

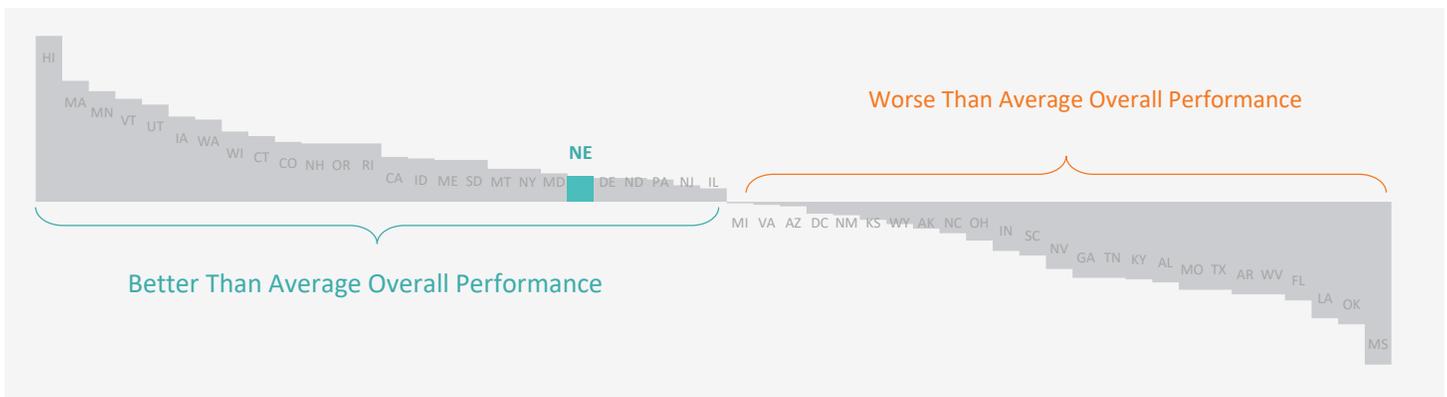
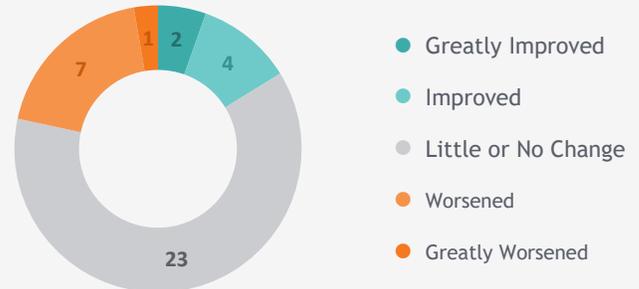
# Nebraska



## Ranking Highlights

	2018 Rank <sup>a</sup>	Change <sup>b</sup>
Overall	21	-7
Access & Affordability	22	-2
Prevention & Treatment	19	-6
Avoidable Use & Cost	16	-1
Healthy Lives	16	-4
Disparity	35	-8

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



### Top Ranked Indicators

- Suicide, alcohol, and drug use deaths
- Hospital patients discharged without instructions
- Children ages 19–35 months without all recommended vaccines

### Bottom Ranked Indicators

- Nursing home residents with an antipsychotic drug
- Hospital 30-day mortality
- Central Line-associated Blood Stream Infection (CLABSI), SIR

### Most Improved Indicators

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

### Indicators That Worsened the Most

- Mentally ill adults who did not receive treatment
- Mentally ill adults reporting unmet need
- Hospital 30-day mortality

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

Top State in the U.S.	Top State in the Midwest	Nebraska could expect the following gains if performance in the state improved to the top level at these national and regional benchmarks:
69,469	55,575	fewer adults would skip needed care because of its cost
88,836	61,803	more adults would receive age- and gender-appropriate cancer screenings
1,806	0	more children (ages 19–35 months) would receive all recommended vaccines
4,564	4,564	fewer Medicare beneficiaries would receive an unsafe medication
241	241	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
6,290	0	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	12	12	4	28	2013	15	20	No Change
Children ages 0–18 uninsured	2016	6	5	1	36	2013	6	8	No Change
Adults without a usual source of care	2016	19	22	11	19	2013	21	24	No Change
Adults who went without care because of cost	2016	12	13	7	24	2013	13	16	No Change
Individuals with high out-of-pocket medical spending	2015-16	13	14	9	16	2013-14	15	15	Improved
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	14	16	10	13	2012	15	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	35	32	24	36	2012	34	31	No Change
Adults without all age-appropriate recommended vaccines	2016	57	63	54	4	2013	57	64	No Change
Diabetic adults ages 18–64 without a hemoglobin A1c test	2015	19	17	11	35	--	--	--	--
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	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	20	18	5	37	--	--	--	--
Children ages 19–35 months who did not receive all recommended vaccines	2016	19	29	15	2	2013	21	30	No Change
Hospital 30-day mortality	2013 - 2016	14.9	14.1	13	44	2010 - 2013	13.3	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	10	13	9	2	2013	12	14	Improved
Hospital patients who did not receive patient-centered care	2016	28	32	27	3	2013	28	32	No Change
Home health patients who did not get better at walking or moving around	2016	29	29	23	24	2013	41	39	Improved
Nursing home residents with an antipsychotic medication	2016	19	16	8	42	2013	23	21	Improved
Adults with any mental illness reporting unmet need	2013-2015	19	20	14	11	2009-2011	16	21	Worsened
Adults with any mental illness who did not receive treatment	2013-2015	58	56	41	37	2009-2011	53	59	Worsened

**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	69	106	22	6	2012	82	143	No Change
Potentially avoidable emergency department visits									
Ages 18–64, per 1,000 employer-insured enrollees	2015	140	159	130	3	--	--	--	--
Age 65 and older, per 1,000 Medicare beneficiaries	2015	157	197	138	3	2012	153	188	No Change
Admissions for ambulatory care–sensitive conditions									
Ages 18–64, per 1,000 employer-insured enrollees	2015	5	5	3	24	--	--	--	--
Ages 65–74, per 1,000 Medicare beneficiaries	2015	21	26	14	24	2012	24	29	No Change
Age 75 and older, per 1,000 Medicare beneficiaries	2015	61	66	33	24	2012	63	70	No Change
30-day hospital readmissions									
Ages 18–64, per 1,000 employer-insured enrollees	2015	2.98	2.9	1.2	21	--	--	--	--
Age 65 and older, per 1,000 Medicare beneficiaries	2015	35	42	21	21	2012	39	49	No Change
Short-stay nursing home residents with a 30-day readmission to the hospital	2014	15	19	11	10	2012	16	20	No Change
Long-stay nursing home residents with a hospital admission	2014	16	16	5	24	2012	16	17	No Change
Home health patients with a hospital admission	2016	16.5	16.4	14	22	2013	16	16	Worsened
Adults ages 18–50 with low back pain who had an imaging study at diagnosis	2015	24	29	16	12	--	--	--	--
Total employer-sponsored insurance spending per enrollee	2015	\$4,972	\$4,736	\$3,347	34	2013	\$4,507	\$4,697	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2015	\$8,654	\$9,025	\$5,586	24	2012	\$8,062	\$8,854	Worsened
<b>Healthy Lives</b>						<b>2018 Scorecard</b>		<b>Baseline</b>	
Mortality amenable to health care, deaths per 100,000 population	2014-15	68.2	84.3	54.7	12	2012-13	64.9	83.7	No Change
Breast cancer deaths per 100,000 female population	2016	20.1	20.1	13.6	23	2013	21	20.8	No Change
Colorectal cancer deaths per 100,000 population	2016	13.6	13.1	10.1	29	2013	15.2	14.6	Improved
Deaths from suicide, alcohol, and drug use per 100,000 population	2016	28.5	43.2	28.5	1	2013	26.6	35.6	No Change
Infant mortality, deaths per 1,000 births	2015	5.7	5.9	4.1	18	2012	4.7	6	Worsened
Adults who report fair/poor health	2016	13	16	10	7	2013	12	16	No Change
Adults who smoke	2016	17	16	9	23	2013	18	18	No Change
Adults who are obese	2016	33	30	22	38	2013	30	29	Worsened
Children who are overweight or obese	2016	29	31	19	19	--	--	--	--
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	29	-26	47	2013	35	-31	Improved
Children ages 0–18 uninsured	2016	10	-8	48	2013	10	-8	No Change
Adults without a usual source of care	2016	25	-13	37	2013	25	-13	No Change
Adults who went without care because of cost	2016	25	-20	38	2013	25	-20	No Change
Adults without a dental visit in past year	2016	24	-16	45	2012	24	-14	Worsened
Adults without all age- and gender-appropriate cancer screenings	2016	39	-12	34	2012	38	-10	Worsened
Adults without all age-appropriate recommended vaccines	2016	61	-9	27	2013	64	-15	Improved
Children without all components of a medical home	2016	58	-28	41	--	--	--	--
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	26	-12	28	2013	27	-13	Improved
Medicare beneficiaries received a high-risk drug	2014	15	-7	46	2012	21	-10	Improved
Hospital admissions for pediatric asthma, per 100,000 children	2014	108	-75	10	2012	119	-78	Improved
Admissions for ambulatory care-sensitive conditions, Medicare duals age 65 and older, per 1,000 beneficiaries	2015	98	-60	30	2012	97	-48	Worsened
30-day hospital readmissions, Medicare dual eligibles age 65 and older, per 1,000 beneficiaries	2015	46	-23	20	2012	46	-20	Worsened
Potentially avoidable ED visits, Medicare dual eligibles age 65 and older, per 1,000 beneficiaries	2015	320	-175	15	2012	294	-153	Worsened
Adults who smoke	2016	28	-16	27	2013	28	-16	No Change
Adults who are obese	2016	39	-7	12	2013	36	-7	No Change
Adults who have lost six or more teeth	2016	12	-8	6	2012	12	-8	No Change
Adults who report fair/poor health	2016	25	-19	13	2013	23	-19	No Change

**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.