AIMING HIGHER

Results from a Scorecard on State Health System Performance

2015 Edition

Douglas McCarthy, David C. Radley, and Susan L. Hayes

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The COMMONWEALTH FUND

OVERVIEW

ON MOST OF THE 42 INDICATORS, MORE STATES IMPROVED THAN WORSENED.

The fourth Commonwealth Fund *Scorecard on State Health System Performance* tells a story that is both familiar and new. Echoing the past three state scorecards, the 2015 edition finds extensive variation among states in people's ability to access care when they need it, the quality of care they receive, and their likelihood of living a long and healthy life. However, this scorecard—the first to measure the effects of the Affordable Care Act's 2014 coverage expansions—also finds broad-based improvements. On most of the 42 indicators, more states improved than worsened.

By tracking performance measures across states, this scorecard can help policymakers, health system leaders, and the public identify opportunities and set goals for improvement. The 50 states and the District of Columbia are measured and ranked on 42 indicators grouped into five dimensions: access and affordability, prevention and treatment, avoidable hospital use and cost, healthy lives, and equity. Individual indicators measure things like rates of children or adults who are uninsured, hospital patients who get information about how to handle their recovery at home, hospital admissions for children with asthma, and breast and colorectal cancer deaths, among many others.

ACCESS AND AFFORDABILITY

PREVENTION AND TREATMENT

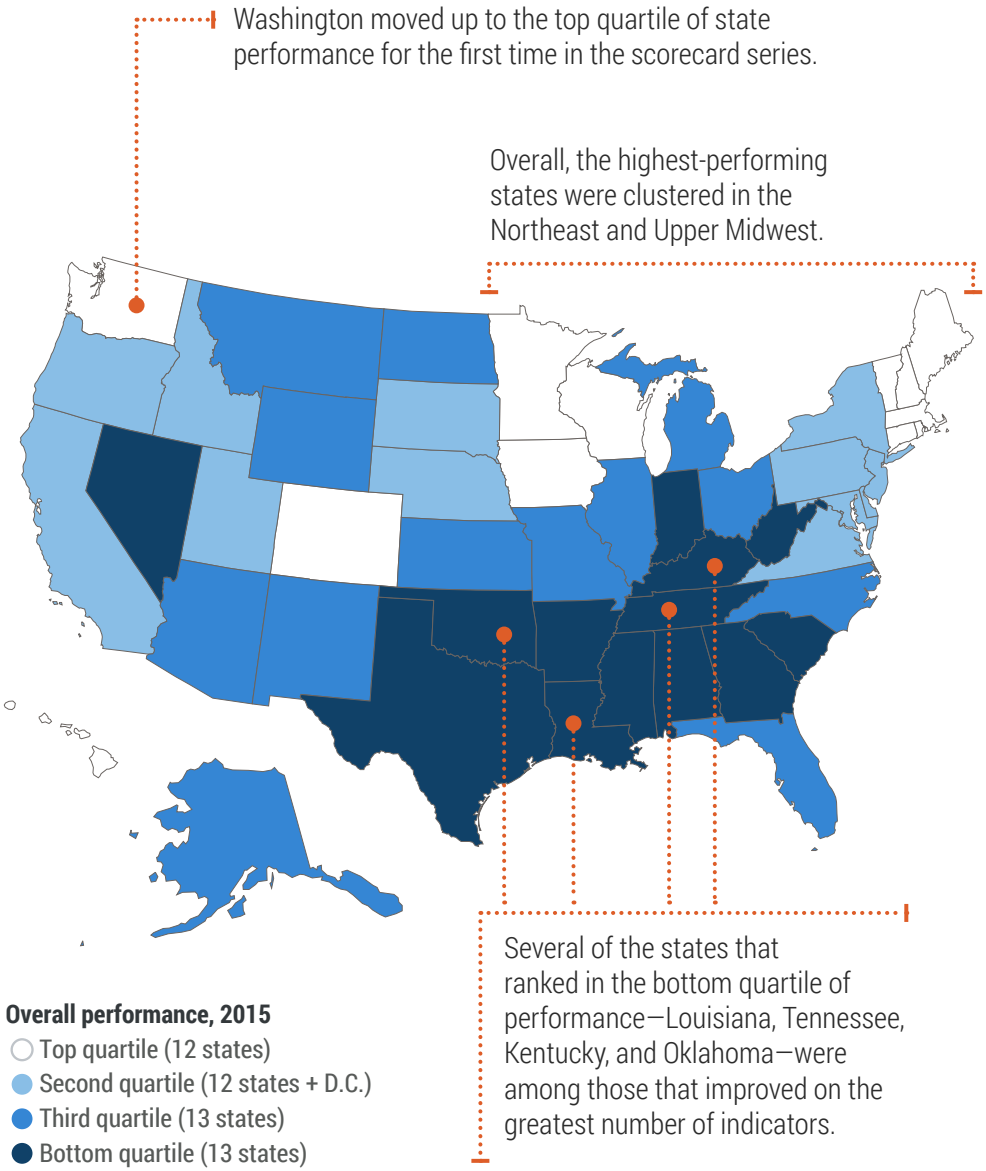
AVOIDABLE HOSPITAL USE AND COST

HEALTHY LIVES

EQUITY

HIGHLIGHTS FROM THE SCORECARD

The top-ranked states are Minnesota, Vermont, Hawaii, Massachusetts, Connecticut, New Hampshire, and Rhode Island. These states were also leaders in the 2014 scorecard.



IMPROVEMENTS IN ACCESS FROM 2013 TO 2014

The percentage of uninsured working-age adults declined in nearly every state and by 3 points or more in

39 STATES

The percentage of uninsured children 18 years and younger declined by 2 points or more in

16 STATES

The percentage of adults who went without care because of costs in the past year declined by 2 points or more in

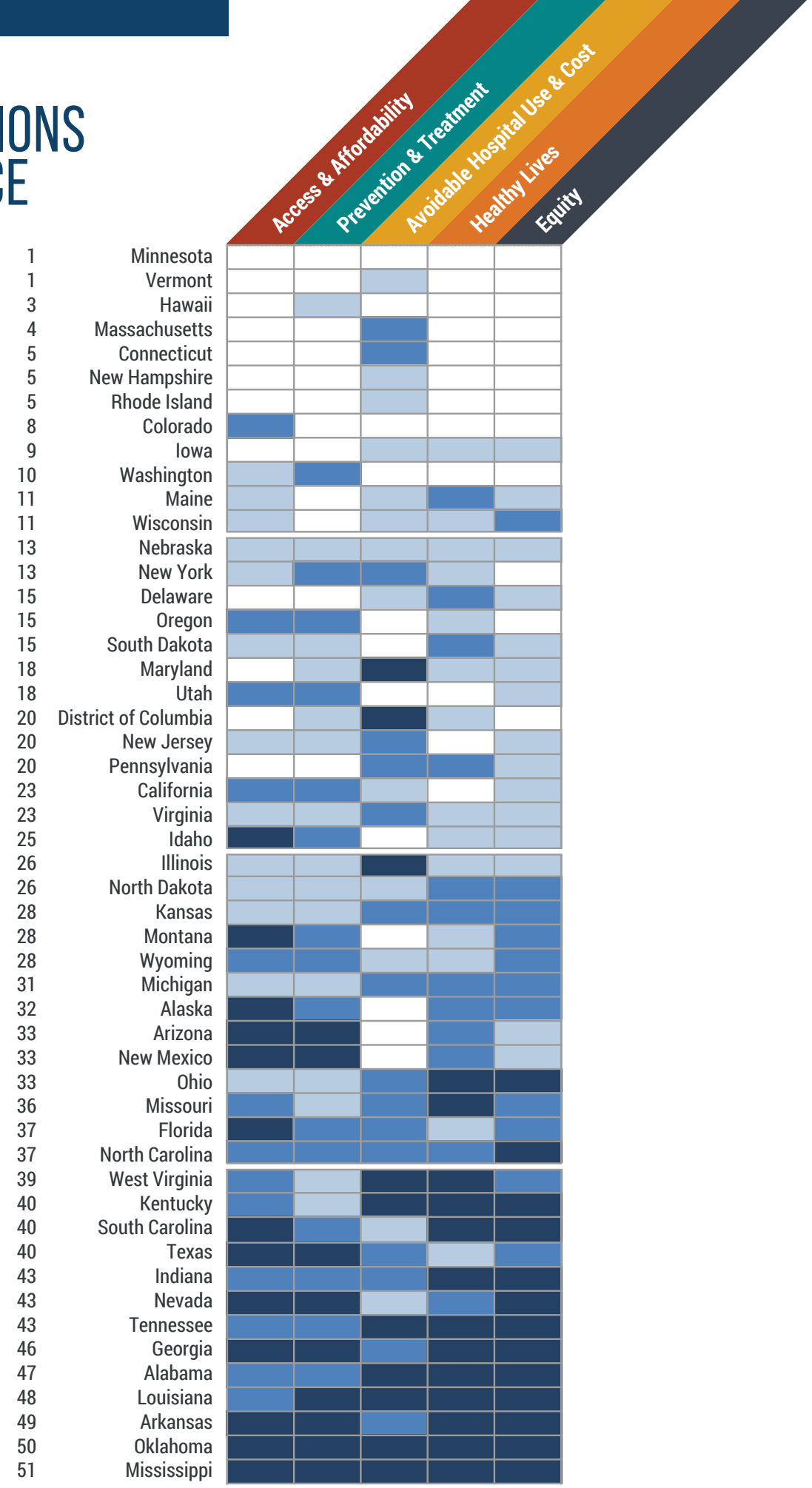
21 STATES

- There are wide variations in performance, with up to an **eightfold difference** between top- and bottom-ranked states.
- National attention may be encouraging better quality of care in hospitals and home health care settings and to more appropriate medication use in nursing homes and doctor's offices. However, declining rates of preventive care in several states signal the need for **greater attention to prevention**.
- **Reductions in hospital readmissions accelerated in 2012**, when the federal government began financially penalizing hospitals with high rates of readmissions. Rates of potentially preventable admissions to the hospital continued to fall in several states.
- In recent years, health care spending growth moderated for Medicare beneficiaries across states, while **premiums for employer-sponsored health plans continued to rise**.

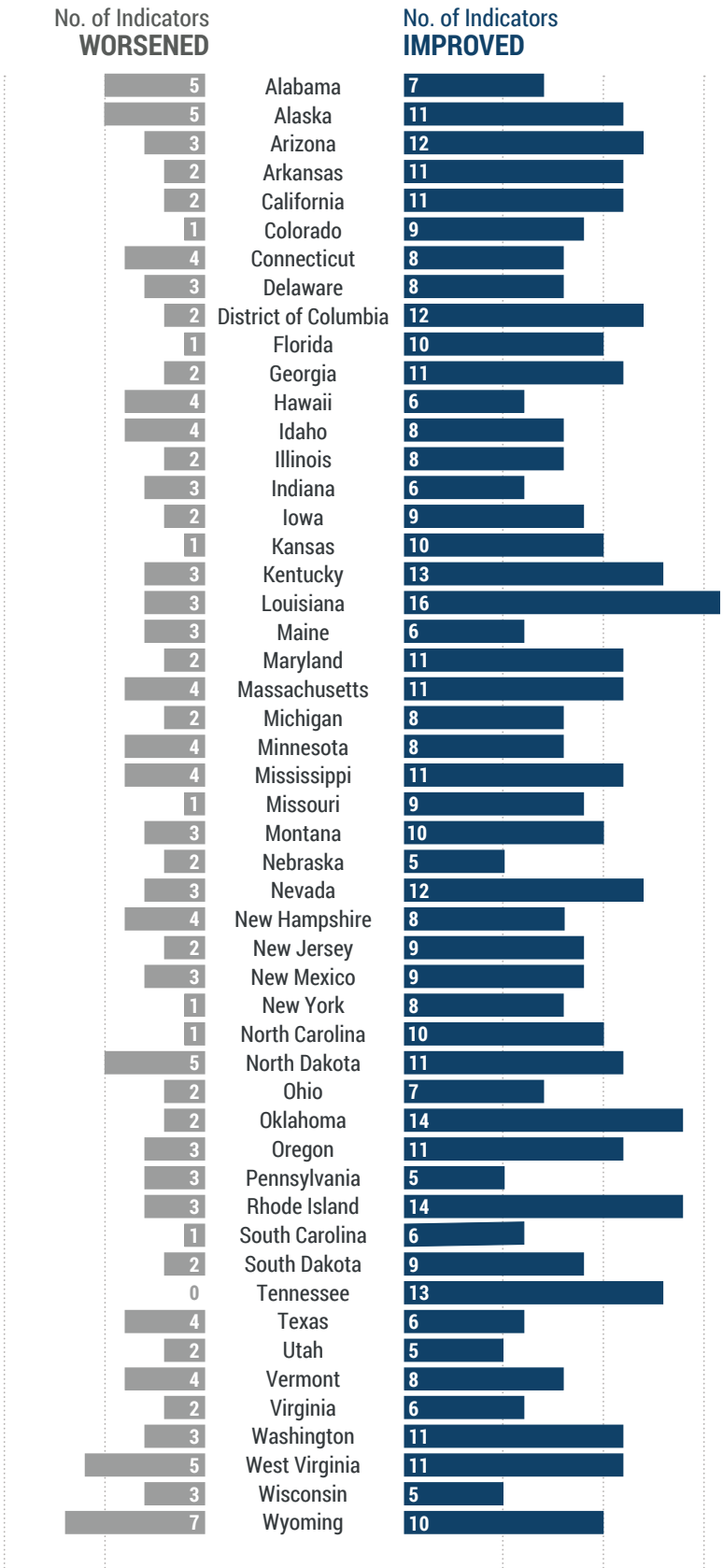
OVERALL RANKINGS ACROSS DIMENSIONS OF PERFORMANCE

Overall performance, 2015

- Top quartile
- Second quartile
- Third quartile
- Bottom quartile



NUMBER OF INDICATORS IMPROVED OR WORSENED BY STATE



Notes: Based on trends for 36 of 42 total indicators; trend data are not available for all indicators. Ambulatory care–sensitive conditions among Medicare beneficiaries from two age groups are considered a single indicator in tallies of improvement. Improvement or worsening refers to a change between the baseline and current time periods of at least 0.5 standard deviations larger than the difference in rates across all states over the two years being compared.

ABOUT THE SCORECARD SERIES

This 2015 edition of the Scorecard on State Health System Performance is the fourth in an ongoing series. Previous state scorecards were published in 2007, 2009, and 2014. The 2014 scorecard assessed changes from 2007 to 2012, which included the 2007–2009 recession but stopped short of major coverage expansions under the Affordable Care Act (ACA).

The 2015 edition measures changes in performance during 2013 and 2014 to assess the effects of the ACA's 2014 health insurance expansions, as well as early effects of health care delivery and payment reforms like accountable care organizations and financial incentives to reduce hospital readmissions. The effects of the ACA are not yet fully reflected in the 2015 scorecard results. It may take many years to see the resulting changes.

Annual updates in this series will document the trajectory of states' performance as changes shaped by public policy and the private market continue to unfold.

See Methods, page 19, for a complete description of scorecard methods and indicators. See appendices for state-specific rates for each indicator. Also see a companion brief, *The Changing Landscape of Health Care Coverage and Access: Comparing States' Progress in the ACA's First Year*.

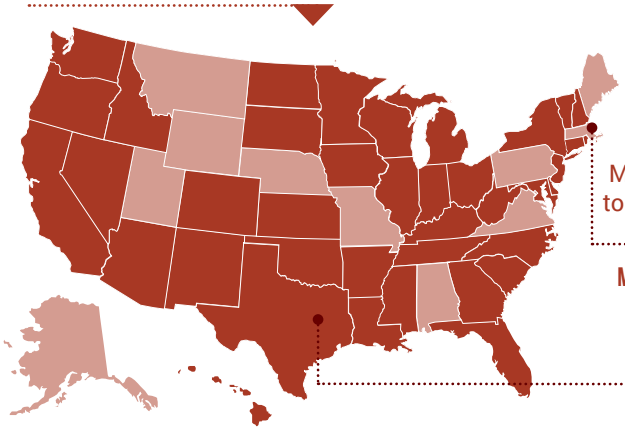
ACCESS AND AFFORDABILITY

Being able to get—and afford—health care when you need it are fundamental elements of a well-functioning health care system. One key measure of access to care is rates of insurance: do people have health insurance coverage that makes it possible for them to seek medical care when they are sick and get the preventive services they need to stay healthy? Health insurance also protects individuals and their families from burdensome costs in the case of an accident or illness. In 2014, the Affordable Care Act expanded access for many millions of Americans by creating health insurance marketplaces that offer coverage—with subsidies for those eligible—and providing federal funding to states to expand Medicaid eligibility for low-income residents.

THE GREATEST IMPROVEMENT:

Between 2013 and 2014, the uninsured rates for adults ages 19–64 fell by 3 percentage points or more in

39 STATES



Across the country, the uninsured rates among working-age adults ranged from 5% in Massachusetts to 26% in Texas.

5% MASSACHUSETTS

26% TEXAS

California, Florida, Montana, Oklahoma, Oregon, and Rhode Island

IMPROVED ON THE GREATEST NUMBER OF INDICATORS **4 OF 6**

KEY FINDINGS

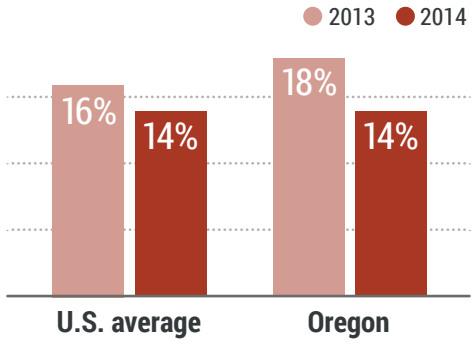
- The number of uninsured children fell by 2 percentage points or more in **16 states**.

Children ages 0–18 who were uninsured across all states

2013	2014
8%	6%

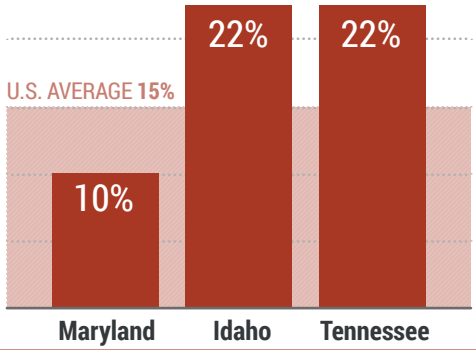
- The number of adults who said they went without care because of costs fell by 2 percentage points or more in **21 states**. In Oregon, the rate fell the most—from 18 percent to 14 percent of adults.

Adults who went without care because of cost in the past year



- The percentage of adults under age 65 who had high out-of-pocket spending relative to their income ranged from **10 percent** in Maryland to **22 percent** in Idaho and Tennessee.

Individuals with high out-of-pocket medical spending,[a] 2013–2014



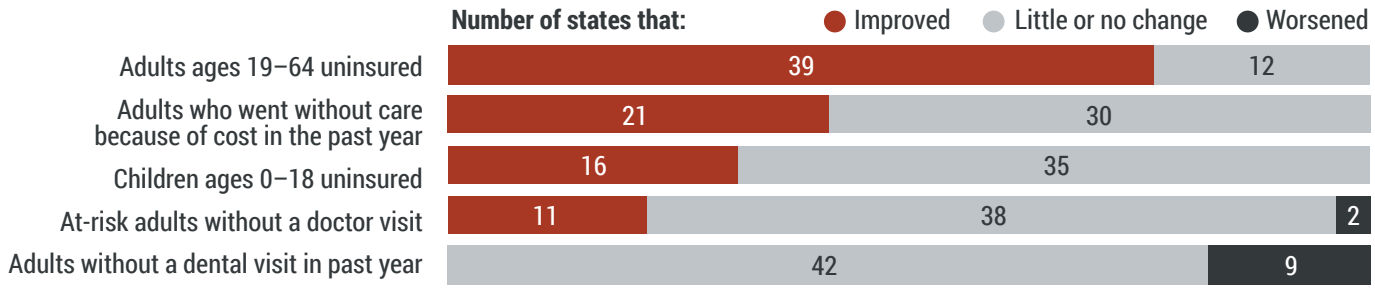
[a] Defined as out-of-pocket medical expenses equaling 10 percent or more of annual household income, or 5 percent or more of income if low income (below 200% of the federal poverty level). To ensure adequate sample size, state-level estimates are an average of rates found in 2013 and 2014.

- Ten states—Alaska, Florida, Georgia, Louisiana, Mississippi, Nevada, New Mexico, Oklahoma, South Carolina, and Texas—had rates of uninsured adults in 2014 that were **20 percent or higher**. Of these, only Nevada and New Mexico expanded their Medicaid programs as of January 2014 (Alaska did in 2015).

2015 RANKING

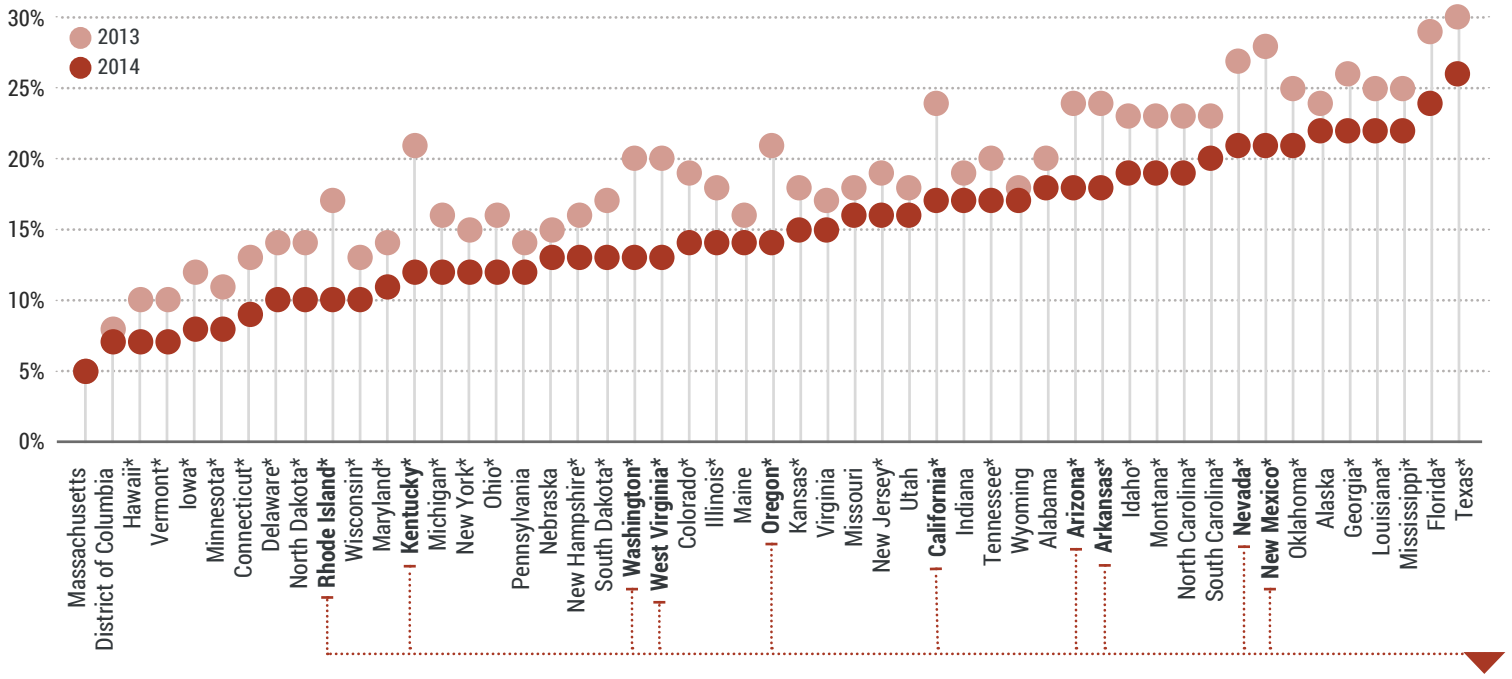
1	Massachusetts
2	Vermont
3	Minnesota
4	Rhode Island
5	Connecticut
5	Maryland
7	District of Columbia
7	Iowa
9	Delaware
9	New Hampshire
11	Hawaii
12	Pennsylvania
13	Wisconsin
14	New York
15	Michigan
16	Maine
16	Ohio
16	Washington
19	Illinois
19	Virginia
21	New Jersey
22	South Dakota
23	Kansas
23	Nebraska
25	North Dakota
26	Colorado
26	West Virginia
28	Kentucky
28	Oregon
30	California
30	North Carolina
32	Alabama
33	Missouri
34	Indiana
34	Tennessee
36	Utah
36	Wyoming
38	Louisiana
39	Montana
40	Florida
41	Georgia
41	South Carolina
43	Arizona
44	Alaska
44	Arkansas
46	Idaho
46	New Mexico
48	Mississippi
48	Oklahoma
50	Nevada
51	Texas

CHANGE IN STATE HEALTH SYSTEM PERFORMANCE BY INDICATOR



Notes: This exhibit measures indicator change over the two most recent years of data available. See Appendix A1 for baseline and current data years for each indicator. Trend data are not available for all indicators. Improvement or worsening refers to a change between the baseline and current time periods of at least 0.5 standard deviations. The "little or no change" category includes the number of states with changes of less than 0.5 standard deviations, as well as states with no change or without sufficient data to assess change over time. Adult uninsured rates declined in all states and D.C. from 2013 to 2014 except for Massachusetts where the rate did not change; in the remaining 11 states, the decline was less than 0.5 standard deviations. High out-of-pocket spending indicator is not included because data are not comparable to prior years.

Ten states had declines of 6 to 9 percentage points in uninsured rates for working-age adults



These states all expanded their Medicaid programs by January 1, 2014.

Note: States are arranged in rank order based on their current data year (2014) value.
* Denotes states with at least -.5 standard deviation change (3 percentage points) between 2013 and 2014.
Data: 2013 and 2014 American Community Survey (ACS), Public Use Microdata Sample (PUMS).

FUTURE IMPLICATIONS

If all states performed as well as the top-performing state:

More than
24 million
additional adults and children would gain health insurance.

Nearly
12 million
fewer people would be burdened by high medical spending relative to income.

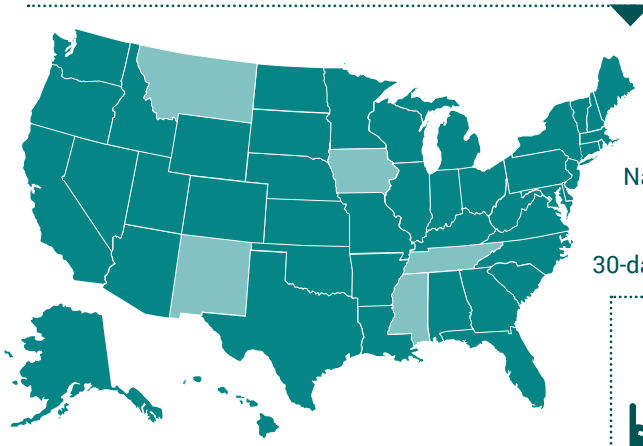
Nearly
17 million
fewer adults would forgo needed care because of cost.

PREVENTION AND TREATMENT

Patients and their families have the right to expect care that is effective, coordinated among their different physicians and other providers, and respectful of their values and preferences. The Prevention and Treatment dimension assesses these factors by measuring the quality of care provided in hospitals, nursing homes, doctors' offices, and patients' homes.

THE GREATEST IMPROVEMENT: IN 45 STATES

patients who were hospitalized for heart attack, heart failure, or pneumonia were substantially less likely to die within 30 days of their hospital stay, compared with the previous three-year measurement period.



Nationally, the rate (known as hospital 30-day mortality) dropped by

3.8%

—an improvement that has saved many lives.

Louisiana

IMPROVED ON THE GREATEST NUMBER OF INDICATORS

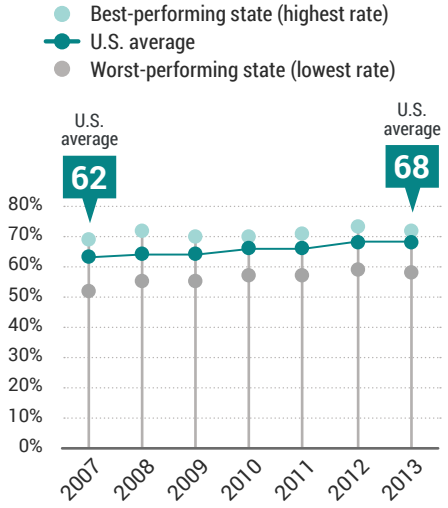
8 OF **16**

KEY FINDINGS

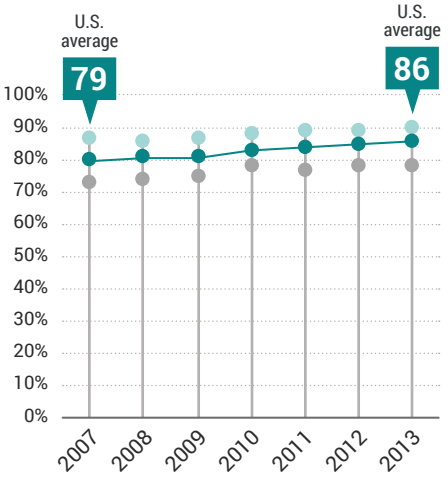
Patients' hospital experiences have improved steadily in recent years

- Although changes in hospital quality may be modest from year to year, all states improved between 2007 and 2013 on two indicators of patient-reported care experiences in the hospital. These measures have received heightened attention through public reporting of hospital performance and, for measures of patient education, as part of national efforts to reduce hospital readmissions.

Percent of 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



Percent of hospitalized patients given information about what to do during their recovery at home

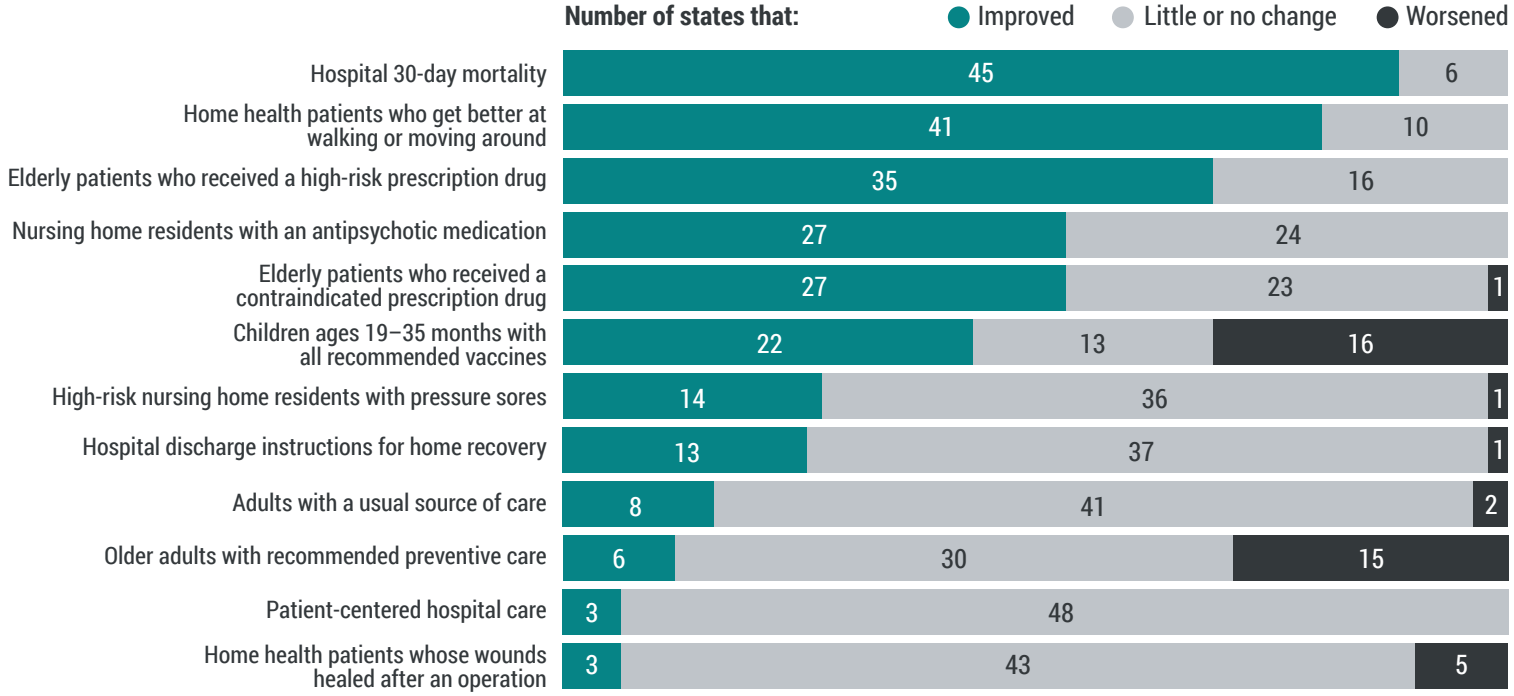


Data: CMS Hospital Compare.

2015 RANKING

1	Maine
2	Massachusetts
3	Rhode Island
4	New Hampshire
4	Vermont
4	Wisconsin
7	Pennsylvania
8	Minnesota
9	Colorado
9	Connecticut
9	Delaware
9	Iowa
13	Nebraska
14	Maryland
14	South Dakota
16	Kansas
16	Michigan
18	Hawaii
19	North Dakota
20	Kentucky
21	District of Columbia
21	Illinois
21	Missouri
21	New Jersey
21	Ohio
21	Virginia
21	West Virginia
28	New York
28	South Carolina
28	Utah
31	Idaho
31	Montana
31	North Carolina
34	Indiana
34	Wyoming
36	Oregon
37	Alabama
37	Alaska
37	California
37	Florida
37	Tennessee
37	Washington
43	Louisiana
44	Oklahoma
45	Georgia
45	New Mexico
47	Arizona
47	Arkansas
47	Mississippi
50	Texas
51	Nevada

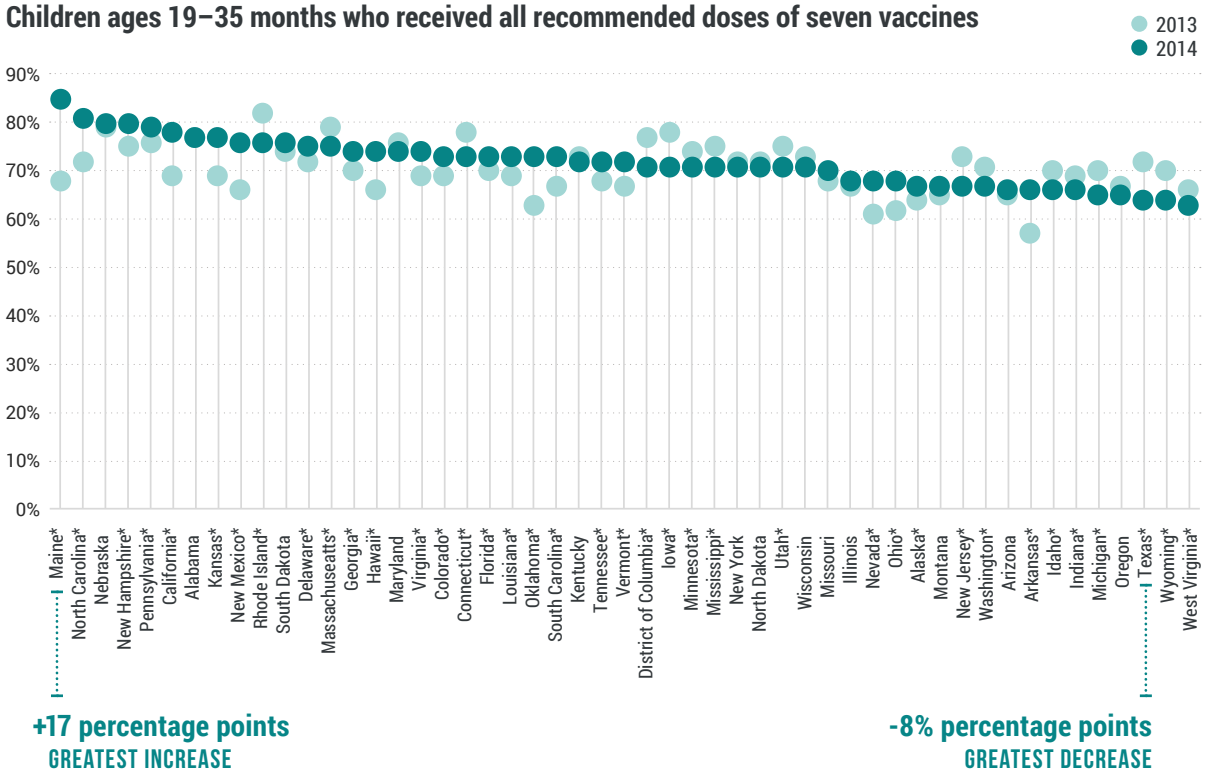
CHANGE IN STATE HEALTH SYSTEM PERFORMANCE BY INDICATOR



Notes: This exhibit measures indicator change over the two most recent years of data available. See Appendix A1 for baseline and current data years for each indicator. Trend data are not available for all indicators. Improvement or worsening refers to a change between the baseline and current time periods of at least 0.5 standard deviations. The "little or no change" category includes the number of states with changes of less than 0.5 standard deviations, as well as states with no change or without sufficient data to assess change over time.

VACCINATIONS IN CHILDREN

- High rates of vaccinations protect the population from communicable diseases. Among children ages 19 to 35 months, the percentage receiving all seven recommended vaccines on time increased by 3 points or more in **22 states** from 2013 to 2014 while decreasing by a similar magnitude in 15 states and D.C. Nationally, more than **1 of 4 young children** were not up-to-date on all recommended vaccines in 2014, a rate little-changed from 2013.



Notes: States are arranged in rank order based on their current data year (2014) value. *Denotes states with at least -.5 standard deviation change (3 percentage points) between 2013 and 2014. Recommended vaccines are the 4:3:1:3:3:1:4 series, which includes ≥4 doses of DTaP/DT/DTP, ≥3 doses of poliovirus vaccine, ≥1 doses of measles-containing vaccine, full series of Hib (3 or 4 doses, depending on product type), ≥3 doses of HepB, ≥1 dose of varicella vaccine, and ≥4 doses of PCV. Data: 2013 and 2014 National Immunization Surveys.

OLDER ADULTS

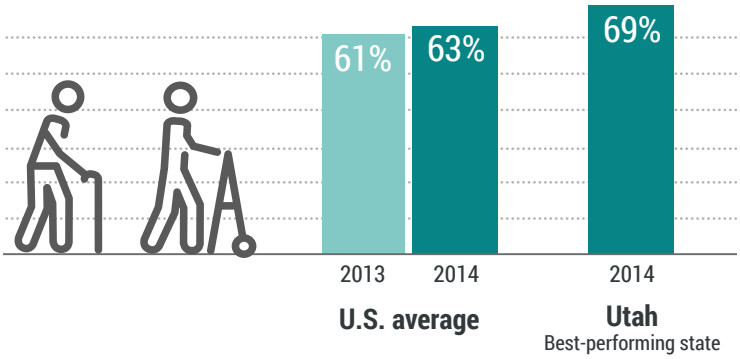
- Among adults 50 and older, the share who reported receiving all appropriate preventive care services—like cancer screenings and flu shots—declined by 2 percentage points or more in **15 states** between 2012 and 2014.

Older adults who received recommended preventive care in Connecticut, 2014

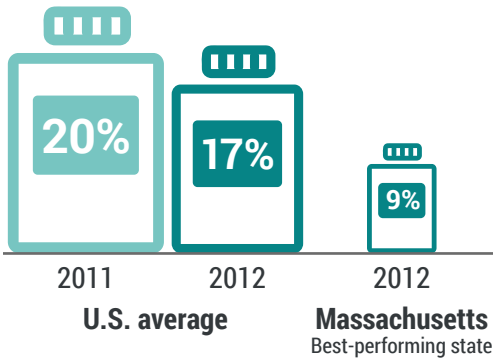
Even in Connecticut, the best-performing state, **less than half** of older adults received all the recommended services in the appropriate time frame.[1] Although the ACA requires most insurance plans to cover certain preventive services with no cost-wsharing, other factors—like patient awareness and physicians' recommendations—can be factors in whether adults receive services.[2]

- When adults receive home health care, it is critical that they receive help in regaining functional abilities, like walking.[3] In 41 states, there were gains of at least 2 percentage points between 2013 and 2014 in the share of home health patients who got better at walking or moving around.

Home health patients who got better at walking or moving around



Elderly patients who received a high-risk prescription drug



- In **35 states**, there was a reduction of at least 3 percentage points between 2011 and 2012 in the share of elderly Medicare beneficiaries who received a high-risk prescription medication that should be avoided for elderly people. This improvement may reflect actions taken by the Food and Drug Administration that led to a high-risk drug being removed from the market, as well as providers' increased awareness of drug safety concerns and the increased use of electronic prescribing tools that alert providers when unsafe drugs are ordered.[4]

- In **27 states**, there was a promising reduction of at least 2 percentage points in the use of antipsychotic drugs in nursing homes, where they are sometimes inappropriately prescribed to chemically restrain residents with cognitive impairments or difficult behaviors.[5]

WHAT IS AN UNSAFE DRUG?

Certain medications that are commonly taken by younger patients without incident can put those age 65 and older at increased risk for experiencing severe side effects and complications such as confusion, sedation, immobility, falls, and fractures. The National Committee for Quality Assurance has identified more than 100 high-risk medications that should be avoided in the elderly, ranging from antianxiety drugs and antihistamines to narcotics and muscle relaxants. Safer alternatives may be available, but these potentially harmful medications are still frequently prescribed to the elderly.

FUTURE IMPLICATIONS

If all states performed as well as the top-performing state:

More than

8 million

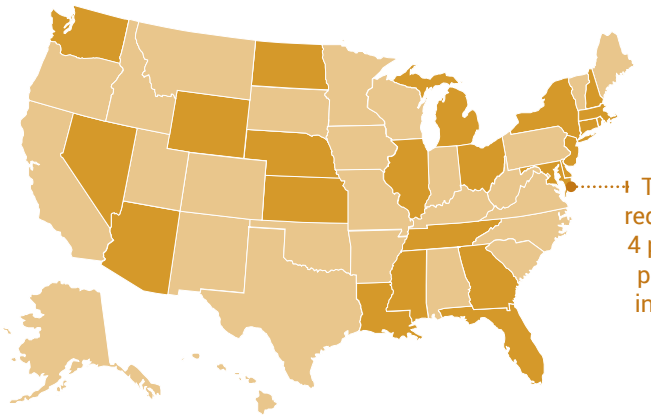
additional older adults would receive key recommended preventive care services such as cancer screenings and flu shots.

AVOIDABLE HOSPITAL USE AND COSTS OF CARE

Inefficient or wasteful health care, along with high costs, are among the chief problems burdening our health care system. To measure inefficiency, this scorecard dimension focuses on rates of potentially avoidable and expensive hospital care. It also looks at two cost measures: the average cost of an individual employer-based health insurance premium and average annual spending per Medicare beneficiary. Many studies have found that higher spending is not systemically associated with better outcomes. The Affordable Care Act encourages changes to the way we deliver and pay for care and encourages new models, like accountable care organizations and bundled payment arrangements.

THE GREATEST IMPROVEMENT: IN 23 STATES

there were reductions of 2 percentage points or more between 2010 and 2012 in rates of hospital readmissions among Medicare beneficiaries receiving postacute care in nursing homes.



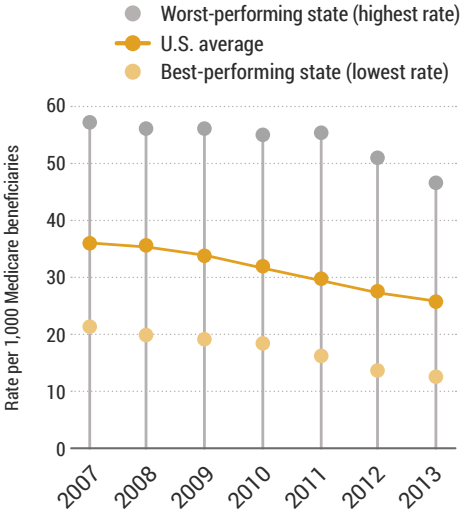
The biggest reduction—of 4 percentage points—was in Maryland.

Louisiana, Massachusetts, and Tennesee IMPROVED ON THE GREATEST NUMBER OF INDICATORS **5** OF **9**

KEY FINDINGS

Hospitalizations for ambulatory –care sensitive conditions

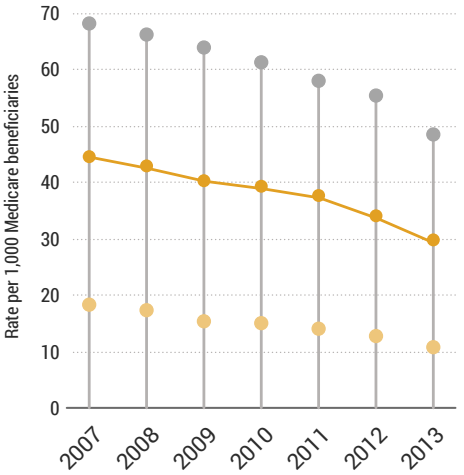
- Among Medicare beneficiaries ages 65 to 74, hospital admissions for ambulatory care–sensitive conditions—that is, conditions that can be managed outside the hospital, like hypertension—fell **2 percent** from 2007 to 2008 and then an average **6 percent** annually between 2008 and 2013.



- The worst-performing states improved the most for this indicator in 2013. The rate fell **16 percent** in Oklahoma and **14 percent** in West Virginia; rates varied about threefold across states.

30-day hospital readmissions

- The hospital readmission rate for Medicare beneficiaries fell by **10.5 percent** in 2012 and **10.8 percent** in 2013, after declining an average **3.8 percent** annually between 2007 and 2011. In October 2012, the Medicare program began financially penalizing hospitals with high rates of readmissions, motivating hospitals to reduce readmissions to avoid these penalties.[6]



Data: Ambulatory-care sensitive hospitalizations & 30-day readmissions: Medicare claims via Feb. 2015 CMS Geographic Variation Public Use File.

2015 RANKING

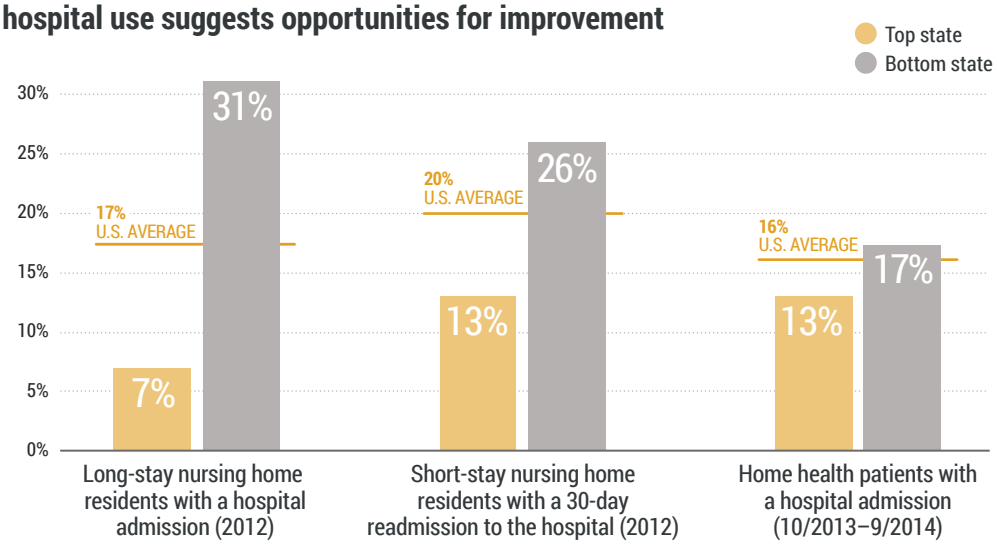
1	Hawaii
2	Oregon
3	Idaho
4	Washington
5	Colorado
5	Montana
5	Utah
8	Minnesota
8	South Dakota
10	Alaska
10	Arizona
10	New Mexico
13	Vermont
14	California
14	Nebraska
14	Wisconsin
14	Wyoming
18	Iowa
18	Nevada
18	New Hampshire
21	Maine
22	North Dakota
22	Rhode Island
24	Delaware
24	South Carolina
26	New York
26	North Carolina
28	Connecticut
28	Georgia
28	Virginia
31	Kansas
31	Massachusetts
33	Florida
33	Pennsylvania
33	Texas
36	Indiana
36	New Jersey
38	Arkansas
38	Michigan
38	Missouri
38	Ohio
42	Maryland
42	Tennessee
44	Illinois
45	District of Columbia
46	Alabama
46	Oklahoma
48	West Virginia
49	Kentucky
50	Louisiana
51	Mississippi

AVOIDABLE HOSPITAL USE

Long-term care for elderly Americans is often funded by state Medicaid programs, while their hospital stays and postacute care are paid for by Medicare. Postacute care in either patients' homes or institutions, like skilled nursing facilities, is the greatest source of Medicare spending variation.[7] Hospital admissions or readmissions from these settings can often be avoided with good transitional care and proactive patient monitoring and intervention.[8]

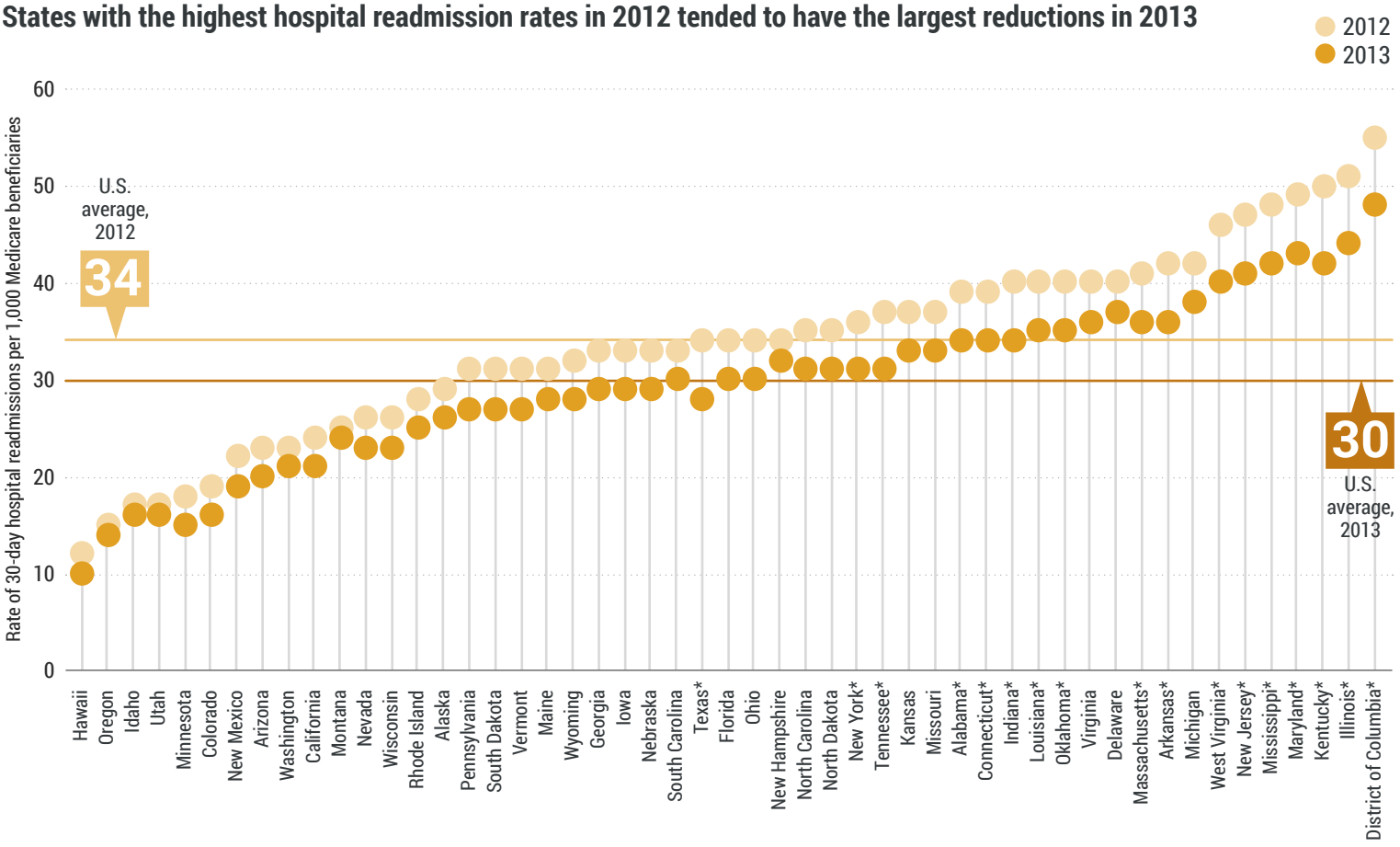
- There was considerable variation among states in hospital admission and readmission rates among nursing home residents and home health patients.

Wide state variation on indicators of potentially avoidable hospital use suggests opportunities for improvement



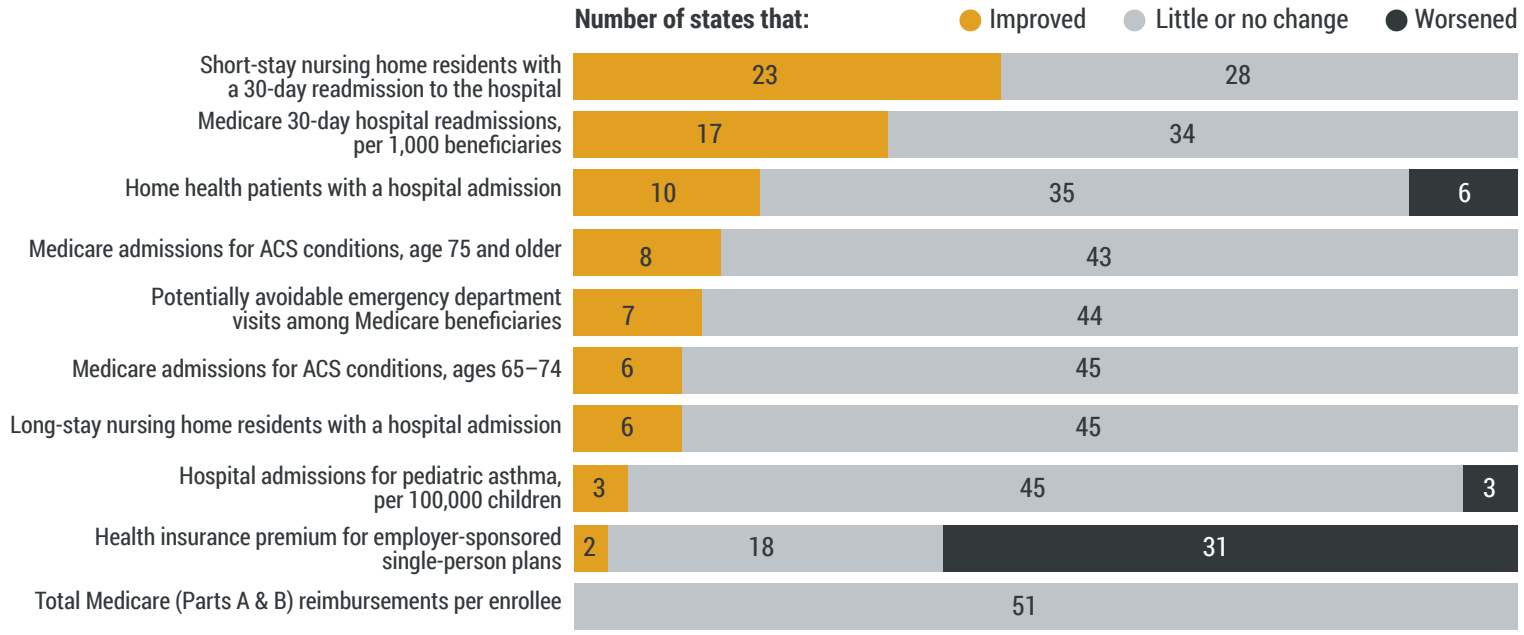
Data: Nursing home admissions/readmissions: V. Mor, Brown University, analysis of 2012 Medicare enrollment data, Medicare Provider and Analysis Review (MedPAR), and Minimum Data Set (MDS) data; Home health admissions: authors' analysis of CMS Medicare claims data from CMS Home Health Compare.

States with the highest hospital readmission rates in 2012 tended to have the largest reductions in 2013



Notes: States are arranged in order (lowest to highest) of their readmission rate in 2012.
*Denotes states with at least -.5 standard deviation change (5 readmissions per 1,000) between 2012 and 2013.
Data: Medicare claims via Feb. 2015 CMS Geographic Variation Public Use File.

CHANGE IN STATE HEALTH SYSTEM PERFORMANCE BY INDICATOR



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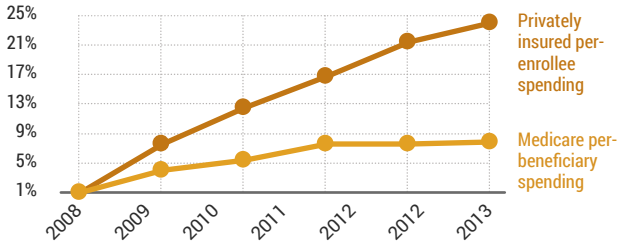
COST OF CARE

- National per-beneficiary Medicare spending grew by **7.8 percent** between 2008 and 2013, representing average annual growth of **1.9 percent**. In contrast, among people with private health insurance, spending grew more rapidly during the same period: by 23.9 percent, or average annual growth of 5.5 percent.[9]
- Per-person Medicare spending growth between 2008 and 2013 was 8 percent or less in **31 states** and higher than 15 percent in only North Dakota and South Dakota.
- Average health insurance premiums for employer-sponsored individual plans increased in **every state** between 2008 and 2013, with growth ranging from 16 percent in Arkansas to 39 percent in South Dakota, North Dakota, Ohio, and Alaska.

Trend in national health expenditures

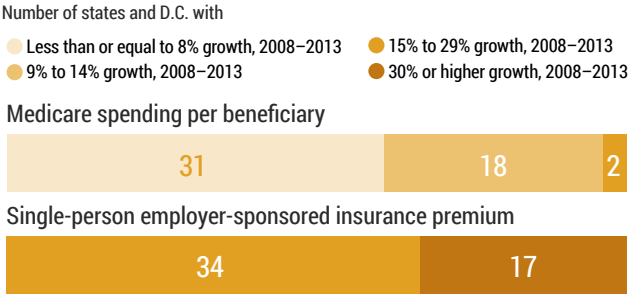
Cumulative percent change from baseline year



Data: CMS Office of the Actuary, National Health Expenditure Historical Tables, 2013; Table 21.

State change: Medicare spending and employer-sponsored health insurance premiums

Number of states and D.C. with



Notes: State change reflects 2008 to 2013; 2014 data on ESI premiums used in Scorecard rankings are excluded for comparability to Medicare data. Medicare spending estimates exclude prescription drug costs and reflect only the age 65+ Medicare fee-for-service population. For measuring trend, Medicare spending and insurance premiums are unadjusted.
Data: Medicare spending: Medicare claims via Feb. 2015 CMS Geographic Variation Public Use File; Insurance premiums: 2008–2013 Medical Expenditure Panel Survey.

FUTURE IMPLICATIONS

If all states performed as well as the top-performing state:

Medicare beneficiaries would have over

1.4 million

fewer emergency room visits for care that could be provided outside the emergency room.

Children between 2 and 17 would endure about

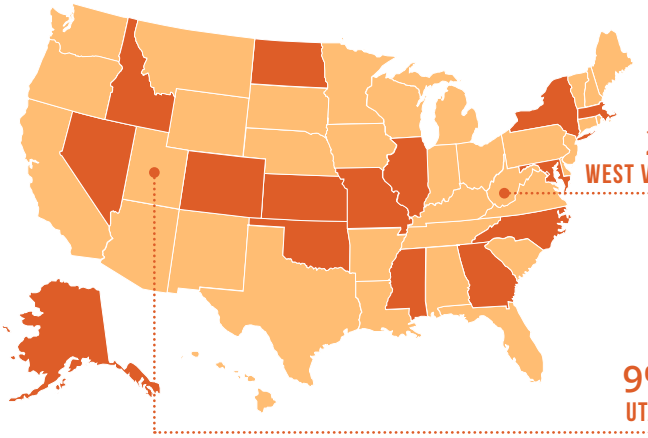
85,000

fewer asthma-related hospital admissions.

HEALTHY LIVES

Having insurance and getting care are not the only factors that contribute to a healthy population. This dimension includes measures that affect people's ability to lead long and healthy lives—like rates of smoking, premature death, and obesity.

THE GREATEST IMPROVEMENT: **Reducing the number of adults who smoke.**



15 STATES + D.C.

SAW THEIR SMOKING RATES DROP BY 2 TO 3 PERCENTAGE POINTS BETWEEN 2013 AND 2014.

Across the country, the smoking rate among adults ranged from 9% in Utah to 26% in West Virginia.

D.C.

IMPROVED ON THE GREATEST NUMBER OF INDICATORS **5** OF **11**

KEY FINDINGS

- Deaths from breast cancer fell in **13 states**, while deaths from colorectal cancer dropped in **10 states**, between 2012 and 2013.

Breast cancer deaths per 100,000 female population

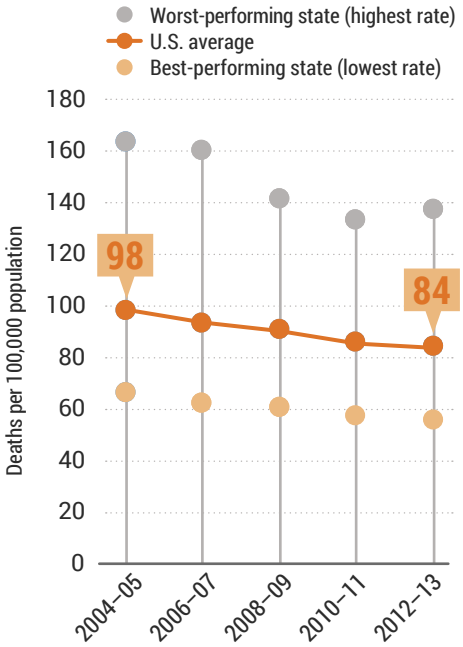
2012	2013
21.4	20.8

Colorectal cancer deaths per 100,000 population

2012	2013
14.9	14.6

Mortality Amenable to Health Care

- This measure refers to premature deaths (from certain diseases like diabetes or hypertension) that could have been prevented with effective and timely health care. Although there was little change in this measure during the time period measured by the 2015 scorecard, looking at a longer trend shows that the rate of these premature deaths fell 14 percent during the past decade—from 98 deaths per 100,000 people in 2004–05 to 84 in 2012–13.



Note: Age-standardized deaths before age 75 from select causes.

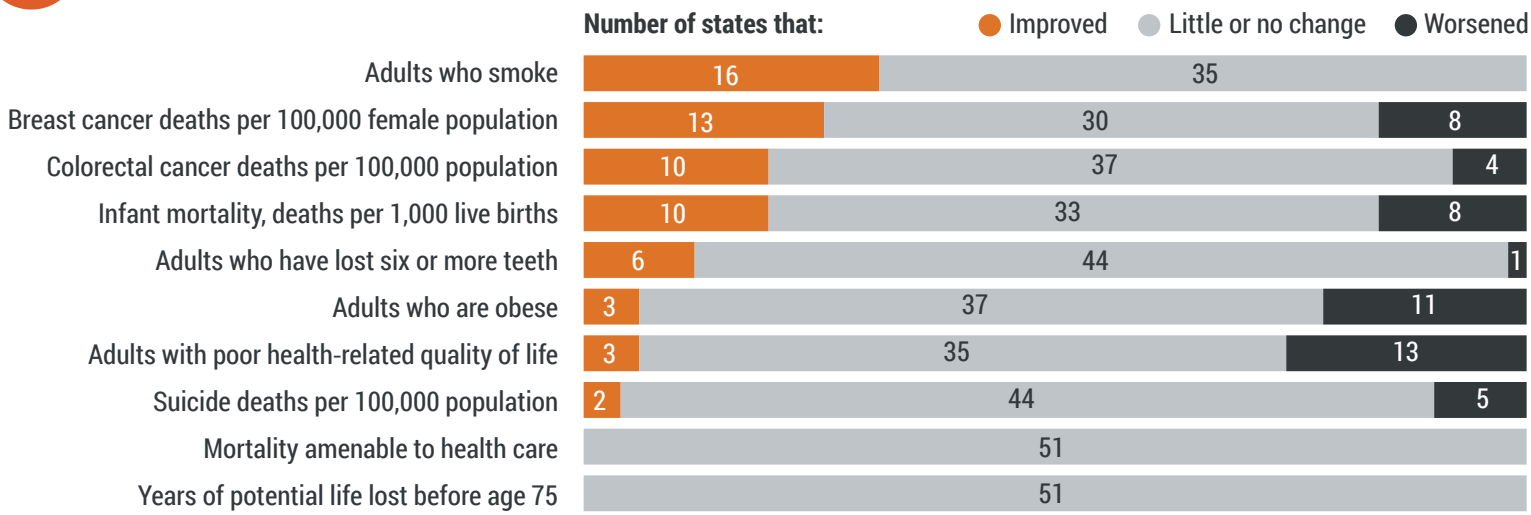
Data: 2004–2013 National Vital Statistics System (NVSS) Mortality All-County Micro Data Files.

– The largest reductions occurred in states that had the highest rates to start with—for example, since 2004–05, premature deaths dropped **19 percent** in Nevada, from 114 to 92 per 100,000 people.

2015 RANKING

1	Minnesota
2	Colorado
2	Connecticut
4	Massachusetts
4	Utah
6	Hawaii
7	California
7	New Hampshire
9	Vermont
10	Rhode Island
10	Washington
12	New Jersey
13	New York
14	Nebraska
14	Oregon
16	Iowa
17	Idaho
18	Wisconsin
18	Wyoming
20	Maryland
20	Virginia
22	District of Columbia
22	Florida
22	Illinois
22	Montana
22	Texas
27	Kansas
27	North Dakota
29	Arizona
29	Maine
29	South Dakota
32	Alaska
33	Delaware
34	New Mexico
34	Pennsylvania
36	Nevada
36	North Carolina
38	Michigan
39	Georgia
40	Missouri
41	Ohio
42	Indiana
43	South Carolina
44	Kentucky
44	Tennessee
46	Alabama
46	Oklahoma
48	Louisiana
49	Arkansas
50	West Virginia
51	Mississippi

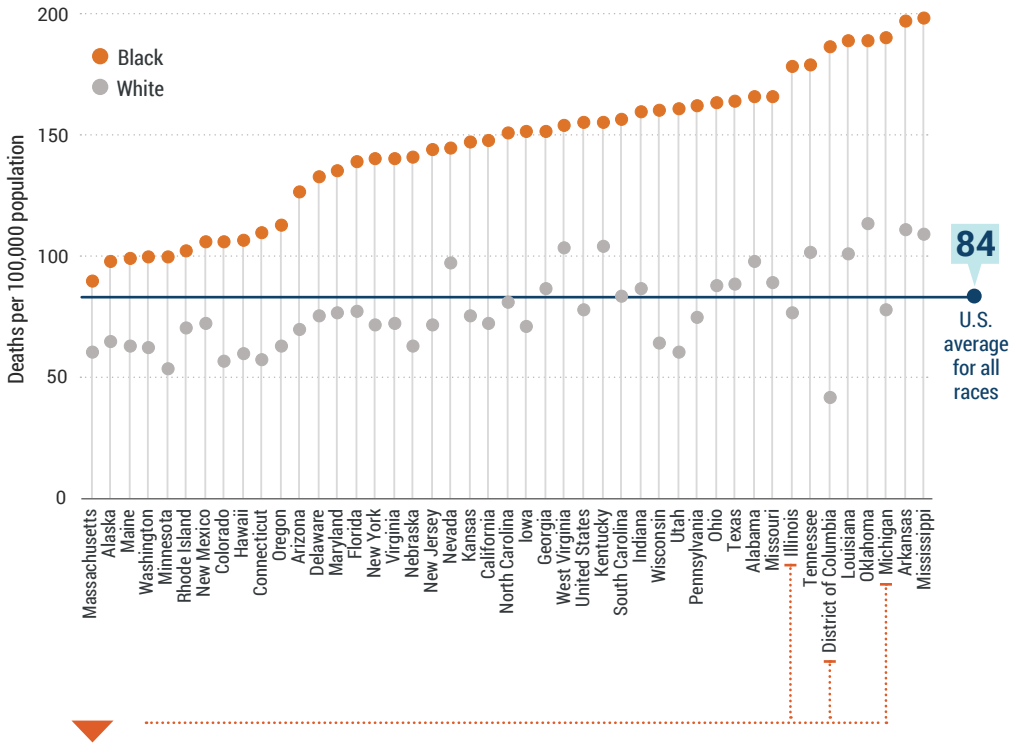
CHANGE IN STATE HEALTH SYSTEM PERFORMANCE BY INDICATOR



Notes: This exhibit measures indicator change over the two most recent years of data available. See Appendix A1 for baseline and current data years for each indicator. Trend data are not available for all indicators. Improvement or worsening refers to a change between the baseline and current time periods of at least 0.5 standard deviations. The "little or no change" category includes the number of states with changes of less than 0.5 standard deviations, as well as states with no change or without sufficient data to assess change over time.

DISPARITY FINDING

African Americans are more likely than whites to die early from a treatable condition in every state (where data are available).



The greatest disparities in rates between white and black deaths were in D.C. (186 vs. 41 per 100,000), Illinois (178 vs. 76), and Michigan (190 vs. 77).

Notes: Data for black race are not available for Idaho, Montana, New Hampshire, North Dakota, South Dakota, Vermont, or Wyoming. States are arranged in rank order based on black mortality.

Data: 2012 and 2013 National Vital Statistics System (NVSS) Mortality All-County Micro Data Files.

FUTURE IMPLICATIONS

If all states performed as well as the top-performing state:

There would be approximately

84,000

fewer premature deaths before age 75 for conditions that can be **detected early and effectively treated with good follow-up care.**

There would be nearly

8 million

fewer adults (ages 18 to 64) who would lose six or more teeth to decay, infection, or gum disease.

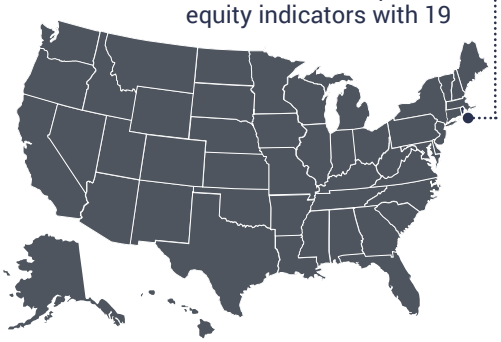
EQUITY

When health care is inequitable, there are disparities in access and availability of care (e.g., the number of people who have insurance or who visit a dentist regularly) and health status (e.g., the number of people who are obese or smokers) between various groups based on different factors, like their income level. Across the nation, health care equity remains an unfulfilled goal. However, the health insurance expansions of the Affordable Care Act offer the opportunity to close these gaps. The Equity dimension looks at two vulnerable populations—low-income people and those who belong to racial and ethnic minorities. States' performance is based on gaps in equity—that is, the difference between the state's vulnerable population and the U.S. average for any given indicator. Improvement is defined as a decline in the states' vulnerable group rate and a narrowing in the performance gap between the vulnerable group and the U.S. average.

KEY FINDINGS

- Every state improved on **at least five** equity indicators.

RHODE ISLAND had the most improved equity indicators with 19



- For most equity indicators, however, there were states for which **the gap widened**, meaning performance worsened for the most vulnerable group and the gap grew between that group and the U.S. average.

INCOME DISPARITIES

THE GREATEST IMPROVEMENT:

Widespread reductions in the percentage of low-income elderly adults who received a high-risk prescription medication

IN 37 STATES,

the percentage of low-income elderly adults receiving a high-risk prescription medication declined and the equity gap narrowed.

Rhode Island
IMPROVED ON THE GREATEST NUMBER OF INDICATORS **12** OF **15**

- For the equity gaps based on income, **more states improved** than worsened. At least half the states improved on six indicators: rates of nonelderly uninsured, elderly patients who received a high-risk prescription medication, three measures of avoidable hospital use among Medicare beneficiaries who also receive Medicaid, and nonelderly adults who have lost six or more teeth due to gum disease. The majority of states worsened on only one indicator: **rates of obesity among adults**.

RACIAL/ETHNIC DISPARITIES

THE GREATEST IMPROVEMENT:

Premature death rates among states' racial and ethnic minority populations declined in most states

IN 34 STATES,

death rates from conditions amenable to health care interventions declined and the equity gap narrowed.

Arizona, Illinois, North Carolina, New York, Oklahoma, California, and Florida
IMPROVED ON THE GREATEST NUMBER OF INDICATORS **8** OF **13**

- For the equity gaps based on race or ethnicity, **more states worsened than improved**. At least half the states improved on three indicators: rates of nonelderly uninsured, mortality amenable to health care, and infant mortality, but at least half worsened on six others.

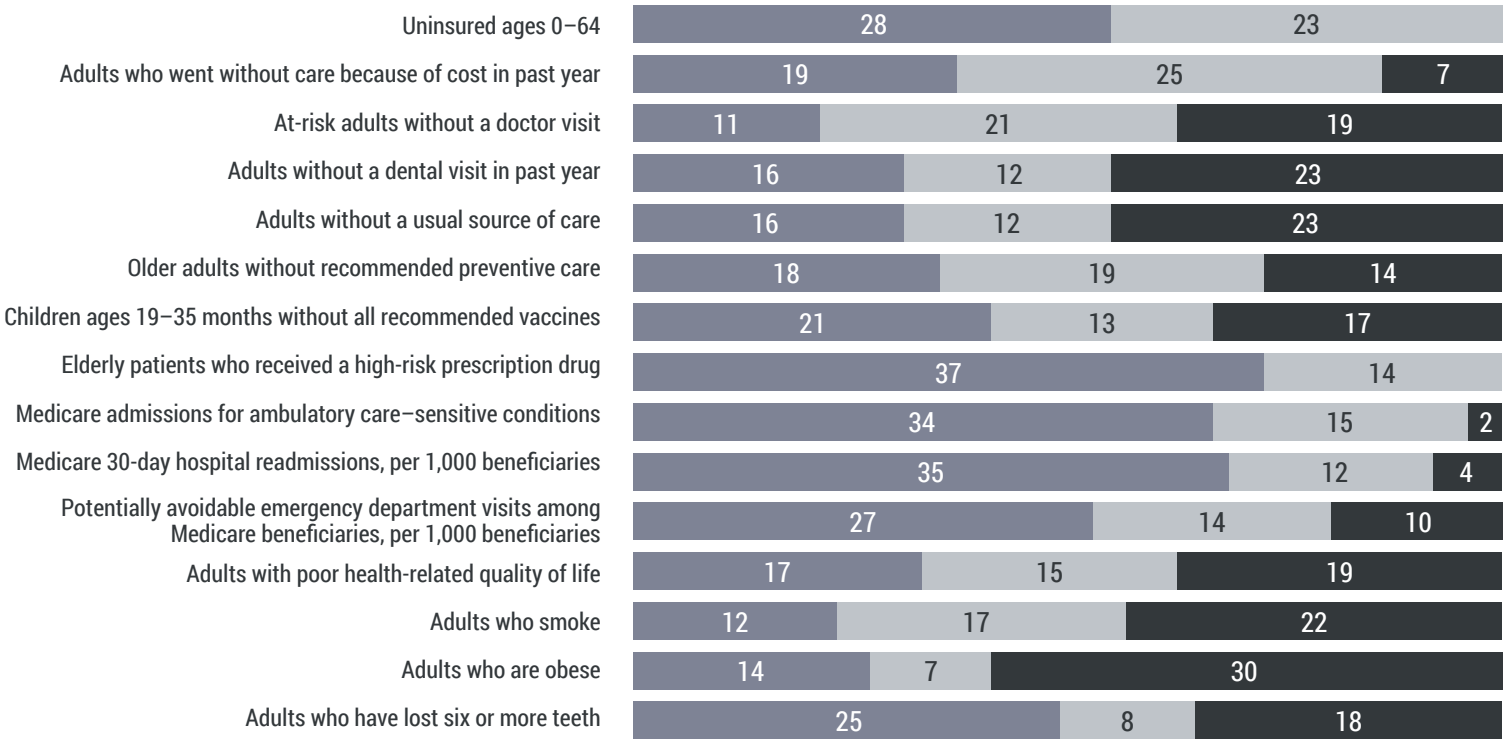
2015 RANKING

1	Hawaii
2	Massachusetts
3	Connecticut
3	Vermont
5	New Hampshire
5	New York
7	Rhode Island
8	Washington
9	District of Columbia
9	Minnesota
11	Colorado
11	Oregon
13	Maryland
14	Delaware
15	Iowa
15	Maine
17	New Jersey
17	South Dakota
19	Pennsylvania
20	Nebraska
20	New Mexico
22	California
22	Idaho
24	Arizona
24	Illinois
24	Utah
24	Virginia
28	Missouri
29	Alaska
29	Wisconsin
31	Florida
31	Michigan
31	Texas
31	West Virginia
35	Wyoming
36	Kansas
36	Montana
36	North Dakota
39	Nevada
39	Tennessee
41	Ohio
42	Alabama
43	North Carolina
44	Louisiana
45	Georgia
45	Kentucky
47	Indiana
48	South Carolina
49	Mississippi
49	Oklahoma
51	Arkansas

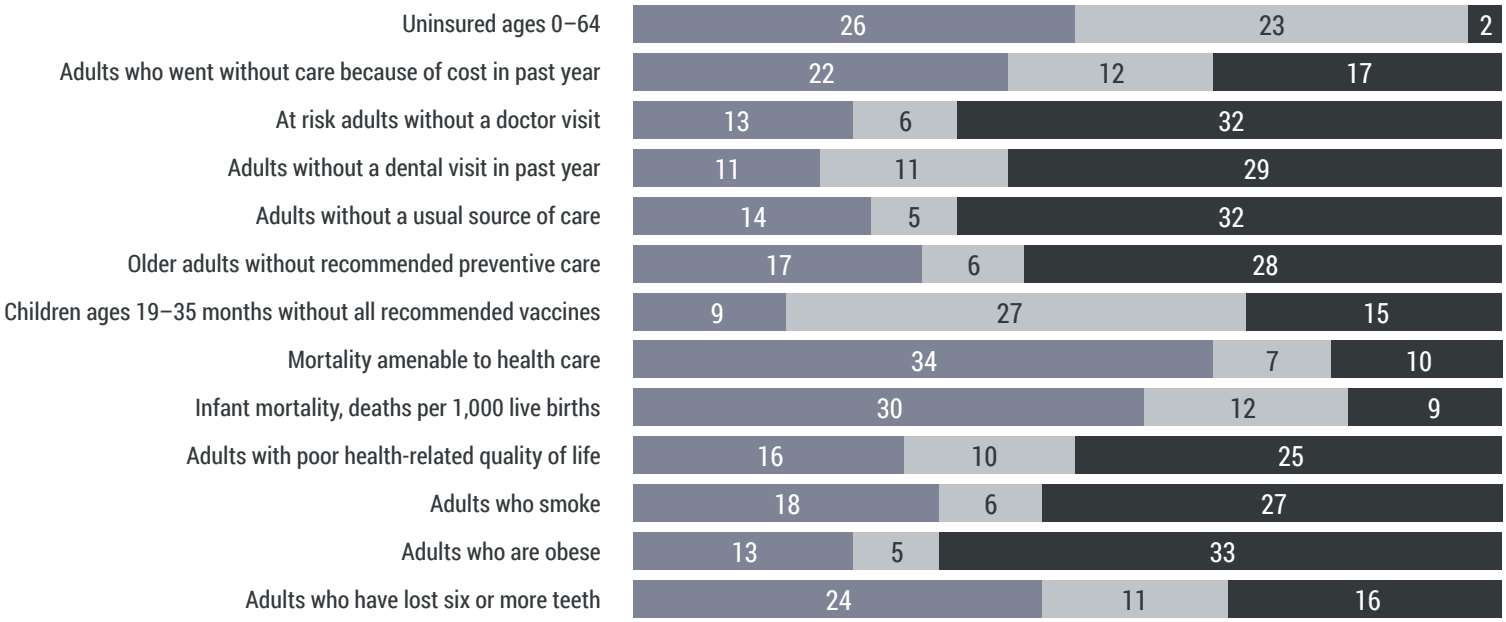
CHANGE IN STATE HEALTH SYSTEM PERFORMANCE BY INDICATOR

Income

Number of states where equity: Improved | No change | Worsened



Race/Ethnicity



Notes: This exhibit measures indicator change over the two most recent years of data available. See Appendix A1 for baseline and current data years for each indicator. Trend data are not available for all indicators. Improvement indicates that the equity gap between states' vulnerable population and the U.S. average narrowed and that the rate among the states' vulnerable population improved. Worsening indicates that the equity gap between states' vulnerable population and the U.S. average widened and that the rate among the states' vulnerable population got worse. The "no change" category includes the number of states where the vulnerable group rate remained the same or changed but without a narrowing or widening in the gap with the U.S. average rate. It also includes the number of states without sufficient data for the vulnerable population to assess change over time.

LOOKING TOWARD THE FUTURE

Gains reported by the scorecard likely reflect the influence of public policy—most noticeably, the role of the Affordable Care Act in expanding health insurance coverage—as well as public and private initiatives at the national, state, and community levels. States have many opportunities to widen these gains in various ways—purchasing health care for low-income Medicaid populations and state employees, establishing rules that guide health care and insurance markets, setting strategy for health information technology and exchange, supporting public health, and acting as conveners and collaborators in improvement with other health care stakeholders.

It will be important to continue tracking health system performance as health reforms are implemented, paying close attention to states that are expanding Medicaid and participating in other reforms. In addition, states can help to ensure that proven practices are fully adopted. For example, the stagnation and decline in rates of adult preventive care suggests an opportunity to implement evidence-based clinical and community-based interventions recommended by the U.S. Preventive Services Task Force.[10]

The scorecard's findings remind us that where you live matters. The sobering truth is that residents of certain states realize greater benefits from their health care systems than do those in other states. It doesn't have to be this way. By acknowledging that access to care is the foundation of a high-performing health system and by focusing on the needs of low-income and other vulnerable populations, all states can safeguard and promote the health of their residents. All states can strive through policy and leadership to enhance patient care experiences, improve health outcomes, and lower health care spending.[11]

Only by aiming high can the U.S. reach its potential as a nation where geography is not destiny, and where everyone, everywhere, has the opportunity to live a long and healthy life.

ACCESS AND AFFORDABILITY

PREVENTION AND TREATMENT

AVOIDABLE HOSPITAL USE AND COST

HEALTHY LIVES

EQUITY

METHODS

The Commonwealth Fund's *Scorecard on State Health System Performance, 2015 Edition*, evaluates 42 key indicators grouped into five dimensions (Appendix Exhibit A1):

Access and Affordability (six indicators): includes rates of insurance coverage for children and adults, as well as individuals' out-of-pocket expenses for medical care and cost-related barriers to receiving care.

Prevention and Treatment (16 indicators): includes measures of receiving preventive care and the quality of care in ambulatory, hospital, and long-term care and postacute settings.

Potentially Avoidable Hospital Use and Cost (nine indicators): includes indicators of hospital use that might have been reduced with timely and effective care management and follow-up care, as well as estimates of per-person spending among Medicare beneficiaries and the cost of employer-sponsored insurance. One indicator, hospital admissions for ambulatory care–sensitive conditions, reported separately for two distinct age groups.

Healthy Lives (11 indicators): includes indicators that measure premature death and health risk behaviors.

Equity: The scorecard evaluates differences in performance on 33 equity indicators associated with patients' income level (18 indicators) or race or ethnicity (15 indicators) that span the other four dimensions of performance. The data available for some equity indicators, such as childhood vaccinations, may represent a different time point from that used in the corresponding main scorecard indicator. For each state, health system performance on each equity indicator as it pertains to low-income populations (under 200% of the federal poverty level) and racial or ethnic minority groups (black or other race or Hispanic ethnicity) is compared with the national average. The resulting difference in performance is the "equity gap," which forms the basis of our state rankings for this dimension. To support more comprehensive assessment of disparities, the 2015 scorecard expanded the number of indicators evaluated in the equity dimension; hence, the 2015 equity rankings are not strictly comparable to earlier scorecards.

The following principles guided the development of the scorecard:

Performance Metrics. The 42 performance metrics selected for this report span the health care system, representing important dimensions of care. Where possible, indicators align with those used in previous state scorecards. Since earlier versions of the scorecard, several indicators have been dropped either because all states improved to the point where no meaningful variations existed (e.g., hospital quality process-of-care measures) or the data to construct the measures were no longer available. Several new indicators were added to the scorecard series starting in 2014, including measures of premature death, out-of-pocket spending on medical care relative to income, and potentially avoidable emergency department use.

Measuring Change over Time. We were able to construct a time series for 36 of 42 indicators. Four scorecard indicators derived from the National Survey of Children's Health could not be updated because the survey is conducted only every four years; a fifth indicator (Medicare beneficiaries' ratings of provider communication) did not have a comparable baseline data point in the time period measured in this scorecard.

There were generally one to two years between indicators' baseline and current year data observation, though the starting and ending points depended on data availability. We chose this short time horizon so as to capture the immediate effects of changes relative to the policy and delivery system environment, such as recent coverage expansions under the Affordable Care Act, and other reforms as they are or may be enacted and implemented in the future.

We considered a change in an indicator's value between the historical and current year data points to be meaningful if it was at least one-half (0.5) of a standard deviation larger than the indictor's combined distribution over the two time points—a common approach in social science research.

To assess change over time in the Equity dimension, we count how often the equity gap (described above) narrowed across indicators for each state during the time period measured by this scorecard. Within the race/ethnicity Equity subdimension, we evaluate trend data for an indicator only when there was comparable historical data on the racial/ethnic group with the largest equity gap in the most current assessment period. We consider improvement to have occurred in an equity indicator only if the equity gap narrowed and health care for the states' most-vulnerable group improved.

Data Sources. Indicators draw from publicly available data sources, including government-sponsored surveys, registries, publicly reported quality indicators, vital statistics, mortality data, and administrative databases. The most current data available were used in this report whenever possible. Appendix Exhibits A1 and H1 provides detail on the data sources and time frames.

Scoring and Ranking Methodology. The scoring method follows previous state scorecards. States are first ranked from best to worst on each of the 42 performance indicators. We averaged rankings for indicators within each dimension to determine a state's dimension rank and then averaged dimension rankings to determine overall ranking. This approach gives each dimension equal weight, and within dimensions it weights indicators equally. As in previous scorecards, if historical data were not available for a particular indicator in the baseline period, the most current year of data available was used as a substitute ensuring that ranks in each time period were based on the same number of indicators and as similar as possible.

NOTES

1. The scorecard measures the percent of adults age 50 and older who have received all of the following: sigmoidoscopy or colonoscopy in the past 10 years or a fecal occult blood test in the past two years; a mammogram in the past two years (women only); a Pap smear in the past three years (women only); and a flu shot in the past year and a pneumonia vaccine ever (age 65 and older only).

2. S. T. Hawley, J. A. Earp, M. O'Malley et al., "The Role of Physician Recommendation in Women's Mammography Use: Is It a 2-Stage Process?" *Medical Care,* April 2000 38(4):392–403.

3. C. H. Ellenbecker, L. Samia, M. J. Cushman et al., "Chapter 13. Patient Safety and Quality in Home Health Care," in *Patient Safety and Quality: An Evidence-Based Handbook for Nurses*, R. G. Hughes, editor (Rockville, Md.: Agency for Healthcare Research and Quality, April 2008).

4. U.S. Food and Drug Administration, "FDA Recommends Against the Continued Use of Propoxyphene," Safety Announcement, Nov. 19, 2010; U.S. Food and Drug Administration, "Xanodyne Agrees to Withdraw Propoxyphene from the U.S. Market," News Release, Nov. 19, 2010; and J. Driessen, S. H. Baik, Y. Zhang, "Explaining Improved Use of High-Risk Medications in Medicare Between 2007 and 2011," *Journal of the American Geriatrics Society* (forthcoming).

5. S. Rice, "CMS Targets Nursing Homes' Overuse of Antipsychotic Drugs," *Modern Healthcare*, Sept. 22, 2014; U.S. General Accounting Office, *Antipsychotic Drug Use: HHS Has Initiatives to Reduce Use Among Older Adults in Nursing Homes, But Should Expand Efforts to Other Settings* (Washington, D.C.: GAO, Jan. 30, 2015).

6. Centers for Medicare and Medicaid Services, "Readmissions Reduction Program," Nov. 16, 2015; and M. Laderman, S. Loehrer, and D. McCarthy, "The Effect of Medicare Readmissions Penalties on Hospitals' Efforts to Reduce Readmissions: Perspectives from the Field," *The Commonwealth Fund Blog*, Feb. 26, 2013; and C. Boccuti and G. Casillas, *Aiming for Fewer Hospital U-Turns: The Medicare Hospital Readmission Reduction Program* (Menlo Park, Calif.: The Henry J. Kaiser Family Foundation, Jan. 29, 2015).

7. R. Mechanic, "Post-Acute Care: The Next Frontier for Controlling Medicare Spending," *New England Journal of Medicine*, Feb. 20, 2014 370(8):692–694.

8. S. Loehrer, D. McCarthy, and E. Coleman, "Cross-Continuum Collaboration in Health Care: Unleashing the Potential," *Population Health Management,* Oct. 2015 18(5):317–19; J. G. Ouslander and R. A. Berenson, "Reducing Unnecessary Hospitalizations of Nursing Home Residents," *New England Journal of Medicine,* Sept. 29, 2011 365(13):1165–67; and J. G. Ouslander, G. Lamb, R. Tappen et al., "Interventions to Reduce Hospitalizations from Nursing Homes: Evaluation of the INTERACT II Collaborative Quality Improvement Project," *Journal of the American Geriatrics Society,* April 2011 59(4):745–53.

9. National spending estimates described here come from the CMS Office of the Actuary, National Health Statistics Group, Historic National Health Expenditure Tables, 2013. These national estimates account for all spending for all Medicare beneficiaries; they differ from the U.S. per-beneficiary spending estimates reported elsewhere in the scorecard, specifically in Appendix Exhibits A2 and E3. The latter estimates come from the CMS Office of Enterprise Data and Analytics and are restricted to beneficiaries age 65 and older, and exclude prescription drug spending.

10. J. K. Ockene, E. A. Edgerton, S. M. Teutsch et al., "Integrating Evidence-Based Clinical and Community Strategies to Improve Health," *American Journal of Preventive Medicine,* March 2007 32(3):244–252.

11. S. Silow-Carroll and G. Moody, *Lessons from High- and Low-Performing States for Raising Overall Health System Performance* (New York: The Commonwealth Fund, May 2011).

ABOUT THE AUTHORS

Douglas McCarthy, M.B.A., is senior research director for The Commonwealth Fund, where he oversees the Fund's scorecard project, conducts case-study research on delivery system reforms and breakthrough opportunities, and serves as a contributing editor to the Fund's bimonthly newsletter, *Transforming Care*. His 30-year career has spanned research, policy, operations, and consulting roles for government, corporate, academic, nonprofit, and philanthropic organizations. He has authored and coauthored reports and peer-reviewed articles on a range of health care–related topics, including more than 50 case studies of high-performing organizations and initiatives. Mr. McCarthy received his bachelor's degree with honors from Yale College and a master's degree in health care management from the University of Connecticut. During 1996– 1997, he was a public policy fellow at the Hubert H. Humphrey School of Public Affairs at the University of Minnesota.

David C. Radley, Ph.D., M.P.H., is senior scientist for The Commonwealth Fund's Tracking Health System Performance initiative, working on the scorecard project. Dr. Radley and his team develop national, state, and substate regional analyses on health care system performance and related insurance and care system market structure analyses. Previously, he was associate in domestic health policy for Abt Associates, with responsibility for a number of projects related to measuring long-term care quality and evaluating health information technology initiatives. Dr. Radley received his Ph.D. in health policy from the Dartmouth Institute for Health Policy and Clinical Practice, and holds a B.A. from Syracuse University and an M.P.H. from Yale University.

Susan L. Hayes, M.P.A., is senior research associate for The Commonwealth Fund's Tracking Health System Performance initiative. In this role she supports the scorecard project, actively participating in the selection/development, research, and analysis of national, state, local, and special-population-level health system performance measures, and coauthoring scorecard reports and related publications. Ms. Hayes holds an M.P.A. from New York University's Wagner School of Public Service, where she won the Martin Dworkis Memorial Award for academic achievement and public service. She graduated from Dartmouth College with an A.B. in English and began a distinguished career in journalism, working as an editorial assistant at *PC Magazine* and a senior editor at *National Geographic Kids* and later at *Woman's Day* magazine. Following that period, Ms. Hayes was a freelance health writer and a contributing editor to *Parent & Child* magazine and cowrote a book on raising bilingual children with a pediatrician at Tufts Medical Center.

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Finally, the authors wish to acknowledge the Institute for Healthcare Improvement for its support of the research unit, which enabled the analysis and development of the report.

APPENDIX EXHIBIT A1. STATE SCORECARD DATA YEARS AND DATABASES

	Indicator	Past year	Current year	Database
	Access and Affordability			
1	Adults ages 19–64 uninsured	2013	2014	ACS PUMS
2	Children ages 0–18 uninsured	2013	2014	ACS PUMS
3	Adults who went without care because of cost in past year	2013	2014	BRFSS
4	Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	—[a]	2013–14	CPS ASEC
5	At-risk adults without a routine doctor visit in past two years	2013	2014	BRFSS
6	Adults without a dental visit in past year	2012	2014	BRFSS
	Prevention and Treatment			
7	Adults with a usual source of care	2013	2014	BRFSS
8	Adults ages 50 and older who received recommended screening and preventive care	2012	2014	BRFSS
9	Children with a medical home	—[a]	2011/12	NSCH
10	Children with a medical and dental preventive care visit in the past year	—[a]	2011/12	NSCH
11	Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	—[a]	2011/12	NSCH
12	Children ages 19–35 months who received all recommended doses of seven key vaccines	2013	2014	NIS
13	Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	2012	5% Medicare enrolled in Part D
14	Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	2012	5% Medicare enrolled in Part D
15	Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	—[a]	2013	CAHPS (via AHRQ National Healthcare Quality Report)
16	Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2009–06/2012	07/2010–06/2013	CMS Hospital Compare
17	Hospitalized patients given information about what to do during their recovery at home	2012	2013	HCAHPS (via CMS Hospital Compare)
18	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	2012	2013	HCAHPS (via CMS Hospital Compare)
19	Home health patients who get better at walking or moving around	2013	2014	OASIS (via CMS Home Health Compare)
20	Home health patients whose wounds improved or healed after an operation	2013	2014	OASIS (via CMS Home Health Compare)
21	High-risk nursing home residents with pressure sores	2013	2014	MDS (via CMS Nursing Home Compare)
22	Long-stay nursing home residents with an antipsychotic medication	2013	2014	MDS (via CMS Nursing Home Compare)
	Avoidable Hospital Use and Cost			
23	Hospital admissions for pediatric asthma, per 100,000 children	2011	2012	HCUP (via AHRQ National Healthcare Quality Report)
24	Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, and age 75 and older per 1,000 beneficiaries	2012	2013	CCW (via CMS Geographic Variation Public Use File)
25	Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	2013	CCW (via CMS Geographic Variation Public Use File)
26	Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	2012	MedPAR, MDS
27	Long-stay nursing home residents hospitalized within a six-month period	2010	2012	MedPAR, MDS
28	Home health patients also enrolled in Medicare with a hospital admission	2013	10/2013–9/2014	OASIS (via CMS Home Health Compare)
29	Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2012	2013	5% Medicare SAF
30	Total single premium per enrolled employee at private-sector establishments that offer health insurance	2013	2014	MEPS
31	Total Medicare (Parts A & B) reimbursements per enrollee	2012	2013	CCW (via CMS Geographic Variation Public Use File)
	Healthy Lives			
32	Mortality amenable to health care, deaths per 100,000 population	2010–11	2012–13	CDC NVSS: Mortality Restricted Use File
33	Years of potential life lost before age 75	2012	2013	CDC NVSS: WISQARS
34	Breast cancer deaths per 100,000 female population	2012	2013	CDC NVSS: WONDER
35	Colorectal cancer deaths per 100,000 population	2012	2013	CDC NVSS: WONDER
36	Suicide deaths per 100,000 population	2012	2013	CDC NVSS: WONDER
37	Infant mortality, deaths per 1,000 live births	2012	2013	CDC NVSS: WONDER
38	Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2013	2014	BRFSS
39	Adults who smoke	2013	2014	BRFSS
40	Adults ages 18–64 who are obese (BMI >= 30)	2013	2014	BRFSS
41	Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	—[a]	2011/12	NSCH
42	Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	2014	BRFSS

Note: (a) Previous data not available or its definition is not comparable over time.

APPENDIX EXHIBIT A2. LIST OF 42 INDICATORS IN THE STATE SCORECARD ON HEALTH SYSTEM PERFORMANCE

	Indicator	Data Years Represented		U.S. Average Rate		Range of State Performance		2015 Scorecard
		Baseline[a]	2015 Scorecard	Baseline[a]	2015 Scorecard	Baseline[a]	2015 Scorecard	Best State(s)[b]
	Access and Affordability							
1	Adults ages 19–64 uninsured	2013	2014	20	16 *	5–30	5–26	MA
2	Children ages 0–18 uninsured	2013	2014	8	6 *	2–14	2–12	MA
3	Adults who went without care because of cost in the past year	2013	2014	16	14 *	7–22	7–19	ND
4	Individuals with high out-of-pocket medical spending	—[c]	2013-14	—[c]	15	—[c]	10–22	MD
5	At-risk adults without a doctor visit	2013	2014	14	13	7–23	6–22	RI
6	Adults without a dental visit in past year	2012	2014	15	16	10–20	11–20	SD, VT
	Prevention and Treatment							
7	Adults with a usual source of care	2013	2014	76	77	65–88	65–89	MA
8	Older adults with recommended preventive care	2012	2014	42	40 *	34–52	32–48	CT
9	Children with a medical home	—[c]	2011/12	—[c]	54	—[c]	45–69	VT
10	Children with a medical and dental preventive care visit in the past year	—[c]	2011/12	—[c]	68	—[c]	56–81	VT
11	Children who received needed mental health care in the past year	—[c]	2011/12	—[c]	61	—[c]	40–86	ND
12	Children ages 19–35 months with all recommended vaccines	2013	2014	70	72	57–82	63–85	ME
13	Elderly patients who received a high-risk prescription drug	2011	2012	20	17 *	12–29	9–24	MA
14	Elderly patients who received a contraindicated prescription drug	2011	2012	23	21 *	14–29	13–28	ME, RI
15	Medicare patients experienced good communication with provider	—[c]	2013	—[c]	76	—[c]	72–80	LA
16	Hospital 30-day mortality	07/2009–06/2012	07/2010–06/2013	13.1	12.6 *	12.1–14.0	11.8–13.6	DE, MA
17	Hospital discharge instructions for home recovery	2012	2013	85	86	78–89	78–90	UT
18	Patient-centered hospital care	2012	2013	67	68	59–73	58–72	LA, ME, NE, SD
19	Home health patients who get better at walking or moving around	2013	2014	61	63*	49–66	51–69	UT
20	Home health patients whose wounds healed after an operation	2013	2014	89	89	80–93	74–95	RI
21	High-risk nursing home residents with pressure sores	2013	2014	6	6	3–9	3–8	HI, ID
22	Nursing home residents with an antipsychotic medication	2013	2014	21	19 *	9–27	9–25	AK
	Avoidable Hospital Use and Cost							
23	Hospital admissions for pediatric asthma, per 100,000 children	2011	2012	107	143 *	33–232	28–231	VT
24	Medicare admissions for ambulatory care–sensitive conditions, ages 65–74	2012	2013	29	27	13–51	13–46	HI
	Medicare admissions for ambulatory care–sensitive conditions, age 75 and older	2012	2013	70	66	41–100	36–95	HI
25	Medicare 30-day hospital readmissions, per 1,000 beneficiaries	2012	2013	34	30	12–55	10–48	HI
26	Short-stay nursing home residents with a 30-day readmission to the hospital	2010	2012	22	20 *	14–28	13–26	MT
27	Long-stay nursing home residents with a hospital admission	2010	2012	19	17	7–31	7–30	MN
28	Home health patients with a hospital admission	2013	10/2013-9/2014	16	16	14–18	13–17	AK
29	Potentially avoidable ED visits among Medicare beneficiaries, per 1,000 beneficiaries	2012	2013	188	181	131–248	127–251	HI
30	Health insurance premium for employer-sponsored single-person plans	2013	2014	$5,633	$5,859 *	$4,197–$7,334	$4,392–$7,592	CA
31	Total Medicare (Parts A & B) reimbursements per enrollee	2012	2013	$8,854	$8,801	$5,399–$10,868	$5,421–$10,697	HI
	Healthy Lives							
32	Mortality amenable to health care, deaths per 100,000 population	2010-11	2012-13	85	84	57–133	56–137	MN
33	Years of potential life lost before age 75	2012	2013	$6,412	$6,420	$4,892–$9,610	$4,963–$9,945	MN
34	Breast cancer deaths per 100,000 female population	2012	2013	21.4	20.8	15.7–31.1	15.5–29.8	HI
35	Colorectal cancer deaths per 100,000 population	2012	2013	14.9	14.6	10.7–19.4	10.9–19.8	UT
36	Suicide deaths per 100,000 population	2012	2013	12.6	12.6	5.7–29.6	5.8–23.7	DC
37	Infant mortality, deaths per 1,000 live births	2012	2013	6	6	4.2–8.9	4.2–9.6	MA
38	Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2013	2014	26	27	20–34	19–34	DC
39	Adults who smoke	2013	2014	18	17	10–27	9–26	UT
40	Adults ages 18–64 who are obese (BMI >= 30)	2013	2014	29	29	22–37	21–38	CO, DC
41	Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	—[c]	2011/12	—[c]	31	—[c]	22–40	UT
42	Percent of adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	2014	10	10	6–23	6–22	UT

Notes: (a) The baseline period generally reflects the year prior to the time of observation for the latest year of data available. (b) Multiple states may be listed in the event of ties. (c) Previous data are not shown because of changes in the indicators' definitions or data were not available.
* Asterisks indicate change between baseline and current time periods of at least 0.5 standard deviations (see Scorecard Methodology).

APPENDIX EXHIBIT A3. NATIONAL CUMULATIVE IMPACT IF ALL STATES ACHIEVED TOP STATE RATE

Indicator	If all states improved their performance to the level of the best-performing state for this indicator, then:	
Insured Adults	**21,126,092**	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.
Insured Children	**3,124,744**	more children (ages 0–18) would be covered by health insurance (public or private), and therefore would be more likely to receive health care when needed.
High Out-of-Pocket Medical Spending	**11,636,543**	fewer individuals would be burdened by high out-of-pocket spending on medical care.
Went Without Care Because of Cost	**16,957,363**	fewer adults (age 18 and older) would go without needed health care because of cost.
Adult Usual Source of Care	**29,069,764**	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed.
Older Adult Preventive Care	**8,691,519**	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots at appropriate ages.
Children with a Medical Home	**11,087,987**	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed.
Children with Preventive Medical and Dental Visits	**9,609,589**	more children (ages 0–17) would receive annual preventive medical and dental care visits each year.
Medicare Received a High-Risk Drug	**1,174,142**	fewer Medicare beneficiaries would receive an inappropriately prescribed medication.
Preventable Hospital Admissions Among Children	**85,008**	fewer children ages 2 to 17 would be hospitalized for asthma exacerbations.
Hospital Readmissions	**152,166**	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older).
Potentially Avoidable Emergency Department Visits	**1,425,210**	fewer emergency department visits for nonemergent or primary care–treatable conditions would occur among Medicare beneficiaries.
Mortality Amenable to Health Care	**83,707**	fewer premature deaths (before age 75) might occur from causes that are potentially treatable or preventable with timely and appropriate health care.
Breast Cancer Deaths	**8,552**	fewer women would die from breast cancer.
Colon Cancer Deaths	**11,698**	fewer individuals would die from colon cancer.
Suicides	**21,499**	fewer individuals might take their own lives.
Infant Mortality	**7,078**	more infants might live to see their first birthday.
Adults Who Smoke	**19,379,843**	fewer adults would smoke, reducing their risk of lung and heart disease.
Adults Who Are Obese	**15,700,326**	fewer adults would be obese, with body weights that increase their risk for disease and long-term complications.
Children Who Are Overweight or Obese	**3,019,159**	fewer children (ages 10–17) would be overweight or obese, thus reducing the potential for poor health as they transition into adulthood.
Adults with Tooth Loss	**7,850,163**	fewer adults (ages 18–64) would have lost six or more teeth to decay, infection, or gum disease.

APPENDIX EXHIBIT B1. SUMMARY OF STATE RANKINGS IN CURRENT AND PREVIOUS SCORECARDS

State	2015 Scorecard Ranks						Overall Ranking in the Baseline Time Period[a]	2014 Scorecard Overall Rank[b]
	Overall Rank	Access Dimension	Prevention and Treatment Dimension	Avoidable Use and Cost Dimension	Healthy Lives Dimension	Equity Dimension		
Alabama	47	32	37	46	46	42	40	46
Alaska	32	44	37	10	32	29	33	31
Arizona	33	43	47	10	29	24	35	36
Arkansas	49	44	47	38	49	51	49	50
California	23	30	37	14	7	22	25	26
Colorado	8	26	9	5	2	11	11	12
Connecticut	5	5	9	28	2	3	6	6
Delaware	15	9	9	24	33	14	12	10
District of Columbia	20	7	21	45	22	9	23	21
Florida	37	40	37	33	22	31	38	41
Georgia	46	41	45	28	39	45	45	45
Hawaii	3	11	18	1	6	1	1	5
Idaho	25	46	31	3	17	22	22	31
Illinois	26	19	21	44	22	24	31	26
Indiana	43	34	34	36	42	47	40	43
Iowa	9	7	9	18	16	15	7	10
Kansas	28	23	16	31	27	36	26	23
Kentucky	40	28	20	49	44	45	46	42
Louisiana	48	38	43	50	48	44	48	48
Maine	11	16	1	21	29	15	8	7
Maryland	18	5	14	42	20	13	18	17
Massachusetts	4	1	2	31	4	2	4	2
Michigan	31	15	16	38	38	31	29	26
Minnesota	1	3	8	8	1	9	1	1
Mississippi	51	48	47	51	51	49	51	51
Missouri	36	33	21	38	40	28	37	34
Montana	28	39	31	5	22	36	29	29
Nebraska	13	23	13	14	14	20	14	17
Nevada	43	50	51	18	36	39	46	46
New Hampshire	5	9	4	18	7	5	5	2
New Jersey	20	21	21	36	12	17	21	15
New Mexico	33	46	45	10	34	20	34	36
New York	13	14	28	26	13	5	15	19
North Carolina	37	30	31	26	36	43	36	36
North Dakota	26	25	19	22	27	36	18	14
Ohio	33	16	21	38	41	41	31	31
Oklahoma	50	48	44	46	46	49	50	49
Oregon	15	28	36	2	14	11	24	24
Pennsylvania	20	12	7	33	34	19	15	22
Rhode Island	5	4	3	22	10	7	8	9
South Carolina	40	41	28	24	43	48	40	36
South Dakota	15	22	14	8	29	17	18	12
Tennessee	43	34	37	42	44	39	38	40
Texas	40	51	50	33	22	31	40	44
Utah	18	36	28	5	4	24	12	19
Vermont	1	2	4	13	9	3	1	2
Virginia	23	19	21	28	20	24	26	24
Washington	10	16	37	4	10	8	15	15
West Virginia	39	26	21	48	50	31	40	34
Wisconsin	11	13	4	14	18	29	8	7
Wyoming	28	36	34	14	18	35	26	29

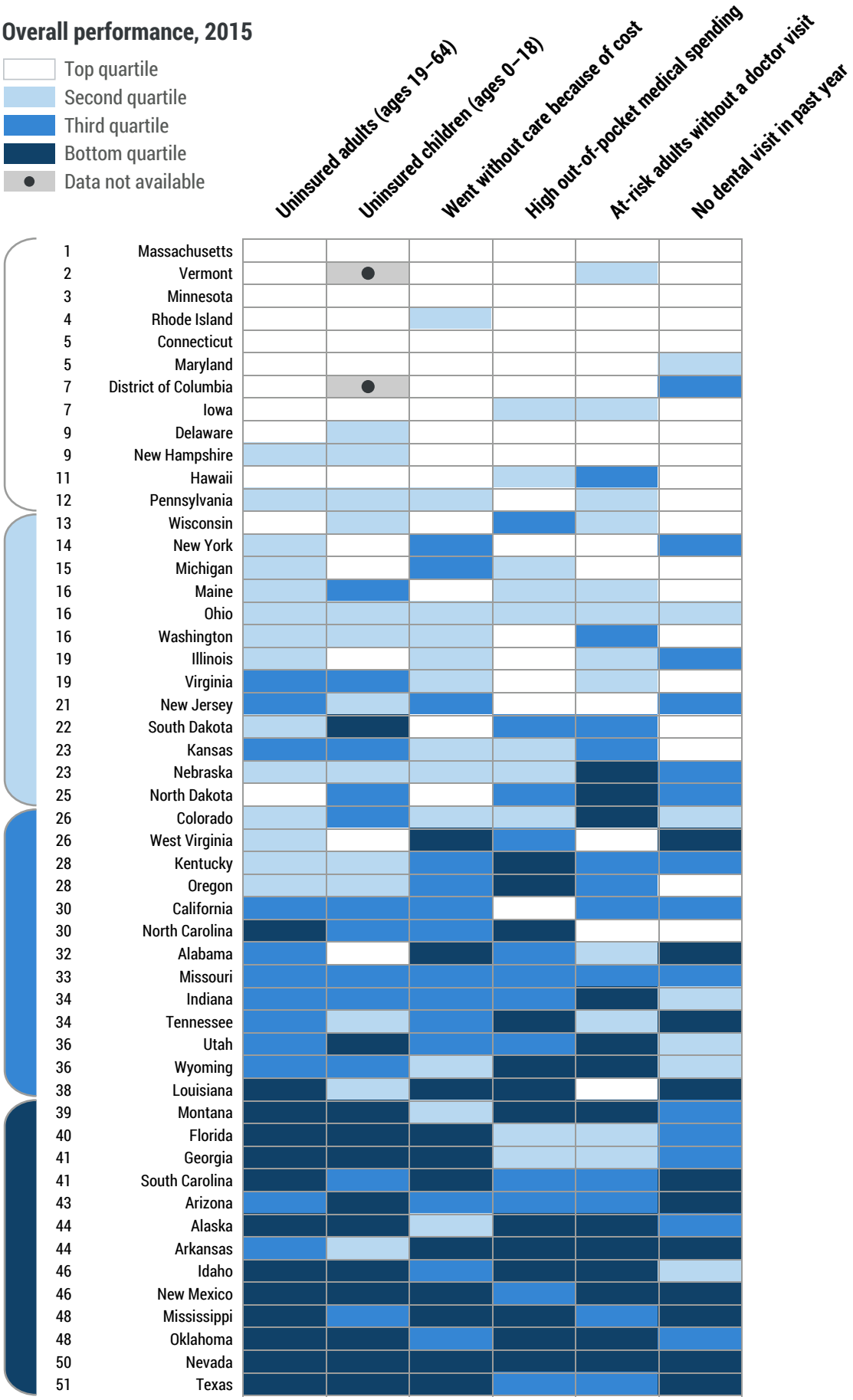
Notes: (a) The baseline period generally reflects the year prior to the time of observation for the latest year of data available. (b) The 2014 scorecard ranking is not based on the same set of indicators used to calculate the 2015 scorecard and 2015 scorecard baseline rankings. Rather, it represents the time period evaluated in the 2014 scorecard, generally encompassing the years 2010–2012. The 2015 scorecard added several variables to the equity dimension.

APPENDIX EXHIBIT B2. SUMMARY OF INDICATOR RANKINGS BY STATE

Overall Rank	State	No. of indicators scored (of 42)	Top 5 States	Top Quartile	2nd Quartile	3rd Quartile	Bottom Quartile	Bottom 5 States	No. of indicators with trend (of 36)	No. of indicators improved	No. of indicators worsened	Net change
47	Alabama	41	1	4	4	12	21	12	35	7	5	2
32	Alaska	39	6	9	11	5	14	9	34	11	5	6
33	Arizona	42	2	6	12	12	12	3	36	12	3	9
49	Arkansas	42	0	2	7	9	24	16	36	11	2	9
23	California	42	8	16	9	12	5	2	36	11	2	9
8	Colorado	42	14	19	16	5	2	0	36	9	1	8
5	Connecticut	42	10	24	9	7	2	1	36	8	4	4
15	Delaware	41	4	14	9	16	2	2	35	8	3	5
20	District of Columbia	38	10	15	5	9	9	8	32	12	2	10
37	Florida	42	2	4	16	11	11	7	36	10	1	9
46	Georgia	42	0	1	11	16	14	4	36	11	2	9
3	Hawaii	40	16	25	8	4	3	2	34	6	4	2
25	Idaho	41	7	16	10	2	13	4	35	8	4	4
26	Illinois	42	0	8	13	14	7	3	36	8	2	6
43	Indiana	42	0	0	10	22	10	0	36	6	3	3
9	Iowa	42	8	14	17	11	0	0	36	9	2	7
28	Kansas	42	1	5	18	18	1	1	36	10	1	9
40	Kentucky	42	1	3	9	12	18	11	36	13	3	10
48	Louisiana	42	2	4	5	6	27	21	36	16	3	13
11	Maine	42	8	20	12	7	3	0	36	6	3	3
18	Maryland	42	5	14	12	13	3	4	36	11	2	9
4	Massachusetts	42	22	26	7	6	3	1	36	11	4	7
31	Michigan	42	1	8	14	12	8	2	36	8	2	6
1	Minnesota	42	17	31	6	2	3	3	36	8	4	4
51	Mississippi	41	3	4	1	5	31	28	35	11	4	7
36	Missouri	42	0	3	10	24	5	1	36	9	1	8
28	Montana	42	4	12	12	9	9	1	36	10	3	7
13	Nebraska	42	7	15	17	7	3	1	36	5	2	3
43	Nevada	42	2	7	5	10	20	11	36	12	3	9
5	New Hampshire	41	10	20	17	2	2	0	35	8	4	4
20	New Jersey	42	6	16	9	6	11	7	36	9	2	7
33	New Mexico	41	2	7	10	9	15	4	35	9	3	6
13	New York	42	4	12	13	11	6	4	36	8	1	7
37	North Carolina	42	1	5	10	19	8	1	36	10	1	9
26	North Dakota	40	9	13	7	12	8	3	35	11	5	6
33	Ohio	42	0	1	18	13	10	1	36	7	2	5
50	Oklahoma	42	1	3	3	12	24	11	36	14	2	12
15	Oregon	42	8	15	15	6	6	3	36	11	3	8
20	Pennsylvania	41	4	11	14	13	3	1	35	5	3	2
5	Rhode Island	41	11	22	13	4	2	0	36	14	3	11
40	South Carolina	42	0	4	13	9	16	3	36	6	1	5
15	South Dakota	41	8	15	14	6	6	1	36	9	2	7
43	Tennessee	42	0	1	8	14	19	7	36	13	0	13
40	Texas	42	3	4	7	13	18	11	36	6	4	2
18	Utah	42	14	18	8	8	8	3	36	5	2	3
1	Vermont	41	17	23	12	5	1	1	35	8	4	4
23	Virginia	42	1	3	21	15	3	2	36	6	2	4
10	Washington	42	4	18	13	5	6	2	36	11	3	8
39	West Virginia	42	3	5	9	11	17	15	36	11	5	6
11	Wisconsin	42	9	15	17	10	0	0	36	5	3	2
28	Wyoming	41	4	13	11	7	10	6	35	10	7	3

Notes: Improvement or worsening refers to a change between the baseline and current time periods of at least 0.5 standard deviations. Ambulatory care–sensitive conditions among Medicare beneficiaries are counted as a single indicator in tallies of improvement.

APPENDIX EXHIBIT C1. ACCESS AND AFFORDABILITY: DIMENSION AND INDICATOR RANKING

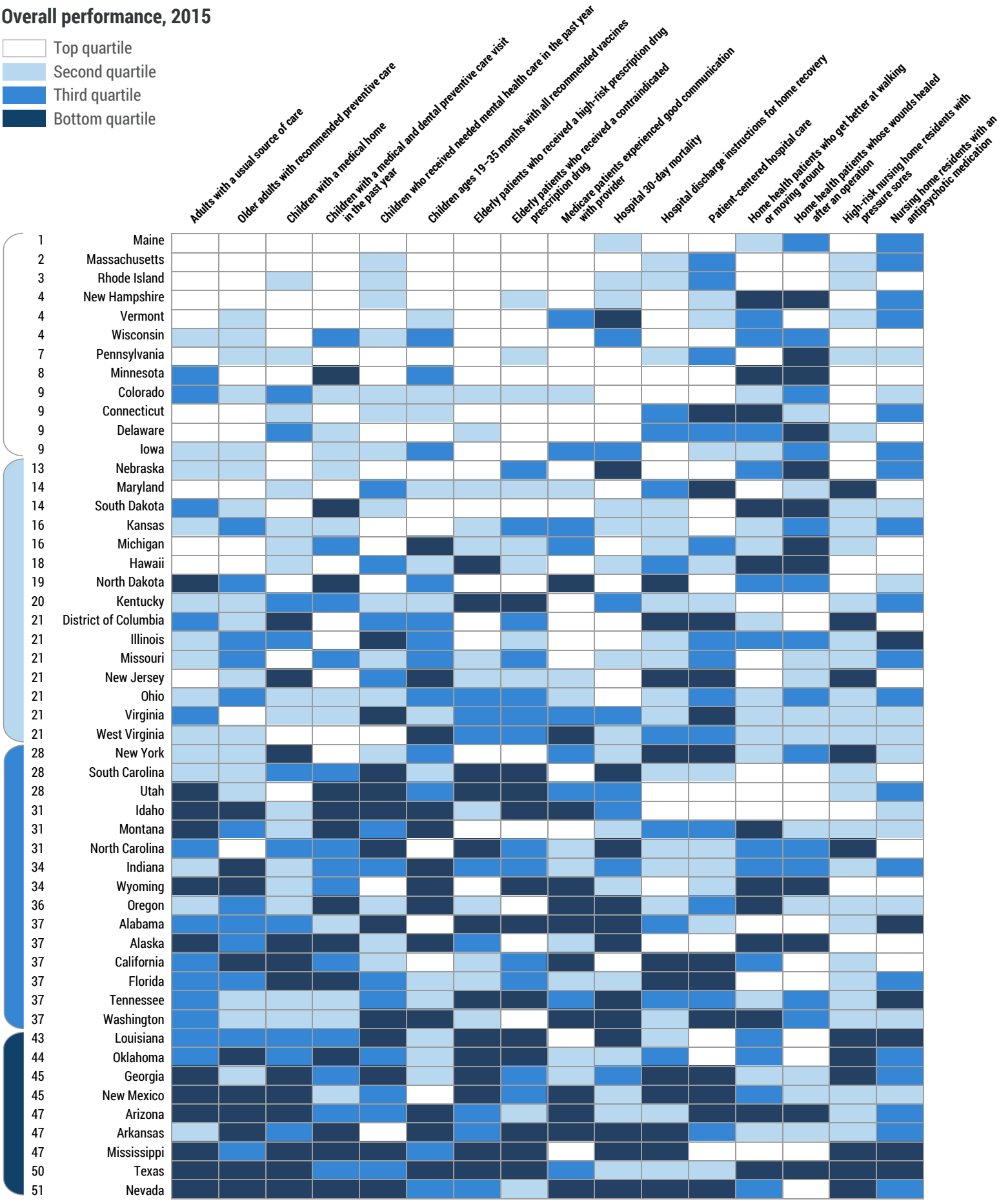


APPENDIX EXHIBIT C2. ACCESS AND AFFORDABILITY: DIMENSION RANKING AND INDICATOR RATES

	Adults ages 19–64 uninsured		Children ages 0–18 uninsured		Uninsured ages 0–64		Adults who went without care because of cost in the past year		Individuals with high out-of-pocket medical spending	At-risk adults without a doctor visit		Adults without a dental visit in past year	
	2013	2014	2013	2014	2013	2014	2013	2014	2013-14	2013	2014	2012	2014
United States	**20%**	**16% ***	**8%**	**6% ***	**17%**	**13% ***	**16%**	**14% ***	**15%**	**14%**	**13%**	**15%**	**16%**
Alabama	20	18	5	4	16	14 *	16	17	16	12	12	18	18
Alaska	24	22	12	12	20	19	14	12 *	18	23	22	14	16 *
Arizona	24	18 **	13	10 **	20	16 *	17	16	16	19	16 *	17	18
Arkansas	24	18 **	6	5	19	14 **	21	18 *	21	18	18	19	18
California	24	17 **	8	6 *	19	14 **	16	14 *	13	17	15 *	16	17
Colorado	19	14 *	9	6 **	16	12 *	15	13 *	15	18	17	16	15
Connecticut	13	9 *	4	4	11	8 *	12	11	13	10	11	11	12
Delaware	14	10 *	5	5	12	9 *	12	11	13	9	10	12	14 *
District of Columbia	8	7	--	--	7	6	11	11	11	9	8	16	16
Florida	29	24 *	12	10 *	24	20 *	21	18 *	15	14	12 *	18	17
Georgia	26	22 *	10	8 *	21	18 *	20	19	15	14	13	16	17
Hawaii	10	7 *	3	3	8	6 *	9	9	14	14	15	15	14
Idaho	23	19 *	9	8	19	15 *	16	16	22	21	20	13	15 *
Illinois	18	14 *	5	4	14	11 *	14	12 *	13	14	13	15	16
Indiana	19	17	9	7 *	16	14 *	16	15	16	17	17	15	15
Iowa	12	8 *	5	3 *	10	7 *	10	9	15	14	12 *	12	13
Kansas	18	15 *	7	6	14	12 *	14	13	15	14	15	13	13
Kentucky	21	12 **	6	5	17	10 **	19	16 *	18	15	15	16	16
Louisiana	25	22 *	6	5	19	17 *	20	17 *	19	10	10	20	20
Maine	16	14	5	6	13	12	10	11	15	12	12	13	13
Maryland	14	11 *	5	4	11	9 *	13	10 *	10	10	7 *	13	15 *
Massachusetts	5	5	2	2	4	4	9	8	11	7	7	11	12
Michigan	16	12 *	5	4	13	10 *	15	15	15	13	11 *	14	14
Minnesota	11	8 *	6	4 *	9	7 *	10	9	12	12	11	11	13 *
Mississippi	25	22 *	8	6 *	20	17 *	22	19 *	20	15	14	19	20
Missouri	18	16	7	7	15	13 *	16	14 *	17	16	15	15	16
Montana	23	19 *	11	9 *	20	16 *	14	12 *	19	19	17 *	17	16
Nebraska	15	13	6	5	12	11	13	12	15	18	17	15	16
Nevada	27	21 **	14	10 **	23	17 **	17	17	18	15	17 *	20	19
New Hampshire	16	13 *	4	5	13	11 *	12	11	12	11	11	10	12 *
New Jersey	19	16 *	6	5	15	13 *	15	14	13	10	9	15	16
New Mexico	28	21 **	9	8	22	17 **	18	17	16	17	18	18	18
New York	15	12 *	4	4	12	10 *	15	14	12	10	10	15	16
North Carolina	23	19 *	6	6	18	15 *	18	16 *	18	12	11	15	14
North Dakota	14	10 *	8	7	12	9 *	7	7	17	17	17	15	16
Ohio	16	12 *	5	5	13	10 *	15	13 *	15	13	12	14	15
Oklahoma	25	21 *	11	9 *	20	18 *	17	15 *	19	21	19 *	18	17
Oregon	21	14 **	7	5 *	17	12 **	18	14 **	20	20	16 **	15	14
Pennsylvania	14	12	5	5	11	10	12	12	12	12	12	13	14
Rhode Island	17	10 **	6	3 **	14	8 **	14	12 *	13	10	6 **	12	12
South Carolina	23	20 *	7	6	18	16 *	19	18	17	16	15	18	18
South Dakota	17	13 *	7	8	14	12 *	10	10	16	14	16 *	11	11
Tennessee	20	17 *	6	5	16	14 *	18	16 *	22	11	12	17	18
Texas	30	26 *	13	12	24	21 *	19	18	17	15	16	18	20 *
Utah	18	16	9	9	15	14	15	14	16	19	19	16	15
Vermont	10	7 *	--	--	8	5 *	9	9	12	11	12	11	11
Virginia	17	15	6	6	14	12 *	15	13 *	12	12	12	12	14 *
Washington	20	13 **	7	5 *	16	11 **	15	12 *	13	17	16	14	14
West Virginia	20	13 **	5	3 *	16	11 **	18	17	17	12	9 *	18	20 *
Wisconsin	13	10 *	5	5	10	9	12	11	16	13	12	12	12
Wyoming	18	17	7	7	15	14	14	12 *	18	21	21	15	15
Change		**39**		**16**		**42**		**21**			**13**		**9**
States Improved		39		16		42		21			11		0
States Worsened		0		0		0		0			2		9

Notes: * denotes a change of at least 0.5 standard deviations; ** denotes a change of 1.0 standard deviation or more. -- Data not available.

APPENDIX EXHIBIT D1. PREVENTION AND TREATMENT: DIMENSION AND INDICATOR RANKING



APPENDIX EXHIBIT D2. PREVENTION AND TREATMENT: DIMENSION RANKING AND INDICATOR RATES

	Adults with a usual source of care		Older adults with recommended preventive care		Children with a medical home	Children with a medical and dental preventive care visit in the past year	Children who received needed mental health care in the past year	Children ages 19–35 months with all recommended vaccines		Elderly patients who received a high-risk prescription drug		Elderly patients who received a contraindicated prescription drug	
	2013	2014	2012	2014	2011/12	2011/12	2011/12	2013	2014	2011	2012	2011	2012
United States	**76%**	**77%**	**42%**	**40% ***	**54%**	**68%**	**61%**	**70%**	**72%**	**20%**	**17% ***	**23%**	**21% ***
Alabama	78	76	42	40 *	54	70	54	77	77	29	24 **	29	28
Alaska	67	66	39	38	52	59	63	64	67 *	19	17	21	17 **
Arizona	68	72 *	34	37 *	46	65	60	65	66	19	17	18	18
Arkansas	77	78	34	35	55	62	67	57	66 **	25	17 **	26	23 *
California	71	74 *	40	32 **	45	65	63	69	78 **	19	16 *	22	21
Colorado	76	76	44	42 *	55	70	65	69	73 *	19	16 *	19	18
Connecticut	85	84	47	48	58	79	65	78	73 **	14	13	17	15 *
Delaware	86	86	48	47	56	72	67	72	75 *	18	16	16	17
District of Columbia	76	75	44	43	50	77	59	77	71 **	17	13 *	19	20
Florida	73	76 *	39	38	50	60	58	70	73 *	19	16 *	22	21
Georgia	72	71	46	42 **	52	65	53	70	74 *	25	21 *	24	21 *
Hawaii	85	85	44	45	57	73	58	66	74 **	21	21	18	18
Idaho	72	71	35	33 *	57	59	56	70	66 *	22	16 **	24	22 *
Illinois	80	81	39	39	56	74	55	67	68	15	13	19	18
Indiana	80	80	37	36	58	69	58	69	66 *	20	17 *	22	21
Iowa	81	80	44	43	67	70	66	78	71 **	15	12 *	19	17 *
Kansas	78	80	43	39 **	59	70	72	69	77 **	20	15 **	22	20 *
Kentucky	78	79	40	44 **	56	68	66	73	72	26	23 *	27	24 *
Louisiana	74	74	40	40	56	67	40	69	73 *	28	24 *	26	23 *
Maine	87	88	47	46	63	73	78	68	85 **	13	12	14	13
Maryland	79	82 *	48	47	57	73	59	76	74	16	15	19	18
Massachusetts	88	89	52	47 **	63	79	65	79	75 *	12	9 *	16	15
Michigan	83	84	45	45	59	68	68	70	65 **	16	14	20	19
Minnesota	73	76 *	46	45	61	60	72	74	71 *	13	10 *	17	15 *
Mississippi	77	73 *	37	38	49	60	53	75	71 *	29	22 **	27	26
Missouri	79	79	42	38 **	62	65	63	68	70	20	16 *	23	21 *
Montana	70	71	35	38 *	58	61	60	65	67	17	13 *	22	17 **
Nebraska	79	80	39	41 *	61	70	71	79	80	18	13 **	21	21
Nevada	65	65	36	34 *	45	56	49	61	68 **	21	17 *	20	18 *
New Hampshire	88	85 *	48	46 *	67	79	66	75	80 **	14	13	20	19
New Jersey	81	82	41	42	53	76	58	73	67 **	15	15	20	18 *
New Mexico	69	69	36	37	48	70	58	66	76 **	22	18 *	23	21 *
New York	81	81	44	43	53	73	64	72	71	13	12	18	17
North Carolina	73	76 *	46	45	55	67	54	72	81 **	23	20 *	23	21 *
North Dakota	73	71	37	39 *	62	61	86	72	71	14	11 *	16	14 *
Ohio	81	80	41	39 *	57	71	66	62	68 **	19	17	22	20 *
Oklahoma	74	75	37	36	56	62	61	63	73 **	27	22 **	27	26
Oregon	74	77 *	39	39	57	63	66	67	65	19	16 *	19	17 *
Pennsylvania	86	85	44	42 *	59	73	69	76	79 *	15	13	19	18
Rhode Island	84	86	46	47	60	76	66	82	76 **	14	11 *	16	13 *
South Carolina	76	77	42	41	54	64	50	67	73 **	24	20 *	24	22 *
South Dakota	76	75	41	44 *	62	59	64	74	76	13	10 *	18	15 *
Tennessee	77	76	41	41	60	70	60	68	72 *	27	21 **	26	24 *
Texas	67	67	38	37	52	68	59	72	64 **	23	19 *	23	22
Utah	72	71	40	41	64	61	49	75	71 *	21	18 *	26	23 *
Vermont	87	87	47	44 *	69	81	78	67	72 **	12	11	17	14 *
Virginia	76	76	45	46	57	70	53	69	74 **	20	17 *	21	20
Washington	72	75 *	43	43	59	72	54	71	67 *	19	16 *	19	17 *
West Virginia	77	77	43	41 *	61	74	74	66	63 *	22	17 **	22	20 *
Wisconsin	81	81	43	43	66	68	65	73	71	13	11	16	15
Wyoming	69	69	36	34 *	59	65	67	70	64 **	17	13 *	18	22 **
Change		**10**		**21**					**38**		**35**		**28**
States Improved		8		6					22		35		27
States Worsened		2		15					16		0		1

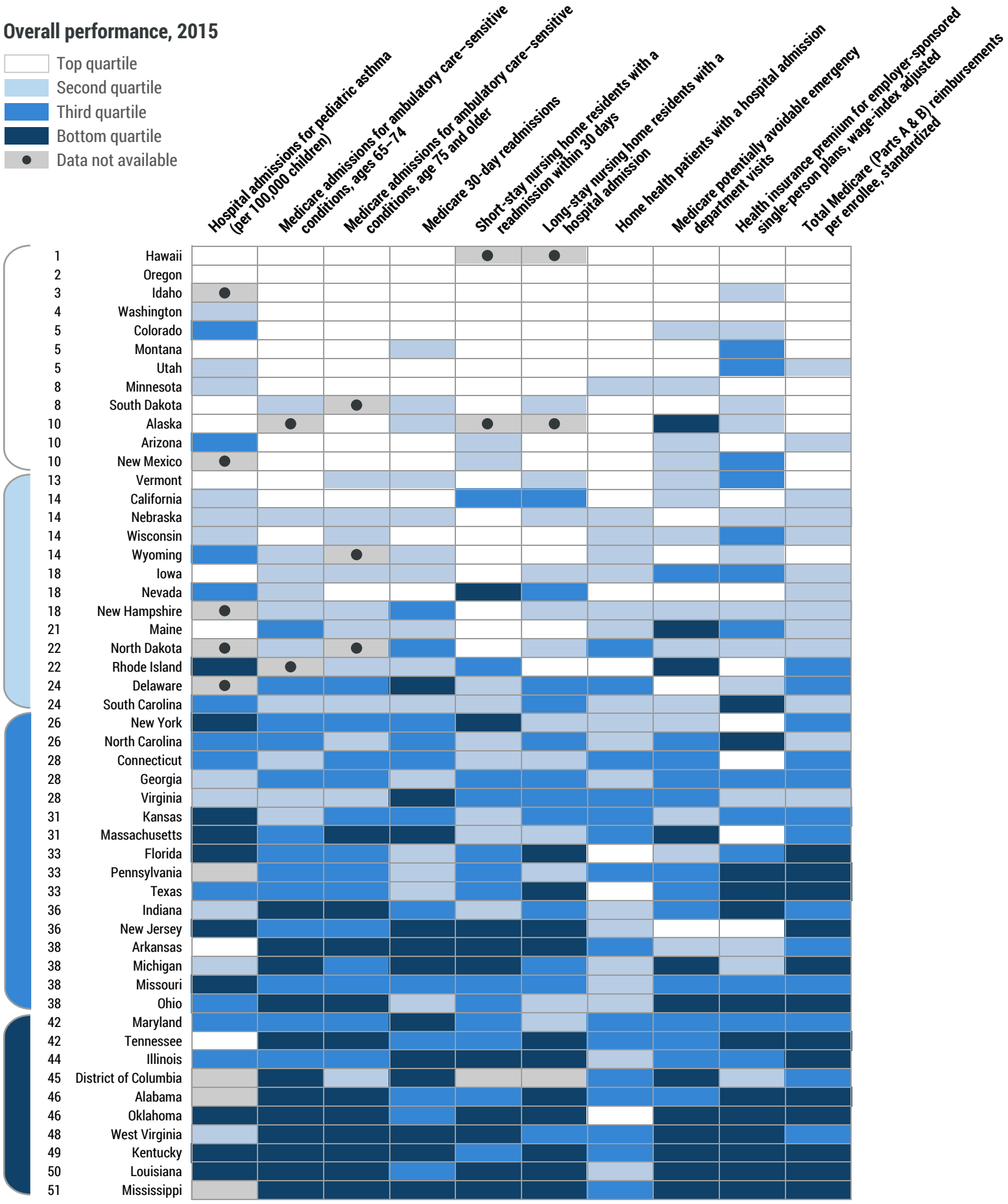
Notes: * denotes a change of at least 0.5 standard deviations; ** denotes a change of 1.0 standard deviation or more.

APPENDIX EXHIBIT D2. PREVENTION AND TREATMENT: DIMENSION RANKING AND INDICATOR RATES (CONTINUED)

	Medicare patients experienced good communication with provider	Hospital 30-day mortality		Hospital discharge instructions for home recovery		Patient-centered hospital care		Home health patients who get better at walking or moving around		Home health patients whose wounds healed after an operation		High-risk nursing home residents with pressure sores		Nursing home residents with an antipsychotic medication	
	2013	07/09–06/12	07/10–06/13	2012	2013	2012	2013	2013	2014	2013	2014	2013	2014	2013	2014
United States	**76%**	**13.1%**	**12.6% ****	**85%**	**86%**	**67%**	**68%**	**61%**	**63% ***	**89%**	**89%**	**6%**	**6%**	**21%**	**19% ***
Alabama	74	13.4	13.1 *	83	85 *	69	69	65	68 *	91	91	5	5	23	22
Alaska	76	14.0	13.1 **	85	88 **	67	70 **	49	51 *	80	74 **	6	4 **	9	9
Arizona	74	13.3	12.5 **	84	86 *	66	66	58	60 *	86	87	6	5 *	21	19 *
Arkansas	72	13.9	13.6 *	82	83	67	68	61	64 *	90	90	6	6	24	19 **
California	74	12.8	12.4 *	82	84 *	63	64	59	61 *	91	92	6	6	16	14 *
Colorado	76	12.9	12.2 **	87	88	69	70	62	64 *	90	89	4	4	18	18
Connecticut	77	13.2	12.4 **	84	85	65	65	59	60	90	90	5	4 *	22	20 *
Delaware	79	12.4	11.8 **	84	85	67	67	58	61 *	82	83	5	5	17	15 *
District of Columbia	79	12.1	11.9	78	78	59	58	60	64 **	90	91	9	8 *	18	16 *
Florida	76	13.2	12.6 **	82	83	63	63	65	67 *	92	91	6	6	22	21
Georgia	76	13.2	12.9 *	83	84	66	66	61	64 *	90	90	7	7	22	20 *
Hawaii	77	13.0	12.7 *	82	85 **	68	69	55	59 **	83	82	3	3	12	10 *
Idaho	74	13.6	12.9 **	88	88	70	70	63	65 *	91	92	4	3 *	20	18 *
Illinois	77	12.7	12.4 *	85	86	66	67	61	62	88	88	7	6 *	23	22
Indiana	76	13.2	12.9 *	86	87	69	69	59	62 *	89	89	6	6	20	19
Iowa	75	13.0	12.9	86	88 *	69	69	62	64 *	88	88	4	4	19	19
Kansas	75	12.9	12.6 *	86	86	70	70	61	63 *	88	88	5	5	21	20
Kentucky	77	13.2	12.9 *	85	86	69	69	64	66 *	91	91	7	6 *	22	21
Louisiana	80	13.3	13.0 *	84	86 *	71	72	60	62 *	92	91	9	8 *	27	25 *
Maine	77	13.5	12.7 **	89	89	71	72	62	64 *	88	89	4	4	22	20 *
Maryland	76	12.7	12.0 **	84	85	62	61	63	65 *	89	90	7	7	17	16
Massachusetts	77	12.3	11.8 **	87	87	67	67	63	66 *	92	92	5	5	22	20 *
Michigan	75	12.8	12.4 *	87	87	69	68	61	64 *	87	87	6	6	15	14
Minnesota	78	12.7	12.3 *	87	88	70	71	57	59 *	85	84	4	4	16	14 *
Mississippi	78	13.2	13.1	81	83 *	69	70	64	66 *	92	92	7	7	24	23
Missouri	77	13.2	12.7 **	86	87	66	67	62	65 *	90	90	6	6	23	21 *
Montana	77	12.7	12.6	83	85 *	67	67	56	60 **	92	90 *	5	6 *	19	18
Nebraska	79	13.3	13.0 *	87	88	71	72	59	62 *	83	84	4	4	22	21
Nevada	73	13.5	13.2 *	83	84	61	64 **	60	62 *	91	91	7	7	22	21
New Hampshire	78	13.7	12.6 **	88	88	70	69	59	60	87	87	4	4	22	19 *
New Jersey	76	12.7	12.2 **	81	82	62	63	63	65 *	90	90	8	7 *	16	15
New Mexico	73	12.9	12.7	82	84 *	66	66	59	62 *	93	90 **	6	6	19	17 *
New York	75	13.0	12.5 **	82	84 *	62	63	59	63 **	89	89	8	8	19	18
North Carolina	76	13.3	13.0 *	86	87	68	69	61	62	90	89	7	7	16	15
North Dakota	73	12.8	12.2 **	86	82 **	65	70 **	56	61 **	87	89 *	4	4	18	18
Ohio	76	12.8	12.4 *	86	87	68	68	61	63 *	88	88	6	6	22	21
Oklahoma	76	13.1	12.7 *	83	85 *	69	70	60	62 *	91	91	8	8	22	21
Oregon	74	13.9	13.0 **	85	86	67	68	56	59 *	89	90	7	6 *	18	18
Pennsylvania	78	12.9	12.4 **	85	86	66	67	63	65 *	87	87	6	5 *	20	18 *
Rhode Island	77	13.3	12.7 **	85	86	66	67	63	65 *	93	95 *	6	5 *	18	16 *
South Carolina	77	13.4	13.0 *	85	86	69	69	64	65	92	91	6	6	17	16
South Dakota	77	13.0	12.5 **	86	87	73	72	58	60 *	88	85 **	5	5	18	18
Tennessee	75	13.2	13.0	84	85	68	68	63	64	90	89	5	5	25	23 *
Texas	75	13.1	12.5 **	84	86 *	69	69	56	57	88	87	7	7	27	25 *
Utah	75	13.5	12.9 **	89	90	69	70	66	69 *	92	91	5	5	23	21 *
Vermont	75	13.9	13.1 **	88	88	68	69	60	62 *	88	91 **	5	5	21	19 *
Virginia	75	13.3	12.9 *	85	86	65	66	63	64	90	90	6	6	21	18 *
Washington	74	14.0	13.4 **	86	87	66	66	56	58 *	88	88	6	6	20	18 *
West Virginia	73	13.1	12.6 **	84	85	66	67	63	64	91	90	7	6 *	19	17 *
Wisconsin	78	13.4	12.8 **	88	89	71	71	59	62 *	87	88	5	4 *	17	14 *
Wyoming	74	12.9	12.5 *	87	88	68	69	58	58	88	86 *	4	4	18	16 *
Change			**45**		**14**		**3**		**41**		**8**		**15**		**27**
States Improved			45		13		3		41		3		14		27
States Worsened			0		1		0		0		5		1		0

Notes: * denotes a change of at least 0.5 standard deviations; ** denotes a change of 1.0 standard deviation or more.

APPENDIX EXHIBIT E1. AVOIDABLE HOSPITAL USE AND COST: DIMENSION AND INDICATOR RANKING



APPENDIX EXHIBIT E2. AVOIDABLE HOSPITAL USE AND COST: DIMENSION RANKING AND INDICATOR RATES

	Hospital admissions for pediatric asthma, per 100,000 children		Medicare admissions for ambulatory care–sensitive conditions, ages 65–74		Medicare admissions for ambulatory care–sensitive conditions, age 75 and older		Medicare 30-day hospital readmissions, per 1,000 beneficiaries		Medicare 30-day hospital readmissions as a percent of admissions(a)		Short-stay nursing home residents with a 30-day readmission to the hospital		Long-stay nursing home residents with a hospital admission		Home health patients with a hospital admission		Potentially avoidable ED visits among Medicare beneficiaries, per 1,000 beneficiaries	
	2011	2012	2012	2013	2012	2013	2012	2013	2012	2013	2010	2012	2010	2012	2013	10/13–9/14	2012	2013
United States	107	143 *	29	27	70	66	34	30	18	17	22%	20% *	19%	17%	16%	16%	188	181
Alabama	--	--	38	34 *	82	75 *	39	34 *	17	16	22	22	21	21	17	17	192	184
Alaska	46	62	--	--	52	49	29	26	14	14	--	--	--	--	14	13 **	205	203
Arizona	106	125	20	18	51	48	23	20	16	15	23	20 *	12	9 *	15	15	178	171
Arkansas	64	81	35	31 *	83	78	42	36 *	18	16	25	25	27	26	17	17	185	177
California	87	96	21	20	55	53	24	21	18	17	23	22	21	20	15	15	167	163
Colorado	143	129	16	15	50	45	19	16	14	13	17	16	12	10	14	14	173	164
Connecticut	144	136	26	24	75	70	39	34 *	18	17	22	20 *	19	16 *	16	17 **	189	189
Delaware	--	--	27	27	68	66	40	37	17	16	22	20 *	19	19	16	17 **	159	159
District of Columbia	--	--	37	36	74	65 *	55	48 *	21	20	--	--	--	--	18	17 **	248	251
Florida	145	143	28	27	68	66	34	30	18	18	24	22 *	25	23	15	15	179	176
Georgia	88	97	31	29	73	68	33	29	17	16	23	21 *	20	19	16	16	201	188 *
Hawaii	52	69	13	13	41	36	12	10	15	14	--	--	--	--	14	15 **	131	127
Idaho	--	--	17	16	45	42	17	16	13	13	14	14	12	11	14	14	162	159
Illinois	117	119	31	28	73	70	51	44 *	19	18	25	23 *	25	22 *	16	16	192	186
Indiana	105	102	35	32	77	73	40	34 *	17	16	21	20	20	19	16	16	200	192
Iowa	69	71	24	22	64	60	33	29	15	15	18	17	16	15	16	16	184	179
Kansas	144	160	27	25	71	66	37	33	16	15	21	19 *	20	20	17	17	173	169
Kentucky	167	152	51	46 *	100	95	50	42 *	19	19	23	22	24	24	18	17 **	219	219
Louisiana	232	203 *	44	41	97	88 *	40	35 *	18	18	28	26 *	31	30	16	16	236	219 *
Maine	72	76	26	26	65	61	31	28	16	15	18	17	14	12	16	16	233	217 *
Maryland	132	137	29	28	69	66	49	43 *	19	18	26	22 **	20	17 *	17	17	193	186
Massachusetts	182	141 *	30	28	80	76	41	36 *	18	17	22	19 *	17	14 *	16	17 **	209	197 *
Michigan	97	94	34	31	73	70	42	38	19	18	25	23 *	20	18	16	16	214	210
Minnesota	70	82	20	19	55	54	18	15	16	15	18	17	7	7	16	16	181	175
Mississippi	--	--	42	38 *	91	88	48	42 *	18	17	26	24 *	31	29	17	17	231	222
Missouri	150	161	31	30	73	69	37	33	17	17	22	22	21	20	16	16	197	190
Montana	65	77	21	19	--	55	25	24	14	14	14	13	12	12	15	15	158	159
Nebraska	58	82 *	24	23	63	59	33	29	15	14	18	16 *	17	16	16	16	153	149
Nevada	98	112	25	23	60	55	26	23	18	17	25	23 *	20	20	15	15	165	158
New Hampshire	--	--	23	23	64	62	34	32	16	16	18	16 *	13	14	17	16 **	192	175 *
New Jersey	149	163	27	26	73	69	47	41 *	19	18	27	24 *	26	21 *	16	16	170	160
New Mexico	--	--	23	21	59	52 *	22	19	15	15	19	18	15	13	15	15	170	170
New York	221	231	29	26	73	69	36	31 *	20	19	26	23 *	19	17	17	16 **	173	165
North Carolina	109	113	29	27	67	64	35	31	17	16	21	20	19	18	16	16	197	192
North Dakota	--	--	24	22	65	--	35	31	16	15	18	16 *	14	15	15	17 **	187	178
Ohio	143	128	38	35	82	76	34	30	18	18	23	21 *	17	15	16	16	219	214
Oklahoma	139	189 **	38	32 *	80	71 *	40	35 *	17	16	24	23	24	24	16	15 **	211	206
Oregon	40	41	17	17	48	46	15	14	14	14	17	17	10	8	14	15 **	162	155
Pennsylvania	187	--	31	28	74	70	31	27	18	17	22	21	17	16	17	17	187	181
Rhode Island	139	149	27	--	66	62	28	25	18	17	24	21 *	12	10	15	15	188	196
South Carolina	138	133	27	25	65	62	33	30	16	16	21	20	19	20	16	16	176	169
South Dakota	72	76	22	22	--	--	31	27	14	13	16	15	16	15	17	15 **	168	149 *
Tennessee	98	73 *	37	34	84	77 *	37	31 *	18	17	23	21 *	24	22	17	17	200	189 *
Texas	104	114	31	29	76	70	34	28 *	17	16	23	22	24	23	15	15	186	180
Utah	80	93	17	16	42	39	17	16	13	13	14	14	11	11	14	14	147	142
Vermont	33	28	--	20	65	61	31	27	16	15	16	16	13	15	16	15 **	187	178
Virginia	107	100	27	25	71	63 *	40	36	18	17	22	21	20	20	17	17	193	187
Washington	77	84	18	17	49	48	23	21	15	15	19	17 *	13	13	15	15	157	156
West Virginia	110	98	50	43 *	98	87 *	46	40 *	20	19	23	23	20	19	18	17 **	226	223
Wisconsin	78	86	22	21	60	57	26	23	16	15	17	17	13	12	16	16	182	176
Wyoming	92	123 *	--	23	--	--	32	28	15	14	17	15 *	14	13	17	16 **	169	160
Change		**6**		**6**		**8**		**17**				**23**		**6**		**16**		**7**
States Improved		3		6		8		17				23		6		10		7
States Worsened		3		0		0		0				0		0		6		0

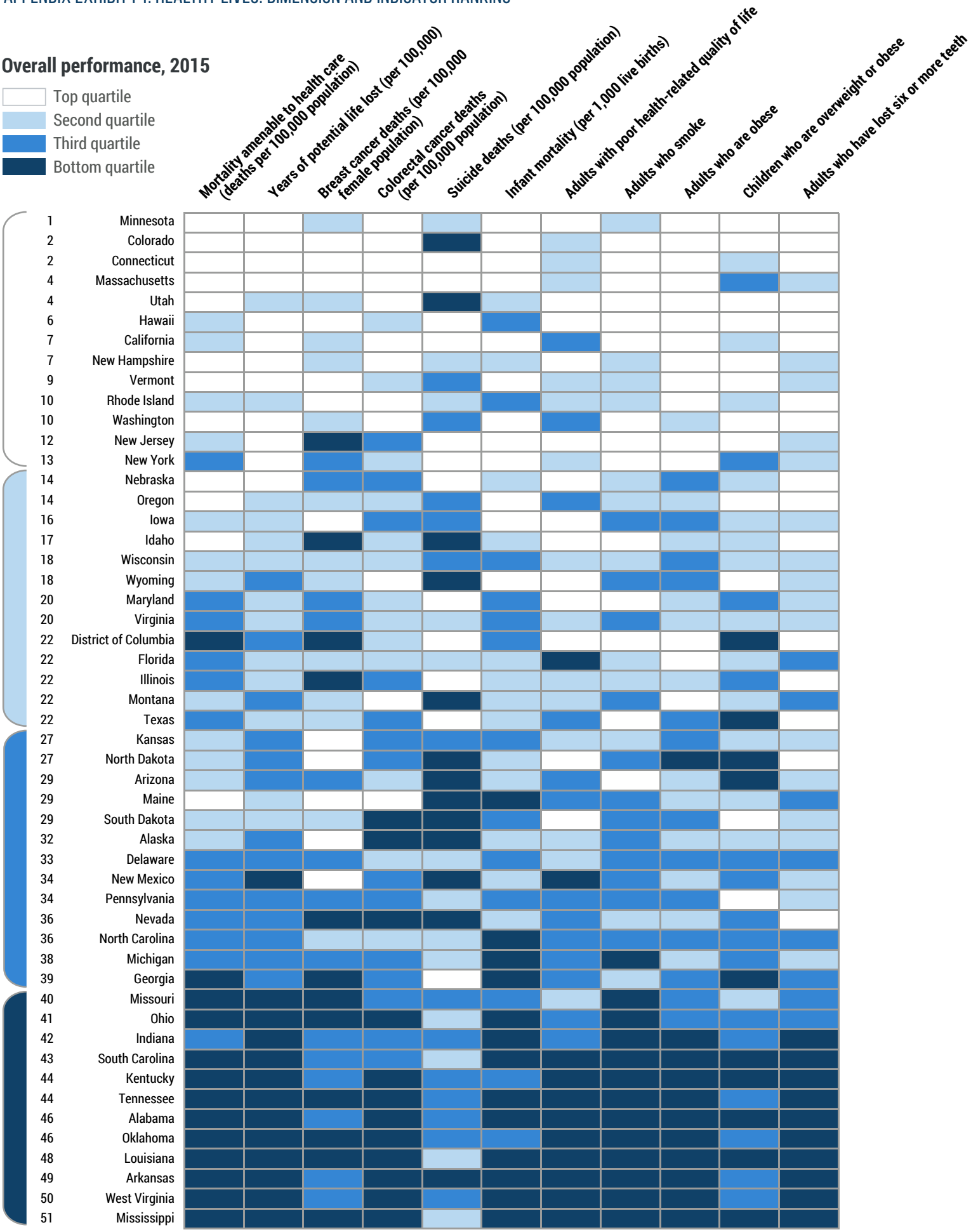
Notes: * denotes a change of at least 0.5 standard deviations; ** denotes a change of 1.0 standard deviation or more. -- Data not available. (a) Not a scored indicator, included here for information only.

APPENDIX EXHIBIT E3. AVOIDABLE HOSPITAL USE AND COST: COST INDICATORS

	Total Medicare (Parts A & B) reimbursements per enrollee[a]					Health insurance premium for employer-sponsored single-person plans				
	Unadjusted		Adjusted[(b)]		Annual Growth Rate[(c)]	Unadjusted		Adjusted[(b)]		Annual Growth Rate[(c,d)]
	2012	2013	2012	2013		2013	2014	2013	2014	
United States	**$9,409**	**$9,289**	**$8,854**	**$8,801**	**-1.3%**	**$5,571**	**$5,832**	**$5,633**	**$5,859**	**4.7%**
Alabama	8,686	8,469	9,344	9,250	-2.5%	5,204	5,526	6,450	6,849	6.2%
Alaska	7,675	7,827	5,399	5,621	2.0%	7,369	7,099	5,701	5,492	-3.7%
Arizona	8,588	8,459	7,998	7,943	-1.5%	5,343	5,356	5,014	5,026	0.2%
Arkansas	8,158	8,017	8,619	8,548	-1.7%	4,536	4,846	5,328	5,692	6.8%
California	10,244	10,167	8,310	8,285	-0.8%	5,581	5,841	4,197	4,392	4.7%
Colorado	7,884	7,684	7,460	7,344	-2.5%	5,668	5,848	5,550	5,726	3.2%
Connecticut	10,589	10,710	8,936	9,018	1.1%	6,002	6,223	4,820	4,997	3.7%
Delaware	9,339	9,342	8,514	8,554	0.0%	5,934	6,145	5,562	5,759	3.6%
District of Columbia	10,920	10,446	8,887	8,676	-4.3%	6,018	6,097	5,757	5,833	1.3%
Florida	10,693	10,536	10,597	10,402	-1.5%	5,383	5,767	5,766	6,177	7.1%
Georgia	8,664	8,511	8,743	8,693	-1.8%	5,374	5,570	5,917	6,133	3.6%
Hawaii	6,432	6,410	5,408	5,421	-0.3%	5,103	5,316	4,355	4,537	4.2%
Idaho	7,367	7,413	7,198	7,306	0.6%	5,019	4,978	5,557	5,511	-0.8%
Illinois	9,797	9,650	9,219	9,167	-1.5%	5,824	6,126	5,781	6,081	5.2%
Indiana	9,026	8,939	9,045	9,006	-1.0%	6,099	6,041	6,398	6,337	-1.0%
Iowa	7,696	7,694	7,496	7,564	0.0%	5,207	5,557	5,641	6,020	6.7%
Kansas	8,478	8,401	8,586	8,563	-0.9%	5,432	5,365	6,130	6,055	-1.2%
Kentucky	8,971	8,913	9,167	9,161	-0.6%	5,257	5,914	6,080	6,840	12.5%
Louisiana	10,334	10,076	10,868	10,697	-2.5%	5,300	5,700	6,345	6,824	7.5%
Maine	8,015	8,049	7,606	7,653	0.4%	5,865	5,903	5,992	6,031	0.6%
Maryland	10,655	10,563	8,472	8,616	-0.9%	5,730	6,059	5,741	6,071	5.7%
Massachusetts	10,924	10,633	9,041	8,960	-2.7%	6,290	6,348	4,813	4,857	0.9%
Michigan	10,131	9,989	9,565	9,521	-1.4%	5,319	5,610	5,483	5,783	5.5%
Minnesota	7,936	8,017	7,225	7,320	1.0%	5,274	5,832	4,806	5,314	10.6%
Mississippi	9,493	9,190	10,046	9,837	-3.2%	4,961	5,443	6,097	6,690	9.7%
Missouri	8,610	8,486	8,698	8,627	-1.4%	5,442	5,517	6,062	6,145	1.4%
Montana	6,939	6,987	6,585	6,687	0.7%	5,654	5,876	5,654	5,876	3.9%
Nebraska	8,380	8,297	8,062	8,027	-1.0%	5,268	5,557	5,456	5,756	5.5%
Nevada	9,222	9,133	8,328	8,295	-1.0%	5,168	5,426	4,461	4,684	5.0%
New Hampshire	8,450	8,416	7,618	7,643	-0.4%	6,249	6,336	5,487	5,563	1.4%
New Jersey	10,972	10,849	9,556	9,587	-1.1%	6,200	6,447	5,215	5,422	4.0%
New Mexico	7,246	7,161	6,791	6,766	-1.2%	5,250	5,725	5,456	5,949	9.0%
New York	10,960	10,873	8,977	8,975	-0.8%	6,156	6,307	5,157	5,283	2.5%
North Carolina	8,296	8,209	8,158	8,160	-1.0%	5,218	5,593	5,813	6,230	7.2%
North Dakota	7,651	7,683	7,529	7,585	0.4%	5,330	5,521	5,330	5,521	3.6%
Ohio	9,537	9,440	9,492	9,406	-1.0%	5,679	5,930	6,244	6,520	4.4%
Oklahoma	8,884	8,691	9,182	9,102	-2.2%	5,129	5,649	6,102	6,721	10.1%
Oregon	7,021	7,066	6,300	6,380	0.6%	5,449	5,707	4,906	5,138	4.7%
Pennsylvania	9,780	9,618	9,391	9,302	-1.7%	5,582	5,888	5,890	6,212	5.5%
Rhode Island	9,610	9,637	8,557	8,594	0.3%	5,968	6,156	5,130	5,291	3.2%
South Carolina	8,413	8,311	8,529	8,519	-1.2%	5,426	5,850	6,178	6,661	7.8%
South Dakota	7,623	7,516	7,204	7,209	-1.4%	5,876	5,859	5,873	5,856	-0.3%
Tennessee	8,736	8,437	9,197	9,044	-3.4%	5,146	5,310	6,078	6,271	3.2%
Texas	10,152	9,990	10,135	10,067	-1.6%	5,386	5,740	5,807	6,188	6.6%
Utah	7,997	7,804	8,011	7,889	-2.4%	5,309	5,538	5,832	6,084	4.3%
Vermont	7,898	7,884	6,816	6,869	-0.2%	5,764	6,180	5,719	6,131	7.2%
Virginia	8,160	8,169	8,000	8,050	0.1%	5,408	5,422	5,800	5,815	0.3%
Washington	7,919	7,922	7,106	7,137	0.0%	5,690	5,910	5,031	5,226	3.9%
West Virginia	8,520	8,434	8,637	8,601	-1.0%	5,940	6,149	7,334	7,592	3.5%
Wisconsin	8,003	7,979	7,615	7,622	-0.3%	5,730	5,868	5,730	5,868	2.4%
Wyoming	7,715	7,518	6,818	6,701	-2.6%	6,301	5,840	6,258	5,801	-7.3%

Notes: (a) Medicare spending estimates exclude prescription drug costs and reflect only the age 65+ Medicare fee-for-service population. (b) Spending is standardized for state differences in input prices using CMS' hospital wage index and extra CMS payments for graduate medical education and for treating low-income patients are removed from Medicare spending estimates. (c) Average annual growth rate calculated on the unadjusted amounts. (d) Average annual growth rate of + or - 3.5% or more in a state's health insurance premiums represents a change of at least 0.5 standard deviations.

APPENDIX EXHIBIT F1. HEALTHY LIVES: DIMENSION AND INDICATOR RANKING



APPENDIX EXHIBIT F2. HEALTHY LIVES: DIMENSION RANKING AND INDICATOR RATES

	Mortality amenable to health care, deaths per 100,000 population		Years of potential life lost before age 75		Breast cancer deaths per 100,000 female population		Colorectal cancer deaths per 100,000 population		Suicide deaths per 100,000 population		Infant mortality, deaths per 1,000 live births	
	2010-11	2012-13	2012	2013	2012	2013	2012	2013	2012	2013	2012	2013
United States	**85**	**84**	**6,412**	**6,420**	**21.4**	**20.8**	**14.9**	**14.6**	**12.6**	**12.6**	**6.0**	**6.0**
Alabama	112	111	9,324	9,368	22.9	21.4 *	16.7	17.7 *	14.7	14.4	8.9	8.6
Alaska	72	72	7,194	7,308	17.6	19.3 *	15.6	16.4	23.1	23.1	5.1	5.8 *
Arizona	74	72	6,609	6,645	19.1	20.6 *	13.1	13.3	17.3	17.5	5.8	5.3
Arkansas	116	119	8,928	8,867	23.3	21.4 *	17.7	17.7	16.3	17.3	7.1	7.9 *
California	73	72	5,108	5,123	21.1	20.1	13.6	13.2	10.0	10.2	4.5	4.8
Colorado	62	59	5,538	5,555	20.3	18.1 *	12.6	12.3	19.7	18.6	4.6	5.1
Connecticut	64	61	5,146	5,109	19.2	18.7	12.1	11.9	9.9	8.7	5.3	4.8
Delaware	88	85	7,204	6,892	22.7	21.3 *	13.4	13.8	13.2	12.5	7.6	6.4 **
District of Columbia	130	124	7,831	7,285	31.1	29.8 *	12.8	14.3 *	5.7	5.8	7.9	6.7 **
Florida	81	80	6,556	6,502	20.6	19.6	13.8	13.7	14.3	13.8	6.1	6.1
Georgia	103	100	6,966	7,229	21.6	22.5	15.1	14.9	11.7	12.0	6.2	7.0 *
Hawaii	70	75	5,445	5,611	16.3	15.5	13.6	14.2	13.1	11.8	4.9	6.4 **
Idaho	66	67	5,809	6,201	15.8	22.1 **	14.2	13.4	19.0	19.2	5.4	5.6
Illinois	90	87	6,161	5,994	23.0	22.2	16.0	15.9	9.8	9.9	6.5	6.0
Indiana	93	91	7,342	7,487	21.8	21.8	16.4	15.4 *	14.3	14.3	6.7	7.2
Iowa	73	72	5,747	5,679	20.3	18.7 *	15.9	15.6	12.7	14.4	5.3	4.3 *
Kansas	78	78	6,643	6,555	23.0	18.5 **	14.7	15.4	17.5	14.7 *	6.3	6.5
Kentucky	107	106	8,869	8,374	23.4	21.1 *	17.1	17.1	16.2	15.5	7.2	6.4 *
Louisiana	121	123	8,952	9,232	24.4	23.9	17.7	18.4	12.4	12.4	8.1	8.7 *
Maine	65	62	6,128	6,252	17.3	18.8 *	14.2	12.5 *	14.5	17.4 *	7.0	7.1
Maryland	92	89	6,244	6,248	23.7	21.5 *	15.0	14.3	9.5	9.2	6.4	6.6
Massachusetts	64	60	4,892	5,009	19.5	18.4 *	13.4	13.1	8.7	8.2	4.2	4.2
Michigan	92	91	6,977	7,023	22.3	21.2 *	14.5	14.8	12.5	12.9	6.9	7.1
Minnesota	57	56	4,910	4,963	18.1	19.6 *	13.2	12.8	12.0	12.1	5.0	5.1
Mississippi	133	137	9,610	9,945	25.3	23.3 *	19.4	18.8	14.0	13.0	8.9	9.6 *
Missouri	95	95	7,487	7,480	22.5	22.0	16.6	15.7 *	14.9	15.6	6.6	6.5
Montana	69	70	6,963	7,197	20.7	19.9	14.3	12.4 **	22.6	23.7	5.9	5.6
Nebraska	66	65	5,701	5,607	21.2	21.0	16.0	15.2	12.5	11.6	4.7	5.2
Nevada	94	92	6,658	6,846	22.2	22.5	17.7	16.8 *	18.2	18.6	4.9	5.3
New Hampshire	60	58	5,097	5,329	19.0	19.8	13.7	12.8 *	14.1	12.8	4.2	5.6 **
New Jersey	79	75	5,325	5,345	22.7	23.2	15.9	14.9 *	7.4	8.0	4.4	4.5
New Mexico	78	79	7,998	7,686	18.0	17.3	13.9	14.5	21.3	20.3	6.8	5.3 **
New York	82	79	5,237	5,216	20.8	20.6	14.4	14.0	8.3	8.1	5.0	4.9
North Carolina	94	93	7,029	6,976	21.5	20.4 *	14.5	13.3 *	12.7	12.6	7.4	7.0
North Dakota	70	70	6,473	6,655	16.9	17.9	13.2	15.9 **	15.2	17.3 *	6.3	6.0
Ohio	96	94	7,282	7,365	22.8	22.9	16.4	16.3	13.0	12.9	7.5	7.3
Oklahoma	114	118	8,915	9,041	23.4	22.9	18.1	17.5	17.6	17.2	7.5	6.7 *
Oregon	65	62	5,799	5,736	20.3	19.9	13.8	14.4	17.8	16.8	5.4	4.9
Pennsylvania	86	82	6,726	6,648	22.6	21.8	16.0	15.9	12.4	13.4	7.1	6.7
Rhode Island	73	68	5,549	5,819	18.1	19.4 *	14.4	13.2 *	9.5	12.2 *	6.5	6.5
South Carolina	103	99	7,962	7,908	22.3	21.3	15.4	15.0	13.7	14.0	7.5	6.9 *
South Dakota	75	75	6,873	6,514	19.5	19.9	16.4	16.7	16.8	18.0	8.3	6.5 **
Tennessee	110	110	8,464	8,357	22.9	22.4	16.9	16.6	14.6	15.3	7.2	6.8
Texas	93	93	6,457	6,492	21.1	20.2	14.8	14.7	11.9	11.7	5.8	5.8
Utah	62	61	5,719	5,722	20.4	20.3	10.7	10.9	21.0	21.4	4.8	5.2
Vermont	58	57	5,102	5,596	19.4	18.5	13.5	14.3	13.1	16.8 *	4.3	4.4
Virginia	83	81	5,965	5,882	21.3	21.1	14.5	13.8	12.6	12.5	6.5	6.2
Washington	64	62	5,399	5,313	17.9	20.5 **	13.2	12.8	14.5	14.1	5.3	4.5 *
West Virginia	105	103	9,474	9,413	22.6	21.6	17.5	19.8 **	17.1	16.4	7.2	7.6
Wisconsin	72	69	5,696	5,863	20.4	20.4	13.8	14.1	12.3	14.4 *	5.7	6.3 *
Wyoming	76	68	7,046	6,761	15.7	20.5 **	15.8	12.6 **	29.6	21.5 **	5.6	4.8 *
Change		**0**		**0**		**21**		**14**		**7**		**18**
States Improved		0		0		13		10		2		10
States Worsened		0		0		8		4		5		8

Notes: * denotes a change of at least 0.5 standard deviations; ** denotes a change of 1.0 standard deviation or more.

APPENDIX EXHIBIT F2. HEALTHY LIVES: DIMENSION RANKING AND INDICATOR RATES (CONTINUED)

	Adults with poor health-related quality of life		Adults who smoke		Adults who are obese		Children who are overweight or obese	Adults ages 18–64 who have lost six or more teeth	
	2013	2014	2013	2014	2013	2014	2011/12	2012	2014
United States	**26%**	**27%**	**18%**	**17%**	**29%**	**29%**	**31%**	**10%**	**10%**
Alabama	31	33 *	21	20	33	35 *	35	17	17
Alaska	24	24	22	19 *	28	30 *	30	9	9
Arizona	24	28 **	16	15	28	30 *	37	10	9
Arkansas	33	32	25	24	37	38	34	17	17
California	29	28	11	12	25	25	30	7	7
Colorado	23	24	17	14 *	22	21	23	7	7
Connecticut	21	25 **	15	14	25	26	30	8	8
Delaware	25	24	19	19	31	31	32	10	11
District of Columbia	21	19 *	18	15 *	23	21 *	35	7	7
Florida	28	29	16	17	27	27	28	11	11
Georgia	27	26	18	16 *	31	31	35	13	12
Hawaii	20	22 *	13	13	23	24	27	6	7
Idaho	23	23	17	15 *	30	30	28	9	8
Illinois	22	24 *	18	16 *	30	29	34	9	8
Indiana	26	28 *	21	22	32	34 *	31	13	14
Iowa	22	22	19	18	32	31	28	9	10
Kansas	23	24	20	17 *	31	32	30	10	9
Kentucky	32	34 *	25	25	34	33	36	16	18 *
Louisiana	30	29	23	23	33	36 *	40	17	14 *
Maine	25	27 *	20	19	29	29	30	14	13
Maryland	22	23	16	14 *	29	30	32	9	9
Massachusetts	22	25 *	16	14 *	24	23	31	9	10
Michigan	28	26 *	21	21	32	30 *	33	11	10
Minnesota	20	20	17	16	26	27	27	7	7
Mississippi	31	30	24	22 *	37	37	40	18	19
Missouri	28	25 *	22	20 *	31	31	28	12	13
Montana	25	25	19	19	25	26	29	11	11
Nebraska	22	21	18	17	30	31	29	8	8
Nevada	25	26	19	16 *	27	28	33	11	8 *
New Hampshire	22	22	16	17	27	27	26	10	10
New Jersey	22	23	15	14	27	27	25	9	10
New Mexico	29	30	19	18	28	30 *	33	10	10
New York	25	25	16	14 *	25	27 *	32	10	9
North Carolina	27	27	20	18 *	30	31	31	13	13
North Dakota	20	20	21	19 *	31	33 *	36	9	7 *
Ohio	26	27	22	21	31	32	31	13	13
Oklahoma	30	30	23	21 *	34	34	34	14	14
Oregon	26	28 *	17	16	27	28	26	10	8 *
Pennsylvania	24	27 *	20	19	30	31	26	11	10
Rhode Island	25	24	17	16	27	27	28	9	7 *
South Carolina	28	29	21	21	33	33	39	15	15
South Dakota	21	21	19	18	30	31	27	9	10
Tennessee	31	32	23	23	35	33 *	34	18	16 *
Texas	24	26 *	15	14	32	32	37	8	7
Utah	20	21	10	9	24	25	22	6	6
Vermont	22	24 *	16	16	25	25	25	11	10
Virginia	23	24	18	19	27	29 *	30	11	10
Washington	28	27	16	15	27	28	26	8	8
West Virginia	34	34	27	26	37	37	34	23	22
Wisconsin	24	24	18	17	29	31 *	29	11	10
Wyoming	23	23	20	19	29	31 *	27	11	10
Change		**16**		**16**		**14**			**7**
States Improved		3		16		3			6
States Worsened		13		0		11			1

Notes: * denotes a change of at least 0.5 standard deviations; ** denotes a change of 1.0 standard deviation or more.

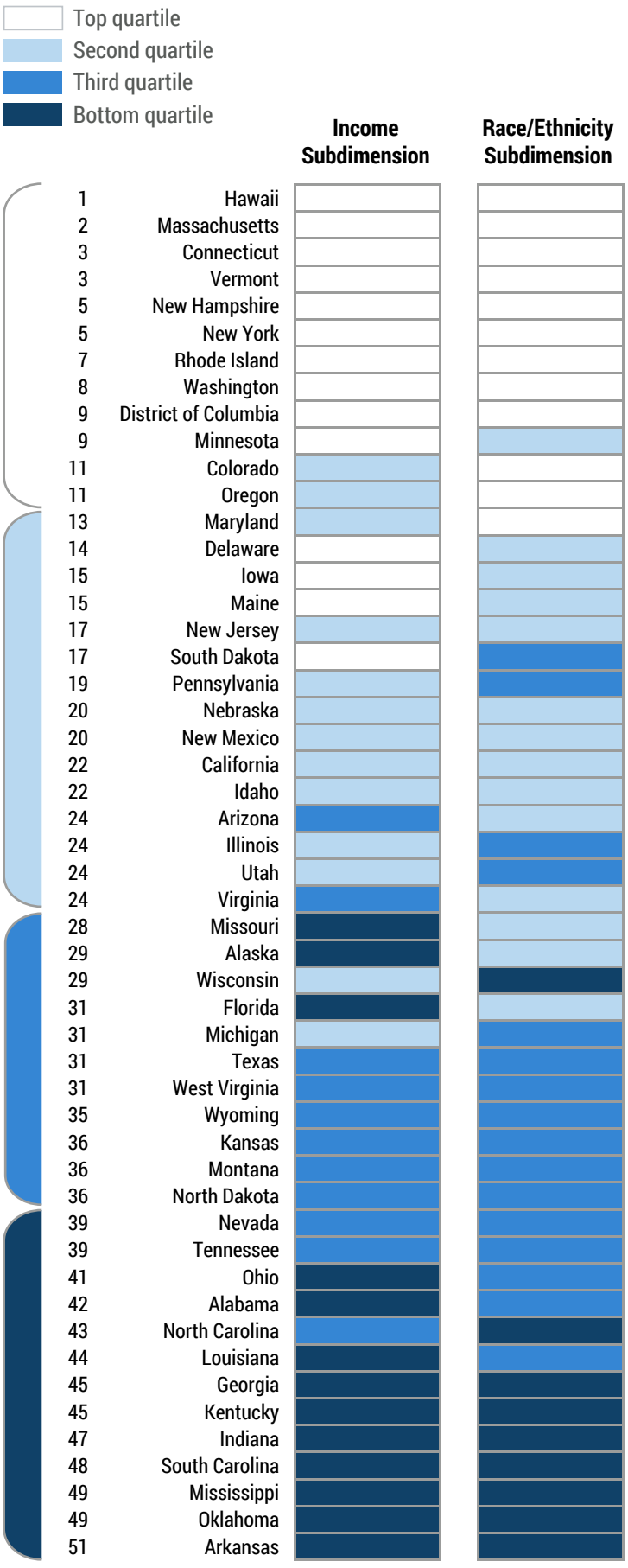
APPENDIX EXHIBIT F3. MORTALITY AMENABLE TO HEALTH CARE BY RACE, DEATHS PER 100,000 POPULATION, 2010–11 AND 2012–13

	Total				White				Black			
	2010-11	2012-13	Change in Rate	2015 Rank	2010-11	2012-13	Change in Rate	2015 Rank	2010-11	2012-13	Change in Rate	2015 Rank
United States	**85**	**84**	**-1**	**--**	**78**	**77**	**-1**	**--**	**161**	**155**	**-6**	**--**
Alabama	112	111	-1	46	96	97	1	43	175	166	-9	35
Alaska	72	72	0	18	63	64	1	14	83	98	15	2
Arizona	74	72	-2	18	70	69	-1	21	131	127	-4	12
Arkansas	116	119	3	48	107	111	4	50	196	197	1	43
California	73	72	-1	18	72	72	0	26	154	148	-6	22
Colorado	62	59	-3	4	59	56	-3	3	122	106	-16	7
Connecticut	64	61	-3	6	58	57	-1	4	113	109	-4	10
Delaware	88	85	-3	31	80	75	-5	29	138	133	-5	13
District of Columbia	130	124	-6	50	49	41	-8	1	190	186	-4	39
Florida	81	80	-1	28	78	77	-1	34	142	139	-3	15
Georgia	103	100	-3	42	87	86	-1	38	160	151	-9	23
Hawaii	70	75	5	22	59	59	0	6	70	106	36	7
Idaho	66	67	1	12	66	68	2	20	--	--	--	--
Illinois	90	87	-3	32	79	76	-3	32	183	178	-5	37
Indiana	93	91	-2	34	89	87	-2	39	160	159	-1	29
Iowa	73	72	-1	18	72	70	-2	22	146	151	5	23
Kansas	78	78	0	25	75	75	0	29	141	147	6	21
Kentucky	107	106	-1	44	104	104	0	48	164	155	-9	27
Louisiana	121	123	2	49	100	101	1	45	185	189	4	40
Maine	65	62	-3	8	66	63	-3	12	--	99	--	3
Maryland	92	89	-3	33	76	76	0	32	145	135	-10	14
Massachusetts	64	60	-4	5	62	60	-2	7	104	90	-14	1
Michigan	92	91	-1	34	79	77	-2	34	189	190	1	42
Minnesota	57	56	-1	1	55	53	-2	2	101	100	-1	5
Mississippi	133	137	4	51	104	109	5	49	198	198	0	44
Missouri	95	95	0	40	88	89	1	42	175	166	-9	35
Montana	69	70	1	16	66	66	0	16	--	--	--	--
Nebraska	66	65	-1	11	64	62	-2	10	139	141	2	18
Nevada	94	92	-2	36	98	97	-1	43	147	145	-2	20
New Hampshire	60	58	-2	3	61	60	-1	7	88	--	--	--
New Jersey	79	75	-4	22	73	71	-2	24	155	144	-11	19
New Mexico	78	79	1	26	73	72	-1	26	145	106	-39	7
New York	82	79	-3	26	73	71	-2	24	144	140	-4	16
North Carolina	94	93	-1	37	81	81	0	36	156	151	-5	23
North Dakota	70	70	0	16	65	66	1	16	--	--	--	--
Ohio	96	94	-2	39	88	87	-1	39	170	164	-6	33
Oklahoma	114	118	4	47	108	113	5	51	193	189	-4	40
Oregon	65	62	-3	8	66	63	-3	12	106	112	6	11
Pennsylvania	86	82	-4	30	78	75	-3	29	171	162	-9	32
Rhode Island	73	68	-5	13	73	70	-3	22	113	102	-11	6
South Carolina	103	99	-4	41	85	83	-2	37	163	156	-7	28
South Dakota	75	75	0	22	67	66	-1	16	--	--	--	--
Tennessee	110	110	0	45	101	101	0	45	183	179	-4	38
Texas	93	93	0	37	86	88	2	41	171	164	-7	33
Utah	62	61	-1	6	61	60	-1	7	115	161	46	31
Vermont	58	57	-1	2	58	57	-1	4	--	--	--	--
Virginia	83	81	-2	29	72	72	0	26	147	140	-7	16
Washington	64	62	-2	8	63	62	-1	10	111	99	-12	3
West Virginia	105	103	-2	43	104	103	-1	47	159	154	-5	26
Wisconsin	72	69	-3	15	67	64	-3	14	175	160	-15	30
Wyoming	76	68	-8	13	75	67	-8	19	--	--	--	--

Notes: * denotes a change of at least 0.5 standard deviations; ** denotes a change of 1.0 standard deviation or more.

APPENDIX EXHIBIT G1. EQUITY: DIMENSION AND SUBDIMENSION RANKING

Overall performance, 2015



APPENDIX EXHIBIT G2. EQUITY : SUMMARY OF INDICATOR CHANGE OVER TIME

	Total			Race/Ethnicity			Income		
	Number of indicators improved	Number of indicators with data	Percent of indicators improved	Number of indicators improved	Number of indicators with data	Percent of indicators improved	Number of indicators improved	Number of indicators with data	Percent of indicators improved
Alabama	10	27	37%	5	12	42%	5	15	33%
Alaska	9	26	35%	6	11	55%	3	15	20%
Arizona	18	28	64%	8	13	62%	10	15	67%
Arkansas	10	27	37%	2	12	17%	8	15	53%
California	14	28	50%	8	13	62%	6	15	40%
Colorado	12	28	43%	6	13	46%	6	15	40%
Connecticut	13	28	46%	2	13	15%	11	15	73%
Delaware	11	28	39%	4	13	31%	7	15	47%
District of Columbia	15	27	56%	6	12	50%	9	15	60%
Florida	14	28	50%	8	13	62%	6	15	40%
Georgia	10	28	36%	5	13	38%	5	15	33%
Hawaii	9	25	36%	1	10	10%	8	15	53%
Idaho	9	27	33%	3	12	25%	6	15	40%
Illinois	18	28	64%	8	13	62%	10	15	67%
Indiana	10	27	37%	6	12	50%	4	15	27%
Iowa	7	27	26%	4	12	33%	3	15	20%
Kansas	8	28	29%	1	13	8%	7	15	47%
Kentucky	13	27	48%	5	12	42%	8	15	53%
Louisiana	13	27	48%	6	12	50%	7	15	47%
Maine	5	24	21%	1	9	11%	4	15	27%
Maryland	13	28	46%	6	13	46%	7	15	47%
Massachusetts	14	28	50%	6	13	46%	8	15	53%
Michigan	8	27	30%	1	12	8%	7	15	47%
Minnesota	11	27	41%	4	12	33%	7	15	47%
Mississippi	7	28	25%	4	13	31%	3	15	20%
Missouri	11	27	41%	7	12	58%	4	15	27%
Montana	12	28	43%	6	13	46%	6	15	40%
Nebraska	10	28	36%	5	13	38%	5	15	33%
Nevada	14	27	52%	5	12	42%	9	15	60%
New Hampshire	8	24	33%	2	9	22%	6	15	40%
New Jersey	14	28	50%	6	13	46%	8	15	53%
New Mexico	9	28	32%	2	13	15%	7	15	47%
New York	17	28	61%	8	13	62%	9	15	60%
North Carolina	18	27	67%	8	12	67%	10	15	67%
North Dakota	8	27	30%	5	12	42%	3	15	20%
Ohio	8	28	29%	5	13	38%	3	15	20%
Oklahoma	16	28	57%	8	13	62%	8	15	53%
Oregon	15	28	54%	7	13	54%	8	15	53%
Pennsylvania	7	28	25%	2	13	15%	5	15	33%
Rhode Island	19	28	68%	7	13	54%	12	15	80%
South Carolina	6	28	21%	3	13	23%	3	15	20%
South Dakota	11	28	39%	6	13	46%	5	15	33%
Tennessee	13	26	50%	5	11	45%	8	15	53%
Texas	12	28	43%	4	13	31%	8	15	53%
Utah	7	26	27%	2	11	18%	5	15	33%
Vermont	9	24	38%	3	9	33%	6	15	40%
Virginia	12	28	43%	7	13	54%	5	15	33%
Washington	11	28	39%	5	13	38%	6	15	40%
West Virginia	13	27	48%	4	12	33%	9	15	60%
Wisconsin	6	27	22%	2	12	17%	4	15	27%
Wyoming	10	26	38%	7	11	64%	3	15	20%

APPENDIX EXHIBIT H1. SCORECARD INDICATOR DESCRIPTIONS AND SOURCE NOTES

1. Percent of adults ages 19-64 uninsured: Authors' analysis of 2013 and 2014 1-year American Community Survey (ACS) Public Use Micro Sample (PUMS)(U.S. Census Bureau, ACS PUMS, 2013, 2014).

2. Percent of children ages 0-18 uninsured: Authors' analysis of 2013 and 2014 1-year American Community Survey (ACS) Public Use Micro Sample (PUMS)(U.S. Census Bureau, ACS PUMS, 2013, 2014).

3. Percent of adults who went without care because of cost in the past year: Authors' analysis of 2013 and 2014 Behavioral Risk Factor Surveillance System (NCCDPHP, BRFSS 2013, 2014).

4. Percent of individuals under age 65 with high out-of-pocket medical spending relative to their annual income: Out-of-pocket medical expenses equaled 10 percent or more of income, or five percent or more of income if low-income (under 200% of Federal Poverty Level), not including health insurance premiums. C. Solis-Roman, Robert F. Wagner School of Public Service, New York University, analysis of 2014 and 2015 Current Population Survey, Annual Social and Economic Supplement (U.S. Census Bureau, CPS ASES 2014, 2015).

5. At-risk adults without a routine doctor visit in past two years: Percent of adults age 50 or older, or in fair or poor health, or ever told they have diabetes or pre-diabetes, acute myocardial infarction, heart disease, stroke, or asthma who did not visit a doctor for a routine checkup in the past two years. Authors' analysis of 2013 and 2014 Behavioral Risk Factor Surveillance System (NCCDPHP, BRFSS 2013, 2014).

6. Percent of adults without a dental visit in the past year: Percent of adults who did not visit a dentist, or dental clinic within the past year. Authors' analysis of 2012 and 2014 Behavioral Risk Factor Surveillance System (NCCDPHP, BRFSS 2012, 2014).

7. Percent of adults with a usual source of care: Percent of adults ages 18 and older who have one (or more) person they think of as their personal healthcare provider. Authors' analysis of 2013 and 2014 Behavioral Risk Factor Surveillance System (NCCDPHP, BRFSS 2013, 2014).

8. Percent of adults age 50 and older received recommended screening and preventive care: Percent of adults age 50 and older who have received: sigmoidoscopy or colonoscopy in the last ten years or a fecal occult blood test in the last two years; a mammogram in the last two years (women only); a pap smear in the last three years (women only); and a flu shot in the past year and a pneumonia vaccine ever (age 65 and older only). Authors' analysis of 2012 and 2014 Behavioral Risk Factor Surveillance System (NCCDPHP, BRFSS 2012, 2014).

9. Percent of children with a medical home: Percent of children who have a personal doctor or nurse, have a usual source for sick and well care, receive family-centered care, have no problems getting needed referrals, and receive effective care coordination when needed. For more information, see www.childhealthdata.org. Authors' analysis of 2011/12 National Survey of Children's Health (CAHMI, NSCH 2011/12).

10. Percent of children with a medical and dental preventive care visit in the past year: Percent of children 0-17 with a preventive medical visit and, if ages 1-17, a preventive dental visit in the past year. For more information, see www.childhealthdata.org. Authors' analysis of 2011/12 National Survey of Children's Health (CAHMI, NSCH 2011/12).

11. Percent of children with emotional, behavioral, or developmental problems who received needed mental health care in the past year: Percent of children ages 2-17 who had any kind of emotional, developmental, or behavioral problem that required treatment or counseling and who received treatment from a mental health professional (as defined) during the past 12 months. For more information, see www.childhealthdata.org. Authors' analysis of 2011/12 National Survey of Children's Health (CAHMI, NSCH 2011/12).

12. Percent of children ages 19-35 months who received all recommended doses of seven key vaccines: Percent of children ages 19-35 months who received at least 4 doses of diphtheria, tetanus, and accellular pertussis (DTaP/DT/DTP) vaccine; at least 3 doses of poliovirus vaccine; at least 1 dose of measles-containing vaccine (including mumps-rubella(MMR) vaccine); full series of Haemophilus influenza type b (Hib) vaccine (3 or 4 doses depending on product type); at least 3 doses of hepatitis B vaccine (HepB); at least 1 dose of varicella vaccine, and at least 4 doses of pneumococcal conjugate vaccine (PCV). Data from the 2012 and 2013 NNational Immunization Survey (NIS) Public Use Files and 2014 as published in the August 28, 2015 Morbidity and Mortality Weekly Report, Vol.64 No.33 (NCHS, NIS 2013, 2014). (2012 and 2013 data used for stratification by income and race/ethnicity for equity analysis.)

13. Percent of Medicare beneficiaries received at least one drug that should be avoided in the elderly: Percent of Medicare beneficiaries age 65 and older received at least one drug from a list of 13 classes of high-risk prescriptions that should be avoided by the elderly. Y. Zhang and S.H. Baik, University of Pittsburgh, analysis of 2011 and 2012 5% sample of Medicare beneficiaries enrolled in stand-alone Medicare Part D plans.

14. Percent of Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure received prescription in an ambulatory care setting that is contraindicated for that condition: Y. Zhang and S.H. Baik, University of Pittsburgh, analysis of 2011 and 2012 5% sample of Medicare beneficiaries enrolled in stand-alone Medicare Part D plans.

15. Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them: Percent of Medicare fee-for-service patients who had a doctor's office or clinic visit in the last 12 months whose health providers always listened carefully, explained things clearly, respected what they had to say, and spent enough time with them. Data from National Consumer Assessment of Healthcare Providers and Systems (CAHPS) Benchmarking Database (AHRQ, CAHPS n.d.), reported in *National Healthcare Quality Report* (AHRQ 2013).

16. Risk-adjusted 30-day mortality among Medicare patients hospitalized for heart attack, heart failure or pneumonia: Risk-standardized, all-cause 30-day mortality rates for Medicare patients age 65 and older hospitalized with a principal diagnosis of heart attack, heart failure or pneumonia between July 2009 and June 2012 and July 2010 and June 2013. All-cause mortality is defined as death from any cause within 30 days after the index admission, regardless of whether the patient dies while still in the hospital or after discharge. Authors' analysis of Medicare enrollment and claims data retrieved April 2015 from CMS Hospital Compare (DHHS n.d.).

17. Percent of hospitalized patients who were given information about what to do during their recovery at home: Authors' analysis of Hospital Consumer Assessment of Healthcare Providers and Systems Survey data (HCAHPS n.d.) retrieved April 2015 from CMS Hospital Compare (DHHS n.d.).

18. Percent of patients 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: Authors' analysis of Hospital Consumer Assessment of Healthcare Providers and Systems Survey data (HCAHPS n.d.) retrieved April 2015 from CMS Hospital Compare (DHHS n.d.).

19. Home health patients who get better at walking or moving around: Percent of all home health episodes in which a person improved at walking or moving around compared to a prior assessment. Episodes for which the patient, at start or resumption of care, was able to ambulate independently are excluded. Authors' analysis of 2013 and 2014 Outcome and Assessment Information Set (CMS, OASIS n.d.) as reported in CMS Home Health Compare. Data retrieved April 2014 and April 2015 from CMS Home Health Compare (DHHS n.d.).

20. Home health patients whose wounds improved or healed after an operation: Percent of all home health episodes in which a person's surgical wound is more fully healed compared to a prior assessment. Episodes for which the patient, at start or resumption of care, did not have any surgical wounds or had only a surgical wound that was unobservable are excluded. Authors' analysis of 2013 and 2014 Outcome and Assessment Information Set (CMS, OASIS n.d.) as reported in CMS Home Health Compare. Data retrieved April 2014 and April 2015 from CMS Home Health Compare (DHHS n.d.).

21. High-risk nursing home residents with pressure sores: Percent of long-stay nursing home residents impaired in bed mobility or transfer, comatose, or malnourished who have pressure sores (Stages 1–4) on target assessment. Authors' analysis of 2013 and 2014 Minimum Data Set (CMS, MDS n.d.) as reported in CMS Nursing Home Compare, 2013 and 2014 single quarter quality measure summary files. Data retrieved October 2015 from CMS Nursing Home Compare.

22. Long-stay nursing home residents with an antipsychotic medication: The percent of long-stay nursing home residents that received an antipsychotic medication, excluding residents with Schizophrenia, Tourette's syndrome, and Huntington's disease. Authors' analysis of 2013 and 2014 Minimum Data Set (CMS, MDS n.d.) as reported in CMS Nursing Home Compare, 2013 and 2014 single quarter quality measure summary files. Data retrieved October 2015 from CMS Nursing Home Compare.

23. Hospital admissions for pediatric asthma, per 100,000 children (ages 2-17): Excludes patients with cystic fibrosis or anomalies of the respiratory system, and transfers from other institutions. Authors' analysis of 2011 and 2012 Healthcare Cost and Utilization Project State Inpatient Databases; not all states participate in HCUP. Estimates for total U.S. are from the Nationwide Inpatient Sample (AHRQ, HCUPT-SID 2011, 2012). Reported in the *National Healthcare Quality Report* (AHRQ 2011, 2012).

24. Hospital admissions for ambulatory care-sensitive conditions, per 1,000 beneficiaries:

Medicare beneficiaries ages 65-74:

Medicare beneficiaries ages 75 and older:

Hospital admissions of fee-for-service Medicare beneficiaries age 65-74 and 75 and older for one of the following eight ambulatory care–sensitive (ACS) conditions: long-term diabetes complications, lower extremity amputation among patients with diabetes, asthma or chronic obstructive pulmonary disease, hypertension, congestive heart failure, dehydration, bacterial pneumonia, and urinary tract infection. Authors' analysis of 2007-2013 Chronic Conditions Warehouse (CCW) data, retrieved from the February 2015 CMS Geographic Variation Public Use File (CMS, Office of Information Products and Analytics (OPIDA) 2015).

25. Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries: All hospital admissions among Medicare beneficiaries age 65 and older that were readmitted within 30 days of an acute hospital stay for any cause. A correction was made to account for likely transfers between hospitals. Authors' analysis of 2007-2013 Chronic Conditions Warehouse (CCW) data, retrieved from the February 2015 CMS Geographic Variation Public Use File (CMS, Office of Information Products and Analytics (OPIDA) 2015).

26. Percent of short-stay nursing home residents readmitted within 30 days of hospital discharge to the nursing home: Percent of newly admitted nursing home residents (never been in a facility before) who are re-hospitalized within 30 days of being discharged to nursing home. V.Mor, Brown University, analysis of 2010 and 2012 Medicare enrollment data and Medicare Provider and Analysis Review (CMS, MEDPAR 2010, 2012).

27. Percent of long-stay nursing home residents hospitalized within a six-month period: Percent of long-stay residents (residing in a nursing home for at least 90 consecutive days) who were ever hospitalized within six months of baseline assessment. V.Mor, Brown University, analysis of 2010 and 2012 Medicare enrollment data, Medicare Provider and Analysis Review File (CMS, MEDPAR 2010, 2012).

28. Home health patients also enrolled in Medicare with a hospital admission: Percent of acute care hospitalization for home health episodes that occurred in 2013 and 2014. Authors' analysis data from CMS Medicare claims data retrieved April 2014 and April 2015 from CMS Home Health Compare (DHHS n.d.).

29. Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries: Potentially avoidable emergency department visits were those that, based on diagnoses recorded during the visit and the health care service the patient received, were considered to be either non-emergent (care was not needed within 12 hours), or emergent (care needed within 12 hours) but that could have been treated safely and effectively in a primary care setting. This definition excludes any emergency department visit that resulted in an admission, as well as emergency department visits where the level of care provided in the ED was clinically indicated. J. Zheng, Harvard University, analysis of 2012 and 2013 Medicare Enrollment and Claims Data 20% sample, Chronic Conditions Warehouse (CMS, CCW 2012, 2013), using the New York University Center for Health and Public Service Research emergency department algorithm developed by John Billings.

30. Total single premium per enrolled employee at private-sector establishments that offer health insurance: Data from Medical Expenditure Panel Survey–Insurance Component (AHRQ, MEPS-IC 2008, 2013, 2014).

31. Total Medicare (Parts A&B) reimbursements per enrollee: Total Medicare fee-for-service reimbursements include payments for both Part A and Part B but exclude Part D (prescription drug costs) and extra CMS payments for graduate medical education and for treating low-income patients. Reimbursements reflect only the age 65 and older Medicare fee-for-service population. Authors' analysis of 2007-2013 Chronic Conditions Warehouse (CCW) data, retrieved from the February 2015 CMS Geographic Variation Public Use File (CMS, Office of Information Products and Analytics (OPIDA) 2015).

32. Mortality amenable to health care, deaths per 100,000 population: Number of deaths before age 75 per 100,000 population that resulted from causes considered at least partially treatable or preventable with timely and appropriate medical care (see list), as described in Nolte and McKee (Nolte and McKee, BMJ 2003). Authors' analysis of mortality data from CDC restricted-use Multiple Cause-of-Death file and U.S. Census Bureau population data, 2004-2013 (NCHS, MCD n.d.).

Causes of death	Age
Intestinal infections	0–14
Tuberculosis	0–74
Other infections (diphtheria, tetanus, septicaemia, poliomyelitis)	0–74
Whooping cough	0–14
Measles	1–14
Malignant neoplasm of colon and rectum	0–74
Malignant neoplasm of skin	0–74
Malignant neoplasm of breast	0–74
Malignant neoplasm of cervix uteri	0–74
Malignant neoplasm of cervix uteri and body of uterus	0–44
Malignant neoplasm of testis	0–74
Hodgkin's disease	0–74
Leukemia	0–44
Diseases of the thyroid	0–74
Diabetes mellitus	0–49
Epilepsy	0–74
Chronic rheumatic heart disease	0–74
Hypertensive disease	0–74
Cerebrovascular disease	0–74
All respiratory diseases (excluding pneumonia and influenza)	1–14
Influenza	0–74
Pneumonia	0–74
Peptic ulcer	0–74
Appendicitis	0–74
Abdominal hernia	0–74
Cholelithiasis and cholecystitis	0–74
Nephritis and nephrosis	0–74
Benign prostatic hyperplasia	0–74
Maternal death	All
Congenital cardiovascular anomalies	0–74
Perinatal deaths, all causes, excluding stillbirths	All
Misadventures to patients during surgical and medical care	All
Ischaemic heart disease: 50% of mortality rates included	0–74

33. Years of potential life lost before age 75: Robert Wood Johnson Foundation analysis of National Vital Statistics System Mortality Data, 2012 and 2013, using the Centers for Disease Control and Prevention (CDC) National Center for Injury Prevention and Control Web-based Injury Statistics Query and Reporting System (WISQARS). Retrieved September 2015 from Robert Wood Johnson Foundation National DataHub. (NVSS 2012 and 2013).

34. Breast cancer deaths per 100,000 female population: Authors' analysis of NVSS–Mortality Data, 2012 and 2013 (NCHS, NVSS n.d.), retrieved using the CDC Wide-ranging OnLine Data for Epidemiologic Research (WONDER) (NVSS 2012 and 2013).

35. Colorectal cancer deaths per 100,000 population: Authors' analysis of NVSS–Mortality Data, 2012 and 2013 (NCHS, NVSS n.d.), retrieved using the CDC Wide-ranging OnLine Data for Epidemiologic Research (WONDER) (NVSS 2012 and 2013).

36. Suicide deaths per 100,000 population: Authors' analysis of NVSS–Mortality Data 2012 and 2013 (NCHS NVSS), retrieved using the CDC Wide-ranging OnLine Data for Epidemiologic Research (WONDER) (NVSS 2012 and 2013).

37. Infant mortality, deaths per 1,000 live births: Authors' analysis of National Vital Statistics System–Linked Birth and Infant Death Data, 2012 and 2013 (NCHS, NVSS), retrieved using the CDC Wide-ranging OnLine Data for Epidemiologic Research (WONDER) (NVSS 2012 and 2013).

38. Percent of adults ages 18–64 report being in fair or poor health, or who have activity limitations because of physical, mental, or emotional problems: Authors' analysis of 2013 and 2014 Behavioral Risk Factor Surveillance System (NCCDPHP, BRFSS 2013, 2014).

39. Percent of adults who smoke: Percent of adults age 18 and older who ever smoked 100+ cigarettes (five packs) and currently smoke every day or some days. Authors' analysis of 2013 and 2014 Behavioral Risk Factor Surveillance System (NCCDPHP, BRFSS 2013, 2014).

40. Percent of adults ages 18-64 who are obese (Body Mass Index [BMI] ≥ 30): Authors' analysis of 2013 and 2014 Behavioral Risk Factor Surveillance System (NCCDPHP, BRFSS 2013, 2014).

41. Children (ages 10–17) who are overweight or obese (Body Mass Index [BMI] ≥ 85th percentile): Overweight is defined as an age- and gender-specific body mass index (BMI-forage) between the 85th and 94th percentile of the CDC growth charts. Obese is defined as a BMI-for-age at or above the 95th percentile. BMI was calculated based on parent-reported height and weight. For more information, see www.nschdata.org. Data from the National Survey of Children's Health, assembled by the Child and Adolescent Health Measurement Initiative (CAHMI, NCHS 2011/2012).

42. Percent of adults ages 18–64 who have lost 6 or more teeth due to tooth decay, infection, or gum disease: Authors' analysis of 2012 and 2014 Behavioral Risk Factor Surveillance System (NCCDPHP, BRFSS 2012, 2014).

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