ST. LOUIS HEALTH STATS

A Community Scorecard for Commercially Insured Populations Provided by the Midwest Health Initiative

Midwest Health Initiative (MHI) is pleased to share with you its 2023 Health Stats based on medical claims for services, calendar year 2022.

The St. Louis Health Stats provides regional benchmark information to support our community in identifying opportunities to improve the health of our population. It also serves as a standard by which leaders can gauge how the health of their populations compares to regional benchmarks. Finally, it provides measures by which we can evaluate our collective progress toward making St. Louis a national leader in the health of its residents and in the quality and affordability of its health care services.

The results included here are mostly from MHI's database which has now grown to include about 2 million commercially-insured lives, and is further supplemented by information from other sources. This scorecard is based on a subset of the MHI database of those who reside in the St. Louis Metropolitan Statistical Area. To learn more about MHI, find available national benchmarks, or submit ideas for future areas of focus, please visit midwesthealthinitiative.org.



2023

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St. Louis is the top city in the US for asthma-related deaths¹



Of those with asthma used a controller more than other asthma medications

ED visits per 1,000 people increased from 163.1 in 2021 to over 200 in 2022



201.1 Total Emergency Department Visits Per 1,000 in 2022.



\$5,937

Annual Medical Spend Per Person

17.1%

Percent of Annual Medical Spend Paid for by Patient



In the US, chronic kidney disease affects approximately 14% of adults²

> کی 48.9%

Percent of diabetes patients receiving kidney tests

45.9% of the population has a regular source of primary care



45.9%

But only 4.9% of total spending is for primary care professional fees

POPULATION HEALTH

Commercially Insured St. Louisans 64 and under

Indicators	2019	2020	2021	2022	Compound Annual Growth (2019 - 2022)
Average Age of Population	37	37	36	36	-0.9%
% of Population Treated for a Chronic Illness					
Asthma & COPD	5.0%	4.7%	4.8%	4.8%	-1.3%
Diabetes	6.5%	6.4%	6.6%	6.7%	1.5%
Arthritis	6.9%	6.3%	6.8%	6.7%	-0.8%
Hypertension	12.7%	12.4%	12.6%	12.4%	-0.9%
Depression	6.2%	6.3%	6.7%	6.2%	0.3%
Migraine	2.3%	2.3%	2.5%	2.5%	2.6%
Cancer					
Total Cancer Prevalence	2.8%	2.7%	2.8%	2.4%	-6.0% 🗡
Lung Cancer	0.066%	0.065%	0.059%	0.056%	-5.0%
Breast Cancer	0.53%	0.51%	0.53%	0.48%	-2.8%
Skin Cancer	0.76%	0.74%	0.71%	0.56%	-9.7% 💙

CARE QUALITY

Indicators	2019	2020	2021	2022	Compound Annual Growth (2019 - 2022)
Effective Chronic Care Management					
Patients Readmitted to the Hospital in 30 Days for Any Reason	8.2%	8.9%	8.5%	8.2%	0.3%
Ambulatory Care Sensitive Admissions Per 1,000 🕆	2.9	2.2	1.8	1.6	-16.8% 💙
Asthma Patients with Appropriate Medication Management \dag	81.2%	82.0%	83.7%	83.9%	1.1%
Diabetes Care					
HbA1c Test Performed†	86.8%	83.2%	85.0%	85.0%	-0.7%
Kidney Tests Performed (Nephropathy) $ extsf{t}$	48.1%	45.5%	46.6%	48.9%	0.5%
Cholesterol Test Performed	55.0%	53.8%	53.5%	53.2%	-1.1%
Women's Health					
Breast Cancer Screening †	69.4%	67.1%	66.7%	69.2%	-0.1%
Chlamydia Screening †	46.4%	44.9%	45.5%	47.5%	0.7%
Cervical Cancer Screening †	67.8%	66.5%	65.9%	65.7%	-1.0%
Deliveries Per 1,000	9.9	9.3	9.8	10.0	0.3%
% of Total Deliveries by C-Section	32.3%	33.1%	33.5%	32.2%	-0.1%
% of Vaginal Birth After C-Section (VBAC) \dagger	13.8%	14.2%	15.4%	17.1%	7.3%
% of NICU Stays Per Total Deliveries	7.8%	7.9%	7.9%	8.6%	3.4%

▲▼ 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

COST AND AFFORDABILITY

Indicators	2019	2020	2021	2022	(2019 - 2022)		
Annual Medical Spend (AMS)							
AMS Per Person	\$5,453	\$5,154	\$5,513	\$5,937	2.9%		
% of Total Annual Medical Spend Paid by Patient	18.2%	17.4%	17.4%	17.1%	-2.1%		
People Per 100,000 with Annual Spend Over:							
\$50,000	1,311.7	1,271.2	1,548.9	1,448.0	3.4%		
\$100,000	445.4	446.8	520.0	516.0	5.0%		
\$250,000	83.1	87.0	87.5	96.3	5.0%		
\$500,000	14.9	16.3	13.8	13.4	-3.5%		
\$1,000,000	2.8	2.5	0.8	2.3	-6.6% 🗡		
% of Population with No Claims	20.0%	19.7%	17.3%	19.8%	-0.4%		
% of the Population that Accounts for 50% of Annual Spend	3.1%	2.8%	3.3%	3.3%	2.1%		
% of the Population that Accounts for 80% of Annual Spend	14.3%	13.4%	14.8%	14.7%	0.9%		
AMS Per Person as a % of St. Louis MSA Per Capita Income*	15.1%	13.8%	15.0%	14.9%	-0.3%		

* Calculated using American Community Survey (ACS) St. Louis MSA per capita income from the prior calendar year

PROFESSIONAL SERVICES

Indicators	2019	2020	2021	2022	Compound Annual Growth (2019 - 2022)
Visits					
Primary Care Visits Per Person	1.9	1.7	1.9	1.7	-3.8%
Specialists Visits Per Person	1.1	1.0	1.0	1.2	4.1%
Primary Care Professional Fees as a % of Total Spending	5.7%	5.5%	5.1%	4.9%	-4.9%
Access					
% of Population with a Regular Source of Primary Care	50.8%	48.5%	47.4%	45.9%	-3.3%
Pediatric Population, Age 0-17	65.1%	61.5%	61.0%	58.0%	-3.8%
Overall Adult Population, Age 18-64	45.9%	44.1%	42.8%	41.8%	-3.0%
Adults 18-39	35.2%	33.6%	32.1%	32.1%	-3.0%
Adults 40-64	54.9%	52.8%	52.0%	50.2%	-2.9%



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

UTILIZATION

Indicators	2019	2020	2021	2022	Compound Annual Growth (2019 - 2022)
Pharmacy					
% of Scripts Filled with Generic Medication	82.7%	83.4%	85.7%	84.8%	0.8%
Scripts Per Person	10.1	9.9	10.6	9.4	-2.4%
Opioid Scripts Per 1,000	302.7	273.8	275.3	234.8	-8.1% 💙
Urgent Care and ED Visits					
Urgent Care Visits Per 1,000	204.2	299.2	359.7	331.6	1 7.5%
Total ED Visits Per 1,000	178.5	145.1	163.1	201.1	4.1%
ED Visits Per 1,000, Admitted	18.6	16.7	18.1	18.3	-0.5%
ED Visits Per 1,000, Held for Observation	12.9	10.6	10.5	10.1	-7.9% 💙
ED Visits Per 1,000, Discharged Home	147.0	117.8	134.5	172.8	5.5%
% of Potentially Avoidable ED Visits $ extsf{t}$	12.2%	10.3%	8.8%	8.2%	-12.5% 💙
maging					
X-Ray Per 1,000	987.5	846.9	960.0	950.4	-1.3%
CT Per 1,000	163.9	137.7	162.5	168.4	0.9%
MRI Per 1,000	107.6	86.5	106.9	110.2	0.8%
PET Per 1,000	4.9	4.3	5.0	5.5	3.9%
Appropriate Use of Imaging for Low Back Pain $ au$	74.7%	77.6%	77.1%	76.4%	0.7%
Surgeries					
Outpatient Surgeries Per 1,000	105.9	88.5	102.4	110.7	1.5%
Total Surgeries Per 1,000	157.0	131.1	142.5	150.8	-1.3%
Heart Surgery: CABG Per 1,000	6.8	5.6	5.5	4.8	-11.1% 💙
Heart Surgery: PCI Per 1,000	3.6	2.9	3.0	3.1	-5.2% 💙
Total Hip and Knee Replacement Per 1,000	4.9	4.8	6.2	6.8	11.3%
Hysterectomies Per 1,000	3.4	3.2	3.8	3.7	2.8%
% of Hysterectomies Performed Vaginally	84.3%	87.8%	87.8%	87.6%	1.3%
Acute Care					
Inpatient Discharges Per 1,000	49.4	43.4	44.1	46.2	-2.2%
Average Inpatient Length of Stay (Days)	4.3	4.3	4.3	4.1	-1.4%

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ABOUT THE INDICATORS

The St. Louis Health Stats indicators of community health, health care quality, utilization, and cost are analyzed over a four-year period to identify trends in five domains. The Population Health domain begins with the average age of the study population, followed by the prevalence of chronic illnesses in the community. The Care Quality domain highlights the percent of the population who received a preventative test or screening. Also housed within Care Quality are indicators of effective chronic care management. The Cost and Affordability domain tracks health care expenditures, including pharmacy, ranging from the percent of the population with no health care claims to that of high-cost claimants. The Professional Services domain calls attention to primary care access, disaggregated by age groups. Finally, nested within the Utilization domain are health care trends in utilization including that of prescriptions, emergency department and urgent care use, imaging, surgeries, and acute inpatient care.

The indicators included 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.

MHI has worked to utilize any standardized indicators, or measures, maintained by nationally recognized stewards such as Agency for Healthcare Research and Quality's (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, etc. The dagger symbol (†) denotes these measures in the report. Please see MHI's Standardized Measure Resource at *https://www.midwesthealthinitiative.org/health-stats* for more information

The 2023 release of the St. Louis Health Stats scorecard contains several new metrics across the five domains. These include Overall Cancer Prevalence with three sub-category breakouts into Lung Cancer, Skin Cancer, and Breast Cancer. Asthma Medication Ratio is now an included metric to assess the use of controller medication use compared to emergency inhaler use in the asthma population.

CITATIONS

- 1. Asthma and Allergy Foundation of America, (2023). 2023 Asthma Capitals. Retrieved from asthmacapitals.com.
- 2. 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.

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 healthcare. 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.

- AbbVie
- Anthem Blue Cross and Blue Shield of Missouri
- Bayer
- BJC HealthCare
- Blue Cross and Blue Shield of Kansas City
- The Boeing Company
- Cigna

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