

# Las Vegas, NV

Ranking Summary (of 306 Local Areas)	2016 Scorecard		2012 Scorecard (Rev.) <sup>a</sup>	
	Quintile	Rank	Quintile	Rank
<b>OVERALL</b>	<b>4</b>	<b>241</b>	<b>5</b>	<b>252</b>
Access & Affordability	5	280	5	292
Prevention & Treatment	5	301	5	304
Avoidable Hospital Use & Cost	3	125	2	117
Healthy Lives	3	182	4	194

Change in Performance <sup>c</sup>	2016 Scorecard	
	count	percent
Indicators with trends	33	100%
Area rate improved	10	30%
Area rate worsened	1	3%
Little or no change in area rate	22	67%

Percentage of Indicators This Area Ranked in the:	2016 Scorecard	
	count	percent
Total indicators	36	100%
Top 10th percentile	0	0%
Top quintile	3	8%
2nd quintile	7	19%
3rd quintile	8	22%
4th quintile	5	14%
Bottom quintile	13	36%
Bottom 10th percentile	10	28%

Demographic Characteristics <sup>b</sup>	Las Vegas, NV	U.S. Average
<b>Total Population</b>	<b>2,158,588</b>	<b>313,922,028</b>
Median Household Income	\$58,464	\$58,489
Below 200% of Federal Poverty Level (FPL)	38%	34%
200% to 399% of FPL	33%	30%
400% of FPL or higher	29%	36%
% White Race, Non-Hispanic	47%	62%
% Black Race, Non-Hispanic	10%	12%
% Other Race, Non-Hispanic	14%	8%
% Hispanic Ethnicity	30%	17%

Estimated Impact of Local Improvement <sup>d</sup>	
If Las Vegas, NV improved its performance to the level of the best-performing local area for this indicator, then:	
197,812	more adults (ages 19–64) would be covered by health insurance (public or private), and therefore would be more likely to receive health care when needed
421,088	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
153,777	more adults would receive age and gender appropriate recommended preventive care, such as colon cancer screenings, mammograms, and pap smears
4,672	fewer Medicare beneficiaries would receive an unsafe medication
884	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
336	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
4,032	fewer emergency department visits for nonemergent or primary-care-treatable conditions would occur among Medicare beneficiaries
80,600	fewer adults (ages 18–64) would have lost six or more teeth because of tooth decay, infection, or gum disease

Notes

(a) Ranks from the 2012 edition of the Local Scorecard have been revised to match methodology and measure definitions used in the 2016 edition.

(b) The Local Scorecard reports at the level of the Hospital Referral Region (HRR), an area representing the local market for health care services, defined by health care utilization patterns. HRR boundaries may differ from other commonly used region definitions (e.g., county or Metropolitan Statistical Areas).

(c) 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 Hospital Referral Regions (HRRs) over the two time points. Little or No change denotes no change in rate or a change of less than one-half of a standard deviation.

(d) The table shows the estimated impact if this HRR's performance improved to the rate of the best-performing HRR for eight Scorecard indicators. Benchmark HRRs, those with the best rate, have an estimated impact of zero (0).

[See the interactive 2016 Local Scorecard report and link to Scorecard methodology at www.CMWF.org.](#)

Table 1. Local Area Health System Performance Indicator Data by Dimension

Dimension and Indicator	Las Vegas, NV				Benchmarks			Data Year	Area Rate	U.S. Average	Substantial Change Over Time <sup>1</sup>
	Data Year	Performance Quintile	Rank (of 306)	Area Rate	Nevada Rate	U.S. Average	Best Area Rate				
<b>ACCESS &amp; AFFORDABILITY</b>				<b>2016 Scorecard</b>				<b>Baseline</b>			
Adults ages 19–64 uninsured	2014	5	252	22%	21%	16%	4%	2012	29%	21%	Improved
Children ages 0–18 uninsured	2014	5	168	10%	10%	6%	2%	2012	17%	7%	Improved
Adults who went without care because of cost in past year	2013/14	4	222	18%	17%	15%	6%	2011/12	20%	15%	No Change
At-risk adults without a routine doctor visit in past two years	2013/14	3	164	14%	18%	14%	6%	2011/12	17%	14%	Improved
Adults without a dental visit in past year	2012 & 2014	5	265	20%	18%	15%	9%	--	--	--	--
<b>PREVENTION &amp; TREATMENT</b>				<b>2016 Scorecard</b>				<b>Baseline</b>			
Adults with a usual source of care	2013/14	5	303	64%	68%	79%	90%	2011/12	65%	79%	No Change
Adults with age and gender appropriate cancer screenings	2012 & 2014	5	252	62%	64%	70%	79%	--	--	--	--
Adults with age appropriate vaccines	2013/14	5	285	29%	28%	35%	49%	2011/12	25%	35%	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2013	3	175	17%	17%	17%	9%	2011	21%	20%	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2013	3	180	19%	17%	20%	9%	2011	21%	23%	No Change
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, pneumonia, or stroke	07/2011 - 06/2014	5	283	13.7%	13.5%	12.8%	11.3%	07/2010 - 06/2013	13.9%	13.2%	No Change
Hospital safety composite score <sup>2</sup>	07/2012 - 06/2014	2	86	0.8	0.8	0.8	0.6	07/2011 - 06/2013	0.9	0.9	Improved
Hospitalized patients given information about what to do during their recovery at home	2014	5	276	83%	84%	86%	91%	2013	83%	86%	No Change
Hospitalized 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	2014	5	289	61%	63%	68%	76%	2013	60%	68%	No Change
Home health patients who get better at walking or moving around	2014	4	191	60%	62%	63%	70%	2012	57%	59%	Improved
Home health patients whose wounds improved or healed after an operation	2014	2	91	91%	91%	89%	96%	2012	91%	89%	No Change
High-risk nursing home residents with pressure sores	1/2015 - 9/2015	5	263	8%	8%	6%	1%	1/2013 - 9/2013	8%	6%	No Change
Long-stay nursing home residents with an antipsychotic medication	1/2015 - 9/2015	3	182	19%	17%	18%	7%	1/2013 - 9/2013	22%	21%	Improved

Table 1. Local Area Health System Performance Indicator Data by Dimension (continued)

Dimension and Indicator	Data Year	Las Vegas, NV			Benchmarks			Data Year	Area Rate	U.S. Average	Substantial Change Over Time <sup>1</sup>
		Performance Quintile	Rank (of 306)	Area Rate	Nevada Rate	U.S. Average	Best Area Rate				
<b>AVOIDABLE HOSPITAL USE &amp; COST</b>		<b>2016 Scorecard</b>						<b>Baseline</b>			
Hospital admissions among Medicare beneficiaries for ambulatory care-sensitive conditions, ages 65–74, per 1,000 beneficiaries	2014	2	114	24	22	27	9	2012	27	29	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care-sensitive conditions, age 75 and older, per 1,000 beneficiaries	2014	2	99	59	55	66	33	2012	61	70	No Change
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2014	2	82	23	23	27	10	2012	27	34	No Change
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2012	5	280	26%	23%	20%	12%	2010	28%	22%	Improved
Long-stay nursing home residents hospitalized within a six-month period	2012	3	144	18%	20%	17%	5%	2010	19%	19%	No Change
Home health patients also enrolled in Medicare with a hospital admission	2014	1	50	15%	15%	16%	12%	2012	15%	17%	No Change
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2013	1	47	158	158	181	122	2011	163	185	No Change
Total reimbursements per enrollee (age 18-64) with employer-sponsored insurance	2014	2	103	\$4,102	\$4,017	\$4,569	\$2,720	2013	\$3,923	\$4,489	No Change
Total Medicare (Parts A & B) reimbursements per enrollee	2014	4	192	\$9,098	\$8,404	\$8,819	\$5,593	2012	\$9,130	\$8,854	No Change
<b>HEALTHY LIVES</b>		<b>2016 Scorecard</b>						<b>Baseline</b>			
Mortality amenable to health care, deaths per 100,000 population	2012-13	4	198	93	92	84	47	2010-11	95	85	No Change
Breast cancer deaths per 100,000 female population	2012-13	4	222	24.2	24.2	22.8	12.3	2010-11	26.1	23.7	Improved
Colorectal cancer deaths per 100,000 population	2012-13	5	271	19.2	18.5	15.9	9.6	2010-11	19.1	16.7	No Change
Suicide deaths per 100,000 population	2012-13	5	274	18.9	19.2	12.9	6.0	2010-11	19.2	12.5	No Change
Infant mortality, deaths per 1,000 live births	2012-13	1	59	4.9	5.1	6.0	2.5	2010-11	5.4	6.1	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2013/14	3	153	27%	26%	25%	13%	2011/12	29%	25%	No Change
Adults who smoke	2013/14	3	126	19%	21%	19%	7%	2011/12	20%	19%	No Change
Adults ages 18–64 who are obese (BMI >= 30)	2013/14	3	132	31%	26%	28%	14%	2011/12	28%	28%	Worsened
Adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012 & 2014	2	105	10%	10%	10%	2%	--	--	--	--

Table 1 Notes:

\* Data for this area not available for this indicator.

-- Historical data not available or not comparable over time.

(1) 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 Hospital Referral Regions (HRRs) over the two time points. No change denotes no change in rate or a change of less than one-half of a standard deviation.

(2) Values are the unweighted average of the region's hospitals' safety composite (PSI 90) score.