NEWS RELEASE

The Commonwealth Fund

First State-by-State Medicare Scorecard Exposes Wide Variation in Health Care Access, Cost, and Quality for Millions of Beneficiaries

New Medicare report ranks Vermont, Utah, and Minnesota on top; Louisiana, Mississippi, and Kentucky at the bottom

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For the first time, the Commonwealth Fund has ranked states on how their residents enrolled in Medicare experience the program and its benefits. The report, released today, finds that Medicare's impact is not uniform across the country: while core benefits are consistent, there are stark differences among states in beneficiaries' ability to afford care, access doctors, and avoid unnecessary hospitalizations.

Marking its 60th year in 2025, Medicare provides essential health coverage to more than 68 million Americans, including nearly all adults age 65 and older and millions of people with disabilities. Before Medicare, these groups were far more likely to be uninsured and unable to access needed care.

According to the *State Scorecard on Medicare Performance: How Medicare Is Working for Its Beneficiaries*, Medicare enrollees in some states are better served than others. Although Medicare is a federal program, access to care and health outcomes are shaped by a mix of state and local factors — such as the strength of a state's health system, the affordability of supplemental coverage, and the structure of private Medicare Advantage and drug plans — all of which vary across the country.

The scorecard, part of the Fund's ongoing series on state health system performance, uses the latest available data to rank all 50 states and the District of Columbia on 31 indicators across four domains: access to care, quality of care, costs and affordability, and population health.

Additional key findings include:

- **Vermont, Utah, and Minnesota** scored highest overall for Medicare beneficiaries' access to care, affordability, quality, and outcomes, while **Louisiana, Mississippi, and Kentucky** ranked lowest.
- **Preventable hospitalizations vary sharply by state.** Rates of avoidable hospital admissions range from 14 per 1,000 Medicare beneficiaries in Idaho to nearly 35 per 1,000 in West Virginia, Massachusetts, and Alabama — more than double the rate.

For further information, contact:

Bethanne Fox
212.606.3853
bf@cmwf.org

Maya Brod
301.467.4917
mbrod@burness.com

@commonwealthfund.org

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

- **Wide gaps in prior authorization rules.** Fewer than 10 percent of Medicare Advantage plans in South Dakota require prior authorization for specialist visits or preventive services, compared to more than 70 percent in Washington and Virginia. More than half of beneficiaries are now in Medicare Advantage plans, where such restrictions are common.
- **Loneliness is widespread among older adults.** At least one in four older adults on Medicare — in the 39 states and the District of Columbia where data are available — reported feeling lonely or lacking emotional support, a challenge that can lead to poorer health outcomes.
- **Medicare offers more stable access to care than other insurance.** Older adults with Medicare are far less likely to face cost or access barriers than younger adults with Medicaid, commercial coverage, or no insurance at all. For example, just 3.8 percent of older adults overall reported skipping needed care because of cost, compared to more than 15 percent of younger adults. Only 4 percent of older adults lacked a usual source of care, versus 21 percent of younger adults.
- **Even so, states differ on affordability of health care.** The share of older adults going without care because of cost was nearly four times higher in Louisiana (6.0%) than in Vermont (1.6%). Out-of-pocket spending on prescription drugs also varied widely, with beneficiaries in New York paying about 4.5 percent of their drug costs out of pocket, compared to nearly 13 percent in North Dakota.

POLICY IMPLICATIONS

The authors note that the findings point to clear opportunities to strengthen Medicare. Federal and state policymakers can use the scorecard to benchmark performance, identify gaps, and adopt strategies to ensure the program works well for people in every state. These steps include expanding supports for low-income beneficiaries, improving oversight of Medicare Advantage and drug plans, and investing in stronger state health systems.

HOW WE CONDUCTED THIS STUDY

The *State Scorecard on Medicare Performance: How Medicare Is Working for Its Beneficiaries* evaluates 31 indicators of access to care, quality of care, costs and affordability, and population health to assess how well the Medicare program is serving beneficiaries in all 50 states and D.C. Findings are based on the Commonwealth Fund's analysis of the most recent publicly available data from the Centers for Medicare and Medicaid Services (CMS), selected federal surveys, and vital statistics datasets. States' overall rankings are based on performance across all 31 indicators, with each weighted equally. For more details, see the "How We Conducted This Study" section of the report.

The full report will be available after the embargo lifts at:

https://www.commonwealthfund.org/publications/scorecard/2025/oct/state-scorecard-medicare-performance

FROM THE EXPERTS

Gretchen Jacobson,
Commonwealth Fund
Vice President, Medicare

"Medicare is a lifeline for millions of Americans, and for the first time this scorecard shows how people's experiences with the program vary widely depending on where they live. In some states, beneficiaries can see doctors quickly and afford their prescriptions; in others, they face higher costs, delays, or red tape. By learning from states where Medicare works best, policymakers and health leaders can strengthen the program for everyone."

Joseph R. Betancourt, M.D.,
Commonwealth Fund
President

"For six decades, Medicare has been one of the nation's most powerful tools for advancing health and financial security. As a physician, I've seen firsthand how important it is for patients to focus on their health — and healing — instead of worrying about medical bills. This scorecard highlights both Medicare's remarkable impact and the urgent need to ensure it delivers care equally and effectively for people in every state."