

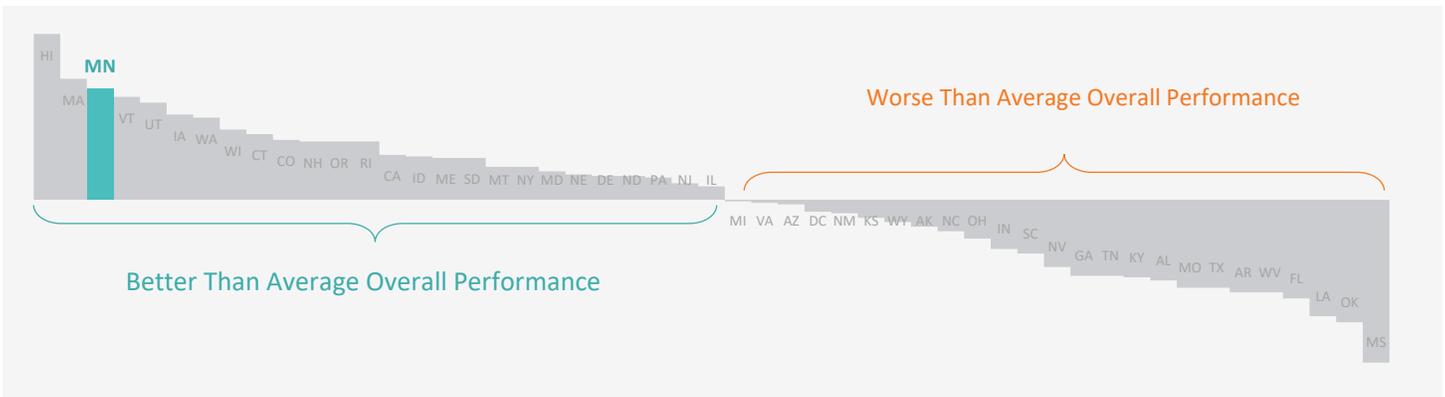
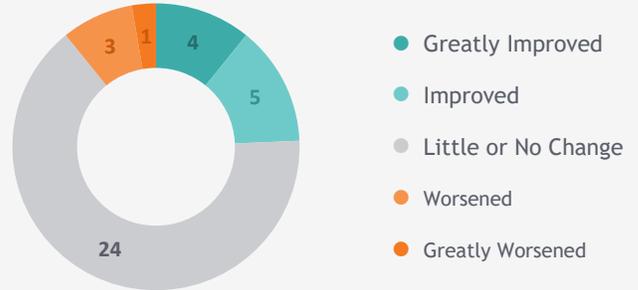
Minnesota



Ranking Highlights

	2018 Rank ^a	Change ^b
Overall	3	0
Access & Affordability	9	-3
Prevention & Treatment	2	0
Avoidable Use & Cost	8	0
Healthy Lives	4	+3
Disparity	7	-2

How Health Care in Minnesota Has Changed^c



Top Ranked Indicators

- Medicare beneficiaries received a high-risk drug
- Mortality amenable to health care
- Diabetic adults without a HbA1C test

Bottom Ranked Indicators

- Adults without a usual source of care
- Mentally ill adults reporting unmet need
- Home health patients without improved mobility

Most Improved Indicators

- Mentally ill adults who did not receive treatment
- Home health patients without improved mobility
- Breast cancer deaths

Indicators That Worsened the Most

- Home health patients with a hospital admission
- Employee insurance costs as a share of median income
- Hospital 30-day mortality

Estimated Impact of State Improvement^d

Top State in the U.S.	Top State in the Midwest	Minnesota could expect the following gains if performance in the state improved to the top level at these national and regional benchmarks:
82,600	41,300	fewer adults would skip needed care because of its cost
101,224	22,300	more adults would receive age- and gender-appropriate cancer screenings
11,669	6,918	more children (ages 19–35 months) would receive all recommended vaccines
0	0	fewer Medicare beneficiaries would receive an unsafe medication
0	0	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
15,794	10,832	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 (e)
Access & Affordability						2018 Scorecard		Baseline	
Adults ages 19–64 uninsured	2016	6	12	4	5	2013	11	20	Improved
Children ages 0–18 uninsured	2016	3	5	1	5	2013	6	8	Improved
Adults without a usual source of care	2016	27	22	11	41	2013	27	24	No Change
Adults who went without care because of cost	2016	9	13	7	5	2013	10	16	No Change
Individuals with high out-of-pocket medical spending	2015-16	10	14	9	3	2013-14	12	15	Improved
Employee health insurance contributions as a share of median income	2016	5	6	4	3	2013	4	6	Worsened
Adults without a dental visit in past year	2016	12	16	10	4	2012	11	15	No Change
Prevention & Treatment						2018 Scorecard		Baseline	
Adults without all age- and gender-appropriate cancer screenings	2016	29	32	24	11	2012	27	31	No Change
Adults without all age-appropriate recommended vaccines	2016	57	63	54	4	2013	56	64	No Change
Diabetic adults ages 18–64 without a hemoglobin A1c test	2015	11	17	11	1	--	--	--	--
Medicare beneficiaries received a high-risk drug	2014	7	13	7	1	2012	10	17	Improved
Children without all components of a medical home	2016	45	51	40	7	--	--	--	--
Children without both a medical and dental preventive care visit in the past year	2016	35	32	20	38	--	--	--	--
Children who did not receive needed mental health treatment	2016	9	18	5	6	--	--	--	--
Children ages 19–35 months who did not receive all recommended vaccines	2016	26	29	15	17	2013	26	30	No Change
Hospital 30-day mortality	2013 - 2016	13.9	14.1	13	13	2010 - 2013	12.8	13.2	Worsened
Central line-associated blood stream infection (CLABSI)	2015	0.78	0.99	0.32	8	--	--	--	--
Hospital patients discharged without instructions for home recovery	2016	11	13	9	7	2013	12	14	No Change
Hospital patients who did not receive patient-centered care	2016	29	32	27	6	2013	29	32	No Change
Home health patients who did not get better at walking or moving around	2016	33	29	23	45	2013	43	39	Improved
Nursing home residents with an antipsychotic medication	2016	14	16	8	10	2013	16	21	Improved
Adults with any mental illness reporting unmet need	2013-2015	24	20	14	43	2009-2011	25	21	No Change
Adults with any mental illness who did not receive treatment	2013-2015	44	56	41	2	2009-2011	57	59	Improved

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 (e)
Avoidable Hospital Use & Cost	2018 Scorecard					Baseline			
Hospital admissions for pediatric asthma, per 100,000 children	2014	70	106	22	7	2012	82	143	No Change
Potentially avoidable emergency department visits									
Ages 18–64, per 1,000 employer-insured enrollees	2015	139	159	130	10	--	--	--	--
Age 65 and older, per 1,000 Medicare beneficiaries	2015	186	197	138	10	2012	181	188	No Change
Admissions for ambulatory care–sensitive conditions									
Ages 18–64, per 1,000 employer-insured enrollees	2015	4	5	3	11	--	--	--	--
Ages 65–74, per 1,000 Medicare beneficiaries	2015	19	26	14	11	2012	20	29	No Change
Age 75 and older, per 1,000 Medicare beneficiaries	2015	52	66	33	11	2012	55	70	No Change
30-day hospital readmissions									
Ages 18–64, per 1,000 employer-insured enrollees	2015	3.13	2.9	1.2	30	--	--	--	--
Age 65 and older, per 1,000 Medicare beneficiaries	2015	37	42	21	30	2012	41	49	No Change
Short-stay nursing home residents with a 30-day readmission to the hospital	2014	16	19	11	12	2012	17	20	No Change
Long-stay nursing home residents with a hospital admission	2014	7	16	5	2	2012	7	17	No Change
Home health patients with a hospital admission	2016	16.9	16.4	14	32	2013	16	16	Worsened
Adults ages 18–50 with low back pain who had an imaging study at diagnosis	2015	21	29	16	4	--	--	--	--
Total employer-sponsored insurance spending per enrollee	2015	\$4,726	\$4,736	\$3,347	26	2013	\$4,483	\$4,697	No Change
Total Medicare (Parts A & B) reimbursements per enrollee	2015	\$7,791	\$9,025	\$5,586	12	2012	\$7,225	\$8,854	No Change
Healthy Lives	2018 Scorecard					Baseline			
Mortality amenable to health care, deaths per 100,000 population	2014-15	54.7	84.3	54.7	1	2012-13	55.6	83.7	No Change
Breast cancer deaths per 100,000 female population	2016	17	20.1	13.6	4	2013	19.6	20.8	Improved
Colorectal cancer deaths per 100,000 population	2016	11.9	13.1	10.1	11	2013	12.8	14.6	No Change
Deaths from suicide, alcohol, and drug use per 100,000 population	2016	34.4	43.2	28.5	6	2013	29.3	35.6	No Change
Infant mortality, deaths per 1,000 births	2015	5.2	5.9	4.1	14	2012	5	6	No Change
Adults who report fair/poor health	2016	11	16	10	2	2013	11	16	No Change
Adults who smoke	2016	15	16	9	12	2013	18	18	Improved
Adults who are obese	2016	28	30	22	15	2013	26	29	Worsened
Children who are overweight or obese	2016	28	31	19	17	--	--	--	--
Adults who have lost six or more teeth	2016	7	10	6	5	2012	7	10	No Change

Table 2. State Disparity Indicator Data

Dimension and indicator	Data year	Low-income		State ranking	Data year	Low-income		Change over time (h)
		rate (f)	Disparity (g)			rate (f)	Disparity (g)	
Disparity		2018 Scorecard			Baseline			
Adults ages 19–64 uninsured	2016	11	-9	7	2013	23	-20	Improved
Children ages 0–18 uninsured	2016	4	-2	7	2013	11	-9	Improved
Adults without a usual source of care	2016	30	-7	16	2013	30	-9	Improved
Adults who went without care because of cost	2016	16	-10	5	2013	20	-15	Improved
Adults without a dental visit in past year	2016	18	-10	10	2012	19	-12	Improved
Adults without all age- and gender-appropriate cancer screenings	2016	33	-9	21	2012	33	-10	Improved
Adults without all age-appropriate recommended vaccines	2016	61	-8	20	2013	58	-5	Worsened
Children without all components of a medical home	2016	57	-22	17	--	--	--	--
Children without both a medical and dental preventive care visit in the past year	2016	44	-18	42	--	--	--	--
Children ages 19–35 months who did not receive all recommended vaccines	2016	34	-13	29	2013	29	-4	Worsened
Medicare beneficiaries received a high-risk drug	2014	11	-4	23	2012	14	-5	Improved
Hospital admissions for pediatric asthma, per 100,000 children	2014	162	-109	17	2012	167	-109	No Change
Admissions for ambulatory care-sensitive conditions, Medicare duals age 65 and older, per 1,000 beneficiaries	2015	68	-28	1	2012	68	-27	Worsened
30-day hospital readmissions, Medicare dual eligibles age 65 and older, per 1,000 beneficiaries	2015	43	-16	7	2012	56	-24	Improved
Potentially avoidable ED visits, Medicare dual eligibles age 65 and older, per 1,000 beneficiaries	2015	332	-156	8	2012	323	-150	Worsened
Adults who smoke	2016	25	-15	23	2013	29	-16	Improved
Adults who are obese	2016	38	-12	42	2013	30	-6	Worsened
Adults who have lost six or more teeth	2016	16	-13	25	2012	13	-10	Worsened
Adults who report fair/poor health	2016	24	-18	10	2013	22	-17	Worsened

Notes. (a) The 2018 Scorecard rankings reflect 2015 or 2016 data. The 2018 Scorecard added or revised several performance measures since the March 2017 Scorecard report; rankings are not comparable between reports. (b) Change 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. (c) Trend data available for 37 of 43 total Scorecard indicators. Greatly improved/worsened denotes a change of at least one full (1.0) standard deviation larger than the indicator's distribution among all states over the two time points; improved/worsened denotes a change of at least one-half (0.5) standard deviation. No change denotes no change in rate or a change of less than one-half standard deviation. (d) 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 same census region (Midwest, Northeast, South, or 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. Impact based on national and regional benchmarks should not be interpreted as cumulative. (e) Change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations. (f) Rates are for the states' low income population, generally those whose household income is under 200% FPL. (g) Disparity is the difference between the states' low-income and higher-income (400%+ FPL) populations. (h) 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.