	No Change
Infant mortality, deaths per 1,000 live births	2009	6.9	6.4	4.6	29	2004	7.5	6.8	0.6	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	26	27	19	19	2007	24	24	-2	Worsened
Adults who smoke	2012	18	19	10	17	2007	19	19	1	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	28	28	21	25	2007	25	27	-3	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	34	30.5	22	37	2007	35	31	1	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	9	10	5	13	2006	8	10	-1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	27	18	-9	15	2007-08	25	17	-8	-2	Worsened
Adults who went without care because of cost in past year	2012	23	17	-6	7	2007	26	13	-13	3	Improved
At risk adults without a doctor visit	2012	24	14	-10	31	2007	18	14	-4	-6	Worsened
Adults without a usual source of care	2012	27	22	-5	9	2007	37	20	-17	10	Improved
Older adults without recommended preventive care	2012	67	58	-9	24	2006	68	56	-12	1	Improved
Children without a medical home	2011/12	73	46	-27	48	2007	69	42	-27	-4	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	32	32	0	6	--	--	--	--	--	--
Mortality amenable to health care	2009-10	180	86	-94	30	2004-05	209	96	-113	29	Improved
Infant mortality, deaths per 1,000 live births	2008-09	13.9	6.5	-7.4	36	2003-04	15.3	6.8	-8.5	1.4	Improved
Adults with poor health-related quality of life	2012	33	27	-6	15	2007	35	24	-11	2	Improved
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	28	18	-10	23	2007-08	30	17	-13	2	Improved
Adults who went without care because of cost in past year	2012	25	17	-8	16	2007	28	13	-15	3	Improved
At risk adults without a doctor visit	2012	20	14	-6	31	2007	17	14	-3	-3	Worsened
Adults without a usual source of care	2012	21	22	1	14	2007	28	20	-8	7	Improved
Older adults without recommended preventive care	2012	71	58	-13	33	2006	71	56	-15	0	No Change
Children without a medical home	2011/12	61	46	-15	44	2007	59	42	-17	-2	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	34	32	-2	11	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	24	25	1	15	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	40	27	-13	16	2007	37	24	-13	-3	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Indiana

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**43**	**31**
Access & Affordability	26	18
Prevention & Treatment	35	31
Avoidable Hospital Use & Cost	43	37
Equity[b]	44	21
Healthy Lives	40	37

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	7	21%
State rate worsened[c]	13	38%
No change in state rate[d]	14	41%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	0	0%
Top quartile	0	0%
2nd quartile	11	26%
3rd quartile	21	50%
Bottom quartile	10	24%
Bottom 5 states	3	7%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	44	21	16	5	2	9
Low-Income	34	20	7	3	0	4
Race/Ethnicity	49	26	9	2	2	5

ESTIMATED IMPACT If Indiana improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	487,333	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	334,268	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	321,035	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	173,513	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	27,400	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	2,148	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	5,403	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	47,149	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	309,310	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	18	20	5	19	2007-08	16	17	-2	No Change
Children ages 0–18 uninsured	2011-12	8	8	3	20	2007-08	5	9	-3	Worsened
Adults who went without care because of cost in past year	2012	16	15	9	31	2007	12	12	-4	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	16	16	10	26	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	17	14	6	37	2007	15	14	-2	Worsened
Adults without a dental visit in past year	2012	15	15	10	25	2006	13	14	-2	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	82	78	89	16	2007	84	82	-2	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	37	43	52	44	2006	39	44	-2	Worsened
Children with a medical home	2011/12	58	57	69	21	2007	62	61	-4	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	69	69	81	26	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	58	63	86	35	2007	64	63	-6	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	61	69	80	48	2009	43	43	18	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	20	19	12	31	2007	32	28	12	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	22	21	14	30	2007	21	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	76	76	80	21	2007	75	75	1	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.9	12.8	11.9	28	07/2005 - 06/2008	12.8	12.6	-0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	84	84	89	20	2007	81	80	3	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	67	66	71	20	2007	64	63	3	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	58	59	63	28	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	88	89	95	30	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	7	6	3	30	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	22	21.5	12	27	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	113	114	26	22	2004	122	137	9	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	35	27	13	41	2008	42	34	7	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	77	68	41	41	2008	91	80	14	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	51	45	26	33	2008	56	51.5	5	No Change
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	20	20	12	22	2006	18	20	-2	Worsened
Long-stay nursing home residents hospitalized within a six-month period	2010	20	19	7	28	2006	21	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	18	17	14	42	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	200	183.5	129	42	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,871	$5,501	$4,180	45	2008	$4,795	$4,505	-$1,076	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$9,221	$8,526	$5,406	40	2008	$8,333	$7,942	-$888	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	93	82	57	34	2004-05	101	90.5	8	No Change
Years of potential life lost before age 75	2010	7,242	6,567	4,900	37	2005	7,621	7,252	379	No Change
Breast cancer deaths per 100,000 female population	2010	22.9	22.2	14.8	33	2005	22.8	23.9	-0.1	No Change
Colorectal cancer deaths per 100,000 population	2010	16.1	16.2	12.0	25	2005	19.5	18.1	3.4	Improved
Suicide deaths per 100,000 population	2010	13.1	13.5	6.9	23	2005	11.8	11.8	-1.3	No Change
Infant mortality, deaths per 1,000 live births	2009	7.8	6.4	4.6	43	2004	7.9	6.8	0.1	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	29	27	19	34	2007	23	24	-6	Worsened
Adults who smoke	2012	24	19	10	43	2007	23	19	-1	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	32	28	21	41	2007	27	27	-5	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	31	30.5	22	27	2007	30	31	-1	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	13	10	5	38	2006	11	10	-2	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	27	18	-9	15	2007-08	24	17	-7	-3	Worsened
Adults who went without care because of cost in past year	2012	27	17	-10	21	2007	20	13	-7	-7	Worsened
At risk adults without a doctor visit	2012	33	14	-19	46	2007	25	14	-11	-8	Worsened
Adults without a usual source of care	2012	39	22	-17	27	2007	38	20	-18	-1	No Change
Older adults without recommended preventive care	2012	78	58	-20	50	2006	62	56	-6	-16	Worsened
Children without a medical home	2011/12	65	46	-19	37	2007	54	42	-12	-11	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	45	32	-13	42	--	--	--	--	--	--
Mortality amenable to health care	2009-10	167	86	-81	22	2004-05	186	96	-90	19	Improved
Infant mortality, deaths per 1,000 live births	2008-09	14.1	6.5	-7.6	39	2003-04	15.2	6.8	-8.4	1.1	Improved
Adults with poor health-related quality of life	2012	40	27	-13	44	2007	38	24	-14	-2	No Change
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	25	18	-7	13	2007-08	25	17	-8	0	No Change
Adults who went without care because of cost in past year	2012	27	17	-10	22	2007	23	13	-10	-4	No Change
At risk adults without a doctor visit	2012	22	14	-8	38	2007	18	14	-4	-4	Worsened
Adults without a usual source of care	2012	24	22	-2	22	2007	24	20	-4	0	No Change
Older adults without recommended preventive care	2012	73	58	-15	43	2006	70	56	-14	-3	Worsened
Children without a medical home	2011/12	54	46	-8	27	2007	45	42	-3	-9	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	41	32	-9	31	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	34	25	-9	38	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	45	27	-18	36	2007	37	24	-13	-8	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Iowa

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**10**	**8**
Access & Affordability	9	6
Prevention & Treatment	6	4
Avoidable Hospital Use & Cost	18	20
Equity[b]	22	12
Healthy Lives	15	7

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	7	21%
State rate worsened[c]	7	21%
No change in state rate[d]	20	59%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	6	14%
Top quartile	14	33%
2nd quartile	22	52%
3rd quartile	5	12%
Bottom quartile	1	2%
Bottom 5 states	1	2%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	22	12	14	2	7	5
Low-Income	12	10	7	1	4	2
Race/Ethnicity	30	17	7	1	3	3

ESTIMATED IMPACT If Iowa improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	167,524	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	138,716	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	72,498	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	14,431	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	7,500	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	486	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	1,368	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	17,920	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	76,377	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	14	20	5	7	2007-08	12	17	-2	No Change
Children ages 0–18 uninsured	2011-12	6	8	3	9	2007-08	5	9	-1	No Change
Adults who went without care because of cost in past year	2012	11	15	9	5	2007	8	12	-3	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	14	16	10	13	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	13	14	6	20	2007	13	14	0	No Change
Adults without a dental visit in past year	2012	12	15	10	7	2006	12	14	0	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	83	78	89	12	2007	84	82	-1	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	45	43	52	13	2006	46	44	-1	No Change
Children with a medical home	2011/12	67	57	69	2	2007	67	61	0	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	70	69	81	18	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	66	63	86	13	2007	75	63	-9	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	75	69	80	5	2009	42	43	33	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	15	19	12	12	2007	22	28	7	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	19	21	14	15	2007	17	19	-2	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	75	76	80	31	2007	75	75	0	No Change
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.8	12.8	11.9	26	07/2005 - 06/2008	12.6	12.6	-0.2	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	85	84	89	13	2007	82	80	3	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	68	66	71	10	2007	64	63	4	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	60	59	63	14	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	87	89	95	38	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	5	6	3	5	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	21	21.5	12	21	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	75	114	26	10	2004	81	137	6	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	24	27	13	18	2008	32	34	8	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	64	68	41	17	2008	80	80	16	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	39	45	26	15	2008	51	51.5	12	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	17	20	12	13	2006	18	20	1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	16	19	7	17	2006	17	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	17	17	14	25	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	177	183.5	129	22	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,505	$5,501	$4,180	27	2008	$4,439	$4,505	-$1,066	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$7,494	$8,526	$5,406	13	2008	$7,180	$7,942	-$314	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	74	82	57	16	2004-05	79	90.5	5	No Change
Years of potential life lost before age 75	2010	5,691	6,567	4,900	14	2005	5,903	7,252	212	No Change
Breast cancer deaths per 100,000 female population	2010	19.5	22.2	14.8	5	2005	21.4	23.9	1.9	Improved
Colorectal cancer deaths per 100,000 population	2010	17.8	16.2	12.0	47	2005	18.4	18.1	0.6	No Change
Suicide deaths per 100,000 population	2010	12.1	13.5	6.9	17	2005	11.2	11.8	-0.9	No Change
Infant mortality, deaths per 1,000 live births	2009	4.6	6.4	4.6	1	2004	5.1	6.8	0.5	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	23	27	19	6	2007	21	24	-2	Worsened
Adults who smoke	2012	18	19	10	17	2007	19	19	1	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	30	28	21	34	2007	27	27	-3	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	28	30.5	22	13	2007	26	31	-2	Worsened
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	9	10	5	13	2006	9	10	0	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	23	18	-5	7	2007-08	23	17	-6	0	No Change
Adults who went without care because of cost in past year	2012	31	17	-14	38	2007	20	13	-7	-11	Worsened
At risk adults without a doctor visit	2012	25	14	-11	34	2007	30	14	-16	5	Improved
Adults without a usual source of care	2012	41	22	-19	28	2007	47	20	-27	6	Improved
Older adults without recommended preventive care	2012	71	58	-13	41	2006	*	56	*	*	*
Children without a medical home	2011/12	52	46	-6	6	2007	73	42	-31	21	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	39	32	-7	21	--	--	--	--	--	--
Mortality amenable to health care	2009-10	*	86	*	*	2004-05	144	96	-48	*	*
Infant mortality, deaths per 1,000 live births	2008-09	12.2	6.5	-5.7	21	2003-04	11	6.8	-4.2	-1.2	Worsened
Adults with poor health-related quality of life	2012	40	27	-13	44	2007	30	24	-6	-10	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	22	18	-4	9	2007-08	23	17	-6	1	Improved
Adults who went without care because of cost in past year	2012	24	17	-7	10	2007	20	13	-7	-4	No Change
At risk adults without a doctor visit	2012	17	14	-3	26	2007	22	14	-8	5	Improved
Adults without a usual source of care	2012	22	22	0	15	2007	25	20	-5	3	Improved
Older adults without recommended preventive care	2012	70	58	-12	26	2006	67	56	-11	-3	Worsened
Children without a medical home	2011/12	43	46	3	2	2007	44	42	-2	1	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	37	32	-5	20	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	25	25	0	17	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	40	27	-13	16	2007	35	24	-11	-5	Worsened

Notes:

* Data not available for this state.

-- Historical data not available or not comperable over time.

(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.

(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.

(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.

Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Kansas

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**23**	**20**
Access & Affordability	21	23
Prevention & Treatment	17	16
Avoidable Hospital Use & Cost	26	28
Equity[b]	26	24
Healthy Lives	23	23

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	10	29%
State rate worsened[c]	8	24%
No change in state rate[d]	16	47%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	2	5%
Top quartile	5	12%
2nd quartile	22	52%
3rd quartile	13	31%
Bottom quartile	2	5%
Bottom 5 states	0	0%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	26	24	16	7	3	6
Low-Income	25	23	7	4	1	2
Race/Ethnicity	29	26	9	3	2	4

ESTIMATED IMPACT If Kansas improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	231,764	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	209,456	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	64,607	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	71,964	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	14,901	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	557	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	1,614	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	12,463	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	67,545	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	19	20	5	22	2007-08	16	17	-3	Worsened
Children ages 0–18 uninsured	2011-12	8	8	3	20	2007-08	9	9	1	No Change
Adults who went without care because of cost in past year	2012	15	15	9	21	2007	11	12	-4	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	16	16	10	26	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	12	14	6	15	2007	14	14	2	Improved
Adults without a dental visit in past year	2012	13	15	10	12	2006	13	14	0	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	79	78	89	22	2007	84	82	-5	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	45	43	52	13	2006	43	44	2	Improved
Children with a medical home	2011/12	59	57	69	16	2007	61	61	-2	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	70	69	81	18	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	72	63	86	5	2007	72	63	0	No Change
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	65	69	80	39	2009	46	43	19	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	20	19	12	31	2007	30	28	10	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	22	21	14	30	2007	21	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	75	76	80	31	2007	76	75	-1	Worsened
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.6	12.8	11.9	15	07/2005 - 06/2008	12.3	12.6	-0.3	Worsened
Hospitalized patients given information about what to do during their recovery at home	2011	85	84	89	13	2007	79	80	6	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	69	66	71	4	2007	63	63	6	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	59	59	63	21	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	86	89	95	41	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	6	6	3	19	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	24	21.5	12	34	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	142	114	26	31	2004	147	137	5	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	27	27	13	24	2008	36	34	9	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	70	68	41	29	2008	90	80	20	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	43	45	26	24	2008	55	51.5	12	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	19	20	12	18	2006	19	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	20	19	7	28	2006	20	19	0	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	17	17	14	25	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	169	183.5	129	12	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,599	$5,501	$4,180	34	2008	$4,730	$4,505	-$869	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,582	$8,526	$5,406	29	2008	$8,253	$7,942	-$329	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	78	82	57	23	2004-05	85	90.5	7	No Change
Years of potential life lost before age 75	2010	6,646	6,567	4,900	27	2005	6,979	7,252	333	No Change
Breast cancer deaths per 100,000 female population	2010	20.6	22.2	14.8	12	2005	23.8	23.9	3.2	Improved
Colorectal cancer deaths per 100,000 population	2010	15.9	16.2	12.0	23	2005	18.7	18.1	2.8	Improved
Suicide deaths per 100,000 population	2010	14.0	13.5	6.9	29	2005	13.3	11.8	-0.7	No Change
Infant mortality, deaths per 1,000 live births	2009	7.1	6.4	4.6	33	2004	7.3	6.8	0.2	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	25	27	19	18	2007	21	24	-4	Worsened
Adults who smoke	2012	19	19	10	22	2007	17	19	-2	Worsened
Adults ages 18–64 who are obese (BMI >= 30)	2012	30	28	21	34	2007	29	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	30	30.5	22	21	2007	31	31	1	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	9	10	5	13	2006	8	10	-1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	33	18	-15	31	2007-08	32	17	-15	-1	No Change
Adults who went without care because of cost in past year	2012	33	17	-16	44	2007	22	13	-9	-11	Worsened
At risk adults without a doctor visit	2012	23	14	-9	27	2007	17	14	-3	-6	Worsened
Adults without a usual source of care	2012	43	22	-21	38	2007	41	20	-21	-2	No Change
Older adults without recommended preventive care	2012	60	58	-2	7	2006	79	56	-23	19	Improved
Children without a medical home	2011/12	65	46	-19	37	2007	64	42	-22	-1	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	35	32	-3	12	--	--	--	--	--	--
Mortality amenable to health care	2009-10	145	86	-59	10	2004-05	170	96	-74	25	Improved
Infant mortality, deaths per 1,000 live births	2008-09	14	6.5	-7.5	38	2003-04	13.8	6.8	-7	-0.2	Worsened
Adults with poor health-related quality of life	2012	33	27	-6	15	2007	29	24	-5	-4	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	27	18	-9	19	2007-08	26	17	-9	-1	No Change
Adults who went without care because of cost in past year	2012	32	17	-15	38	2007	25	13	-12	-7	Worsened
At risk adults without a doctor visit	2012	17	14	-3	26	2007	17	14	-3	0	No Change
Adults without a usual source of care	2012	29	22	-7	34	2007	28	20	-8	-1	No Change
Older adults without recommended preventive care	2012	66	58	-8	11	2006	74	56	-18	8	Improved
Children without a medical home	2011/12	53	46	-7	22	2007	49	42	-7	-4	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	38	32	-6	26	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	32	25	-7	32	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	42	27	-15	23	2007	34	24	-10	-8	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Kentucky

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**42**	**40**
Access & Affordability	29	34
Prevention & Treatment	25	26
Avoidable Hospital Use & Cost	49	48
Equity[b]	37	17
Healthy Lives	44	46

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	12	35%
State rate worsened[c]	9	26%
No change in state rate[d]	13	38%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	1	2%
Top quartile	4	10%
2nd quartile	5	12%
3rd quartile	15	36%
Bottom quartile	18	43%
Bottom 5 states	9	21%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	37	17	16	4	4	8
Low-Income	32	29	7	2	2	3
Race/Ethnicity	39	5	9	2	2	5

ESTIMATED IMPACT If Kentucky improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	424,601	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	264,092	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	157,847	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	131,170	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	33,205	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	1,998	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	6,252	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	38,956	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	299,706	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	21	20	5	32	2007-08	20	17	-1	No Change
Children ages 0–18 uninsured	2011-12	8	8	3	20	2007-08	9	9	1	No Change
Adults who went without care because of cost in past year	2012	19	15	9	38	2007	16	12	-3	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	17	16	10	31	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	14	14	6	24	2007	13	14	-1	No Change
Adults without a dental visit in past year	2012	16	15	10	32	2006	18	14	2	Improved
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	81	78	89	19	2007	85	82	-4	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	41	43	52	29	2006	43	44	-2	Worsened
Children with a medical home	2011/12	56	57	69	30	2007	62	61	-6	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	68	69	81	27	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	66	63	86	13	2007	66	63	0	No Change
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	68	69	80	28	2009	43	43	25	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	26	19	12	46	2007	36	28	10	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	27	21	14	48	2007	26	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	77	76	80	10	2007	73	75	4	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.0	12.8	11.9	35	07/2005 - 06/2008	12.5	12.6	-0.5	Worsened
Hospitalized patients given information about what to do during their recovery at home	2011	83	84	89	28	2007	79	80	4	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	68	66	71	10	2007	64	63	4	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	62	59	63	5	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	91	89	95	9	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	7	6	3	30	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	24	21.5	12	34	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	184	114	26	40	2004	213	137	29	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	50	27	13	51	2008	56	34	6	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	100	68	41	51	2008	110	80	10	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	63	45	26	49	2008	71	51.5	8	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	21	20	12	27	2006	21	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	24	19	7	39	2006	26	19	2	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	18	17	14	42	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	215	183.5	129	44	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$6,255	$5,501	$4,180	49	2008	$4,646	$4,505	-$1,609	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$9,344	$8,526	$5,406	43	2008	$8,563	$7,942	-$781	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	106	82	57	43	2004-05	110	90.5	4	No Change
Years of potential life lost before age 75	2010	8,619	6,567	4,900	44	2005	8,655	7,252	36	No Change
Breast cancer deaths per 100,000 female population	2010	21.9	22.2	14.8	25	2005	23.8	23.9	1.9	Improved
Colorectal cancer deaths per 100,000 population	2010	17.6	16.2	12.0	43	2005	20.9	18.1	3.3	Improved
Suicide deaths per 100,000 population	2010	14.2	13.5	6.9	34	2005	13.4	11.8	-0.8	No Change
Infant mortality, deaths per 1,000 live births	2009	6.8	6.4	4.6	28	2004	6.8	6.8	0.0	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	33	27	19	47	2007	29	24	-4	Worsened
Adults who smoke	2012	28	19	10	50	2007	28	19	0	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	32	28	21	41	2007	30	27	-2	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	36	30.5	22	45	2007	37	31	1	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	16	10	5	45	2006	19	10	3	Improved

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	37	18	-19	39	2007-08	40	17	-23	3	Improved
Adults who went without care because of cost in past year	2012	33	17	-16	44	2007	20	13	-7	-13	Worsened
At risk adults without a doctor visit	2012	16	14	-2	14	2007	11	14	3	-5	Worsened
Adults without a usual source of care	2012	35	22	-13	20	2007	24	20	-4	-11	Worsened
Older adults without recommended preventive care	2012	68	58	-10	28	2006	50	56	6	-18	Worsened
Children without a medical home	2011/12	54	46	-8	8	2007	56	42	-14	2	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	49	32	-17	47	--	--	--	--	--	--
Mortality amenable to health care	2009-10	175	86	-89	28	2004-05	176	96	-80	1	No Change
Infant mortality, deaths per 1,000 live births	2008-09	10.7	6.5	-4.2	11	2003-04	10.8	6.8	-4	0.1	No Change
Adults with poor health-related quality of life	2012	46	27	-19	51	2007	29	24	-5	-17	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	31	18	-13	33	2007-08	29	17	-12	-2	Worsened
Adults who went without care because of cost in past year	2012	33	17	-16	41	2007	33	13	-20	0	No Change
At risk adults without a doctor visit	2012	16	14	-2	23	2007	17	14	-3	1	Improved
Adults without a usual source of care	2012	22	22	0	15	2007	20	20	0	-2	No Change
Older adults without recommended preventive care	2012	70	58	-12	26	2006	71	56	-15	1	Improved
Children without a medical home	2011/12	52	46	-6	16	2007	44	42	-2	-8	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	37	32	-5	20	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	39	25	-14	43	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	49	27	-22	47	2007	45	24	-21	-4	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Louisiana

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**48**	**48**
Access & Affordability	39	44
Prevention & Treatment	41	41
Avoidable Hospital Use & Cost	50	49
Equity[b]	29	45
Healthy Lives	50	46

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	33	100%
State rate improved[c]	14	42%
State rate worsened[c]	11	33%
No change in state rate[d]	8	24%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	3	7%
Top quartile	5	12%
2nd quartile	3	7%
3rd quartile	8	19%
Bottom quartile	26	62%
Bottom 5 states	23	55%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	29	45	16	3	10	3
Low-Income	29	38	7	3	3	1
Race/Ethnicity	30	46	9	0	7	2

ESTIMATED IMPACT If Louisiana improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	621,136	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	405,267	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	166,726	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	146,738	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	29,344	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	2,830	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	4,018	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	35,009	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	303,043	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	28	20	5	47	2007-08	26	17	-2	No Change
Children ages 0–18 uninsured	2011-12	10	8	3	37	2007-08	12	9	2	Improved
Adults who went without care because of cost in past year	2012	18	15	9	34	2007	17	12	-1	No Change
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	18	16	10	40	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	11	14	6	11	2007	8	14	-3	Worsened
Adults without a dental visit in past year	2012	20	15	10	49	2006	18	14	-2	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	77	78	89	31	2007	79	82	-2	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	41	43	52	29	2006	38	44	3	Improved
Children with a medical home	2011/12	56	57	69	30	2007	55	61	1	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	67	69	81	31	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	40	63	86	51	2007	55	63	-15	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	69	69	80	25	2009	54	43	15	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	28	19	12	49	2007	41	28	13	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	26	21	14	44	2007	25	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	80	76	80	1	2007	77	75	3	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.0	12.8	11.9	35	07/2005 - 06/2008	12.7	12.6	-0.3	Worsened
Hospitalized patients given information about what to do during their recovery at home	2011	83	84	89	28	2007	79	80	4	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	71	66	71	1	2007	66	63	5	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	59	59	63	21	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	93	89	95	2	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	9	6	3	49	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	29	21.5	12	51	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	201	114	26	42	2004	*	137	--	*
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	44	27	13	49	2008	52	34	8	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	97	68	41	49	2008	119	80	22	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	56	45	26	43	2008	69	51.5	13	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	26	20	12	48	2006	24	20	-2	Worsened
Long-stay nursing home residents hospitalized within a six-month period	2010	31	19	7	47	2006	32	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	16	17	14	11	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	222	183.5	129	47	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$6,352	$5,501	$4,180	50	2008	$4,787	$4,505	-$1,565	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$10,873	$8,526	$5,406	51	2008	$10,573	$7,942	-$300	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	123	82	57	50	2004-05	137	90.5	14	Improved
Years of potential life lost before age 75	2010	9,005	6,567	4,900	48	2005	10,529	7,252	1,524	Improved
Breast cancer deaths per 100,000 female population	2010	24.8	22.2	14.8	48	2005	29.2	23.9	4.4	Improved
Colorectal cancer deaths per 100,000 population	2010	18.3	16.2	12.0	48	2005	20.1	18.1	1.8	Improved
Suicide deaths per 100,000 population	2010	12.3	13.5	6.9	19	2005	11.0	11.8	-1.3	No Change
Infant mortality, deaths per 1,000 live births	2009	8.8	6.4	4.6	49	2004	10.3	6.8	1.5	Improved
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	31	27	19	43	2007	25	24	-6	Worsened
Adults who smoke	2012	25	19	10	48	2007	23	19	-2	Worsened
Adults ages 18–64 who are obese (BMI >= 30)	2012	35	28	21	48	2007	31	27	-4	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	40	30.5	22	50	2007	36	31	-4	Worsened
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	16	10	5	45	2006	12	10	-4	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	41	18	-23	46	2007-08	48	17	-31	7	Improved
Adults who went without care because of cost in past year	2012	26	17	-9	16	2007	30	13	-17	4	Improved
At risk adults without a doctor visit	2012	15	14	-1	10	2007	21	14	-7	6	Improved
Adults without a usual source of care	2012	41	22	-19	28	2007	38	20	-18	-3	Worsened
Older adults without recommended preventive care	2012	69	58	-11	36	2006	71	56	-15	2	Improved
Children without a medical home	2011/12	56	46	-10	10	2007	59	42	-17	3	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	43	32	-11	36	--	--	--	--	--	--
Mortality amenable to health care	2009-10	190	86	-104	34	2004-05	221	96	-125	31	Improved
Infant mortality, deaths per 1,000 live births	2008-09	12.2	6.5	-5.7	21	2003-04	13.9	6.8	-7.1	1.7	Improved
Adults with poor health-related quality of life	2012	36	27	-9	33	2007	31	24	-7	-5	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	35	18	-17	45	2007-08	35	17	-18	0	No Change
Adults who went without care because of cost in past year	2012	32	17	-15	38	2007	32	13	-19	0	No Change
At risk adults without a doctor visit	2012	11	14	3	7	2007	11	14	3	0	No Change
Adults without a usual source of care	2012	24	22	-2	22	2007	31	20	-11	7	Improved
Older adults without recommended preventive care	2012	64	58	-6	6	2006	68	56	-12	4	Improved
Children without a medical home	2011/12	54	46	-8	27	2007	58	42	-16	4	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	35	32	-3	14	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	44	25	-19	49	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	50	27	-23	48	2007	38	24	-14	-12	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Maine

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**7**	**9**
Access & Affordability	9	9
Prevention & Treatment	2	2
Avoidable Hospital Use & Cost	22	23
Equity[b]	4	3
Healthy Lives	20	22

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	33	100%
State rate improved[c]	10	30%
State rate worsened[c]	6	18%
No change in state rate[d]	17	52%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	11	26%
Top quartile	23	55%
2nd quartile	9	21%
3rd quartile	8	19%
Bottom quartile	2	5%
Bottom 5 states	1	2%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	4	3	13	5	4	4
Low-Income	5	2	7	3	2	2
Race/Ethnicity	4	5	6	2	2	2

ESTIMATED IMPACT If Maine improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	75,457	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	10,611	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	26,562	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	16,117	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	951	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	125	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	608	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	18,363	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	68,623	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	14	20	5	7	2007-08	13	17	-1	No Change
Children ages 0–18 uninsured	2011-12	5	8	3	4	2007-08	5	9	0	No Change
Adults who went without care because of cost in past year	2012	11	15	9	5	2007	10	12	-1	No Change
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	15	16	10	20	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	11	14	6	11	2007	12	14	1	No Change
Adults without a dental visit in past year	2012	13	15	10	12	2006	12	14	-1	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	88	78	89	2	2007	89	82	-1	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	47	43	52	5	2006	49	44	-2	Worsened
Children with a medical home	2011/12	63	57	69	6	2007	66	61	-3	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	73	69	81	10	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	78	63	86	2	2007	71	63	7	Improved
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	73	69	80	10	2009	38	43	35	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	13	19	12	3	2007	21	28	8	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	14	21	14	1	2007	14	19	0	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	77	76	80	10	2007	77	75	0	No Change
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.9	12.8	11.9	28	07/2005 - 06/2008	12.8	12.6	-0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	86	84	89	7	2007	84	80	2	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	70	66	71	3	2007	67	63	3	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	62	59	63	5	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	88	89	95	30	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	5	6	3	5	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	24	21.5	12	34	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	62	114	26	5	2004	*	137	--	*
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	26	27	13	22	2008	30	34	4	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	65	68	41	19	2008	76	80	11	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	39	45	26	15	2008	48	51.5	9	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	16	20	12	8	2006	16	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	14	19	7	13	2006	15	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	16	17	14	11	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	235	183.5	129	50	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$6,000	$5,501	$4,180	46	2008	$5,176	$4,505	-$824	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$7,601	$8,526	$5,406	15	2008	$7,239	$7,942	-$362	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	67	82	57	9	2004-05	78	90.5	11	Improved
Years of potential life lost before age 75	2010	5,893	6,567	4,900	18	2005	6,498	7,252	605	No Change
Breast cancer deaths per 100,000 female population	2010	20.3	22.2	14.8	11	2005	22.6	23.9	2.3	Improved
Colorectal cancer deaths per 100,000 population	2010	16.4	16.2	12.0	27	2005	17.5	18.1	1.1	Improved
Suicide deaths per 100,000 population	2010	13.2	13.5	6.9	24	2005	12.4	11.8	-0.8	No Change
Infant mortality, deaths per 1,000 live births	2009	5.7	6.4	4.6	15	2004	5.7	6.8	0.0	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	27	27	19	26	2007	24	24	-3	Worsened
Adults who smoke	2012	20	19	10	27	2007	20	19	0	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	29	28	21	29	2007	27	27	-2	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	30	30.5	22	21	2007	28	31	-2	Worsened
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	13	10	5	38	2006	14	10	1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	24	18	-6	8	2007-08	16	17	1	-8	Worsened
Adults who went without care because of cost in past year	2012	18	17	-1	1	2007	23	13	-10	5	Improved
At risk adults without a doctor visit	2012	11	14	3	5	2007	11	14	3	0	No Change
Adults without a usual source of care	2012	15	22	7	3	2007	12	20	8	-3	No Change
Older adults without recommended preventive care	2012	50	58	8	1	2006	*	56	*	*	*
Children without a medical home	2011/12	39	46	7	2	2007	43	42	-1	4	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	43	32	-11	36	--	--	--	--	--	--
Mortality amenable to health care	2009-10	*	86	*	*	2004-05	*	96	*	*	*
Infant mortality, deaths per 1,000 live births	2008-09	*	6.5	*	*	2003-04	*	6.8	*	*	*
Adults with poor health-related quality of life	2012	39	27	-12	41	2007	35	24	-11	-4	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	19	18	-1	5	2007-08	18	17	-1	-1	No Change
Adults who went without care because of cost in past year	2012	15	17	2	2	2007	15	13	-2	0	No Change
At risk adults without a doctor visit	2012	12	14	2	8	2007	14	14	0	2	Improved
Adults without a usual source of care	2012	10	22	12	1	2007	15	20	5	5	Improved
Older adults without recommended preventive care	2012	63	58	-5	4	2006	62	56	-6	-1	No Change
Children without a medical home	2011/12	47	46	-1	5	2007	42	42	0	-5	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	37	32	-5	20	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	22	25	3	11	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	47	27	-20	43	2007	39	24	-15	-8	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Maryland

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**17**	**24**
Access & Affordability	13	16
Prevention & Treatment	15	14
Avoidable Hospital Use & Cost	33	39
Equity[b]	12	30
Healthy Lives	23	27

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	14	41%
State rate worsened[c]	4	12%
No change in state rate[d]	16	47%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	8	19%
Top quartile	11	26%
2nd quartile	15	36%
3rd quartile	12	29%
Bottom quartile	4	10%
Bottom 5 states	3	7%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	12	30	16	2	11	3
Low-Income	15	24	7	0	5	2
Race/Ethnicity	10	35	9	2	6	1

ESTIMATED IMPACT If Maryland improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	434,268	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	222,323	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	75,494	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	163,820	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	8,842	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	2,097	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	5,048	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	30,930	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	147,997	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	17	20	5	14	2007-08	16	17	-1	No Change
Children ages 0–18 uninsured	2011-12	9	8	3	30	2007-08	8	9	-1	No Change
Adults who went without care because of cost in past year	2012	11	15	9	5	2007	11	12	0	No Change
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	12	16	10	5	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	8	14	6	4	2007	12	14	4	Improved
Adults without a dental visit in past year	2012	13	15	10	12	2006	13	14	0	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	84	78	89	10	2007	84	82	0	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	48	43	52	2	2006	50	44	-2	Worsened
Children with a medical home	2011/12	57	57	69	24	2007	59	61	-2	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	73	69	81	10	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	59	63	86	32	2007	59	63	0	No Change
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	67	69	80	31	2009	45	43	22	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	16	19	12	16	2007	23	28	7	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	19	21	14	15	2007	19	19	0	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	76	76	80	21	2007	75	75	1	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.2	12.8	11.9	2	07/2005 - 06/2008	12.3	12.6	0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	82	84	89	34	2007	76	80	6	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	61	66	71	46	2007	57	63	4	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	60	59	63	14	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	90	89	95	18	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	7	6	3	30	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	18	21.5	12	5	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	165	114	26	37	2004	161	137	-4	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	29	27	13	32	2008	38	34	9	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	69	68	41	28	2008	86	80	17	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	54	45	26	38	2008	72	51.5	18	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	23	20	12	39	2006	23	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	20	19	7	28	2006	21	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	17	17	14	25	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	185	183.5	129	28	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,305	$5,501	$4,180	20	2008	$4,362	$4,505	-$943	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,488	$8,526	$5,406	25	2008	$9,036	$7,942	$548	Improved
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	95	82	57	37	2004-05	107	90.5	12	Improved
Years of potential life lost before age 75	2010	6,371	6,567	4,900	23	2005	7,334	7,252	963	Improved
Breast cancer deaths per 100,000 female population	2010	24.4	22.2	14.8	47	2005	25.9	23.9	1.5	Improved
Colorectal cancer deaths per 100,000 population	2010	15.2	16.2	12.0	19	2005	19.0	18.1	3.8	Improved
Suicide deaths per 100,000 population	2010	8.3	13.5	6.9	4	2005	8.4	11.8	0.1	No Change
Infant mortality, deaths per 1,000 live births	2009	7.2	6.4	4.6	37	2004	8.5	6.8	1.3	Improved
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	24	27	19	13	2007	22	24	-2	Worsened
Adults who smoke	2012	16	19	10	4	2007	17	19	1	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	28	28	21	25	2007	27	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	32	30.5	22	31	2007	29	31	-3	Worsened
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	9	10	5	13	2006	9	10	0	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	36	18	-18	38	2007-08	44	17	-27	8	Improved
Adults who went without care because of cost in past year	2012	26	17	-9	16	2007	31	13	-18	5	Improved
At risk adults without a doctor visit	2012	12	14	2	6	2007	26	14	-12	14	Improved
Adults without a usual source of care	2012	38	22	-16	26	2007	43	20	-23	5	Improved
Older adults without recommended preventive care	2012	58	58	0	4	2006	58	56	-2	0	No Change
Children without a medical home	2011/12	60	46	-14	23	2007	58	42	-16	-2	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	33	32	-1	8	--	--	--	--	--	--
Mortality amenable to health care	2009-10	149	86	-63	14	2004-05	172	96	-76	23	Improved
Infant mortality, deaths per 1,000 live births	2008-09	13.1	6.5	-6.6	30	2003-04	14.5	6.8	-7.7	1.4	Improved
Adults with poor health-related quality of life	2012	33	27	-6	15	2007	28	24	-4	-5	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	31	18	-13	33	2007-08	35	17	-18	4	Improved
Adults who went without care because of cost in past year	2012	25	17	-8	16	2007	26	13	-13	1	Improved
At risk adults without a doctor visit	2012	9	14	5	4	2007	19	14	-5	10	Improved
Adults without a usual source of care	2012	23	22	-1	20	2007	27	20	-7	4	Improved
Older adults without recommended preventive care	2012	63	58	-5	4	2006	65	56	-9	2	Improved
Children without a medical home	2011/12	58	46	-12	38	2007	53	42	-11	-5	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	36	32	-4	15	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	22	25	3	11	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	44	27	-17	34	2007	35	24	-11	-9	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Massachusetts

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**2**	**2**
Access & Affordability	1	1
Prevention & Treatment	1	1
Avoidable Hospital Use & Cost	30	31
Equity[b]	1	2
Healthy Lives	2	5

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	12	35%
State rate worsened[c]	5	15%
No change in state rate[d]	17	50%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	20	48%
Top quartile	28	67%
2nd quartile	6	14%
3rd quartile	6	14%
Bottom quartile	2	5%
Bottom 5 states	0	0%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	1	2	16	4	11	1
Low-Income	1	2	7	1	5	1
Race/Ethnicity	3	4	9	3	6	0

ESTIMATED IMPACT If Massachusetts improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	0	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	0	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	0	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	85,352	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	0	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	490	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	6,109	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	54,193	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	166,562	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	5	20	5	1	2007-08	7	17	2	No Change
Children ages 0–18 uninsured	2011-12	3	8	3	1	2007-08	3	9	0	No Change
Adults who went without care because of cost in past year	2012	9	15	9	1	2007	7	12	-2	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	11	16	10	3	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	6	14	6	1	2007	8	14	2	Improved
Adults without a dental visit in past year	2012	11	15	10	2	2006	10	14	-1	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	89	78	89	1	2007	89	82	0	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	52	43	52	1	2006	50	44	2	Improved
Children with a medical home	2011/12	63	57	69	6	2007	66	61	-3	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	79	69	81	2	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	65	63	86	19	2007	67	63	-2	No Change
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	74	69	80	9	2009	33	43	41	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	12	19	12	1	2007	16	28	4	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	16	21	14	2	2007	15	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	77	76	80	10	2007	75	75	2	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	11.9	12.8	11.9	1	07/2005 - 06/2008	11.9	12.6	0.0	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	86	84	89	7	2007	84	80	2	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	66	66	71	26	2007	63	63	3	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	62	59	63	5	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	91	89	95	9	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	5	6	3	5	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	24	21.5	12	34	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	179	114	26	38	2004	143	137	-36	Worsened
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	30	27	13	34	2008	39	34	9	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	80	68	41	42	2008	97	80	17	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	54	45	26	38	2008	67	51.5	13	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	19	20	12	18	2006	19	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	17	19	7	19	2006	16	19	-1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	17	17	14	25	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	218	183.5	129	46	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$4,527	$5,501	$4,180	4	2008	$3,577	$4,505	-$950	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$9,042	$8,526	$5,406	37	2008	$8,587	$7,942	-$455	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	65	82	57	6	2004-05	78	90.5	13	Improved
Years of potential life lost before age 75	2010	4,990	6,567	4,900	2	2005	5,565	7,252	575	No Change
Breast cancer deaths per 100,000 female population	2010	19.2	22.2	14.8	2	2005	23.2	23.9	4.0	Improved
Colorectal cancer deaths per 100,000 population	2010	14.9	16.2	12.0	15	2005	17.9	18.1	3.0	Improved
Suicide deaths per 100,000 population	2010	8.8	13.5	6.9	5	2005	7.2	11.8	-1.6	No Change
Infant mortality, deaths per 1,000 live births	2009	5.1	6.4	4.6	7	2004	4.8	6.8	-0.3	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	23	27	19	6	2007	21	24	-2	Worsened
Adults who smoke	2012	16	19	10	4	2007	16	19	0	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	23	28	21	2	2007	22	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	31	30.5	22	27	2007	30	31	-1	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	9	10	5	13	2006	8	10	-1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	6	18	12	1	2007-08	10	17	7	4	Improved
Adults who went without care because of cost in past year	2012	19	17	-2	2	2007	17	13	-4	-2	No Change
At risk adults without a doctor visit	2012	10	14	4	4	2007	9	14	5	-1	No Change
Adults without a usual source of care	2012	23	22	-1	6	2007	27	20	-7	4	Improved
Older adults without recommended preventive care	2012	58	58	0	4	2006	66	56	-10	8	Improved
Children without a medical home	2011/12	64	46	-18	33	2007	66	42	-24	2	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	34	32	-2	10	--	--	--	--	--	--
Mortality amenable to health care	2009-10	98	86	-12	1	2004-05	125	96	-29	27	Improved
Infant mortality, deaths per 1,000 live births	2008-09	10.2	6.5	-3.7	9	2003-04	10.5	6.8	-3.7	0.3	Improved
Adults with poor health-related quality of life	2012	36	27	-9	33	2007	35	24	-11	-1	No Change
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	8	18	10	1	2007-08	16	17	1	8	Improved
Adults who went without care because of cost in past year	2012	16	17	1	4	2007	16	13	-3	0	No Change
At risk adults without a doctor visit	2012	7	14	7	2	2007	11	14	3	4	Improved
Adults without a usual source of care	2012	14	22	8	3	2007	19	20	1	5	Improved
Older adults without recommended preventive care	2012	59	58	-1	1	2006	64	56	-8	5	Improved
Children without a medical home	2011/12	52	46	-6	16	2007	47	42	-5	-5	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	29	32	3	3	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	17	25	8	1	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	41	27	-14	18	2007	42	24	-18	1	Improved

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Michigan

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**26**	**15**
Access & Affordability	19	14
Prevention & Treatment	12	6
Avoidable Hospital Use & Cost	39	39
Equity[b]	22	12
Healthy Lives	38	31

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	10	29%
State rate worsened[c]	12	35%
No change in state rate[d]	12	35%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	2	5%
Top quartile	7	17%
2nd quartile	16	38%
3rd quartile	11	26%
Bottom quartile	8	19%
Bottom 5 states	2	5%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	22	12	16	4	6	6
Low-Income	20	14	7	3	2	2
Race/Ethnicity	22	14	9	1	4	4

ESTIMATED IMPACT If Michigan improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	706,968	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	370,792	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	239,999	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	228,678	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	15,815	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	3,019	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	12,013	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	72,825	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	361,960	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	17	20	5	14	2007-08	16	17	-1	No Change
Children ages 0–18 uninsured	2011-12	5	8	3	4	2007-08	5	9	0	No Change
Adults who went without care because of cost in past year	2012	15	15	9	21	2007	11	12	-4	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	14	16	10	13	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	14	14	6	24	2007	13	14	-1	No Change
Adults without a dental visit in past year	2012	14	15	10	17	2006	11	14	-3	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	84	78	89	10	2007	86	82	-2	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	45	43	52	13	2006	51	44	-6	Worsened
Children with a medical home	2011/12	59	57	69	16	2007	63	61	-4	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	68	69	81	27	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	68	63	86	9	2007	60	63	8	Improved
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	71	69	80	22	2009	52	43	19	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	16	19	12	16	2007	27	28	11	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	20	21	14	23	2007	18	19	-2	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	75	76	80	31	2007	75	75	0	No Change
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.4	12.8	11.9	8	07/2005 - 06/2008	12.5	12.6	0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	86	84	89	7	2007	81	80	5	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	67	66	71	20	2007	63	63	4	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	59	59	63	21	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	86	89	95	41	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	6	6	3	19	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	16	21.5	12	3	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	112	114	26	20	2004	175	137	63	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	33	27	13	40	2008	39	34	6	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	73	68	41	31	2008	87	80	14	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	61	45	26	48	2008	69	51.5	8	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	22	20	12	33	2006	23	20	1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	20	19	7	28	2006	20	19	0	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	16	17	14	11	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	208	183.5	129	43	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,537	$5,501	$4,180	30	2008	$4,528	$4,505	-$1,009	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$9,559	$8,526	$5,406	47	2008	$8,911	$7,942	-$648	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	90	82	57	31	2004-05	102	90.5	12	Improved
Years of potential life lost before age 75	2010	7,038	6,567	4,900	33	2005	7,352	7,252	314	No Change
Breast cancer deaths per 100,000 female population	2010	23.8	22.2	14.8	43	2005	24.1	23.9	0.3	No Change
Colorectal cancer deaths per 100,000 population	2010	15.8	16.2	12.0	22	2005	18.4	18.1	2.6	Improved
Suicide deaths per 100,000 population	2010	12.5	13.5	6.9	21	2005	11.0	11.8	-1.5	No Change
Infant mortality, deaths per 1,000 live births	2009	7.6	6.4	4.6	39	2004	7.6	6.8	0.0	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	29	27	19	34	2007	24	24	-5	Worsened
Adults who smoke	2012	23	19	10	40	2007	20	19	-3	Worsened
Adults ages 18–64 who are obese (BMI >= 30)	2012	32	28	21	41	2007	28	27	-4	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	33	30.5	22	34	2007	31	31	-2	Worsened
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	11	10	5	30	2006	9	10	-2	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	27	18	-9	15	2007-08	24	17	-7	-3	Worsened
Adults who went without care because of cost in past year	2012	25	17	-8	12	2007	17	13	-4	-8	Worsened
At risk adults without a doctor visit	2012	15	14	-1	10	2007	19	14	-5	4	Improved
Adults without a usual source of care	2012	22	22	0	5	2007	20	20	0	-2	No Change
Older adults without recommended preventive care	2012	62	58	-4	9	2006	63	56	-7	1	Improved
Children without a medical home	2011/12	66	46	-20	39	2007	51	42	-9	-15	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	44	32	-12	38	--	--	--	--	--	--
Mortality amenable to health care	2009-10	189	86	-103	33	2004-05	208	96	-112	19	Improved
Infant mortality, deaths per 1,000 live births	2008-09	14.5	6.5	-8.0	41	2003-04	16.4	6.8	-9.6	1.9	Improved
Adults with poor health-related quality of life	2012	39	27	-12	41	2007	33	24	-9	-6	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	24	18	-6	12	2007-08	23	17	-6	-1	No Change
Adults who went without care because of cost in past year	2012	27	17	-10	22	2007	23	13	-10	-4	No Change
At risk adults without a doctor visit	2012	15	14	-1	18	2007	19	14	-5	4	Improved
Adults without a usual source of care	2012	19	22	3	8	2007	24	20	-4	5	Improved
Older adults without recommended preventive care	2012	68	58	-10	21	2006	62	56	-6	-6	Worsened
Children without a medical home	2011/12	54	46	-8	27	2007	51	42	-9	-3	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	40	32	-8	30	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	29	25	-4	27	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	46	27	-19	38	2007	38	24	-14	-8	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Minnesota

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**1**	**1**
Access & Affordability	3	2
Prevention & Treatment	6	5
Avoidable Hospital Use & Cost	7	9
Equity[b]	15	4
Healthy Lives	1	1

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	10	29%
State rate worsened[c]	10	29%
No change in state rate[d]	14	41%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	18	43%
Top quartile	32	76%
2nd quartile	5	12%
3rd quartile	2	5%
Bottom quartile	3	7%
Bottom 5 states	2	5%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	15	4	15	3	4	8
Low-Income	14	6	7	2	3	2
Race/Ethnicity	20	3	8	1	1	6

ESTIMATED IMPACT If Minnesota improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	193,395	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	521,317	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	89,606	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	102,011	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	2,123	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	0	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	1,309	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	12,947	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	65,908	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	11	20	5	2	2007-08	10	17	-1	No Change
Children ages 0–18 uninsured	2011-12	7	8	3	13	2007-08	6	9	-1	No Change
Adults who went without care because of cost in past year	2012	11	15	9	5	2007	9	12	-2	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	10	16	10	1	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	12	14	6	15	2007	11	14	-1	No Change
Adults without a dental visit in past year	2012	11	15	10	2	2006	9	14	-2	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	76	78	89	34	2007	80	82	-4	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	47	43	52	5	2006	52	44	-5	Worsened
Children with a medical home	2011/12	61	57	69	11	2007	63	61	-2	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	60	69	81	45	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	72	63	86	5	2007	67	63	5	Improved
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	66	69	80	37	2009	42	43	24	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	13	19	12	3	2007	19	28	6	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	17	21	14	7	2007	15	19	-2	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	78	76	80	5	2007	77	75	1	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.2	12.8	11.9	2	07/2005 - 06/2008	11.9	12.6	-0.3	Worsened
Hospitalized patients given information about what to do during their recovery at home	2011	86	84	89	7	2007	82	80	4	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	69	66	71	4	2007	65	63	4	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	56	59	63	41	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	83	89	95	48	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	4	6	3	2	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	18	21.5	12	5	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	71	114	26	9	2004	122	137	51	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	20	27	13	7	2008	23	34	3	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	55	68	41	9	2008	68	80	13	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	41	45	26	18	2008	50	51.5	9	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	16	20	12	8	2006	17	20	1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	7	19	7	1	2006	7	19	0	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	17	17	14	25	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	165	183.5	129	6	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$4,973	$5,501	$4,180	10	2008	$4,129	$4,505	-$844	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$7,217	$8,526	$5,406	10	2008	$6,791	$7,942	-$426	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	57	82	57	1	2004-05	64	90.5	7	No Change
Years of potential life lost before age 75	2010	4,900	6,567	4,900	1	2005	5,198	7,252	298	No Change
Breast cancer deaths per 100,000 female population	2010	20.2	22.2	14.8	10	2005	22.6	23.9	2.4	Improved
Colorectal cancer deaths per 100,000 population	2010	14.3	16.2	12.0	10	2005	15.0	18.1	0.7	No Change
Suicide deaths per 100,000 population	2010	11.2	13.5	6.9	10	2005	10.5	11.8	-0.7	No Change
Infant mortality, deaths per 1,000 live births	2009	4.6	6.4	4.6	1	2004	4.6	6.8	0.0	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	20	27	19	2	2007	18	24	-2	Worsened
Adults who smoke	2012	19	19	10	22	2007	16	19	-3	Worsened
Adults ages 18–64 who are obese (BMI >= 30)	2012	25	28	21	9	2007	25	27	0	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	27	30.5	22	9	2007	23	31	-4	Worsened
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	7	10	5	3	2006	7	10	0	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	26	18	-8	13	2007-08	27	17	-10	1	Improved
Adults who went without care because of cost in past year	2012	24	17	-7	9	2007	17	13	-4	-7	Worsened
At risk adults without a doctor visit	2012	23	14	-9	27	2007	14	14	0	-9	Worsened
Adults without a usual source of care	2012	47	22	-25	43	2007	36	20	-16	-11	Worsened
Older adults without recommended preventive care	2012	69	58	-11	36	2006	*	56	*	*	*
Children without a medical home	2011/12	71	46	-25	47	2007	62	42	-20	-9	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	41	32	-9	28	--	--	--	--	--	--
Mortality amenable to health care	2009-10	119	86	-33	5	2004-05	129	96	-33	10	No Change
Infant mortality, deaths per 1,000 live births	2008-09	10.8	6.5	-4.3	12	2003-04	7.9	6.8	-1.1	-2.9	Worsened
Adults with poor health-related quality of life	2012	29	27	-2	5	2007	22	24	2	-7	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	22	18	-4	9	2007-08	23	17	-6	1	Improved
Adults who went without care because of cost in past year	2012	21	17	-4	8	2007	23	13	-10	2	Improved
At risk adults without a doctor visit	2012	13	14	1	10	2007	11	14	3	-2	No Change
Adults without a usual source of care	2012	25	22	-3	26	2007	26	20	-6	1	Improved
Older adults without recommended preventive care	2012	67	58	-9	18	2006	63	56	-7	-4	Worsened
Children without a medical home	2011/12	55	46	-9	31	2007	47	42	-5	-8	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	48	32	-16	48	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	20	25	5	4	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	35	27	-8	4	2007	32	24	-8	-3	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Mississippi

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**51**	**51**
Access & Affordability	46	51
Prevention & Treatment	45	45
Avoidable Hospital Use & Cost	50	51
Equity[b]	49	49
Healthy Lives	51	51

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	33	100%
State rate improved[c]	11	33%
State rate worsened[c]	10	30%
No change in state rate[d]	12	36%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	41	100%
Top 5 states	4	10%
Top quartile	4	10%
2nd quartile	2	5%
3rd quartile	4	10%
Bottom quartile	31	76%
Bottom 5 states	25	61%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	49	49	16	4	8	4
Low-Income	45	45	7	3	2	2
Race/Ethnicity	45	51	9	1	6	2

ESTIMATED IMPACT If Mississippi improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	295,435	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	325,412	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	138,785	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	152,911	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	33,521	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	2,205	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	3,376	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	32,116	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	232,505	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	22	20	5	35	2007-08	24	17	2	No Change
Children ages 0–18 uninsured	2011-12	9	8	3	30	2007-08	13	9	4	Improved
Adults who went without care because of cost in past year	2012	22	15	9	51	2007	18	12	-4	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	21	16	10	49	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	15	14	6	28	2007	16	14	1	No Change
Adults without a dental visit in past year	2012	20	15	10	49	2006	18	14	-2	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	74	78	89	41	2007	77	82	-3	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	38	43	52	42	2006	37	44	1	No Change
Children with a medical home	2011/12	49	57	69	47	2007	52	61	-3	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	60	69	81	45	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	53	63	86	45	2007	43	63	10	Improved
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	78	69	80	3	2009	59	43	19	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	29	19	12	50	2007	44	28	15	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	27	21	14	48	2007	26	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	78	76	80	5	2007	77	75	1	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.2	12.8	11.9	44	07/2005 - 06/2008	12.9	12.6	-0.3	Worsened
Hospitalized patients given information about what to do during their recovery at home	2011	79	84	89	49	2007	76	80	3	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	67	66	71	20	2007	64	63	3	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	63	59	63	1	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	92	89	95	4	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	7	6	3	30	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	26	21.5	12	45	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	*	114	26	*	2004	*	137	--	*
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	42	27	13	48	2008	52	34	10	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	91	68	41	48	2008	117	80	26	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	55	45	26	42	2008	68	51.5	13	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	23	20	12	39	2006	20	20	-3	Worsened
Long-stay nursing home residents hospitalized within a six-month period	2010	31	19	7	47	2006	31	19	0	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	18	17	14	42	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	229	183.5	129	48	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,745	$5,501	$4,180	39	2008	$5,027	$4,505	-$718	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$10,038	$8,526	$5,406	48	2008	$9,473	$7,942	-$565	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	136	82	57	51	2004-05	142	90.5	6	No Change
Years of potential life lost before age 75	2010	9,781	6,567	4,900	51	2005	10,898	7,252	1,117	Improved
Breast cancer deaths per 100,000 female population	2010	25.0	22.2	14.8	50	2005	26.1	23.9	1.1	No Change
Colorectal cancer deaths per 100,000 population	2010	20.5	16.2	12.0	51	2005	20.2	18.1	-0.3	No Change
Suicide deaths per 100,000 population	2010	13.0	13.5	6.9	22	2005	12.7	11.8	-0.3	No Change
Infant mortality, deaths per 1,000 live births	2009	10.1	6.4	4.6	50	2004	9.9	6.8	-0.2	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	32	27	19	46	2007	28	24	-4	Worsened
Adults who smoke	2012	24	19	10	43	2007	24	19	0	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	36	28	21	50	2007	34	27	-2	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	40	30.5	22	50	2007	44	31	4	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	18	10	5	49	2006	18	10	0	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	25	18	-7	10	2007-08	48	17	-31	23	Improved
Adults who went without care because of cost in past year	2012	28	17	-11	26	2007	25	13	-12	-3	No Change
At risk adults without a doctor visit	2012	21	14	-7	22	2007	25	14	-11	4	Improved
Adults without a usual source of care	2012	37	22	-15	21	2007	47	20	-27	10	Improved
Older adults without recommended preventive care	2012	67	58	-9	24	2006	78	56	-22	11	Improved
Children without a medical home	2011/12	84	46	-38	51	2007	68	42	-26	-16	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	56	32	-24	51	--	--	--	--	--	--
Mortality amenable to health care	2009-10	204	86	-118	37	2004-05	221	96	-125	17	Improved
Infant mortality, deaths per 1,000 live births	2008-09	13.1	6.5	-6.6	30	2003-04	14.8	6.8	-8	1.7	Improved
Adults with poor health-related quality of life	2012	45	27	-18	49	2007	36	24	-12	-9	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	27	18	-9	19	2007-08	36	17	-19	9	Improved
Adults who went without care because of cost in past year	2012	35	17	-18	46	2007	32	13	-19	-3	No Change
At risk adults without a doctor visit	2012	17	14	-3	26	2007	19	14	-5	2	Improved
Adults without a usual source of care	2012	28	22	-6	32	2007	27	20	-7	-1	No Change
Older adults without recommended preventive care	2012	72	58	-14	35	2006	68	56	-12	-4	Worsened
Children without a medical home	2011/12	60	46	-14	42	2007	59	42	-17	-1	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	46	32	-14	44	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	45	25	-20	51	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	47	27	-20	43	2007	39	24	-15	-8	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Missouri

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**34**	**35**
Access & Affordability	27	29
Prevention & Treatment	28	33
Avoidable Hospital Use & Cost	39	37
Equity[b]	26	20
Healthy Lives	40	39

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	11	32%
State rate worsened[c]	11	32%
No change in state rate[d]	12	35%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	0	0%
Top quartile	2	5%
2nd quartile	13	31%
3rd quartile	19	45%
Bottom quartile	8	19%
Bottom 5 states	1	2%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	26	20	16	4	6	6
Low-Income	29	28	7	2	2	3
Race/Ethnicity	25	14	9	2	4	3

ESTIMATED IMPACT If Missouri improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	500,965	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	448,661	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	188,896	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	98,789	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	24,646	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	2,111	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	4,946	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	37,858	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	255,527	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	19	20	5	22	2007-08	16	17	-3	Worsened
Children ages 0–18 uninsured	2011-12	11	8	3	40	2007-08	9	9	-2	Worsened
Adults who went without care because of cost in past year	2012	15	15	9	21	2007	14	12	-1	No Change
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	15	16	10	20	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	16	14	6	34	2007	16	14	0	No Change
Adults without a dental visit in past year	2012	15	15	10	25	2006	17	14	2	Improved
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	79	78	89	22	2007	84	82	-5	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	43	43	52	22	2006	46	44	-3	Worsened
Children with a medical home	2011/12	62	57	69	8	2007	65	61	-3	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	65	69	81	33	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	63	63	86	25	2007	74	63	-11	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	64	69	80	43	2009	31	43	33	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	20	19	12	31	2007	32	28	12	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	23	21	14	37	2007	21	19	-2	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	77	76	80	10	2007	72	75	5	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.7	12.8	11.9	22	07/2005 - 06/2008	12.6	12.6	-0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	84	84	89	20	2007	80	80	4	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	65	66	71	33	2007	62	63	3	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	60	59	63	14	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	88	89	95	30	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	6	6	3	19	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	25	21.5	12	40	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	159	114	26	35	2004	171	137	12	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	31	27	13	35	2008	40	34	9	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	73	68	41	31	2008	91	80	18	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	51	45	26	33	2008	64	51.5	13	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	22	20	12	33	2006	21	20	-1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	21	19	7	36	2006	22	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	17	17	14	25	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	192	183.5	129	33	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,789	$5,501	$4,180	41	2008	$4,636	$4,505	-$1,153	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,701	$8,526	$5,406	32	2008	$8,225	$7,942	-$476	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	95	82	57	37	2004-05	103	90.5	8	No Change
Years of potential life lost before age 75	2010	7,492	6,567	4,900	40	2005	7,961	7,252	469	No Change
Breast cancer deaths per 100,000 female population	2010	23.5	22.2	14.8	39	2005	28.1	23.9	4.6	Improved
Colorectal cancer deaths per 100,000 population	2010	17.2	16.2	12.0	36	2005	18.4	18.1	1.2	Improved
Suicide deaths per 100,000 population	2010	14.0	13.5	6.9	29	2005	12.5	11.8	-1.5	No Change
Infant mortality, deaths per 1,000 live births	2009	7.1	6.4	4.6	33	2004	7.5	6.8	0.4	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	29	27	19	34	2007	24	24	-5	Worsened
Adults who smoke	2012	24	19	10	43	2007	23	19	-1	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	30	28	21	34	2007	28	27	-2	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	28	30.5	22	13	2007	31	31	3	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	12	10	5	36	2006	10	10	-2	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	25	18	-7	10	2007-08	29	17	-12	4	Improved
Adults who went without care because of cost in past year	2012	25	17	-8	12	2007	21	13	-8	-4	No Change
At risk adults without a doctor visit	2012	29	14	-15	42	2007	19	14	-5	-10	Worsened
Adults without a usual source of care	2012	41	22	-19	28	2007	25	20	-5	-16	Worsened
Older adults without recommended preventive care	2012	67	58	-9	24	2006	78	56	-22	11	Improved
Children without a medical home	2011/12	58	46	-12	18	2007	54	42	-12	-4	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	41	32	-9	28	--	--	--	--	--	--
Mortality amenable to health care	2009-10	172	86	-86	26	2004-05	196	96	-100	24	Improved
Infant mortality, deaths per 1,000 live births	2008-09	13.4	6.5	-6.9	34	2003-04	13.9	6.8	-7.1	0.5	Improved
Adults with poor health-related quality of life	2012	35	27	-8	26	2007	27	24	-3	-8	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	30	18	-12	28	2007-08	26	17	-9	-4	Worsened
Adults who went without care because of cost in past year	2012	30	17	-13	30	2007	31	13	-18	1	Improved
At risk adults without a doctor visit	2012	21	14	-7	34	2007	22	14	-8	1	Improved
Adults without a usual source of care	2012	27	22	-5	31	2007	24	20	-4	-3	Worsened
Older adults without recommended preventive care	2012	65	58	-7	8	2006	65	56	-9	0	No Change
Children without a medical home	2011/12	47	46	-1	5	2007	44	42	-2	-3	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	45	32	-13	41	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	34	25	-9	38	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	46	27	-19	38	2007	39	24	-15	-7	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Montana

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**29**	**20**
Access & Affordability	44	41
Prevention & Treatment	28	26
Avoidable Hospital Use & Cost	6	9
Equity[b]	43	21
Healthy Lives	20	17

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	33	100%
State rate improved[c]	10	30%
State rate worsened[c]	11	33%
No change in state rate[d]	12	36%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	4	10%
Top quartile	13	31%
2nd quartile	10	24%
3rd quartile	10	24%
Bottom quartile	9	21%
Bottom 5 states	4	10%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	43	21	15	2	2	11
Low-Income	37	32	7	1	2	4
Race/Ethnicity	45	13	8	1	0	7

ESTIMATED IMPACT If Montana improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	122,025	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	122,758	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	61,252	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	24,094	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	3,014	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	148	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	112	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	4,265	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	29,443	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	26	20	5	44	2007-08	20	17	-6	Worsened
Children ages 0–18 uninsured	2011-12	12	8	3	43	2007-08	12	9	0	No Change
Adults who went without care because of cost in past year	2012	15	15	9	21	2007	13	12	-2	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	18	16	10	40	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	20	14	6	46	2007	21	14	1	No Change
Adults without a dental visit in past year	2012	17	15	10	38	2006	15	14	-2	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	73	78	89	44	2007	72	82	1	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	36	43	52	46	2006	45	44	-9	Worsened
Children with a medical home	2011/12	58	57	69	21	2007	62	61	-4	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	61	69	81	42	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	60	63	86	29	2007	68	63	-8	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	67	69	80	31	2009	39	43	28	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	17	19	12	18	2007	26	28	9	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	22	21	14	30	2007	22	19	0	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	77	76	80	10	2007	76	75	1	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.5	12.8	11.9	11	07/2005 - 06/2008	12.0	12.6	-0.5	Worsened
Hospitalized patients given information about what to do during their recovery at home	2011	82	84	89	34	2007	78	80	4	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	66	66	71	26	2007	64	63	2	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	55	59	63	45	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	91	89	95	9	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	5	6	3	5	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	20	21.5	12	14	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	77	114	26	11	2004	*	137	--	*
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	21	27	13	9	2008	30	34	9	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	58	68	41	11	2008	78	80	20	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	30	45	26	6	2008	43	51.5	13	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	14	20	12	3	2006	15	20	1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	12	19	7	4	2006	15	19	3	Improved
Home health patients also enrolled in Medicare with a hospital admission	2012	16	17	14	11	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	167	183.5	129	8	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,585	$5,501	$4,180	32	2008	$4,355	$4,505	-$1,230	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$6,589	$8,526	$5,406	4	2008	$6,746	$7,942	$157	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	73	82	57	15	2004-05	73	90.5	0	No Change
Years of potential life lost before age 75	2010	6,967	6,567	4,900	31	2005	7,442	7,252	475	No Change
Breast cancer deaths per 100,000 female population	2010	21.1	22.2	14.8	16	2005	23.6	23.9	2.5	Improved
Colorectal cancer deaths per 100,000 population	2010	14.0	16.2	12.0	6	2005	17.7	18.1	3.7	Improved
Suicide deaths per 100,000 population	2010	21.8	13.5	6.9	49	2005	21.7	11.8	-0.1	No Change
Infant mortality, deaths per 1,000 live births	2009	6.2	6.4	4.6	23	2004	4.6	6.8	-1.6	Worsened
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	28	27	19	32	2007	25	24	-3	Worsened
Adults who smoke	2012	20	19	10	27	2007	19	19	-1	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	24	28	21	6	2007	23	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	29	30.5	22	18	2007	26	31	-3	Worsened
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	10	10	5	23	2006	9	10	-1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	38	18	-20	41	2007-08	35	17	-18	-3	Worsened
Adults who went without care because of cost in past year	2012	31	17	-14	38	2007	18	13	-5	-13	Worsened
At risk adults without a doctor visit	2012	28	14	-14	40	2007	27	14	-13	-1	Worsened
Adults without a usual source of care	2012	33	22	-11	16	2007	33	20	-13	0	No Change
Older adults without recommended preventive care	2012	68	58	-10	28	2006	41	56	15	-27	Worsened
Children without a medical home	2011/12	60	46	-14	23	2007	55	42	-13	-5	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	50	32	-18	48	--	--	--	--	--	--
Mortality amenable to health care	2009-10	*	86	*	*	2004-05	*	96	*	*	*
Infant mortality, deaths per 1,000 live births	2008-09	9.7	6.5	-3.2	8	2003-04	8	6.8	-1.2	-1.7	Worsened
Adults with poor health-related quality of life	2012	44	27	-17	47	2007	36	24	-12	-8	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	34	18	-16	44	2007-08	32	17	-15	-2	Worsened
Adults who went without care because of cost in past year	2012	28	17	-11	25	2007	25	13	-12	-3	No Change
At risk adults without a doctor visit	2012	23	14	-9	41	2007	28	14	-14	5	Improved
Adults without a usual source of care	2012	29	22	-7	34	2007	34	20	-14	5	Improved
Older adults without recommended preventive care	2012	73	58	-15	43	2006	65	56	-9	-8	Worsened
Children without a medical home	2011/12	50	46	-4	11	2007	45	42	-3	-5	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	42	32	-10	36	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	30	25	-5	30	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	42	27	-15	23	2007	37	24	-13	-5	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Nebraska

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**17**	**17**
Access & Affordability	23	18
Prevention & Treatment	12	26
Avoidable Hospital Use & Cost	14	18
Equity[b]	32	27
Healthy Lives	12	17

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	12	35%
State rate worsened[c]	5	15%
No change in state rate[d]	17	50%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	7	17%
Top quartile	17	40%
2nd quartile	16	38%
3rd quartile	7	17%
Bottom quartile	2	5%
Bottom 5 states	1	2%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	32	27	16	2	7	7
Low-Income	25	21	7	0	3	4
Race/Ethnicity	39	36	9	2	4	3

ESTIMATED IMPACT If Nebraska improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	132,314	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	95,578	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	65,558	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	36,775	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	7,991	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	174	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	768	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	4,044	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	22,531	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	17	20	5	14	2007-08	15	17	-2	No Change
Children ages 0–18 uninsured	2011-12	9	8	3	30	2007-08	9	9	0	No Change
Adults who went without care because of cost in past year	2012	13	15	9	12	2007	10	12	-3	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	14	16	10	13	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	18	14	6	40	2007	17	14	-1	No Change
Adults without a dental visit in past year	2012	15	15	10	25	2006	12	14	-3	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	82	78	89	16	2007	84	82	-2	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	41	43	52	29	2006	42	44	-1	No Change
Children with a medical home	2011/12	61	57	69	11	2007	69	61	-8	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	70	69	81	18	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	71	63	86	7	2007	71	63	0	No Change
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	73	69	80	10	2009	38	43	35	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	18	19	12	21	2007	29	28	11	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	21	21	14	27	2007	20	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	79	76	80	2	2007	73	75	6	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.7	12.8	11.9	22	07/2005 - 06/2008	12.6	12.6	-0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	87	84	89	3	2007	82	80	5	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	69	66	71	4	2007	66	63	3	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	57	59	63	37	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	83	89	95	48	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	5	6	3	5	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	23	21.5	12	30	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	63	114	26	6	2004	102	137	39	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	24	27	13	18	2008	34	34	10	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	63	68	41	16	2008	83	80	20	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	39	45	26	15	2008	51	51.5	12	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	16	20	12	8	2006	15	20	-1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	17	19	7	19	2006	17	19	0	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	17	17	14	25	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	149	183.5	129	3	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,348	$5,501	$4,180	22	2008	$4,605	$4,505	-$743	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,061	$8,526	$5,406	21	2008	$7,822	$7,942	-$239	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	67	82	57	9	2004-05	72	90.5	5	No Change
Years of potential life lost before age 75	2010	5,555	6,567	4,900	10	2005	5,971	7,252	416	No Change
Breast cancer deaths per 100,000 female population	2010	19.3	22.2	14.8	3	2005	24.0	23.9	4.7	Improved
Colorectal cancer deaths per 100,000 population	2010	17.3	16.2	12.0	38	2005	18.6	18.1	1.3	Improved
Suicide deaths per 100,000 population	2010	10.4	13.5	6.9	9	2005	10.9	11.8	0.5	No Change
Infant mortality, deaths per 1,000 live births	2009	5.4	6.4	4.6	11	2004	6.5	6.8	1.1	Improved
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	24	27	19	13	2007	20	24	-4	Worsened
Adults who smoke	2012	20	19	10	27	2007	21	19	1	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	28	28	21	25	2007	27	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	29	30.5	22	18	2007	31	31	2	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	7	10	5	3	2006	8	10	1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	30	18	-12	26	2007-08	30	17	-13	0	No Change
Adults who went without care because of cost in past year	2012	29	17	-12	32	2007	29	13	-16	0	No Change
At risk adults without a doctor visit	2012	33	14	-19	46	2007	25	14	-11	-8	Worsened
Adults without a usual source of care	2012	41	22	-19	28	2007	52	20	-32	11	Improved
Older adults without recommended preventive care	2012	75	58	-17	46	2006	70	56	-14	-5	Worsened
Children without a medical home	2011/12	59	46	-13	21	2007	64	42	-22	5	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	37	32	-5	15	--	--	--	--	--	--
Mortality amenable to health care	2009-10	145	86	-59	10	2004-05	167	96	-71	22	Improved
Infant mortality, deaths per 1,000 live births	2008-09	13.1	6.5	-6.6	30	2003-04	14.4	6.8	-7.6	1.3	Improved
Adults with poor health-related quality of life	2012	36	27	-9	33	2007	25	24	-1	-11	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	28	18	-10	23	2007-08	30	17	-13	2	Improved
Adults who went without care because of cost in past year	2012	28	17	-11	25	2007	21	13	-8	-7	Worsened
At risk adults without a doctor visit	2012	24	14	-10	43	2007	25	14	-11	1	Improved
Adults without a usual source of care	2012	22	22	0	15	2007	23	20	-3	1	Improved
Older adults without recommended preventive care	2012	76	58	-18	49	2006	73	56	-17	-3	Worsened
Children without a medical home	2011/12	52	46	-6	16	2007	42	42	0	-10	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	36	32	-4	15	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	33	25	-8	36	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	39	27	-12	12	2007	32	24	-8	-7	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Nevada

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**46**	**46**
Access & Affordability	48	45
Prevention & Treatment	51	48
Avoidable Hospital Use & Cost	19	17
Equity[b]	50	46
Healthy Lives	36	40

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	11	32%
State rate worsened[c]	12	35%
No change in state rate[d]	11	32%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	2	5%
Top quartile	4	10%
2nd quartile	9	21%
3rd quartile	11	26%
Bottom quartile	18	43%
Bottom 5 states	11	26%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	50	46	16	2	8	6
Low-Income	51	49	7	1	3	3
Race/Ethnicity	42	45	9	1	5	3

ESTIMATED IMPACT If Nevada improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	393,586	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	444,724	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	128,140	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	159,101	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	5,774	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	1,018	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	746	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	6,761	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	100,029	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	29	20	5	48	2007-08	21	17	-8	Worsened
Children ages 0–18 uninsured	2011-12	20	8	3	51	2007-08	16	9	-4	Worsened
Adults who went without care because of cost in past year	2012	19	15	9	38	2007	14	12	-5	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	17	16	10	31	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	15	14	6	28	2007	22	14	7	Improved
Adults without a dental visit in past year	2012	20	15	10	49	2006	16	14	-4	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	67	78	89	50	2007	72	82	-5	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	37	43	52	44	2006	40	44	-3	Worsened
Children with a medical home	2011/12	45	57	69	50	2007	45	61	0	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	56	69	81	51	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	49	63	86	49	2007	53	63	-4	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	65	69	80	39	2009	39	43	26	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	21	19	12	35	2007	28	28	7	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	20	21	14	23	2007	17	19	-3	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	73	76	80	47	2007	74	75	-1	Worsened
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.2	12.8	11.9	44	07/2005 - 06/2008	13.4	12.6	0.2	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	82	84	89	34	2007	73	80	9	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	61	66	71	46	2007	52	63	9	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	58	59	63	28	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	92	89	95	4	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	7	6	3	30	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	20	21.5	12	14	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	112	114	26	20	2004	125	137	13	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	24	27	13	18	2008	30	34	6	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	60	68	41	13	2008	73	80	13	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	41	45	26	18	2008	48	51.5	7	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	23	20	12	39	2006	22	20	-1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	20	19	7	28	2006	16	19	-4	Worsened
Home health patients also enrolled in Medicare with a hospital admission	2012	16	17	14	11	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	167	183.5	129	8	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$4,357	$5,501	$4,180	2	2008	$3,457	$4,505	-$900	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,335	$8,526	$5,406	24	2008	$7,838	$7,942	-$497	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	97	82	57	40	2004-05	112	90.5	15	Improved
Years of potential life lost before age 75	2010	6,952	6,567	4,900	30	2005	8,146	7,252	1,194	Improved
Breast cancer deaths per 100,000 female population	2010	23.8	22.2	14.8	43	2005	24.1	23.9	0.3	No Change
Colorectal cancer deaths per 100,000 population	2010	17.4	16.2	12.0	39	2005	18.6	18.1	1.2	Improved
Suicide deaths per 100,000 population	2010	19.8	13.5	6.9	47	2005	19.8	11.8	0.0	No Change
Infant mortality, deaths per 1,000 live births	2009	5.8	6.4	4.6	16	2004	6.2	6.8	0.4	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	30	27	19	39	2007	26	24	-4	Worsened
Adults who smoke	2012	18	19	10	17	2007	22	19	4	Improved
Adults ages 18–64 who are obese (BMI >= 30)	2012	27	28	21	17	2007	26	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	33	30.5	22	34	2007	34	31	1	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	11	10	5	30	2006	12	10	1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	35	18	-17	36	2007-08	33	17	-16	-2	Worsened
Adults who went without care because of cost in past year	2012	27	17	-10	21	2007	19	13	-6	-8	Worsened
At risk adults without a doctor visit	2012	22	14	-8	25	2007	33	14	-19	11	Improved
Adults without a usual source of care	2012	48	22	-26	46	2007	50	20	-30	2	Improved
Older adults without recommended preventive care	2012	69	58	-11	36	2006	65	56	-9	-4	Worsened
Children without a medical home	2011/12	68	46	-22	42	2007	70	42	-28	2	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	50	32	-18	48	--	--	--	--	--	--
Mortality amenable to health care	2009-10	156	86	-70	18	2004-05	191	96	-95	35	Improved
Infant mortality, deaths per 1,000 live births	2008-09	9.6	6.5	-3.1	7	2003-04	12.1	6.8	-5.3	2.5	Improved
Adults with poor health-related quality of life	2012	34	27	-7	20	2007	32	24	-8	-2	No Change
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	43	18	-25	51	2007-08	38	17	-21	-5	Worsened
Adults who went without care because of cost in past year	2012	33	17	-16	41	2007	24	13	-11	-9	Worsened
At risk adults without a doctor visit	2012	21	14	-7	34	2007	30	14	-16	9	Improved
Adults without a usual source of care	2012	41	22	-19	49	2007	44	20	-24	3	Improved
Older adults without recommended preventive care	2012	72	58	-14	35	2006	71	56	-15	-1	No Change
Children without a medical home	2011/12	69	46	-23	50	2007	70	42	-28	1	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	50	32	-18	51	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	32	25	-7	32	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	42	27	-15	23	2007	36	24	-12	-6	Worsened

Notes:

* Data not available for this state.

-- Historical data not available or not comperable over time.

(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.

(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.

(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.

Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

New Hampshire

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**2**	**5**
Access & Affordability	5	4
Prevention & Treatment	3	8
Avoidable Hospital Use & Cost	12	15
Equity[b]	7	6
Healthy Lives	7	14

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	33	100%
State rate improved[c]	15	45%
State rate worsened[c]	6	18%
No change in state rate[d]	12	36%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	41	100%
Top 5 states	15	37%
Top quartile	24	59%
2nd quartile	11	27%
3rd quartile	4	10%
Bottom quartile	2	5%
Bottom 5 states	1	2%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	7	6	14	3	6	5
Low-Income	13	13	7	1	3	3
Race/Ethnicity	2	1	7	2	3	2

ESTIMATED IMPACT If New Hampshire improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	98,404	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	10,207	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	19,172	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	5,609	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	1,388	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	37	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	425	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	10,228	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	41,894	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	17	20	5	14	2007-08	14	17	-3	Worsened
Children ages 0–18 uninsured	2011-12	7	8	3	13	2007-08	5	9	-2	Worsened
Adults who went without care because of cost in past year	2012	13	15	9	12	2007	10	12	-3	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	11	16	10	3	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	10	14	6	7	2007	12	14	2	Improved
Adults without a dental visit in past year	2012	10	15	10	1	2006	10	14	0	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	88	78	89	2	2007	88	82	0	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	48	43	52	2	2006	49	44	-1	No Change
Children with a medical home	2011/12	67	57	69	2	2007	69	61	-2	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	79	69	81	2	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	66	63	86	13	2007	63	63	3	No Change
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	80	69	80	1	2009	39	43	41	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	14	19	12	8	2007	21	28	7	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	20	21	14	23	2007	18	19	-2	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	78	76	80	5	2007	74	75	4	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.3	12.8	11.9	47	07/2005 - 06/2008	13.8	12.6	0.5	Improved
Hospitalized patients given information about what to do during their recovery at home	2011	88	84	89	2	2007	85	80	3	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	69	66	71	4	2007	67	63	2	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	58	59	63	28	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	86	89	95	41	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	4	6	3	2	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	24	21.5	12	34	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	*	114	26	*	2004	54	137	--	*
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	23	27	13	15	2008	31	34	8	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	64	68	41	17	2008	75	80	11	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	36	45	26	12	2008	43	51.5	7	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	16	20	12	8	2006	15	20	-1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	13	19	7	9	2006	12	19	-1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	16	17	14	11	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	194	183.5	129	35	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,132	$5,501	$4,180	13	2008	$4,734	$4,505	-$398	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$7,622	$8,526	$5,406	16	2008	$7,155	$7,942	-$467	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	60	82	57	3	2004-05	73	90.5	13	Improved
Years of potential life lost before age 75	2010	5,097	6,567	4,900	4	2005	5,655	7,252	558	No Change
Breast cancer deaths per 100,000 female population	2010	21.7	22.2	14.8	21	2005	23.9	23.9	2.2	Improved
Colorectal cancer deaths per 100,000 population	2010	14.2	16.2	12.0	8	2005	18.3	18.1	4.1	Improved
Suicide deaths per 100,000 population	2010	14.1	13.5	6.9	32	2005	12.0	11.8	-2.1	Worsened
Infant mortality, deaths per 1,000 live births	2009	4.9	6.4	4.6	3	2004	5.6	6.8	0.7	Improved
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	24	27	19	13	2007	23	24	-1	No Change
Adults who smoke	2012	17	19	10	10	2007	19	19	2	Improved
Adults ages 18–64 who are obese (BMI >= 30)	2012	27	28	21	17	2007	26	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	26	30.5	22	5	2007	29	31	3	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	10	10	5	23	2006	10	10	0	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	27	18	-9	15	2007-08	33	17	-16	6	Improved
Adults who went without care because of cost in past year	2012	22	17	-5	5	2007	20	13	-7	-2	No Change
At risk adults without a doctor visit	2012	20	14	-6	18	2007	15	14	-1	-5	Worsened
Adults without a usual source of care	2012	14	22	8	2	2007	20	20	0	6	Improved
Older adults without recommended preventive care	2012	56	58	2	3	2006	43	56	13	-13	No Change
Children without a medical home	2011/12	57	46	-11	13	2007	48	42	-6	-9	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	25	32	7	2	--	--	--	--	--	--
Mortality amenable to health care	2009-10	*	86	*	*	2004-05	86	96	10	*	*
Infant mortality, deaths per 1,000 live births	2008-09	*	6.5	*	*	2003-04	*	6.8	*	*	*
Adults with poor health-related quality of life	2012	21	27	6	2	2007	29	24	-5	8	Improved
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	32	18	-14	38	2007-08	29	17	-12	-3	Worsened
Adults who went without care because of cost in past year	2012	24	17	-7	10	2007	25	13	-12	1	Improved
At risk adults without a doctor visit	2012	14	14	0	14	2007	17	14	-3	3	Improved
Adults without a usual source of care	2012	16	22	6	5	2007	19	20	1	3	Improved
Older adults without recommended preventive care	2012	66	58	-8	11	2006	62	56	-6	-4	Worsened
Children without a medical home	2011/12	51	46	-5	15	2007	39	42	3	-12	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	30	32	2	5	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	25	25	0	17	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	46	27	-19	38	2007	44	24	-20	-2	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

New Jersey

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**15**	**23**
Access & Affordability	20	24
Prevention & Treatment	20	20
Avoidable Hospital Use & Cost	30	34
Equity[b]	15	21
Healthy Lives	7	19

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	13	38%
State rate worsened[c]	9	26%
No change in state rate[d]	12	35%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	5	12%
Top quartile	18	43%
2nd quartile	10	24%
3rd quartile	5	12%
Bottom quartile	9	21%
Bottom 5 states	5	12%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	15	21	16	6	6	4
Low-Income	22	29	7	4	2	1
Race/Ethnicity	11	17	9	2	4	3

ESTIMATED IMPACT If New Jersey improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	845,108	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	397,314	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	320,933	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	324,812	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	13,937	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	1,629	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	9,341	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	36,120	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	216,352	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	21	20	5	32	2007-08	18	17	-3	Worsened
Children ages 0–18 uninsured	2011-12	8	8	3	20	2007-08	11	9	3	Improved
Adults who went without care because of cost in past year	2012	15	15	9	21	2007	12	12	-3	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	14	16	10	13	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	10	14	6	7	2007	10	14	0	No Change
Adults without a dental visit in past year	2012	14	15	10	17	2006	14	14	0	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	83	78	89	12	2007	86	82	-3	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	41	43	52	29	2006	44	44	-3	Worsened
Children with a medical home	2011/12	53	57	69	40	2007	57	61	-4	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	76	69	81	6	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	58	63	86	35	2007	55	63	3	No Change
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	72	69	80	17	2009	45	43	27	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	15	19	12	12	2007	21	28	6	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	20	21	14	23	2007	18	19	-2	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	76	76	80	21	2007	74	75	2	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.3	12.8	11.9	6	07/2005 - 06/2008	12.4	12.6	0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	79	84	89	49	2007	75	80	4	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	61	66	71	46	2007	59	63	2	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	62	59	63	5	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	91	89	95	9	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	9	6	3	49	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	17	21.5	12	4	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	159	114	26	35	2004	176	137	17	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	27	27	13	24	2008	36	34	9	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	73	68	41	31	2008	88	80	15	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	57	45	26	44	2008	71	51.5	14	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	23	20	12	39	2006	24	20	1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	26	19	7	45	2006	27	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	16	17	14	11	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	169	183.5	129	12	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$4,811	$5,501	$4,180	5	2008	$3,955	$4,505	-$856	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$9,551	$8,526	$5,406	45	2008	$8,851	$7,942	-$700	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	77	82	57	22	2004-05	90	90.5	13	Improved
Years of potential life lost before age 75	2010	5,360	6,567	4,900	8	2005	6,085	7,252	725	Improved
Breast cancer deaths per 100,000 female population	2010	23.3	22.2	14.8	38	2005	27.0	23.9	3.7	Improved
Colorectal cancer deaths per 100,000 population	2010	16.3	16.2	12.0	26	2005	19.1	18.1	2.8	Improved
Suicide deaths per 100,000 population	2010	7.8	13.5	6.9	3	2005	6.1	11.8	-1.7	Worsened
Infant mortality, deaths per 1,000 live births	2009	5.2	6.4	4.6	8	2004	5.6	6.8	0.4	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	23	27	19	6	2007	23	24	0	No Change
Adults who smoke	2012	17	19	10	10	2007	17	19	0	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	24	28	21	6	2007	24	27	0	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	25	30.5	22	3	2007	31	31	6	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	9	10	5	13	2006	10	10	1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	29	18	-11	22	2007-08	32	17	-15	3	Improved
Adults who went without care because of cost in past year	2012	30	17	-13	34	2007	26	13	-13	-4	No Change
At risk adults without a doctor visit	2012	14	14	0	7	2007	13	14	1	-1	Worsened
Adults without a usual source of care	2012	34	22	-12	17	2007	29	20	-9	-5	Worsened
Older adults without recommended preventive care	2012	68	58	-10	28	2006	66	56	-10	-2	No Change
Children without a medical home	2011/12	64	46	-18	33	2007	65	42	-23	1	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	30	32	2	5	--	--	--	--	--	--
Mortality amenable to health care	2009-10	141	86	-55	9	2004-05	169	96	-73	28	Improved
Infant mortality, deaths per 1,000 live births	2008-09	12.4	6.5	-5.9	25	2003-04	11.8	6.8	-5	-0.6	Worsened
Adults with poor health-related quality of life	2012	33	27	-6	15	2007	34	24	-10	1	Improved
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	35	18	-17	45	2007-08	35	17	-18	0	No Change
Adults who went without care because of cost in past year	2012	30	17	-13	30	2007	28	13	-15	-2	No Change
At risk adults without a doctor visit	2012	14	14	0	14	2007	11	14	3	-3	Worsened
Adults without a usual source of care	2012	24	22	-2	22	2007	24	20	-4	0	No Change
Older adults without recommended preventive care	2012	72	58	-14	35	2006	72	56	-16	0	No Change
Children without a medical home	2011/12	57	46	-11	35	2007	63	42	-21	6	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	34	32	-2	11	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	24	25	1	15	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	37	27	-10	7	2007	42	24	-18	5	Improved

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

New Mexico

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**36**	**35**
Access & Affordability	51	49
Prevention & Treatment	45	42
Avoidable Hospital Use & Cost	7	7
Equity[b]	35	31
Healthy Lives	33	31

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	33	100%
State rate improved[c]	11	33%
State rate worsened[c]	9	27%
No change in state rate[d]	13	39%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	41	100%
Top 5 states	2	5%
Top quartile	7	17%
2nd quartile	11	27%
3rd quartile	10	24%
Bottom quartile	13	32%
Bottom 5 states	9	22%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	35	31	16	5	5	6
Low-Income	42	45	7	3	3	1
Race/Ethnicity	25	17	9	2	2	5

ESTIMATED IMPACT If New Mexico improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	284,064	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	290,051	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	113,927	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	107,541	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	8,318	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	460	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	279	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	6,997	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	48,262	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	29	20	5	48	2007-08	29	17	0	No Change
Children ages 0–18 uninsured	2011-12	13	8	3	46	2007-08	16	9	3	Improved
Adults who went without care because of cost in past year	2012	19	15	9	38	2007	15	12	-4	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	19	16	10	42	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	20	14	6	46	2007	18	14	-2	Worsened
Adults without a dental visit in past year	2012	18	15	10	41	2006	17	14	-1	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	70	78	89	47	2007	75	82	-5	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	36	43	52	46	2006	39	44	-3	Worsened
Children with a medical home	2011/12	48	57	69	48	2007	49	61	-1	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	70	69	81	18	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	58	63	86	35	2007	53	63	5	Improved
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	72	69	80	17	2009	46	43	26	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	22	19	12	38	2007	30	28	8	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	23	21	14	37	2007	19	19	-4	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	73	76	80	47	2007	72	75	1	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.7	12.8	11.9	22	07/2005 - 06/2008	12.6	12.6	-0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	81	84	89	41	2007	77	80	4	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	66	66	71	26	2007	61	63	5	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	58	59	63	28	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	91	89	95	9	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	7	6	3	30	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	21	21.5	12	21	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	*	114	26	*	2004	*	137	--	*
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	23	27	13	15	2008	28	34	5	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	58	68	41	11	2008	69	80	11	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	33	45	26	8	2008	38	51.5	5	No Change
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	18	20	12	16	2006	18	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	15	19	7	16	2006	14	19	-1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	15	17	14	2	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	171	183.5	129	15	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,274	$5,501	$4,180	18	2008	$4,268	$4,505	-$1,006	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$6,807	$8,526	$5,406	5	2008	$6,558	$7,942	-$249	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	81	82	57	25	2004-05	83	90.5	2	No Change
Years of potential life lost before age 75	2010	7,609	6,567	4,900	41	2005	8,053	7,252	444	No Change
Breast cancer deaths per 100,000 female population	2010	22.2	22.2	14.8	26	2005	22.5	23.9	0.3	No Change
Colorectal cancer deaths per 100,000 population	2010	14.3	16.2	12.0	10	2005	16.4	18.1	2.1	Improved
Suicide deaths per 100,000 population	2010	20.1	13.5	6.9	48	2005	17.8	11.8	-2.3	Worsened
Infant mortality, deaths per 1,000 live births	2009	5.3	6.4	4.6	9	2004	6.5	6.8	1.2	Improved
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	31	27	19	43	2007	27	24	-4	Worsened
Adults who smoke	2012	19	19	10	22	2007	21	19	2	Improved
Adults ages 18–64 who are obese (BMI >= 30)	2012	29	28	21	29	2007	26	27	-3	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	33	30.5	22	34	2007	33	31	0	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	9	10	5	13	2006	9	10	0	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	39	18	-21	44	2007-08	41	17	-24	2	Improved
Adults who went without care because of cost in past year	2012	25	17	-8	12	2007	21	13	-8	-4	No Change
At risk adults without a doctor visit	2012	24	14	-10	31	2007	22	14	-8	-2	Worsened
Adults without a usual source of care	2012	42	22	-20	35	2007	35	20	-15	-7	Worsened
Older adults without recommended preventive care	2012	72	58	-14	45	2006	71	56	-15	-1	No Change
Children without a medical home	2011/12	61	46	-15	27	2007	70	42	-28	9	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	32	32	0	6	--	--	--	--	--	--
Mortality amenable to health care	2009-10	114	86	-28	4	2004-05	108	96	-12	-6	Worsened
Infant mortality, deaths per 1,000 live births	2008-09	13	6.5	-6.5	28	2003-04	6.8	6.8	0	-6.2	Worsened
Adults with poor health-related quality of life	2012	34	27	-7	20	2007	29	24	-5	-5	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	36	18	-18	48	2007-08	39	17	-22	3	Improved
Adults who went without care because of cost in past year	2012	31	17	-14	34	2007	27	13	-14	-4	No Change
At risk adults without a doctor visit	2012	26	14	-12	44	2007	25	14	-11	-1	Worsened
Adults without a usual source of care	2012	38	22	-16	47	2007	36	20	-16	-2	No Change
Older adults without recommended preventive care	2012	72	58	-14	35	2006	73	56	-17	1	Improved
Children without a medical home	2011/12	61	46	-15	44	2007	62	42	-20	1	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	33	32	-1	8	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	29	25	-4	27	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	41	27	-14	18	2007	38	24	-14	-3	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

New York

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**19**	**18**
Access & Affordability	17	22
Prevention & Treatment	28	20
Avoidable Hospital Use & Cost	36	34
Equity[b]	7	12
Healthy Lives	12	21

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	16	47%
State rate worsened[c]	7	21%
No change in state rate[d]	11	32%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	4	10%
Top quartile	12	29%
2nd quartile	14	33%
3rd quartile	8	19%
Bottom quartile	8	19%
Bottom 5 states	6	14%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	7	12	16	5	9	2
Low-Income	8	14	7	2	4	1
Race/Ethnicity	8	14	9	3	5	1

ESTIMATED IMPACT If New York improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	1,342,092	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	902,988	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	517,093	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	686,542	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	7,104	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	4,540	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	16,800	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	65,309	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	620,757	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	16	20	5	13	2007-08	17	17	1	No Change
Children ages 0–18 uninsured	2011-12	6	8	3	9	2007-08	8	9	2	Improved
Adults who went without care because of cost in past year	2012	15	15	9	21	2007	12	12	-3	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	14	16	10	13	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	11	14	6	11	2007	12	14	1	No Change
Adults without a dental visit in past year	2012	15	15	10	25	2006	15	14	0	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	83	78	89	12	2007	84	82	-1	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	44	43	52	16	2006	46	44	-2	Worsened
Children with a medical home	2011/12	53	57	69	40	2007	57	61	-4	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	73	69	81	10	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	64	63	86	23	2007	61	63	3	No Change
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	64	69	80	43	2009	48	43	16	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	13	19	12	3	2007	18	28	5	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	18	21	14	10	2007	16	19	-2	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	75	76	80	31	2007	75	75	0	No Change
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.6	12.8	11.9	15	07/2005 - 06/2008	13.0	12.6	0.4	Improved
Hospitalized patients given information about what to do during their recovery at home	2011	81	84	89	41	2007	79	80	2	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	61	66	71	46	2007	59	63	2	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	58	59	63	28	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	88	89	95	30	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	8	6	3	46	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	20	21.5	12	14	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	223	114	26	43	2004	284	137	61	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	28	27	13	30	2008	35	34	7	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	73	68	41	31	2008	88	80	15	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	59	45	26	46	2008	69	51.5	10	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	22	20	12	33	2006	22	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	19	19	7	23	2006	21	19	2	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	18	17	14	42	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	172	183.5	129	16	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,050	$5,501	$4,180	11	2008	$3,882	$4,505	-$1,168	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,997	$8,526	$5,406	36	2008	$8,393	$7,942	-$604	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	82	82	57	26	2004-05	93	90.5	11	Improved
Years of potential life lost before age 75	2010	5,362	6,567	4,900	9	2005	6,024	7,252	662	Improved
Breast cancer deaths per 100,000 female population	2010	21.8	22.2	14.8	23	2005	24.4	23.9	2.6	Improved
Colorectal cancer deaths per 100,000 population	2010	15.4	16.2	12.0	20	2005	17.1	18.1	1.7	Improved
Suicide deaths per 100,000 population	2010	7.7	13.5	6.9	2	2005	6.0	11.8	-1.7	Worsened
Infant mortality, deaths per 1,000 live births	2009	5.4	6.4	4.6	11	2004	6.2	6.8	0.8	Improved
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	26	27	19	19	2007	26	24	0	No Change
Adults who smoke	2012	16	19	10	4	2007	18	19	2	Improved
Adults ages 18–64 who are obese (BMI >= 30)	2012	23	28	21	2	2007	25	27	2	Improved
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	32	30.5	22	31	2007	33	31	1	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	10	10	5	23	2006	10	10	0	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	20	18	-2	6	2007-08	24	17	-7	4	Improved
Adults who went without care because of cost in past year	2012	27	17	-10	21	2007	25	13	-12	-2	No Change
At risk adults without a doctor visit	2012	15	14	-1	10	2007	14	14	0	-1	Worsened
Adults without a usual source of care	2012	30	22	-8	13	2007	30	20	-10	0	No Change
Older adults without recommended preventive care	2012	68	58	-10	28	2006	66	56	-10	-2	No Change
Children without a medical home	2011/12	61	46	-15	27	2007	63	42	-21	2	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	35	32	-3	12	--	--	--	--	--	--
Mortality amenable to health care	2009-10	129	86	-43	8	2004-05	149	96	-53	20	Improved
Infant mortality, deaths per 1,000 live births	2008-09	10.9	6.5	-4.4	14	2003-04	12.1	6.8	-5.3	1.2	Improved
Adults with poor health-related quality of life	2012	36	27	-9	33	2007	43	24	-19	7	Improved
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	21	18	-3	7	2007-08	25	17	-8	4	Improved
Adults who went without care because of cost in past year	2012	26	17	-9	20	2007	24	13	-11	-2	No Change
At risk adults without a doctor visit	2012	14	14	0	14	2007	14	14	0	0	No Change
Adults without a usual source of care	2012	20	22	2	11	2007	24	20	-4	4	Improved
Older adults without recommended preventive care	2012	62	58	-4	2	2006	68	56	-12	6	Improved
Children without a medical home	2011/12	61	46	-15	44	2007	54	42	-12	-7	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	36	32	-4	15	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	19	25	6	2	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	37	27	-10	7	2007	40	24	-16	3	Improved

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

North Carolina

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**36**	**44**
Access & Affordability	31	41
Prevention & Treatment	28	33
Avoidable Hospital Use & Cost	29	28
Equity[b]	47	42
Healthy Lives	36	42

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	15	44%
State rate worsened[c]	7	21%
No change in state rate[d]	12	35%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	1	2%
Top quartile	4	10%
2nd quartile	13	31%
3rd quartile	16	38%
Bottom quartile	9	21%
Bottom 5 states	2	5%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	47	42	16	2	7	7
Low-Income	37	32	7	1	3	3
Race/Ethnicity	51	46	9	1	4	4

ESTIMATED IMPACT If North Carolina improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	1,090,803	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	934,624	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	189,304	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	324,224	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	53,200	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	3,415	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	5,355	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	60,074	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	470,484	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	24	20	5	41	2007-08	21	17	-3	Worsened
Children ages 0–18 uninsured	2011-12	9	8	3	30	2007-08	11	9	2	Improved
Adults who went without care because of cost in past year	2012	19	15	9	38	2007	17	12	-2	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	19	16	10	42	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	12	14	6	15	2007	13	14	1	No Change
Adults without a dental visit in past year	2012	14	15	10	17	2006	16	14	2	Improved
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	76	78	89	34	2007	78	82	-2	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	46	43	52	9	2006	48	44	-2	Worsened
Children with a medical home	2011/12	55	57	69	35	2007	61	61	-6	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	67	69	81	31	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	54	63	86	42	2007	62	63	-8	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	75	69	80	5	2009	40	43	35	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	23	19	12	41	2007	35	28	12	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	23	21	14	37	2007	22	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	76	76	80	21	2007	74	75	2	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.1	12.8	11.9	38	07/2005 - 06/2008	13.0	12.6	-0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	84	84	89	20	2007	81	80	3	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	68	66	71	10	2007	66	63	2	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	59	59	63	21	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	89	89	95	23	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	8	6	3	46	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	19	21.5	12	10	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	119	114	26	26	2004	131	137	12	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	29	27	13	32	2008	35	34	6	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	67	68	41	25	2008	78	80	11	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	45	45	26	26	2008	51	51.5	6	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	19	20	12	18	2006	19	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	19	19	7	23	2006	20	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	17	17	14	25	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	194	183.5	129	35	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$6,234	$5,501	$4,180	48	2008	$4,937	$4,505	-$1,297	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,254	$8,526	$5,406	22	2008	$7,565	$7,942	-$689	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	95	82	57	37	2004-05	108	90.5	13	Improved
Years of potential life lost before age 75	2010	7,021	6,567	4,900	32	2005	7,964	7,252	943	Improved
Breast cancer deaths per 100,000 female population	2010	23.5	22.2	14.8	39	2005	25.1	23.9	1.6	Improved
Colorectal cancer deaths per 100,000 population	2010	14.9	16.2	12.0	15	2005	17.2	18.1	2.3	Improved
Suicide deaths per 100,000 population	2010	12.0	13.5	6.9	16	2005	11.4	11.8	-0.6	No Change
Infant mortality, deaths per 1,000 live births	2009	7.9	6.4	4.6	44	2004	8.7	6.8	0.8	Improved
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	27	27	19	26	2007	26	24	-1	No Change
Adults who smoke	2012	21	19	10	35	2007	22	19	1	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	31	28	21	40	2007	30	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	31	30.5	22	27	2007	34	31	3	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	13	10	5	38	2006	13	10	0	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	44	18	-26	50	2007-08	47	17	-30	3	Improved
Adults who went without care because of cost in past year	2012	33	17	-16	44	2007	30	13	-17	-3	No Change
At risk adults without a doctor visit	2012	35	14	-21	49	2007	26	14	-12	-9	Worsened
Adults without a usual source of care	2012	59	22	-37	51	2007	61	20	-41	2	Improved
Older adults without recommended preventive care	2012	77	58	-19	48	2006	60	56	-4	-17	Worsened
Children without a medical home	2011/12	64	46	-18	33	2007	59	42	-17	-5	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	40	32	-8	25	--	--	--	--	--	--
Mortality amenable to health care	2009-10	157	86	-71	19	2004-05	186	96	-90	29	Improved
Infant mortality, deaths per 1,000 live births	2008-09	14.7	6.5	-8.2	42	2003-04	15.6	6.8	-8.8	0.9	Improved
Adults with poor health-related quality of life	2012	39	27	-12	41	2007	33	24	-9	-6	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	31	18	-13	33	2007-08	32	17	-15	1	Improved
Adults who went without care because of cost in past year	2012	31	17	-14	34	2007	30	13	-17	-1	No Change
At risk adults without a doctor visit	2012	16	14	-2	23	2007	19	14	-5	3	Improved
Adults without a usual source of care	2012	31	22	-9	42	2007	32	20	-12	1	Improved
Older adults without recommended preventive care	2012	67	58	-9	18	2006	64	56	-8	-3	Worsened
Children without a medical home	2011/12	56	46	-10	33	2007	47	42	-5	-9	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	41	32	-9	31	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	38	25	-13	42	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	43	27	-16	29	2007	39	24	-15	-4	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

North Dakota

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**14**	**9**
Access & Affordability	9	12
Prevention & Treatment	17	16
Avoidable Hospital Use & Cost	14	8
Equity[b]	18	9
Healthy Lives	29	13

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	33	100%
State rate improved[c]	9	27%
State rate worsened[c]	11	33%
No change in state rate[d]	13	39%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	41	100%
Top 5 states	8	20%
Top quartile	13	32%
2nd quartile	15	37%
3rd quartile	7	17%
Bottom quartile	6	15%
Bottom 5 states	2	5%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	18	9	13	4	5	4
Low-Income	15	14	7	4	1	2
Race/Ethnicity	22	7	6	0	4	2

ESTIMATED IMPACT If North Dakota improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	37,983	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	78,250	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	22,453	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	10,755	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	1,216	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	114	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	334	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	4,191	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	8,627	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	14	20	5	7	2007-08	14	17	0	No Change
Children ages 0–18 uninsured	2011-12	5	8	3	4	2007-08	8	9	3	Improved
Adults who went without care because of cost in past year	2012	9	15	9	1	2007	6	12	-3	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	13	16	10	7	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	14	14	6	24	2007	15	14	1	No Change
Adults without a dental visit in past year	2012	14	15	10	17	2006	11	14	-3	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	74	78	89	41	2007	78	82	-4	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	42	43	52	27	2006	43	44	-1	No Change
Children with a medical home	2011/12	62	57	69	8	2007	64	61	-2	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	61	69	81	42	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	86	63	86	1	2007	72	63	14	Improved
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	72	69	80	17	2009	43	43	29	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	14	19	12	8	2007	23	28	9	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	16	21	14	2	2007	15	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	73	76	80	47	2007	71	75	2	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.4	12.8	11.9	8	07/2005 - 06/2008	11.9	12.6	-0.5	Worsened
Hospitalized patients given information about what to do during their recovery at home	2011	84	84	89	20	2007	81	80	3	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	65	66	71	33	2007	61	63	4	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	54	59	63	49	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	89	89	95	23	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	5	6	3	5	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	20	21.5	12	14	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	*	114	26	*	2004	*	137	--	*
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	23	27	13	15	2008	31	34	8	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	65	68	41	19	2008	76	80	11	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	41	45	26	18	2008	45	51.5	4	No Change
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	18	20	12	16	2006	15	20	-3	Worsened
Long-stay nursing home residents hospitalized within a six-month period	2010	14	19	7	13	2006	15	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	15	17	14	2	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	179	183.5	129	23	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,377	$5,501	$4,180	24	2008	$3,830	$4,505	-$1,547	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$7,528	$8,526	$5,406	14	2008	$6,972	$7,942	-$556	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	75	82	57	20	2004-05	73	90.5	-2	No Change
Years of potential life lost before age 75	2010	6,099	6,567	4,900	21	2005	6,097	7,252	-2	No Change
Breast cancer deaths per 100,000 female population	2010	23.0	22.2	14.8	35	2005	22.8	23.9	-0.2	No Change
Colorectal cancer deaths per 100,000 population	2010	17.6	16.2	12.0	43	2005	18.9	18.1	1.3	Improved
Suicide deaths per 100,000 population	2010	15.6	13.5	6.9	38	2005	13.7	11.8	-1.9	Worsened
Infant mortality, deaths per 1,000 live births	2009	6.3	6.4	4.6	26	2004	5.9	6.8	-0.4	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	19	27	19	1	2007	17	24	-2	Worsened
Adults who smoke	2012	20	19	10	27	2007	20	19	0	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	29	28	21	29	2007	27	27	-2	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	36	30.5	22	45	2007	26	31	-10	Worsened
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	7	10	5	3	2006	7	10	0	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	30	18	-12	26	2007-08	31	17	-14	1	Improved
Adults who went without care because of cost in past year	2012	30	17	-13	34	2007	10	13	3	-20	Worsened
At risk adults without a doctor visit	2012	*	14	*	*	2007	*	14	*	*	*
Adults without a usual source of care	2012	32	22	-10	14	2007	34	20	-14	2	Improved
Older adults without recommended preventive care	2012	*	58	*	*	2006	*	56	*	*	*
Children without a medical home	2011/12	49	46	-3	3	2007	56	42	-14	7	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	47	32	-15	43	--	--	--	--	--	--
Mortality amenable to health care	2009-10	*	86	*	*	2004-05	*	96	*	*	*
Infant mortality, deaths per 1,000 live births	2008-09	15.6	6.5	-9.1	46	2003-04	8.4	6.8	-1.6	-7.2	Worsened
Adults with poor health-related quality of life	2012	11	27	16	1	2007	21	24	3	10	Improved
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	26	18	-8	17	2007-08	26	17	-9	0	No Change
Adults who went without care because of cost in past year	2012	18	17	-1	6	2007	15	13	-2	-3	No Change
At risk adults without a doctor visit	2012	16	14	-2	23	2007	21	14	-7	5	Improved
Adults without a usual source of care	2012	25	22	-3	26	2007	25	20	-5	0	No Change
Older adults without recommended preventive care	2012	70	58	-12	26	2006	68	56	-12	-2	No Change
Children without a medical home	2011/12	49	46	-3	10	2007	43	42	-1	-6	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	47	32	-15	46	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	23	25	2	13	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	35	27	-8	4	2007	26	24	-2	-9	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Ohio

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**31**	**31**
Access & Affordability	22	18
Prevention & Treatment	20	20
Avoidable Hospital Use & Cost	45	39
Equity[b]	17	27
Healthy Lives	42	41

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	12	35%
State rate worsened[c]	11	32%
No change in state rate[d]	11	32%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	0	0%
Top quartile	0	0%
2nd quartile	17	40%
3rd quartile	15	36%
Bottom quartile	10	24%
Bottom 5 states	3	7%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	17	27	16	4	7	5
Low-Income	18	17	7	2	2	3
Race/Ethnicity	17	40	9	2	5	2

ESTIMATED IMPACT If Ohio improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	889,744	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	693,162	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	433,100	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	318,604	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	32,381	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	3,956	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	10,947	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	90,727	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	559,598	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	18	20	5	19	2007-08	15	17	-3	Worsened
Children ages 0–18 uninsured	2011-12	8	8	3	20	2007-08	7	9	-1	No Change
Adults who went without care because of cost in past year	2012	14	15	9	18	2007	12	12	-2	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	17	16	10	31	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	13	14	6	20	2007	14	14	1	No Change
Adults without a dental visit in past year	2012	14	15	10	17	2006	12	14	-2	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	81	78	89	19	2007	85	82	-4	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	41	43	52	29	2006	46	44	-5	Worsened
Children with a medical home	2011/12	57	57	69	24	2007	66	61	-9	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	71	69	81	17	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	66	63	86	13	2007	66	63	0	No Change
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	67	69	80	31	2009	45	43	22	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	19	19	12	23	2007	29	28	10	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	22	21	14	30	2007	21	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	76	76	80	21	2007	74	75	2	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.6	12.8	11.9	15	07/2005 - 06/2008	12.6	12.6	0.0	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	85	84	89	13	2007	80	80	5	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	66	66	71	26	2007	62	63	4	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	59	59	63	21	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	88	89	95	30	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	6	6	3	19	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	25	21.5	12	40	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	136	114	26	30	2004	114	137	-22	Worsened
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	38	27	13	45	2008	43	34	5	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	82	68	41	45	2008	94	80	12	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	59	45	26	46	2008	67	51.5	8	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	21	20	12	27	2006	21	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	17	19	7	19	2006	20	19	3	Improved
Home health patients also enrolled in Medicare with a hospital admission	2012	18	17	14	42	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	215	183.5	129	44	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,564	$5,501	$4,180	31	2008	$4,477	$4,505	-$1,087	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$9,552	$8,526	$5,406	46	2008	$8,703	$7,942	-$849	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	94	82	57	35	2004-05	106	90.5	12	Improved
Years of potential life lost before age 75	2010	7,158	6,567	4,900	36	2005	7,536	7,252	378	No Change
Breast cancer deaths per 100,000 female population	2010	24.1	22.2	14.8	46	2005	26.5	23.9	2.4	Improved
Colorectal cancer deaths per 100,000 population	2010	17.5	16.2	12.0	42	2005	19.0	18.1	1.5	Improved
Suicide deaths per 100,000 population	2010	12.2	13.5	6.9	18	2005	11.5	11.8	-0.7	No Change
Infant mortality, deaths per 1,000 live births	2009	7.7	6.4	4.6	41	2004	7.5	6.8	-0.2	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	27	27	19	26	2007	25	24	-2	Worsened
Adults who smoke	2012	23	19	10	40	2007	23	19	0	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	30	28	21	34	2007	29	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	31	30.5	22	27	2007	33	31	2	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	13	10	5	38	2006	11	10	-2	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	33	18	-15	31	2007-08	30	17	-13	-3	Worsened
Adults who went without care because of cost in past year	2012	23	17	-6	7	2007	29	13	-16	6	Improved
At risk adults without a doctor visit	2012	20	14	-6	18	2007	20	14	-6	0	No Change
Adults without a usual source of care	2012	34	22	-12	17	2007	20	20	0	-14	Worsened
Older adults without recommended preventive care	2012	62	58	-4	9	2006	67	56	-11	5	Improved
Children without a medical home	2011/12	56	46	-10	10	2007	63	42	-21	7	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	42	32	-10	31	--	--	--	--	--	--
Mortality amenable to health care	2009-10	169	86	-83	23	2004-05	197	96	-101	28	Improved
Infant mortality, deaths per 1,000 live births	2008-09	14.9	6.5	-8.4	44	2003-04	15.2	6.8	-8.4	0.3	No Change
Adults with poor health-related quality of life	2012	36	27	-9	33	2007	40	24	-16	4	Improved
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	27	18	-9	19	2007-08	23	17	-6	-4	Worsened
Adults who went without care because of cost in past year	2012	24	17	-7	10	2007	25	13	-12	1	Improved
At risk adults without a doctor visit	2012	14	14	0	14	2007	18	14	-4	4	Improved
Adults without a usual source of care	2012	22	22	0	15	2007	21	20	-1	-1	No Change
Older adults without recommended preventive care	2012	68	58	-10	21	2006	62	56	-6	-6	Worsened
Children without a medical home	2011/12	52	46	-6	16	2007	47	42	-5	-5	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	39	32	-7	29	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	32	25	-7	32	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	44	27	-17	34	2007	43	24	-19	-1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Oklahoma

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**49**	**50**
Access & Affordability	37	48
Prevention & Treatment	45	45
Avoidable Hospital Use & Cost	45	46
Equity[b]	41	51
Healthy Lives	46	44

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	33	100%
State rate improved[c]	12	36%
State rate worsened[c]	8	24%
No change in state rate[d]	13	39%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	0	0%
Top quartile	2	5%
2nd quartile	6	14%
3rd quartile	9	21%
Bottom quartile	25	60%
Bottom 5 states	9	21%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	41	51	16	4	9	3
Low-Income	48	50	7	2	4	1
Race/Ethnicity	32	49	9	2	5	2

ESTIMATED IMPACT If Oklahoma improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	447,120	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	369,111	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	168,951	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	120,654	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	27,138	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	1,950	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	2,972	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	26,501	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	206,738	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	25	20	5	42	2007-08	22	17	-3	Worsened
Children ages 0–18 uninsured	2011-12	8	8	3	20	2007-08	10	9	2	Improved
Adults who went without care because of cost in past year	2012	18	15	9	34	2007	18	12	0	No Change
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	15	16	10	20	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	20	14	6	46	2007	23	14	3	Improved
Adults without a dental visit in past year	2012	18	15	10	41	2006	19	14	1	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	76	78	89	34	2007	79	82	-3	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	38	43	52	42	2006	36	44	2	Improved
Children with a medical home	2011/12	56	57	69	30	2007	56	61	0	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	62	69	81	40	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	61	63	86	28	2007	54	63	7	Improved
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	61	69	80	48	2009	52	43	9	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	27	19	12	47	2007	39	28	12	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	27	21	14	48	2007	25	19	-2	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	76	76	80	21	2007	70	75	6	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.6	12.8	11.9	15	07/2005 - 06/2008	12.7	12.6	0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	82	84	89	34	2007	81	80	1	No Change
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	68	66	71	10	2007	65	63	3	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	59	59	63	21	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	91	89	95	9	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	8	6	3	46	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	25	21.5	12	40	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	149	114	26	34	2004	*	137	--	*
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	38	27	13	45	2008	47	34	9	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	80	68	41	42	2008	101	80	21	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	49	45	26	30	2008	59	51.5	10	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	24	20	12	46	2006	23	20	-1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	24	19	7	39	2006	26	19	2	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	17	17	14	25	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	196	183.5	129	41	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,642	$5,501	$4,180	36	2008	$4,736	$4,505	-$906	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$9,190	$8,526	$5,406	39	2008	$8,912	$7,942	-$278	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	112	82	57	46	2004-05	115	90.5	3	No Change
Years of potential life lost before age 75	2010	8,864	6,567	4,900	47	2005	9,181	7,252	317	No Change
Breast cancer deaths per 100,000 female population	2010	24.9	22.2	14.8	49	2005	25.2	23.9	0.3	No Change
Colorectal cancer deaths per 100,000 population	2010	16.5	16.2	12.0	28	2005	19.5	18.1	3.0	Improved
Suicide deaths per 100,000 population	2010	16.5	13.5	6.9	40	2005	14.8	11.8	-1.7	Worsened
Infant mortality, deaths per 1,000 live births	2009	7.9	6.4	4.6	44	2004	7.9	6.8	0.0	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	31	27	19	43	2007	29	24	-2	Worsened
Adults who smoke	2012	23	19	10	40	2007	26	19	3	Improved
Adults ages 18–64 who are obese (BMI >= 30)	2012	33	28	21	44	2007	30	27	-3	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	34	30.5	22	37	2007	30	31	-4	Worsened
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	14	10	5	43	2006	15	10	1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	31	18	-13	28	2007-08	31	17	-14	0	No Change
Adults who went without care because of cost in past year	2012	25	17	-8	12	2007	29	13	-16	4	Improved
At risk adults without a doctor visit	2012	31	14	-17	44	2007	28	14	-14	-3	Worsened
Adults without a usual source of care	2012	47	22	-25	43	2007	50	20	-30	3	Improved
Older adults without recommended preventive care	2012	66	58	-8	20	2006	71	56	-15	5	Improved
Children without a medical home	2011/12	57	46	-11	13	2007	64	42	-22	7	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	42	32	-10	31	--	--	--	--	--	--
Mortality amenable to health care	2009-10	193	86	-107	35	2004-05	196	96	-100	3	No Change
Infant mortality, deaths per 1,000 live births	2008-09	13.9	6.5	-7.4	36	2003-04	13.2	6.8	-6.4	-0.7	Worsened
Adults with poor health-related quality of life	2012	32	27	-5	13	2007	34	24	-10	2	Improved
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	30	18	-12	28	2007-08	33	17	-16	3	Improved
Adults who went without care because of cost in past year	2012	33	17	-16	41	2007	33	13	-20	0	No Change
At risk adults without a doctor visit	2012	26	14	-12	44	2007	31	14	-17	5	Improved
Adults without a usual source of care	2012	32	22	-10	45	2007	33	20	-13	1	Improved
Older adults without recommended preventive care	2012	74	58	-16	46	2006	72	56	-16	-2	No Change
Children without a medical home	2011/12	52	46	-6	16	2007	55	42	-13	3	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	43	32	-11	38	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	41	25	-16	46	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	48	27	-21	45	2007	42	24	-18	-6	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Oregon

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**24**	**24**
Access & Affordability	33	34
Prevention & Treatment	35	38
Avoidable Hospital Use & Cost	2	2
Equity[b]	38	36
Healthy Lives	18	14

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	12	35%
State rate worsened[c]	9	26%
No change in state rate[d]	13	38%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	9	21%
Top quartile	11	26%
2nd quartile	15	36%
3rd quartile	8	19%
Bottom quartile	8	19%
Bottom 5 states	3	7%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	38	36	15	4	4	7
Low-Income	41	32	7	1	2	4
Race/Ethnicity	32	33	8	3	2	3

ESTIMATED IMPACT If Oregon improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	380,823	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	328,416	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	175,154	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	104,443	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	9,908	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	291	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	125	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	9,191	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	121,197	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	21	20	5	32	2007-08	21	17	0	No Change
Children ages 0–18 uninsured	2011-12	7	8	3	13	2007-08	11	9	4	Improved
Adults who went without care because of cost in past year	2012	18	15	9	34	2007	12	12	-6	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	19	16	10	42	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	19	14	6	44	2007	17	14	-2	Worsened
Adults without a dental visit in past year	2012	15	15	10	25	2006	14	14	-1	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	78	78	89	26	2007	78	82	0	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	39	43	52	37	2006	44	44	-5	Worsened
Children with a medical home	2011/12	57	57	69	24	2007	63	61	-6	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	63	69	81	39	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	66	63	86	13	2007	46	63	20	Improved
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	67	69	80	31	2009	44	43	23	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	19	19	12	23	2007	28	28	9	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	19	21	14	15	2007	18	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	74	76	80	40	2007	72	75	2	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.3	12.8	11.9	47	07/2005 - 06/2008	13.4	12.6	0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	84	84	89	20	2007	81	80	3	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	66	66	71	26	2007	64	63	2	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	55	59	63	45	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	89	89	95	23	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	7	6	3	30	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	20	21.5	12	14	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	49	114	26	2	2004	49	137	0	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	17	27	13	3	2008	21	34	4	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	48	68	41	4	2008	57	80	9	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	28	45	26	3	2008	34	51.5	6	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	17	20	12	13	2006	17	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	10	19	7	2	2006	10	19	0	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	15	17	14	2	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	164	183.5	129	5	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$4,948	$5,501	$4,180	9	2008	$3,973	$4,505	-$975	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$6,291	$8,526	$5,406	3	2008	$6,056	$7,942	-$235	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	65	82	57	6	2004-05	75	90.5	10	Improved
Years of potential life lost before age 75	2010	5,720	6,567	4,900	15	2005	6,424	7,252	704	Improved
Breast cancer deaths per 100,000 female population	2010	23.1	22.2	14.8	36	2005	21.8	23.9	-1.3	Worsened
Colorectal cancer deaths per 100,000 population	2010	14.9	16.2	12.0	15	2005	17.0	18.1	2.1	Improved
Suicide deaths per 100,000 population	2010	17.1	13.5	6.9	43	2005	14.9	11.8	-2.2	Worsened
Infant mortality, deaths per 1,000 live births	2009	4.9	6.4	4.6	3	2004	5.5	6.8	0.6	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	33	27	19	47	2007	27	24	-6	Worsened
Adults who smoke	2012	18	19	10	17	2007	17	19	-1	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	28	28	21	25	2007	27	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	26	30.5	22	5	2007	24	31	-2	Worsened
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	10	10	5	23	2006	9	10	-1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	31	18	-13	28	2007-08	42	17	-25	11	Improved
Adults who went without care because of cost in past year	2012	26	17	-9	16	2007	22	13	-9	-4	No Change
At risk adults without a doctor visit	2012	26	14	-12	35	2007	20	14	-6	-6	Worsened
Adults without a usual source of care	2012	32	22	-10	14	2007	50	20	-30	18	Improved
Older adults without recommended preventive care	2012	71	58	-13	41	2006	60	56	-4	-11	Worsened
Children without a medical home	2011/12	62	46	-16	29	2007	61	42	-19	-1	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	48	32	-16	44	--	--	--	--	--	--
Mortality amenable to health care	2009-10	*	86	*	*	2004-05	135	96	-39	*	*
Infant mortality, deaths per 1,000 live births	2008-09	9.3	6.5	-2.8	6	2003-04	8.5	6.8	-1.7	-0.8	Worsened
Adults with poor health-related quality of life	2012	38	27	-11	40	2007	36	24	-12	-2	No Change
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	28	18	-10	23	2007-08	35	17	-18	7	Improved
Adults who went without care because of cost in past year	2012	30	17	-13	30	2007	25	13	-12	-5	Worsened
At risk adults without a doctor visit	2012	26	14	-12	44	2007	25	14	-11	-1	Worsened
Adults without a usual source of care	2012	29	22	-7	34	2007	36	20	-16	7	Improved
Older adults without recommended preventive care	2012	72	58	-14	35	2006	63	56	-7	-9	Worsened
Children without a medical home	2011/12	52	46	-6	16	2007	51	42	-9	-1	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	45	32	-13	41	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	28	25	-3	25	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	50	27	-23	48	2007	33	24	-9	-17	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Pennsylvania

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**22**	**14**
Access & Affordability	14	6
Prevention & Treatment	12	8
Avoidable Hospital Use & Cost	37	34
Equity[b]	12	10
Healthy Lives	33	36

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	33	100%
State rate improved[c]	11	33%
State rate worsened[c]	9	27%
No change in state rate[d]	13	39%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	3	7%
Top quartile	11	26%
2nd quartile	12	29%
3rd quartile	14	33%
Bottom quartile	5	12%
Bottom 5 states	1	2%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	12	10	16	2	6	8
Low-Income	8	6	7	2	2	3
Race/Ethnicity	17	17	9	0	4	5

ESTIMATED IMPACT If Pennsylvania improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	781,987	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	200,461	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	372,488	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	269,251	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	15,787	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	3,440	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	10,307	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	58,726	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	480,187	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	15	20	5	12	2007-08	12	17	-3	Worsened
Children ages 0–18 uninsured	2011-12	8	8	3	20	2007-08	7	9	-1	No Change
Adults who went without care because of cost in past year	2012	13	15	9	12	2007	9	12	-4	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	13	16	10	7	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	12	14	6	15	2007	12	14	0	No Change
Adults without a dental visit in past year	2012	13	15	10	12	2006	12	14	-1	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	87	78	89	5	2007	90	82	-3	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	44	43	52	16	2006	45	44	-1	No Change
Children with a medical home	2011/12	59	57	69	16	2007	62	61	-3	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	73	69	81	10	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	69	63	86	8	2007	81	63	-12	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	68	69	80	28	2009	39	43	29	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	15	19	12	12	2007	24	28	9	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	19	21	14	15	2007	17	19	-2	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	78	76	80	5	2007	77	75	1	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.6	12.8	11.9	15	07/2005 - 06/2008	12.6	12.6	0.0	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	83	84	89	28	2007	79	80	4	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	64	66	71	40	2007	61	63	3	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	61	59	63	11	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	86	89	95	41	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	6	6	3	19	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	21	21.5	12	21	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	183	114	26	39	2004	*	137	--	*
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	31	27	13	35	2008	36	34	5	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	74	68	41	38	2008	89	80	15	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	54	45	26	38	2008	66	51.5	12	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	21	20	12	27	2006	20	20	-1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	17	19	7	19	2006	19	19	2	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	17	17	14	25	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	185	183.5	129	28	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,629	$5,501	$4,180	35	2008	$4,703	$4,505	-$926	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$9,383	$8,526	$5,406	44	2008	$8,757	$7,942	-$626	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	86	82	57	30	2004-05	99	90.5	13	Improved
Years of potential life lost before age 75	2010	6,670	6,567	4,900	28	2005	7,280	7,252	610	No Change
Breast cancer deaths per 100,000 female population	2010	23.5	22.2	14.8	39	2005	25.0	23.9	1.5	Improved
Colorectal cancer deaths per 100,000 population	2010	17.2	16.2	12.0	36	2005	19.2	18.1	2.0	Improved
Suicide deaths per 100,000 population	2010	11.9	13.5	6.9	15	2005	11.1	11.8	-0.8	No Change
Infant mortality, deaths per 1,000 live births	2009	7.1	6.4	4.6	33	2004	7.3	6.8	0.2	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	26	27	19	19	2007	23	24	-3	Worsened
Adults who smoke	2012	21	19	10	35	2007	21	19	0	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	29	28	21	29	2007	28	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	26	30.5	22	5	2007	30	31	4	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	11	10	5	30	2006	11	10	0	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	26	18	-8	13	2007-08	18	17	-1	-8	Worsened
Adults who went without care because of cost in past year	2012	28	17	-11	26	2007	20	13	-7	-8	Worsened
At risk adults without a doctor visit	2012	15	14	-1	10	2007	17	14	-3	2	Improved
Adults without a usual source of care	2012	25	22	-3	7	2007	22	20	-2	-3	Worsened
Older adults without recommended preventive care	2012	68	58	-10	28	2006	62	56	-6	-6	Worsened
Children without a medical home	2011/12	64	46	-18	33	2007	74	42	-32	10	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	37	32	-5	15	--	--	--	--	--	--
Mortality amenable to health care	2009-10	173	86	-87	27	2004-05	193	96	-97	20	Improved
Infant mortality, deaths per 1,000 live births	2008-09	14.1	6.5	-7.6	39	2003-04	13.6	6.8	-6.8	-0.5	Worsened
Adults with poor health-related quality of life	2012	35	27	-8	26	2007	36	24	-12	1	Improved
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	25	18	-7	13	2007-08	22	17	-5	-3	Worsened
Adults who went without care because of cost in past year	2012	24	17	-7	10	2007	19	13	-6	-5	Worsened
At risk adults without a doctor visit	2012	13	14	1	10	2007	15	14	-1	2	Improved
Adults without a usual source of care	2012	15	22	7	4	2007	14	20	6	-1	No Change
Older adults without recommended preventive care	2012	64	58	-6	6	2006	67	56	-11	3	Improved
Children without a medical home	2011/12	56	46	-10	33	2007	52	42	-10	-4	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	32	32	0	6	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	25	25	0	17	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	42	27	-15	23	2007	37	24	-13	-5	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Rhode Island

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**9**	**5**
Access & Affordability	9	5
Prevention & Treatment	3	2
Avoidable Hospital Use & Cost	24	24
Equity[b]	10	7
Healthy Lives	12	7

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	9	26%
State rate worsened[c]	14	41%
No change in state rate[d]	11	32%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	7	17%
Top quartile	18	43%
2nd quartile	16	38%
3rd quartile	6	14%
Bottom quartile	2	5%
Bottom 5 states	1	2%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	10	7	15	7	3	5
Low-Income	7	5	7	4	1	2
Race/Ethnicity	15	10	8	3	2	3

ESTIMATED IMPACT If Rhode Island improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	76,473	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	16,216	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	22,218	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	20,474	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	865	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	164	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	565	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	4,926	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	25,995	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	17	20	5	14	2007-08	14	17	-3	Worsened
Children ages 0–18 uninsured	2011-12	7	8	3	13	2007-08	8	9	1	No Change
Adults who went without care because of cost in past year	2012	13	15	9	12	2007	10	12	-3	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	13	16	10	7	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	8	14	6	4	2007	7	14	-1	No Change
Adults without a dental visit in past year	2012	12	15	10	7	2006	10	14	-2	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	87	78	89	5	2007	85	82	2	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	46	43	52	9	2006	51	44	-5	Worsened
Children with a medical home	2011/12	60	57	69	14	2007	64	61	-4	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	76	69	81	6	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	66	63	86	13	2007	76	63	-10	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	73	69	80	10	2009	29	43	44	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	14	19	12	8	2007	19	28	5	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	16	21	14	2	2007	15	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	77	76	80	10	2007	78	75	-1	Worsened
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.2	12.8	11.9	44	07/2005 - 06/2008	12.7	12.6	-0.5	Worsened
Hospitalized patients given information about what to do during their recovery at home	2011	84	84	89	20	2007	81	80	3	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	65	66	71	33	2007	62	63	3	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	61	59	63	11	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	93	89	95	2	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	6	6	3	19	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	21	21.5	12	21	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	192	114	26	41	2004	154	137	-38	Worsened
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	27	27	13	24	2008	37	34	10	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	66	68	41	24	2008	91	80	25	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	49	45	26	30	2008	64	51.5	15	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	21	20	12	27	2006	22	20	1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	12	19	7	4	2006	14	19	2	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	15	17	14	2	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	194	183.5	129	35	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,171	$5,501	$4,180	15	2008	$4,343	$4,505	-$828	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,539	$8,526	$5,406	27	2008	$7,965	$7,942	-$574	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	74	82	57	16	2004-05	86	90.5	12	Improved
Years of potential life lost before age 75	2010	5,794	6,567	4,900	17	2005	5,961	7,252	167	No Change
Breast cancer deaths per 100,000 female population	2010	19.5	22.2	14.8	5	2005	24.6	23.9	5.1	Improved
Colorectal cancer deaths per 100,000 population	2010	16.6	16.2	12.0	29	2005	17.4	18.1	0.8	No Change
Suicide deaths per 100,000 population	2010	12.3	13.5	6.9	19	2005	6.3	11.8	-6.0	Worsened
Infant mortality, deaths per 1,000 live births	2009	5.9	6.4	4.6	17	2004	5.4	6.8	-0.5	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	26	27	19	19	2007	24	24	-2	Worsened
Adults who smoke	2012	17	19	10	10	2007	17	19	0	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	26	28	21	11	2007	22	27	-4	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	28	30.5	22	13	2007	30	31	2	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	9	10	5	13	2006	8	10	-1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	25	18	-7	10	2007-08	22	17	-5	-3	Worsened
Adults who went without care because of cost in past year	2012	26	17	-9	16	2007	26	13	-13	0	No Change
At risk adults without a doctor visit	2012	14	14	0	7	2007	18	14	-4	4	Improved
Adults without a usual source of care	2012	29	22	-7	11	2007	37	20	-17	8	Improved
Older adults without recommended preventive care	2012	70	58	-12	39	2006	63	56	-7	-7	Worsened
Children without a medical home	2011/12	63	46	-17	32	2007	62	42	-20	-1	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	40	32	-8	25	--	--	--	--	--	--
Mortality amenable to health care	2009-10	*	86	*	*	2004-05	141	96	-45	*	*
Infant mortality, deaths per 1,000 live births	2008-09	11.7	6.5	-5.2	18	2003-04	10.3	6.8	-3.5	-1.4	Worsened
Adults with poor health-related quality of life	2012	36	27	-9	33	2007	33	24	-9	-3	No Change
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	26	18	-8	17	2007-08	21	17	-4	-5	Worsened
Adults who went without care because of cost in past year	2012	23	17	-6	9	2007	19	13	-6	-4	No Change
At risk adults without a doctor visit	2012	10	14	4	5	2007	10	14	4	0	No Change
Adults without a usual source of care	2012	17	22	5	6	2007	21	20	-1	4	Improved
Older adults without recommended preventive care	2012	65	58	-7	8	2006	60	56	-4	-5	Worsened
Children without a medical home	2011/12	53	46	-7	22	2007	53	42	-11	0	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	33	32	-1	8	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	21	25	4	7	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	43	27	-16	29	2007	41	24	-17	-2	No Change

Notes:

* Data not available for this state.

-- Historical data not available or not comperable over time.

(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.

(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.

(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.

Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

South Carolina

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**36**	**39**
Access & Affordability	44	39
Prevention & Treatment	25	26
Avoidable Hospital Use & Cost	24	24
Equity[b]	35	31
Healthy Lives	43	43

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	13	38%
State rate worsened[c]	13	38%
No change in state rate[d]	8	24%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	2	5%
Top quartile	6	14%
2nd quartile	7	17%
3rd quartile	16	38%
Bottom quartile	13	31%
Bottom 5 states	4	10%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	35	31	16	2	8	6
Low-Income	35	25	7	2	2	3
Race/Ethnicity	32	36	9	0	6	3

ESTIMATED IMPACT If South Carolina improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	484,324	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	389,451	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	161,630	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	160,778	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	27,324	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	1,970	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	2,160	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	21,182	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	289,964	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	22	20	5	35	2007-08	20	17	-2	No Change
Children ages 0–18 uninsured	2011-12	12	8	3	43	2007-08	14	9	2	Improved
Adults who went without care because of cost in past year	2012	21	15	9	47	2007	15	12	-6	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	17	16	10	31	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	16	14	6	34	2007	14	14	-2	Worsened
Adults without a dental visit in past year	2012	18	15	10	41	2006	17	14	-1	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	78	78	89	26	2007	82	82	-4	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	42	43	52	27	2006	43	44	-1	No Change
Children with a medical home	2011/12	54	57	69	38	2007	59	61	-5	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	64	69	81	38	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	50	63	86	48	2007	63	63	-13	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	72	69	80	17	2009	35	43	37	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	24	19	12	43	2007	38	28	14	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	24	21	14	41	2007	24	19	0	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	77	76	80	10	2007	78	75	-1	Worsened
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.1	12.8	11.9	38	07/2005 - 06/2008	12.9	12.6	-0.2	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	85	84	89	13	2007	79	80	6	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	68	66	71	10	2007	62	63	6	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	62	59	63	5	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	92	89	95	4	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	7	6	3	30	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	19	21.5	12	10	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	143	114	26	32	2004	192	137	49	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	27	27	13	24	2008	34	34	7	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	65	68	41	19	2008	78	80	13	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	41	45	26	18	2008	48	51.5	7	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	20	20	12	22	2006	18	20	-2	Worsened
Long-stay nursing home residents hospitalized within a six-month period	2010	19	19	7	23	2006	20	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	16	17	14	11	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	172	183.5	129	16	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,746	$5,501	$4,180	40	2008	$5,046	$4,505	-$700	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,542	$8,526	$5,406	28	2008	$7,918	$7,942	-$624	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	102	82	57	41	2004-05	115	90.5	13	Improved
Years of potential life lost before age 75	2010	8,204	6,567	4,900	42	2005	9,156	7,252	952	Improved
Breast cancer deaths per 100,000 female population	2010	22.5	22.2	14.8	29	2005	26.2	23.9	3.7	Improved
Colorectal cancer deaths per 100,000 population	2010	17.6	16.2	12.0	43	2005	19.0	18.1	1.4	Improved
Suicide deaths per 100,000 population	2010	13.5	13.5	6.9	26	2005	11.8	11.8	-1.7	Worsened
Infant mortality, deaths per 1,000 live births	2009	7.0	6.4	4.6	32	2004	9.3	6.8	2.3	Improved
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	28	27	19	32	2007	24	24	-4	Worsened
Adults who smoke	2012	22	19	10	38	2007	22	19	0	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	33	28	21	44	2007	30	27	-3	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	39	30.5	22	49	2007	34	31	-5	Worsened
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	15	10	5	44	2006	14	10	-1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	39	18	-21	44	2007-08	50	17	-33	11	Improved
Adults who went without care because of cost in past year	2012	39	17	-22	51	2007	27	13	-14	-12	Worsened
At risk adults without a doctor visit	2012	23	14	-9	27	2007	26	14	-12	3	Improved
Adults without a usual source of care	2012	51	22	-29	49	2007	40	20	-20	-11	Worsened
Older adults without recommended preventive care	2012	60	58	-2	7	2006	65	56	-9	5	Improved
Children without a medical home	2011/12	68	46	-22	42	2007	56	42	-14	-12	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	38	32	-6	17	--	--	--	--	--	--
Mortality amenable to health care	2009-10	163	86	-77	20	2004-05	188	96	-92	25	Improved
Infant mortality, deaths per 1,000 live births	2008-09	11.5	6.5	-5.0	17	2003-04	13.8	6.8	-7	2.3	Improved
Adults with poor health-related quality of life	2012	30	27	-3	9	2007	32	24	-8	2	Improved
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	30	18	-12	28	2007-08	31	17	-14	1	Improved
Adults who went without care because of cost in past year	2012	35	17	-18	46	2007	29	13	-16	-6	Worsened
At risk adults without a doctor visit	2012	18	14	-4	30	2007	19	14	-5	1	Improved
Adults without a usual source of care	2012	26	22	-4	28	2007	26	20	-6	0	No Change
Older adults without recommended preventive care	2012	69	58	-11	24	2006	67	56	-11	-2	No Change
Children without a medical home	2011/12	54	46	-8	27	2007	48	42	-6	-6	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	38	32	-6	26	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	40	25	-15	44	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	42	27	-15	23	2007	37	24	-13	-5	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

South Dakota

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**12**	**12**
Access & Affordability	17	17
Prevention & Treatment	16	14
Avoidable Hospital Use & Cost	7	6
Equity[b]	20	18
Healthy Lives	18	27

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	11	32%
State rate worsened[c]	9	26%
No change in state rate[d]	14	41%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	8	19%
Top quartile	17	40%
2nd quartile	15	36%
3rd quartile	7	17%
Bottom quartile	3	7%
Bottom 5 states	1	2%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	20	18	14	3	5	6
Low-Income	17	10	7	2	3	2
Race/Ethnicity	22	26	7	1	2	4

ESTIMATED IMPACT If South Dakota improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	67,874	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	67,274	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	25,302	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	13,999	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	685	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	107	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	289	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	4,115	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	19,910	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	19	20	5	22	2007-08	15	17	-4	Worsened
Children ages 0–18 uninsured	2011-12	8	8	3	20	2007-08	9	9	1	No Change
Adults who went without care because of cost in past year	2012	11	15	9	5	2007	9	12	-2	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	14	16	10	13	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	15	14	6	28	2007	16	14	1	No Change
Adults without a dental visit in past year	2012	11	15	10	2	2006	13	14	2	Improved
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	78	78	89	26	2007	81	82	-3	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	43	43	52	22	2006	46	44	-3	Worsened
Children with a medical home	2011/12	62	57	69	8	2007	63	61	-1	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	59	69	81	48	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	64	63	86	23	2007	69	63	-5	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	64	69	80	43	2009	43	43	21	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	13	19	12	3	2007	25	28	12	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	18	21	14	10	2007	17	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	77	76	80	10	2007	73	75	4	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.6	12.8	11.9	15	07/2005 - 06/2008	12.4	12.6	-0.2	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	85	84	89	13	2007	79	80	6	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	71	66	71	1	2007	65	63	6	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	57	59	63	37	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	87	89	95	38	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	5	6	3	5	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	20	21.5	12	14	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	84	114	26	12	2004	91	137	7	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	22	27	13	12	2008	26	34	4	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	65	68	41	19	2008	80	80	15	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	36	45	26	12	2008	41	51.5	5	No Change
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	13	20	12	2	2006	14	20	1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	16	19	7	17	2006	15	19	-1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	15	17	14	2	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	168	183.5	129	10	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,336	$5,501	$4,180	21	2008	$4,176	$4,505	-$1,160	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$7,250	$8,526	$5,406	11	2008	$6,622	$7,942	-$628	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	71	82	57	13	2004-05	81	90.5	10	Improved
Years of potential life lost before age 75	2010	6,475	6,567	4,900	24	2005	7,074	7,252	599	No Change
Breast cancer deaths per 100,000 female population	2010	19.7	22.2	14.8	8	2005	24.0	23.9	4.3	Improved
Colorectal cancer deaths per 100,000 population	2010	17.0	16.2	12.0	33	2005	19.8	18.1	2.8	Improved
Suicide deaths per 100,000 population	2010	17.5	13.5	6.9	44	2005	15.4	11.8	-2.1	Worsened
Infant mortality, deaths per 1,000 live births	2009	6.7	6.4	4.6	27	2004	7.9	6.8	1.2	Improved
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	22	27	19	3	2007	20	24	-2	Worsened
Adults who smoke	2012	21	19	10	35	2007	20	19	-1	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	27	28	21	17	2007	27	27	0	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	27	30.5	22	9	2007	28	31	1	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	9	10	5	13	2006	8	10	-1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	37	18	-19	39	2007-08	35	17	-18	-2	Worsened
Adults who went without care because of cost in past year	2012	24	17	-7	9	2007	28	13	-15	4	Improved
At risk adults without a doctor visit	2012	20	14	-6	18	2007	15	14	-1	-5	Worsened
Adults without a usual source of care	2012	42	22	-20	35	2007	29	20	-9	-13	Worsened
Older adults without recommended preventive care	2012	63	58	-5	12	2006	*	56	*	*	*
Children without a medical home	2011/12	60	46	-14	23	2007	60	42	-18	0	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	44	32	-12	38	--	--	--	--	--	--
Mortality amenable to health care	2009-10	*	86	*	*	2004-05	*	96	*	*	*
Infant mortality, deaths per 1,000 live births	2008-09	13.3	6.5	-6.8	33	2003-04	13.7	6.8	-6.9	0.4	Improved
Adults with poor health-related quality of life	2012	29	27	-2	5	2007	25	24	-1	-4	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	28	18	-10	23	2007-08	26	17	-9	-2	Worsened
Adults who went without care because of cost in past year	2012	20	17	-3	7	2007	21	13	-8	1	Improved
At risk adults without a doctor visit	2012	22	14	-8	38	2007	23	14	-9	1	Improved
Adults without a usual source of care	2012	23	22	-1	20	2007	24	20	-4	1	Improved
Older adults without recommended preventive care	2012	70	58	-12	26	2006	64	56	-8	-6	Worsened
Children without a medical home	2011/12	50	46	-4	11	2007	46	42	-4	-4	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	46	32	-14	44	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	21	25	4	7	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	33	27	-6	1	2007	30	24	-6	-3	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Tennessee

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**40**	**43**
Access & Affordability	28	30
Prevention & Treatment	34	33
Avoidable Hospital Use & Cost	43	45
Equity[b]	26	24
Healthy Lives	46	46

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	12	35%
State rate worsened[c]	10	29%
No change in state rate[d]	12	35%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	0	0%
Top quartile	2	5%
2nd quartile	10	24%
3rd quartile	14	33%
Bottom quartile	16	38%
Bottom 5 states	8	19%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	26	24	16	6	4	6
Low-Income	22	18	7	4	0	3
Race/Ethnicity	32	31	9	2	4	3

ESTIMATED IMPACT If Tennessee improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	547,743	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	484,731	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	237,919	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	134,042	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	46,989	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	3,202	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	5,274	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	38,021	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	519,427	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	19	20	5	22	2007-08	20	17	1	No Change
Children ages 0–18 uninsured	2011-12	7	8	3	13	2007-08	9	9	2	Improved
Adults who went without care because of cost in past year	2012	19	15	9	38	2007	15	12	-4	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	20	16	10	47	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	10	14	6	7	2007	8	14	-2	Worsened
Adults without a dental visit in past year	2012	17	15	10	38	2006	17	14	0	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	79	78	89	22	2007	85	82	-6	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	41	43	52	29	2006	46	44	-5	Worsened
Children with a medical home	2011/12	60	57	69	14	2007	61	61	-1	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	70	69	81	18	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	60	63	86	29	2007	64	63	-4	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	73	69	80	10	2009	45	43	28	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	27	19	12	47	2007	39	28	12	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	26	21	14	44	2007	26	19	0	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	75	76	80	31	2007	75	75	0	No Change
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.9	12.8	11.9	28	07/2005 - 06/2008	13.1	12.6	0.2	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	82	84	89	34	2007	78	80	4	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	67	66	71	20	2007	62	63	5	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	60	59	63	14	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	90	89	95	18	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	6	6	3	19	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	27	21.5	12	48	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	101	114	26	17	2004	156	137	55	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	37	27	13	43	2008	47	34	10	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	84	68	41	47	2008	104	80	20	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	53	45	26	37	2008	64	51.5	11	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	21	20	12	27	2006	21	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	24	19	7	39	2006	25	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	18	17	14	42	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	193	183.5	129	34	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,852	$5,501	$4,180	43	2008	$4,939	$4,505	-$913	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$9,187	$8,526	$5,406	38	2008	$8,584	$7,942	-$603	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	110	82	57	45	2004-05	118	90.5	8	No Change
Years of potential life lost before age 75	2010	8,528	6,567	4,900	43	2005	9,224	7,252	696	Improved
Breast cancer deaths per 100,000 female population	2010	22.6	22.2	14.8	30	2005	26.5	23.9	3.9	Improved
Colorectal cancer deaths per 100,000 population	2010	17.7	16.2	12.0	46	2005	19.3	18.1	1.6	Improved
Suicide deaths per 100,000 population	2010	14.6	13.5	6.9	35	2005	14.0	11.8	-0.6	No Change
Infant mortality, deaths per 1,000 live births	2009	8.0	6.4	4.6	46	2004	8.6	6.8	0.6	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	30	27	19	39	2007	25	24	-5	Worsened
Adults who smoke	2012	24	19	10	43	2007	22	19	-2	Worsened
Adults ages 18–64 who are obese (BMI >= 30)	2012	33	28	21	44	2007	32	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	34	30.5	22	37	2007	36	31	2	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	18	10	5	49	2006	12	10	-6	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	45	18	-27	51	2007-08	46	17	-29	1	Improved
Adults who went without care because of cost in past year	2012	31	17	-14	38	2007	27	13	-14	-4	No Change
At risk adults without a doctor visit	2012	14	14	0	7	2007	5	14	9	-9	Worsened
Adults without a usual source of care	2012	42	22	-20	35	2007	22	20	-2	-20	Worsened
Older adults without recommended preventive care	2012	65	58	-7	19	2006	67	56	-11	2	Improved
Children without a medical home	2011/12	62	46	-16	29	2007	58	42	-16	-4	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	38	32	-6	17	--	--	--	--	--	--
Mortality amenable to health care	2009-10	187	86	-101	32	2004-05	213	96	-117	26	Improved
Infant mortality, deaths per 1,000 live births	2008-09	14.7	6.5	-8.2	42	2003-04	17.2	6.8	-10.4	2.5	Improved
Adults with poor health-related quality of life	2012	29	27	-2	5	2007	22	24	2	-7	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	27	18	-9	19	2007-08	26	17	-9	-1	No Change
Adults who went without care because of cost in past year	2012	29	17	-12	28	2007	28	13	-15	-1	No Change
At risk adults without a doctor visit	2012	13	14	1	10	2007	10	14	4	-3	No Change
Adults without a usual source of care	2012	24	22	-2	22	2007	21	20	-1	-3	Worsened
Older adults without recommended preventive care	2012	70	58	-12	26	2006	63	56	-7	-7	Worsened
Children without a medical home	2011/12	50	46	-4	11	2007	50	42	-8	0	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	34	32	-2	11	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	42	25	-17	47	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	48	27	-21	45	2007	39	24	-15	-9	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Texas

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**44**	**47**
Access & Affordability	50	49
Prevention & Treatment	49	51
Avoidable Hospital Use & Cost	30	32
Equity[b]	41	46
Healthy Lives	27	23

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	13	38%
State rate worsened[c]	7	21%
No change in state rate[d]	14	41%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	1	2%
Top quartile	4	10%
2nd quartile	8	19%
3rd quartile	15	36%
Bottom quartile	15	36%
Bottom 5 states	10	24%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	41	46	16	4	8	4
Low-Income	48	51	7	2	3	2
Race/Ethnicity	32	43	9	2	5	2

ESTIMATED IMPACT If Texas improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	4,191,261	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	3,907,256	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	937,406	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	1,187,638	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	96,204	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	9,112	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	11,399	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	94,538	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	476,771	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	32	20	5	51	2007-08	31	17	-1	No Change
Children ages 0–18 uninsured	2011-12	16	8	3	50	2007-08	20	9	4	Improved
Adults who went without care because of cost in past year	2012	21	15	9	47	2007	19	12	-2	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	17	16	10	31	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	18	14	6	40	2007	15	14	-3	Worsened
Adults without a dental visit in past year	2012	18	15	10	41	2006	20	14	2	Improved
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	68	78	89	49	2007	72	82	-4	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	39	43	52	37	2006	40	44	-1	No Change
Children with a medical home	2011/12	52	57	69	42	2007	50	61	2	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	68	69	81	27	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	59	63	86	32	2007	42	63	17	Improved
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	65	69	80	39	2009	41	43	24	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	23	19	12	41	2007	36	28	13	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	23	21	14	37	2007	22	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	75	76	80	31	2007	74	75	1	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.6	12.8	11.9	15	07/2005 - 06/2008	12.7	12.6	0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	83	84	89	28	2007	78	80	5	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	68	66	71	10	2007	61	63	7	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	55	59	63	45	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	89	89	95	23	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	7	6	3	30	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	28	21.5	12	49	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	108	114	26	18	2004	159	137	51	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	31	27	13	35	2008	38	34	7	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	76	68	41	40	2008	92	80	16	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	46	45	26	28	2008	54	51.5	8	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	23	20	12	39	2006	22	20	-1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	24	19	7	39	2006	25	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	15	17	14	2	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	180	183.5	129	24	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,504	$5,501	$4,180	26	2008	$4,517	$4,505	-$987	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$10,152	$8,526	$5,406	49	2008	$9,594	$7,942	-$558	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	94	82	57	35	2004-05	100	90.5	6	No Change
Years of potential life lost before age 75	2010	6,594	6,567	4,900	26	2005	7,224	7,252	630	No Change
Breast cancer deaths per 100,000 female population	2010	21.0	22.2	14.8	15	2005	23.1	23.9	2.1	Improved
Colorectal cancer deaths per 100,000 population	2010	15.9	16.2	12.0	23	2005	16.9	18.1	1.0	Improved
Suicide deaths per 100,000 population	2010	11.7	13.5	6.9	12	2005	10.9	11.8	-0.8	No Change
Infant mortality, deaths per 1,000 live births	2009	6.0	6.4	4.6	19	2004	6.3	6.8	0.3	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	27	27	19	26	2007	27	24	0	No Change
Adults who smoke	2012	18	19	10	17	2007	18	19	0	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	30	28	21	34	2007	28	27	-2	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	37	30.5	22	47	2007	32	31	-5	Worsened
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	8	10	5	9	2006	7	10	-1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	38	18	-20	41	2007-08	39	17	-22	1	Improved
Adults who went without care because of cost in past year	2012	30	17	-13	34	2007	27	13	-14	-3	No Change
At risk adults without a doctor visit	2012	26	14	-12	35	2007	17	14	-3	-9	Worsened
Adults without a usual source of care	2012	49	22	-27	48	2007	42	20	-22	-7	Worsened
Older adults without recommended preventive care	2012	68	58	-10	28	2006	73	56	-17	5	Improved
Children without a medical home	2011/12	60	46	-14	23	2007	67	42	-25	7	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	40	32	-8	25	--	--	--	--	--	--
Mortality amenable to health care	2009-10	170	86	-84	24	2004-05	194	96	-98	24	Improved
Infant mortality, deaths per 1,000 live births	2008-09	10.9	6.5	-4.4	14	2003-04	12.1	6.8	-5.3	1.2	Improved
Adults with poor health-related quality of life	2012	30	27	-3	9	2007	30	24	-6	0	No Change
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	42	18	-24	50	2007-08	44	17	-27	2	Improved
Adults who went without care because of cost in past year	2012	36	17	-19	49	2007	35	13	-22	-1	No Change
At risk adults without a doctor visit	2012	26	14	-12	44	2007	18	14	-4	-8	Worsened
Adults without a usual source of care	2012	43	22	-21	51	2007	43	20	-23	0	No Change
Older adults without recommended preventive care	2012	72	58	-14	35	2006	74	56	-18	2	Improved
Children without a medical home	2011/12	60	46	-14	42	2007	67	42	-25	7	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	37	32	-5	20	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	35	25	-10	40	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	42	27	-15	23	2007	38	24	-14	-4	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Utah

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**19**	**20**
Access & Affordability	39	34
Prevention & Treatment	28	33
Avoidable Hospital Use & Cost	4	3
Equity[b]	25	39
Healthy Lives	4	4

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	9	26%
State rate worsened[c]	11	32%
No change in state rate[d]	14	41%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	14	33%
Top quartile	21	50%
2nd quartile	4	10%
3rd quartile	9	21%
Bottom quartile	8	19%
Bottom 5 states	5	12%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	25	39	15	2	9	4
Low-Income	25	29	7	1	4	2
Race/Ethnicity	25	40	8	1	5	2

ESTIMATED IMPACT If Utah improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	240,815	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	288,067	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	81,005	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	44,671	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	5,512	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	136	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	64	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	2,544	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	0	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	20	20	5	27	2007-08	15	17	-5	Worsened
Children ages 0–18 uninsured	2011-12	10	8	3	37	2007-08	10	9	0	No Change
Adults who went without care because of cost in past year	2012	15	15	9	21	2007	12	12	-3	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	22	16	10	50	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	20	14	6	46	2007	22	14	2	Improved
Adults without a dental visit in past year	2012	16	15	10	32	2006	15	14	-1	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	74	78	89	41	2007	78	82	-4	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	40	43	52	36	2006	40	44	0	No Change
Children with a medical home	2011/12	64	57	69	5	2007	63	61	1	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	61	69	81	42	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	49	63	86	49	2007	67	63	-18	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	73	69	80	10	2009	41	43	32	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	21	19	12	35	2007	29	28	8	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	26	21	14	44	2007	22	19	-4	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	75	76	80	31	2007	69	75	6	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.9	12.8	11.9	28	07/2005 - 06/2008	12.5	12.6	-0.4	Worsened
Hospitalized patients given information about what to do during their recovery at home	2011	89	84	89	1	2007	81	80	8	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	68	66	71	10	2007	64	63	4	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	63	59	63	1	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	91	89	95	9	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	6	6	3	19	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	28	21.5	12	49	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	66	114	26	7	2004	81	137	15	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	17	27	13	3	2008	20	34	3	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	42	68	41	2	2008	46	80	4	No Change
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	28	45	26	3	2008	29	51.5	1	No Change
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	12	20	12	1	2006	13	20	1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	11	19	7	3	2006	11	19	0	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	14	17	14	1	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	147	183.5	129	2	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,532	$5,501	$4,180	29	2008	$4,498	$4,505	-$1,034	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,015	$8,526	$5,406	19	2008	$7,378	$7,942	-$637	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	62	82	57	4	2004-05	64	90.5	2	No Change
Years of potential life lost before age 75	2010	5,720	6,567	4,900	15	2005	5,885	7,252	165	No Change
Breast cancer deaths per 100,000 female population	2010	22.4	22.2	14.8	28	2005	24.3	23.9	1.9	Improved
Colorectal cancer deaths per 100,000 population	2010	12.0	16.2	12.0	1	2005	13.4	18.1	1.4	Improved
Suicide deaths per 100,000 population	2010	18.3	13.5	6.9	45	2005	15.4	11.8	-2.9	Worsened
Infant mortality, deaths per 1,000 live births	2009	5.3	6.4	4.6	9	2004	5.2	6.8	-0.1	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	23	27	19	6	2007	20	24	-3	Worsened
Adults who smoke	2012	10	19	10	1	2007	12	19	2	Improved
Adults ages 18–64 who are obese (BMI >= 30)	2012	24	28	21	6	2007	22	27	-2	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	22	30.5	22	1	2007	23	31	1	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	5	10	5	1	2006	5	10	0	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**				**2009 Revised Scorecard[a]**				
Uninsured ages 0–64	2011-12	34	18	-16	33	2007-08	29	17	-12	-5	Worsened
Adults who went without care because of cost in past year	2012	27	17	-10	21	2007	28	13	-15	1	Improved
At risk adults without a doctor visit	2012	26	14	-12	35	2007	25	14	-11	-1	Worsened
Adults without a usual source of care	2012	46	22	-24	42	2007	49	20	-29	3	Improved
Older adults without recommended preventive care	2012	64	58	-6	16	2006	68	56	-12	4	Improved
Children without a medical home	2011/12	57	46	-11	13	2007	73	42	-31	16	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	50	32	-18	48	--	--	--	--	--	--
Mortality amenable to health care	2009-10	*	86	*	*	2004-05	86	96	10	*	*
Infant mortality, deaths per 1,000 live births	2008-09	9	6.5	-2.5	5	2003-04	17.8	6.8	-11	8.8	Improved
Adults with poor health-related quality of life	2012	30	27	-3	9	2007	27	24	-3	-3	No Change
LOW-INCOME			**2014 Scorecard**				**2009 Revised Scorecard[a]**				
Uninsured ages 0–64	2011-12	25	18	-7	13	2007-08	30	17	-13	5	Improved
Adults who went without care because of cost in past year	2012	27	17	-10	22	2007	24	13	-11	-3	No Change
At risk adults without a doctor visit	2012	26	14	-12	44	2007	29	14	-15	3	Improved
Adults without a usual source of care	2012	30	22	-8	41	2007	32	20	-12	2	Improved
Older adults without recommended preventive care	2012	72	58	-14	35	2006	69	56	-13	-3	Worsened
Children without a medical home	2011/12	48	46	-2	7	2007	50	42	-8	2	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	47	32	-15	46	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	29	25	-4	27	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	34	27	-7	3	2007	27	24	-3	-7	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Vermont

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**2**	**2**
Access & Affordability	4	12
Prevention & Treatment	8	6
Avoidable Hospital Use & Cost	11	12
Equity[b]	3	5
Healthy Lives	7	6

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	12	35%
State rate worsened[c]	6	18%
No change in state rate[d]	16	47%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	21	50%
Top quartile	29	69%
2nd quartile	3	7%
3rd quartile	6	14%
Bottom quartile	4	10%
Bottom 5 states	2	5%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	3	5	14	1	9	4
Low-Income	2	1	7	1	5	1
Race/Ethnicity	5	10	7	0	4	3

ESTIMATED IMPACT If Vermont improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	23,479	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	4,940	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	11,689	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	0	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	0	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	6	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	133	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	5,316	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	24,045	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	11	20	5	2	2007-08	13	17	2	No Change
Children ages 0–18 uninsured	2011-12	5	8	3	4	2007-08	7	9	2	Improved
Adults who went without care because of cost in past year	2012	10	15	9	4	2007	10	12	0	No Change
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	13	16	10	7	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	13	14	6	20	2007	14	14	1	No Change
Adults without a dental visit in past year	2012	11	15	10	2	2006	12	14	1	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	88	78	89	2	2007	87	82	1	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	47	43	52	5	2006	49	44	-2	Worsened
Children with a medical home	2011/12	69	57	69	1	2007	67	61	2	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	81	69	81	1	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	78	63	86	2	2007	69	63	9	Improved
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	63	69	80	46	2009	23	43	40	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	12	19	12	1	2007	17	28	5	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	17	21	14	7	2007	14	19	-3	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	75	76	80	31	2007	75	75	0	No Change
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.6	12.8	11.9	51	07/2005 - 06/2008	14.1	12.6	0.5	Improved
Hospitalized patients given information about what to do during their recovery at home	2011	87	84	89	3	2007	84	80	3	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	68	66	71	10	2007	68	63	0	No Change
Home health patients who get better at walking or moving around	04/2012 - 03/2013	58	59	63	28	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	86	89	95	41	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	5	6	3	5	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	23	21.5	12	30	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	26	114	26	1	2004	43	137	17	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	22	27	13	12	2008	27	34	5	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	65	68	41	19	2008	70	80	5	No Change
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	33	45	26	8	2008	36	51.5	3	No Change
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	15	20	12	5	2006	13	20	-2	Worsened
Long-stay nursing home residents hospitalized within a six-month period	2010	13	19	7	9	2006	12	19	-1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	16	17	14	11	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	194	183.5	129	35	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,497	$5,501	$4,180	25	2008	$4,827	$4,505	-$670	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$6,829	$8,526	$5,406	7	2008	$6,484	$7,942	-$345	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	58	82	57	2	2004-05	68	90.5	10	Improved
Years of potential life lost before age 75	2010	4,997	6,567	4,900	3	2005	5,687	7,252	690	Improved
Breast cancer deaths per 100,000 female population	2010	19.3	22.2	14.8	3	2005	20.6	23.9	1.3	Improved
Colorectal cancer deaths per 100,000 population	2010	16.7	16.2	12.0	32	2005	18.0	18.1	1.3	Improved
Suicide deaths per 100,000 population	2010	15.7	13.5	6.9	39	2005	12.5	11.8	-3.2	Worsened
Infant mortality, deaths per 1,000 live births	2009	6.2	6.4	4.6	23	2004	4.4	6.8	-1.8	Worsened
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	22	27	19	3	2007	21	24	-1	No Change
Adults who smoke	2012	16	19	10	4	2007	17	19	1	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	23	28	21	2	2007	22	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	25	30.5	22	3	2007	27	31	2	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	11	10	5	30	2006	10	10	-1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	19	18	-1	5	2007-08	17	17	0	-2	Worsened
Adults who went without care because of cost in past year	2012	20	17	-3	4	2007	31	13	-18	11	Improved
At risk adults without a doctor visit	2012	22	14	-8	25	2007	18	14	-4	-4	Worsened
Adults without a usual source of care	2012	13	22	9	1	2007	33	20	-13	20	Improved
Older adults without recommended preventive care	2012	75	58	-17	46	2006	55	56	1	-20	Worsened
Children without a medical home	2011/12	37	46	9	1	2007	41	42	1	4	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	19	32	13	1	--	--	--	--	--	--
Mortality amenable to health care	2009-10	*	86	*	*	2004-05	*	96	*	*	*
Infant mortality, deaths per 1,000 live births	2008-09	*	6.5	*	*	2003-04	*	6.8	*	*	*
Adults with poor health-related quality of life	2012	34	27	-7	20	2007	37	24	-13	3	Improved
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	16	18	2	4	2007-08	22	17	-5	6	Improved
Adults who went without care because of cost in past year	2012	17	17	0	5	2007	21	13	-8	4	Improved
At risk adults without a doctor visit	2012	15	14	-1	18	2007	17	14	-3	2	Improved
Adults without a usual source of care	2012	13	22	9	2	2007	18	20	2	5	Improved
Older adults without recommended preventive care	2012	68	58	-10	21	2006	61	56	-5	-7	Worsened
Children without a medical home	2011/12	40	46	6	1	2007	41	42	1	1	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	21	32	11	1	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	20	25	5	4	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	39	27	-12	12	2007	36	24	-12	-3	No Change

Notes:

* Data not available for this state.

-- Historical data not available or not comperable over time.

(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.

(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.

(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.

Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Virginia

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**24**	**27**
Access & Affordability	14	18
Prevention & Treatment	28	26
Avoidable Hospital Use & Cost	28	24
Equity[b]	34	43
Healthy Lives	20	19

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	12	35%
State rate worsened[c]	8	24%
No change in state rate[d]	14	41%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	0	0%
Top quartile	6	14%
2nd quartile	19	45%
3rd quartile	15	36%
Bottom quartile	2	5%
Bottom 5 states	1	2%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	34	43	16	1	12	3
Low-Income	24	39	7	1	5	1
Race/Ethnicity	42	40	9	0	7	2

ESTIMATED IMPACT If Virginia improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	640,927	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	670,667	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	157,829	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	225,484	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	28,459	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	2,133	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	4,965	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	40,410	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	251,729	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	18	20	5	19	2007-08	17	17	-1	No Change
Children ages 0–18 uninsured	2011-12	6	8	3	9	2007-08	9	9	3	Improved
Adults who went without care because of cost in past year	2012	15	15	9	21	2007	11	12	-4	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	13	16	10	7	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	12	14	6	15	2007	14	14	2	Improved
Adults without a dental visit in past year	2012	12	15	10	7	2006	13	14	1	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	78	78	89	26	2007	80	82	-2	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	46	43	52	9	2006	51	44	-5	Worsened
Children with a medical home	2011/12	57	57	69	24	2007	59	61	-2	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	70	69	81	18	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	53	63	86	45	2007	72	63	-19	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	70	69	80	24	2009	40	43	30	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	20	19	12	31	2007	30	28	10	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	21	21	14	27	2007	20	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	75	76	80	31	2007	75	75	0	No Change
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.1	12.8	11.9	38	07/2005 - 06/2008	13.0	12.6	-0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	84	84	89	20	2007	80	80	4	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	64	66	71	40	2007	61	63	3	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	61	59	63	11	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	90	89	95	18	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	7	6	3	30	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	22	21.5	12	27	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	115	114	26	23	2004	152	137	37	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	27	27	13	24	2008	32	34	5	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	71	68	41	30	2008	76	80	5	No Change
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	48	45	26	29	2008	52	51.5	4	No Change
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	20	20	12	22	2006	20	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	20	19	7	28	2006	21	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	17	17	14	25	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	183	183.5	129	26	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,642	$5,501	$4,180	36	2008	$4,466	$4,505	-$1,176	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,051	$8,526	$5,406	20	2008	$7,330	$7,942	-$721	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	85	82	57	29	2004-05	96	90.5	11	Improved
Years of potential life lost before age 75	2010	6,014	6,567	4,900	20	2005	6,807	7,252	793	Improved
Breast cancer deaths per 100,000 female population	2010	22.3	22.2	14.8	27	2005	25.9	23.9	3.6	Improved
Colorectal cancer deaths per 100,000 population	2010	15.4	16.2	12.0	20	2005	17.3	18.1	1.9	Improved
Suicide deaths per 100,000 population	2010	11.7	13.5	6.9	12	2005	11.2	11.8	-0.5	No Change
Infant mortality, deaths per 1,000 live births	2009	7.1	6.4	4.6	33	2004	7.4	6.8	0.3	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	26	27	19	19	2007	21	24	-5	Worsened
Adults who smoke	2012	19	19	10	22	2007	18	19	-1	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	27	28	21	17	2007	24	27	-3	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	30	30.5	22	21	2007	31	31	1	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	10	10	5	23	2006	8	10	-2	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	35	18	-17	36	2007-08	40	17	-23	5	Improved
Adults who went without care because of cost in past year	2012	36	17	-19	50	2007	39	13	-26	3	Improved
At risk adults without a doctor visit	2012	28	14	-14	40	2007	31	14	-17	3	Improved
Adults without a usual source of care	2012	41	22	-19	28	2007	45	20	-25	4	Improved
Older adults without recommended preventive care	2012	71	58	-13	41	2006	49	56	7	-22	Worsened
Children without a medical home	2011/12	74	46	-28	50	2007	61	42	-19	-13	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	38	32	-6	17	--	--	--	--	--	--
Mortality amenable to health care	2009-10	151	86	-65	16	2004-05	176	96	-80	25	Improved
Infant mortality, deaths per 1,000 live births	2008-09	12.1	6.5	-5.6	20	2003-04	13.6	6.8	-6.8	1.5	Improved
Adults with poor health-related quality of life	2012	29	27	-2	5	2007	32	24	-8	3	Improved
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	30	18	-12	28	2007-08	30	17	-13	0	No Change
Adults who went without care because of cost in past year	2012	29	17	-12	28	2007	33	13	-20	4	Improved
At risk adults without a doctor visit	2012	17	14	-3	26	2007	26	14	-12	9	Improved
Adults without a usual source of care	2012	26	22	-4	28	2007	31	20	-11	5	Improved
Older adults without recommended preventive care	2012	66	58	-8	11	2006	72	56	-16	6	Improved
Children without a medical home	2011/12	53	46	-7	22	2007	54	42	-12	1	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	36	32	-4	15	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	31	25	-6	31	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	45	27	-18	36	2007	30	24	-6	-15	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Washington

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**15**	**18**
Access & Affordability	25	24
Prevention & Treatment	35	38
Avoidable Hospital Use & Cost	5	4
Equity[b]	20	31
Healthy Lives	7	11

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	9	26%
State rate worsened[c]	7	21%
No change in state rate[d]	18	53%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	4	10%
Top quartile	14	33%
2nd quartile	15	36%
3rd quartile	7	17%
Bottom quartile	6	14%
Bottom 5 states	2	5%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	20	31	16	4	7	5
Low-Income	25	25	7	2	2	3
Race/Ethnicity	15	36	9	2	5	2

ESTIMATED IMPACT If Washington improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	633,378	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	624,052	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	199,905	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	161,677	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	17,382	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	518	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	1,234	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	13,636	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	130,062	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	20	20	5	27	2007-08	15	17	-5	Worsened
Children ages 0–18 uninsured	2011-12	7	8	3	13	2007-08	7	9	0	No Change
Adults who went without care because of cost in past year	2012	15	15	9	21	2007	12	12	-3	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	16	16	10	26	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	18	14	6	40	2007	17	14	-1	No Change
Adults without a dental visit in past year	2012	14	15	10	17	2006	13	14	-1	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	77	78	89	31	2007	79	82	-2	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	43	43	52	22	2006	46	44	-3	Worsened
Children with a medical home	2011/12	59	57	69	16	2007	60	61	-1	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	72	69	81	15	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	54	63	86	42	2007	62	63	-8	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	65	69	80	39	2009	36	43	29	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	19	19	12	23	2007	25	28	6	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	19	21	14	15	2007	18	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	74	76	80	40	2007	70	75	4	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.4	12.8	11.9	49	07/2005 - 06/2008	13.5	12.6	0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	85	84	89	13	2007	81	80	4	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	65	66	71	33	2007	62	63	3	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	55	59	63	45	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	88	89	95	30	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	6	6	3	19	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	21	21.5	12	21	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	90	114	26	14	2004	92	137	2	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	18	27	13	6	2008	22	34	4	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	49	68	41	5	2008	59	80	10	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	35	45	26	11	2008	38	51.5	3	No Change
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	17	20	12	13	2006	16	20	-1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	13	19	7	9	2006	14	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	16	17	14	11	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	154	183.5	129	4	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$4,864	$5,501	$4,180	8	2008	$3,990	$4,505	-$874	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$7,101	$8,526	$5,406	8	2008	$6,571	$7,942	-$530	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	65	82	57	6	2004-05	74	90.5	9	No Change
Years of potential life lost before age 75	2010	5,357	6,567	4,900	7	2005	5,895	7,252	538	No Change
Breast cancer deaths per 100,000 female population	2010	21.2	22.2	14.8	18	2005	23.2	23.9	2.0	Improved
Colorectal cancer deaths per 100,000 population	2010	14.1	16.2	12.0	7	2005	15.5	18.1	1.4	Improved
Suicide deaths per 100,000 population	2010	13.9	13.5	6.9	28	2005	12.8	11.8	-1.1	No Change
Infant mortality, deaths per 1,000 live births	2009	4.9	6.4	4.6	3	2004	5.5	6.8	0.6	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	29	27	19	34	2007	26	24	-3	Worsened
Adults who smoke	2012	17	19	10	10	2007	17	19	0	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	27	28	21	17	2007	26	27	-1	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	26	30.5	22	5	2007	30	31	4	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	8	10	5	9	2006	8	10	0	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	28	18	-10	20	2007-08	32	17	-15	4	Improved
Adults who went without care because of cost in past year	2012	28	17	-11	26	2007	28	13	-15	0	No Change
At risk adults without a doctor visit	2012	32	14	-18	45	2007	27	14	-13	-5	Worsened
Adults without a usual source of care	2012	44	22	-22	41	2007	46	20	-26	2	Improved
Older adults without recommended preventive care	2012	68	58	-10	28	2006	58	56	-2	-10	Worsened
Children without a medical home	2011/12	57	46	-11	13	2007	80	42	-38	23	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	34	32	-2	10	--	--	--	--	--	--
Mortality amenable to health care	2009-10	108	86	-22	2	2004-05	119	96	-23	11	Improved
Infant mortality, deaths per 1,000 live births	2008-09	7.3	6.5	-0.8	1	2003-04	8.7	6.8	-1.9	1.4	Improved
Adults with poor health-related quality of life	2012	34	27	-7	20	2007	31	24	-7	-3	No Change
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	31	18	-13	33	2007-08	25	17	-8	-6	Worsened
Adults who went without care because of cost in past year	2012	30	17	-13	30	2007	28	13	-15	-2	No Change
At risk adults without a doctor visit	2012	26	14	-12	44	2007	26	14	-12	0	No Change
Adults without a usual source of care	2012	29	22	-7	34	2007	34	20	-14	5	Improved
Older adults without recommended preventive care	2012	70	58	-12	26	2006	67	56	-11	-3	Worsened
Children without a medical home	2011/12	48	46	-2	7	2007	49	42	-7	1	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	33	32	-1	8	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	27	25	-2	21	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	43	27	-16	29	2007	37	24	-13	-6	Worsened

Notes:

* Data not available for this state.

-- Historical data not available or not comperable over time.

(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.

(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.

(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.

Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

West Virginia

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**34**	**34**
Access & Affordability	29	26
Prevention & Treatment	25	16
Avoidable Hospital Use & Cost	48	50
Equity[b]	14	15
Healthy Lives	45	50

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	10	29%
State rate worsened[c]	13	38%
No change in state rate[d]	11	32%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	2	5%
Top quartile	6	14%
2nd quartile	3	7%
3rd quartile	17	40%
Bottom quartile	16	38%
Bottom 5 states	13	31%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	14	15	16	5	6	5
Low-Income	19	21	7	3	2	2
Race/Ethnicity	8	8	9	2	4	3

ESTIMATED IMPACT If West Virginia improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	176,092	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	187,552	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	56,240	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	30,616	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	13,704	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	867	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	2,886	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	20,733	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	215,187	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	20	20	5	27	2007-08	21	17	1	No Change
Children ages 0–18 uninsured	2011-12	9	8	3	30	2007-08	5	9	-4	Worsened
Adults who went without care because of cost in past year	2012	19	15	9	38	2007	17	12	-2	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	17	16	10	31	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	11	14	6	11	2007	10	14	-1	No Change
Adults without a dental visit in past year	2012	18	15	10	41	2006	14	14	-4	Worsened
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	76	78	89	34	2007	79	82	-3	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	44	43	52	16	2006	43	44	1	No Change
Children with a medical home	2011/12	61	57	69	11	2007	65	61	-4	Worsened
Children with a medical and dental preventive care visit in the past year	2011/12	74	69	81	8	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	74	63	86	4	2007	72	63	2	No Change
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	61	69	80	48	2009	30	43	31	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	22	19	12	38	2007	30	28	8	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	22	21	14	30	2007	18	19	-4	Worsened
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	73	76	80	47	2007	74	75	-1	Worsened
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.0	12.8	11.9	35	07/2005 - 06/2008	12.9	12.6	-0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	83	84	89	28	2007	79	80	4	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	65	66	71	33	2007	64	63	1	No Change
Home health patients who get better at walking or moving around	04/2012 - 03/2013	62	59	63	5	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	91	89	95	9	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	7	6	3	30	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	21	21.5	12	21	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	117	114	26	25	2004	171	137	54	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	49	27	13	50	2008	53	34	4	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	98	68	41	50	2008	111	80	13	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	64	45	26	50	2008	71	51.5	7	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	22	20	12	33	2006	22	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	20	19	7	28	2006	24	19	4	Improved
Home health patients also enrolled in Medicare with a hospital admission	2012	19	17	14	51	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	230	183.5	129	49	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$7,177	$5,501	$4,180	51	2008	$5,967	$4,505	-$1,210	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$8,655	$8,526	$5,406	31	2008	$8,087	$7,942	-$568	Worsened
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	107	82	57	44	2004-05	112	90.5	5	No Change
Years of potential life lost before age 75	2010	9,038	6,567	4,900	49	2005	9,017	7,252	-21	No Change
Breast cancer deaths per 100,000 female population	2010	20.9	22.2	14.8	13	2005	27.0	23.9	6.1	Improved
Colorectal cancer deaths per 100,000 population	2010	17.4	16.2	12.0	39	2005	19.8	18.1	2.4	Improved
Suicide deaths per 100,000 population	2010	14.1	13.5	6.9	32	2005	13.2	11.8	-0.9	No Change
Infant mortality, deaths per 1,000 live births	2009	7.7	6.4	4.6	41	2004	7.6	6.8	-0.1	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	35	27	19	50	2007	31	24	-4	Worsened
Adults who smoke	2012	28	19	10	50	2007	26	19	-2	Worsened
Adults ages 18–64 who are obese (BMI >= 30)	2012	35	28	21	48	2007	32	27	-3	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	34	30.5	22	37	2007	36	31	2	Improved
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	23	10	5	51	2006	20	10	-3	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	27	18	-9	15	2007-08	25	17	-8	-2	Worsened
Adults who went without care because of cost in past year	2012	28	17	-11	26	2007	17	13	-4	-11	Worsened
At risk adults without a doctor visit	2012	16	14	-2	14	2007	18	14	-4	2	Improved
Adults without a usual source of care	2012	34	22	-12	17	2007	23	20	-3	-11	Worsened
Older adults without recommended preventive care	2012	62	58	-4	9	2006	63	56	-7	1	Improved
Children without a medical home	2011/12	52	46	-6	6	2007	52	42	-10	0	No Change
Children without a medical and dental preventive care visit in the past year	2011/12	33	32	-1	8	--	--	--	--	--	--
Mortality amenable to health care	2009-10	152	86	-66	17	2004-05	171	96	-75	19	Improved
Infant mortality, deaths per 1,000 live births	2008-09	10.9	6.5	-4.4	14	2003-04	12.3	6.8	-5.5	1.4	Improved
Adults with poor health-related quality of life	2012	44	27	-17	47	2007	43	24	-19	-1	No Change
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	25	18	-7	13	2007-08	26	17	-9	1	Improved
Adults who went without care because of cost in past year	2012	31	17	-14	34	2007	29	13	-16	-2	No Change
At risk adults without a doctor visit	2012	15	14	-1	18	2007	15	14	-1	0	No Change
Adults without a usual source of care	2012	26	22	-4	28	2007	28	20	-8	2	Improved
Older adults without recommended preventive care	2012	66	58	-8	11	2006	64	56	-8	-2	No Change
Children without a medical home	2011/12	46	46	0	4	2007	38	42	4	-8	Worsened
Children without a medical and dental preventive care visit in the past year	2011/12	32	32	0	6	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	33	25	-8	36	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	53	27	-26	51	2007	46	24	-22	-7	Worsened

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Wisconsin

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**7**	**9**
Access & Affordability	7	9
Prevention & Treatment	3	8
Avoidable Hospital Use & Cost	19	21
Equity[b]	10	11
Healthy Lives	17	11

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	34	100%
State rate improved[c]	11	32%
State rate worsened[c]	7	21%
No change in state rate[d]	16	47%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	9	21%
Top quartile	18	43%
2nd quartile	15	36%
3rd quartile	7	17%
Bottom quartile	2	5%
Bottom 5 states	0	0%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	10	11	16	3	6	7
Low-Income	11	8	7	1	2	4
Race/Ethnicity	11	17	9	2	4	3

ESTIMATED IMPACT If Wisconsin improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	312,256	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	304,596	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	179,244	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	40,046	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	2,245	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	748	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	2,095	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	28,300	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	212,690	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	14	20	5	7	2007-08	12	17	-2	No Change
Children ages 0–18 uninsured	2011-12	6	8	3	9	2007-08	6	9	0	No Change
Adults who went without care because of cost in past year	2012	13	15	9	12	2007	8	12	-5	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	14	16	10	13	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	9	14	6	6	2007	15	14	6	Improved
Adults without a dental visit in past year	2012	12	15	10	7	2006	11	14	-1	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	82	78	89	16	2007	86	82	-4	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	43	43	52	22	2006	47	44	-4	Worsened
Children with a medical home	2011/12	66	57	69	4	2007	63	61	3	Improved
Children with a medical and dental preventive care visit in the past year	2011/12	68	69	81	27	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	65	63	86	19	2007	61	63	4	Improved
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	75	69	80	5	2009	39	43	36	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	13	19	12	3	2007	20	28	7	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	16	21	14	2	2007	15	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	78	76	80	5	2007	75	75	3	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.9	12.8	11.9	28	07/2005 - 06/2008	12.9	12.6	0.0	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	87	84	89	3	2007	84	80	3	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	69	66	71	4	2007	67	63	2	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	56	59	63	41	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	87	89	95	38	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	5	6	3	5	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	18	21.5	12	5	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	88	114	26	13	2004	100	137	12	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	22	27	13	12	2008	29	34	7	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	60	68	41	13	2008	75	80	15	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	41	45	26	18	2008	50	51.5	9	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	16	20	12	8	2006	17	20	1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	13	19	7	9	2006	14	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	17	17	14	25	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	184	183.5	129	27	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,834	$5,501	$4,180	42	2008	$4,858	$4,505	-$976	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$7,658	$8,526	$5,406	17	2008	$7,310	$7,942	-$348	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	71	82	57	13	2004-05	78	90.5	7	No Change
Years of potential life lost before age 75	2010	5,656	6,567	4,900	13	2005	6,222	7,252	566	No Change
Breast cancer deaths per 100,000 female population	2010	21.6	22.2	14.8	20	2005	22.7	23.9	1.1	No Change
Colorectal cancer deaths per 100,000 population	2010	14.6	16.2	12.0	14	2005	16.5	18.1	1.9	Improved
Suicide deaths per 100,000 population	2010	13.4	13.5	6.9	25	2005	11.6	11.8	-1.8	Worsened
Infant mortality, deaths per 1,000 live births	2009	6.0	6.4	4.6	19	2004	5.9	6.8	-0.1	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	23	27	19	6	2007	19	24	-4	Worsened
Adults who smoke	2012	20	19	10	27	2007	20	19	0	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	30	28	21	34	2007	25	27	-5	Worsened
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	29	30.5	22	18	2007	28	31	-1	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	11	10	5	30	2006	10	10	-1	No Change

Notes:
* Data not available for this state.
-- Historical data not available or not comperable over time.
(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	24	18	-6	8	2007-08	26	17	-9	2	Improved
Adults who went without care because of cost in past year	2012	31	17	-14	38	2007	21	13	-8	-10	Worsened
At risk adults without a doctor visit	2012	9	14	5	2	2007	24	14	-10	15	Improved
Adults without a usual source of care	2012	37	22	-15	21	2007	27	20	-7	-10	Worsened
Older adults without recommended preventive care	2012	64	58	-6	16	2006	52	56	4	-12	Worsened
Children without a medical home	2011/12	49	46	-3	3	2007	61	42	-19	12	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	42	32	-10	31	--	--	--	--	--	--
Mortality amenable to health care	2009-10	178	86	-92	29	2004-05	180	96	-84	2	No Change
Infant mortality, deaths per 1,000 live births	2008-09	13.8	6.5	-7.3	35	2003-04	17.3	6.8	-10.5	3.5	Improved
Adults with poor health-related quality of life	2012	34	27	-7	20	2007	33	24	-9	-1	No Change
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	23	18	-5	11	2007-08	21	17	-4	-2	Worsened
Adults who went without care because of cost in past year	2012	25	17	-8	16	2007	16	13	-3	-9	Worsened
At risk adults without a doctor visit	2012	10	14	4	5	2007	16	14	-2	6	Improved
Adults without a usual source of care	2012	20	22	2	11	2007	18	20	2	-2	No Change
Older adults without recommended preventive care	2012	71	58	-13	33	2006	63	56	-7	-8	Worsened
Children without a medical home	2011/12	44	46	2	3	2007	53	42	-11	9	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	44	32	-12	39	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	21	25	4	7	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	39	27	-12	12	2007	28	24	-4	-11	Worsened

Notes:

* Data not available for this state.

-- Historical data not available or not comperable over time.

(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.

(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.

(3) Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened.

Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Wyoming

Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014 Scorecard	2009 Revised[a]
OVERALL	**29**	**30**
Access & Affordability	36	32
Prevention & Treatment	23	31
Avoidable Hospital Use & Cost	19	18
Equity[b]	31	35
Healthy Lives	29	23

CHANGE IN RATES	2014 Scorecard	
	Count	Percent
Indicators with trends	33	100%
State rate improved[c]	10	30%
State rate worsened[c]	9	27%
No change in state rate[d]	14	42%

DISTRIBUTION OF RATES	2014 Scorecard	
	Count	Percent
Total indicators	42	100%
Top 5 states	4	10%
Top quartile	13	31%
2nd quartile	7	17%
3rd quartile	13	31%
Bottom quartile	9	21%
Bottom 5 states	5	12%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014 Scorecard	2009 Revised[a]	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
Equity Dimension	31	35	15	3	6	6
Low-Income	29	32	7	3	3	1
Race/Ethnicity	32	31	8	0	3	5

ESTIMATED IMPACT If Wyoming improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	60,252	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	85,215	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	30,165	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	13,707	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	1,569	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	134	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hosptial readmissions	123	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	2,428	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	21,729	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES

a Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.

b The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.

c Denotes a change of at least 0.5 standard deviations.

d Denotes a change of less than 0.5 standard deviations.

EQUITY:
The equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

ESTIMATED IMPACT:
The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight *Scorecard* indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
ACCESS & AFFORDABILITY	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults ages 19–64 uninsured	2011-12	22	20	5	35	2007-08	18	17	-4	Worsened
Children ages 0–18 uninsured	2011-12	10	8	3	37	2007-08	9	9	-1	No Change
Adults who went without care because of cost in past year	2012	15	15	9	21	2007	12	12	-3	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	19	16	10	42	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	20	14	6	46	2007	23	14	3	Improved
Adults without a dental visit in past year	2012	14	15	10	17	2006	14	14	0	No Change
PREVENTION & TREATMENT	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Adults with a usual source of care	2012	69	78	89	48	2007	74	82	-5	Worsened
Adults ages 50 and older who received recommended screening and preventive care	2012	36	43	52	46	2006	38	44	-2	Worsened
Children with a medical home	2011/12	59	57	69	16	2007	59	61	0	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	65	69	81	33	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	67	63	86	10	2007	68	63	-1	No Change
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	67	69	80	31	2009	44	43	23	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	17	19	12	18	2007	30	28	13	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	18	21	14	10	2007	21	19	3	Improved
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	74	76	80	40	2007	71	75	3	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	12.8	12.8	11.9	26	07/2005 - 06/2008	12.0	12.6	-0.8	Worsened
Hospitalized patients given information about what to do during their recovery at home	2011	86	84	89	7	2007	84	80	2	Improved
Hospitalized patients who reported hospital staff always managed pain well, responded when needed help to get to bathroom or pressed call button, and explained medicines and side effects	2011	68	66	71	10	2007	66	63	2	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	56	59	63	41	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	88	89	95	30	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	5	6	3	5	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012- 03/2013	18	21.5	12	5	--	--	--	--	--

Dimension and Indicator	Year	State Rate	All-State Median	Best State	Rank	Year	State Rate	All-State Median	Change in Rate[1]	Meaningful Change Over Time[2]
AVOIDABLE HOSPITAL USE & COST	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Hospital admissions for pediatric asthma, per 100,000 children	2010	123	114	26	28	2004	*	137	--	*
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (3)	2012	24	27	13	18	2008	33	34	9	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	62	68	41	15	2008	79	80	17	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	34	45	26	10	2008	43	51.5	9	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	15	20	12	5	2006	15	20	0	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	14	19	7	13	2006	14	19	0	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	18	17	14	42	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	168	183.5	129	10	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	$5,861	$5,501	$4,180	44	2008	$4,622	$4,505	-$1,239	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	$6,818	$8,526	$5,406	6	2008	$6,681	$7,942	-$137	No Change
HEALTHY LIVES	**2014 Scorecard**					**2009 Revised Scorecard[a]**				
Mortality amenable to health care, deaths per 100,000 population	2009-10	82	82	57	26	2004-05	75	90.5	-7	No Change
Years of potential life lost before age 75	2010	7,246	6,567	4,900	38	2005	7,490	7,252	244	No Change
Breast cancer deaths per 100,000 female population	2010	22.6	22.2	14.8	30	2005	21.2	23.9	-1.4	Worsened
Colorectal cancer deaths per 100,000 population	2010	16.6	16.2	12.0	29	2005	13.9	18.1	-2.7	Worsened
Suicide deaths per 100,000 population	2010	22.4	13.5	6.9	50	2005	17.3	11.8	-5.1	Worsened
Infant mortality, deaths per 1,000 live births	2009	6.0	6.4	4.6	19	2004	8.8	6.8	2.8	Improved
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	22	27	19	3	2007	22	24	0	No Change
Adults who smoke	2012	22	19	10	38	2007	23	19	1	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2012	25	28	21	9	2007	25	27	0	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	27	30.5	22	9	2007	26	31	-1	No Change
Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	11	10	5	30	2006	11	10	0	No Change

Notes:
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(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.
(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.
(3) Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.
Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap[1]	Change in Vulnerable Group Rate[2]	Change in Vulnerable Group Relative to US Average[3]
RACE & ETHNICITY			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	38	18	-20	41	2007-08	29	17	-12	-9	Worsened
Adults who went without care because of cost in past year	2012	33	17	-16	44	2007	21	13	-8	-12	Worsened
At risk adults without a doctor visit	2012	33	14	-19	46	2007	29	14	-15	-4	Worsened
Adults without a usual source of care	2012	43	22	-21	38	2007	40	20	-20	-3	Worsened
Older adults without recommended preventive care	2012	67	58	-9	24	2006	72	56	-16	5	Improved
Children without a medical home	2011/12	58	46	-12	18	2007	59	42	-17	1	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	42	32	-10	31	--	--	--	--	--	--
Mortality amenable to health care	2009-10	*	86	*	*	2004-05	*	96	*	*	*
Infant mortality, deaths per 1,000 live births	2008-09	8.4	6.5	-1.9	4	2003-04	17.3	6.8	-10.5	8.9	Improved
Adults with poor health-related quality of life	2012	30	27	-3	9	2007	26	24	-2	-4	Worsened
LOW-INCOME			**2014 Scorecard**					**2009 Revised Scorecard[a]**			
Uninsured ages 0–64	2011-12	30	18	-12	28	2007-08	30	17	-13	0	No Change
Adults who went without care because of cost in past year	2012	26	17	-9	20	2007	24	13	-11	-2	No Change
At risk adults without a doctor visit	2012	22	14	-8	38	2007	31	14	-17	9	Improved
Adults without a usual source of care	2012	33	22	-11	46	2007	34	20	-14	1	Improved
Older adults without recommended preventive care	2012	74	58	-16	46	2006	72	56	-16	-2	No Change
Children without a medical home	2011/12	48	46	-2	7	2007	49	42	-7	1	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	41	32	-9	31	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	28	25	-3	25	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	38	27	-11	10	2007	32	24	-8	-6	Worsened

Notes:
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(1) Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator.
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Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.