

ST. LOUIS HEALTH STATS 2024

A Community Scorecard for the Commercially Insured Population

Provided by the Midwest Health Initiative

Midwest Health Initiative (MHI) is pleased to share with you its 2024 St. Louis Health Stats Scorecard based on commercial medical claims for services provided from 2019 - 2023 for a sample of people residing in the St. Louis metropolitan statistical area.

This scorecard provides benchmarks to help our community identify opportunities to improve the health of our population and serves as a standard leaders can use to gauge how the health of their populations compares to these benchmarks. Finally, it provides measures to evaluate our progress in making St. Louis a national leader in the health of its residents and in the quality and affordability of health care services.

These results are from MHI's data warehouse, which includes 2 million commercially-insured lives, and is further supplemented by information from other sources. To learn more about MHI, find available national benchmarks, or submit ideas for future areas of focus, please visit midwesthealthinitiative.org.



**MIDWEST
HEALTH
INITIATIVE**



Urgent care visits per 1,000 people decreased for the second straight year in 2023, down 13% from 331.6 in 2022



287.4

Urgent care visits per 1,000 in 2023



\$6,843

Total Annual Healthcare Spend
Per Person in 2023

\$4,598

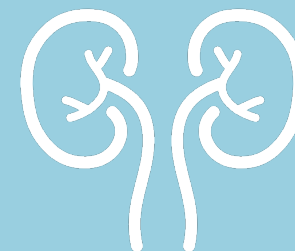
Medical Spend
per Person

\$2,245

Pharmacy Spend
per Person



In the US, approximately 14% of adults have chronic kidney disease¹



53.0%

Percent of diabetes patients
receiving kidney tests

Hip and knee replacement surgeries have increased each year since 2020



7.2

Hip and knee replacement procedures
per 1,000 people in 2023

1 in 5 adults with high blood pressure may have chronic kidney disease²



18.5%

Percent of patients with hypertension
receiving kidney tests

POPULATION HEALTH

Commercially Insured St. Louisans 64 and Under

Indicators	2019	2020	2021	2022	2023	Compound Annual Growth (2019 - 2023)
Average Age of Population	37	37	36	36	37	-0.3%
% of Population Diagnosed With a Chronic Illness						
Asthma & COPD	5.0%	4.7%	4.8%	4.8%	5.1%	0.4%
Diabetes	6.5%	6.4%	6.6%	6.7%	7.3%	3.0%
Arthritis	6.9%	6.3%	6.8%	6.7%	6.9%	0.1%
Hypertension	12.7%	12.4%	12.6%	12.4%	12.7%	-0.1%
Depression	6.2%	6.3%	6.7%	6.2%	6.6%	1.6%
Migraine	2.3%	2.3%	2.5%	2.5%	2.7%	3.8%
% of Population Diagnosed With Cancer						
Total Cancer Prevalence	2.8%	2.7%	2.8%	2.4%	2.5%	-2.7%
Lung Cancer	0.066%	0.065%	0.059%	0.056%	0.052%	-5.9% ▼
Breast Cancer	0.53%	0.51%	0.53%	0.48%	0.53%	0.1%
Skin Cancer	0.76%	0.74%	0.71%	0.56%	0.68%	-2.7%

COST AND AFFORDABILITY

Indicators	2019	2020	2021	2022	2023	Compound Annual Growth (2019 - 2023)
Total Annual Spend (TAS) per Person*	\$5,453	\$5,154	\$5,513	\$5,937	\$6,843	▲ 5.8%
Medical Spend per Person	\$4,127	\$3,746	\$3,931	\$4,235	\$4,598	2.7%
Pharmacy Spend per Person	\$1,326	\$1,408	\$1,582	\$1,703	\$2,245	▲ 14.1%
% of Total Annual Spend Paid by Patient	18.2%	17.4%	17.4%	17.1%	16.3%	-2.7%
People Per 100,000 with Total Annual Spend Over:						
\$50,000	1,311.7	1,271.2	1,548.9	1,448.0	1,682.7	▲ 6.4%
\$100,000	445.4	446.8	520.0	516.0	625.1	▲ 8.8%
\$250,000	83.1	87.0	87.5	96.3	129.4	▲ 11.7%
\$500,000	14.9	16.3	13.8	13.4	29.8	▲ 19.0%
\$1,000,000	2.8	2.5	0.8	2.3	4.4	▲ 12.1%
% of Population with No Claims	20.0%	19.7%	17.3%	19.8%	20.2%	0.3%
% of the Population that Accounts for 50% of Annual Spend	3.1%	2.8%	3.3%	3.3%	3.0%	-0.6%
% of the Population that Accounts for 80% of Annual Spend	14.3%	13.4%	14.8%	14.7%	13.6%	-1.2%
TAS Per Person as a % of St. Louis MSA Per Capita Income**	15.1%	13.8%	15.0%	14.9%	15.3%	1.4%

* Dollar amounts shown in this report are estimated using Milliman MedInsight Global RVUs and standardized price conversion factors derived from claim allowed amounts. While largely representative of the St. Louis commercially insured population's total spending, these amounts are sample estimates and should not be interpreted as exact dollar amounts.

** Calculated using available American Community Survey (ACS) St. Louis MSA estimates of per capita income from each calendar year

▲ ▼ Compound Annual Growth Rates greater than 5.0% or less than -5.0% are marked with a green arrow in the direction of growth.

CARE QUALITY

Indicators	2019	2020	2021	2022	2023	Compound Annual Growth (2019 - 2023)
Effective Chronic Care Management						
Patients Readmitted to the Hospital in 30 Days for Any Reason	5.8%	6.1%	5.9%	6.2%	5.8%	0.4%
Ambulatory Care Sensitive Admissions Per 1,000 People †*	2.9	2.2	1.8	1.6	1.9	-9.3% ▼
Asthma Patients with Appropriate Medication Management †	81.2%	82.0%	83.7%	83.9%	84.9%	1.1%
Kidney Health Evaluation for Patients with Hypertension	14.9%	14.7%	15.9%	16.3%	18.5%	▲ 8.1%
Diabetes Care						
Kidney Tests Performed (Nephropathy) †	48.1%	45.5%	46.6%	48.9%	53.0%	2.5%
Cholesterol Test Performed	55.0%	53.8%	53.5%	53.2%	52.7%	-1.1%
Women's Health						
Breast Cancer Screening †	69.4%	67.1%	66.7%	69.2%	71.1%	0.6%
Chlamydia Screening †	46.4%	44.9%	45.5%	47.5%	46.6%	0.1%
Cervical Cancer Screening †	67.8%	66.5%	65.9%	65.7%	65.4%	-0.9%
Deliveries Per 1,000 People	9.9	9.3	9.8	10.0	9.9	0.0%
% of Total Deliveries by C-Section	32.3%	33.1%	33.5%	32.2%	33.1%	0.6%
% of Vaginal Birth After C-Section (VBAC) †	13.8%	14.2%	15.4%	17.1%	18.1%	▲ 7.0%
% of NICU Stays Per Total Deliveries	7.8%	7.9%	7.9%	8.6%	7.2%	-1.8%

PROFESSIONAL SERVICES

Indicators	2019	2020	2021	2022	2023	Compound Annual Growth (2019 - 2023)
Primary Care Visits Per Person	1.9	1.7	1.9	1.7	1.8	-1.3%
Specialist Visits Per Person	1.1	1.0	1.0	1.2	1.3	▲ 5.3%
Primary Care Professional Fees as a % of Total Spending	5.7%	5.5%	5.1%	4.9%	3.8%	-9.4% ▼

* Includes hospitalizations for one of the following conditions: diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, bacterial pneumonia, or urinary tract infection.

▲▼ Compound Annual Growth Rates greater than 5.0% or less than -5.0% are marked with a green arrow in the direction of growth.

† Indicates a standardized measure developed and maintained by a nationally recognized health care quality steward. For more information, please visit <https://www.midwesthealthinitiative.org/health-stats>

UTILIZATION

Indicators	2019	2020	2021	2022	2023	Compound Annual Growth (2019 - 2023)
Pharmacy						
Total Prescriptions Filled Per 100 People	1,008.6	985.2	1,060.0	939.0	1,005.5	-0.1%
% of Prescriptions Filled with Generic Medication	82.7%	83.4%	85.7%	84.8%	84.0%	0.4%
Opioid Prescriptions Per 100 People	30.3	27.4	27.5	23.5	22.3	-7.4% ▼
Urgent Care & Emergency Department (ED) Visits per 1,000 People						
Urgent Care Visits	204.2	299.2	359.7	331.6	287.4	▲ 8.9%
Total ED Visits	178.5	145.1	163.1	201.1	193.7	2.1%
ED Visits Admitted to Hospital	18.6	16.7	18.1	18.3	17.3	-1.8%
ED Visits Held for Observation	12.9	10.6	10.5	10.1	11.1	-3.6%
ED Visits Discharged Home	147.0	117.8	134.5	172.8	165.3	3.0%
% of Potentially Avoidable ED Visits †	12.2%	10.3%	8.8%	8.2%	8.0%	-10.0% ▼
Imaging Utilization per 1,000 People						
X-Ray	987.5	846.9	960.0	950.4	1,009.4	0.6%
Computed Tomography (CT)	163.9	137.7	162.5	168.4	179.1	2.2%
Magnetic Resonance Imaging (MRI)	107.6	86.5	106.9	110.2	119.1	2.6%
Positron Emission Tomography (PET)	4.9	4.3	5.0	5.5	6.0	4.8%
Appropriate Use of Imaging for Low Back Pain †	74.7%	77.6%	77.1%	76.4%	75.0%	0.1%
Surgical Procedures per 1,000 People						
Total Surgeries	157.0	131.1	142.5	150.8	152.9	-0.7%
Outpatient Surgeries	105.9	88.5	102.4	110.7	113.6	1.8%
Heart Surgery: Coronary Artery Bypass Graft	6.8	5.6	5.5	4.8	4.8	-8.3% ▼
Heart Surgery: Percutaneous Coronary Intervention	3.6	2.9	3.0	3.1	2.9	-5.6% ▼
Hip and Knee Replacements	4.9	4.8	6.2	6.8	7.2	▲ 10.0%
Hysterectomies	3.4	3.2	3.8	3.7	4.0	3.5%
% of Hysterectomies Performed Vaginally	84.3%	87.8%	87.8%	87.6%	89.5%	1.5%
Acute Care						
Inpatient Discharges Per 1,000 People	49.4	43.4	44.1	46.2	44.4	-2.6%
Average Inpatient Length of Stay (Days)	4.3	4.3	4.3	4.1	4.2	-0.7%



▲▼ Compound Annual Growth Rates greater than 5.0% or less than -5.0% are marked with a green arrow in the direction of growth.

† Indicates a standardized measure developed and maintained by a nationally recognized health care quality steward. For more information, please visit <https://www.midwesthealthinitiative.org/health-stats>

ABOUT THE INDICATORS

These indicators were chosen and refined with input from the Midwest Health Initiative's leaders and partners representing hospitals, health plans, employers, labor unions, and the public. When applicable, MHI uses standardized measures maintained by nationally recognized stewards such as Agency for Healthcare Research and Quality (AHRQ), Centers for Medicare & Medicaid Services (CMS), Healthcare Effectiveness Data and Information Set (HEDIS), National Committee for Quality Assurance (NCQA), National Quality Forum (NQF) through February 2023, and Batelle beginning March 2023.

Previous versions of the St. Louis Health Stats scorecard included metrics measuring HbA1C testing and timely blood pressure medication refills for patients with diabetes. The newest versions of these evidence-based measures rely heavily on the use of Category II Current Procedural Terminology (CPT) codes to obtain quality rates. While Category I CPT codes are used for reimbursement purposes, Category II codes are considered supplemental and use by clinicians is optional. Therefore, measures relying on Category II codes may underestimate the quality of care actually provided in the community if not being used for documentation purposes. MHI continues to track these measures internally to monitor progress in the use of Category II codes and encourages health systems and medical groups in St. Louis to consider increasing utilization of these codes for quality performance measurement.

The 2024 release of the St. Louis Health Stats scorecard contains a new metric that assesses kidney health screening in patients with hypertension. While a quality measure exists for screening patients with diabetes, hypertension is also a risk factor for developing chronic kidney disease and early identification can lead to effective disease management.

CITATIONS

1. United States Renal Data System. 2022 USRDS Annual Data Report: Epidemiology of kidney disease in the United States. National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda, MD, 2022.
2. National Center for Chronic Disease Prevention and Health Promotion. Chronic Kidney Disease and High Blood Pressure. <https://www.cdc.gov/kidney-disease/risk-factors/chronic-kidney-disease-ckd-and-adults-with-high-blood-pressure.html>

ABOUT THE MIDWEST HEALTH INITIATIVE

MHI brings together those who provide, pay for and use health care to improve the quality, affordability and experience of health care. The strength of MHI sits with the collective power of its partners, each working within their own spheres of influence to achieve change.

8888 Ladue Road, Suite 250
St. Louis, MO 63124
314-721-7800
www.midwesthealthinitiative.org

ACKNOWLEDGEMENTS

This community scorecard is made possible through the support of MHI's Friends and its Champions for Health Care Value. MHI is grateful for their generous support of its mission and work.

- Bayer
- BJC HealthCare
- Blue Cross and Blue Shield of Kansas City
- The Boeing Company
- Cigna
- Genentech
- Graybar Electric Company, Inc.
- Missouri Consolidated Health Care Plan
- Missouri Institute of Mental Health
- Novo Nordisk
- St. Louis Area Business Health Coalition
- UnitedHealthcare

MHI BOARD OF DIRECTORS

Eric Armbricht, PhD, MS

Professor and Senior Advisor to the President
Saint Louis University

Andrew Bagnall, MHA, FACHE

President & CEO
St. Luke's Hospital

Linda Brady

ACO Portfolio Manager - Healthcare Strategy & Policy
The Boeing Company

Chip Chambers, MD, MPH

Market Medical Executive, MidAmerica Market
Cigna

David Cook

President
United Food Workers, Local 655

Mark Dalton

Assistant Political Director
Mid-America Carpenters Regional Counsel

Edward Ellerbeck, MD, MPH

Professor, Population Health
University of Kansas Medical Center

Jake Erickson

CFO for TX, OK, MO & Southern IL
UnitedHealthcare

Thomas Hastings, MD

Primary Care Physician
Esse Health

John Lyday, EMIB

Senior Vice President, Human Resources
Bunzl Distribution USA, Inc.

Kirk Matthews, MBA

Chief Transformation Officer
MO Healthnet

J.C. McWilliams, MBA

SVP & Chief Managed Care Officer
BJC Health System

Heidi Miller, MD

Chief Medical Officer
MO Dept. of Health and Senior Services

Mark Mispagel, MBA

Managing Director, Total Rewards
Spire Inc.

Judith Muck

Executive Director
Missouri Consolidated Health Care Plan

Bob Pendleton, MD

Chief Clinical Officer, St. Louis & So IL Region
SSM Health

Beverly Propst, J.D.

Senior Vice President of Human Resources
Graybar Electric Company, Inc.

Dave Thompson

SVP, Population Health & President, Contracted Revenue
Mercy

Dave Toben

Senior Director, Total Rewards
Bi-State Development/Metro

John Ziegler Jr.

Senior Vice President & Chief Administrative Officer
Arch Resources, Inc.



@MHI_STL



Midwest Health Initiative



midwesthealthinitiative.org



Midwest Health Hub



**MIDWEST
HEALTH
INITIATIVE**

