

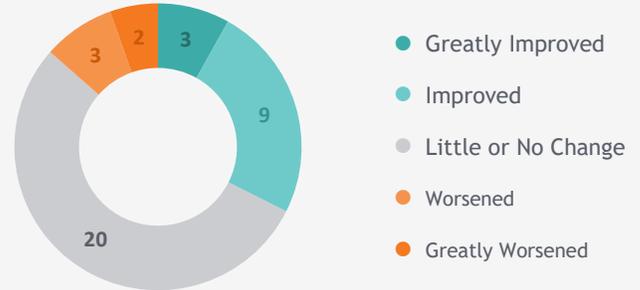
# Connecticut



## Ranking Highlights

	2018 Rank <sup>a</sup>	Change <sup>b</sup>
Overall	9	0
Access & Affordability	5	0
Prevention & Treatment	14	+10
Avoidable Use & Cost	32	-3
Healthy Lives	6	-1
Disparity	14	-5

## How Health Care in Connecticut Has Changed<sup>c</sup>



### Top Ranked Indicators

- Adults without a dental visit
- Adults without all recommended cancer screenings
- Colorectal cancer deaths

### Bottom Ranked Indicators

- Hospital patients did not receive patient-centered care
- Diabetic adults without a HbA1C test
- Central Line-associated Blood Stream Infection (CLABSI), SIR

### Most Improved Indicators

- Home health patients without improved mobility
- Hospital patients discharged without instructions
- Nursing home residents with an antipsychotic drug

### Indicators That Worsened the Most

- Avoidable emergency department visits, Medicare, age 65+
- Suicide, alcohol, and drug use deaths
- Home health patients with a hospital admission

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

Top State in the U.S.	Top State in the Northeast	Connecticut could expect the following gains if performance in the state improved to the top level at these national and regional benchmarks:
84,405	56,270	fewer adults would skip needed care because of its cost
0	0	more adults would receive age- and gender-appropriate cancer screenings
5,286	5,286	more children (ages 19–35 months) would receive all recommended vaccines
7,125	2,375	fewer Medicare beneficiaries would receive an unsafe medication
147	47	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
80,449	50,243	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)
<b>Access &amp; Affordability</b>	<b>2018 Scorecard</b>					<b>Baseline</b>			
Adults ages 19–64 uninsured	2016	7	12	4	8	2013	13	20	Improved
Children ages 0–18 uninsured	2016	3	5	1	5	2013	4	8	No Change
Adults without a usual source of care	2016	15	22	11	7	2013	15	24	No Change
Adults who went without care because of cost	2016	10	13	7	9	2013	12	16	Improved
Individuals with high out-of-pocket medical spending	2015-16	12	14	9	11	2013-14	13	15	No Change
Employee health insurance contributions as a share of median income	2016	5	6	4	3	2013	5	6	No Change
Adults without a dental visit in past year	2016	10	16	10	1	2012	11	15	No Change
<b>Prevention &amp; Treatment</b>	<b>2018 Scorecard</b>					<b>Baseline</b>			
Adults without all age- and gender-appropriate cancer screenings	2016	24	32	24	1	2012	25	31	No Change
Adults without all age-appropriate recommended vaccines	2016	59	63	54	9	2013	63	64	Improved
Diabetic adults ages 18–64 without a hemoglobin A1c test	2015	21	17	11	44	--	--	--	--
Medicare beneficiaries received a high-risk drug	2014	10	13	7	11	2012	13	17	Improved
Children without all components of a medical home	2016	46	51	40	10	--	--	--	--
Children without both a medical and dental preventive care visit in the past year	2016	23	32	20	5	--	--	--	--
Children who did not receive needed mental health treatment	2016	15	18	5	19	--	--	--	--
Children ages 19–35 months who did not receive all recommended vaccines	2016	24	29	15	10	2013	22	30	No Change
Hospital 30-day mortality	2013 - 2016	13.5	14.1	13	5	2010 - 2013	13	13.2	Worsened
Central line-associated blood stream infection (CLABSI)	2015	1.16	0.99	0.32	46	--	--	--	--
Hospital patients discharged without instructions for home recovery	2016	12	13	9	17	2013	15	14	Improved
Hospital patients who did not receive patient-centered care	2016	35	32	27	44	2013	35	32	No Change
Home health patients who did not get better at walking or moving around	2016	32	29	23	39	2013	41	39	Improved
Nursing home residents with an antipsychotic medication	2016	16	16	8	19	2013	21	21	Improved
Adults with any mental illness reporting unmet need	2013-2015	22	20	14	33	2009-2011	25	21	Improved
Adults with any mental illness who did not receive treatment	2013-2015	53	56	41	17	2009-2011	58	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)
<b>Avoidable Hospital Use &amp; Cost</b>						<b>2018 Scorecard</b>		<b>Baseline</b>	
Hospital admissions for pediatric asthma, per 100,000 children	2014	130	106	22	30	2012	136	143	No Change
Potentially avoidable emergency department visits									
Ages 18–64, per 1,000 employer-insured enrollees	2015	163	159	130	33	--	--	--	--
Age 65 and older, per 1,000 Medicare beneficiaries	2015	208	197	138	33	2012	189	188	Worsened
Admissions for ambulatory care–sensitive conditions									
Ages 18–64, per 1,000 employer-insured enrollees	2015	4	5	3	21	--	--	--	--
Ages 65–74, per 1,000 Medicare beneficiaries	2015	24	26	14	21	2012	26	29	No Change
Age 75 and older, per 1,000 Medicare beneficiaries	2015	70	66	33	21	2012	75	70	No Change
30-day hospital readmissions									
Ages 18–64, per 1,000 employer-insured enrollees	2015	2.4	2.9	1.2	27	--	--	--	--
Age 65 and older, per 1,000 Medicare beneficiaries	2015	46	42	21	27	2012	52	49	Improved
Short-stay nursing home residents with a 30-day readmission to the hospital	2014	19	19	11	23	2012	20	20	No Change
Long-stay nursing home residents with a hospital admission	2014	14	16	5	16	2012	16	17	No Change
Home health patients with a hospital admission	2016	17.4	16.4	14	42	2013	16	16	Worsened
Adults ages 18–50 with low back pain who had an imaging study at diagnosis	2015	33	29	16	36	--	--	--	--
Total employer-sponsored insurance spending per enrollee	2015	\$5,358	\$4,736	\$3,347	41	2013	\$5,067	\$4,697	No Change
Total Medicare (Parts A & B) reimbursements per enrollee	2015	\$9,335	\$9,025	\$5,586	41	2012	\$8,936	\$8,854	No Change
<b>Healthy Lives</b>						<b>2018 Scorecard</b>		<b>Baseline</b>	
Mortality amenable to health care, deaths per 100,000 population	2014-15	59.1	84.3	54.7	3	2012-13	61.3	83.7	No Change
Breast cancer deaths per 100,000 female population	2016	18.3	20.1	13.6	6	2013	18.7	20.8	No Change
Colorectal cancer deaths per 100,000 population	2016	10.4	13.1	10.1	2	2013	11.9	14.6	Improved
Deaths from suicide, alcohol, and drug use per 100,000 population	2016	45.3	43.2	28.5	23	2013	32	35.6	Worsened
Infant mortality, deaths per 1,000 births	2015	5.7	5.9	4.1	18	2012	5.3	6	No Change
Adults who report fair/poor health	2016	13	16	10	7	2013	11	16	Worsened
Adults who smoke	2016	13	16	9	3	2013	16	18	Improved
Adults who are obese	2016	26	30	22	6	2013	25	29	No Change
Children who are overweight or obese	2016	30	31	19	21	--	--	--	--
Adults who have lost six or more teeth	2016	7	10	6	5	2012	8	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)	
<b>Disparity</b>	<b>2018 Scorecard</b>				<b>Baseline</b>			
Adults ages 19–64 uninsured	2016	14	-11	10	2013	28	-22	Improved
Children ages 0–18 uninsured	2016	2	0	1	2013	5	-2	Improved
Adults without a usual source of care	2016	19	-10	26	2013	22	-15	Improved
Adults who went without care because of cost	2016	15	-9	4	2013	20	-15	Improved
Adults without a dental visit in past year	2016	17	-10	10	2012	16	-9	Worsened
Adults without all age- and gender-appropriate cancer screenings	2016	31	-11	29	2012	29	-10	Worsened
Adults without all age-appropriate recommended vaccines	2016	61	-7	14	2013	68	-11	Improved
Children without all components of a medical home	2016	61	-27	35	--	--	--	--
Children without both a medical and dental preventive care visit in the past year	2016	32	-14	30	--	--	--	--
Children ages 19–35 months who did not receive all recommended vaccines	2016	30	-13	29	2013	23	1	Worsened
Medicare beneficiaries received a high-risk drug	2014	12	-3	12	2012	14	-1	No Change
Hospital admissions for pediatric asthma, per 100,000 children	2014	--	--	--	2012	--	--	#N/A
Admissions for ambulatory care-sensitive conditions, Medicare duals age 65 and older, per 1,000 beneficiaries	2015	94	-51	20	2012	96	-34	No Change
30-day hospital readmissions, Medicare dual eligibles age 65 and older, per 1,000 beneficiaries	2015	66	-33	31	2012	83	-43	Improved
Potentially avoidable ED visits, Medicare dual eligibles age 65 and older, per 1,000 beneficiaries	2015	379	-209	28	2012	327	-168	Worsened
Adults who smoke	2016	21	-12	12	2013	23	-13	Improved
Adults who are obese	2016	36	-12	42	2013	35	-13	No Change
Adults who have lost six or more teeth	2016	13	-10	13	2012	18	-15	Improved
Adults who report fair/poor health	2016	28	-22	25	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.