State Scorecard on Child Health System Performance, 2011

Methodology and Sources Used in Impact Calculations

Methodology

Estimates of improvements in state performance were calculated as follows: For each indicator, the difference between the best-performing state's rate and the subject state's rate was multiplied by the applicable subpopulation of individuals in the subject state.

Example calculation for Children with a Medical Home (number of additional children in Alabama that would have a medical home if the rate in Alabama improved to the level of the best-performing state):

Step 1. Calculate the difference between the best-performing state's (New Hampshire) rate and the subject state's (Alabama) rate: 69.3% – 56.1% = 13.2%

Step 2. Multiply the difference in rates by the applicable subpopulation of individuals (children ages 0–17) in the subject state: 13.2% x 1,127,750 = 148,863.

Note: Results may differ slightly because of rounding.

Description and Data Sources

Children ages 0–18 insured: Employee Benefits Research Institute analysis of Current Population Survey ASEC Supplement data representing 2008 and 2009 (U.S. Census Bureau, 2009, 2010).

Parents ages 19–64 insured: Employee Benefits Research Institute analysis of Current Population Survey ASEC Supplement data representing 2008 and 2009 (U.S. Census Bureau, 2009, 2010).

Children with a medical home: Percent of children ages 0–17 who received health care that meets criteria of having a medical home: child had a personal doctor/nurse; had a usual source for sick care; received family-centered care from all health care providers; had no problems getting needed referrals; and received effective care coordination when needed. For more information, see www.nschdata.org. Data from the 2007 National Survey of Children's Health, assembled by the Child and Adolescent Health Measurement Initiative (CAHMI 2009).

Young children (ages 19–35 months) received all recommended doses of six key vaccines: Percent of children ages 19–35 months who received 4+ doses of diphtheria, tetanus, and accellular pertussis (DTap); 3+ doses of poliovirus vaccine; 1+ doses of measles-mumps-rubella (MMR) vaccine; > 2 or >3 doses of Haemophilus influenzae type b (Hib) vaccine for the primary series, depending on brand type; 3+ doses of hepatitis B vaccine (HepB), and 1+ doses of varicella vaccine (4:3:1:3:3:1-S). Data from the 2009 National Immunization Survey (NCHS, NIS 2009).

Children with both a preventive medical and dental preventive care visit in the past year: Percent of children ages 0–17 who saw both a health care professional for preventive medical care and a dentist for preventive dental care one or more times in the past year. Data from the 2007 National Survey of Children's Health, assembled by the Child and Adolescent Health Measurement Initiative (CAHMI 2009).

Children ages 1–17 with oral health problems: Percent of children ages 1–17 who had at least one of the following oral health problems in the past six months: a toothache, decayed teeth/cavities, broken teeth, or bleeding gums. For more information, see www.nschdata.org. Data from the 2007 National Survey of Children's Health, assembled by the Child and Adolescent Health Measurement Initiative (CAHMI 2009).