North Carolina Triple Aim Scorecard						
Strategic Area	Measure	Trend	NC Rate	Goal	Year	NC Range
Population Health						
Racial disparities in infant health	African-American babies born w/low birth weight	$\longleftrightarrow$	13.8%	7.5%	2014	6.3-23.8%
Diabetes	Diabetes prevalence	$\leftrightarrow$	10.6%	7.2%	2013	7.5-14.8%
Obesity	Adult obesity rate	$\leftrightarrow$	31.5%	24.1%	2013	23.0-40.7%
Patient Experience/Quality						
Care Transitions	Patients reporting good care transitions	$\longleftrightarrow$	52%	56%	2015Q1- 2015Q4	42-65%
Hospital Infections	CAUTI Standardized Infection Ratio (SIR)	$\longleftrightarrow$	0.58	0.50	2016Q1- 2016Q3	0.0-1.36
Mental Health System	% of ED visits which are for mental health	$\leftrightarrow$	2.5%	2.4%	2015Q4- 2016Q2	0.5-8.0%
Adequacy of Ambulatory Care	Rate of admissions for conditions amenable to outpatient care (per 1,000 Medicare beneficiaries)	$\downarrow$	56.7	38.2	2012CY	47.7-68.8
Cost						
Readmissions	30-day all cause, all payer readmission rate	$\longleftrightarrow$	11.9%	10.7%	2015Q2- 2016Q1	3.1-17.9%
Medicaid Costs	Total Medicaid spending per full benefit enrollee	n/a	\$5,450	n/a	2011FY	US range: \$4,010- \$11,041

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- 1. **Racial disparities** in infant health. Goal is to reduce percent of low birth weight babies among African-Americans to the percent of low birth weight babies among Caucasian mothers for the same time period. Trend arrow represents no change, since the decrease of 0.3%, comparing baseline data (2011) to current data (2014), is less than 1%. NC Range represents highest and lowest county rates, excluding 27 counties with fewer than 20 births to African-American mothers in 2014. Data source is NC birth data accessed at <a href="http://www.schs.state.nc.us/interactive/query/">http://www.schs.state.nc.us/interactive/query/</a> 11/10/16.
- 2. **Diabetes** prevalence (age-adjusted). Goal is the rate among the top 10<sup>th</sup> percentile of US states reporting in the baseline time period (2011CY). The trend is reported as no change; the rate remains at 10.6%. Range is across all NC counties reporting. Data source is BRFSS, accessed at <a href="http://www.cdc.gov/diabetes/atlas/countydata/atlas.html">http://www.cdc.gov/diabetes/atlas/countydata/atlas.html</a> in Diagnosed Diabetes (Prevalence, Age-Adjusted) on 11/10/16.
- 3. **Obesity** rate (age-adjusted). Goal is the rate among the top 10<sup>th</sup> percentile across all US states reporting in the baseline time period (2011CY). The trend is reported as no change from 31.0% in 2012 to 31.5% in 2013. Range is across all NC counties reporting. Data source is BRFSS, accessed at http://www.cdc.gov/diabetes/atlas/countydata/County\_ListofIndicators.html in file Obesity Prevalence (Prevalence, Age-Adjusted) 11/10/16.
- 4. **Care Transitions (CTM3).** Goal is the rate among the top 10<sup>th</sup> percentile of US states reporting (2013 Q3 2014 Q2). Trend represents no change from 2014CY. Range is across all NC hospitals reporting. Source is HCAHPS data from CMS Hospital Compare (<a href="https://data.medicare.gov/data/hospital-compare">https://data.medicare.gov/data/hospital-compare</a>) accessed on 11/!0/16.
- 5. **Hospital Infections**: CAUTI Standard Infection Ratio (SIR) across all hospital locations. Trend is compared to 2015CY as a baseline (0.58). Current trend shows no change. Range is across NC hospitals granting NCQC/NCHA rights to view their data in the CDC's infection database (NHSN) that also had an expected number of CAUTIs greater than or equal to 1.0. Accessed 11/18/16.
- 6. **Mental Health System**. Mental Health definition revised to reflect alignment with NCHA Behavioral Health Workgroup as well as recent conversion to ICD-10 coding. Goal was set as the performance of the second best NCHA district in NC during 2014CY. Trend represents no change from 2013CY baseline (2.6%) to most recent three quarters of data (2.5%). Range is across all NC acute care hospitals reporting. Data source is NCHA claims data (PDS). Accessed 11/18/16.
- 7. **Adequacy of Ambulatory Care**. Discharges for Ambulatory Sensitive Conditions per 1,000 Medicare enrollees, 2012. Trend represents a decrease of 6% from 2011. Goal is the rate among the top 10<sup>th</sup> percentile across all US states reporting. Range is across NC Hospital Referral Regions. Data source is Dartmouth Atlas of Health, <a href="http://www.dartmouthatlas.org/data/table.aspx?ind=199">http://www.dartmouthatlas.org/data/table.aspx?ind=199</a> Accessed 11/18/16.

- 8. **Readmissions**. 30 day all-cause, all-payer readmission rate. Goal is a reduction of 10% from the 2014CY state performance. Trend represents no change from 2013 CY baseline. Range is across all acute care hospitals in NC reporting readmission data. Data source is NCHA claims data (RRI), accessed 11/10/16.
- 9. **Medicaid costs per capita**. Range is across all US states reporting. The goal is n/a because there is no good national data on a Medicaid target for spending; also, while lower costs are generally better, Medicaid spending which is too low can indicate under-resourcing. Data source is <a href="http://kff.org/medicaid/state-indicator/medicaid-spending-per-full-benefit-enrollee/">http://kff.org/medicaid/state-indicator/medicaid-spending-per-full-benefit-enrollee/</a> accessed 11/10/16.