

# Washington

## Commonwealth Fund Scorecard on State Health System Performance, 2014

RANKING SUMMARY	2014	2009
	Scorecard	Revised <sup>a</sup>
<b>OVERALL</b>	<b>15</b>	<b>18</b>
Access & Affordability	25	24
Prevention & Treatment	35	38
Avoidable Hospital Use & Cost	5	4
Equity <sup>b</sup>	20	31
Healthy Lives	7	11

CHANGE IN RATES	2014	
	Count	Percent
Indicators with trends	34	100%
State rate improved <sup>c</sup>	9	26%
State rate worsened <sup>c</sup>	7	21%
No change in state rate <sup>d</sup>	18	53%

DISTRIBUTION OF RATES	2014	
	Count	Percent
Total indicators	42	100%
Top 5 states	4	10%
Top quartile	14	33%
2nd quartile	15	36%
3rd quartile	7	17%
Bottom quartile	6	14%
Bottom 5 states	2	5%

EQUITY	RANKING		CHANGE IN EQUITY GAP			
	2014	2009	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
	Scorecard	Revised <sup>a</sup>				
<b>Equity Dimension</b>	20	31	16	4	7	5
Low-Income	25	25	7	2	2	3
Race/Ethnicity	15	36	9	2	5	2

ESTIMATED IMPACT		
If Washington improved its performance to the level of the best-performing state for this indicator, then:		
Insured adults	633,378	more individuals (under age 65) would be covered by health insurance, and would be more likely to receive health care when needed
Adults with a usual source of care	624,052	more adults (age 18 and older) would have a usual source of care to help ensure that care is coordinated and accessible when needed
Adult preventive care	199,905	more adults (age 50 and older) would receive recommended preventive care, such as colon cancer screenings, mammograms, Pap smears, and flu shots
Children with a medical home	161,677	more children (ages 0–17) would have a medical home to help ensure that care is coordinated and accessible when needed
High-risk drug	17,382	fewer Medicare beneficiaries would receive an unsafe medication
Mortality amenable to health care	518	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
Hospital readmissions	1,234	fewer hospital readmissions would occur among Medicare beneficiaries (age 65 and older)
Potentially avoidable ED visits	13,636	fewer emergency department visits for nonemergent or primary care-treatable conditions would occur among Medicare beneficiaries
Tooth loss from decay or disease	130,062	fewer adults, ages 18–64, would have lost six or more teeth because of tooth decay, infection, or gum disease

NOTES
<b>a</b> Rates from the 2009 edition have been revised to match methodology used in the 2014 edition.
<b>b</b> The equity dimension was ranked based on gaps between the most vulnerable group and the U.S. national average for selected indicators.
<b>c</b> Denotes a change of at least 0.5 standard deviations.
<b>d</b> Denotes a change of less than 0.5 standard deviations.
<b>EQUITY:</b> 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.
<b>ESTIMATED IMPACT:</b> The table shows the estimated impact if this state's performance improved to the rate of the best-performing state for eight <i>Scorecard</i> indicators. (Refer to this state's individual performance profile to see actual rates.) These examples illustrate only a few important opportunities for improvement. Because some indicators affect the same individuals, these numbers should not be added.

Dimension and Indicator	Year	All-State			Rank	Year	All-State		Change in Rate <sup>1</sup>	Meaningful Change Over Time <sup>2</sup>
		State Rate	Median	Best State			State Rate	Median		
<b>ACCESS &amp; AFFORDABILITY</b>										
		2014 Scorecard				2009 Revised Scorecard <sup>a</sup>				
Adults ages 19–64 uninsured	2011-12	20	20	5	27	2007-08	15	17	-5	Worsened
Children ages 0–18 uninsured	2011-12	7	8	3	13	2007-08	7	9	0	No Change
Adults who went without care because of cost in past year	2012	15	15	9	21	2007	12	12	-3	Worsened
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2011-12	16	16	10	26	--	--	--	--	--
At-risk adults without a routine doctor visit in past two years	2012	18	14	6	40	2007	17	14	-1	No Change
Adults without a dental visit in past year	2012	14	15	10	17	2006	13	14	-1	No Change
<b>PREVENTION &amp; TREATMENT</b>										
		2014 Scorecard				2009 Revised Scorecard <sup>a</sup>				
Adults with a usual source of care	2012	77	78	89	31	2007	79	82	-2	No Change
Adults ages 50 and older who received recommended screening and preventive care	2012	43	43	52	22	2006	46	44	-3	Worsened
Children with a medical home	2011/12	59	57	69	16	2007	60	61	-1	No Change
Children with a medical and dental preventive care visit in the past year	2011/12	72	69	81	15	--	--	--	--	--
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	54	63	86	42	2007	62	63	-8	Worsened
Children ages 19–35 months who received all recommended doses of seven key vaccines	2012	65	69	80	39	2009	36	43	29	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2011	19	19	12	23	2007	25	28	6	Improved
Medicare beneficiaries with dementia, hip/pelvic fracture, or chronic renal failure who received a prescription drug that is contraindicated for that condition	2011	19	21	14	15	2007	18	19	-1	No Change
Medicare fee-for-service patients whose health provider always listens, explains, shows respect, and spends enough time with them	2013	74	76	80	40	2007	70	75	4	Improved
Risk-adjusted 30-day mortality among Medicare beneficiaries hospitalized for heart attack, heart failure, or pneumonia	07/2008 - 06/2011	13.4	12.8	11.9	49	07/2005 - 06/2008	13.5	12.6	0.1	No Change
Hospitalized patients given information about what to do during their recovery at home	2011	85	84	89	13	2007	81	80	4	Improved
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	2011	65	66	71	33	2007	62	63	3	Improved
Home health patients who get better at walking or moving around	04/2012 - 03/2013	55	59	63	45	--	--	--	--	--
Home health patients whose wounds improved or healed after an operation	04/2012 - 03/2013	88	89	95	30	--	--	--	--	--
High-risk nursing home residents with pressure sores	07/2012 - 03/2013	6	6	3	19	--	--	--	--	--
Long-stay nursing home residents with an antipsychotic medication	04/2012-03/2013	21	21.5	12	21	--	--	--	--	--

Dimension and Indicator	Year	All-State			Rank	Year	All-State		Change in Rate <sup>1</sup>	Meaningful Change Over Time <sup>2</sup>
		State Rate	Median	Best State			State Rate	Median		
<b>AVOIDABLE HOSPITAL USE &amp; COST</b>										
<b>2014 Scorecard</b>					<b>2009 Revised Scorecard<sup>a</sup></b>					
Hospital admissions for pediatric asthma, per 100,000 children	2010	90	114	26	14	2004	92	137	2	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care-sensitive conditions, ages 65-74, per 1,000 beneficiaries (3)	2012	18	27	13	6	2008	22	34	4	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care-sensitive conditions, age 75 and older, per 1,000 beneficiaries (3)	2012	49	68	41	5	2008	59	80	10	Improved
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2012	35	45	26	11	2008	38	51.5	3	No Change
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2010	17	20	12	13	2006	16	20	-1	No Change
Long-stay nursing home residents hospitalized within a six-month period	2010	13	19	7	9	2006	14	19	1	No Change
Home health patients also enrolled in Medicare with a hospital admission	2012	16	17	14	11	--	--	--	--	--
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2011	154	183.5	129	4	--	--	--	--	--
Total single premium per enrolled employee at private-sector establishments that offer health insurance	2012	\$4,864	\$5,501	\$4,180	8	2008	\$3,990	\$4,505	-\$874	Worsened
Total Medicare (Parts A & B) reimbursements per enrollee	2012	\$7,101	\$8,526	\$5,406	8	2008	\$6,571	\$7,942	-\$530	Worsened
<b>HEALTHY LIVES</b>										
<b>2014 Scorecard</b>					<b>2009 Revised Scorecard<sup>a</sup></b>					
Mortality amenable to health care, deaths per 100,000 population	2009-10	65	82	57	6	2004-05	74	90.5	9	No Change
Years of potential life lost before age 75	2010	5,357	6,567	4,900	7	2005	5,895	7,252	538	No Change
Breast cancer deaths per 100,000 female population	2010	21.2	22.2	14.8	18	2005	23.2	23.9	2.0	Improved
Colorectal cancer deaths per 100,000 population	2010	14.1	16.2	12.0	7	2005	15.5	18.1	1.4	Improved
Suicide deaths per 100,000 population	2010	13.9	13.5	6.9	28	2005	12.8	11.8	-1.1	No Change
Infant mortality, deaths per 1,000 live births	2009	4.9	6.4	4.6	3	2004	5.5	6.8	0.6	No Change
Adults ages 18-64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2012	29	27	19	34	2007	26	24	-3	Worsened
Adults who smoke	2012	17	19	10	10	2007	17	19	0	No Change
Adults ages 18-64 who are obese (BMI >= 30)	2012	27	28	21	17	2007	26	27	-1	No Change
Children ages 10-17 who are overweight or obese (BMI >= 85th percentile)	2011/12	26	30.5	22	5	2007	30	31	4	Improved
Percent of adults ages 18-64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2012	8	10	5	9	2006	8	10	0	No Change

Notes:

\* Data not available for this state.

-- Historical data not available or not comparable over time.

(1) The change in rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.

(2) Meaningful change (improvement or worsening) refers to a change between the baseline and current time periods of at least 0.5 standard deviations.

(3) 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.

Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.

Equity Type and Indicator	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap <sup>1</sup>	Rank	Year	Vulnerable Group Rate	U.S. Average (all populations)	Gap <sup>1</sup>	Change in Vulnerable Group Rate <sup>2</sup>	Change in Vulnerable Group Relative to US Average <sup>3</sup>
<b>RACE &amp; ETHNICITY</b>											
Uninsured ages 0–64	2011-12	28	18	-10	20	2007-08	32	17	-15	4	Improved
Adults who went without care because of cost in past year	2012	28	17	-11	26	2007	28	13	-15	0	No Change
At risk adults without a doctor visit	2012	32	14	-18	45	2007	27	14	-13	-5	Worsened
Adults without a usual source of care	2012	44	22	-22	41	2007	46	20	-26	2	Improved
Older adults without recommended preventive care	2012	68	58	-10	28	2006	58	56	-2	-10	Worsened
Children without a medical home	2011/12	57	46	-11	13	2007	80	42	-38	23	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	34	32	-2	10	--	--	--	--	--	--
Mortality amenable to health care	2009-10	108	86	-22	2	2004-05	119	96	-23	11	Improved
Infant mortality, deaths per 1,000 live births	2008-09	7.3	6.5	-0.8	1	2003-04	8.7	6.8	-1.9	1.4	Improved
Adults with poor health-related quality of life	2012	34	27	-7	20	2007	31	24	-7	-3	No Change
<b>LOW-INCOME</b>											
Uninsured ages 0–64	2011-12	31	18	-13	33	2007-08	25	17	-8	-6	Worsened
Adults who went without care because of cost in past year	2012	30	17	-13	30	2007	28	13	-15	-2	No Change
At risk adults without a doctor visit	2012	26	14	-12	44	2007	26	14	-12	0	No Change
Adults without a usual source of care	2012	29	22	-7	34	2007	34	20	-14	5	Improved
Older adults without recommended preventive care	2012	70	58	-12	26	2006	67	56	-11	-3	Worsened
Children without a medical home	2011/12	48	46	-2	7	2007	49	42	-7	1	Improved
Children without a medical and dental preventive care visit in the past year	2011/12	33	32	-1	8	--	--	--	--	--	--
Elderly patients who received a high-risk prescription drug	2010	27	25	-2	21	--	--	--	--	--	--
Adults with poor health-related quality of life	2012	43	27	-16	29	2007	37	24	-13	-6	Worsened

Notes:

\* Data not available for this state.

-- Historical data not available or not comparable over time.

(1) 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.

(2) The change in vulnerable groups rate is expressed such that a positive value indicates performance has improved and a negative value indicates performance has worsened.

(3) 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.

Source: Commonwealth Fund Scorecard on State Health System Performance, 2014.