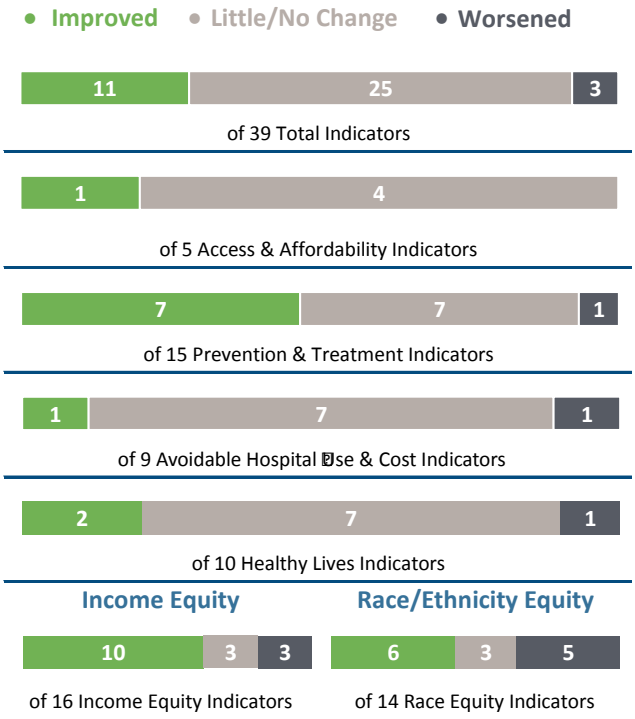
Commonwealth Fund Scorecard on State Health System Performance, 2017

Connecticut

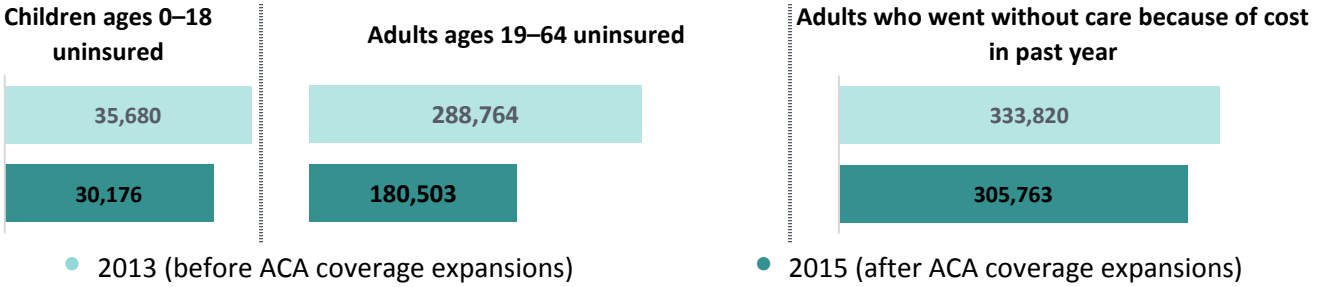
Connecticut's Scorecard rankings (a)

	2017	Baseline
Overall	8	7
Access & Affordability	5	3
Prevention & Treatment	5	11
Avoidable Hospital Use & Cost	39	32
Healthy Lives	1	3
Equity	8	4

Number of indicators where Connecticut improved, worsened or stayed the same (b)



Before and after implementation of the Affordable Care Act (ACA) coverage expansions



Estimated impact of state improvement (c)

If Connecticut improved to the level of the best-performing state for this indicator, then:

112,017	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
33,835	more adults would receive age- and gender-appropriate recommended cancer screenings
0	more children (ages 19-35 months) would receive all recommended vaccines
7,125	fewer Medicare beneficiaries would receive an unsafe medication
181	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
22,035	fewer emergency department visits for nonemergent or primary-care-treatable conditions would occur among Medicare beneficiaries

Table 1. State Health System Performance Indicator Data by Dimension

Dimension and indicator	Data year	State rate	U.S. average	Best state rate	State ranking	Data year	State rate	U.S. average	Substantial change over time (a)
ACCESS & AFFORDABILITY	**2017 Scorecard**					**Baseline**			
Adults ages 19–64 uninsured	2015	8	13	4	8	2013	13	20	Improved
Children ages 0–18 uninsured	2015	4	5	1	11	2013	4	8	No Change
Adults who went without care because of cost in past year	2015	11	13	7	13	2013	12	16	No Change
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2014-15	11	14	10	6	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2015	10	13	6	7	2013	10	14	No Change
Adults without a dental visit in past year	2014	12	16	11	3	2012	11	15	No Change
PREVENTION & TREATMENT	**2017 Scorecard**					**Baseline**			
Adults with a usual source of care	2015	85	78	89	7	2013	85	76	No Change
Adults with age- and gender-appropriate cancer screenings	2014	75	68	77	2	2012	75	69	No Change
Adults with age-appropriate vaccines	2015	43	38	51	10	2013	37	36	Improved
Children with a medical home	2011/12	58	54	69	21	--	--	--	--
Children with a medical and dental preventive care visit in the past year	2011/12	79	68	81	2	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	65	61	86	19	--	--	--	--
Children ages 19–35 months who received all recommended doses of seven key vaccines	2015	81	72	81	1	2013	78	70	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2014	10	13	7	11	2012	13	17	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2014	14	18	10	14	2012	15	21	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2014	77	76	80	9	2013	77	76	No Change
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, pneumonia, or stroke	07/2012 - 06/2015	13.9	14.5	13.1	6	07/2010 - 06/2013	13.0	13.2	Worsened
Central line-associated bloodstream infections (CLABSI), Standardized Infection Ratio	2014	0.45	0.50	0.23	16	2013	0.56	0.54	Improved
Hospitalized patients given information about what to do during their recovery at home	2015	87	87	90	23	2013	85	86	Improved
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	2015	65	68	74	44	2013	65	68	No Change
Home health patients who get better at walking or moving around	2015	63	66	72	42	2013	59	61	Improved
Home health patients whose wounds improved or healed after an operation	2015	91	90	95	10	2013	90	89	No Change
High-risk nursing home residents with pressure sores	2015 (Q2-Q4)	4	6	3	4	2013 (Q2-Q4)	4	6	No Change
Long-stay nursing home residents with an antipsychotic medication	2015 (Q2-Q4)	17	17	8	21	2013 (Q2-Q4)	21	21	Improved

Table 1. State Health System Performance Indicator Data by Dimension (continued)

Dimension and Indicator	Data year	State rate	U.S. average	Best state rate	State ranking	Data year	State rate	U.S. average	Substantial change over time (a)
AVOIDABLE HOSPITAL USE & COST	**2017 Scorecard**					**Baseline**			
Hospital admissions for pediatric asthma, per 100,000 children	2013	126	107	27	32	2011	144	107	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (b)	2014	24	27	12	21	2012	26	29	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (b)	2014	69	66	35	28	2012	75	70	No Change
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2014	33	27	10	39	2012	39	34	Improved
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2014	19	19	11	23	2012	20	20	No Change
Long-stay nursing home residents hospitalized within a six-month period	2014	14	16	5	16	2012	16	17	No Change
Home health patients also enrolled in Medicare with a hospital admission	2015	16.7	16.2	13.9	35	2013	16.0	16.0	Worsened
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2014	193	185	129	35	2012	189	188	No Change
Total reimbursements per enrollee (ages 18–64) with employer-sponsored insurance	2014	$5,246	$4,569	$3,217	47	2013	$5,209	$4,489	No Change
Total Medicare (Parts A & B) reimbursements per beneficiary	2014	$9,014	$8,819	$5,592	38	2012	$8,936	$8,854	No Change
HEALTHY LIVES	**2017 Scorecard**					**Baseline**			
Mortality amenable to health care, deaths per 100,000 population	2013-14	59.7	84.2	54.3	4	2011-12	62	84.0	No Change
Years of potential life lost before age 75	2014	4,986	6,447	4,892	2	2012	5,146	6,412	No Change
Breast cancer deaths per 100,000 female population	2014	17.6	20.6	14.2	6	2012	19.2	21.4	Improved
Colorectal cancer deaths per 100,000 population	2014	11.5	14.3	10.9	2	2012	12.1	14.9	No Change
Suicide deaths per 100,000 population	2014	9.8	13.0	7.8	5	2012	9.9	12.6	No Change
Infant mortality, deaths per 1,000 live births	2013	4.8	6.0	4.2	6	2012	5.3	6.0	No Change
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2015	23	26	20	13	2013	21	26	Worsened
Adults who smoke	2015	13	17	9	3	2013	16	18	Improved
Adults ages 18–64 who are obese (BMI >= 30)	2015	25	29	20	7	2013	25	29	No Change
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	30	31	22	21	--	--	--	--
Adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2014	8	10	6	10	2012	8	10	No Change

Table 2. State Equity Indicator Data

The Equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

Equity Type and Indicator	2017 Scorecard: Data year	Vulnerable group rate	U.S. average	Gap (a)	State ranking	Baseline: Data year	Vulnerable group rate	U.S. average	Gap (a)	Change in vulnerable group rate (b)
LOW-INCOME										
Uninsured ages 19–64	2015	18	13	-5	17	2013	28	20	-8	Improved
Adults who went without care because of cost in past year	2015	20	13	-7	16	2013	20	16	-4	No Change
At risk adults without a doctor visit	2015	13	13	0	15	2013	16	14	-2	Improved
Adults without a dental visit in past year	2014	15	16	1	1	2012	16	15	-1	Improved
Adults without a usual source of care	2015	23	22	-1	21	2013	22	24	2	Worsened
Adults without age- and gender-appropriate cancer screenings	2014	22	32	10	1	2012	29	31	2	Improved
Adults without age-appropriate vaccines	2015	61	62	1	15	2013	68	64	-4	Improved
Children without a medical home	2011/12	58	46	-12	38	--	--	--	--	--
Children without a medical and dental preventive care visit in the past year	2011/12	29	32	3	3	--	--	--	--	--
Children ages 19–35 months without all recommended vaccines (c)	2014	25	28	3	7	2012	25	32	7	No Change
Elderly patients who received a high-risk prescription drug	2014	12	13	1	2	2012	14	17	3	Improved
Hospital admissions for pediatric asthma, per 100,000 children	2013	*	107	*	*	2012	*	143	*	*
Medicare admissions for ambulatory care–sensitive conditions (d)	2014	87	44	-43	27	2012	96	48	-48	Improved
Medicare 30-day hospital readmissions, per 1,000 beneficiaries (d)	2014	71	35	-36	36	2012	83	43	-40	Improved
Potentially avoidable ED visits among Medicare beneficiaries, per 1,000 beneficiaries (d)	2014	338	185	-153	22	2012	327	188	-139	Worsened
Adults with poor health-related quality of life	2015	36	26	-10	10	2013	35	26	-9	Worsened
Adults who smoke	2015	21	17	-4	9	2013	23	18	-5	Improved
Adults who are obese	2015	35	29	-6	17	2013	35	29	-6	No Change
Adults who have lost six or more teeth	2014	14	10	-4	12	2012	18	10	-8	Improved
RACE/ETHNICITY (e)										
Uninsured ages 19–64 (Hispanic ethnicity)	2015	23	13	-10	12	2013	29	20	-9	No Change
Adults who went without care because of cost in past year (Hispanic ethnicity)	2015	25	13	-12	37	2013	25	16	-9	No Change
At risk adults without a doctor visit (Hispanic ethnicity)	2015	14	13	-1	5	2013	18	14	-4	Improved
Adults without a dental visit in past year (black race)	2014	18	16	-2	7	2012	16	15	-1	Worsened
Adults without a usual source of care (Hispanic ethnicity)	2015	32	22	-10	11	2013	33	24	-9	No Change
Adults without age- and gender-appropriate cancer screenings (other race)	2014	26	32	6	2	2012	34	31	-3	Improved
Adults without age-appropriate vaccines (black race)	2015	64	62	-2	11	2013	71	64	-7	Improved
Children without a medical home (Hispanic ethnicity)	2011/12	67	46	-21	41	--	--	--	--	--

Table 2. State Equity Indicator Data (continued)

The Equity profile displays gaps in performance for vulnerable populations for selected indicators. An equity gap is defined as the difference between the U.S. national average for a particular indicator and the rate for the state's most vulnerable group by income and race/ethnicity. For all equity indicators, lower rates are better; therefore, a positive or negative gap value indicates that the state's most vulnerable group is better or worse than the U.S. average for a particular indicator.

Equity Type and Indicator	2017 Scorecard: Data year	2017 Scorecard: Vulnerable group rate	2017 Scorecard: U.S. average	2017 Scorecard: Gap (a)	2017 Scorecard: State ranking	Baseline: Data year	Baseline: Vulnerable group rate	Baseline: U.S. average	Baseline: Gap (a)	Change in vulnerable group rate (b)
RACE/ETHNICITY (continued)										
Children without a medical and dental preventive care visit in the past year (black race)	2011/12	28	32	4	3	--	--	--	--	--
Children ages 19–35 months without all recommended vaccines (other race) (c)	2014	52	28	-24	36	2012	24	32	8	Worsened
Mortality amenable to health care (black race)	2013-14	104	84.2	-19.5	5	2011-12	108.7	84.0	-24.70	Improved
Infant mortality, deaths per 1,000 live births (black race)	2012-13	10.5	6.0	-4.5	19	2010-11	12.4	6.5	-5.9	Improved
Adults with poor health-related quality of life (Hispanic ethnicity)	2015	33	26	-7	24	2013	28	26	-2	Worsened
Adults who smoke (black race)	2015	17	17	0	9	2013	20	18	-2	Improved
Adults who are obese (black race)	2015	39	29	-10	33	2013	31	29	-2	Worsened
Adults who have lost six or more teeth (black race)	2014	14	10	-4	28	2012	12	10	-2	Worsened

Table 3. Summary of Equity Indicator Change

	2017 Scorecard rankings	Indicators with trends	CHANGE IN EQUITY GAP: No change in gap	CHANGE IN EQUITY GAP: Gap narrowed/ vulnerable group improved	CHANGE IN EQUITY GAP: Gap widened/ vulnerable group worsened
Equity Dimension	8	30	6	16	8
Low Income	6	16	3	10	3
Race/Ethnicity	11	14	3	6	5

Notes:

Cover Page. (a) The 2017 Scorecard rankings generally reflect 2014 or 2015 data; Baseline rankings generally reflect 2012 or 2013 data. The Baseline rankings generally align with Baseline rankings reported in the December 2015 State Scorecard report. The 2017 State Scorecard added or revised several performance measures relative to what was reported in the December 2015 Scorecard report; overall and dimension rankings are not strictly comparable between these reports. **(b)** Improved or worsened denotes a change of at least one-half (0.5) of a standard deviation (a statistical measure of variation) larger than the indicator's distribution among all states over the two time points. No change denotes no change in rate or a change of less than one-half of a standard deviation. The Equity dimension is separated into two subdimensions, Income and Race/Ethnicity. For interpretation of changes in the Equity dimension, see Table 2, note (b) below. **(c)** The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for selected Scorecard indicators. Benchmark states, those with the best rate, have an estimated impact of zero (0).

Table 1. (*) Data not available for this state. **(--)** Historical data not available or not comparable over time. **(a)** Substantial change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations. **(b)** Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions are displayed here separately for two age ranges, but counted as a single indicator in tallies of improvement.

Table 2. (*) Data not available for this state. **(--)** Historic data not available or not comparable over time. **(a)** Gaps measure the difference between the most vulnerable group in this state, by income or race/ethnicity, and the U.S. national average for each indicator. **(b)** Improvement indicates that the gap between this state's vulnerable population and the U.S. average has narrowed AND that the vulnerable group rate in this state has improved. Worsening indicates that the gap between this state's vulnerable population and the U.S. average has widened AND that the vulnerable group rate in this state has worsened. No change indicates that either the gap narrowed but the vulnerable group rate worsened, or the vulnerable group rate improved but the gap widened. **(c)** Different data years were used in the equity analysis than were reported for the entire state population rate. **(d)** Measures constructed from 20% Medicare sample for the equity analysis. Data for equity analysis provided by A. Jha, Harvard School of Public health. Refer to the 2017 State Scorecard report appendix for source information for entire state population rate. **(e)** Gaps are based on the state's nonwhite population with the largest observed difference from the U.S. average. The racial/ethnic minority with the largest gap is noted for each indicator. Race/ethnicity is generally defined as white race (non-Hispanic), black race (non-Hispanic), Hispanic ethnicity (can include individuals of any race), and other race (non-Hispanic) which includes individuals who self-identify as being some race/ethnicity not otherwise categorized.