02888 (Warwick)

TUFTS Health Plan FOUNDATION

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE[1]	BETTER / WORSE CITY RATE[1]	02888 ESTIMATE	WARWICK ESTIMATE	STATE ESTIMATE
SERIOUS CHRONIC DISEASE					
% high cholesterol			78.9%	80.0%	78.0%
% with diabetes			37.6%	37.9%	35.7%
% with stroke			12.7%	13.4%	12.5%
% with chronic obstructive pulmonary disease			24.4%	25.9%	24.1%
% with asthma			13.3%	15.1%	14.0%
% with hypertension			79.6%	80.6%	79.0%
% ever had a heart attack			6.3%	6.4%	5.4%
% with ischemic heart disease	w		48.4%	50.5%	45.9%
% with congestive heart failure			25.6%	26.4%	24.8%
% with anemia	w		55.5%	57.3%	52.2%
% with chronic kidney disease	w		26.3%	25.1%	23.3%
% with 4+ chronic conditions	w		66.7%	67.7%	63.9%
% with 0 chronic conditions			7.7%	7.9%	8.4%
Emergency room visits/1000 persons 65+ years per year	b	b	559	683	628
Part D monthly prescription fills per person per year			53.1	54.5	54.2
Durable medical equipment claims per year			1.8	2.1	2.0
Inpatient hospital stays/1000 persons 65+ years per year			296	306	284
Skilled nursing facility stays/1000 persons 65+ years per year	b		80	97	100
MILD CHRONIC DISEASE					
% with atrial fibrillation			16.1%	15.3%	15.2%
% with osteoarthritis/rheumatoid arthritis		b	51.2%	55.6%	52.0%
% with osteoporosis			22.1%	22.8%	21.0%
% with glaucoma			26.0%	25.9%	26.6%
% with cataract			66.0%	67.4%	67.9%
% women with breast cancer			10.4%	10.8%	10.7%
% men with prostate cancer			13.4%	13.8%	13.8%
% with hypothyroidism			22.7%	23.7%	21.1%
% with benign prostatic hyperplasia			39.7%	38.5%	40.3%
Physician visits per year			8.0	8.4	8.0

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE[1]	BETTER / WORSE CITY RATE[1]	02888 ESTIMATE	WARWICK ESTIMATE	STATE ESTIMATE
DISABILITY and LATER LIFE CHRONIC DISEASE					
Age-sex adjusted 1-year mortality rate	b	b	3.9%	5.1%	4.8%
% ever had a hip fracture			4.2%	4.3%	3.9%
% ever diagnosed with depression			31.4%	32.3%	30.0%
% with Alzheimer's disease or related dementias			13.6%	13.7%	14.4%
% with colon cancer			4.0%	3.5%	3.2%
% with lung cancer			2.8%	2.8%	2.1%
Home health visits per year			3.6	3.7	3.7
% of 65+ getting Medicaid long term services and supports	b	b	4.0%	5.1%	6.2%
% 65+ with hearing difficulty			11.8%	14.1%	13.8%
% 65+ with vision difficulty			6.7%	6.0%	5.2%
% 65+ with ambulatory difficulty			18.7%	18.9%	19.9%
% 65+ with cognition difficulty			9.3%	8.3%	7.8%
% 65+ with self-care difficulty			6.7%	6.0%	6.6%
% 65+ with independent living difficulty			15.2%	13.3%	13.7%
DEMOGRAPHIC (AGE 65+ YEARS)					
% Medicare managed care enrollees			41.5%	42.9%	39.4%
Total population 65 years or older			3,382	14,712	155,558
% 65-74 years			43.4%	48.3%	50.4%
% 75-84 years			37.2%	34.5%	32.0%
% 85 years or older			19.4%	17.1%	17.6%
% female			59.3%	61.0%	58.4%
% White			98.2%	97.2%	93.0%
% African American			0.0%	0.5%	2.6%
% Asian			1.2%	1.2%	1.3%
% Other			0.6%	1.1%	3.2%
% Hispanic/Latino			1.3%	0.6%	3.7%
% speaking only English at home			94.1%	92.6%	81.7%
% married			43.5%	48.9%	50.1%
% divorced/separated			12.5%	12.3%	12.6%
% widowed			35.7%	33.9%	30.8%
% never married			8.3%	4.9%	6.4%
% living alone			38.3%	33.9%	30.4%
% with less than high school education			19.3%	19.3%	26.8%
% with high school or some college			55.8%	58.3%	50.7%
% with college degree			24.9%	22.4%	22.5%

HEALTHY AGING INDICATORS	BETTER / WORSE STATE RATE[1]	BETTER / WORSE CITY RATE[1]	02888 ESTIMATE	WARWICK ESTIMATE	STATE ESTIMATE
% with income below the poverty level past year			6.2%	7.0%	8.6%
% households with annual income ≥ $50,000			33.5%	39.8%	37.7%
% 60+ receiving food stamps past year			6.5%	9.7%	11.9%
% dually eligible for Medicare and Medicaid			10.2%	11.9%	14.6%

TECHNICAL NOTES

See the technical report for methodological information at http://healthyagingdatareports.org/ri/technicalreport*.*

[1] For most indicators the community and state values are both statistical estimates derived from sample data. Thus, it is possible that some of the differences between state and community estimates may be due to chance associated with population sampling. We use the terms "better" and "worse" to highlight differences between community and state estimates that we are confident are not due to chance.

Other notes:

- *Population characteristic estimates are from the American Community Survey (ACS) (2009-2013) and are reported for the 20 Zip codes. Note that % may not add up to 100% due to rounding error.*
- *Mortality rate, specific chronic disease, access and utilization estimates are for beneficiaries 65 years or older in 2013 from the 2012 and 2013 Centers for Medicare and Medicaid Services (CMS) Master Beneficiary Summary File (MBSF).*
- *Our research team: Elizabeth Dugan, Frank Porell and Nina Silverstein. Graduate Student researchers included: Chae Man Lee, Hyo Jung Lee, Bon Kim, and Krystal Kittle. We thank Amanda Cox from the NYTimes.com for data visualizations; and Maureen Maigret for sharing data on municipal senior transportation and volunteer driver programs collected by Mensel & Maigret (April, 2016). Please send your questions, comments, or ideas to beth.dugan@umb.edu. Let us know how you are using the Data Report in your community!*