New Hampshire

2019

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8

18

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38



Ranking Highlights^a

Overall

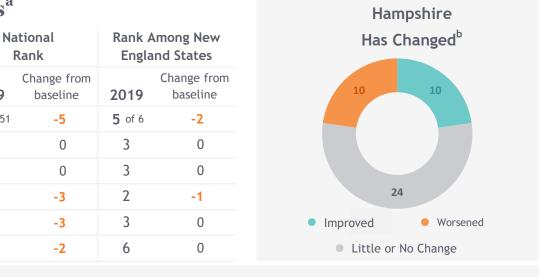
Access & Affordability

Avoidable Use & Cost

Health Care Disparities

Healthy Lives

Prevention & Treatment





Top-Ranked Indicators	Most Improved Indicators
Infant mortality	Home health patients without improved mobility
Adults without a usual source of care	Adults with any mental illness who did not receive treatment
Adults without a dental visit	Diabetic adults without an annual hemoglobin A1c test
Bottom-Ranked Indicators	Indicators That Worsened the Most
Drug poisoning deaths	Suicide deaths
Adults with any mental illness reporting unmet need	Preventable hospitalizations ages 18–64
Home health patients with a hospital admission	Drug poisoning deaths

		Estimated impact of state improvement
Top state in the U.S.	Top state in the New England region	New Hampshire could expect the following gains if performance in the state improved to the top level at these national and regional benchmarks:
38,684	38,684	more adults and children, beyond those who already gained coverage through the ACA, would be insured
21,593	10,796	fewer adults would skip needed care because of its cost
20,086	20,086	more adults would receive age- and gender-appropriate cancer screenings
1,311	1,311	more children (ages 19–35 months) would receive all recommended vaccines
38	0	fewer premature deaths (before age 75) would occur from causes that are potentially treatable or preventable with timely and appropriate care
21,580	6,935	fewer employer-insured adults and elderly Medicare beneficiaries would seek care in emergency departments for nonemergent or primary-care-treatable conditions

Estimated Impact of State Improvement^c

Table 1. State Health System Performance Indicator Data by Dimension

	Data	State	U.S.	Best state	State	Data	State	U.S.	Change over
Dimension and indicator	year	rate	average	rate	ranking	year	rate	average	time ^b
Access & Affordability	-	19 Scoreca	rd	-					
Adults ages 19–64 uninsured	2017	8	12	4	12	2013	16	20	Improved
Children ages 0–18 uninsured	2017	3	5	1	4	2013	4	8	No Change
Adults age 18 and older without a usual source of care	2017	13	23	12	2	2013	12	24	No Change
Adults age 18 and older who went without care because of cost in past year	2017	10	14	8	6	2013	12	16	Improved
ndividuals under age 65 with high out-of- oocket medical costs relative to their annual household income	2016-17	9	10	5	14	2013-14	9	11	No Change
Employee insurance costs as a share of nedian income	2017	5.6	6.9	4.8	10	2013	4.9	6.5	Worsened
Adults age 18 and older without a dental <i>v</i> isit in past year	2016	11	16	10	2	2012	10	15	No Change
Prevention & Treatment		20	19 Scoreca	r d			Baseline		
Adults without all age- and gender- appropriate cancer screenings	2016	27	32	24	6	2012	25	31	No Change
Adults without age-appropriate flu and preumonia vaccines	2017	57	62	54	8	2013	61	64	Improved
Diabetic adults without an annual nemoglobin A1c test	2016	14.8	12	5.6	41	2015	20.9	16.9	Improved
Elderly patients who received a high-risk prescription drug	2015	9	11	5	13				
Children without a medical home	2017	42	51	39	4	2016	42	51	No Change
Children without age-appropriate medical and dental preventive care visits in the bast year	2017	23	32	18	5	2016	21	32	No Change
Children who did not receive needed nental health care	2017	14	22	4	25	2016	5	18	Worsened
Children ages 19–35 months who did not eceive all recommended vaccines	2016	22	29	15	4	2012	20	32	No Change
lospital 30-day mortality	2014-17	13.7	13.9	12.8	15	2010-13	13.3	13.2	Worsened
Central line-associated bloodstream nfections (CLABSI), Standardized Infection Ratio	2016	0.96	0.89	0.36	38	2015	1.04	0.99	No Change
lospitals with lower-than-average patient experience ratings	2017	15	45	9	4				
lome health patients without improved nobility	2017	25	25	20	21	2013	41	39	Improved
Nursing home residents with an antipsychotic medication	2017	15	15	7	16	2013	21	21	Improved
Adults with any mental illness reporting Inmet need	2014-16	25	21	16	46	2009-11	24	21	No Change
Adults with any mental illness who did not receive treatment	2014-16	46	56	42	3	2009-11	57	59	Improved

Table 1. State Health System I	Perform	iance li	ndicato	r Data	by Dim	nension	(conti	nued)	
	Data	State	U.S.	state	State	Data	State	U.S.	Change over
Dimension and indicator	year	rate	average	rate	ranking	year	rate	average	time ^b
Avoidable Hospital Use & Cost		20 1	19 Scoreca	rd			Baseline		
Hospital admissions for pediatric asthma, per 100,000 children ages 2–17	2015		87.2	21.7		2012		142.9	
Potentially avoidable emergency department	nt visits								
Ages 18–64, per 1,000 employer- insured enrollees	2016	131.7	142.2	115.9	11	2015	155.5	159.0	Improved
Age 65 and older, per 1,000 Medicare beneficiaries	2015	183.1	196.9	138.3	18	2012	192.2	187.8	No Change
Admissions for ambulatory care-sensitive c	onditions								
Ages 18–64, per 1,000 employer- insured enrollees	2016	6.3	5.3	5.3	10	2015	3.9	4.6	Worsened
Ages 65–74, per 1,000 Medicare beneficiaries	2017	40.8	43.9	21.7	22	2013	42.4	47.7	No Change
30-day hospital readmissions									
Ages 18–64, per 1,000 employer- insured enrollees	2016	2.9	3.1	2.4	6	2015	2.3	2.9	Worsened
Age 65 and older, per 1,000 Medicare beneficiaries	2017	35.4	41	19.7	20	2013	33.7	43.5	No Change
Skilled nursing facility patients with a hospital readmission	2016	17	19	11	16	2012	16	20	No Change
Long-stay nursing home residents hospitalized within a six-month period	2016	13	15	5	14	2012	14	17	No Change
Home health patients also enrolled in Medicare with a hospital admission	2017	18	16	14	51	2013	17	16	Worsened
Adults with inappropriate lower back imaging	2016	67.6	68.9	57.7	22	2015	71.1	71.1	Improved
Employer-sponsored insurance spending per enrollee	2016	\$5,725	\$4,882	\$3,255	45	2013	\$5,245	\$4,697	Worsened
Medicare spending per beneficiary	2017	\$8,352	\$9 <i>,</i> 534	\$6,195	14	2013	\$7,824	\$9,081	No Change
Healthy Lives		20 1	19 Scoreca	rd					
Mortality amenable to health care, deaths per 100,000 population	2014-15	57.7	84.3	54.7	2	2010-11	60.2	85.3	No Change
Breast cancer deaths per 100,000 female population	2017	16.3	19.9	15.6	2	2013	19.8	20.8	Improved
Colorectal cancer deaths per 100,000 population	2017	12.4	12.9	9.3	18	2013	12.8	14.6	No Change
Suicide deaths per 100,000 population	2017	18.9	14	6.6	35	2013	12.8	12.6	Worsened
Alcohol-related deaths per 100,000 population	2017	10.3	9.6	5.5	30	2013	10.3	8.2	No Change
Drug poisoning deaths per 100,000 population	2017	37	21.7	8.1	45	2013	15.1	13.8	Worsened
Infant mortality, deaths per 1,000 live births	2016	3.7	5.9	3.5	2	2012	4.2	6	No Change
Adults who report fair or poor health	2017	13	17	9	6	2013	11	16	Worsened
Adults who smoke	2017	16	16	9	17	2013	16	18	No Change
Adults who are obese	2017	28	31	23	11	2013	27	29	No Change
Children who are overweight or obese	2017	25	31	21	8	2016	24	31	No Change
									0-

Table 2. State Disparity Indicator Data										
	Low-									
	Data	income		State	Data	income		Change over		
Dimension and indicator	year	rate ^d	Disparity ^e	ranking	year	rate ^d	Disparity ^e	time ^f		
Disparity		2019	Scorecard			Baseli	ne			
Adults ages 19–64 uninsured	2017	18	-15	25	2013	34	-28	Improved		
Children ages 0–18 uninsured	2017				2013	6				
Adults age 18 and older without a usual source of care	2017	13	-5	7	2013	19	-12	Improved		
Adults age 18 and older who went without care because of cost in past year	2017	16	-10	10	2013	28	-23	Improved		
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2016- 17	32	-30	48	2013- 14	32	-30	No Change		
Adults age 18 and older without a dental visit in past year	2016	15	-9	7	2012	21	-16	Improved		
Adults without all age- and gender-appropriate cancer screenings	2016	38	-16	45	2012	34	-14	Worsened		
Adults without age-appropriate flu and pneumonia vaccines	2017	60	-6	13	2013	66	-9	Improved		
Children without a medical home	2017	53	-15	5	2016	53	-19	Improved		
Children without age-appropriate medical and dental preventive care visits in the past year	2017	33	-15	29	2016	30	-15	No Change		
Children ages 19–35 months who did not receive all recommended vaccines	2016	31	-15	37	2012	25	-10	Worsened		
Hospital admissions for pediatric asthma, per 100,000 children ages 2–17	2015				2012					
Potentially avoidable emergency department visits, Medicare beneficiaries age 65 and older, per 1,000 beneficiaries	2014	390	-218.1	31	2012	410.2	-230.2	Improved		
Hospital admissions for ambulatory care–sensitive conditions, Medicare beneficiaries age 65 and older, per 1,000 beneficiaries	2015	116.6	-70.2	41	2012	91.4	-46.7	Worsened		
30-day hospital readmissions among, Medicare beneficiaries age 65 and older, per 1,000 beneficiaries	2015	49.7	-24.3	22	2012	49.1	-20.6	Worsened		
Adults who report fair or poor health	2017	38	-32	51	2013	24	-20	Worsened		
Adults who smoke	2017	30	-20	40	2013	28	-19	Worsened		
Adults who are obese	2017	42	-16	45	2013	36	-9	Worsened		
Adults who have lost six or more teeth	2016	23	-19	42	2012	20	-14	Worsened		

Notes

(a) The 2019 Scorecard rankings generally reflect 2017 data. The 2019 Scorecard added or revised several performance measures since the May 2018 Scorecard report; rankings are not comparable between reports. Rank change from the baseline period represents states' rank difference from the baseline data year (generally 2012 or 2013). Positive values represent an improvement in rank; negative values are a worsening in rank.

(b) Trend data available for 45 of 47 total Scorecard indicators. Improved/worsened denotes a change of at least one half (0.5) standard deviation 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 standard deviation.

(c) Estimated impact if this state's performance improved to the rate of two benchmark levels — a national benchmark set at the level of the best-performing state and a regional benchmark set at the level of the top-performing state in region (www.bea.gov: Great Lakes, Mid-Atlantic, New England, Plains, Rocky Mountains, Southeast, Southwest, West). Benchmark states have an estimated impact of zero (0). Equivalent estimated impact based on national and regional benchmarks indicate that the best observed rate in the region was equal to the best observed rate nationally.

(d) Rates are for states' low income population, generally those whose household income is under 200% FPL.

(e) Disparity is the difference between the states' low-income and higher-income (400%+ FPL) populations.

(f) Improvement indicates that the low-income rate improved and the disparity between low- and higher-income populations narrowed; worsening indicates the low-income rate worsened and the disparity between low- and higher-income populations widened.