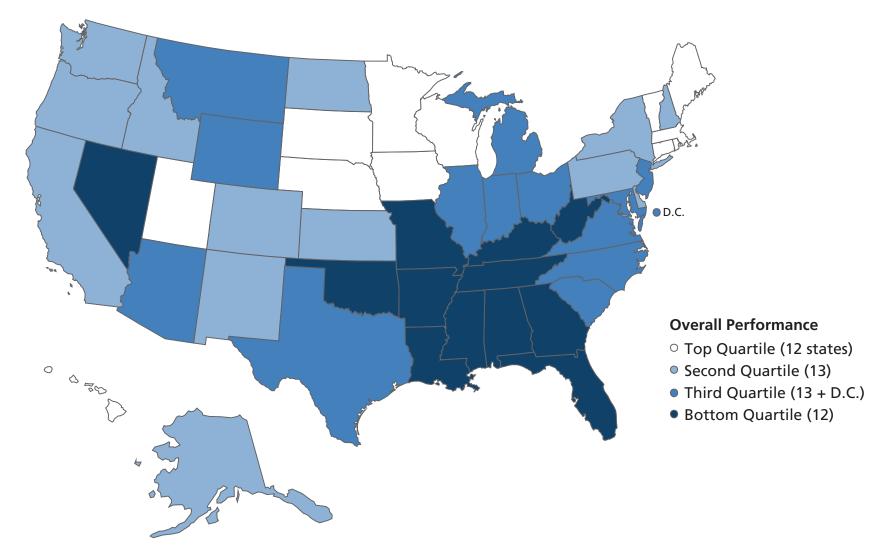
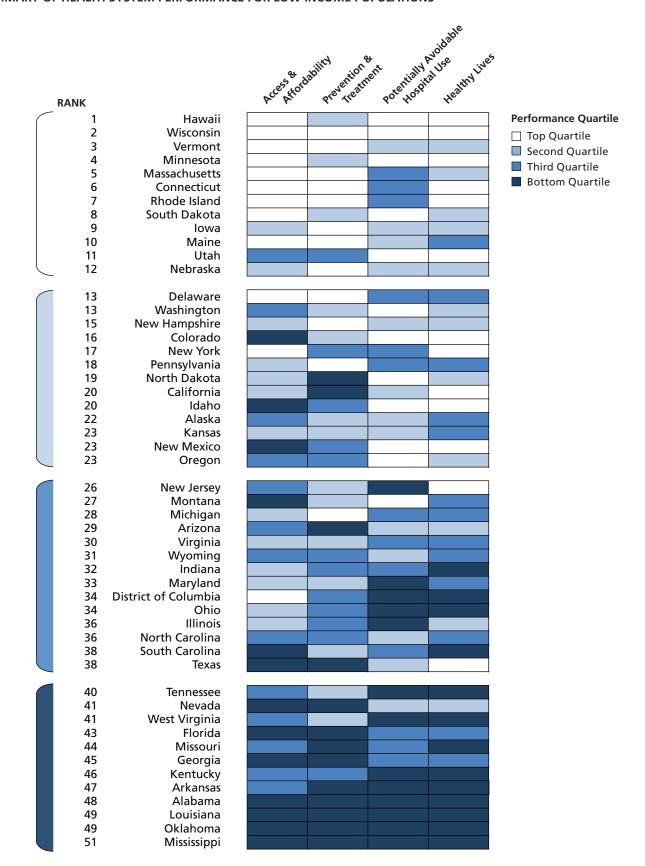
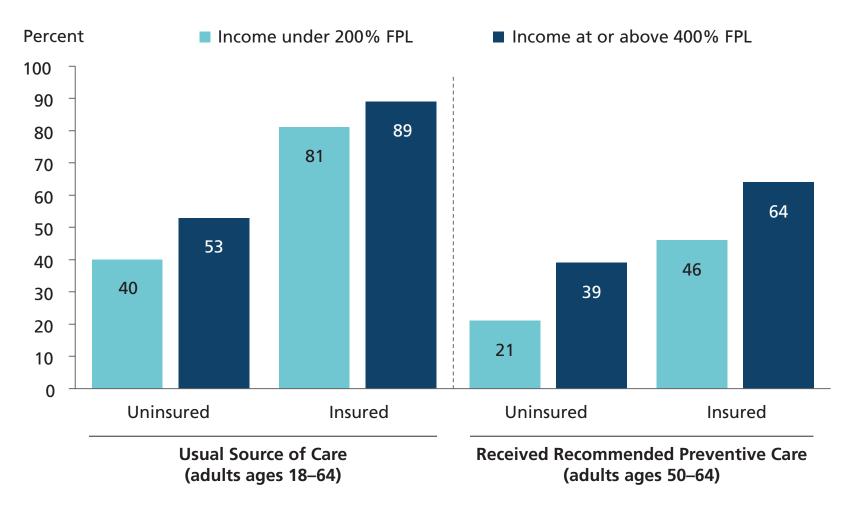
OVERALL HEALTH SYSTEM PERFORMANCE FOR LOW-INCOME POPULATIONS



SUMMARY OF HEALTH SYSTEM PERFORMANCE FOR LOW-INCOME POPULATIONS



HAVING A USUAL SOURCE OF CARE AND OLDER ADULTS WHO RECEIVED RECOMMENDED PREVENTIVE CARE, BY INCOME AND INSURANCE STATUS



Note: FPL denotes federal poverty level.

Data: Adults with a usual source of care—2011 BRFSS; Adults who received recommended preventive care—2010 BRFSS.

LIST OF 30 INDICATORS IN SCORECARD ON STATE HEALTH SYSTEM PERFORMANCE FOR LOW-INCOME POPULATIONS, 2013

		Total Population			Vulnerable Population			
		All-State Median	Top State Rate	Bottom State Rate	All-State Median	Top State Rate	Bottom State Rate	Top Three States*
	ACCESS & AFFORDABILITY							
1	Percent of adults ages 19–64 uninsured (a)	19	6	31	38	12	55	MA, HI, VT
2	Percent of children ages 0–18 uninsured (a)	8	3	19	13	5	27	VT, HI, DC
3	Percent of adults who went without care because of cost in the past year (a)	16	9	23	29	16	38	HI, ME, MA
4	Percent of individuals with high out-of- pocket medical spending relative to their annual household income (a)	16	10	22	35	25	46	DC, NY, CA
5	Percent of adults without a dentist, dental hygienist, or dental clinic visit in the past year (a)	30	19	42	46	30	60	MN, MA, CT
	PREVENTION & TREATMENT							
6	Percent of adults age 50 and older who received recommended screening and preventive care (a)	44	54	36	32	42	22	MA, DE, ME
7	Percent of adults with a usual source of care (a)	79	88	64	75	88	57	VT, ME, MA
8	Percent of children with a medical home (a)	57	69	45	47	60	30	VT, IA, WI
9	Percent of children with both a medical and dental preventive care visit in the past year (a)	69	81	56	62	79	50	VT, DC, MA
10	Percent of Medicare beneficiaries who received at least one drug that should be avoided in the elderly (b)	24	15	39	28	17	45	MA, HI, NY
11	Percent of Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received prescription in an ambulatory care setting that is contraindicated for that condition (b)	19	12	29	26	16	36	VT, AK, ME
12	Percent of patients hospitalized for heart failure or pneumonia who received recommended care (c)	96	98	91	96	98	85	NE, MT, DE
13	Percent of surgical patients who received appropriate care to prevent complications (c)	98	98	95	97	99	92	MT, NE, VT
14	Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia (c)	13	11	13	12	11	15	DC, IL, CA, CT, MD
15	Percent of hospitalized patients given information about what to do during their recovery at home (c)	83	89	77	83	90	67	VT, ID, NE, NH, UT
16	Percent of 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 (c)	66	73	57	64	75	52	ID, AK, NH, UT

LIST OF 30 INDICATORS IN SCORECARD ON STATE HEALTH SYSTEM PERFORMANCE FOR LOW-INCOME POPULATIONS, 2013

(continued) **Total Population Vulnerable Population** Top **Bottom** Тор **Bottom** All-State State State **All-State** State State Median Rate Rate Median Rate Rate Top Three States* POTENTIALLY AVOIDABLE HOSPITAL USE Hospital admissions for pediatric asthma, 17 116 43 230 160 56 477 OR, UT, SD per 100,000 children (d) Potentially avoidable hospitalizations from respiratory disease among adults, per HI, UT, OR 18 369 1.161 1,002 400 1,589 672 100,000 (d) Potentially avoidable hospitalizations from complications of diabetes among adults, per 300 19 187 101 268 149 559 SD, OR, ME 100,000 (d) Hospital admissions among Medicare beneficiaries for ambulatory care-sensitive 20 5,477 2.928 8.475 10.928 5.623 16.891 HI, CA, UT conditions, per 100,000 beneficiaries (e) Potentially avoidable emergency 21 department visits among Medicare 183 129 263 337 218 466 UT, HI, MN beneficiaries, per 1,000 beneficiaries (e) Medicare 30-day hospital readmissions as a 22 18 13 22 21 15 25 ID, MT, ND percent of admissions (e) Percent of long-stay nursing home residents 23 19 7 31 19 MN, OR, AZ, RI, UT hospitalized within a six-month period (f) Percent of short-stay nursing home residents readmitted within 30 days of 24 20 26 20 26 UT, SD, ID 12 12 hospital discharge to nursing home (f) **HEALTHY LIVES** Years of potential life lost before age 75 25 7.916 5.931 12.090 12.725 9.465 21.635 MN, CA, NY among adults age 25 and older (g) Infant mortality, deaths per 1,000 live 26 7 5 12 8 6 12 CA, UT, NM Percent of adults who smoke (a) 21 12 29 30 17 40 UT, CA, NJ 27 Percent of adults ages 18-64 who are obese 21 34 26 44 28 28 36 HI, NV, AK $(BMI \ge 30)$ (a) Percent of adults ages 18-64 who report 29 fair/poor health, 14 or more bad mental 34 27 43 47 35 61 HI, WI, UT health days, or activity limitations (a) Percent of adults ages 18-64 who have lost six or more teeth because of tooth decay, 9 5 20 8 31 CT, UT, HI 30 16 infection, or gum disease (a)

Vulnerable group defined as (see Appendix B for more detail):

^{*} As a result of ties, more than three states may be listed.

⁽a) under 200% of the federal poverty level.

⁽b) low-income Medicare beneficiaries who received a subsidy to pay for their prescription drug benefits.

⁽c) safety-net hospitals.

⁽d) residence in a low-income zip code.

⁽e) Medicare benficiaries who also are enrolled in Medicaid.

⁽f) all short- and long-stay nursing home patients.

⁽g) high shool diploma (or equivalent) or less.

Source: Commonwealth Fund Scorecard on State Health System Performance for Low-Income Populations, 2013.

INTRODUCTION EXHIBIT 5

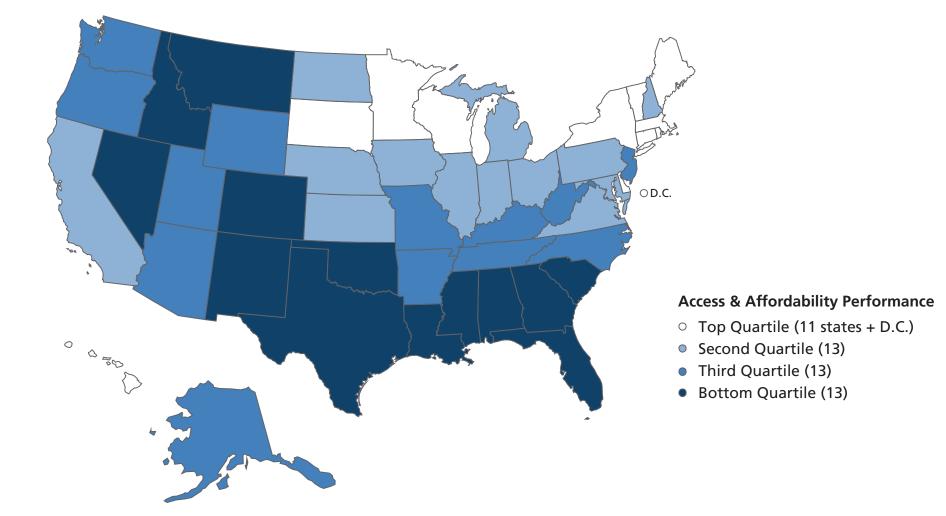
STATE INCOME AND EDUCATION CHARACTERISTICS

			Total Po	Ages 25–75	
State	Total Population (x 1,000)	Median Income*	Under 100% FPL	Under 200% FPL	High School Diploma or Less
United States	307,469	\$52,000	20%	39%	41%
Alabama	4,719	46,500	22	43	48
Alaska	703	60,948	21	41	34
Arizona	6,632	50,000	23	42	38
Arkansas	2,895	42,000	22	47	51
California	37,429	47,852	24	44	39
Colorado	5,039	64,363	16	32	32
Connecticut	3,507	75,215	14	29	37
Delaware	892	53,082	17	36	43
District of Columbia	614	50,000	25	39	31
Florida	18,771	47,000	20	41	43
Georgia	9,757	49,657	23	43	44
Hawaii	1,298	48,169	24	46	35
Idaho	1,553	50,706	19	43	38
Illinois	12,806	53,000	19	39	38
Indiana	6,356	51,476	20	39	47
lowa	2,998	58,080	14	33	40
Kansas	2,786	50,155	17	37	36
Kentucky	4,301	47,000	22	44	51
Louisiana	4,469	47,000	27	47	51
Maine	1,307	54,300	16	35	42
		·			
Maryland	5,769	66,000	16	31	36
Massachusetts	6,570	70,485	15	32	35
Michigan	9,737	55,000	20	38	40
Minnesota	5,236	66,512	13	29	34
Mississippi	2,931	44,400	25	47	48
Missouri	5,938	50,196	19	37	43
Montana	979	47,400	19	41	36
Nebraska	1,807	61,715	14	32	36
Nevada	2,662	46,000	21	42	44
New Hampshire	1,301	78,310	10	25	37
New Jersey	8,662	67,000	17	33	39
New Mexico	2,027	41,661	27	47	42
New York	19,315	51,000	22	40	41
North Carolina	9,377	49,700	21	41	42
North Dakota	655	65,471	14	28	33
Ohio	11,334	51,250	20	39	45
Oklahoma	3,720	48,518	19	41	44
Oregon	3,817	51,013	19	38	34
Pennsylvania	12,584	57,010	17	35	47
Rhode Island	1,043	57,800	18	36	41
South Carolina	4,569	44,460	24	45	45
South Dakota	809	53,050	17	36	39
Tennessee	6,324	46,362	21	43	48
Texas	25,373	46,049	23	45	44
Utah	2,821	64,000	16	36	33
Vermont	619	59,000	14	31	39
Virginia	7,873	67,157	16	32	37
Washington	6,770	56,585	16	36	33
West Virginia	1,816	46,955	21	42	56
Wisconsin	5,648	57,600	15	33	41
Wyoming	550	57,954	14	34	37

^{*} Household income distribution for single person household with person under age 65 and families with all members ages 0–64.

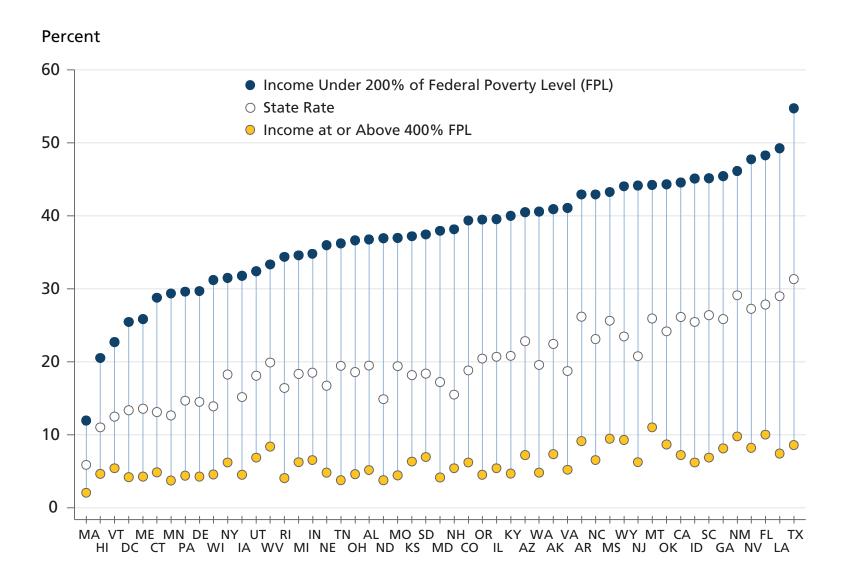
Data: Population, Income, and Poverty estimates—2011—12 Current Population Survey; Education—2008–10 American Community Survey, PUMS. Source: Commonwealth Fund Scorecard on State Health System Performance for Low-Income Populations, 2013.

OVERALL PERFORMANCE ON ACCESS & AFFORDABILITY DIMENSION FOR LOW-INCOME* POPULATIONS

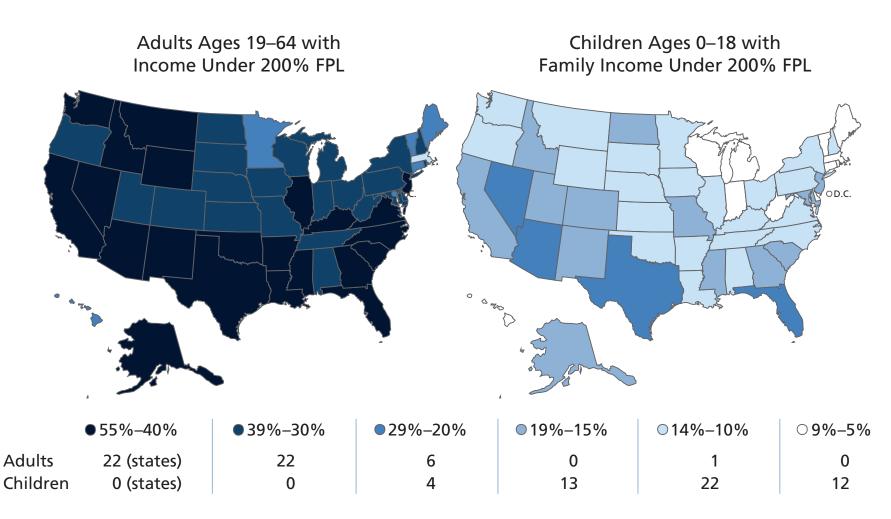


^{*} Income under 200% of federal poverty level. Source: Commonwealth Fund Scorecard on State Health System Performance for Low-Income Populations, 2013.

UNINSURED ADULTS AGES 19-64, 2010-11

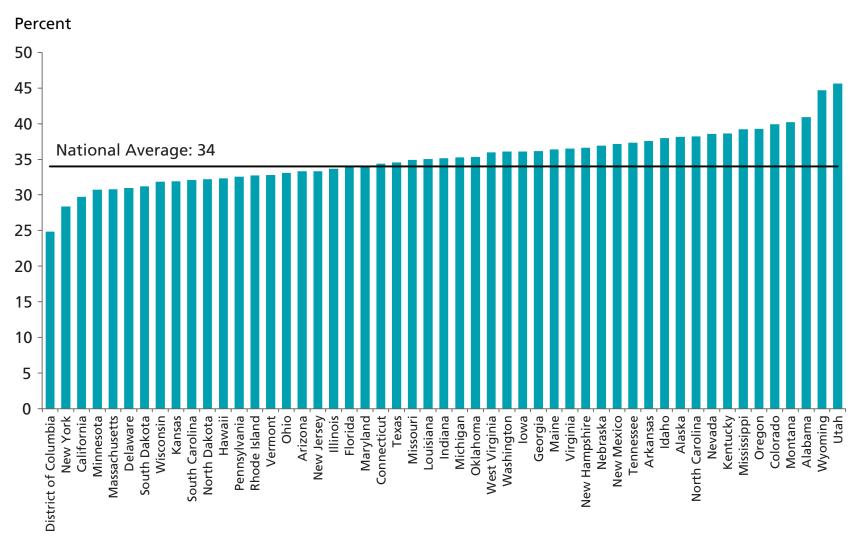


UNINSURED LOW-INCOME ADULTS AND CHILDREN, 2010–11



Note: FPL denotes federal poverty level. Data: 2011–12 Current Population Survey.

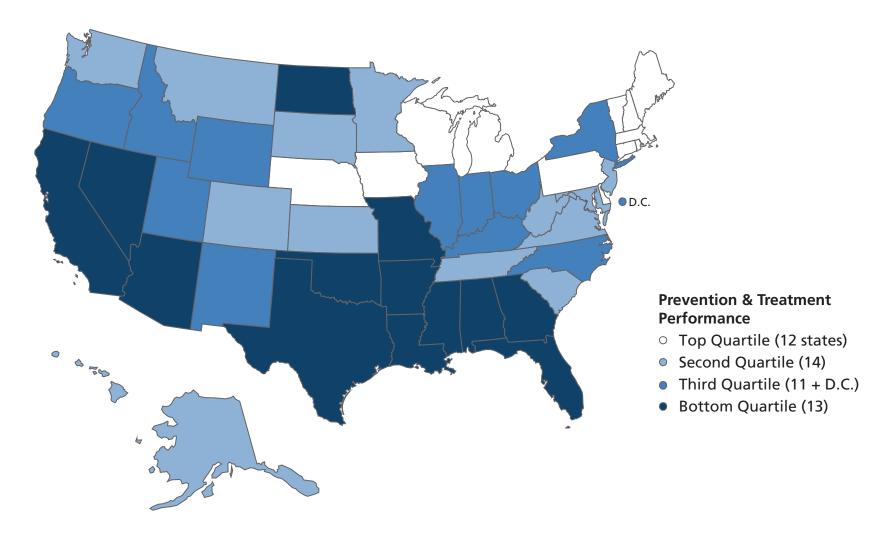
LOW-INCOME INDIVIDUALS WITH HIGH OUT-OF-POCKET MEDICAL SPENDING RELATIVE TO ANNUAL HOUSEHOLD INCOME, 2010–11



Note: Individuals ages 0–64 with annual household incomes under 200% of federal poverty level that spent 5% or more of their annual income on medical care (excluding health insurance premiums).

Data: 2011–12 Current Population Survey.

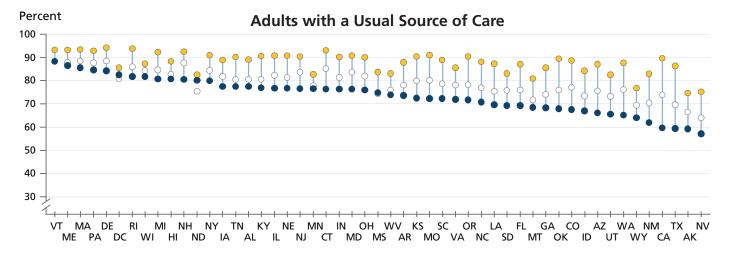
OVERALL PERFORMANCE ON PREVENTION & TREATMENT DIMENSION FOR VULNERABLE* POPULATIONS

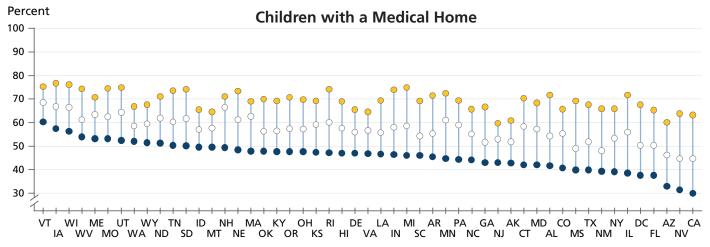


^{*} Definition of vulnerability varied by indicator for this dimension. See Appendix B for additional details. Source: Commonwealth Fund Scorecard on State Health System Performance for Low-Income Populations, 2013.

ADULTS WITH A USUAL SOURCE OF CARE, CHILDREN WITH A MEDICAL HOME

- Income at or Above 400% of Federal Poverty Level (FPL)
- State Rate
- Income Under 200% FPL

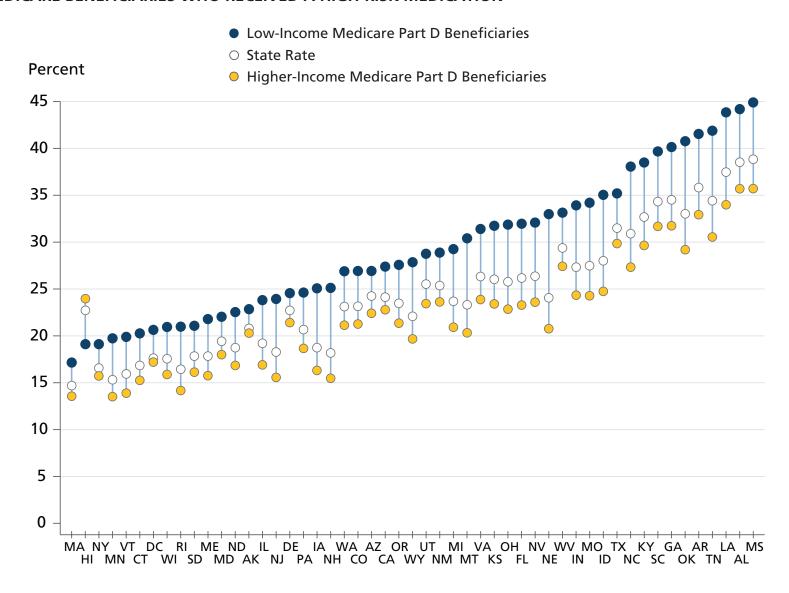




Note: Scale does not begin at zero in either plot.

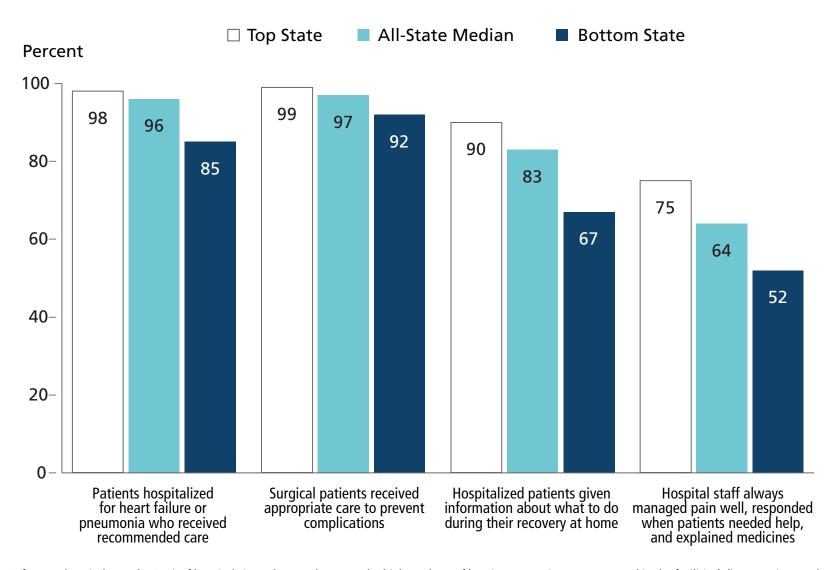
Data: Adults with usual source of care—2011 BRFSS; Children with medical home—2011/12 National Survey of Children's Health.

MEDICARE BENEFICIARIES WHO RECEIVED A HIGH-RISK MEDICATION



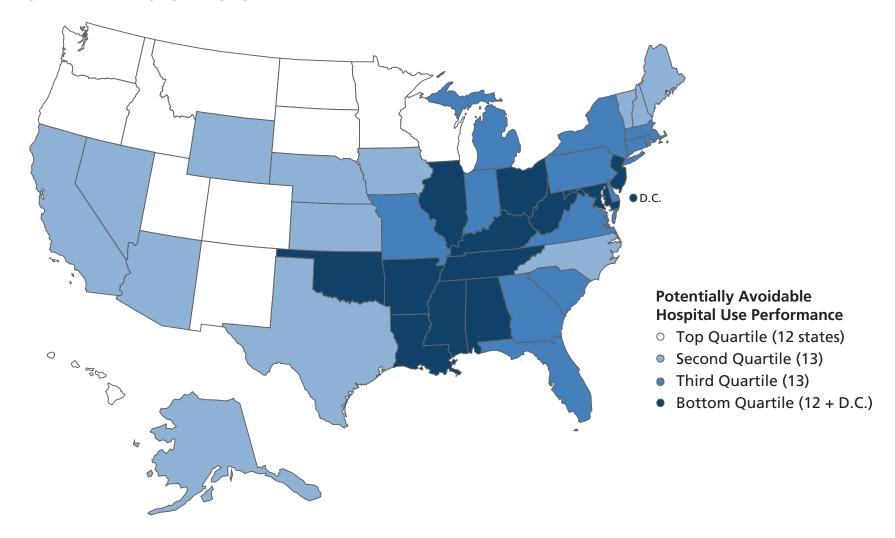
Note: Low-income Medicare beneficiaries received a subsidy to help pay for their prescription drug benefit. Higher-income beneficiaries received no subsidy. Data: 2010 Medicare Part D 5% Sample.

CARE PROCESSES AND RESPONSIVENESS TO PATIENTS AT SAFETY-NET HOSPITALS



Note: Safety-net hospitals are the 25% of hospitals in each state that treat the highest share of low-income patients, as captured in the facilities' disproportionate share hospital (DSH) payments. Data: October 2012 CMS Hospital Compare Database.

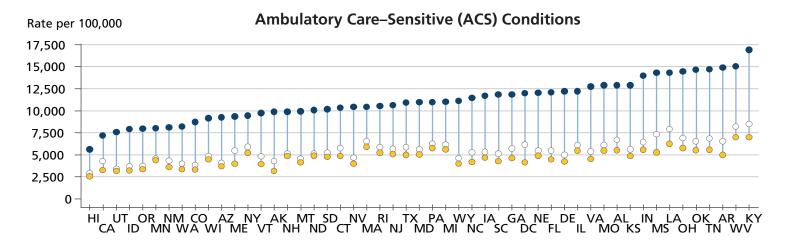
OVERALL PERFORMANCE ON POTENTIALLY AVOIDABLE HOSPITAL USE DIMENSION FOR VULNERABLE* POPULATIONS

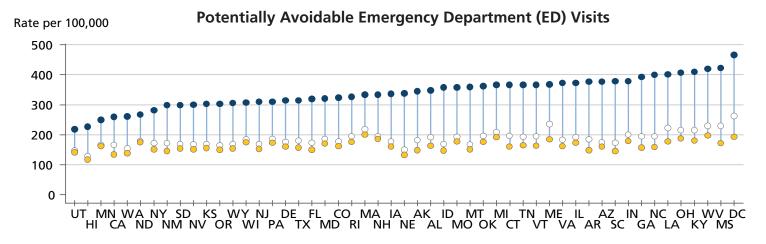


^{*} Definition of vulnerability varied by indicator for this dimension. See Appendix B for additional details. Source: Commonwealth Fund Scorecard on State Health System Performance for Low-Income Populations, 2013.

POTENTIALLY AVOIDABLE HOSPITAL USE AMONG MEDICARE BENEFICIARIES

- Medicare Beneficiaries Also Enrolled in Medicaid (Duals)
- O State Rate
- Medicare Beneficiaries Not Enrolled in Medicaid (Non-Duals)



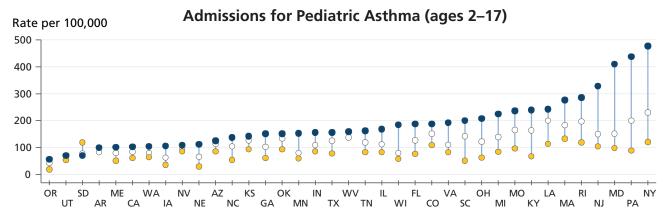


Note: Potentially avoidable ED visits are those where treatment was not required within 12 hours or care was needed within 12 hours, but the services provided in the ED could have been provided in a primary care setting.

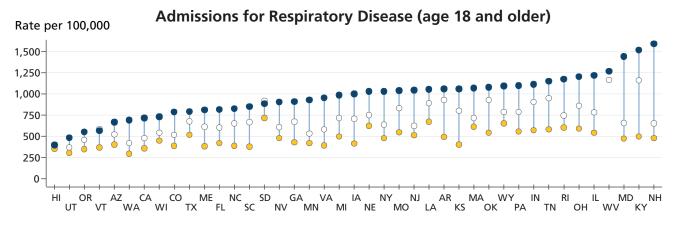
Data: ACS hospital admissions—2011 Medicare Chronic Conditions Warehouse (CCW); Potentially avoidable ED use—2011 5% Medicare CCW. Source: Commonwealth Fund Scorecard on State Health System Performance for Low-Income Populations, 2013.

HOSPITAL ADMISSIONS FOR PEDIATRIC ASTHMA AND RESPIRATORY DISEASE AMONG ADULTS

- Residence in a Low-Income Zip Code
- State Rate
- Residence in a High-Income Zip Code



Missing (14 states): AK, AL, CT, DC, DE, HI, ID, MS, MT, ND, NH, NM, VT, WY

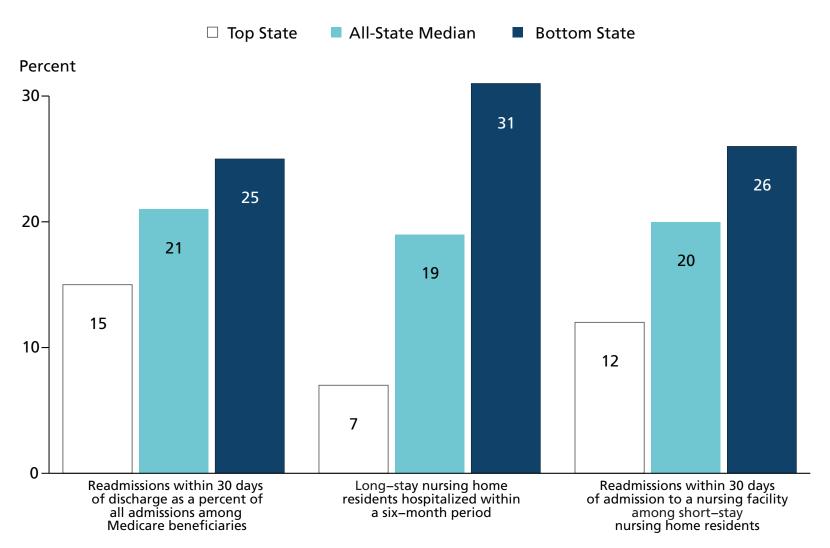


Missing (10 states): AK, AL, CT, DC, DE, ID, MS, MT, ND, NM

Notes: Different scales used in each plot. Low-income zip codes have median annual household incomes <\$39,000; high-income zip codes have median annual household incomes ≥\$64,000.

Data: 2008 Healthcare Cost and Utilization Project (H-CUP), accessed via 2011 National Healthcare Quality Report (NHQR) State Snapshots. Source: Commonwealth Fund Scorecard on State Health System Performance for Low-Income Populations, 2013.

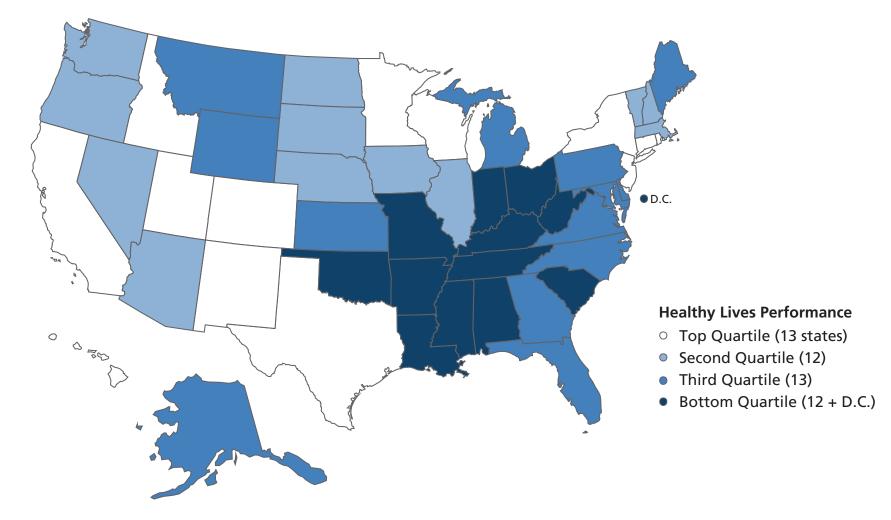
POTENTIALLY AVOIDABLE HOSPITAL ADMISSIONS AMONG VULNERABLE MEDICARE BENEFICIARIES



Note: For all-cause readmission, Medicare beneficiaries were considered vulnerable if they were also enrolled in Medicaid (Duals). For readmissions and hospital admissions among nursing home residents, all nursing home residents are considered vulnerable.

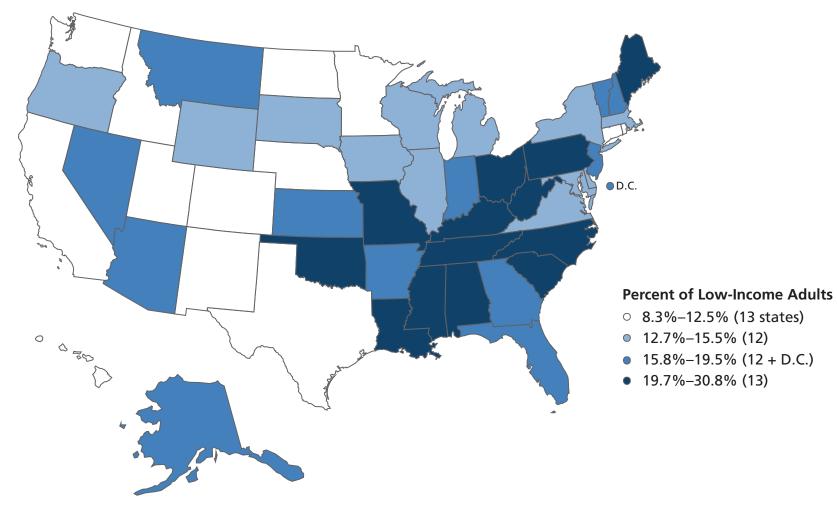
Data: readmissions within 30 days of discharge—2011 Medicare Chronic Conditions Warehouse (CCW); Hospital use by short- and long-stay nursing home residents—2010 MEDPAR, MDS.

OVERALL PERFORMANCE ON HEALTHY LIVES DIMENSION FOR VULNERABLE* POPULATIONS



^{*} Definition of vulnerability varied by indicator for this dimension. See Appendix B for additional details. Source: Commonwealth Fund Scorecard on State Health System Performance for Low-Income Populations, 2013.

LOW-INCOME ADULTS WHO HAVE LOST SIX OR MORE TEETH BECAUSE OF TOOTH DECAY, INFECTION, OR GUM DISEASE, AGES 18–64, 2010

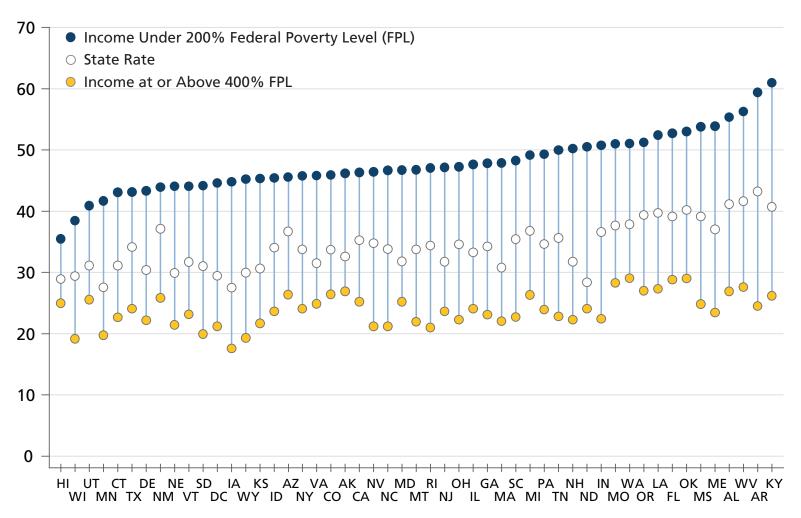


Data: 2010 BRFSS.

POOR HEALTH-RELATED QUALITY OF LIFE AMONG ADULTS, AGES 18-64

Adults who report fair/poor health status, 14 or more bad mental health days per month, or who have health-related activity limitations

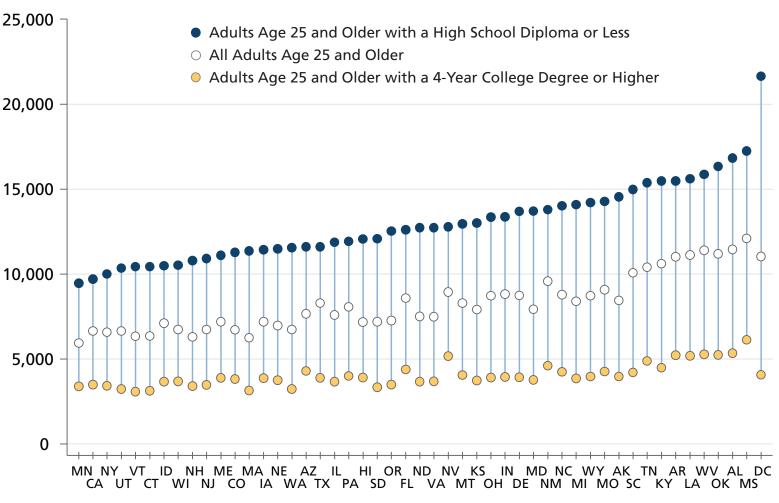




Data: 2011 BRFSS.

YEARS OF POTENTIAL LIFE LOST BEFORE AGE 75, BY EDUCATIONAL ATTAINMENT

Rate per 100,000 Population (age-adjusted)



Missing (2 states): GA, RI

NATIONAL CUMULATIVE IMPACT FOR LOW-INCOME AND OTHER VULNERABLE POPULATIONS IF ALL STATES ACHIEVED THE TOP STATE RATE (ESTIMATES FOR TWO BENCHMARK RATES)

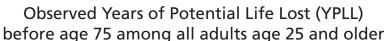
If all states improved health system performance for their vulnerable populations to the benchmark rate, then:

			populations to the benchmark rate, then:						
Indicator	Current National Rate	Benchmark Best State Rate for:	New Estimated National Rate	Vulne	rable Population Potentially Impacted				
	78%	High-Income Population ^a	92%	25,788,922	More low-income adults (ages 19–64) would be covered				
Insured Adults		Low-Income Population ^a	89%	19,139,657	by health insurance (public or private), and be more likely to receive health care when needed				
Insured Children	90%	High-Income Population ^a	96%	4,940,867	More children (ages 0–18) from low-income families would be covered by health insurance (public or private),				
insured Cilidren	30 /0	Low-Income Population ^a	94%	3,325,009	and be more likely to receive health care when needed				
High Out-of-Pocket	15%	High-Income Population ^a	3%	34,255,054	Fewer low-income individuals would be burdened by high out-of-pocket Medicare care that exceeds 5% of their				
Medical Spending	1370	Low-Income Population ^a	12%	9,331,902	annual income				
Went Without Care	17%	High-Income Population ^a	7%	21,392,593	Fewer low-income adults (age 18 and older) would go				
Because of Cost	17 70	Low-Income Population ^a	12%	11,278,120	without needed health care because of cost				
Older Adult	45%	High-Income Population ^a	56%	11,388,686	More low-income adults (age 50 and older) would receive recommended preventive care, such as colon cancer				
Preventive Care	4370	Low-Income Population ^a	48%	3,262,750	screenings, mammograms, Pap tests, and flu shots at appropriate ages				
Adult Usual Source	79%	High-Income Population ^a	87%	19,306,781	More low-income adults (age 18 and older) would have a usual source of care to help ensure that care is				
of Care	7370	Low-Income Population ^a	85%	14,488,437	coordinated and accessible when needed				
Child Medical Home	54%	High-Income Population ^a	70%	12,333,535	More children (ages 0–17) from low-income families would have a primary care medical home to help ensure				
Cima Medical Floring		Low-Income Population ^a	63%	6,430,586	that care is coordinated and accessible when needed				
Medicare Received a	25%	High-Income Population ^b	19%	759,689	Fewer low-income Medicare beneficiaries would receive				
High-Risk Drug		Low-Income Population ^b	21%	591,904	an inappropriately prescribed medication				
Medicare Admissions for Ambulatory Care-	5,675	Non-Duals ^c	4,597	286,593	Fewer hospitalizations for ambulatory care–sensitive conditions would occur among Medicare beneficiaries				
Sensitive Conditions (rate per 100,000)	3,0.0	Duals ^c	4,986	183,207	who are dually eligible for Medicaid				
Medicare Potentially Avoidable Emergency	185	Non-Duals ^c	157	734,584	Fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among				
Department Visits (rate per 1,000)	103	Duals ^c	170	389,680	Medicare beneficiaries who are dually eligible for Medicaid				
Medicare 30-Day	19%	Non-Duals ^c	17%	311,978	Fewer hospital readmissions would occur among Medicare				
Readmissions	1570	Duals ^c	18%	220,217	beneficiaries who are dually eligible for Medicaid				
Years of Potential Life Lost (rate per	7.615	4-Year College Degree or Higher	3,936	6,816,030	Fewer years of potential life would be lost between the ages of 25–75 among adults with a high school diploma				
100,000)	7,615	High School Diploma or Less	6,571	1,934,565	or less, resulting in approximately 86,606 or 24,581 fewer deaths, assuming average life expectancy				
Infant Mortality	6.7	4-Year College Degree or Higher	4.1	33,000	Fewer deaths among infants less than 1 year of age born				
(rate per 1,000 live births)	6.7	High School Diploma or Less	5.5	15,454	to mothers with a high school degree or less might occur				
Adults with Poor Oral	100/	High-Income Population ^a	5%	8,865,401	Fewer low-income adults (ages 18–64) would have lost				
Health: Tooth Loss	10%	Low-Income Population ^a	7%	5,073,642	six or more teeth to decay, infection, or gum disease				

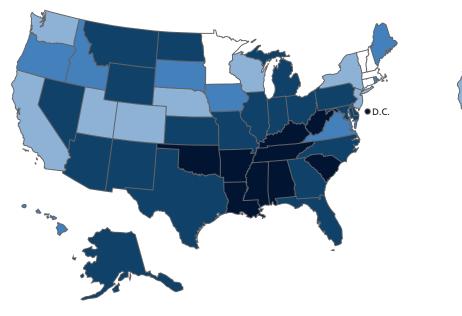
(a) High-income is at or above 400% federal poverty level (FPL), low-income is under 200% FPL; (b) high-income is Medicare beneficiaries who receive no income-related subsidy to help pay for prescription drug benefit (approximatly above 150% FPL), low-income is Medicare beneficiaries who receive a low-income subsidy to help pay for prescription drug benefit (approximatly under 150% FPL); (c) Duals refers to Medicare beneficiaries who also are enrolled in Medicaid.

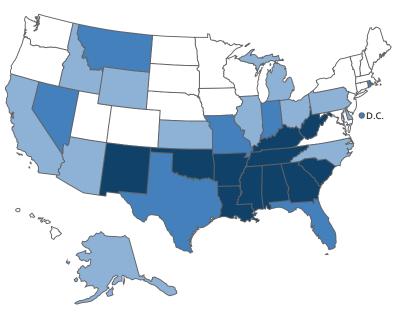
Source: Commonwealth Fund Scorecard on State Health System Performance for Low-Income Populations, 2013.

IMPACT OF IMPROVED PERFORMANCE: POTENTIAL GAINS IN YEARS OF POTENTIAL LIFE LOST BEFORE AGE 75



YPLL) nd older Years of Potential Life Lost if all individuals with a high school diploma or less experienced YPLL at the same rate as the low-education group in the best state





Years of Potential Life Lost, Rates per 100,000 Population (age-adjusted)

≥10,000

• 9,999–7,500

7,499–7,000

6,999–6,500

○ <6,500

Note: Education attainment among decedents is missing in GA and RI, thus, the rate of YPLL reported in both maps assumes no change.

Data: 2008–2010 National Vital Statistics System (NVSS) mortality all-county micro data files.

BEST VULNERABLE RATE COMPARISON

Number of states in which the low-income or otherwise vulnerable rate is better than the:

	Indicator	National Average	Advantaged Population in Lagging States
	ACCESS & AFFORDABILITY	# of States	# of States
1	Percent of adults ages 19–64 uninsured	2	0
2	Percent of children ages 0–18 uninsured	12	10
3	Percent of adults who went without care because of cost in the past year	5	0
4	Percent of individuals with high out-of-pocket medical spending relative to their annual household income	0	0
5	Percent of adults without a dentist, dental hygienist, or dental clinic visit in the past year	0	0
	PREVENTION & TREATMENT		
6	Percent of adults age 50 and older who received recommended screening and preventive care	0	0
7	Percent of adults with a usual source of care	13	0
8	Percent of children with a medical home	3	0
9	Percent of children with both a medical and dental preventive care visit in the past year	5	0
10	Percent of Medicare beneficiaries who received at least one drug that should be avoided in the elderly	16	41
11	Percent of Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received prescription in an ambulatory care setting that is contraindicated for that condition	2	21
12	Percent of patients hospitalized for heart failure or pneumonia who received recommended care	18	0
13	Percent of surgical patients who received appropriate care to prevent complications	2	0
14	Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	5	27
15	Percent of hospitalized patients given information about what to do during their recovery at home	24	2
16	Percent of 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	17	0
	POTENTIALLY AVOIDABLE HOSPITAL USE		
17	Hospital admissions for pediatric asthma, per 100,000 children	9	11
18	Potentially avoidable hospitalizations from respiratory disease among adults, per 100,000	4	6
19	Potentially avoidable hospitalizations from complications of diabetes among adults, per 100,000	4	4
20	Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, per 100,000 beneficiaries	1	1
21	Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	0	0
22	Medicare 30-day hospital readmissions as a percent of admissions	10	23
23	Long-stay nursing home residents hospitalized within six-month period	22	NA*
24	Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	21	NA*
	HEALTHY LIVES		
25	Years of potential life lost before age 75 among adults age 25 and older	0	0
26	Infant mortality, deaths per 1,000 live births	8	8
27	Percent of adults who smoke	2	2
28	Percent of adults ages 18–64 who are obese (BMI ≥ 30)	3	21
29	Percent of adults ages 18–64 who report fair/poor health, 14 or more bad mental health days, or activity limitations	0	0
30	Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	3	3

^{*} All short- and long-stay nursing home residents are considered vulnerable in this analysis. Therefore, there is no advantaged population comparison for these two indicators. Source: Commonwealth Fund Scorecard on State Health System Performance for Low-Income Populations, 2013.

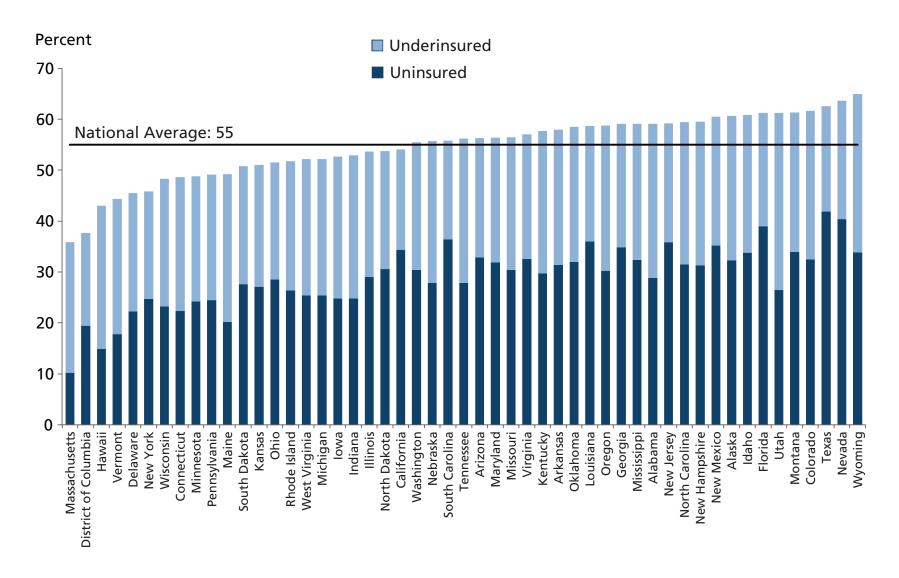
SUMMARY OF INDICATOR RANKINGS BY STATE

Overall Rank	State	Scored Indicators (of 30)		Гор artile		nd artile		Brd artile		ttom artile
48	Alabama	27	1	4%	4	15%	6	22%	16	59%
22	Alaska	25	7	28%	5	20%	6	24%	7	28%
29	Arizona	30	6	20%	9	30%	10	33%	5	17%
47	Arkansas	30	1	3%	2	7%	12	40%	15	50%
20	California	30	11	37%	5	17%	5	17%	9	30%
16	Colorado	30	13	43%	6	20%	6	20%	5	17%
6	Connecticut	27	13	48%	6	22%	7	26%	1	4%
13	Delaware	27	10	37%	9	33%	4	15%	4	15%
34	District of Columbia	25	10	40%	2	8%	3	12%	10	40%
43	Florida	30	2	7%	8	27%	10	33%	10	33%
45	Georgia	29	0	0%	5	17%	15	52%	9	31%
1	Hawaii	26	17	65%	5	19%	2	8%	2	8%
20	Idaho	27	10	37%	6	22%	3	11%	8	30%
36	Illinois	30	3	10%	8	27%	7	23%	12	40%
32	Indiana	30	2	7%	9	30%	13	43%	6	20%
9	lowa	30	7	23%	17	57%	5	17%	1	3%
23	Kansas	30	3	10%	12	40%	11	37%	4	13%
46	Kentucky	30	1	3%	6	20%	6	20%	17	57%
49	Louisiana	30	0	0%	5	17%	8	27%	17	57%
10	Maine	30	15	50%	8	27%	5	17%	2	7%
33	Maryland	30	3	10%	9	30%	7	23%	11	37%
5	Massachusetts	30	13	43%	10	33%	6	20%	1	3%
28	Michigan	30	3	10%	8	27%	17	57%	2	7%
4	Minnesota	30	16	53%	7	23%	4	13%	3	10%
51	Mississippi	27	1	4%	0	0%	8	30%	18	67%
44	Missouri	30	1	3%	3	10%	11	37%	15	50%
27	Montana	27	6	22%	5	19%	12	44%	4	15%
12	Nebraska	30	7	23%	13	43%	9	30%	1	3%
41	Nevada	30	4	13%	6	20%	7	23%	13	43%
15	New Hampshire	28	11	39%	7	25%	8	29%	2	7%
26	New Jersey	30	7	23%	9	30%	5	17%	9	30%
23	New Mexico	27	8	30%	6	22%	10	37%	3	11%
17	New York	30	12	40%	7	23%	3	10%	8	27%
36	North Carolina	30	2	7%	9	30%	11	37%	8	27%
19	North Dakota	27	7	26%	9	33%	4	15%	7	26%
34	Ohio	30	0	0%	12	40%	11	37%	7	23%
49	Oklahoma	30	1	3%	4	13%	9	30%	16	53%
23	Oregon	30	9	30%	8	27%	10	33%	3	10%
18	Pennsylvania	30	4	13%	12	40%	10	33%	4	13%
7	Rhode Island	29	12	41%	11	38%	3	10%	3	10%
38	South Carolina	30	4	13%	6	20%	9	30%	11	37%
8	South Dakota	30	12	40%	12	40%	2	7%	4	13%
40	Tennessee	30	3	10%	6	20%	10	33%	11	37%
38	Texas	30	5	17%	10	33%	3	10%	12	40%
11	Utah	29	17	59%	3	10%	4	14%	5	17%
3	Vermont	28	16	57%	7	25%	4	14%	1	4%
30	Virginia	30	2	7%	8	27%	17	57%	3	10%
13	Washington	30	11	37%	11	37%	4	13%	4	13%
41	West Virginia	30	5	17%	3	10%	9	30%	13	43%
2	Wisconsin	30	19	63%	8	27%	2	7%	1	3%
31	Wyoming	28	6	21%	7	25%	8	29%	7	25%

Note: Percentages may not add to 100 because of rounding.

Source: Commonwealth Fund Scorecard on State Health System Performance for Low-Income Populations, 2013.

PERCENT OF LOW-INCOME INDIVIDUALS UNINSURED OR UNDERINSURED, BY STATE



Note: Underinsured refers individuals with household incomes under 200% federal poverty level that spent 5% or more of their annual household income on medical care (excluding health insurance premiums).

Data: 2011–12 Current Population Survey.

Income Eligibility for Medicaid/CHIP

		s a Percent of Federal Pove	, , , ,	State Participation in Affordable Care Act Medicaid Expansion**	Medicaid Medical Home Payments and Multipayer Initiatives Currently Under Way***	
	Children (Ages 6–18)	Parents—Working (Ages 18–64) Medicaid/Limited^	Childless Adults—Working (nondisabled) (Ages 18–64) Medicaid/Limited^	138% FPL Income Eligibility for Medicaid Expansion		
Alabama	100	23 / NA	NA	No		
Alaska	175	78 / NA	NA	No		
Arizona	100	106 / NA	100^^ / NA	Yes		
Arkansas	200	16 / 200	NA / 200	Yes, with variation	X	
California	100	106 / 206	NA / 210	Yes		
Colorado	133	106 / NA	20 / NA	Yes	X	
Connecticut	185	191 / NA	70 / NA	Yes		
Delaware	100	120 / NA	110 / NA	Yes		
District of Columbia	300	206 / NA	211 / NA	Yes		
lorida	100	56 / NA	NA	No		
Georgia	100	48 / NA	NA	No		
lawaii	300	133 / NA	133 / NA	Yes		
daho	133	37/ 185	NA / 185	No	Х	
linois	133	139 / NA	NA	Yes		
ndiana	150	24 / 206	NA / 210^^	Unclear/Undecided		
owa	133	80 / 250	NA / 250	Yes, with variation		
Cansas	100	31 / NA	NA	No		
Centucky	150	57 / NA	NA NA	Yes		
ouisiana	200	24 / NA	NA	No		
Maine	150	200 / NA	NA / 100^^	No	X	
//aryland	300	122 / NA	NA / 128^^	Yes	X	
/lassachusetts	150	133 / 300	NA / 300^^	Yes	X	
/lichigan	150	64 / NA	NA / 45^^	Yes, with variation	X	
//innesota	275	215 / 275	75 / 200	Yes	X	
//ississippi	100	29 / NA	NA	No	^	
Aissouri	150	35 / NA	NA NA	No		
Montana	133	54 / NA	NA NA	Unclear/Undecided		
lebraska	200	58 / NA	NA NA	No		
lebraska Jevada	100	84 / NA	NA NA	Yes		
			NA NA	Unclear/Undecided		
lew Hampshire	300	47 / NA			V	
lew Jersey	133	200^^ / NA	NA / 23	Yes	X	
lew Mexico	285	85 / 408^^	NA / 414^^	Yes	V	
lew York	133	150 / NA	100 / NA	Yes	X	
lorth Carolina	100	47 / NA	NA 	No	X	
lorth Dakota	100	57 / NA	NA	Yes		
Ohio	200	96 / NA	NA	Unclear/Undecided	X	
Oklahoma	185	51 / 200	NA / 200	No	X	
Oregon	100	39 / 201^^	NA / 201^^	Yes	X	
Pennsylvania	100	58 / NA	NA	No	X	
thode Island	250	181 / NA	NA	Yes	X	
outh Carolina	200	89 / NA	NA	No		
outh Dakota	140	50 / NA	NA	No		
ennessee	100	122 / NA	NA	Unclear/Undecided		
exas	100	25 / NA	NA	No		
Jtah	100	42 / 200	NA / 200	No		
/ermont	225	191 / 331	160 / 353	Yes	X	
/irginia	133	30 / NA	NA	No		
Vashington	200	71 / 200^^	NA / 200^^	Yes	X	
Vest Virginia	100	31 / NA	NA	Yes		
Visconsin	150	200 / NA	NA / 200^^	No		
Wyoming	100	50 / NA	NA	No		

Notes: FPL denotes federal poverty level. The Medicaid/CHIP-funded Medicaid expansion program income eligibility listed here is restricted to children ages 6–18, the child is age six or older, but has not yet reached his or her 19th birthday. States provide coverage for children ages 0-5 as well, with income eligibility ranging across states up to 300% FPL. Income eligibility levels for children combine "regular" Medicaid (where states receive Medicaid matching payments) and any CHIP-funded Medicaid expansion programs (where the state receives the enhanced CHIP matching payments for these children).

NA = not applicable. * Source: Kaiser Family Foundation, State Health Facts, Income Eligibility Limits for Children's Regular Medicaid and Children's CHIP-funded Medicaid Expansions as a Percent of Federal Poverty Level (FPL), Jan. 2013, http://kff.org/medicaid/state-indicator/income-eligibility-fpl-medicaid/; Kaiser Family Foundation, State Health Facts, Adult Income Eligibility Limits at Application as a Percent of the Federal Poverty Level (FPL), Jan. 2013, http://kff.org/medicaid/state-indicator/income-eligibility-fpl-medicaid/; Kaiser Family Foundation, State Health Facts, Adult Income Eligibility Limits at Application as a Percent of the Federal Poverty Level (FPL), Jan. 2013, http://kff.org/medicaid/state-indicator/income-eligibility-fpl-medicaid/; Kaiser Family Foundation, State Health Facts, Adult Income Eligibility Limits at Application as a Percent of the Federal Poverty Level (FPL), Jan. 2013, http://kff.org/medicaid/state-indicator/income-eligibility-fpl-medicaid/; Kaiser Family Foundation, State Health Facts, Adult Income Eligibility Limits at Application as a Percent of the Federal Poverty Level (FPL), Jan. 2013, http://kff.org/medicaid/state-indicator/income-eligibility-fpl-medicaid/; Kaiser Family Foundation, State Health Facts, Adult Income Eligibility Limits at Application as a Percent of the Federal Poverty Level (FPL), Jan. 2013, http://kff.org/medicaid/state-indicator/income-eligibility-fpl-medicaid/; Kaiser Family Foundation, State Health Facts, Adult Income Eligibility Limits at Application as a Percent of the Federal Poverty Level (FPL), Jan. 2013, http://kff.org/medicaid/state-indicator/income-eligibility-fpl-medicaid/state-indicator/income-eligibility-fpl-medicaid/state-indicator/income-eligibility-fpl-medicaid/state-indicator/income-eligibility-fpl-medicaid/state-indicator/income-eligibility-fpl-medicaid/state-indicator/income-eligibility-fpl-medicaid/state-indicator/income-eligibility-fpl-medicaid/state-indicator/income-eligibility-fpl-medicaid/state-indicator/income-eligibility-fpl-medicaid/state-indic

[^] Denotes more limited coverage, where a state has a waiver or state-funded program with more limited benefits and/or higher cost-sharing than Medicaid to provide coverage to adults at higher income levels.

^{^^} Denotes enrollment is closed to new applicants at any point between January 1, 2012, and January 1, 2013.

^{**}Source: National Academy for State Health Policy State Scan, updated April 2013, http://www.nashp.org/med-home-map.