



Effective Health Care Leading to Good Health Outcomes

Community Health Assessment Priority Six: Mason County residents have access to quality, timely and local health care services that result in good health outcomes.

Rationale: The sufficient availability of primary care providers is essential for preventive and primary care, as well as access to appropriate specialty care. Primary care providers include primary medical doctors and mid-level providers like nurse practitioners and physician assistants. Access to health care is not only dependent upon sufficient availability of medical providers, but also having adequate health coverage and capacity to resolve barriers, such as transportation or paid sick leave, that limit access. (1)

Moving Mason Forward Goals

Mason County residents experience good health outcomes

Health-related Quality of Life

Health-related quality of life (HRQoL) measures a populations health status through self-reporting. This measure is based upon responses to the question, "In general, would you say that your health is excellent, very good, good, fair or poor?" The County Health Rankings reports the percent of adults who rate their health as 'fair' or 'poor.' (1)

Percent of Population Self-reported Poor or Fair Health Status from County Health Rankings (1)

Area	2017
Mason County	16%
Washington	14%

Premature Death

Premature death is the measure of potential life lost due to death before age 75 years (YPLL-75). Every death that occurs before the age of 75 contributes to the total numbers of years of potential life lost. If a community understands their YPLL-75, they can start to investigate and address the causes of premature death. (1)

Premature Death Impact – YPLL-75 – from County Health Rankings (1)

Area	2013	2014	2015	2016	2017
Mason County	7,114	7,114	7,619	7,600	7,500
Washington	5,709	5,709	5,506	5,500	5,500

Mason County residents are following healthy preventive care practices

There is evidence that suggests that various preventive screenings reduce cancer mortality rates. The percent of women ages 40-69 years who receive a mammogram is widely accepted as a measure of quality of care. Similarly regular diabetic monitoring as part of disease management programs is accepted as the 'standard of care.' (1)

Percent of Population Participation in Selected Preventive Health Screening (1)

Area	Preventive Practice	2011	2012	2013	2014	2015	2016	2017
Mason	Mammogram Screening	61.2%	68.1%	66.3%	64.6%	64.3%	60%	60%
Washington	Mammogram Screening	65.6%	67%	66.0%	62.8%	61.7%	61%	61%
Mason	Diabetic monitoring	86%	84%	86%	87%	85%	86%	83%
Washington	Diabetic monitoring	86%	85%	86%	87%	86%	86%	86%

There are recommended immunization schedules for various populations. Many infectious diseases have been controlled through immunization programs. However, disease control requires the maintenance of very high levels of immunization rates throughout the population since infectious agents are still present, although in considerably smaller numbers.

Percent of Sub-population who are Compliant with Recommended Immunization Schedules

Area	Mason 2014	Mason 2016	WA 2016
Infants 19-35 months (2)	33%	47%	59%
Kindergarten (4 to 6 years) (2)	80%	35%	44%
Teens 13-17 years (2)	29%	41%	48%
Adults – flu vaccine (3)	-	39%	41%
Adults – Pneumonia vaccine (ages 65+) (3)	-	71%	77%

Mason County residents have health care coverage

Health insurance coverage is a necessary, but not sufficient condition for timely access to health care services. Low-income children (<200% of Federal Poverty Level) are eligible for no-cost Apple Health. Low-income adults (<200% of Federal Poverty Level) are eligible for expanded Medicaid. A recent Kaiser Family Foundation report (2014) found that, "Uninsured people are far more likely than those with insurance to report problems getting needed medical care. Thirty percent of adults without coverage say that they went without care in the past year because of its cost compared to 4% of adults with private coverage." (1)

Percent of Population with Health Care Coverage (1) and (4)

Area	2011	2012	2013	2014	2015	2016	2017
Mason Children Enrolled In Medicaid	59%	61%	62%	63%	64%	67%	N/A
Mason Adults (18-64) Enrolled in Medicaid	15%	15%	16%	24%	30%	33%	N/A
Mason Seniors (65+) Enrolled in Medicaid	7%	8%	8%	8%	8%	9%	N/A
WA State Children Enrolled In Medicaid	48%	48%	49%	50%	50%	52%	N/A
WA State Adults (18-64) Enrolled in Medicaid	12%	12%	12%	20%	24%	26%	N/A
WA State Seniors (65+) Enrolled in Medicaid	12%	12%	12%	12%	12%	12%	N/A
Uninsured in Mason County	16%	18%	18%	20%	19%	20%	16%
Uninsured in Washington	15%	15%	16%	16%	16%	16%	13%

Mason County residents have access to quality health care

Preventable Hospital Stays

Hospitalization for diagnoses treatable in outpatient services suggests that the quality of care provided in the outpatient setting was less than ideal. The measure may also represent a tendency to overuse hospitals as a main source of care. (1)

Preventable Hospital Stay Days from County Health Rankings (1)

Area	2011	2012	2013	2014	2015	2016	2017
Mason County	50	43	50	46	43	39	37
Washington	47	46	46	44	39	36	33

Factors That Inform Outcomes

Physical Health

Physical health has a quantity perspective (e.g. how long one lives) and a quality of life perspective. The Health-related quality of life (HRQoL) describes the burden of disabilities and chronic diseases in a population. (1)

Percent of People Living with a Disability by Age, 2012-2016 (6)

Persons with a Disability	Mason County	Washington
Under 18 years	6%	4%
18 to 64 years	19%	11%
65+ years	41%	36%

Percent of People Living with a Disability by Type of Disability, 2012-2016 (6)

Disability Type	Mason County	Washington
Persons with a Hearing Difficulty	33%	32%
Persons with a Vision Difficulty	16%	17%
Persons with a Cognitive Difficulty	36%	39%
Persons with an Ambulatory Difficulty	52%	49%
Persons with a Self-Care Difficulty	20%	19%
Persons with an Independent-Living Difficulty	31%	34%

In addition to measuring how long people live, it is also important to include measures of how healthy people are while alive – people’s reports of days when their physical health was not good are a reliable estimate of their recent health. (1)

The Number of Days during the Past 30 days when Physical Health was Described as “Not Good.” (1)

Area	2017
Mason County	4.2
Washington	3.6

Causes of Death

Top 10 Leading Causes of Death, 2012-2016 (5-Year Estimates) (7)

Cause of Death	Mason County		WA
	Age-adjusted death rate	Rank	Age-adjusted death rate
Cancer	170.8	1 st	156.5
Cardiovascular Disease	138.5	2 nd	137.8
Accidents	52.1	3 rd	40.0
Chronic Lower Respiratory Disease	47.4	4 th	39.2
Alzheimer’s	33.3	5 th	44.0
Stroke	32.4	6 th	35.0
Diabetes	20.1	7 th	21.7
Suicide	18.6	8 th	14.9
Chronic Liver Disease and Cirrhosis	16.4	9 th	11.6
Influenza and Pneumonia	9.9	10 th	10.1

Note: Rates per 100,000

Age-Adjusted Death Rates due to Selected Causes, 2012-2016 (5-Year Estimates) (7)

Cause of Death	Mason County	WA State
Alcohol-related death rate	16.8	12.7
Drug-related death rate	23.0	15.1
Opioid-related death rate	11.3	8.5
Intentional self-harm (Suicide)	18.6	14.9
Motor vehicle accidents	12.6	7.8
Unintended fire arm	0.4	0.1

Note: Rates per 100,000

Cancer Incidents

Selected Cancer Incidents by Type, 2010-2014 (5-Year Estimates) (8)

	Age-adjusted Rate	
	Mason County	WA State
Respiratory (lung)	72.0	59.5
Breast (Female)	168.5	170.5
Prostate	97.0	117.1
Melanomas (skin)	51.3	50.6
Colorectal	36.9	37.1
Endometrium	27.5	25.4
Urinary-bladder	25.2	22.0
Kidney/renal	14.1	16.0
Oral/ pharynx	13.1	12.6

Note: Rates per 100,000

Prenatal Health Outcomes

In 2016, Mason County experienced 667 births. Starting prenatal care in the first trimester is associated with positive health outcomes for both the baby and the mother. (5)

Prenatal Care Rates (5)

	Mason 2011	Mason 2016	WA 2016
Prenatal care established in 1 st Trimester	75%	68%	80%
No prenatal care during pregnancy	1%	1%	1%

Low birthweight (LBW) is a health outcome associated with maternal exposure to health risks. LBW is a predictor of the infant's mortality and/or morbidity over the course of his/her lifetime, as well as potential cognitive development problems. (5)

Low Birthweight as a Percentage of Total Births (5)

Area	2012	2013	2014	2015	2016
Mason County	6.2%	6.2%	6.1%	5.9%	6.2%
Washington	6.2%	6.3%	6.3%	6.3%	6.4%

Between 2012-2016, 3,197 births occurred in Mason County.

Low Birthweight Rates as a Percent of All Births, 2012-2016 (5)

	Mason	WA
Very Low Birthweight	0.6%	1.0%
Moderately Low Birthweight	5.0%	5.3%

Health Care and Health Outcomes

Maternal risk factors during pregnancy can also result in poor health outcomes. Some examples of risk factors include individual health behaviors such as smoking during pregnancy, health status such as being overweight, and social factors such as education level.

Maternal Risk Factors (5)

	Mason 2012	Mason 2016	WA 2016
Mother overweight	32%	28%	26%
Mother obese or morbidly obese	34%	37%	25%
Mother smoked	22%	20%	9%
Mother education less than 8 th grade	11%	15%	3%
Mother education less than high school	20%	13%	9%
Mother education high school or GED	24%	29%	22%
Teen Pregnancy (less than 18 years)	5%	3%	1%

Children and Youth Health Outcomes

Historically, Mason County experiences a low infant/childhood mortality rate. In 2016, there were 3 deaths where the infant was under 1 year of age. Also in 2016, there were no deaths of children ages 1 to 14. (7)

In addition, youth hospitalization rates due to accidents or self-inflicted injuries (suicides) are very low. (9)

Youth Hospitalizations, 2011-2015 (9)

Cause of Hospitalization	Age Specific Rate (Youth less than 18)	
	Mason County	WA State
Unintentional	143.6	139.6
Self-Inflicted Injury	15.2	23.6
Assault	11.8	9.1
Undetermined	1.7	8.5
Other	0.0	0.1

Note: Rates per 100,000

Youth Health Outcomes – Weight (10)

	Mason						Washington		
	2014 8 th grade	2014 10 th grade	2014 12 th grade	2016 8 th grade	2016 10 th grade	2016 12 th grade	2016 8 th grade	2016 10 th grade	2016 12 th grade
Overweight	15%	15%	19%	16%	19%	17%	16%	15%	16%
Obese	14%	17%	13%	14%	16%	15%	11%	12%	14%

Youth Mental Health Outcomes (10)

	Mason						Washington		
	2014 8 th grade	2014 10 th grade	2014 12 th grade	2016 8 th grade	2016 10 th grade	2016 12 th grade	2016 8 th grade	2016 10 th grade	2016 12 th grade
Attempted Suicide	11%	15%	11%	11%	13%	10%	8%	10%	9%
Considered Suicide	21%	28%	24%	21%	29%	24%	17%	21%	20%
Depressive Feelings	36%	45%	40%	33%	42%	41%	28%	34%	37%

Youth Substance Use and Abuse (10)

	Mason						Washington		
	2014 8 th grade	2014 10 th grade	2014 12 th grade	2016 8 th grade	2016 10 th grade	2016 12 th grade	2016 8 th grade	2016 10 th grade	2016 12 th grade
Cigarette Use in past 30 days	7%	12%	16%	4%	8%	11%	3%	6%	11%
Alcohol use in past 30 days	15%	24%	37%	8%	22%	32%	8%	20%	32%
Marijuana use in past 30 days	13%	20%	32%	6%	21%	24%	6%	17%	26%
Rx pain killers to get high	4%	5%	6%	3%	5%	7%	2%	4%	5%

Child abuse and neglect accepted referral rates are an indicator of family dysfunction or stress, since the state only steps in if there are concerns around child welfare and/or safety.

Child Abuse and Neglect in Accepted Referrals (11)

Area	2012	2013	2014	2015	2016
Mason County rate	49.3	54.0	45.9	43.2	47.1
Mason County number of cases	601	657	556	521	569
Washington rate	34.3	34.3	32.4	31.9	34.0

Note: Rates are per 1,000 children

Health Insurance Coverage

With the introduction of the Affordable Care Act, the rates of uninsured individuals have decreased. Washington State chose to participate in the expanded Medicaid program, allowing low-income adults to participate in this program.

Health Coverage Status by Type (12)

Coverage Type	Mason 2016	WA 2016
Private Insurance	59%	70%
Medicaid (all ages)	17%	13%
Medicare	5%	4%
VA Health Care	1%	<1%
Uninsured	14%	10%

Percent of Low-Income Who Remain Uninsured in Mason County, 2016 (12)

Income Range	Percent Uninsured
< 50% Poverty Level	22%
50-100% Poverty Level	20%
100-149% Poverty Level	9%
150-199% Poverty Level	13%
200-299% Poverty Level	17%
>300% Poverty Level	18%

- (1) County Health Rankings, University of Wisconsin. www.countyhealthrankings.org
- (2) Immunization Data. Department of Health, Washington State.
<http://www.doh.wa.gov/DataandStatisticalReports/HealthBehaviors/Immunization/ImmunizationInformationSystem>
- (3) Adult Immunization
https://fortress.wa.gov/hca/tableau/t/51/views/HealthierWashingtonDashboard/StatewideMeasureBrowser?:embed=y&:linktarget=_parent
- (4) Client Count and Service Costs, Department of Health and Human Services, WA State.
<https://www.dshs.wa.gov/sesa/research-and-data-analysis/client-data>.
- (5) Community Health Assessment Tool. Birth Reports. Washington State Department of Health.
- (6) American Fact Finder. Disability Characteristics. US Census Bureau 2012-2016
https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S1810&prodType=table
- (7) Community Health Assessment Tool. Mortality Reports. Washington State Department of Health.
- (8) Washington State Cancer Registry. Incidence Rates
<https://fortress.wa.gov/doh/wscr/WSCR/Query.mvc/Query>
- (9) Community Health Assessment Tool. Hospitalization Reports. Washington State Department of Health.
- (10) Healthy Youth Survey. Department of Health, State of Washington. <https://www.askhys.net/>
- (11) County Risk Profiles. Risk and Protection Profiles for Substance Abuse, July 2017.
<https://www.dshs.wa.gov/sesa/research-and-data-analysis/community-risk-profiles>
- (12) American Fact Finder. Selected Characteristics of the Uninsured. US Census Bureau 2012-2016
https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S2702&prodType=table

Questions about the data can be directed to

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