

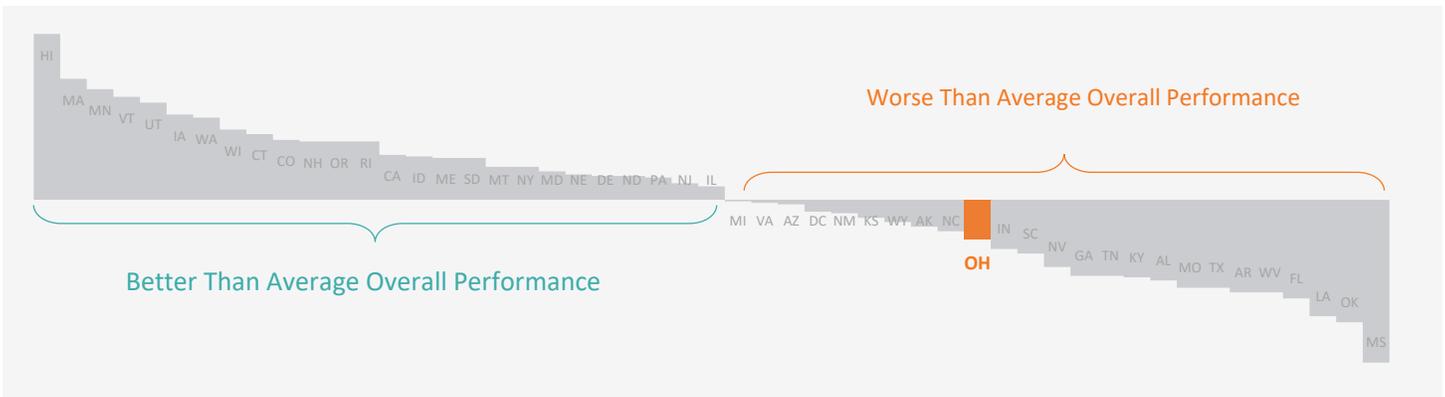
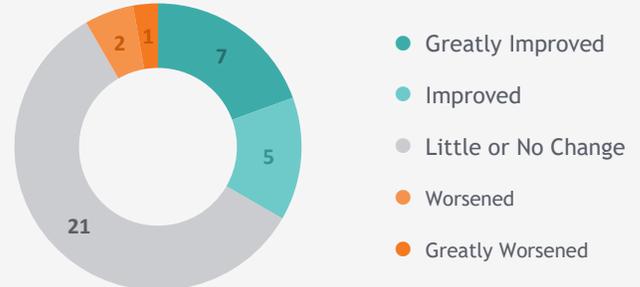
Ohio



Ranking Highlights

	2018 Rank ^a	Change ^b
Overall	36	-2
Access & Affordability	18	+1
Prevention & Treatment	19	+10
Avoidable Use & Cost	39	+4
Healthy Lives	43	0
Disparity	47	-4

How Health Care in Ohio Has Changed^c



Top Ranked Indicators

- Employee insurance costs as a share of median income
- Hospital 30-day mortality
- Hospital patients discharged without instructions

Bottom Ranked Indicators

- Avoidable emergency department visits, Medicare, age 65+
- Adults who smoke
- Suicide, alcohol, and drug use deaths

Most Improved Indicators

- Home health patients without improved mobility
- Nursing home residents with an antipsychotic drug
- Medicare beneficiaries received a high-risk drug

Indicators That Worsened the Most

- Home health patients with a hospital admission
- Hospital 30-day mortality
- Suicide, alcohol, and drug use deaths

Estimated Impact of State Improvement^d

Top State in the U.S.	Top State in the Midwest	Ohio could expect the following gains if performance in the state improved to the top level at these national and regional benchmarks:
352,078	264,059	fewer adults would skip needed care because of its cost
441,759	262,106	more adults would receive age- and gender-appropriate cancer screenings
34,324	25,010	more children (ages 19–35 months) would receive all recommended vaccines
40,884	40,884	fewer Medicare beneficiaries would receive an unsafe medication
4,325	4,325	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
353,871	323,215	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	8	12	4	11	2013	16	20	Improved
Children ages 0–18 uninsured	2016	4	5	1	19	2013	5	8	No Change
Adults without a usual source of care	2016	17	22	11	11	2013	19	24	No Change
Adults who went without care because of cost	2016	11	13	7	14	2013	15	16	Improved
Individuals with high out-of-pocket medical spending	2015-16	14	14	9	24	2013-14	15	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	15	16	10	22	2012	14	15	No Change
Prevention & Treatment						2018 Scorecard		Baseline	
Adults without all age- and gender-appropriate cancer screenings	2016	33	32	24	24	2012	33	31	No Change
Adults without all age-appropriate recommended vaccines	2016	63	63	54	25	2013	62	64	No Change
Diabetic adults ages 18–64 without a hemoglobin A1c test	2015	18	17	11	30	--	--	--	--
Medicare beneficiaries received a high-risk drug	2014	12	13	7	21	2012	17	17	Improved
Children without all components of a medical home	2016	48	51	40	18	--	--	--	--
Children without both a medical and dental preventive care visit in the past year	2016	32	32	20	26	--	--	--	--
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	32	29	15	36	2013	38	30	Improved
Hospital 30-day mortality	2013 - 2016	13.6	14.1	13	6	2010 - 2013	12.9	13.2	Worsened
Central line-associated blood stream infection (CLABSI)	2015	0.88	0.99	0.32	17	--	--	--	--
Hospital patients discharged without instructions for home recovery	2016	11	13	9	7	2013	13	14	Improved
Hospital patients who did not receive patient-centered care	2016	31	32	27	20	2013	32	32	No Change
Home health patients who did not get better at walking or moving around	2016	29	29	23	24	2013	39	39	Improved
Nursing home residents with an antipsychotic medication	2016	18	16	8	37	2013	23	21	Improved
Adults with any mental illness reporting unmet need	2013-2015	20	20	14	18	2009-2011	20	21	No Change
Adults with any mental illness who did not receive treatment	2013-2015	53	56	41	17	2009-2011	54	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 (e)
Avoidable Hospital Use & Cost						2018 Scorecard		Baseline	
Hospital admissions for pediatric asthma, per 100,000 children	2014	--	106	22	--	2012	128	143	--
Potentially avoidable emergency department visits									
Ages 18–64, per 1,000 employer-insured enrollees	2015	177	159	130	46	--	--	--	--
Age 65 and older, per 1,000 Medicare beneficiaries	2015	230	197	138	46	2012	219	188	No Change
Admissions for ambulatory care–sensitive conditions									
Ages 18–64, per 1,000 employer-insured enrollees	2015	5	5	3	40	--	--	--	--
Ages 65–74, per 1,000 Medicare beneficiaries	2015	31	26	14	40	2012	38	29	Improved
Age 75 and older, per 1,000 Medicare beneficiaries	2015	74	66	33	40	2012	82	70	Improved
30-day hospital readmissions									
Ages 18–64, per 1,000 employer-insured enrollees	2015	3.36	2.9	1.2	43	--	--	--	--
Age 65 and older, per 1,000 Medicare beneficiaries	2015	47	42	21	43	2012	59	49	Improved
Short-stay nursing home residents with a 30-day readmission to the hospital	2014	20	19	11	29	2012	21	20	No Change
Long-stay nursing home residents with a hospital admission	2014	13	16	5	14	2012	15	17	No Change
Home health patients with a hospital admission	2016	16.6	16.4	14	25	2013	16	16	Worsened
Adults ages 18–50 with low back pain who had an imaging study at diagnosis	2015	32	29	16	29	--	--	--	--
Total employer-sponsored insurance spending per enrollee	2015	\$4,770	\$4,736	\$3,347	28	2013	\$4,464	\$4,697	No Change
Total Medicare (Parts A & B) reimbursements per enrollee	2015	\$9,254	\$9,025	\$5,586	38	2012	\$9,492	\$8,854	No Change
Healthy Lives						2018 Scorecard		Baseline	
Mortality amenable to health care, deaths per 100,000 population	2014-15	94.5	84.3	54.7	37	2012-13	94.5	83.7	No Change
Breast cancer deaths per 100,000 female population	2016	21.6	20.1	13.6	41	2013	22.9	20.8	Improved
Colorectal cancer deaths per 100,000 population	2016	15	13.1	10.1	42	2013	16.3	14.6	Improved
Deaths from suicide, alcohol, and drug use per 100,000 population	2016	63	43.2	28.5	48	2013	42.6	35.6	Worsened
Infant mortality, deaths per 1,000 births	2015	7.2	5.9	4.1	39	2012	7.5	6	No Change
Adults who report fair/poor health	2016	16	16	10	29	2013	16	16	No Change
Adults who smoke	2016	23	16	9	46	2013	23	18	No Change
Adults who are obese	2016	32	30	22	31	2013	31	29	No Change
Children who are overweight or obese	2016	33	31	19	35	--	--	--	--
Adults who have lost six or more teeth	2016	14	10	6	42	2012	13	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	14	-11	10	2013	30	-25	Improved
Children ages 0–18 uninsured	2016	4	-3	13	2013	7	-5	Improved
Adults without a usual source of care	2016	20	-8	19	2013	22	-10	Improved
Adults who went without care because of cost	2016	18	-11	9	2013	23	-18	Improved
Adults without a dental visit in past year	2016	22	-13	24	2012	20	-12	Worsened
Adults without all age- and gender-appropriate cancer screenings	2016	36	-10	23	2012	37	-10	No Change
Adults without all age-appropriate recommended vaccines	2016	67	-9	27	2013	65	-11	No Change
Children without all components of a medical home	2016	59	-23	20	--	--	--	--
Children without both a medical and dental preventive care visit in the past year	2016	39	-16	38	--	--	--	--
Children ages 19–35 months who did not receive all recommended vaccines	2016	43	-28	49	2013	48	-31	Improved
Medicare beneficiaries received a high-risk drug	2014	17	-6	36	2012	22	-7	Improved
Hospital admissions for pediatric asthma, per 100,000 children	2014	--	--	--	2012	230	-173	#N/A
Admissions for ambulatory care-sensitive conditions, Medicare duals age 65 and older, per 1,000 beneficiaries	2015	121	-68	40	2012	126	-59	No Change
30-day hospital readmissions, Medicare dual eligibles age 65 and older, per 1,000 beneficiaries	2015	74	-39	40	2012	105	-60	Improved
Potentially avoidable ED visits, Medicare dual eligibles age 65 and older, per 1,000 beneficiaries	2015	436	-227	36	2012	399	-207	Worsened
Adults who smoke	2016	37	-24	50	2013	34	-21	Worsened
Adults who are obese	2016	43	-13	45	2013	40	-10	Worsened
Adults who have lost six or more teeth	2016	26	-21	48	2012	22	-16	Worsened
Adults who report fair/poor health	2016	31	-24	37	2013	29	-23	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.