



## New State Health Scorecard Finds Eroding Insurance Coverage, Rising Health Care Costs and Preventable Deaths, and Widening Racial and Ethnic Disparities

### *Trends Could Worsen as COVID-19 Pandemic Continues*

The Commonwealth Fund's latest *Scorecard on State Health System Performance* identifies a range of health care system deficiencies that have been exacerbated by the COVID-19 pandemic.

Hawaii, Massachusetts, Minnesota, Iowa, and Connecticut achieved the top rankings in this year's scorecard, which uses the most currently available data to assess all 50 states and the District of Columbia on 49 health care measures covering access, quality, service use and costs of care, health outcomes, and income-based health care disparities. West Virginia, Missouri, Nevada, Oklahoma, and Mississippi ranked at the bottom.

Key findings from the scorecard, which documents state-level variation in U.S. health care performance before the COVID-19 pandemic, include:

- ▶ **Americans are living shorter lives than they did in 2014, and Blacks are twice as likely as whites to die from treatable conditions.** Black Americans, who also have suffered disproportionately during the COVID-19 pandemic, were twice as likely as whites to die early from treatable conditions such as diabetes, heart disease, appendicitis, and certain cancers. Several of these conditions are key risk factors for COVID-19. These disparities were found in every state. Mississippi, Arkansas, and Oklahoma reported the highest rates of premature deaths among the Black community.

Americans in general are dying in greater numbers, and earlier than expected, from treatable conditions. Oklahoma, Arkansas, New Mexico, Kentucky, and Mississippi had the biggest increases in premature death rates between 2012–2013 and 2016–2017.

Deaths from suicide, alcohol, and drug overdoses contribute to lower life expectancies in the United States. Suicide and alcohol deaths rose modestly in 2018, while drug overdose deaths decreased for the first time in decades. However, preliminary data from 2019 show that drug overdose deaths, especially from synthetic opioids, are increasing again. Ten states attributed more than 20 deaths per 100,000 people to synthetic opioids in 2018.

These trends are likely to continue or worsen in the wake of the COVID-19 pandemic, the researchers say, as use of health care services drops and unemployment rises.

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For further information, contact:

Bethanne Fox  
212.606.3853  
[bf@cmwf.org](mailto:bf@cmwf.org)

 [@commonwealthfnd](https://twitter.com/commonwealthfnd)

*The Commonwealth Fund is a private, nonprofit foundation supporting independent research on health policy reform and a high-performance health system.*

- ▶ **Health coverage gains have stalled, while affordability of insurance and out-of-pocket costs have worsened.** Early coverage gains associated with the passage of the Affordable Care Act (ACA) have stalled, and even begun to erode, in most states. Between 2014 and 2016, every state saw at least a 2 percent annual reduction in uninsured rates. Since 2016, 23 states saw those gains flatten and 22 saw uninsured rates creep up.

By 2018, uninsured rates were among the highest in four of the 12 states that have yet to expand Medicaid eligibility (Texas, Florida, Georgia, and Mississippi). Alaska and Louisiana, which expanded Medicaid eligibility relatively late, both had the largest state declines in uninsured rates since 2016.

Although the ACA's coverage expansions helped to narrow both income and racial and ethnic inequalities in health coverage, those improvements have stalled since 2016. In 2018, the uninsured rate for Black and Latino adults in 17 states was at least five percentage points higher than it was for white adults.

Affording health care is a persistent problem for many people, even those with insurance. In 10 states, more than 10 percent of the nonelderly population had high out-of-pocket medical costs relative to household income. The share of adults who said they avoided getting care because of high costs rose in 15 states after 2016.

- ▶ **Health care prices drive spending growth and rising consumer health care costs.** In every state, the prices that commercial insurers paid for hospital inpatient care were higher than Medicare prices. Insurers often pass along those higher costs to employers in the form of higher premiums and deductibles that workers ultimately shoulder. The economic contraction could make these costs even less affordable for workers if they suffer declines in income and wages and lose employer-sponsored insurance.
- ▶ **Public health dollars are being stretched thin at a time when states face unprecedented challenges from COVID-19.** Between 2014–2015 and 2017–2018, per capita public health spending was flat in most states or increased only modestly.

## FROM THE EXPERTS:

Sara R. Collins, study coauthor and Commonwealth Fund Vice President for Health Care Coverage and Access

*“The gains made in health insurance coverage since the Affordable Care Act have either stalled or eroded, and racial and ethnic inequities in coverage are at risk of getting worse during the pandemic. States that passed and implemented Medicaid expansion have lower uninsured rates. Expanding Medicaid eligibility is one important step that states can take to ensure that people can get the care they need.”*

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David Blumenthal, M.D.,  
Commonwealth Fund President

*“The COVID-19 pandemic has exposed the weaknesses in our health care system. Millions of people don't have health coverage. Costs are rising. Life expectancy is declining. And racial inequities are stark — all of this before we were hit with the worst health crisis in 100 years. We can do better, and we can begin by ensuring that everyone gets, and can afford, the health care they need.”*

## IMPLICATIONS

The state scorecard highlights serious deficiencies in the U.S. health care system that have left the nation far less prepared than other wealthy nations to deal with the COVID-19 pandemic. It also reveals wide geographic variation within the health care system. For example, uninsured rates ranged from 4 percent of adults in Massachusetts and the District of Columbia to 24 percent in Texas. These gaps are likely to widen if states are left to address the COVID-19 pandemic with little federal leadership.

While it is too early to measure the effects of COVID-19, it is likely that the U.S. will see a further decline in life expectancies, especially for people of color, and an increase in deaths related to suicide, alcohol, and drug overdoses. In addition, health care costs could place a further strain on consumers who may have less income as a result of the severe economic contraction. These negative effects may be worse in states that are COVID-19 hotspots.

Heading into the November election, the federal government will face two major challenges, the researchers note. One is rebuilding an underperforming health care system; the other is controlling the pandemic. A pending Supreme Court decision that will decide the fate of the ACA could further disrupt the health care system. If the Supreme Court overturns the health care law, the number of uninsured people in the U.S. could climb above 50 million.

## HOW WE CONDUCTED THIS STUDY

The Commonwealth Fund's *2020 Scorecard on State Health System Performance* evaluates 49 indicators of health care system performance, as well as income-based differences in performance within states. The state scorecard also highlights racial and ethnic equity data within states. Findings are based on the researchers' analysis of the most recent publicly available data generally from 2018 and some preliminary data from 2019. It includes data from federal agencies, including the U.S. Census Bureau, Centers for Disease Control and Prevention, and the Centers for Medicare and Medicaid Services, as well as other sources. For more detail, see "Scorecard Methods" in the report.

**The full report will be available after the embargo lifts at:**  
[scorecard.commonwealthfund.org](https://scorecard.commonwealthfund.org)

## FOR MORE ON HEALTH CARE IN YOUR STATE, VISIT OUR HEALTH SYSTEM DATA CENTER

The Data Center allows users to explore information on states' health system performance and policies through custom tables, graphs, and maps. Users can view data at a glance by selected topic or state.

[datacenter.commonwealthfund.org](https://datacenter.commonwealthfund.org)

## ADDITIONAL PERTINENT RESEARCH

*The Implications of COVID-19 for Opioid-Related Mortality* (Aug. 2020)

*U.S. Health Insurance Coverage in 2020: A Looming Crisis in Affordability* (Aug. 2020)

*Gap Closed: The Affordable Care Act's Impact on Asian Americans' Health Coverage* (July 2020)

*Assessing Underlying State Conditions and Ramp-Up Challenges for the COVID-19 Response* (Mar. 2020)

*How the Affordable Care Act Has Narrowed Racial and Ethnic Disparities in Access to Health Care* (Jan. 2020)

*Trends in Employer Health Care Coverage, 2008–2018: Higher Costs for Workers and Their Families* (Nov. 2019)