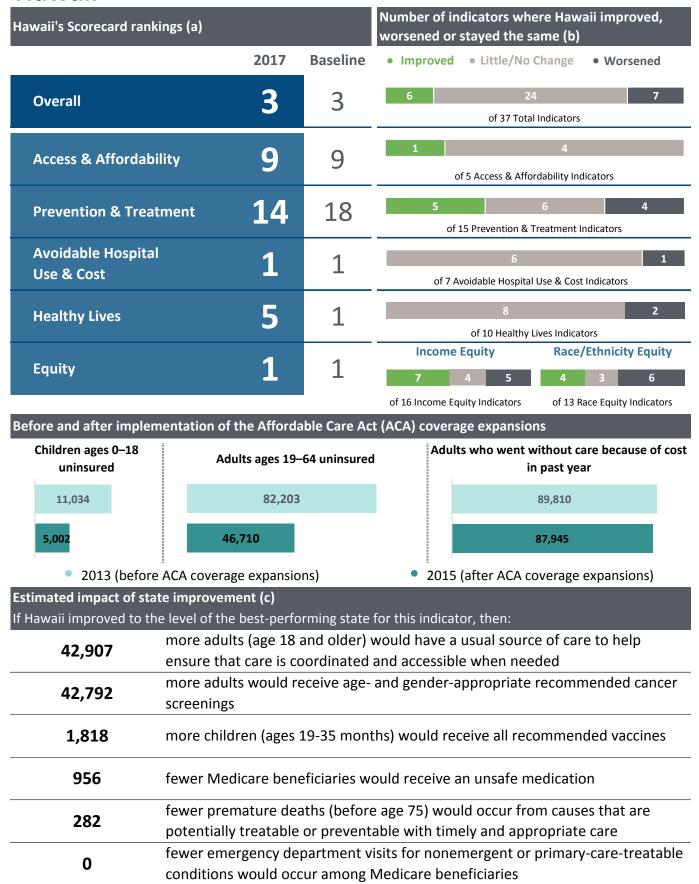
## Hawaii



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			17 Scorecar				Baseline		
Adults ages 19–64 uninsured	2015	6	13	4	3	2013	10	20	Improved
Children ages 0–18 uninsured	2015	2	5	1	2	2013	3	8	No Change
Adults who went without care because of cost in past year	2015	8	13	7	2	2013	9	16	No Change
Individuals under age 65 with high out-of-pocket medical costs relative to their annual household income	2014-15	12	14	10	10				
At-risk adults without a routine doctor visit in past two years	2015	15	13	6	31	2013	14	14	No Change
Adults without a dental visit in past year	2014	14	16	11	12	2012	15	15	No Change
PREVENTION & TREATMENT		20	17 Scorecar	d			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	70	68	77	14	2012	70	69	No Change
Adults with age-appropriate vaccines	2015	38	38	51	30	2013	43	36	Worsened
Children with a medical home	2011/12	57	54	69	24				
Children with a medical and dental preventive care visit in the past year	2011/12	73	68	81	10				
Children with emotional, behavioral, or developmental problems who received needed mental health care in the past year	2011/12	58	61	86	35				
Children ages 19–35 months who received all recommended doses of seven key vaccines	2015	74	72	81	20	2013	67	70	Improved
Medicare beneficiaries who received at least one drug that should be avoided in the elderly	2014	9	13	7	4	2012	21	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	13	18	10	6	2012	18	21	Improved
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	14.7	14.5	13.1	25	07/2010 - 06/2013	13.4	13.2	Worsened
Central line-associated bloodstream infections (CLABSI), Standardized Infection Ratio	2014	0.23	0.50	0.23	1	2013	0.25	0.54	No Change
Hospitalized patients given information about what to do during their recovery at home	2015	83	87	90	49	2013	85	86	Worsened
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	70	68	74	10	2013	69	68	No Change
Home health patients who get better at walking or moving around	2015	61	66	72	47	2013	55	61	Improved
Home health patients whose wounds improved or healed after an operation	2015	83	90	95	48	2013	83	89	No Change
High-risk nursing home residents with pressure sores	2015 (Q2-Q4)	4	6	3	4	2013 (Q2-Q4)	3	6	Worsened
Long-stay nursing home residents with an antipsychotic medication	2015 (Q2-Q4)	8	17	8	1	2013 (Q2-Q4)	11	21	Improved

				Best					Substantia
	Data	State	U.S.	state	State	Data	State	U.S.	change ove
Dimension and Indicator  AVOIDABLE HOSPITAL USE & COST	year	rate 201	average 7 Scoreca	rate	ranking	year	rate Baseline	average	time (a)
Hospital admissions for pediatric asthma, per 100,000 children	2013	66	107	27	11	2011	52	107	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, ages 65–74, per 1,000 beneficiaries (b)	2014	12	27	12	1	2012	13	29	No Change
Hospital admissions among Medicare beneficiaries for ambulatory care–sensitive conditions, age 75 and older, per 1,000 beneficiaries (b)	2014	35	66	35	1	2012	41	70	No Chang
Medicare 30-day hospital readmissions, rate per 1,000 beneficiaries	2014	10	27	10	1	2012	12	34	No Change
Short-stay nursing home residents readmitted within 30 days of hospital discharge to nursing home	2014	12	19	11	2	2012	*	20	*
Long-stay nursing home residents hospitalized within a six- month period	2014	5	16	5	1	2012	*	17	*
Home health patients also enrolled in Medicare with a hospital admission	2015	13.9	16.2	13.9	1	2013	14.0	16.0	No Chang
Potentially avoidable emergency department visits among Medicare beneficiaries, per 1,000 beneficiaries	2014	129	185	129	1	2012	131	188	No Chang
Total reimbursements per enrollee (ages 18–64) with employer-sponsored insurance	2014	\$3,513	\$4,569	\$3,217	4	2013	\$3,031	\$4,489	Worsened
Total Medicare (Parts A & B) reimbursements per beneficiary	2014	\$5,592	\$8,819	\$5,592	1	2012	\$5,408	\$8,854	No Change
HEALTHY LIVES		201	7 Scoreca	rd			Baseline		
Mortality amenable to health care, deaths per 100,000 population	2013-14	76.1	84.2	54.3	24	2011-12	71.4	84.0	No Chang
Years of potential life lost before age 75	2014	5,369	6,447	4,892	7	2012	5,445	6,412	No Change
Breast cancer deaths per 100,000 female population	2014	16.7	20.6	14.2	3	2012	16.3	21.4	No Chang
Colorectal cancer deaths per 100,000 population	2014	13.9	14.3	10.9	21	2012	13.6	14.9	No Chang
Suicide deaths per 100,000 population	2014	13.8	13.0	7.8	23	2012	13.1	12.6	No Chang
Infant mortality, deaths per 1,000 live births	2013	6.4	6.0	4.2	28	2012	4.9	6.0	Worsene
Adults ages 18–64 who report fair/poor health or activity limitations because of physical, mental, or emotional problems	2015	22	26	20	8	2013	20	26	Worsene
Adults who smoke	2015	14	17	9	4	2013	13	18	No Chang
Adults ages 18–64 who are obese (BMI >= 30)	2015	24	29	20	3	2013	23	29	No Chang
Children ages 10–17 who are overweight or obese (BMI >= 85th percentile)	2011/12	27	31	22	9				
Adults ages 18–64 who have lost six or more teeth because of tooth decay, infection, or gum disease	2014	7	10	6	2	2012	6	10	No Chang

## **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.

	Vulnerable Vulnerable								Change in	
	Data	group	U.S.	o ()	State	Data	group	U.S.	٠.,	vulnerable
Equity Type and Indicator  LOW-INCOME	year	rate 201	average 17 Scorecar		ranking	year	rate Base	average	Gap (a)	group rate (b)
Uninsured ages 19–64	2015	13	13	0	6	2013	21	20	-1	Improved
Adults who went without care because of cost in past year	2015	14	13	-1	3	2013	15	16	1	No Change
At risk adults without a doctor visit	2015	18	13	-5	33	2013	14	14	0	Worsened
Adults without a dental visit in past year	2014	17	16	-1	2	2012	19	15	-4	Improved
Adults without a usual source of care	2015	21	22	1	14	2013	14	24	10	No Change
Adults without age- and gender-appropriate cancer screenings	2014	41	32	-9	42	2012	34	31	-3	Worsened
Adults without age-appropriate vaccines	2015	64	62	-2	28	2013	60	64	4	Worsened
Children without a medical home	2011/12	53	46	-7	22					
Children without a medical and dental preventive care visit in the past year	2011/12	36	32	-4	15					
Children ages 19–35 months without all recommended vaccines (c)	2014	27	28	1	11	2012	19	32	13	No Change
Elderly patients who received a high-risk prescription drug	2014	13	13	0	8	2012	15	17	2	No Change
Hospital admissions for pediatric asthma, per 100,000 children	2013	*	107	*	*	2012	*	143	*	*
Medicare admissions for ambulatory care—sensitive conditions (d)	2014	41	44	3	1	2012	60	48	-12	Improved
Medicare 30-day hospital readmissions, per 1,000 beneficiaries (d)	2014	29	35	6	2	2012	46	43	-3	Improved
Potentially avoidable ED visits among Medicare beneficiaries, per 1,000 beneficiaries (d)	2014	210	185	-25	1	2012	238	188	-50	Improved
Adults with poor health-related quality of life	2015	31	26	-5	3	2013	28	26	-2	Worsened
Adults who smoke	2015	20	17	-3	6	2013	16	18	2	Worsened
Adults who are obese	2015	29	29	0	3	2013	30	29	-1	Improved
Adults who have lost six or more teeth	2014	9	10	1	1	2012	12	10	-2	Improved
RACE/ETHNICITY (e)		201	L7 Scorecar	d			Base	line		
Uninsured ages 19–64 (other race)	2015	5	13	8	1	2013	10	20	10	Improved
Adults who went without care because of cost in past year (Hispanic ethnicity)	2015	11	13	2	1	2013	16	16	0	Improved
At risk adults without a doctor visit (other race)	2015	14	13	-1	5	2013	13	14	1	Worsened
Adults without a dental visit in past year (black race)	2014	24	16	-8	28	2012	22	15	-7	Worsened
Adults without a usual source of care (Hispanic ethnicity)	2015	18	22	4	1	2013	20	24	4	Improved
Adults without age- and gender-appropriate cancer screenings (other race)	2014	32	32	0	10	2012	31	31	0	No Change
Adults without age-appropriate vaccines (Hispanic ethnicity)	2015	64	62	-2	11	2013	61	64	3	Worsened
Children without a medical home (Hispanic ethnicity)	2011/12	51	46	-5	5					

### 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.

	,	Vulnerable	e				Vulnerable	2		Change in
	Data	group	U.S.		State	Data	group	U.S.		vulnerable
Equity Type and Indicator	year	rate	average	Gap (a)	ranking	year	rate	average	Gap (a)	group rate (b)
RACE/ETHNICITY (continued)	2017 Scorecard									
Children without a medical and dental preventive care visit in the past year (Hispanic ethnicity)	2011/12	29	32	3	4					
Children ages 19–35 months without all recommended vaccines (Hispanic ethnicity) (c)	2014	28	28	0	15	2012	21	32	11	Worsened
Mortality amenable to health care (black race)	2013-14	106	84.2	-22.1	8	2011-12	74.1	84.0	9.90	Worsened
Infant mortality, deaths per 1,000 live births (black race)	2012-13	15.5	6.0	-9.5	48	2010-11	*	6.5	*	*
Adults with poor health-related quality of life (Hispanic ethnicity)	2015	29	26	-3	10	2013	24	26	2	Worsened
Adults who smoke (Hispanic ethnicity)	2015	17	17	0	9	2013	18	18	0	No Change
Adults who are obese (Hispanic ethnicity)	2015	30	29	-1	6	2013	33	29	-4	Improved
Adults who have lost six or more teeth (other race)	2014	7	10	3	1	2012	7	10	3	No Change

### **Table 3. Summary of Equity Indicator Change**

#### **CHANGE IN EQUITY GAP**

	2017 Scorecard rankings	Indicators with trends	No change in gap	Gap narrowed/ vulnerable group improved	Gap widened/ vulnerable group worsened
<b>Equity Dimension</b>	1	29	7	11	11
Low Income	1	16	4	7	5
Race/Ethnicity	2	13	3	4	6

#### 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.