

**02910 (Cranston)**

<b>HEALTHY AGING INDICATORS</b>	<b>BETTER / WORSE STATE RATE<sup>1</sup></b>	<b>BETTER / WORSE CITY RATE<sup>1</sup></b>	<b>02910 ESTIMATE</b>	<b>CRANSTON ESTIMATE</b>	<b>STATE ESTIMATE</b>
<b>SERIOUS CHRONIC DISEASE</b>					
% high cholesterol			79.0%	78.9%	78.0%
% with diabetes			35.1%	36.9%	35.7%
% with stroke	b	b	9.6%	12.1%	12.5%
% with chronic obstructive pulmonary disease			23.7%	25.0%	24.1%
% with asthma			14.8%	14.1%	14.0%
% with hypertension	w		81.9%	80.4%	79.0%
% ever had a heart attack			6.8%	5.0%	5.4%
% with ischemic heart disease			45.3%	46.4%	45.9%
% with congestive heart failure			24.1%	26.5%	24.8%
% with anemia			53.2%	54.7%	52.2%
% with chronic kidney disease			25.7%	25.9%	23.3%
% with 4+ chronic conditions			65.4%	66.3%	63.9%
% with 0 chronic conditions			8.4%	8.1%	8.4%
Emergency room visits/1000 persons 65+ years per year			579	627	628
Part D monthly prescription fills per person per year			53.2	52.6	54.2
Durable medical equipment claims per year			2.1	2.1	2.0
Inpatient hospital stays/1000 persons 65+ years per year			298	307	284
Skilled nursing facility stays/1000 persons 65+ years per year			130	110	100
<b>MILD CHRONIC DISEASE</b>					
% with atrial fibrillation			15.1%	14.1%	15.2%
% with osteoarthritis/rheumatoid arthritis			51.8%	53.2%	52.0%
% with osteoporosis		b	19.2%	22.4%	21.0%
% with glaucoma			27.8%	26.9%	26.6%
% with cataract			67.6%	67.0%	67.9%
% women with breast cancer			12.6%	11.3%	10.7%
% men with prostate cancer			16.5%	13.5%	13.8%
% with hypothyroidism			20.2%	21.0%	21.1%
% with benign prostatic hyperplasia			43.2%	43.0%	40.3%
Physician visits per year			8.3	8.6	8.0

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<b>DISABILITY and LATER LIFE CHRONIC DISEASE</b>					
Age-sex adjusted 1-year mortality rate			3.9%	4.5%	4.8%
% ever had a hip fracture			3.4%	4.2%	3.9%
% ever diagnosed with depression			29.2%	30.9%	30.0%
% with Alzheimer's disease or related dementias			13.4%	14.0%	14.4%
% with colon cancer			3.8%	3.5%	3.2%
% with lung cancer			2.1%	2.4%	2.1%
Home health visits per year			3.6	4.6	3.7
% of 65+ getting Medicaid long term services and supports	b	b	4.3%	5.5%	6.2%
% 65+ with hearing difficulty			18.2%	13.6%	13.8%
% 65+ with vision difficulty			7.5%	5.5%	5.2%
% 65+ with ambulatory difficulty			22.5%	20.2%	19.9%
% 65+ with cognition difficulty			5.1%	6.0%	7.8%
% 65+ with self-care difficulty			5.2%	6.7%	6.6%
% 65+ with independent living difficulty			12.6%	12.2%	13.7%
<b>DEMOGRAPHIC (AGE 65+ YEARS)</b>					
% Medicare managed care enrollees			44.4%	43.3%	39.4%
Total population 65 years or older			2,558	12,029	155,558
% 65-74 years			47.8%	47.7%	50.4%
% 75-84 years			37.6%	33.1%	32.0%
% 85 years or older			14.5%	19.3%	17.6%
% female			63.4%	59.5%	58.4%
% White			91.4%	94.0%	93.0%
% African American			1.1%	1.3%	2.6%
% Asian			5.4%	2.4%	1.3%
% Other			2.2%	2.3%	3.2%
% Hispanic/Latino			3.6%	4.3%	3.7%
% speaking only English at home			81.2%	82.0%	81.7%
% married			43.4%	50.5%	50.1%
% divorced/separated			16.5%	12.7%	12.6%
% widowed			32.8%	29.8%	30.8%
% never married			7.3%	6.9%	6.4%
% living alone			36.9%	30.7%	30.4%
% with less than high school education			30.2%	26.4%	26.8%
% with high school or some college			55.7%	56.9%	50.7%
% with college degree			14.1%	16.7%	22.5%

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% with income below the poverty level past year			10.7%	8.3%	8.6%
% households with annual income $\geq$ \$50,000			33.7%	36.1%	37.7%
% 60+ receiving food stamps past year			11.3%	11.3%	11.9%
% dually eligible for Medicare and Medicaid			9.4%	13.8%	14.6%

#### TECHNICAL NOTES

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

<sup>1</sup> 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](http://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](mailto:beth.dugan@umb.edu). Let us know how you are using the Data Report in your community!