

# Rhode Island

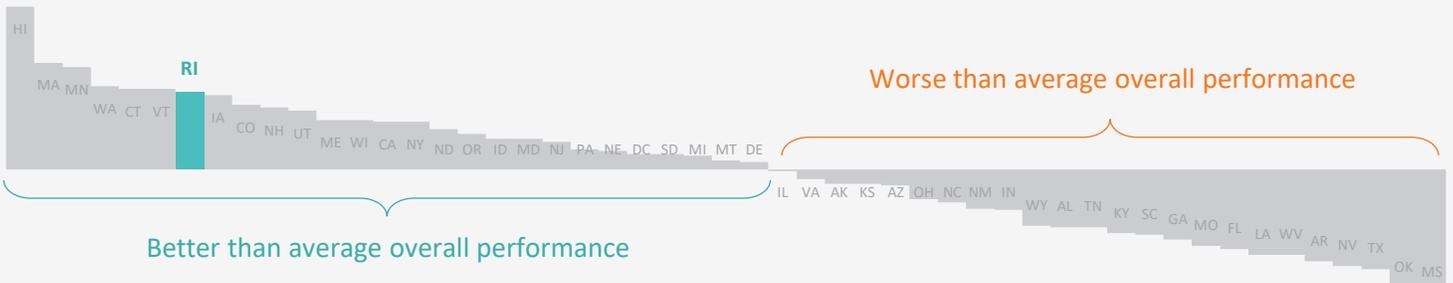
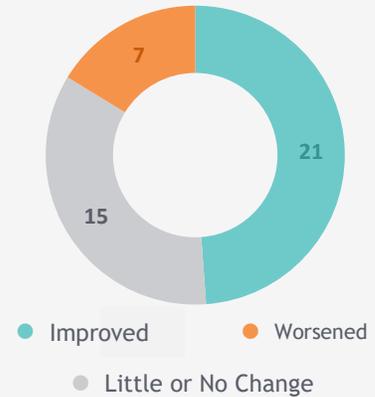


The Commonwealth Fund

## Ranking Highlights<sup>a</sup>

	National Rank		Rank Among New England States	
	2019	Change from baseline	2019	Change from baseline
Overall	7 of 51	+9	4 of 6	+2
Access & Affordability	3	+10	2	+4
Prevention & Treatment	5	+15	2	+3
Avoidable Use & Cost	26	-3	4	0
Healthy Lives	11	+14	5	+1
Health Care Disparities	13	+7	4	0

## How Health Care in Rhode Island Has Changed<sup>b</sup>



### Top-Ranked Indicators

- Children who did not receive needed mental health care
- Adults without a usual source of care
- High out-of-pocket medical spending

### Bottom-Ranked Indicators

- Drug poisoning deaths
- Central line-associated blood stream infection (CLABSI)
- Diabetic adults without an annual hemoglobin A1c test

### Most Improved Indicators

- Adults with any mental illness reporting unmet need
- Diabetic adults without an annual hemoglobin A1c test
- Uninsured adults

### Indicators That Worsened the Most

- Adults who are obese
- Preventable hospitalizations ages 18–64
- Home health patients with a hospital admission

## Estimated Impact of State Improvement<sup>c</sup>

Top state in the U.S.	Top state in the New England region	Rhode Island could expect the following gains if performance in the state improved to the top level at these national and regional benchmarks:
15,625	15,625	more adults and children, beyond those who already gained coverage through the ACA, would be insured
33,603	25,202	fewer adults would skip needed care because of its cost
9,927	9,927	more adults would receive age- and gender-appropriate cancer screenings
1,404	1,404	more children (ages 19–35 months) would receive all recommended vaccines
134	104	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
19,890	10,297	fewer employer-insured adults and elderly Medicare beneficiaries would seek care in emergency departments for nonemergent or primary-care-treatable conditions

**Table 1. State Health System Performance Indicator Data by Dimension**

Dimension and indicator	Data year	State rate	U.S. average	Best state rate	State ranking	Data year	State rate	U.S. average	Change over time <sup>b</sup>
<b>Access &amp; Affordability</b>	<b>2019 Scorecard</b>					<b>Baseline</b>			
Adults ages 19–64 uninsured	2017	6	12	4	4	2013	17	20	Improved
Children ages 0–18 uninsured	2017	2	5	1	2	2013	6	8	Improved
Adults age 18 and older without a usual source of care	2017	12	23	12	1	2013	16	24	Improved
Adults age 18 and older who went without care because of cost in past year	2017	12	14	8	18	2013	14	16	Improved
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2016-17	6	10	5	2	2013-14	9	11	Improved
Employee insurance costs as a share of median income	2017	6.9	6.9	4.8	30	2013	5.8	6.5	Worsened
Adults age 18 and older without a dental visit in past year	2016	11	16	10	2	2012	12	15	No Change
<b>Prevention &amp; Treatment</b>	<b>2019 Scorecard</b>					<b>Baseline</b>			
Adults without all age- and gender-appropriate cancer screenings	2016	26	32	24	3	2012	24	31	No Change
Adults without age-appropriate flu and pneumonia vaccines	2017	55	62	54	2	2013	58	64	Improved
Diabetic adults without an annual hemoglobin A1c test	2016	16.2	12	5.6	46	2015	23.7	16.9	Improved
Elderly patients who received a high-risk prescription drug	2015	8	11	5	5	--	--	--	--
Children without a medical home	2017	52	51	39	32	2016	50	51	No Change
Children without age-appropriate medical and dental preventive care visits in the past year	2017	23	32	18	5	2016	28	32	Improved
Children who did not receive needed mental health care	2017	4	22	4	1	2016	16	18	Improved
Children ages 19–35 months who did not receive all recommended vaccines	2016	24	29	15	10	2012	28	32	Improved
Hospital 30-day mortality	2014-17	13.0	13.9	12.8	2	2010-13	13.2	13.2	No Change
Central line-associated bloodstream infections (CLABSI), Standardized Infection Ratio	2016	1.03	0.89	0.36	44	2015	1.07	0.99	No Change
Hospitals with lower-than-average patient experience ratings	2017	55	45	9	39	--	--	--	--
Home health patients without improved mobility	2017	25	25	20	21	2013	37	39	Improved
Nursing home residents with an antipsychotic medication	2017	16	15	7	27	2013	18	21	Improved
Adults with any mental illness reporting unmet need	2014-16	17	21	16	2	2009-11	27	21	Improved
Adults with any mental illness who did not receive treatment	2014-16	48	56	42	6	2009-11	47	59	No Change

**Table 1. State Health System Performance Indicator Data by Dimension (continued)**

Dimension and indicator	Data year	State rate	U.S. average	Best state rate	State ranking	Data year	State rate	U.S. average	Change over time <sup>b</sup>
<b>Avoidable Hospital Use &amp; Cost</b>						<b>2019 Scorecard</b>		<b>Baseline</b>	
Hospital admissions for pediatric asthma, per 100,000 children ages 2–17	2015	--	87.2	21.7	--	2012	149.0	142.9	--
Potentially avoidable emergency department visits									
Ages 18–64, per 1,000 employer-insured enrollees	2016	135.9	142.2	115.9	17	2015	157.9	159.0	Improved
Age 65 and older, per 1,000 Medicare beneficiaries	2015	212.2	196.9	138.3	40	2012	187.7	187.8	Worsened
Admissions for ambulatory care–sensitive conditions									
Ages 18–64, per 1,000 employer-insured enrollees	2016	6.6	5.3	5.3	22	2015	4.2	4.6	Worsened
Ages 65–74, per 1,000 Medicare beneficiaries	2017	--	43.9	21.7	--	2013	47.1	47.7	--
30-day hospital readmissions									
Ages 18–64, per 1,000 employer-insured enrollees	2016	3.4	3.1	2.4	39	2015	3.4	2.9	No Change
Age 65 and older, per 1,000 Medicare beneficiaries	2017	45.1	41	19.7	38	2013	43.8	43.5	No Change
Skilled nursing facility patients with a hospital readmission	2016	19	19	11	22	2012	21	20	Improved
Long-stay nursing home residents hospitalized within a six-month period	2016	8	15	5	4	2012	10	17	No Change
Home health patients also enrolled in Medicare with a hospital admission	2017	17	16	14	40	2013	15	16	Worsened
Adults with inappropriate lower back imaging	2016	66.8	68.9	57.7	19	2015	69.7	71.1	Improved
Employer-sponsored insurance spending per enrollee	2016	\$4,242	\$4,882	\$3,255	11	2013	\$4,018	\$4,697	No Change
Medicare spending per beneficiary	2017	\$9,141	\$9,534	\$6,195	25	2013	\$8,907	\$9,081	No Change
<b>Healthy Lives</b>						<b>2019 Scorecard</b>		<b>Baseline</b>	
Mortality amenable to health care, deaths per 100,000 population	2014-15	68.2	84.3	54.7	12	2010-11	73.3	85.3	No Change
Breast cancer deaths per 100,000 female population	2017	16.6	19.9	15.6	5	2013	19.4	20.8	Improved
Colorectal cancer deaths per 100,000 population	2017	10	12.9	9.3	4	2013	13.2	14.6	Improved
Suicide deaths per 100,000 population	2017	11.8	14	6.6	10	2013	12.2	12.6	No Change
Alcohol-related deaths per 100,000 population	2017	9.6	9.6	5.5	23	2013	10.1	8.2	No Change
Drug poisoning deaths per 100,000 population	2017	31	21.7	8.1	41	2013	22.4	13.8	Worsened
Infant mortality, deaths per 1,000 live births	2016	5.6	5.9	3.5	17	2012	6.5	6	Improved
Adults who report fair or poor health	2017	16	17	9	23	2013	14	16	Worsened
Adults who smoke	2017	15	16	9	13	2013	17	18	Improved
Adults who are obese	2017	31	31	23	22	2013	27	29	Worsened
Children who are overweight or obese	2017	31	31	21	30	2016	36	31	Improved
Adults who have lost six or more teeth	2016	8	10	6	12	2012	9	10	No Change

**Table 2. State Disparity Indicator Data**

Dimension and indicator	Data year	Low-	Disparity <sup>e</sup>	State ranking	Data year	Low-	Disparity <sup>e</sup>	Change over time <sup>f</sup>
		income rate <sup>d</sup>				income rate <sup>d</sup>		
Disparity	2019 Scorecard				Baseline			
Adults ages 19–64 uninsured	2017	13	-10	8	2013	32	-26	Improved
Children ages 0–18 uninsured	2017	--	--	--	2013	9	--	--
Adults age 18 and older without a usual source of care	2017	15	-8	21	2013	19	-12	Improved
Adults age 18 and older who went without care because of cost in past year	2017	18	-11	14	2013	25	-20	Improved
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2016-17	21	-20	6	2013-14	21	-20	No Change
Adults age 18 and older without a dental visit in past year	2016	17	-11	13	2012	20	-14	Improved
Adults without all age- and gender-appropriate cancer screenings	2016	26	-5	2	2012	30	-10	Improved
Adults without age-appropriate flu and pneumonia vaccines	2017	56	-2	2	2013	59	-8	Improved
Children without a medical home	2017	68	-34	47	2016	66	-29	Worsened
Children without age-appropriate medical and dental preventive care visits in the past year	2017	26	-1	2	2016	34	-13	Improved
Children ages 19–35 months who did not receive all recommended vaccines	2016	32	-19	43	2012	26	1	Worsened
Hospital admissions for pediatric asthma, per 100,000 children ages 2–17	2015	--	--	--	2012	191.3	-88.2	--
Potentially avoidable emergency department visits, Medicare beneficiaries age 65 and older, per 1,000 beneficiaries	2014	436.6	-254.7	46	2012	344.1	-177.3	Worsened
Hospital admissions for ambulatory care–sensitive conditions, Medicare beneficiaries age 65 and older, per 1,000 beneficiaries	2015	111.1	-62	33	2012	79.3	-29.1	Worsened
30-day hospital readmissions among, Medicare beneficiaries age 65 and older, per 1,000 beneficiaries	2015	61.3	-22.8	19	2012	70.3	-29.1	Improved
Adults who report fair or poor health	2017	32	-27	44	2013	30	-24	Worsened
Adults who smoke	2017	24	-15	22	2013	26	-16	Improved
Adults who are obese	2017	39	-7	10	2013	32	-8	No Change
Adults who have lost six or more teeth	2016	12	-9	9	2012	15	-10	Improved

**Notes**

(a) The 2019 Scorecard rankings generally reflect 2017 data. The 2019 Scorecard added or revised several performance measures since the May 2018 Scorecard report; rankings are not comparable between reports. Rank change from the baseline period represents states' rank difference from the baseline data year (generally 2012 or 2013). Positive values represent an improvement in rank; negative values are a worsening in rank.

(b) Trend data available for 45 of 47 total Scorecard indicators. Improved/worsened denotes a change of at least one half (0.5) standard deviation larger than the indicator's distribution among all states over the two time points. No change denotes no change in rate or a change of less than one-half standard deviation.

(c) Estimated impact if this state's performance improved to the rate of two benchmark levels — a national benchmark set at the level of the best-performing state and a regional benchmark set at the level of the top-performing state in region ([www.bea.gov](http://www.bea.gov): Great Lakes, Mid-Atlantic, New England, Plains, Rocky Mountains, Southeast, Southwest, West). Benchmark states have an estimated impact of zero (0). Equivalent estimated impact based on national and regional benchmarks indicate that the best observed rate in the region was equal to the best observed rate nationally.

(d) Rates are for states' low income population, generally those whose household income is under 200% FPL.

(e) Disparity is the difference between the states' low-income and higher-income (400%+ FPL) populations.

(f) Improvement indicates that the low-income rate improved and the disparity between low- and higher-income populations narrowed; worsening indicates the low-income rate worsened and the disparity between low- and higher-income populations widened.