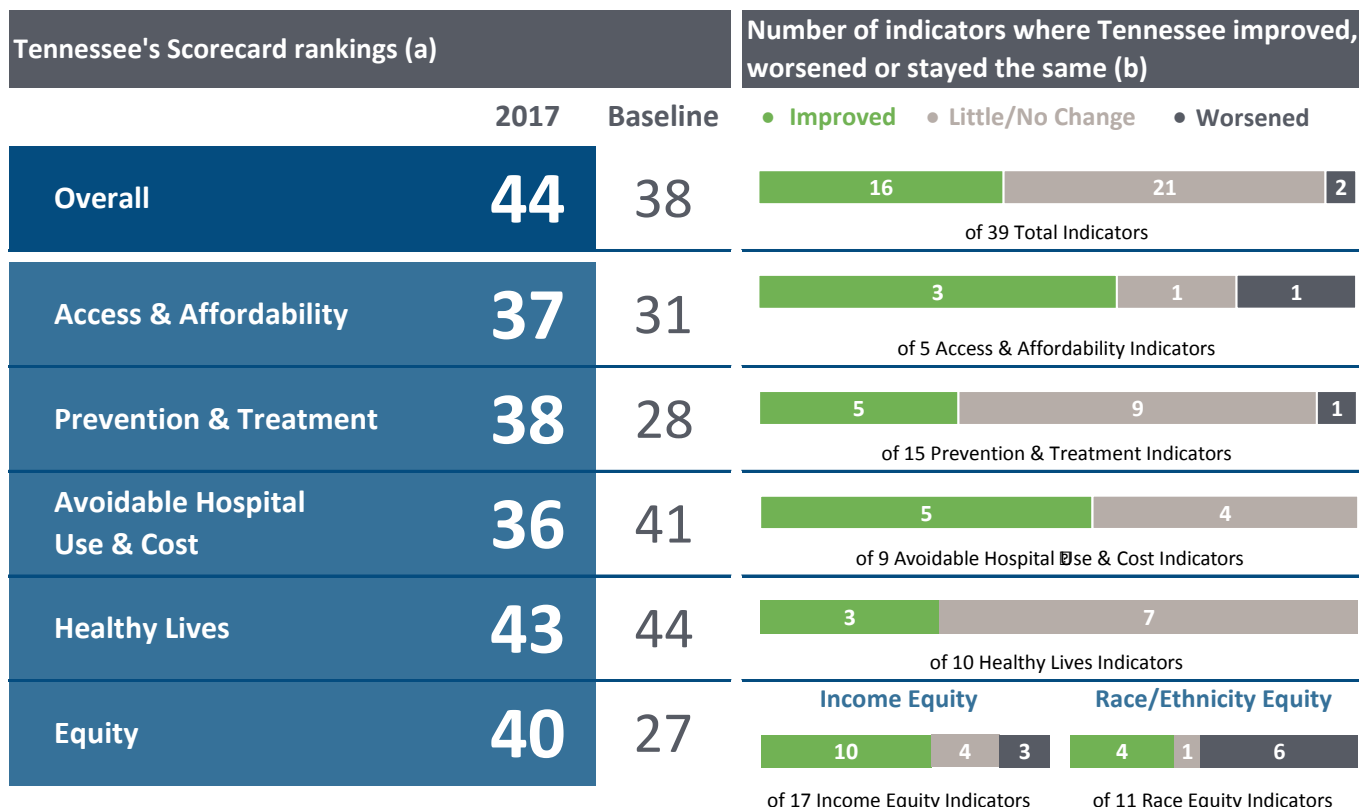
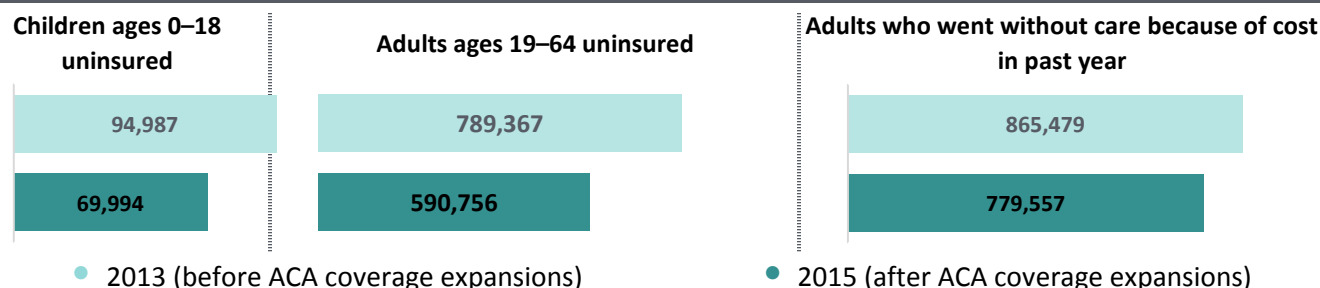


# Tennessee



## Before and after implementation of the Affordable Care Act (ACA) coverage expansions



## Estimated impact of state improvement (c)

If Tennessee improved to the level of the best-performing state for this indicator, then:

565,587	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
276,613	more adults would receive age- and gender-appropriate recommended cancer screenings
12,901	more children (ages 19-35 months) would receive all recommended vaccines
33,856	fewer Medicare beneficiaries would receive an unsafe medication
3,630	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
37,418	fewer emergency department visits for nonemergent or primary-care-treatable conditions would occur among Medicare beneficiaries

# Commonwealth Fund Scorecard on State Health System Performance, 2017

**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	Substantial change over time (a)
<b>ACCESS &amp; AFFORDABILITY</b>	<b>2017 Scorecard</b>					<b>Baseline</b>			
Adults ages 19–64 uninsured	2015	15	13	4	35	2013	20	20	Improved
Children ages 0–18 uninsured	2015	4	5	1	11	2013	6	8	Improved
Adults who went without care because of cost in past year	2015	16	13	7	43	2013	18	16	Improved
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2014-15	18	14	10	45	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2015	14	13	6	27	2013	11	14	Worsened
Adults without a dental visit in past year	2014	18	16	11	41	2012	17	15	No Change
<b>PREVENTION &amp; TREATMENT</b>	<b>2017 Scorecard</b>					<b>Baseline</b>			
Adults with a usual source of care	2015	78	78	89	29	2013	77	76	No Change
Adults with age- and gender-appropriate cancer screenings	2014	68	68	77	23	2012	67	69	No Change
Adults with age-appropriate vaccines	2015	40	38	51	25	2013	42	36	No Change
Children with a medical home	2011/12	60	54	69	14	--	--	--	--
Children with a medical and dental preventive care visit in the past year	2011/12	70	68	81	18	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	60	61	86	29	--	--	--	--
Children ages 19–35 months who received all recommended doses of seven key vaccines	2015	70	72	81	38	2013	69	70	No Change
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2014	16	13	7	42	2012	21	17	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2014	21	18	10	45	2012	24	21	Improved
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2014	75	76	80	30	2013	75	76	No Change
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, pneumonia, or stroke	07/2012 - 06/2015	15.0	14.5	13.1	38	07/2010 - 06/2013	13.5	13.2	Worsened
Central line-associated bloodstream infections (CLABSI), Standardized Infection Ratio	2014	0.48	0.50	0.23	22	2013	0.49	0.54	No Change
Hospitalized patients given information about what to do during their recovery at home	2015	86	87	90	35	2013	85	86	Improved
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	2015	68	68	74	29	2013	68	68	No Change
Home health patients who get better at walking or moving around	2015	68	66	72	11	2013	63	61	Improved
Home health patients whose wounds improved or healed after an operation	2015	89	90	95	33	2013	90	89	No Change
High-risk nursing home residents with pressure sores	2015 (Q2-Q4)	5	6	3	16	2013 (Q2-Q4)	5	6	No Change
Long-stay nursing home residents with an antipsychotic medication	2015 (Q2-Q4)	20	17	8	41	2013 (Q2-Q4)	24	21	Improved

# Commonwealth Fund Scorecard on State Health System Performance, 2017

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	Substantial change over time (a)
AVOIDABLE HOSPITAL USE & COST					2017 Scorecard		Baseline		
Hospital admissions for pediatric asthma, per 100,000 children	2013	69	107	27	13	2011	98	107	Improved
Hospital admissions among Medicare beneficiaries for ambulatory care-sensitive conditions, ages 65–74, per 1,000 beneficiaries (b)	2014	34	27	12	41	2012	37	29	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care-sensitive conditions, age 75 and older, per 1,000 beneficiaries (b)	2014	77	66	35	42	2012	84	70	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2014	29	27	10	30	2012	37	34	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2014	19	19	11	23	2012	21	20	Improved
Long-stay nursing home residents hospitalized within a six-month period	2014	19	16	5	35	2012	22	17	Improved
Home health patients also enrolled in Medicare with a hospital admission	2015	17.3	16.2	13.9	45	2013	17.0	16.0	No Change
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2014	193	185	129	35	2012	200	188	No Change
Total reimbursements per enrollee (ages 18–64) with employer-sponsored insurance	2014	\$3,969	\$4,569	\$3,217	14	2013	\$4,039	\$4,489	No Change
Total Medicare (Parts A & B) reimbursements per beneficiary	2014	\$9,019	\$8,819	\$5,592	39	2012	\$9,197	\$8,854	No Change
HEALTHY LIVES					2017 Scorecard		Baseline		
Mortality amenable to health care, deaths per 100,000 population	2013-14	112.3	84.2	54.3	46	2011-12	109.4	84.0	No Change
Years of potential life lost before age 75	2014	8,599	6,447	4,892	44	2012	8,464	6,412	No Change
Breast cancer deaths per 100,000 female population	2014	21.6	20.6	14.2	33	2012	22.9	21.4	Improved
Colorectal cancer deaths per 100,000 population	2014	15.3	14.3	10.9	35	2012	16.9	14.9	Improved
Suicide deaths per 100,000 population	2014	14.1	13.0	7.8	25	2012	14.6	12.6	No Change
Infant mortality, deaths per 1,000 live births	2013	6.8	6.0	4.2	39	2012	7.2	6.0	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2015	30	26	20	44	2013	31	26	No Change
Adults who smoke	2015	22	17	9	43	2013	23	18	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2015	35	29	20	43	2013	35	29	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	34	31	22	37	--	--	--	--
Adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2014	16	10	6	46	2012	18	10	Improved

# Commonwealth Fund Scorecard on State Health System Performance, 2017

**Table 2. State Equity Indicator Data**

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.

Equity Type and Indicator	Data year	Vulnerable			State ranking	Data year	Vulnerable			Change in vulnerable group rate (b)
		group rate	U.S. average	Gap (a)			group rate	U.S. average	Gap (a)	
LOW-INCOME	2017 Scorecard					Baseline				
Uninsured ages 19–64	2015	28	13	-15	31	2013	37	20	-17	Improved
Adults who went without care because of cost in past year	2015	26	13	-13	37	2013	28	16	-12	No Change
At risk adults without a doctor visit	2015	16	13	-3	25	2013	10	14	4	Worsened
Adults without a dental visit in past year	2014	26	16	-10	33	2012	26	15	-11	No Change
Adults without a usual source of care	2015	25	22	-3	28	2013	25	24	-1	No Change
Adults without age- and gender-appropriate cancer screenings	2014	34	32	-2	16	2012	40	31	-9	Improved
Adults without age-appropriate vaccines	2015	63	62	-1	23	2013	56	64	8	Worsened
Children without a medical home	2011/12	50	46	-4	11	--	--	--	--	--
Children without a medical and dental preventive care visit in the past year	2011/12	34	32	-2	11	--	--	--	--	--
Children ages 19–35 months without all recommended vaccines (c)	2014	37	28	-9	37	2012	25	32	7	Worsened
Elderly patients who received a high-risk prescription drug	2014	22	13	-9	46	2012	27	17	-10	Improved
Hospital admissions for pediatric asthma, per 100,000 children	2013	81	107	26	6	2012	84	143	59	Improved
Medicare admissions for ambulatory care–sensitive conditions (d)	2014	114	44	-70	47	2012	125	48	-77	Improved
Medicare 30-day hospital readmissions, per 1,000 beneficiaries (d)	2014	79	35	-44	44	2012	94	43	-51	Improved
Potentially avoidable ED visits among Medicare beneficiaries, per 1,000 beneficiaries (d)	2014	387	185	-202	40	2012	387	188	-199	No Change
Adults with poor health-related quality of life	2015	45	26	-19	40	2013	50	26	-24	Improved
Adults who smoke	2015	28	17	-11	27	2013	34	18	-16	Improved
Adults who are obese	2015	44	29	-15	45	2013	46	29	-17	Improved
Adults who have lost six or more teeth	2014	25	10	-15	45	2012	31	10	-21	Improved
RACE/ETHNICITY (e)	2017 Scorecard					Baseline				
Uninsured ages 19–64 (Hispanic ethnicity)	2015	50	13	-37	44	2013	60	20	-40	Improved
Adults who went without care because of cost in past year (Hispanic ethnicity)	2015	21	13	-8	18	2013	*	16	*	*
At risk adults without a doctor visit (other race)	2015	31	13	-18	50	2013	12	14	2	Worsened
Adults without a dental visit in past year (black race)	2014	20	16	-4	10	2012	20	15	-5	No Change
Adults without a usual source of care (Hispanic ethnicity)	2015	42	22	-20	32	2013	*	24	*	*
Adults without age- and gender-appropriate cancer screenings (other race)	2014	30	32	2	5	2012	35	31	-4	Improved
Adults without age-appropriate vaccines (black race)	2015	70	62	-8	31	2013	68	64	-4	Worsened
Children without a medical home (Hispanic ethnicity)	2011/12	62	46	-16	29	--	--	--	--	--

# Commonwealth Fund Scorecard on State Health System Performance, 2017

**Table 2. State Equity Indicator Data (continued)**

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.

Equity Type and Indicator	Data year	Vulnerable			State ranking	Data year	Vulnerable			Change in vulnerable group rate (b)
		group rate	U.S. average	Gap (a)			group rate	U.S. average	Gap (a)	
RACE/ETHNICITY (continued)		2017 Scorecard				Baseline				
Children without a medical and dental preventive care visit in the past year (Hispanic ethnicity)	2011/12	38	32	-6	17	--	--	--	--	--
Children ages 19–35 months without all recommended vaccines (other race) (c)	2014	31	28	-3	20	2012	*	32	*	*
Mortality amenable to health care (black race)	2013-14	182	84.2	-97.5	42	2011-12	177.3	84.0	-93.30	Worsened
Infant mortality, deaths per 1,000 live births (black race)	2012-13	11.4	6.0	-5.4	26	2010-11	14.7	6.5	-8.2	Improved
Adults with poor health-related quality of life (other race)	2015	33	26	-7	24	2013	27	26	-1	Worsened
Adults who smoke (other race)	2015	27	17	-10	33	2013	17	18	1	Worsened
Adults who are obese (black race)	2015	49	29	-20	51	2013	41	29	-12	Worsened
Adults who have lost six or more teeth (black race)	2014	14	10	-4	28	2012	18	10	-8	Improved

**Table 3. Summary of Equity Indicator Change**

	2017 Scorecard rankings	Indicators with trends	CHANGE IN EQUITY GAP		
			No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
<b>Equity Dimension</b>	40	28	5	14	9
Low Income	37	17	4	10	3
Race/Ethnicity	36	11	1	4	6

## Notes:

**Cover Page. (a)** The 2017 Scorecard rankings generally reflect 2014 or 2015 data; Baseline rankings generally reflect 2012 or 2013 data. The Baseline rankings generally align with Baseline rankings reported in the December 2015 State Scorecard report. The 2017 State Scorecard added or revised several performance measures relative to what was reported in the December 2015 Scorecard report; overall and dimension rankings are not strictly comparable between these reports. **(b)** Improved or worsened denotes a change of at least one-half (0.5) of a standard deviation (a statistical measure of variation) 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 of a standard deviation. The Equity dimension is separated into two subdimensions, Income and Race/Ethnicity. For interpretation of changes in the Equity dimension, see Table 2, note (b) below. **(c)** The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for selected Scorecard indicators. Benchmark states, those with the best rate, have an estimated impact of zero (0).

**Table 1. (\*)** Data not available for this state. **(--)** Historic data not available or not comparable over time. **(a)** Substantial change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations. **(b)** 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.

**Table 2. (\*)** Data not available for this state. **(--)** Historic data not available or not comparable over time. **(a)** 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. **(b)** 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. **(c)** Different data years were used in the equity analysis than were reported for the entire state population rate. **(d)** Measures constructed from 20% Medicare sample for the equity analysis. Data for equity analysis provided by A. Jha, Harvard School of Public Health. Refer to the 2017 State Scorecard report appendix for source information for entire state population rate. **(e)** Gaps are based on the state's nonwhite population with the largest observed difference from the U.S. average. The racial/ethnic minority with the largest gap is noted for each indicator. Race/ethnicity is generally defined as white race (non-Hispanic), black race (non-Hispanic), Hispanic ethnicity (can include individuals of any race), and other race (non-Hispanic) which includes individuals who self-identify as being some race/ethnicity not otherwise categorized.