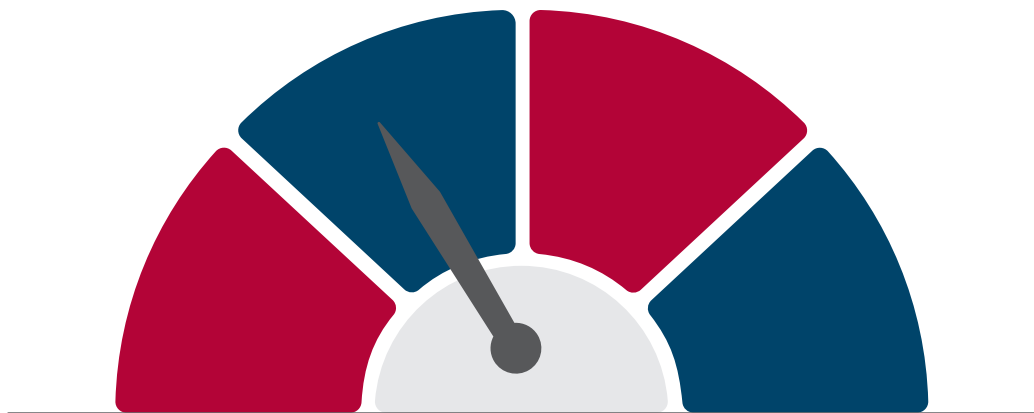# Measuring Our Vision: 2024

How well is MaineHealth achieving its vision?

MaineHealth Center for Health Improvement
Community Health Surveillance and Evaluation

MaineHealth

Report Contributors
Kate Allerding
Reeve Baker
Tim Cowan, MSPH
Dora Anne Mills, MD, MPH
Erica Swan, MBA

For more information please contact:

Dora Anne Mills, MD, MPH
Chief Health Improvement Officer
doraanne.mills@mainehealth.org

Tim Cowan, MSPH
Director, Community Health Surveillance & Evaluation
tim.cowan@mainehealth.org

Erica Swan, MBA
Research Data Analyst II, Community Health Surveillance & Evaluation
erica.swan@mainehealth.org

Preamble

What does the Measuring Our Vision Report tell us about MaineHealth's progress toward achieving our vision of working together so our communities are the healthiest in America? The data show us that counties within the MaineHealth Service Area are challenged with underlying social and economic factors that hold us back from achieving our vision:

- For instance, high **rurality** and **poverty** as well as barriers to improving the **social drivers of health**, such as food security, transportation, and housing, serve as an undertow.
- These factors are in turn associated with high rates of unhealthy risks and behaviors, including **self-reported mentally unhealthy days, substance and alcohol misuse, tobacco addiction,** and **physical inactivity**.
- These in turn contribute to high rates of **depression, cancer, chronic respiratory diseases, multiple chronic conditions, suicides,** and **overdose deaths**.

However, the data also show several successes that exemplify our vision. For instance:

- Maine's low rate of **preventable hospital stays** reflects widespread access to high-quality primary healthcare, which improves quality of life for patients receiving care in the community while reducing healthcare costs.
- Low rates of **teen births** and **sexually transmitted infections**, within the MaineHealth Service Area, are the result of several decades of intentional and strategic partnerships among healthcare partners including family planning, youth, parents, schools, and policymakers, and collaboration on a wide range of strategies.
- High **colorectal cancer screening rates** within Maine are an example of healthcare and community partners working together to educate and screen patients.
- The **rate of adults smoking regularly** within the MaineHealth Service Area is decreasing at a faster rate than some other states. Our rate is in the third quartile for 2019-2021, while in 2017-2019 we were in the fourth (least healthy) quartile. Maine has one of the largest percentage of adults who are former smokers in the U.S. and had one of the largest decreases in high school smoking rates from 1997 to 2021; these data demonstrate the effective multi-sector approach used across Maine for decades to both prevent youth from initiating smoking and helping those dependent on tobacco to quit.
- **Let's Go! and its many partners statewide have helped to influence healthy eating behaviors in our youth**, which in turn will help reduce the burden of obesity in Maine's communities. In 2021, Maine had the lowest rate nationally of children ages 1-5 who had 1+ sugar-sweetened beverages in the preceding week, and the third and second lowest rates of young children who eat fruit and vegetables less than daily, respectively.
- Maine ranks 1st nationwide on **population covered by non-smoking regulations** and **climate change policies**, showing the impact of healthcare and other partners working with policymakers. MaineHealth has a long history of advocating for public health policies.

These successes also hold some insights about how we as a health system can address our challenges and achieve our vision of ***Working together so our communities are the healthiest in America.***

Executive Summary

MaineHealth has a bold vision of ***Working together so our communities are the healthiest in America***. Health is broadly defined using the World Health Organization's definition: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." Thus, to improve the health of the communities we serve, MaineHealth implements a multi-pronged approach: i) **clinical care** improvement strategies; ii) **community-based engagement** initiatives to increase healthy behaviors and help people access clinical care and social services; and iii) advocacy efforts to improve **health-related policies** at the local, state, and federal levels.
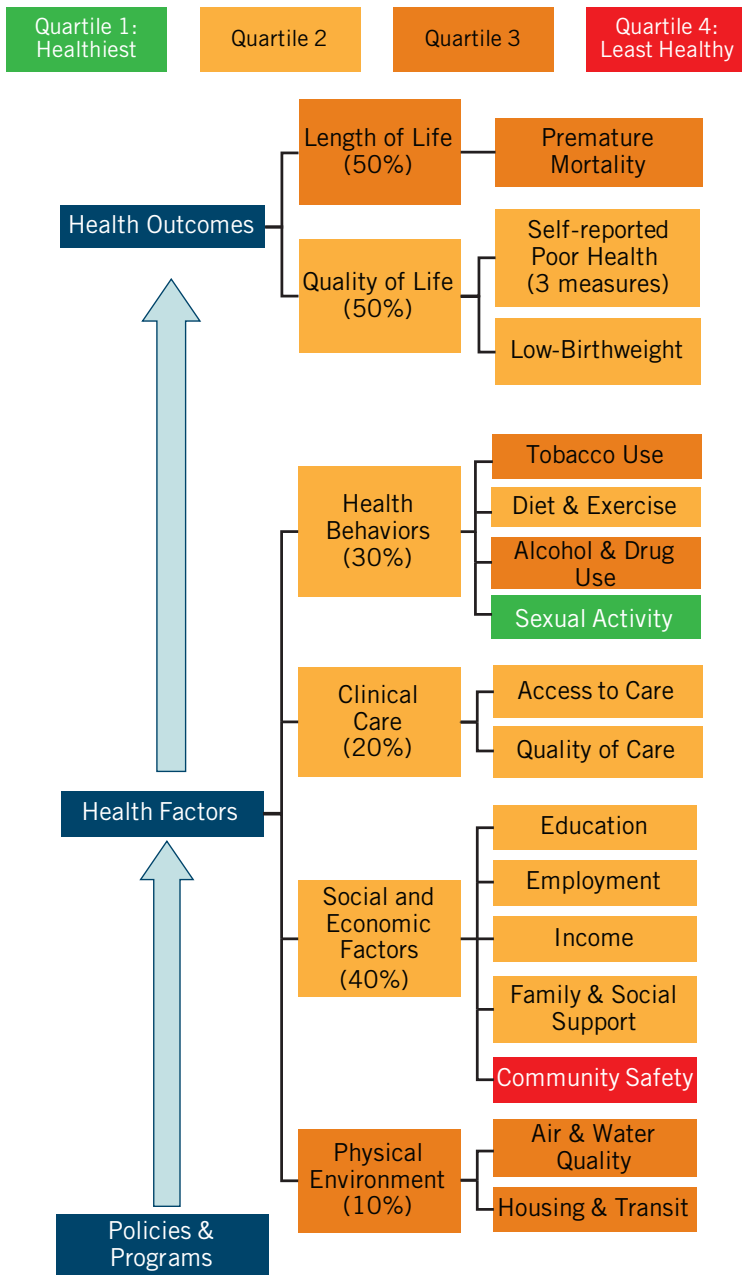
MaineHealth currently monitors progress toward achieving this vision by using established frameworks and indices, primarily the County Health Rankings and America's Health Rankings data and reports. Both ranking systems consider social and economic factors and the physical environment, which have been shown to have a larger impact on individuals' health outcomes than clinical care interventions do alone.

The Measuring Our Vision Report uses the County Health Rankings model (pg. 5) to compare the health data for the twelve-county MaineHealth Service Area, as a region, to states within the U.S.. In addition, given the large impact of social and economic factors on health and that there is variation in these factors across the twelve counties within the MaineHealth Service Area, each county's health outcomes are compared to 33-35 peer counties throughout the United States. MaineHealth Service Area counties are also compared to their peers on measures related to health behaviors (pg. 15). This allows us to assess health status in each county within the MaineHealth Service Area compared to other counties where the demographic, social and economic factors are similar. This approach ensures that the impact of these factors should be similar across peer county groups (without clinical, community or health-policy interventions taking place). The nineteen measures used to identify cohorts of peer counties are included on page 6 as well as details about Maine counties' peers.

The following pages provide resources from other frameworks and reports of that can be used to assess MaineHealth's progress toward achieving our vision. Some examples include:

- Leading causes of death and premature death in the MaineHealth Service Area and Maine.

- Highlights of Maine's strengths and challenges identified by national data sources including Americas Health Rankings, Kids Count, and Measures of Growth.

- Health Index Report Cards that provide county-level data on MaineHealth's priority health areas. Of note, these report cards present data about changes in rates over time, i.e. trends, providing an important lens for assessing the impact of strategies implemented by MaineHealth. For example, while the rate of cancer deaths in the MaineHealth Service Area significantly higher than the U.S. overall rate, the MaineHealth Service Area rate has decreased significantly in recent years. Meanwhile, the rates of drug overdose deaths and suicides in the MaineHealth Service Area have increased significantly in recent years.

Heat Map of the MaineHealth Service Area Ranks compared to states within the U.S.
Heat Map applied to County Health Rankings model

Quartile 1: Healthiest	Quartile 2	Quartile 3	Quartile 4: Least Healthy

Health Outcomes

- Length of Life (50%)
  - Premature Mortality
- Quality of Life (50%)
  - Self-reported Poor Health (3 measures)
  - Low-Birthweight

Health Factors

- Health Behaviors (30%)
  - Tobacco Use
  - Diet & Exercise
  - Alcohol & Drug Use
  - Sexual Activity
- Clinical Care (20%)
  - Access to Care
  - Quality of Care
- Social and Economic Factors (40%)
  - Education
  - Employment
  - Income
  - Family & Social Support
  - Community Safety
- Physical Environment (10%)
  - Air & Water Quality
  - Housing & Transit

Policies & Programs

County Health Rankings model © 2016 UWPHE

MaineHealth Service Area vs. U.S. States

We used County Health Rankings data to assess how the health factors and health outcomes in the MaineHealth Service Area compared to other U.S. states. Detailed results are provided later in this report.

- The least healthy rankings for the Maine Health Service Area, compared to other states, were for **Health Behaviors** among adults- particularly for tobacco use, unhealthy alcohol use, physical inactivity, and access to exercise opportunities.
- Related to **Clinical Care**, the MaineHealth Service Area ranked better on quality of care vs. access to care among states. Of note, the rate of preventable hospitalizations in the MaineHealth Service Area was among the best rates in the U.S.
- The MaineHealth Service Area ranked in the 1st (healthiest) or 2nd quartiles for many **Social and Economic** measures, except for injury deaths under community safety (4th quartile), social associations (3rd quartile), and adults ages 25-44 with some post-secondary education (3rd quartile).
- Examining **Health Outcomes** measures,
  - The median premature mortality rate of the MaineHealth Service Area was higher than the U.S. overall rate (in the 3rd quartile). Note: in the 2022 County Health Rankings, the MaineHealth Service Area's premature mortality rate was in the 2nd quartile. Looking closer at specific causes of premature deaths (at ages <75 years old) in 2021, the MaineHealth Service Area had significantly higher death rates than the U.S. for poisoning deaths (which include drug overdose deaths) and significantly lower death rates for heart disease and COVID-19.
  - Adults in the MaineHealth Service Area had higher average number of mentally unhealthy days in the past month (3rd quartile).

Two Important Caveats:

- COVID-19: Most health data now include data from during the COVID-19 pandemic. We are still learning about its short-term and long-term impacts on health factors and outcomes.
- DISPARITIES: While this report uses geography to define "communities", there are systemic barriers that prevent some communities from achieving their full health potential and contribute to inequities in care access and health outcomes. Providing patient-centered care means delivering care that is equitable and flexible; giving patients the care they need when they need it. MaineHealth is building upon existing health improvement work and building system-wide infrastructure that begins to address these barriers and is committed to becoming a trusted and reliable resource for all communities we serve.

Counties in the MaineHealth Service Area vs. Peer Socioeconomic Status Counties from across the U.S.

Recognizing the substantial influence that social, economic, and physical environment factors have on individuals' health, and that these factors vary substantially across the twelve counties within the MaineHealth Service Area, below is an additional analysis of County Health Rankings data to assess how well MaineHealth is achieving its vision.

- For each of the twelve MaineHealth Service Area counties, 5 health outcomes are compared to rates in a group of "peer" counties from throughout the U.S. that had similar social, economic, and educational profiles, based on nineteen different indicators. Each of these measures carries more importance than specific disease rates for each county.
- Counties within the MaineHealth Service Area tended to have better health outcomes compared to their peer counties, with most counties falling in the 1st or 2nd quartiles for all outcomes. The exception to this is low birthweight, where two counties were in the 4th quartile, and mentally unhealthy days, where most MaineHealth Service Area counties are in the 2nd and 3rd quartiles.
- These findings suggest that MaineHealth's and other organizations' multi-pronged approach to improving community health may be having a positive impact.
- More detailed tables and graphs for health outcomes and health behaviors can be found later in this report (pgs. 10-19).

	Quartile of MaineHealth Service Area County's Rank Among Peer Counties (based on Social, Economic & Education Factors)				
1st Quartile Healthiest) / **2nd Quartile** / **3rd Quartile** / **4th Quartile (Least Healthy)**	**Premature Mortality:** Years of Potential Life Lost before age 75; per 100,000 population (age-adjusted)	% Adults Reporting **Fair or Poor Health** (age-adjusted)	Avg. # **Physically Unhealthy Days in past 30 days** (age-adjusted)	Avg. # **Mentally Unhealthy Days in past 30 days** (age-adjusted)	Percentage of **Live Births with Low Birthweight** (< 2,500 grams)
MaineHealth Service Area					
Androscoggin	2	1	1	2	2
Cumberland	2	1	1	1	1
Franklin	2	1	1	3	4
Kennebec	2	1	1	3	1
Knox	2	1	1	2	2
Lincoln	1	1	1	1	4
Oxford	1	1	1	3	2
Sagadahoc	1	1	1	2	1
Somerset	2	2	1	2	2
Waldo	2	2	1	2	3
York	1	1	1	3	1
Carroll, NH	1	1	1	2	1
Northern & Downeast ME					
Aroostook	1	1	1	1	1
Hancock	2	1	1	3	2
Penobscot	1	1	1	1	1
Piscataquis	1	1	1	1	1
Washington	3	1	1	4	1

Peer groups of U.S. counties were developed by Community Health Status Indicators based on nineteen different metrics:

- Population size
- Population growth
- Population density
- Population mobility
- Percent children
- Percent foreign born
- Percent high school graduates
- Single parent households
- Median home value
- Housing stress
- Unemployment
- Median household income
- Receipt of government financial assistance
- Gini Index of income inequality
- Overall poverty
- Elderly poverty
- Percent elderly
- Percent owner-occupied housing units
- Sex Ratio

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Measuring Our Vision Resources

Contents

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States where Maine's peer counties are located

Cumberland	AK (1), AZ (1), CA (6), CO (3), CT (3), GA (1), HI (1), MA (2), MI (1), NV (1), NH (1), NJ (3), NY (1), NC (1), PA (2), SC (1), WA (3), WI (1)
Sagadahoc	CO (1), GA (1), IL (4), IA (3), KS (2), MI (2), MN (1), NV (1), NY (3), NC (1), OH (1), OK (1), PA (4), VA (6), WI (2)
York	DE (1), FL (12), ID (2), MD (1), NC (6), OR (2), SC (3), TN (3), TX (1), VA (1), WA (1)
Androscoggin/ Penobscot	AL (3), AR (1), CO (1), IL (3), IN (3), IA (1), KS (1), KY (1), LA (1), MI (6), NY (2), OH (3), OR (1), TN (1), TX 1), WA (1), WV (2), WI (2)
Kennebec	AL (1), IL (1), IN (1), MI (2), NY (7), NC (3), OH (7), PA (6), TN (2), TX (1), VA (1), WV (3)
Piscataquis	AL (1), AR (2), CO (1), GA (1), IL (2), KY (2), MI (5), MO (6), NC (1), OK (2), TN (5), TX (2), VA (1), WV (3)
Oxford; Somerset; Aroostook; Washington	AL (3), FL (3), IL (1), KY (1), MI (3), MO (2), NY (3), NC (3), OH (1), OK (2), SC (2), TN (3), TX (4), WA (1)
Knox; Waldo; Lincoln; Carroll, NH; Hancock	CA (3), CO (1), GA (3), MD (1), MI (2), MO (1), MT (2), NY (3), NC (1), OR (1), PA (1), TX (1), VT (3), VA (3), WA (1), WI (3)
Franklin	ID (1), IL (2), IN (2), MI (9), MN (2), MO (3), NY (1), PA (1), TN (1), TX (4), VA (1), WI (7)

yellow = New England States   green = Appalachia region

U.S counties in the same peer county groups as Maine
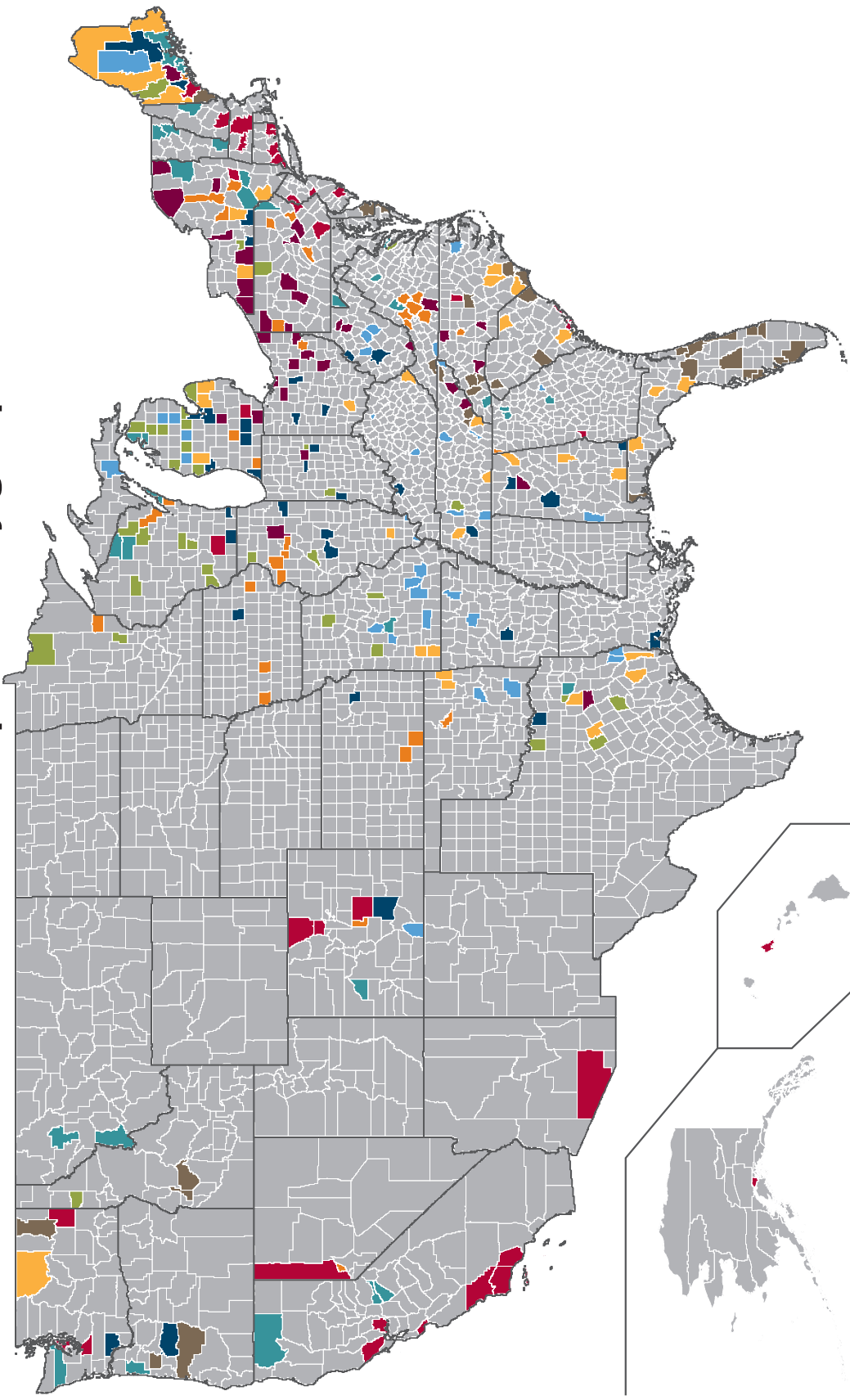
Cumberland County:
peer group 18

Androscoggin/Penobscot County:
peer group 28

**Oxford/Somerset/Aroostook/
Washington County:**
peer group 59

Sagadahoc County:
peer group 22

Kennebec County:
peer group 38

**Knox/Lincoln/Waldo/
Carroll, NH/ Hancock County:**
peer group 74

York County:
peer group 24

Piscataquis County:
peer group 57

Franklin County:
peer group 83

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MaineHealth Service Area (MHSA) Counties vs. Peer Socioeconomic Status

Quartile 1: Healthiest | Quartile 2 | Quartile 3 | Quartile 4: Least Healthy

Maine (ME)/MHSA County	# of Peer Counties	Peer Counties in ME/MHSA	Premature Mortality: Years of Potential Life Lost before age 75 per 100,000 population (age-adjusted)			% Adults reporting fair or poor health (age-adjusted)			Avg. # physically unhealthy days in past 30 days (age-adjusted)			Avg. # mentally unhealthy days in past 30 days (age-adjusted)		
			ME/MHSA County Rate	Peer Group Range	Quartile	ME/MHSA County Rate	Peer Group Range	Quartile	ME/MHSA County Rate	Peer Group Range	Quartile	ME/MHSA County Rate	Peer Group Range	Quartile
MaineHealth Service Area														
Androscoggin	36	Penobscot	9,479	7,595-14,616	2	14.7%	13%-22%	1	3.7	3-5	1	5.4	4-7	2
Cumberland	34	NONE	5,819	4,481-9,859	2	10.0%	10%-21%	1	2.9	2-5	1	4.7	4-6	1
Franklin	35	NONE	8,186	6,686-14,360	2	13.3%	13%-21%	1	3.6	3-5	1	5.5	4-7	3
Kennebec	36	NONE	8,789	6,387-16,626	2	13.5%	13%-24%	1	3.3	3-6	1	5.3	4-7	3
Knox	35	Hancock, Lincoln, Waldo, Carroll	7,994	5,227-11,922	2	12.3%	11%-20%	1	3.2	3-5	1	5.1	4-7	2
Lincoln	35	Hancock, Knox, Waldo, Carroll	6,370	5,227-11,922	1	12.0%	11%-20%	1	3.2	3-5	1	4.5	4-7	1
Oxford	36	Aroostook, Somerset, Washington	8,897	7,496-17,217	1	14.3%	14%-27%	1	3.7	3-6	1	5.6	4-7	3
Sagadahoc	34	NONE	5,585	5,031-23,533	1	11.1%	11%-21%	1	3.0	3-5	1	4.9	4-6	2
Somerset	36	Aroostook, Oxford, Washington	9,728	7,496-17,217	2	17.2%	14%-27%	2	3.9	3-6	1	5.5	4-7	2
Waldo	35	Hancock, Knox, Lincoln, Carroll	8,307	5,227-11,922	2	13.4%	11%-20%	2	3.2	3-5	1	5.1	4-7	2
York	34	NONE	7,109	6,220-13,927	1	11.8%	11%-20%	1	3.2	3-5	1	5.2	4-7	3
Carroll, NH	35	Hancock, Knox, Lincoln, Waldo	6,795	5,227-11,922	1	11.5%	11%-20%	1	3.0	3-5	1	5.1	4-7	2
Northern & Downeast Maine														
Aroostook	36	Oxford, Somerset, Washington	8,943	7,496-17,217	1	15.6%	14%-27%	1	3.7	3-6	1	5.3	4-7	1
Hancock	35	Knox, Lincoln, Waldo, Carroll	7,893	5,227-11,922	2	12.3%	11%-20%	1	3.3	3-5	1	5.3	4-7	3
Penobscot	36	Androscoggin	9,154	7,595-14,616	1	14.3%	13%-22%	1	3.5	3-5	1	5.1	4-7	1
Piscataquis	35	NONE	9,102	7,761-16,610	1	15.9%	15%-27%	1	4.1	3-6	1	5.4	5-7	1
Washington	36	Aroostook, Oxford, Somerset	11,390	7,496-17,217	3	16.3%	14%-27%	1	3.9	3-6	1	5.9	4-7	4

*Graphs showing how counties in the MaineHealth Service Area compare to their peers and other U.S. counties overall immediately follow this table

County Health Rankings: Peer county SES factors

Median Household Income; across peer counties in the U.S.

U.S. Census Small Area Income & Poverty Estimates (2022); American Community Survey, 5-year estimates (2018-2022)

◆ Peer County ● Maine County ▲ MaineHealth Service Area County
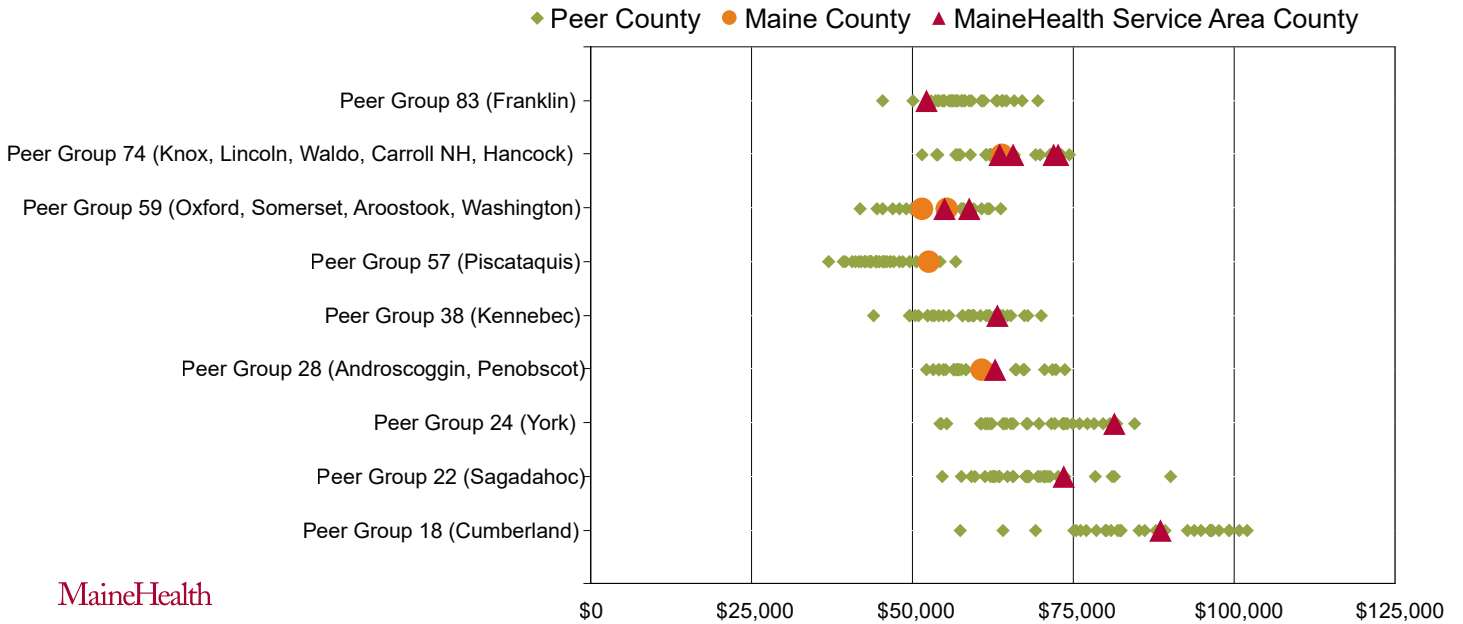
County Health Rankings: Health Outcome Measures

Years of potential life lost before age 75; age-adjusted rates per 100,000 population

National Center for Health Statistics - Mortality Files (2019-2021)

◆ Peer County ● Maine County ▲ MaineHealth Service Area County
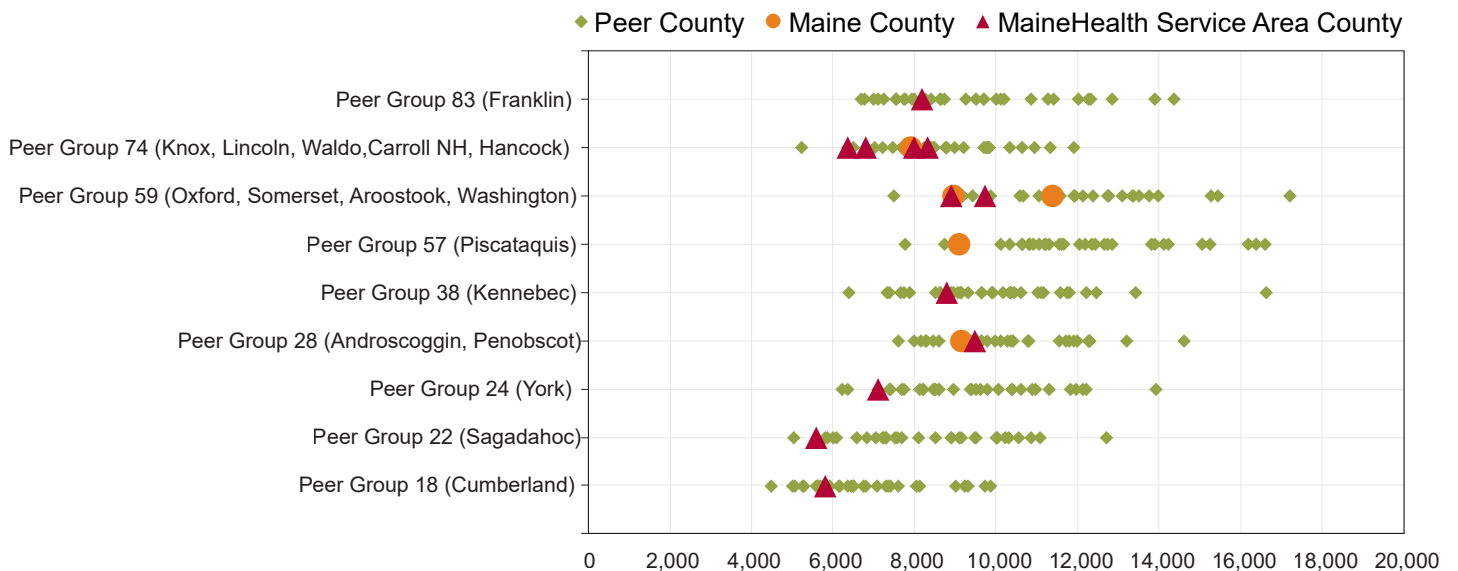
Note: Kingman County, KS in Peer County 22 has been omitted, as it has a rate of 23,532

County Health Rankings: Health Outcome Measures

% of 18⁺-year-olds reporting fair or poor health; age-adjusted rates

Behavioral Risk Factor Surveillance System (2021)

◆ Peer County ● Maine County ▲ MaineHealth Service Area County

County Health Rankings: Health Outcome Measures

Avg# of physically unhealthy days reported in past 30 days; age-adjusted rates

Behavioral Risk Factor Surveillance System (2021)

◆ Peer County ● Maine County ▲ MaineHealth Service Area County

County Health Rankings: Health Outcome Measures

Avg# of mentally unhealthy days reported in past 30 days; age-adjusted rates

Behavioral Risk Factor Surveillance System (2021)

◆ Peer County ● Maine County ▲ MaineHealth Service Area County

Peer Group 83 (Franklin)
Peer Group 74 (Knox, Lincoln, Waldo, Carroll NH, Hancock)
Peer Group 59 (Oxford, Somerset, Aroostook, Washington)
Peer Group 57 (Piscataquis)
Peer Group 38 (Kennebec)
Peer Group 28 (Androscoggin, Penobscot)
Peer Group 24 (York)
Peer Group 22 (Sagadahoc)
Peer Group 18 (Cumberland)

0.0   1.0   2.0   3.0   4.0   5.0   6.0   7.0
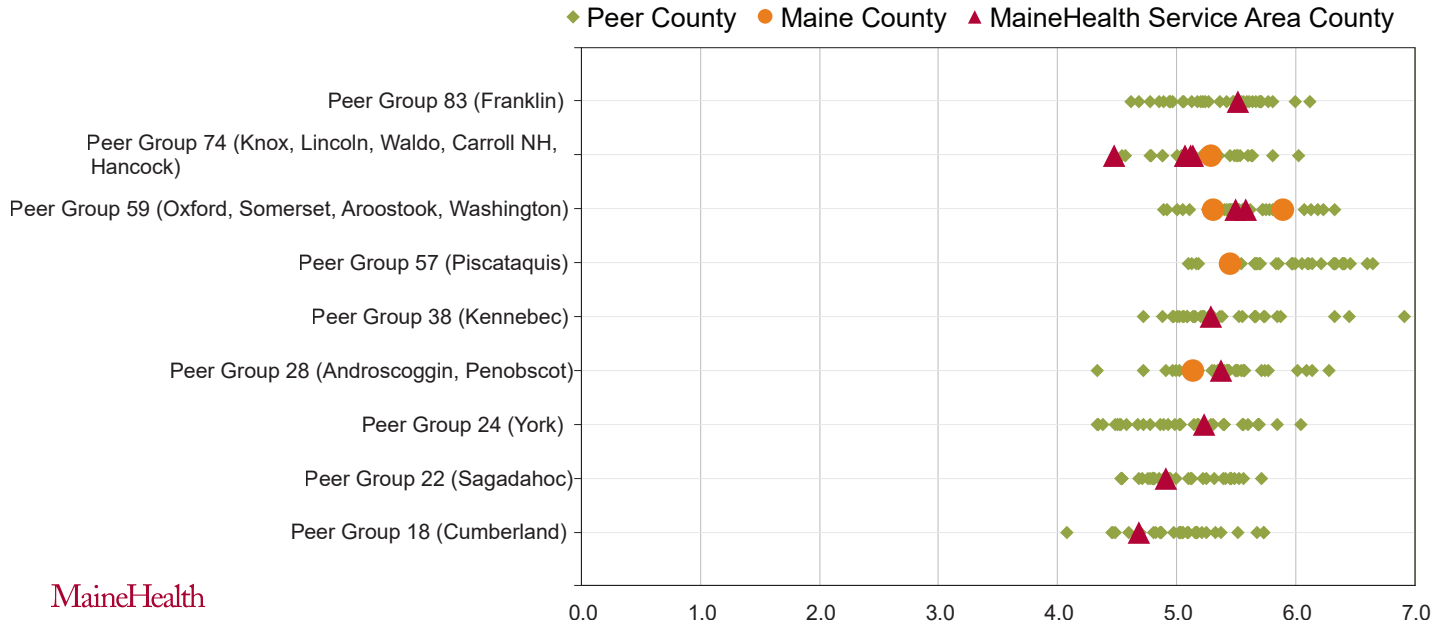
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County Health Rankings: Health Outcome Measures

% of live births with low birthweight (< 2,500 grams)

National Center for Health Statistics - Natality files (2016-2022)

◆ Peer County ● Maine County ▲ MaineHealth Service Area County

Peer Group 83 (Franklin)
Peer Group 74 (Knox, Lincoln, Waldo, Carroll NH, Hancock)
Peer Group 59 (Oxford, Somerset, Aroostook, Washington)
Peer Group 57 (Piscataquis)
Peer Group 38 (Kennebec)
Peer Group 28 (Androscoggin, Penobscot)
Peer Group 24 (York)
Peer Group 22 (Sagadahoc)
Peer Group 18 (Cumberland)

0%   5%   10%   15%
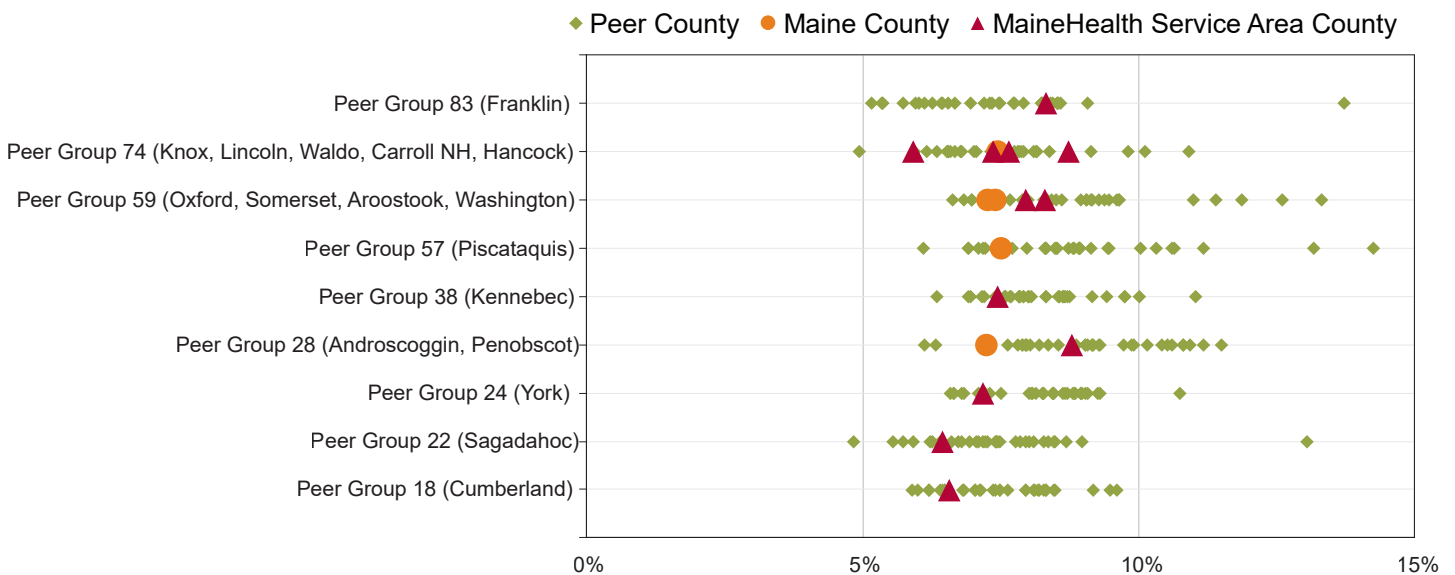
MaineHealth

Note: Costilla County, CO in Peer County 57 has been omitted, as it has a rate of 19.0%

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MaineHealth Service Area Counties vs. Peer Socioeconomic Status

ME/MHSA County	# of Peer Counties	Peer Counties in ME/MHSA	% Adults reporting a body mass index (BMI) greater than or equal to 30 kg/m2 (age-adjusted)			% Adults who are current smokers (age-adjusted)			# Drug poisoning deaths per 100,000 population (age-adjusted)			# Deaths due to suicide per 100,000 population (age-adjusted)		
			ME/MHSA County Rate	Peer Group Range	Quartile	ME/MHSA County Rate	Peer Group Range	Quartile	ME/MHSA County Rate	Peer Group Range	Quartile	ME/MHSA County Rate	Peer Group Range	Quartile
MaineHealth Service Area														
Androscoggin	36	Penobscot	35.7%	34%-44%	1	18.6%	14%-24%	2	45.1	10-97	4	17.2	11-30	2
Cumberland	34	NONE	26.3%	17%-38%	1	11.9%	10%-19%	2	31.4	14-59	3	13.3	7-27	3
Franklin	35	NONE	31.7%	31%-44%	1	17.8%	17%-25%	1	30.0	12-50	3	23.4	13-34	3
Kennebec	36	NONE	34.3%	33%-46%	1	18.0%	17%-27%	1	40.8	13-100	3	18.7	10-27	3
Knox	35	Hancock, Lincoln, Waldo, Carroll	28.7%	27%-44%	1	15.7%	12%-21%	1	31.5	10-47	4	25.9	10-39	4
Lincoln	35	Hancock, Knox, Waldo, Carroll	27.4%	27%-44%	1	16.3%	12%-21%	2	36.1	10-47	4	21.4	10-39	2
Oxford	36	Aroostook, Somerset, Washington	34.0%	31%-44%	1	20.3%	17%-28%	1	28.0	10-60	3	25.2	6-30	4
Sagadahoc	34	NONE	28.6%	26%-43%	1	15.2%	13%-23%	1	22.9	13-55	2	21.5	11-44	3
Somerset	36	Aroostook, Oxford, Washington	37.1%	31%-44%	2	20.8%	17%-28%	2	41.5	10-60	4	27.0	6-30	4
Waldo	35	Hancock, Knox, Lincoln, Carroll	35.9%	27%-44%	4	17.9%	12%-21%	3	25.9	10-47	3	19.0	10-39	2
York	34	NONE	31.4%	26%-39%	1	14.9%	13%-21%	1	31.8	10-56	3	19.8	11-61	2
Carroll, NH	35	Hancock, Knox, Lincoln, Waldo	29.0%	27%-44%	1	13.8%	12%-21%	1	26.7	10-47	3	23.5	10-39	3
Northern & Downeast Maine														
Aroostook	36	Oxford, Somerset, Washington	39.9%	31%-44%	3	21.8%	17%-28%	2	34.4	10-60	4	17.0	6-30	1
Hancock	35	Knox, Lincoln, Waldo, Carroll	28.6%	27%-44%	1	16.5%	12%-21%	2	25.9	10-47	3	18.0	10-39	1
Penobscot	36	Androscoggin	36.4%	34%-44%	1	18.8%	14%-24%	2	51.3	10-97	4	17.6	11-30	3
Piscataquis	35	NONE	36.6%	31%-46%	1	20.4%	17%-28%	1	45.1	20-56	4	30.5	10-35	4
Washington	36	Aroostook, Oxford, Somerset	37.0%	31%-44%	2	21.6%	17%-28%	2	59.6	10-60	4	24.2	6-30	4

Quartile 1: Healthiest
Quartile 2
Quartile 3
Quartile 4: Least Healthy

*Graphs showing how counties in the MaineHealth Service Area compare to their peers and other U.S. counties overall immediately follow this table

Frequent Mental and Physical Distress

Mental and physical health in Maine

% of Maine population who reported that their health was not good 14+ days in the past month

Behavioral Risk Factor Surveillance System (2022); *by demographics*

Mental Health
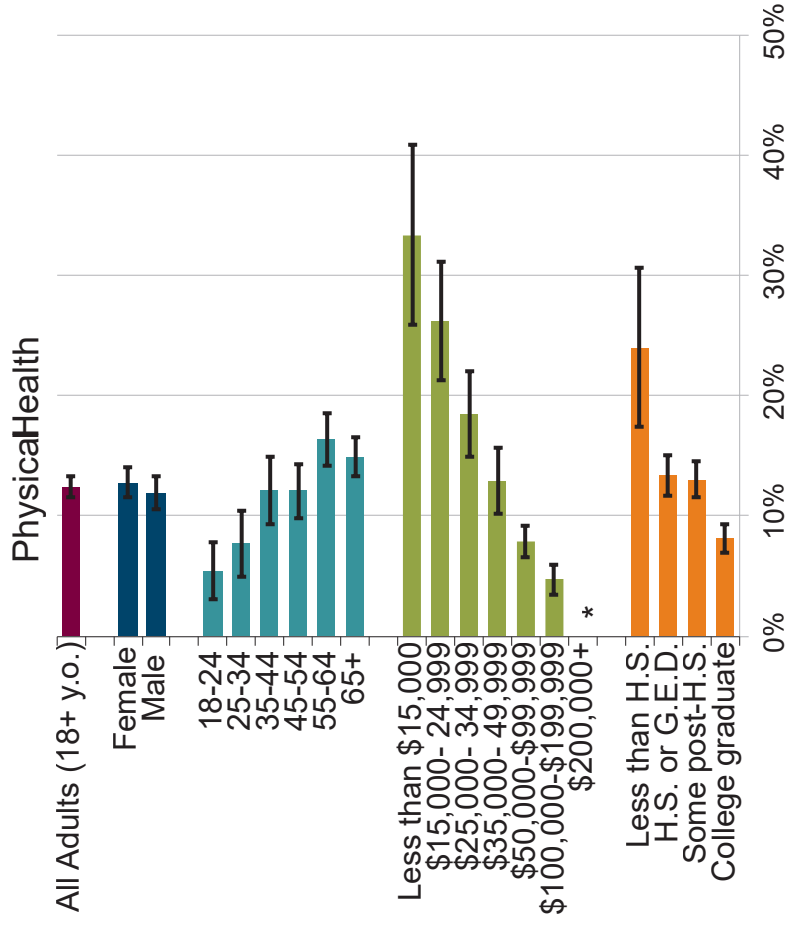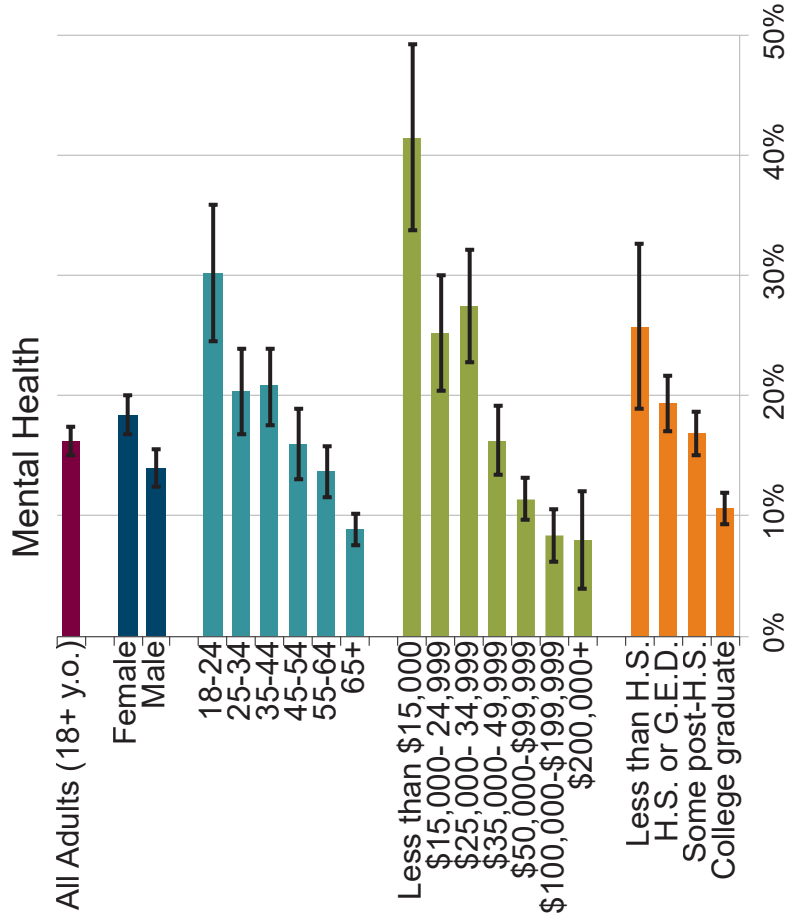
PhysicaHealth

*Due to small numbers, this % was not available.

MaineHealth

MaineHealth Priority Issues: Obesity

% of 18+-year-olds with a body mass index ≥30

Behavioral Risk Factor Surveillance System (2021)

MaineHealth Priority Issues: Tobacco Use

% of 18+-year-olds who currently smoke cigarettes

Behavioral Risk Factor Surveillance System (2021)

MaineHealth Priority Issues: Substance Misuse & Dependence

Drug poisoning deaths per 100,000 population

National Center for Health Statistics - Mortality files (2019-2021) *age-adjusted*

MaineHealth Priority Issues: Mental Health

Deaths due to suicide per 100,000 population

National Center for Health Statistics - Mortality files (2017-2021) *age-adjusted*

County Health Rankings Detailed Heat Map

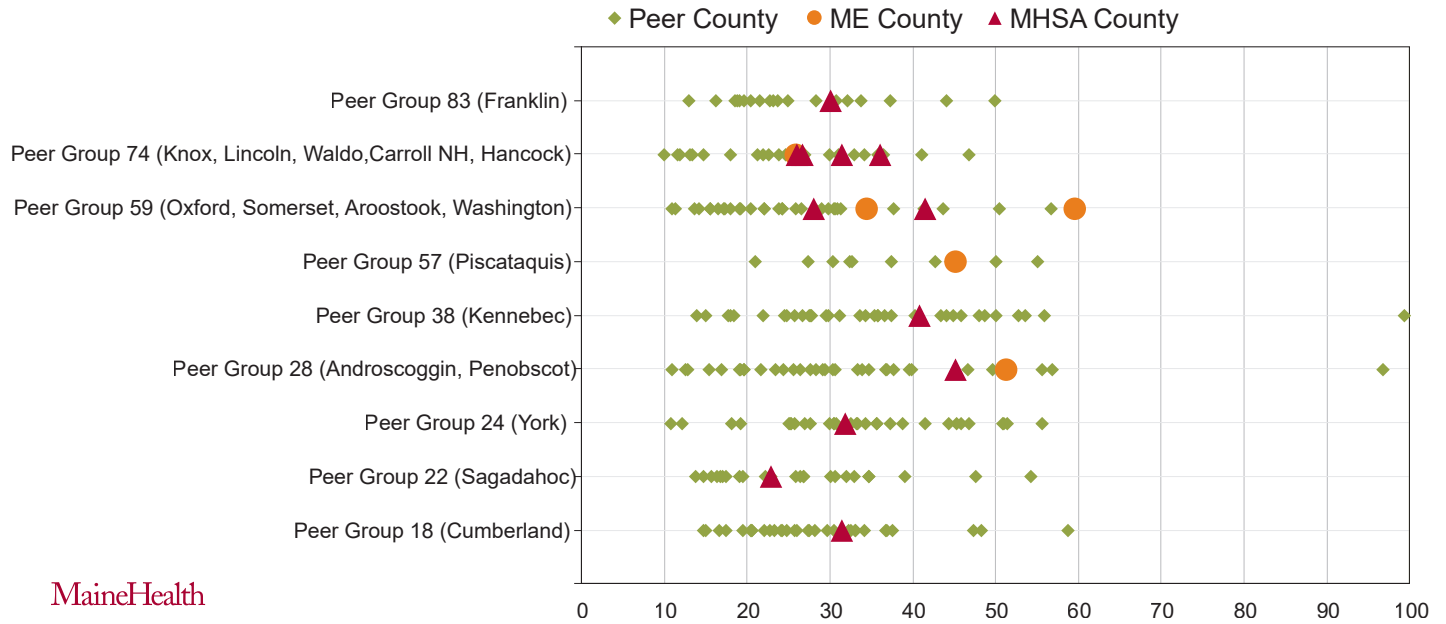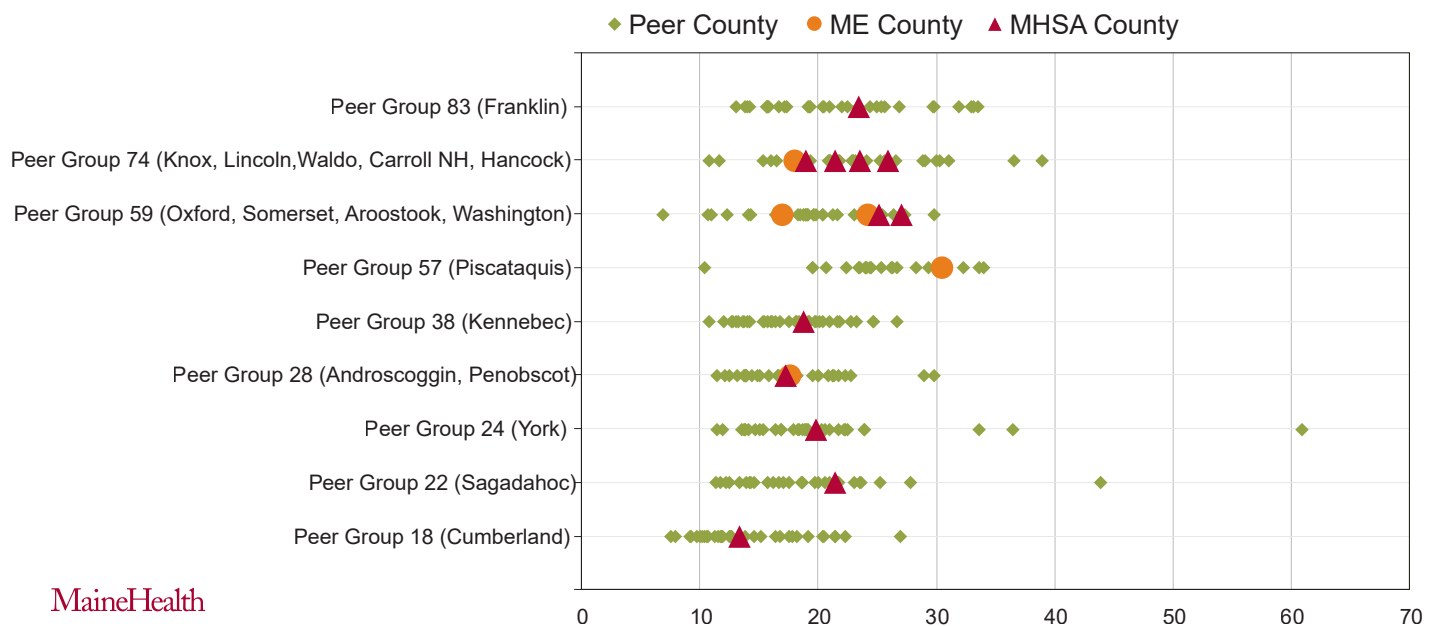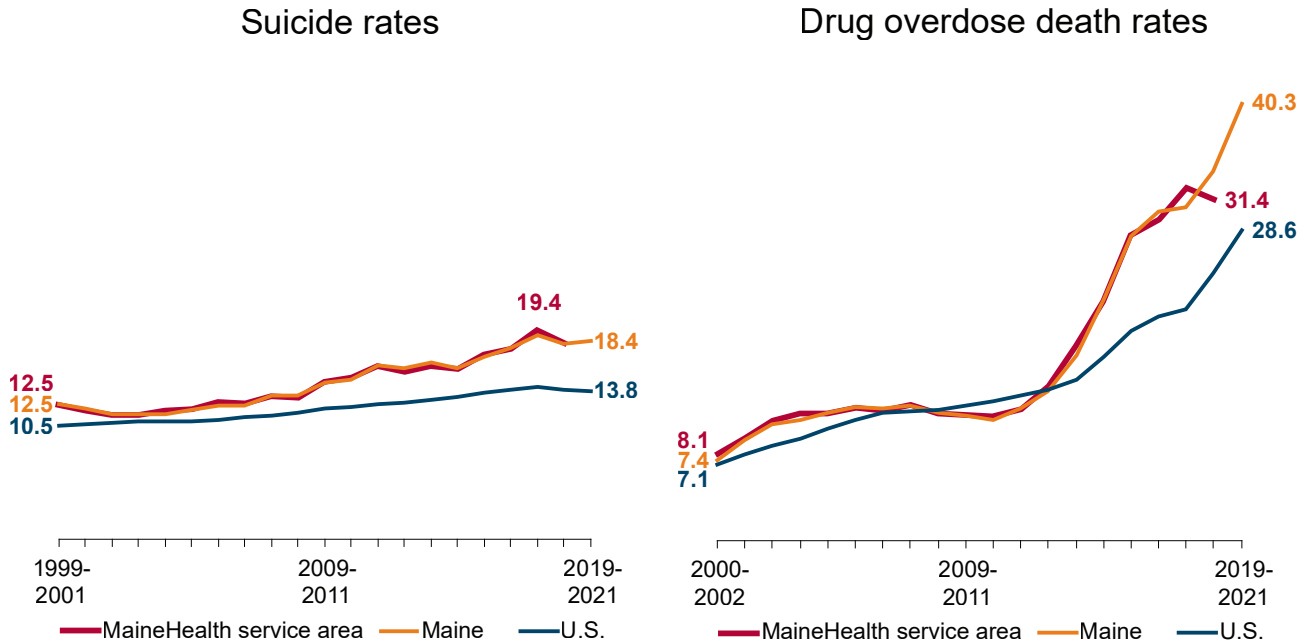| Focus Area	Measure	Description	Year(s)	US Overall	MaineHealth Service Area Compared to All US States		
					Median	Quartile	Range
HEALTH OUTCOMES							
Length of Life	Premature Death*	Years of potential life lost before age 75 per 100,000 population (age-adjusted)	2019-2021	8,000	8,090	3	5,856-12,698
Quality of Life	Poor or Fair Health	% of adults reporting fair or poor health (age-adjusted)	2021	14%	13%	1	11%-22%
	Poor Physical Health Days	Average # of physically unhealthy days reported in past 30 days (age-adjusted)	2021	3.3	3.2	2	2-5
	Poor Mental Health Days	Average # of mentally unhealthy days reported in past 30 days (age-adjusted)	2021	4.8	5.2	3	3-7
	Low Birthweight*	% of live births with low birthweight (< 2,500 grams)	2016-2022	8%	8%	2	6%-13%
HEALTH FACTORS							
HEALTH BEHAVIORS							
Tobacco Use	Adult Smoking	% of adults who are current smokers (age-adjusted)	2021	15%	17%	3	7%-25%
Diet and Exercise	Adult Obesity	% of the adult population (ages 18+) that reports a body mass index (BMI) greater than or equal to 30 kg/m2 (age-adjusted)	2021	34%	32%	2	24%-41%
	Food Environment Index	Index of factors that contribute to a healthy food environment, from 0 (worst) to 10 (best)	2019 & 2021	7.7	8.5	2	4-10
	Physical Inactivity	% of adults ages 18+ over reporting no leisure-time physical activity (age-adjusted)	2021	23%	24%	3	16%-31%
	Access to Exercise Opportunities‡	% of population with adequate access to locations for physical activity	2023, 2022 & 2020	84%	51%	4	50%-100%
Alcohol and Drug Use	Excessive Drinking	% of adults reporting binge or heavy drinking (age-adjusted)	2021	18%	18%	3	12%-26%
	Alcohol-Impaired Driving Deaths	% of driving deaths with alcohol involvement	2017-2021	26%	29%	3	18%-46%
Sexual Activity	Sexually Transmitted Infections	# of newly diagnosed chlamydia cases per 100,000 population	2021	495.5	207.4	1	141-1,038
	Teen Births*	# of births per 1,000 female population ages 15-19	2016-2022	17	12	1	6-30
CLINICAL CARE							
Access to Care	Uninsured	% of population under age 65 without health insurance	2021	10%	8%	2	2%-21%
	Primary Care Physicians	Ratio of population to primary care physicians	2021	1,330:1	1,237:1	2	776:1-1,875:1
	Dentists	Ratio of population to dentists	2022	1,360:1	1,774:1	4	775:1-2,181:1
	Mental Health Providers	Ratio of population to mental health providers	2023	320:1	316:1	2	136:1-740:1
Quality of Care	Preventable Hospital Stays*	Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees	2021	2,681	1,779	1	1,478-3,958
	Mammography Screening*	% of female Medicare enrollees ages 65-74 that received an annual mammography screening	2021	43%	43%	2	35%-53%
	Flu Vaccinations*	% of fee-for-service Medicare enrollees that had an annual flu vaccination	2021	46%	43%	3	33%-56%
SOCIAL & ECONOMIC FACTORS							
Education	High School Completion	% of adults ages 25+ with a high school diploma or equivalent	2018-2022	89%	94%	1	84%-95%
	Some College	% of adults ages 25-44 with some post-secondary education	2018-2022	68%	66%	3	57%-85%
Employment	Unemployment	% of population ages 16+ unemployed but seeking work	2022	3.7%	3%	2	2%-6%
Income	Children in Poverty*	% of people under age 18 in poverty	2022 & 2018-2022	16%	13%	2	7%-27%
	Income Inequality	Ratio of household income at the 80th percentile to income at the 20th percentile	2018-2022	4.9	4.3	1	3-7
Family and Social Support	Children in Single-Parent Households	% of children that live in a household headed by a single parent	2018-2022	25%	20%	1	14%-45%
	Social Associations	# of membership associations per 10,000 population	2021	9.1	9.8	3	3-30
Community Safety	Injury Deaths*	# of deaths due to injury per 100,000 population	2017-2021	80	107	4	56-143
PHYSICAL ENVIRONMENT							
Air and Water Quality	Air Pollution - Particulate Matter	Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5)	2019	7.4	5.6	2	3-10
	Drinking Water Violations⁺	Indicator of the presence of health-related drinking water violations: 'Yes' indicates the presence of a violation, 'No' indicates no violation	2022	Yes	Yes	4	Yes/No
Housing and Transit	Severe Housing Problems	% of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities	2016-2020	17%	13%	2	10%-26%
	Driving Alone to Work*	% of the workforce that drives alone to work	2018-2022	72%	75%	3	29%-84%
	Long Commute - Driving Alone	Among workers who commute in their car alone, the % that commute more than 30 minutes	2018-2022	36%	37%	3	15%-50%

*Indicates subgroup data by race and ethnicity is available; +Not available in all states

Drug overdose death vs. suicide rates

Age-adjusted rates per 100,000 population

U.S. CDC WONDER database (1999-2021) *3-year rolling averages*

Suicide rates

Values shown: 12.5, 12.5, 10.5 (left); 19.4, 18.4, 13.8 (right)

Timeline: 1999-2001, 2009-2011, 2019-2021

—MaineHealth service area —Maine —U.S.

Drug overdose death rates

Values shown: 8.1, 7.4, 7.1 (left); 40.3, 31.4, 28.6 (right)

Timeline: 2000-2002, 2009-2011, 2019-2021

—MaineHealth service area —Maine —U.S.

MaineHealth

Suicide & overdose death rate increases

Crude rates per 100,000 population; by gender & age

U.S. CDC Wonder Database (2007-2011 vs 2017-2021; MaineHealth Service Area)

● 2007-2011 (Drug Overdose)   ● 2017-2021 (Drug Overdose)
● 2007-2011 (Suicide)   ● 2017-2021 (Suicide)

* Due to small numbers, rates were unreliable for one or more time periods and/or categories for certain age groups.

Males by age group: 65+, 45-64, 35-44, 25-34, 15-24
Females by age group: 65+*, 45-64, 35-44, 25-34*, 15-24*
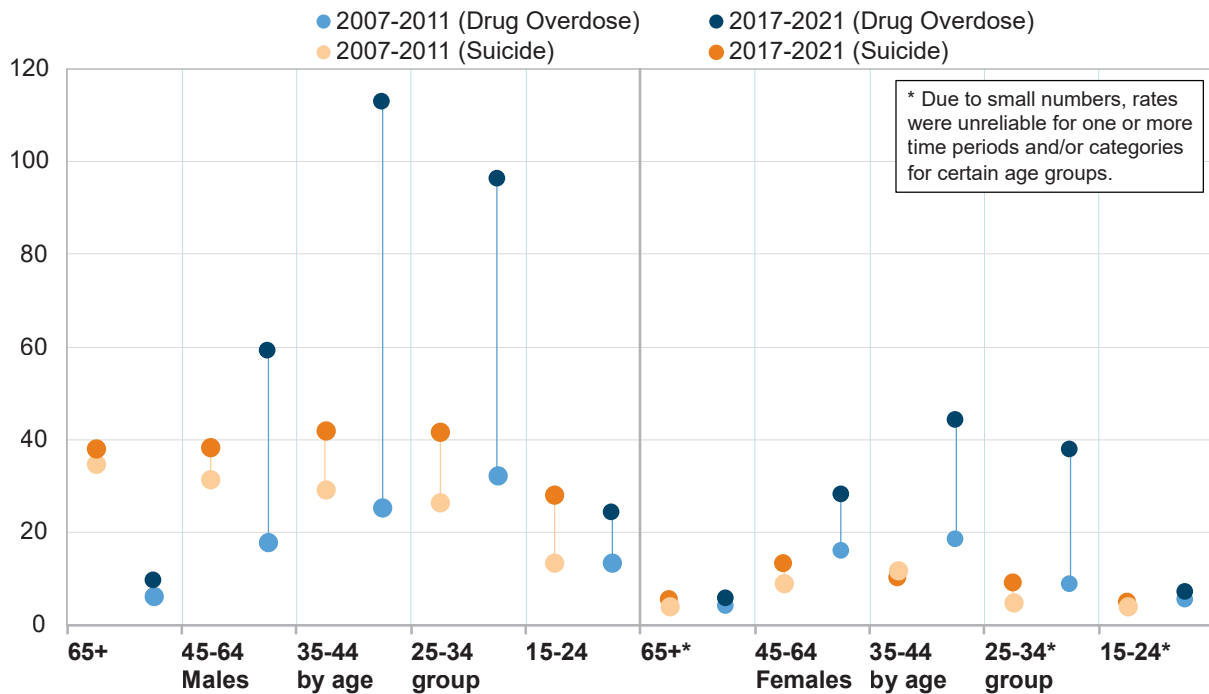
MaineHealth

Leading Causes of Premature Death – MaineHealth Service Area vs. U.S. (2021)

Leading Causes of Premature Death (ages ≤75-years-old)	MaineHealth Service Area		United States	
	Rank	Age-Adjusted rate	Rank	Age-Adjusted rate
Cancer	1	77.3	1	79.2
Unintentional injuries	2	61.6	4	55.4
Poisoning (incl. drug overdoses)		*42.3*		*32.7*
Motor Vehicle Accidents		*10.7*		*13.0*
Falls		*2.7*		*3.0*
Heart Disease	3	49.2	2	67.8
COVID-19	4	23.3	3	59.4
Intentional self-harm (suicide)	5	18.5	6	13.7
Chronic lower respiratory diseases	6	15.3	7	13.4
Chronic liver disease and cirrhosis	7	12.1	8	13.1
Diabetes	8	11.6	5	14.3
Cerebrovascular diseases	9	7.7	9	12.3
Certain conditions originating in the perinatal period	10	3.7	++	3.1

++This cause of death was not in the top 15 causes of premature death in the U.S. overall

Leading Causes of Death – MaineHealth Service Area vs. U.S. (2021)

Leading Causes of Premature Death (all ages)	MaineHealth Service Area		United States	
	Rank	Age-Adjusted rate	Rank	Age-Adjusted rate
Heart Disease	1	158.5	1	173.8
Cancer	2	157.7	2	146.6
Unintentional injuries	3	61.6	4	55.4
Poisoning (incl. drug overdoses)		*42.6*		*31.0*
Falls		*12.0*		*11.4*
Motor Vehicle Accidents		*17.0*		*13.3*
COVID-19	4	58.5	3	104.1
Chronic lower respiratory disease	5	38.8	6	34.7
Cerebrovascular diseases	6	31.3	5	41.1
Alzheimer disease	7	29.4	7	31.0
Diabetes	8	24.9	8	25.4
Intentional self-harm (suicide)	9	19.6	11	14.1
Chronic liver disease and cirrhosis	10	14.4	9	14.5

Leading Causes of Premature Death – MaineHealth Service Area vs. U.S. (2022)

Leading Causes of Premature Death (ages <75-years-old)	MaineHealth Service Area		United States	
	Rank	Age-Adjusted rate	Rank	Age-Adjusted rate
Cancer	1	**82.9**	1	78.4
Unintentional injuries	2	**82.7**	3	55.2
Poisoning (incl. drug overdoses)		***59.0***		*32.9*
Motor Vehicle Accidents		*12.9*		*13*
Falls		*3.2*		*4*
Heart Disease	3	60.2	2	65.9
COVID-19	4	**18.8**	7	13.4
Intentional self-harm (suicide)	5	**17.2**	6	13.7
Chronic lower respiratory diseases	6	**17.1**	5	13.8
Chronic liver disease and cirrhosis	7	15.9	4	19.8
Diabetes	8	**14.6**	8	12.4
Cerebrovascular diseases	9	8.3	9	12.2
Certain conditions originating in the perinatal period	10	5.1	++	3.2

++This cause of death was not in the top 15 causes of premature death in the U.S. overall

Leading Causes of Death – MaineHealth Service Area vs. U.S. (2022)

Leading Causes of Premature Death (all ages)	MaineHealth Service Area		United States	
	Rank	Age-Adjusted rate	Rank	Age-Adjusted rate
Heart Disease	1	179.8	2	175.8
Cancer	2	**163.0**	1	147.6
Unintentional injuries	3	**95.9**	3	65.1
Poisoning (incl. drug overdoses)		***55.6***		*31.1*
Falls		*17.8*		*11.9*
Motor Vehicle Accidents		*13.3*		*12.9*
COVID-19	4	**42.5**	6	**36.0**
Chronic lower respiratory disease	5	39.8	4	46.5
Cerebrovascular diseases	6	32.0	5	**41.8**
Alzheimer disease	7	**29.5**	9	25.0
Diabetes	8	27.6	8	31.1
Nephritis, nephrotic syndrome & nephrosis	9	**17.9**	15	14.4
Chronic liver disease and cirrhosis	10	16.1	12	14.0

Maine Shared CHNA – 2022 Priorities Identified by various groups

The following table provides a summary of the top health priorities selected by participants during the community engagement process. The total number of participants in each set of events (or oral survey in the case of the immigrant population) is provided in the column labeled 'N'. The percentages reflect the percentage of participants who selected the issue as a top health priority. The darker the cells are shaded, the higher percentage of participants who selected it as a top health priority. The exception is for the youth event where no formal voting took place. Instead, check marks are used to indicate recurring themes in those discussions

Population	N	Mental Health	Social Determinants of Health	Access to Care	Substance and Alcohol Use	Older Adult Health	Diabetes	Oral Health	Cancer	Communication
County Forums	1,029	54%	41%	40%	39%	17%	6%	6%	8%	-
Black or African American	8	50%	50%	75%	25%	-	-	13%	38%	-
People who are Deaf and Hard of Hearing	20	20%	20%	30%	15%	30%	15%	5%	-	55%
People who live with a disability	35	40%	37%	17%	7%	6%	-	31%	3%	-
People Experiencing Homelessness	31	52%	16%	35%	42%	3%	10%	10%	3%	-
Immigrant	1,000	69%	-	19%	-	28%	65%	61%	20%	-
LGBTQ+ community	13	69%	69%	62%	38%	15%	-	-	-	-
People with low income	21	38%	48%	19%	29%	19%	10%	19%	5%	-
People with a mental health diagnosis	15	53%	40%	44%	20%	20%	-	13%	-	-
Older adults	75	32%	37%	43%	4%	32%	1%	9%	1%	-
Youth	30	✓	✓	✓	-	-	-	✓	-	-

Summary of Strengths and Challenges – Various Maine Reports

Source	Strengths	Challenges
America's Health Rankings 2023 Annual Report (relative to other States)	• High prevalence of high school completion • Low homicide rate • Low incidence of chlamydia	• High prevalence of multiple chronic conditions • High prevalence of frequent mental distress • High Black/white residential segregation
America's Health Rankings 2023 Senior Report (relative to other States)	• Low prevalence of multiple chronic conditions • High volunteerism rate • Low prevalence of avoiding care due to cost	• High suicide rate • High prevalence of excessive drinking • High prevalence of physical inactivity
America's Health Rankings 2023 Women and Children Report (relative to other States)	• High prevalence of high school completion • High voter participation among women • Low incidence of chlamydia among women	• High prevalence of multiple chronic conditions among women • Low enrollment in early childhood education • High prevalence of cigarette smoking among women
County Health Rankings 2024 (MHSA relative to US overall)	• Low prevalence of sexually transmitted infections and teen births • High % of people who have completed high school • Low % of people reported fair or poor health • Low preventable hospitalizations • Low income inequality • Low % of children in single parent households	• High rate of injury deaths • High rate of alcohol-impaired driving deaths • Low access to locations for physical activity • Low access to dentists
Maine Kids Count 2023 (annual trends)	• Fewer children in poverty • Preschool attendance returned to pre-pandemic rates	• Highest rate nationally of child maltreatment • Higher rates of teen anxiety and depression • Lower rates of early intervention for babies with developmental delays • Lower rate of high school graduation
Maine Youth Risk Behavior Surveillance System 2021 (annual trends)	• Lower % of high school students reporting current drinking • Fewer high school students reported being bullied on school property • Fewer high school students reported ever trying cigarette smoking	• More high school student feeling sad or hopeless • Fewer high school students reported being physically active
Maine Measures of Growth 2023 (annual trends)	• Annual average wages remain above peer state average, but below national average • Increase in % of adults with postsecondary degrees and/or credentials • Growth in locations with internet, but this growth is uneven across the state • Air and water quality continues to exceed national average	• % of children with mental and/or behavioral health conditions continues to rise • Continued workforce shortages • Home ownership costs not affordable • Decrease in % of 4th graders proficient in reading and 8th graders proficient in math • Cost of energy rising, similar to national increase • Tax burden above New England and U.S. averages • Research and development spending ranks 44th among U.S. states

Summary of Strengths and Challenges – America's Healthy Rankings and County Health Rankings Components

- **Social and Economic Factors**
  - **Strengths:** Maine's strengths in social and economic factors include high rates of high school completion and voter participation and low rates of homicide (although this will likely change when 2023 data are included). An additional strength, when looking at MaineHealth Service Area counties instead of Maine overall, was a low ratio of income inequality.
  - **Challenges:** Maine challenges in this area include high rates of adverse childhood experiences (ACEs) and low rates of fourth grade reading proficiency. In addition, among MaineHealth Service Area counties there are high rates of injury deaths, which include drug overdose deaths and suicides among other causes.

- **Health Behaviors**
  - **Strengths:** One of Maine's and MaineHealth Service Area counties' biggest strengths under health behaviors is safe sexual activity, including low rates of high-risk HIV behaviors, chlamydia cases, and teen births.
  - **Challenges:** Maine has high rates of adult smoking and physical inactivity. Further, a lower % of people in the MaineHealth Service Area counties have access to locations for physical activity compared to the U.S. and tended to have worse rates of heavy and binge drinking among adults and driving deaths involving alcohol.

- **Clinical Care**
  - **Strengths**: People in Maine have more access to primary care physicians and mental health providers compared to people in other states, although this varies by county. Further, Maine has higher rates of colorectal cancer screenings (ranked #1 in the U.S.) compared to other states and low rates of adults avoiding care due to cost. MaineHealth Service Area counties also are in the 1st quartile for low rates of preventable hospital stays.
  - **Challenges:** Compared to other states, people in Maine have more difficulty accessing dental care. Maine ranks in the middle of other states on prevalence of uninsured adults (26th), though this is improving.

- **Physical Environment**
  - **Strengths:** In Maine, air pollution is lower than other states as well as the % of people with severe housing problems. The % of electricity generated through renewable energy is higher and stronger climate and non-smoking policies are in place in Maine compared to other states.
  - **Challenges:** Maine has both a higher % of housing with lead risks and population living in areas with climate risks. MaineHealth Service Area counties were in the 3rd quartile for states for both the % of people who commute alone and have a long commute.

Maine

State Health Department Website: maine.gov/dhhs

Overall Rank

10

Summary

Strengths

- High prevalence of high school completion
- Low homicide rate
- Low incidence of chlamydia

Challenges

- High prevalence of multiple chronic conditions
- High prevalence of frequent mental distress
- High Black/white residential segregation

Highlights

Chronic Kidney Disease

30% ▲

from 3.3% to 4.3% of adults between 2020 and 2022.

Drug Deaths

20% ▲

from 37.6 to 45.2 deaths per 100,000 population between 2020 and 2021.

Dental Care Providers

10% ▲

from 57.6 to 63.1 per 100,000 population between September 2022 and September 2023.

Measures

		State Rank	State Value	U.S. Value
Social & Economic Factors		**15**	**0.437**	
Community and Family Safety	Homicide (Deaths per 100,000 population)	2	1.5	7.7
	Occupational Fatalities (Deaths per 100,000 workers)	18	3.9	3.9
	Public Health Funding (Dollars per person)	9	$241	$183
Economic Resources	Economic Hardship Index (Index from 1-100)	13	34	—
	Food Insecurity (% of households)	19	10.1%	11.2%
	Income Inequality (80-20 Ratio)	16	4.42	4.92
Education	Fourth Grade Reading Proficiency (% of public school students)	40	29.2%	32.1%
	High School Completion (% of adults ages 25+)	2	94.6%	89.6%
Social Support and Engagement	Adverse Childhood Experiences (% of children ages 0-17)	39	17.9%	14.0%
	High-Speed Internet (% of households)	21	93.0%	92.9%
	Residential Segregation - Black/White (Index from 0-100)	46	76	—
	Volunteerism (% of population ages 16+)	4	34.9%	23.2%
	Voter Participation (% of U.S. citizens ages 18+)	3	67.6%	59.5%
Physical Environment		**6**	**0.782**	
Air and Water Quality	Air Pollution (Micrograms of fine particles per cubic meter)	4	5.4	8.6
	Drinking Water Violations (Average number of violations per community water system)	24	1.9	2.7
	Water Fluoridation (% of population served)	21	79.5%	72.7%
Climate and Health	Climate Policies (Number of four policies)	1	4	—
	Climate Risks (% of population)*	32	49.1%	35.5%
	Renewable Energy (% of total electricity generated)*	8	49.3%	20.5%
Housing and Transit	Housing With Lead Risk (% of housing stock)	40	22.3%	16.5%
	Severe Housing Problems (% of occupied housing units)	10	12.7%	16.7%
	Transportation Health Risks (% of population)*	20	15.7%	24.0%
Clinical Care		**5**	**1.081**	
Access to Care	Avoided Care Due to Cost (% of adults)	4	7.3%	10.1%
	Dental Care Providers (Number per 100,000 population)	23	63.1	64.6
	Mental Health Providers (Number per 100,000 population)	4	557.0	324.9
	Primary Care Providers (Number per 100,000 population)	2	320.1	232.0
	Uninsured (% of population)	23	6.6%	8.0%
Preventive Clinical Services	Childhood Immunizations (% of children by age 24 months)	8	77.2%	70.0%
	Colorectal Cancer Screening (% of adults ages 45-75)	1	68.9%	61.8%
	Dental Visit (% of adults)	26	65.2%	66.0%
	Flu Vaccination (% of adults)	4	54.3%	45.6%
	HPV Vaccination (% of adolescents ages 13-17)	19	66.2%	62.6%
Quality of Care	Dedicated Health Care Provider (% of adults)	1	91.7%	83.8%
	Preventable Hospitalizations (Discharges per 100,000 Medicare beneficiaries ages 18+)	11	2,096	2,681
Behaviors		**15**	**0.374**	
Nutrition and Physical Activity	Exercise (% of adults)	38	20.2%	23.0%
	Fruit and Vegetable Consumption (% of adults)	26	7.1%	7.4%
	Physical Inactivity (% of adults)	18	22.6%	23.4%
Sexual Health	Chlamydia (Cases per 100,000 population)	3	245.7	495.5
	High-Risk HIV Behaviors (% of adults)	7	5.3%	5.7%
	Teen Births (Births per 1,000 females ages 15-19)	5	7.8	13.9
Sleep Health	Insufficient Sleep (% of adults)	11	32.7%	35.5%
Tobacco Use	Smoking (% of adults)	32	15.0%	14.0%
Health Outcomes		**15**	**0.353**	
Behavioral Health	Drug Deaths (Deaths per 100,000 population)*	43	45.2	32.1
	Excessive Drinking (% of adults)	19	17.7%	18.4%
	Frequent Mental Distress (% of adults)	33	16.3%	15.9%
	Non-medical Drug Use (% of adults)	11	11.6%	15.9%
Mortality	Premature Death (Years lost before age 75 per 100,000 population)	23	9,066	9,478
	Premature Death Racial Disparity (Ratio)	3	1.1	1.6
Physical Health	Frequent Physical Distress (% of adults)	24	12.4%	12.4%
	Low Birth Weight (% of live births)	11	7.3%	8.5%
	Low Birth Weight Racial Disparity (Ratio)	4	1.5	2.1
	Multiple Chronic Conditions (% of adults)	43	14.6%	11.2%
	Obesity (% of adults)	18	33.1%	33.6%
Overall		**10**	**0.534**	

* Additional measure (not included in overall rank). For measure definitions, source details and methodology, visit www.AmericasHealthRankings.org.
— Data not available, missing or suppressed.

New Hampshire

State Health Department Website: dhhs.nh.gov

Overall Rank

1

Summary

Strengths

- Low economic hardship index score
- Low household food insecurity
- Low homicide rate

Challenges

- High prevalence of frequent mental distress
- High prevalence of multiple chronic conditions
- Low percentage of community water supply with fluoridated water

Highlights

Cardiovascular Diseases

28% ▲

from 7.1% to 9.1% of adults between 2017 and 2022.

Uninsured

22% ▼

from 6.3% to 4.9% of the population between 2019 and 2022.

Housing Cost Burden

20% ▲

from 32.2% to 38.6% of households between 2019 and 2022.

Measures

		State Rank	State Value	U.S. Value
Social & Economic Factors		**1**	**1.030**	
Community and Family Safety	Homicide (Deaths per 100,000 population)	1	1.1	7.7
	Occupational Fatalities (Deaths per 100,000 workers)	4	3.1	3.9
	Public Health Funding (Dollars per person)	30	$181	$183
Economic Resources	Economic Hardship Index (Index from 1-100)	1	1	—
	Food Insecurity (% of households)	1	6.2%	11.2%
	Income Inequality (80-20 Ratio)	15	4.38	4.92
Education	Fourth Grade Reading Proficiency (% of public school students)	6	37.0%	32.1%
	High School Completion (% of adults ages 25+)	3	94.5%	89.6%
Social Support and Engagement	Adverse Childhood Experiences (% of children ages 0-17)	25	15.5%	14.0%
	High-Speed Internet (% of households)	1	95.4%	92.9%
	Residential Segregation - Black/White (Index from 0-100)	34	68	—
	Volunteerism (% of population ages 16+)	17	27.9%	23.2%
	Voter Participation (% of U.S. citizens ages 18+)	5	66.6%	59.5%
Physical Environment		**12**	**0.517**	
Air and Water Quality	Air Pollution (Micrograms of fine particles per cubic meter)	2	4.9	8.6
	Drinking Water Violations (Average number of violations per community water system)	11	1.6	2.7
	Water Fluoridation (% of population served)	43	46.2%	72.7%
Climate and Health	Climate Policies (Number of four policies)	13	3	—
	Climate Risks (% of population)*	20	29.3%	35.5%
	Renewable Energy (% of total electricity generated)*	33	9.7%	20.5%
Housing and Transit	Housing With Lead Risk (% of housing stock)	34	19.6%	16.5%
	Severe Housing Problems (% of occupied housing units)	23	13.8%	16.7%
	Transportation Health Risks (% of population)*	15	12.4%	24.0%
Clinical Care		**6**	**1.069**	
Access to Care	Avoided Care Due to Cost (% of adults)	8	7.7%	10.1%
	Dental Care Providers (Number per 100,000 population)	17	67.2	64.6
	Mental Health Providers (Number per 100,000 population)	15	393.3	324.9
	Primary Care Providers (Number per 100,000 population)	6	292.1	232.0
	Uninsured (% of population)	8	4.9%	8.0%
Preventive Clinical Services	Childhood Immunizations (% of children by age 24 months)	3	79.9%	70.0%
	Colorectal Cancer Screening (% of adults ages 45-75)	20	62.6%	61.8%
	Dental Visit (% of adults)	8	69.0%	66.0%
	Flu Vaccination (% of adults)	6	53.5%	45.6%
	HPV Vaccination (% of adolescents ages 13-17)	3	76.2%	62.6%
Quality of Care	Dedicated Health Care Provider (% of adults)	3	90.2%	83.8%
	Preventable Hospitalizations (Discharges per 100,000 Medicare beneficiaries ages 18+)	19	2,472	2,681
Behaviors		**2**	**1.129**	
Nutrition and Physical Activity	Exercise (% of adults)	5	26.4%	23.0%
	Fruit and Vegetable Consumption (% of adults)	4	11.1%	7.4%
	Physical Inactivity (% of adults)	7	20.0%	23.4%
Sexual Health	Chlamydia (Cases per 100,000 population)	2	217.9	495.5
	High-Risk HIV Behaviors (% of adults)	29	5.8%	5.7%
	Teen Births (Births per 1,000 females ages 15-19)	1	5.4	13.9
Sleep Health	Insufficient Sleep (% of adults)	16	33.0%	35.5%
Tobacco Use	Smoking (% of adults)	10	11.2%	14.0%
Health Outcomes		**8**	**0.573**	
Behavioral Health	Drug Deaths (Deaths per 100,000 population)*	28	31.6	32.1
	Excessive Drinking (% of adults)	33	19.0%	18.4%
	Frequent Mental Distress (% of adults)	38	16.7%	15.9%
	Non-medical Drug Use (% of adults)	2	8.1%	15.9%
Mortality	Premature Death (Years lost before age 75 per 100,000 population)	9	7,289	9,478
	Premature Death Racial Disparity (Ratio)	—	—	1.6
Physical Health	Frequent Physical Distress (% of adults)	17	11.9%	12.4%
	Low Birth Weight (% of live births)	6	7.0%	8.5%
	Low Birth Weight Racial Disparity (Ratio)	6	1.6	2.1
	Multiple Chronic Conditions (% of adults)	33	12.0%	11.2%
	Obesity (% of adults)	8	30.2%	33.6%
Overall		**1**	**0.891**	

* Additional measure (not included in overall rank). For measure definitions, source details and methodology, visit www.AmericasHealthRankings.org.
— Data not available, missing or suppressed.

AMERICA'S **HEALTH RANKINGS**
UNITED HEALTH FOUNDATION

Summary of Strengths & Challenges – America's Health Rankings 2023 Annual Report

AHR 2022 Annual Report Category	Maine's Component Rank in U.S.	Strengths	Challenges
Social and Economic Factors	15	• High School Completion (2nd) • Homeownership (2nd) • Homicide (2nd) • Less Than High School Education (2nd) • Voter Participation (2nd) • Volunteerism (4th) • Crowded Housing (5th)	• Homeownership Racial Disparity (50th) • Residential Segregation – Black/White (46th) • Mental Illness in Household (45th) • Parent or Guardian Divorce or Separation (44th) • Substance Misuse in Household (42nd) • Fourth Grade Reading Proficiency (40th) • Adverse Childhood Experiences (39th)
Clinical Care	5	• Cancer Screenings (1st) – includes breast and colorectal cancer screenings • Colorectal Cancer Screening (1st) • Dedicated Health Care Provider (1st) • Primary Care Providers (2nd) • Avoided Care Due to Cost (4th) • Flu Vaccination (4th) • Mental Health Providers (4th) • Breast Cancer Screening (7th)	• Dental Visit (26th) • Dental Care Providers (23rd) • Uninsured (23rd) • HPV Vaccination (19th)
Health Behaviors	15	• Chlamydia (3rd) • E-cigarette use (5th) • Teen Births (5th) • High-Risk HIV Behaviors (7th)	• Exercise (38th) • Smoking (32nd) • Fruit and Vegetable Consumption (26th)
Physical Environment	6	• Climate Policies (1st) • Non-Smoking Regulation (1st) • Air Pollution (4th) • Renewable Energy (8th)	• Housing With Lead Risk (40th) • Climate Risks (32nd) • Drinking Water Violations (24th) • Drive Alone to Work (21st) • Water Fluoridation (21st)
Health Outcomes	15	• Premature Death Racial Disparity (3rd) • High Health Status (4th) • Low Birth Weight Racial Disparity (4th) • Illicit Drug Use (10th) – excluding opioids and cannabis • Low Birth Weight (11th) • Non-Medical Drug Use - Past Year (11th)	• Asthma (48th) • Cancer (48th) • Arthritis (44th) • Depression (44th) • Cannabis Use (43rd) • Drug Deaths (43rd) • Multiple Chronic Conditions (43rd) • Cardiovascular Diseases (41st) • Chronic Obstructive Pulmonary Disease (40th) • Chronic Kidney Disease (39th) • Heavy Drinking (38th) • Suicide (34th)

Summary of Strengths & Challenges – America's Health Rankings 2023 Senior Report

AHR 2023 Senior Report Category	Maine's Component Rank in U.S.	Strengths	Challenges
Social and Economic Factors	11	o Poverty Racial Disparity - Ages 65+ (1st) o Low-care Nursing Home Residents (2nd) o Voter Participation (Average) - Ages 65+ (5th) o College Graduate - Ages 65+ (8th) o Independent Living Difficulty (9th)	• Live Alone (38th) • Food Insecurity - Ages 60+ (34th) • Senior Centers (34th) • Never Married (30th) • Community Support Expenditures – *age range not specified* (28th) • Congregate Meals (28th)
Clinical Care	4	• COVID-19 Vaccination - Ages 65+ (1st) • COVID-19 Vaccination Updated (Bivalent) Booster - Ages 65+ (1st) • Avoided Care Due to Cost - Ages 65+ (3rd) • Cancer Screenings - Ages 65-75 (3rd) • Clinical Care - Seniors (4th) • Dedicated Health Care Provider - Ages 65+ (6th) • Hospice Care (9th) • Nursing Home Quality (9th)	• Geriatric Providers (29th)
Health Behaviors	39	• *No Behaviors ranking 1st-10th.*	• Exercise - Ages 65+ (40th) • Health Behaviors - Overall (39th) • Physical Inactivity - Ages 65+ (38th) • Fruit and Vegetable Consumption - Ages 65+ (29th) • Insufficient Sleep - Ages 65+ (29th)
Physical Environment	4	• Drinking Water Violations (1st) • Non-smoking Regulation (1st) • Physical Environment – Overall (4th) • Air and Water Quality - Overall (5th) • Air Pollution (6th)	• Housing Cost Burden - Ages 65+ (33rd) • Housing and Transit - Overall (30th) • Severe Housing Problems - Ages 62+ (30th)
Health Outcomes	22	• High Health Status - Ages 65+ (4th) • Drug Deaths - Ages 65+ (8th) • Multiple Chronic Conditions - Ages 65-74 (9th)	• Behavioral Health - Overall (36th) • Teeth Extractions - Ages 65+ (39th) • Excessive Drinking - Ages 65+ (39th) • Suicide - Ages 65+ (37th) • Falls - Ages 65+ (31st) • Depression - Ages 65+ (29th)

Summary of Strengths & Challenges – America's Health Rankings 2023 Women & Children Report

Category	Maine's Component Rank in U.S.	Strengths	Challenges
Women & Children			
Physical	7	• Air Pollution (6th) • Drinking Water Violations (1st) • Climate Change Policies (1st)	• Household Smoke (33rd) • Housing With Lead Risk (40th)
Women			
Social and Economic Factors	20	• Firearm Deaths (8th) • Concentrated Disadvantage (6th) • Voter Participation: • Average (4th) • Presidential (10th) • Midterm (4th)	• Injury Deaths (35th) • Unemployment (28th) • College Graduate (26th) • Residential Segregation (46th)
Clinical Care	7	• Uninsured Women (10th) • Well Visits (4th) • Adequate Prenatal Care (3rd) • Maternity Care Desert (1st) • Dedicated Health Care Provider (2nd)	• Avoided Care Due to Cost (25th) • Dental Visit (38th)
Health Behaviors	28	• Chlamydia (1st) • Insufficient Sleep (10th)	• Exercise (33rd) • E-Cigarette Use (25th) • High-Risk HIV Behaviors (47th) • Smoking (46th) • Smoking During Pregnancy (46th)
Health Outcomes	36	• High Health Status (4th) • Diabetes (1st) • Chronic Kidney Disease (2nd) • Severe Maternal Morbidity (3rd) • Severe Maternal Morbidity: Hemorrhage Complications (2nd)	• Excessive Drinking (25th • COPD (41st)) • Drug Deaths (41st) • Cancer (36th) • Depression (42nd) • Asthma (48th) • Arthritis (45th) • Cardiovascular Disease (36th) • Frequent Mental Distress (39th) • Frequent Physical Distress (45th) • Multiple Chronic Conditions (45th)
Children			

Social and Economic Factors	17	• Firearm Deaths (7th)
		• High-Speed Internet (8th)
		• Poverty Racial Disparity (3rd)
		• Students Experiencing Homelessness (7th)
		• High School Completion (1st)
		• Adverse Childhood Experiences-Discrimination: Race or Ethnicity (4th)
		• Reading, Singing or Storytelling (2nd)
			• WIC Coverage (37th) • Poverty (25th)
			• Child Victimization (48th)
			• Early Childhood Education (40th)
			• 4th Grade Reading Proficiency (40th)
			• Neighborhood Amenities (31st)
			• Adverse Childhood Experiences (39th)
			  ○ Mental Illness: Household (45th)
			  ○ Divorce/Separation: Household (44th)
			  ○ Substance Misuse: Household (42nd)
			  ○ LGBTQIA+ Discrimination: (29th)

Clinical Care	6	• Well Visits (2nd) • Medical Home (2nd) • Childhood Immunizations (8th) • Developmental Screening (2nd)	• HPV Vaccination (32nd) • Adequate Insurance (34th)
Health Behaviors	10	• Teen Births (5th) • Adequate Sleep (10th)	• Tobacco Use: Youth (34th)
Health Outcomes	41	• Low Birth Weight Racial Disparity (4th)	• Flourishing (44th) • Anxiety (49th) • Teen Suicide (35th) • Asthma (27th) • Infant Mortality (30th) • Depression (42nd) • Illicit Drug Use: Youth (49th) • Alcohol Use: Youth (39th) • Asthma (27th) • Neonatal Abstinence Syndrome (46th) • Neonatal Mortality (41st)

UnitedWay ALICE Report

The number of households in financial hardship in Maine continues to be undercounted in official measures. There are many households in the U.S. that have income above the Federal Poverty Level but still struggle to afford basic household necessities. This population is called ALICE (Asset Limited, Income Constrained, Employed). For ALICE households there is a fundamental mismatch between earnings and the cost of basics.

In order to estimate ALICE households, United for ALICE calculated a Household Survival Budget to estimate the minimum costs of household necessities (i.e. housing, child care, food, etc.) in Maine. The Household Survival Budget is adjusted for different counties and household types. Households whose income is below the Household Survival Budget but above the federal poverty level are ALICE. For example, the ALICE Household Survival Budget for a family of four in 2021 was $70,908 compared to the federal poverty level at $26,500. For more information about the methodology behind the ALICE Report, go to https://www.unitedforalice.org/methodology.

In Maine overall, 12% of households are below the federal poverty level, but an additional 30% of households live above the federal poverty level, but below the ALICE Survival Budget. In total 42% of Maine's households live below the ALICE Survival Budget. At the county level, the highest concentration of households below the ALICE survival budget were in Oxford, with over half of households below the ALICE survival budget, followed by Somerset, Lincoln, and Franklin counties.

% of households with financial hardships
U.S. Census Bureau's 5-Year American Community Survey (2017-2021);
United Way ALICE report (2024)

- 56 to 69.9%
- 42 to 55.9%
- 28 to 41.9%
- 14 to 27.9%
- 0 to 13.9%
- No Data

% of households below the federal poverty threshold

Maine's rate: 12%

% of households below the ALICE survival budget

Maine's rate: 42%
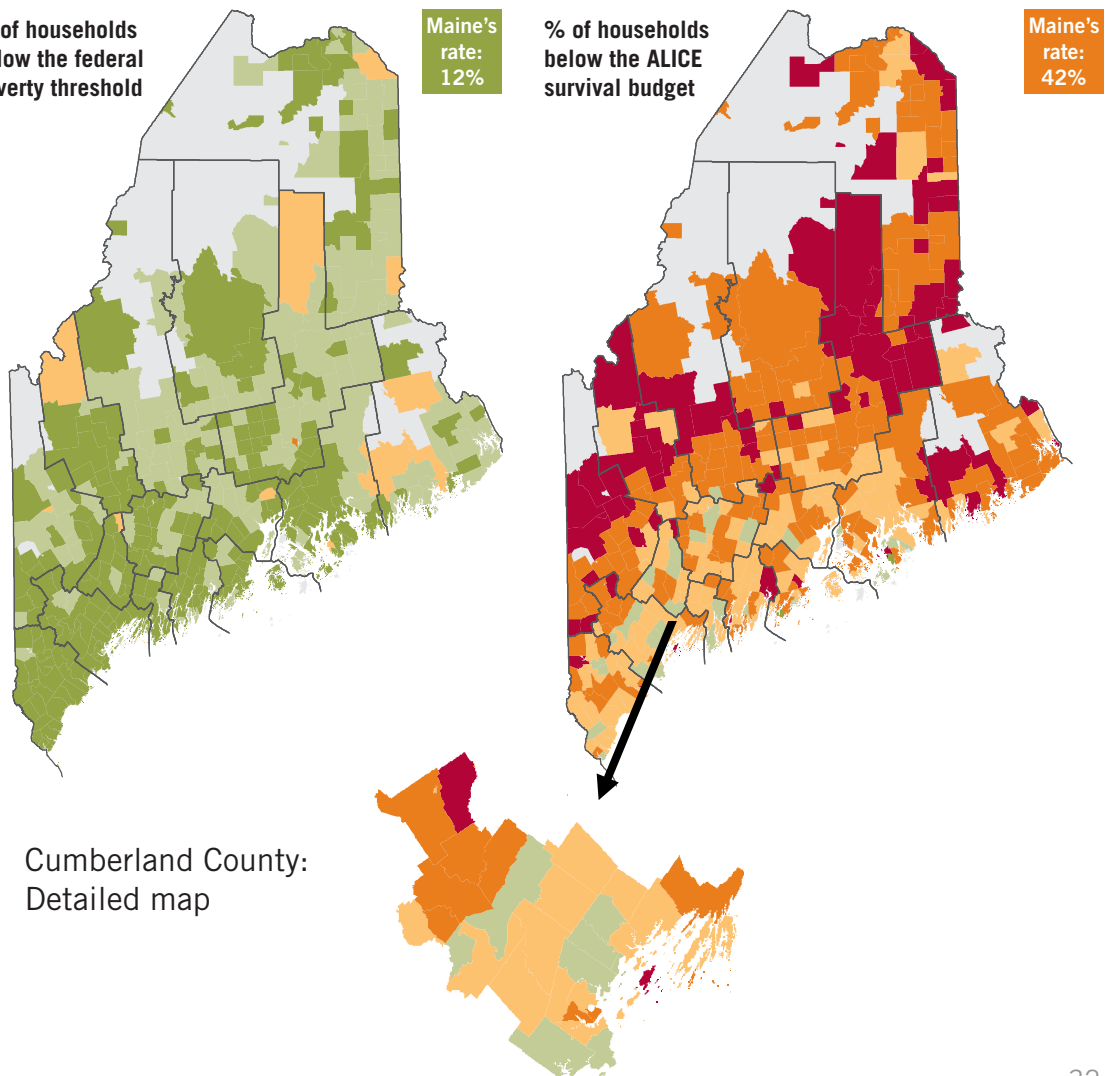
Cumberland County: Detailed map

County	% households below ALICE survival Budget	% households below federal poverty level (FPL)	% households above FPL and below ALICE survival budget
MaineHealth Service Area			
Oxford**	52%	14%	39%
Somerset**	49%	18%	32%
Lincoln**	45%	12%	33%
Franklin**	45%	11%	34%
Knox**	44%	10%	34%
Waldo**	42%	14%	28%
Kennebec*	42%	12%	30%
York*	40%	9%	31%
Androscoggin*	39%	15%	24%
Cumberland*	37%	9%	28%
Sagadahoc**	33%	12%	21%
Northern & Downeast Maine			
Washington**	51%	20%	31%
Piscataquis**	49%	16%	33%
Aroostook*	46%	16%	30%
Penobscot*	44%	16%	29%
Hancock**	41%	11%	31%

* 1-year population rate   ** 5-year population rate

ALICE Household Survival Budget, Maine, 2021			
	Single Adult	Single Senior	2 Adults, 1 Infant, 1 Preschooler
Monthly Costs			
Housing – Rent	$558	$558	$688
Housing – Utilities	$154	$154	$292
Child Care	-	-	$1443
Food	$498	$460	$1359
Transportation	$329	$282	$805
Health Care	$216	$512	$873
Technology	$75	$75	$110
Miscellaneous	$183	$204	$557
Tax Before Credits	$313	$371	$1,162
Monthly Total	**$2,326**	**$2,616**	**$7,289**
ANNUAL TOTAL BEFORE CREDITS	**$27,912**	**$31,392**	**$87,468**
Tax Credits - Child Tax Credit and Child and Dependent Care Tax Credit	-	-	($16,560)
ANNUAL TOTAL WITH CREDITS	**$27,912**	**$31,392**	**$70,908**
Full-Time Hourly Wage	$13.96	$15.70	$35.45

How Health Index Priorities Are Selected

The primary role of the MaineHealth Health Index Initiative is helping to inform the strategic direction that MaineHealth takes for improving population health in our communities.
To fulfill this role, we routinely review and update the Health Index priorities. This round of reviewing and proposing a list of priorities began in July 2019. The proposed list of priorities was primarily created with input from the Center for Health Improvement's leaders (the Chief Health Improvement Officer, Senior Directors and Directors). In some cases, additional input was gathered from clinical content experts (e.g. experts about healthy aging issues).

1. Health Index priorities were selected from the three sets of MaineHealth programs and initiatives listed below. The table on page 3 illustrates how the proposed priorities align with them.
   a. the seven current Health Index priorities;
   b. priorities selected by the local health systems in their respective community health needs assessment (CHNA) implementation plans, and
   c. other system-wide foci, such as Diabetes and Falls Prevention among Older Adults'

2. The same five criteria used to select the current Health Index priorities were used in this process:
   a. Action would contribute to improvements in the health status of the population.
      » Can relate to general population and specific populations of note (e.g., people with diabetes)
      » Causal relationships established by scientific evidence
      » Timeline is realistic
   b. There is a high likelihood of success.
      » Previous research or action has demonstrated effect
      » Cost effectiveness has been or can be demonstrated
      » Resources exist or can be secured
   c. Alignment among potential partners exists.
      » Potential partners exist in clinical and community domains
      » Common interests or goals can be determined
   d. Action is consistent with regional, state, and national efforts by provider organizations like MaineHealth
      » Healthy People 2020
      » IHI, NCQA
      » State Health Plan for Maine
      » Maine Hospital Association
   e. Action is consistent with the business interests of MaineHealth as a financially viable, nonprofit regional system of health care provider organizations, whose vision is to improve community health.

3. Community HealthImprovement leaders made two recommendations for the Health Index priorities moving forward:
   a. At any given time, MaineHealth will have at least one priority related to "Child Health" and at least one related to "Healthy Aging". In this proposed list, we are proposing child and adolescent immunizations and falls prevention among older adults. All of the other priorities proposed influence/affect children, youth and older adult populations. Nevertheless, it was considered important to intentionally ensure inclusion of priorities focused on older adults and children in the current and future Health Index priorities.
   b. Shift to broader health topics as priorities. The original Health Index priorities all had an action phrase (e.g. "Decrease" or "Increase"); we recommended that we remove these phrases.

in the MaineHealth Health Index October 2020	Health Index Priority	selected by MaineHealth local health systems	system-wide foci for MaineHealth
1. Cardiovascular Disease	X		
2. Cancer	X		
3. Diabetes		X	X
4. Behavioral Health			
a. Substance Misuse & Dependence	X	X	
b. Mental Health Conditions			X
5. Healthy Aging: Falls Prevention		X	X
6. Child Health: Child & Adolescent Immunizations	X		X
7. Tobacco & Nicotine Dependence	X	X	
8. Obesity	X	X	
9. Social Determinants of Health		X	X
10. COVID (temporary priority)			X
Remove: Preventable Hospitalizations‡	X		

‡ While we have proposed removing the Preventable Hospitalizations measure, two of the chronic conditions (heart failure and diabetes) included in this metric fall under other priorities proposed in this list; thus we can present admissions rates in in-depth reports about those priorities.

The "preventable hospitalizations" measure is defined as the admission rate for twelve ambulatory care-sensitive conditions; patients provided with high-quality, community-based primary health care for these conditions often can avoid hospitalizations or more severe disease that requires treatment within a hospital. The three conditions with the highest admissions rates are heart failure, bacterial pneumonia, and chronic obstructive pulmonary disease. The remaining nine conditions are angina (when no intervention is completed during the hospitalization), asthma, cellulitis, convulsions, dehydration, diabetes, gastroenteritis, hypertension, and kidney/urinary infections.

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Health Index Priority Issues by County

MaineHealth Service Area Health Index Priority Issues for MaineHealth, updated November 2023

Symbols for *Change* column:	Symbols for *+/-* column (comparison to US rates):
! means health issue is getting worse over time	**!** means MHSA/ME is doing worse than the U.S.
★ means health issue is getting better over time	★ means MHSA/ME is doing better than the U.S.
◎ means the change was not statistically significant	◎ means MHSA/ME is about the same as the U.S.

HEALTH INDEX PRIORITY LONG-TERM METRIC	MaineHealth Service Area data or Maine data				U.S. (Benchmark)	
	BASELINE RATE	CURRENT RATE	Change	FY 2028 TARGET*	CURRENT RATE	+/-
1. Cardiovascular Disease						
Deaths per 100,000 population**	2010-12 186.1	2019-21 191.2	◎	≤175	2019-21 222.6	★
2. Cancer						
Deaths per 100,000 population**	2010-12 181.6	2019-21 158.1	★	≤140	2019-21 145.5	**!**
New cases per 100,000 population**	2008-10 504.2	2018-20 469.2	★	≤450	2018-20 449.5	**!**
3. Diabetes						
% ever told has Diabetes	2014 9.5%	2022 11.1%	◎	≤9%	2022 11.5%	†
4. Behavioral Health						
a. Substance Misuse and Dependence						
Drug-overdose deaths per 100,000 population**	2010-12 11.8	2019-21 37.3	**!**	≤12	2019-21 27.8	**!**
b. Mental Health Conditions						
Suicides per 100,000 population**	2010-12 15.0	2019-21 18.7	**!**	≤14	2019-21 13.8	**!**
5. Healthy Aging: Falls Prevention						
% 65+ year-olds reported falling 1+ times within the past 12 months	2012 29.7%	2020 29.1%	◎	≤26%	2020 27.1%	◎
6. Child & Adolescent Immunizations						
% of infants up-to-date for combined 7-vaccine series by age 35 months	2017-19 80.5%	2020-22 80.0%	◎	≥80%	2020-22 75.1%	◎
7. Tobacco & Nicotine Dependence						
% 18+ yr-olds currently smoke	2014 19.3%	2022 15.0%	★	≤14%	2022 14.0%	†
% high school students used any tobacco or electronic vapor product in past 30 days	2017 19.1%	2021 18.1%	◎	≤20%	2021 18.7%	◎
8. Obesity						
% 18+ yr-olds with obesity	2014 28.2%	2022 33.1%	**!**	≤26%	2022 33.6%	†
% high school students with obesity	2009 12.5%	2021 15.0%	◎	≤13%	2021 16.3%	◎
9. Social Determinants of Health						
% households experiencing food insecurity	2017 12.5%	2021 10.5%	†	≤11%	2021 10.4%	†
% of individuals under age 65 who are uninsured	2012 12.4%	2021 7.3%	★	TBD	2021 10.2%	★

*MaineHealth targets have been set to use the most recent years of data be available as of September 30, 2028.
** Rates have been age-adjusted to the U.S. 2000 standard population
† Statistical significance cannot be determined - Confidence intervals unavailable

Data Sources for Long-term Metrics of Proposed **Health Index** Priority Issues for MaineHealth	
1. Cardiovascular Disease	
Deaths per 100,000 population	U.S. CDC WONDER database
2. Cancer	
Deaths per 100,000 population	U.S. CDC WONDER database
New cases per 100,000 population	North American Association of Central Cancer Registries
3. Diabetes	
% ever told has Diabetes	U.S. CDC Behavioral Risk Factor Surveillance System
4. Behavioral Health	
a. Substance Misuse and Dependence	
Drug-overdose deaths per 100,000 population*	U.S. CDC WONDER database
b. Mental Health Conditions	
Suicides per 100,000 pop 10+ years old*	U.S. CDC WONDER database
5. Healthy Aging: Falls Prevention	
% 65+ yr-olds reported falling 1+ times within the past 12 months	U.S. CDC Behavioral Risk Factor Surveillance System
6. Child Health: Child & Adolescent Immunizations	
% of 24- to 35-month-olds up-to-date for combined 7-vaccine series	U.S. CDC- National Immunization Survey
7. Tobacco & Nicotine Dependence	
% 18+ yr-olds currently smoke	U.S. CDC Behavioral Risk Factor Surveillance System
% high school students used any tobacco product or electronic vapor product in past 30 days	U.S. CDC Youth Risk Behavior Survey System / Maine Integrated Youth Health Survey
8. Obesity	
% 18+ yr-olds with obesity	U.S. CDC Behavioral Risk Factor Surveillance System
% high school students with obesity	U.S. CDC Youth Risk Behavior Survey System / Maine Integrated Youth Health Survey
9. Social Determinants of Health	
% households experiencing food insecurity	Feeding America; Map the Meal Gap
% of individuals who are uninsured	Small Area Health Insurance Estimates; U.S. Census

Androscoggin County Health Index Priority Issues for MaineHealth, updated January 2024

Symbols for *Change* columns:	Symbols for *+/-* columns:
! health issue is getting worse over time	**!** Androscoggin/ME is doing worse than MHSA/ME/U.S.
★ health issue is getting better over time	★ Androscoggin/ME is doing better than MHSA/ME/U.S.
◎ health issue was not statistically significant	◎ Androscoggin/ME is doing the same as MHSA/ME/U.S.

HEALTH INDEX PRIORITY LONG-TERM METRIC	Androscoggin data or Maine data				U.S. (Benchmark)	
	BASELINE RATE	CURRENT RATE	Change	FY 2028 TARGET*	CURRENT RATE	+/-
1. Cardiovascular Disease						
Deaths per 100,000 population**	2010-12 226.6	2019-21 237.3	◎	≤175	2019-21 191.2	**!**
2. Cancer						
Deaths per 100,000 population**	2010-12 199.9	2019-21 169.6	★	≤140	2019-21 158.1	◎
New cases per 100,000 population**	2008-10 511.4	2018-20 451.4	★	≤450	2018-20 469.2	◎
3. Diabetes						
% ever told has Diabetes	2011-13 11.5%	2018-20 12.3%	◎	≤9%	2018-20 10.5%	◎
4. Behavioral Health						
a. Substance Misuse and Dependence						
Drug-overdose deaths per 100,000 population**	2010-12 12.5	2019-21 49.6	**!**	≤12	2019-21 37.3	**!**
b. Mental Health Conditions						
Suicides per 100,000 population**	2010-12 14.4	2019-21 18.5	◎	≤14	2019-21 18.7	◎
5. Healthy Aging: Falls Prevention						
% 65+ year-olds reported falling 1+ times within the past 12 months	2012-14 28.2%	2018-20 31.8%	◎	≤26%	2018-20 28.4%	◎
6. Child & Adolescent Immunizations						
% of infants up-to-date for combined 7-vaccine series by age 35 months	2017-19 80.5%	2020-22 80.0%	◎	≥80%	2020-22 75.1%	◎
7. Tobacco & Nicotine Dependence						
% 18+ yr-olds currently smoke	2011-13 24.2%	2018-20 21.5%	◎	≤14%	2018-20 17.3%	**!**
% high school students used any tobacco or electronic vapor product in past 30 days	2015 18.3%	2023 ^	^	≤20%	2021 18.1%	^
8. Obesity						
% 18+ yr-olds with obesity	2012-14 35.1%	2018-20 35.5%	◎	≤26%	2018-20 31.0%	**!**
% high school students with obesity	2009 14.2%	2023 ^	^	≤13%	2021 15.0%	^
9. Social Determinants of Health						
% households experiencing food insecurity	2017 14.2%	2021 11.5%	†	≤11%	2021 10.5%	†
% of individuals under age 65 who are uninsured	2012 11.7%	2021 7.1%	★	TBD	2021 7.3%	◎

"*MaineHealth targets have been set to use the most recent years of data be available as of September 30, 2028.
** Rates have been age-adjusted to the U.S. 2000 standard population
† Statistical significance cannot be determined - Confidence intervals unavailable
‡ Statistical significance cannot be determine - Baseline and current years overlap
^ Data suppressed due to low numbers"

Carroll County Health Index Priority Issues for MaineHealth, updated January 2024

Symbols for *Change* columns:	Symbols for *+/-* columns:
! health issue is getting worse over time	! Carroll/ME is doing worse than MHSA/ME/U.S.
★ health issue is getting better over time	★ Carroll/ME is doing better than MHSA/ME/U.S.
◎ health issue was not statistically significant	◎ Carroll/ME is doing the same as MHSA/ME/U.S.

HEALTH INDEX PRIORITY LONG-TERM METRIC	Carroll data or Maine data				U.S. (Benchmark)	
	BASELINE RATE	CURRENT RATE	Change	FY 2028 TARGET*	CURRENT RATE	+/-
1. Cardiovascular Disease						
Deaths per 100,000 population**	2010-12 149.4	2019-21 173.8	◎	≤175	2019-21 191.2	◎
2. Cancer						
Deaths per 100,000 population**	2010-12 176.1	2019-21 140.5	★	≤140	2019-21 158.1	◎
New cases per 100,000 population**	2008-10 523.1	2018-20 461.8	★	≤450	2018-20 466.1	◎
3. Diabetes						
% ever told has Diabetes	2011-13 9.7%	2018-20 10.4%	◎	≤9%	2018-20 9.5%	◎
4. Behavioral Health						
a. Substance Misuse and Dependence						
Drug-overdose deaths per 100,000 population**	2010-12 14.6	2019-21 32.6	◎	≤12	2019-21 37.3	◎
b. Mental Health Conditions						
Suicides per 100,000 population**	2010-12 17.8	2019-21 19.3	◎	≤14	2019-21 18.7	◎
5. Healthy Aging: Falls Prevention						
% 65+ year-olds reported falling 1+ times within the past 12 months	2012-14 31.8%	2018-20 29.7%	◎	≤26%	2018-20 26.8%	◎
6. Child & Adolescent Immunizations						
% of infants up-to-date for combined 7-vaccine series by age 35 months	2017-19 85.1%	2020-22 78.4%	◎	≥80%	2020-22 75.1%	◎
7. Tobacco & Nicotine Dependence						
% 18+ yr-olds currently smoke	2011-13 18.7%	2019-21 13.7%	◎	≤14%	2018-20 15.2%	◎
% high school students used electronic vapor product in past 30 days	2019 41.7%	2021 22.5%	★	≤20%	2021 16.2%	!
8. Obesity						
% 18+ yr-olds with obesity	2012-14 25.2%	2018-20 28.0%	◎	≤26%	2018-20 30.4%	◎
% high school students with obesity	2019 12.6%	2021 14.4%	◎	≤13%	2021 13.3%	◎
9. Social Determinants of Health						
% households experiencing food insecurity	2017 8.6%	2021 7.6%	†	≤11%	2021 6.8%	†
% of individuals under age 65 who are uninsured	2012 17.7%	2021 7.3%	★	TBD	2021 6.3%	◎

*MaineHealth targets have been set to use the most recent years of data be available as of September 30, 2028.

** Rates have been age-adjusted to the U.S. 2000 standard population

≈Measure differs from Maine rates - does not include "any tobacco"

† Statistical significance cannot be determined - Confidence intervals unavailable

^ Data suppressed due to low numbers

Cumberland County Health Index Priority Issues for MaineHealth, updated January 2024

Symbols for *Change* columns:	Symbols for *+/-* columns:
! health issue is getting worse over time	! Cumberland/ME is doing worse than MHSA/ME/U.S.
★ health issue is getting better over time	★ Cumberland/ME is doing better than MHSA/ME/U.S.
◎ health issue was not statistically significant	◎ Cumberland/ME is doing the same as MHSA/ME/U.S.

HEALTH INDEX PRIORITY LONG-TERM METRIC	Cumberland data or Maine data				U.S. (Benchmark)	
	BASELINE RATE	CURRENT RATE	Change	FY 2028 TARGET*	CURRENT RATE	+/-
1. Cardiovascular Disease						
Deaths per 100,000 population**	2010-12 161.7	2019-21 169.6	◎	≤175	2019-21 191.2	★
2. Cancer						
Deaths per 100,000 population**	2010-12 177.0	2019-21 144.7	★	≤140	2019-21 158.1	★
New cases per 100,000 population**	2008-10 488.8	2018-20 433.8	★	≤450	2018-20 469.2	★
3. Diabetes						
% ever told has Diabetes	2011-13 7.6%	2018-20 8.5%	◎	≤9%	2018-20 10.5%	★
4. Behavioral Health						
a. Substance Misuse and Dependence						
Drug-overdose deaths per 100,000 population**	2010-12 11.3	2019-21 33.7	!	≤12	2019-21 37.3	◎
b. Mental Health Conditions						
Suicides per 100,000 population**	2010-12 12.8	2019-21 13.4	◎	≤14	2019-21 18.7	★
5. Healthy Aging: Falls Prevention						
% 65+ year-olds reported falling 1+ times within the past 12 months	2012-14 29.9%	2018-20 26.2%	◎	≤26%	2018-20 28.4%	◎
6. Child & Adolescent Immunizations						
% of infants up-to-date for combined 7-vaccine series by age 35 months	2017-19 80.5%	2020-22 80.0%	◎	≥80%	2020-22 75.1%	◎
7. Tobacco & Nicotine Dependence						
% 18+ yr-olds currently smoke	2011-13 16.9%	2018-20 10.8%	★	≤14%	2018-20 17.3%	★
% high school students used any tobacco or electronic vapor product in past 30 days	2015 22.8%	2023 16.1%	★	≤20%	2021 18.1%	◎
8. Obesity						
% 18+ yr-olds with obesity	2012-14 23.2%	2018-20 25.4%	◎	≤26%	2018-20 31.0%	★
% high school students with obesity	2009 9.9%	2023 12.2%	◎	≤13%	2021 15.0%	★
9. Social Determinants of Health						
% households experiencing food insecurity	2017 12.2%	2021 8.2%	†	≤11%	2021 10.5%	†
% of individuals under age 65 who are uninsured	2012 11.1%	2021 5.8%	★	TBD	2021 7.3%	★

*MaineHealth targets have been set to use the most recent years of data be available as of September 30, 2028.
** Rates have been age-adjusted to the U.S. 2000 standard population
† Statistical significance cannot be determined - Confidence intervals unavailable

Franklin County Health Index Priority Issues for MaineHealth, updated January 2024

Symbols for *Change* columns:	Symbols for +/- columns:
! health issue is getting worse over time	! Franklin/ME is doing worse than MHSA/ME/U.S.
★ health issue is getting better over time	★ Franklin/ME is doing better than MHSA/ME/U.S.
◎ health issue was not statistically significant	◎ Franklin/ME is doing the same as MHSA/ME/U.S.

HEALTH INDEX PRIORITY LONG-TERM METRIC	Franklin data or Maine data				U.S. (Benchmark)	
	BASELINE RATE	CURRENT RATE	Change	FY 2028 TARGET*	CURRENT RATE	+/-
1. Cardiovascular Disease						
Deaths per 100,000 population**	2010-12 193.9	2019-21 200.8	◎	≤175	2019-21 191.2	◎
2. Cancer						
Deaths per 100,000 population**	2010-12 161.9	2019-21 150.0	◎	≤140	2019-21 158.1	◎
New cases per 100,000 population**	2008-10 464.7	2018-20 428.0	◎	≤450	2018-20 469.2	◎
3. Diabetes						
% ever told has Diabetes	2011-13 9.1%	2018-20 9.7%	◎	≤9%	2018-20 10.5%	◎
4. Behavioral Health						
a. Substance Misuse and Dependence						
Drug-overdose deaths per 100,000 population**	2010-12 ^	2019-21 33.9	^	≤12	2019-21 37.3	◎
b. Mental Health Conditions						
Suicides per 100,000 population**	2010-12 ^	2019-21 25.4	^	≤14	2019-21 18.7	◎
5. Healthy Aging: Falls Prevention						
% 65+ year-olds reported falling 1+ times within the past 12 months	2012-14 29.6%	2018-20 30.9%	◎	≤26%	2018-20 28.4%	◎
6. Child & Adolescent Immunizations						
% of infants up-to-date for combined 7-vaccine series by age 35 months	2017-19 80.5%	2020-22 80.0%	◎	≥80%	2020-22 75.1%	◎
7. Tobacco & Nicotine Dependence						
% 18+ yr-olds currently smoke	2011-13 22.2%	2018-20 17.5%	◎	≤14%	2018-20 17.3%	◎
% high school students used any tobacco or electronic vapor product in past 30 days	2015 22.7%	2023 17.0%	◎	≤20%	2021 18.1%	◎
8. Obesity						
% 18+ yr-olds with obesity	2012-14 30.4%	2018-20 32.1%	◎	≤26%	2018-20 31.0%	◎
% high school students with obesity	2009 12.5%	2023 21.3%	!	≤13%	2021 15.0%	!
9. Social Determinants of Health						
% households experiencing food insecurity	2017 12.8%	2021 10.7%	†	≤11%	2021 10.5%	†
% of individuals under age 65 who are uninsured	2012 13.6%	2021 8.1%	★	TBD	2021 7.3%	◎

*MaineHealth targets have been set to use the most recent years of data be available as of September 30, 2028.
** Rates have been age-adjusted to the U.S. 2000 standard population
† Statistical significance cannot be determined - Confidence intervals unavailable
^ Data suppressed due to low numbers

Kennebec County Health Index Priority Issues for MaineHealth, updated January 2024

Symbols for *Change* columns:	Symbols for +/- columns:
! health issue is getting worse over time	! Kennebec/ME is doing worse than MHSA/ME/U.S.
★ health issue is getting better over time	★ Kennebec/ME is doing better than MHSA/ME/U.S.
◎ health issue was not statistically significant	◎ Kennebec/ME is doing the same as MHSA/ME/U.S.

HEALTH INDEX PRIORITY — LONG-TERM METRIC	Kennebec data or Maine data — BASELINE RATE	CURRENT RATE	Change	FY 2028 TARGET*	U.S. (Benchmark) CURRENT RATE	+/-
1. Cardiovascular Disease						
Deaths per 100,000 population**	2010-12 212.5	2019-21 226.2	◎	≤175	2019-21 191.2	!
2. Cancer						
Deaths per 100,000 population**	2010-12 192.5	2019-21 171.3	◎	≤140	2019-21 158.1	◎
New cases per 100,000 population**	2008-10 516.8	2018-20 462.5	★	≤450	2018-20 469.2	◎
3. Diabetes						
% ever told has Diabetes	2011-13 9.5%	2018-20 12.0%	◎	≤9%	2018-20 10.5%	◎
4. Behavioral Health						
a. Substance Misuse and Dependence						
Drug-overdose deaths per 100,000 population**	2010-12 13.4	2019-21 46.9	!	≤12	2019-21 37.3	◎
b. Mental Health Conditions						
Suicides per 100,000 population**	2010-12 15.6	2019-21 17.9	◎	≤14	2019-21 18.7	◎
5. Healthy Aging: Falls Prevention						
% 65+ year-olds reported falling 1+ times within the past 12 months	2012-14 30.8%	2018-20 29.2%	◎	≤26%	2018-20 28.4%	◎
6. Child & Adolescent Immunizations						
% of infants up-to-date for combined 7-vaccine series by age 35 months	2017-19 80.5%	2020-22 80.0%	◎	≥80%	2020-22 75.1%	◎
7. Tobacco & Nicotine Dependence						
% 18+ yr-olds currently smoke	2011-13 21.5%	2018-20 20.0%	◎	≤14%	2018-20 17.3%	◎
% high school students used any tobacco or electronic vapor product in past 30 days	2015 23.6%	2023 ^	^	≤20%	2021 18.1%	^
8. Obesity						
% 18+ yr-olds with obesity	2012-14 31.5%	2018-20 34.7%	◎	≤26%	2018-20 31.0%	◎
% high school students with obesity	2009 11.9%	2023 ^	^	≤13%	2021 15.0%	^
9. Social Determinants of Health						
% households experiencing food insecurity	2017 13.5%	2021 10.9%	†	≤11%	2021 10.5%	†
% of individuals under age 65 who are uninsured	2012 11.4%	2021 7.3%	★	TBD	2021 7.3%	◎

*MaineHealth targets have been set to use the most recent years of data be available as of September 30, 2028.
** Rates have been age-adjusted to the U.S. 2000 standard population
† Statistical significance cannot be determined - Confidence intervals unavailable
^ Data suppressed due to low numbers

Knox County Health Index Priority Issues for MaineHealth, updated January 2024

Symbols for *Change* columns:	Symbols for +/- columns:
! health issue is getting worse over time	! Knox/ME is doing worse than MHSA/ME/U.S.
★ health issue is getting better over time	★ Knox/ME is doing better than MHSA/ME/U.S.
◎ health issue was not statistically significant	◎ Knox/ME is doing the same as MHSA/ME/U.S.

HEALTH INDEX PRIORITY LONG-TERM METRIC	Knox data or Maine data				U.S. (Benchmark)	
	BASELINE RATE	CURRENT RATE	Change	FY 2028 TARGET*	CURRENT RATE	+/-
1. Cardiovascular Disease						
Deaths per 100,000 population**	2010-12 163.9	2019-21 196.6	◎	≤175	2019-21 191.2	◎
2. Cancer						
Deaths per 100,000 population**	2010-12 171.5	2019-21 156.3	◎	≤140	2019-21 158.1	◎
New cases per 100,000 population**	2008-10 519.2	2018-20 483.6	◎	≤450	2018-20 469.2	◎
3. Diabetes						
% ever told has Diabetes	2011-13 8.0%	2018-20 10.7%	◎	≤9%	2018-20 10.5%	◎
4. Behavioral Health						
a. Substance Misuse and Dependence						
Drug-overdose deaths per 100,000 population**	2010-12 ^	2019-21 37.0	^	≤12	2019-21 37.3	◎
b. Mental Health Conditions						
Suicides per 100,000 population**	2010-12 ^	2019-21 28.3	^	≤14	2019-21 18.7	◎
5. Healthy Aging: Falls Prevention						
% 65+ year-olds reported falling 1+ times within the past 12 months	2012-14 32.2%	2018-20 30.5%	◎	≤26%	2018-20 28.4%	◎
6. Child & Adolescent Immunizations						
% of infants up-to-date for combined 7-vaccine series by age 35 months	2017-19 80.5%	2020-22 80.0%	◎	≥80%	2020-22 75.1%	◎
7. Tobacco & Nicotine Dependence						
% 18+ yr-olds currently smoke	2011-13 18.2%	2018-20 14.5%	◎	≤14%	2018-20 17.3%	◎
% high school students used any tobacco or electronic vapor product in past 30 days	2015 ^	2023 15.1%	^	≤20%	2021 18.1%	◎
8. Obesity						
% 18+ yr-olds with obesity	2012-14 22.0%	2018-20 28.7%	!	≤26%	2018-20 31.0%	◎
% high school students with obesity	2009 ^	2023 12.0%	^	≤13%	2021 15.0%	◎
9. Social Determinants of Health						
% households experiencing food insecurity	2017 12.3%	2021 8.9%	†	≤11%	2021 10.5%	†
% of individuals under age 65 who are uninsured	2012 14.9%	2021 8.4%	★	TBD	2021 7.3%	◎

*MaineHealth targets have been set to use the most recent years of data be available as of September 30, 2028.
** Rates have been age-adjusted to the U.S. 2000 standard population
† Statistical significance cannot be determined - Confidence intervals unavailable
^ Data suppressed due to low numbers

Lincoln County Health Index Priority Issues for MaineHealth, updated January 2024

Symbols for *Change* columns:	Symbols for +/- columns:
! health issue is getting worse over time	! Lincoln/ME is doing worse than MHSA/ME/U.S.
★ health issue is getting better over time	★ Lincoln/ME is doing better than MHSA/ME/U.S.
◎ health issue was not statistically significant	◎ Lincoln/ME is doing the same as MHSA/ME/U.S.

HEALTH INDEX PRIORITY LONG-TERM METRIC	Lincoln data or Maine data				U.S. (Benchmark)	
	BASELINE RATE	CURRENT RATE	Change	FY 2028 TARGET*	CURRENT RATE	+/-
1. Cardiovascular Disease						
Deaths per 100,000 population**	2010-12 187.0	2019-21 151.3	◎	≤175	2019-21 191.2	★
2. Cancer						
Deaths per 100,000 population**	2010-12 179.7	2019-21 172.5	◎	≤140	2019-21 158.1	◎
New cases per 100,000 population**	2008-10 476.3	2018-20 429.5	◎	≤450	2018-20 469.2	★
3. Diabetes						
% ever told has Diabetes	2011-13 9.1%	2018-20 9.4%	◎	≤9%	2018-20 10.5%	◎
4. Behavioral Health						
a. Substance Misuse and Dependence						
Drug-overdose deaths per 100,000 population**	2010-12 ^	2019-21 42.1	^	≤12	2019-21 37.3	◎
b. Mental Health Conditions						
Suicides per 100,000 population**	2010-12 18.8	2019-21 20.0	◎	≤14	2019-21 18.7	◎
5. Healthy Aging: Falls Prevention						
% 65+ year-olds reported falling 1+ times within the past 12 months	2012-14 33.8%	2018-20 29.5%	◎	≤26%	2018-20 28.4%	◎
6. Child & Adolescent Immunizations						
% of infants up-to-date for combined 7-vaccine series by age 35 months	2017-19 80.5%	2020-22 80.0%	◎	≥80%	2020-22 75.1%	◎
7. Tobacco & Nicotine Dependence						
% 18+ yr-olds currently smoke	2011-13 16.7%	2018-20 15.1%	◎	≤14%	2018-20 17.3%	◎
% high school students used any tobacco or electronic vapor product in past 30 days	2015 16.9%	2023 13.0%	◎	≤20%	2021 18.1%	◎
8. Obesity						
% 18+ yr-olds with obesity	2012-14 24.8%	2018-20 24.1%	◎	≤26%	2018-20 31.0%	★
% high school students with obesity	2009 14.3%	2023 20.6%	◎	≤13%	2021 15.0%	◎
9. Social Determinants of Health						
% households experiencing food insecurity	2017 12.1%	2021 9.8%	†	≤11%	2021 10.5%	†
% of individuals under age 65 who are uninsured	2012 14.2%	2021 9.1%	★	TBD	2021 7.3%	!

*MaineHealth targets have been set to use the most recent years of data be available as of September 30, 2028.
** Rates have been age-adjusted to the U.S. 2000 standard population
† Statistical significance cannot be determined - Confidence intervals unavailable
^ Data suppressed due to low numbers

Oxford County Health Index Priority Issues for MaineHealth, updated January 2024

Symbols for *Change* columns:
- !   health issue is getting worse over time
- ★   health issue is getting better over time
- ◎   health issue was not statistically significant

Symbols for +/- columns:
- !   Oxford/ME is doing worse than MHSA/ME/U.S.
- ★   Oxford/ME is doing better than MHSA/ME/U.S.
- ◎   Oxford/ME is doing the same as MHSA/ME/U.S.

HEALTH INDEX PRIORITY LONG-TERM METRIC	Oxford data or Maine data				U.S. (Benchmark)	
	BASELINE RATE	CURRENT RATE	Change	FY 2028 TARGET*	CURRENT RATE	+/-
1. Cardiovascular Disease						
Deaths per 100,000 population**	2010-12 194.4	2019-21 196.2	◎	≤175	2019-21 191.2	◎
2. Cancer						
Deaths per 100,000 population**	2010-12 186.9	2019-21 167.0	◎	≤140	2019-21 158.1	◎
New cases per 100,000 population**	2008-10 519.2	2018-20 439.2	★	≤450	2018-20 469.2	◎
3. Diabetes						
% ever told has Diabetes	2011-13 10.0%	2018-20 10.8%	◎	≤9%	2018-20 10.5%	◎
4. Behavioral Health						
a. Substance Misuse and Dependence						
Drug-overdose deaths per 100,000 population**	2010-12 ^	2019-21 32.7	^	≤12	2019-21 37.3	◎
b. Mental Health Conditions						
Suicides per 100,000 population**	2010-12 ^	2019-21 27.3	^	≤14	2019-21 18.7	◎
5. Healthy Aging: Falls Prevention						
% 65+ year-olds reported falling 1+ times within the past 12 months	2012-14 38.0%	2018-20 30.9%	◎	≤26%	2018-20 28.4%	◎
6. Child & Adolescent Immunizations						
% of infants up-to-date for combined 7-vaccine series by age 35 months	2017-19 80.5%	2020-22 80.0%	◎	≥80%	2020-22 75.1%	◎
7. Tobacco & Nicotine Dependence						
% 18+ yr-olds currently smoke	2011-13 25.4%	2018-20 20.1%	◎	≤14%	2018-20 17.3%	◎
% high school students used any tobacco or electronic vapor product in past 30 days	2015 22.8%	2023 20.2%	◎	≤20%	2021 18.1%	◎
8. Obesity						
% 18+ yr-olds with obesity	2012-14 30.0%	2018-20 32.6%	◎	≤26%	2018-20 31.0%	◎
% high school students with obesity	2009 14.5%	2023 16.5%	◎	≤13%	2021 15.0%	◎
9. Social Determinants of Health						
% households experiencing food insecurity	2017 13.4%	2021 12.0%	†	≤11%	2021 10.5%	†
% of individuals under age 65 who are uninsured	2012 13.5%	2021 8.3%	★	TBD	2021 7.3%	◎

*MaineHealth targets have been set to use the most recent years of data be available as of September 30, 2028.

** Rates have been age-adjusted to the U.S. 2000 standard population

† Statistical significance cannot be determined - Confidence intervals unavailable

^ Data suppressed due to low numbers

Sagadahoc County Health Index Priority Issues for MaineHealth, updated January 2024

Symbols for *Change* columns:	Symbols for *+/-* columns:
! health issue is getting worse over time	! Sagadahoc/ME is doing worse than MHSA/ME/U.S.
★ health issue is getting better over time	★ Sagadahoc/ME is doing better than MHSA/ME/U.S.
◎ health issue was not statistically significant	◎ Sagadahoc/ME is doing the same as MHSA/ME/U.S.

HEALTH INDEX PRIORITY LONG-TERM METRIC	Sagadahoc data or Maine data				U.S. (Benchmark)	
	BASELINE RATE	CURRENT RATE	Change	FY 2028 TARGET*	CURRENT RATE	+/-
1. Cardiovascular Disease						
Deaths per 100,000 population**	2010-12 186.1	2019-21 172.6	◎	≤175	2019-21 191.2	◎
2. Cancer						
Deaths per 100,000 population**	2010-12 164.8	2019-21 147.2	◎	≤140	2019-21 158.1	◎
New cases per 100,000 population**	2008-10 469.5	2018-20 504.4	◎	≤450	2018-20 469.2	◎
3. Diabetes						
% ever told has Diabetes	2011-13 9.5%	2018-20 12.7%	◎	≤9%	2018-20 10.5%	◎
4. Behavioral Health						
a. Substance Misuse and Dependence						
Drug-overdose deaths per 100,000 population**	2010-12 ^	2019-21 25.8	^	≤12	2019-21 37.3	◎
b. Mental Health Conditions						
Suicides per 100,000 population**	2010-12 ^	2019-21 13.7	^	≤14	2019-21 18.7	◎
5. Healthy Aging: Falls Prevention						
% 65+ year-olds reported falling 1+ times within the past 12 months	2012-14 34.4%	2018-20 24.7%	◎	≤26%	2018-20 28.4%	◎
6. Child & Adolescent Immunizations						
% of infants up-to-date for combined 7-vaccine series by age 35 months	2017-19 80.5%	2020-22 80.0%	◎	≥80%	2020-22 75.1%	◎
7. Tobacco & Nicotine Dependence						
% 18+ yr-olds currently smoke	2011-13 19.9%	2018-20 15.5%	◎	≤14%	2018-20 17.3%	◎
% high school students used any tobacco or electronic vapor product in past 30 days	2015 26.5%	2023 14.6%	★	≤20%	2021 18.1%	◎
8. Obesity						
% 18+ yr-olds with obesity	2012-14 25.3%	2018-20 32.1%	◎	≤26%	2018-20 31.0%	◎
% high school students with obesity	2009 13.7%	2023 16.5%	◎	≤13%	2021 15.0%	◎
9. Social Determinants of Health						
% households experiencing food insecurity	2017 11.8%	2021 8.8%	†	≤11%	2021 10.5%	†
% of individuals under age 65 who are uninsured	2012 10.7%	2021 6.6%	★	TBD	2021 7.3%	◎

*MaineHealth targets have been set to use the most recent years of data be available as of September 30, 2028.
** Rates have been age-adjusted to the U.S. 2000 standard population
† Statistical significance cannot be determined - Confidence intervals unavailable
^ Data suppressed due to low numbers

Somerset County Health Index Priority Issues for MaineHealth, updated January 2024

Symbols for *Change* columns:	Symbols for +/- columns:
! health issue is getting worse over time	! Somerset/ME is doing worse than MHSA/ME/U.S.
★ health issue is getting better over time	★ Somerset/ME is doing better than MHSA/ME/U.S.
◎ health issue was not statistically significant	◎ Somerset/ME is doing the same as MHSA/ME/U.S.

HEALTH INDEX PRIORITY LONG-TERM METRIC	Somerset data or Maine data				U.S. (Benchmark)	
	BASELINE RATE	CURRENT RATE	Change	FY 2028 TARGET*	CURRENT RATE	+/-
1. Cardiovascular Disease						
Deaths per 100,000 population**	2010-12 247.2	2018-20 253.2	◎	≤175	2019-21 191.2	!
2. Cancer						
Deaths per 100,000 population**	2010-12 212.7	2018-20 180.8	◎	≤140	2019-21 158.1	!
New cases per 100,000 population**	2008-10 474.4	2018-20 459.5	◎	≤450	2018-20 469.2	◎
3. Diabetes						
% ever told has Diabetes	2011-13 11.8%	2018-20 12.3%	◎	≤9%	2018-20 10.5%	◎
4. Behavioral Health						
a. Substance Misuse and Dependence						
Drug-overdose deaths per 100,000 population**	2010-12 ^	2019-21 48.8	^	≤12	2019-21 37.3	◎
b. Mental Health Conditions						
Suicides per 100,000 population**	2010-12 17.1	2019-21 26.2	◎	≤14	2019-21 18.7	◎
5. Healthy Aging: Falls Prevention						
% 65+ year-olds reported falling 1+ times within the past 12 months	2012-14 36.3%	2018-20 29.3%	◎	≤26%	2018-20 28.4%	◎
6. Child & Adolescent Immunizations						
% of infants up-to-date for combined 7-vaccine series by age 35 months	2017-19 80.5%	2020-22 80.0%	◎	≥80%	2020-22 75.1%	◎
7. Tobacco & Nicotine Dependence						
% 18+ yr-olds currently smoke	2011-13 26.4%	2018-20 22.1%	◎	≤14%	2018-20 17.3%	!
% high school students used any tobacco or electronic vapor product in past 30 days	2015 21.3%	2023 21.9%	◎	≤20%	2021 18.1%	◎
8. Obesity						
% 18+ yr-olds with obesity	2012-14 35.2%	2018-20 34.6%	◎	≤26%	2018-20 31.0%	◎
% high school students with obesity	2009 13.0%	2023 21.6%	!	≤13%	2021 15.0%	!
9. Social Determinants of Health						
% households experiencing food insecurity	2017 15.0%	2021 14.3%	†	≤11%	2021 10.5%	†
% of individuals under age 65 who are uninsured	2012 13.6%	2021 8.3%	★	TBD	2021 7.3%	◎

*MaineHealth targets have been set to use the most recent years of data be available as of September 30, 2028.

** Rates have been age-adjusted to the U.S. 2000 standard population

† Statistical significance cannot be determined - Confidence intervals unavailable

^ Data suppressed due to low numbers

Waldo County Health Index Priority Issues for MaineHealth, updated January 2024

Symbols for *Change* columns:	Symbols for *+/-* columns:
! health issue is getting worse over time	! Waldo/ME is doing worse than MHSA/ME/U.S.
★ health issue is getting better over time	★ Waldo/ME is doing better than MHSA/ME/U.S.
◎ health issue was not statistically significant	◎ Waldo/ME is doing the same as MHSA/ME/U.S.

HEALTH INDEX PRIORITY LONG-TERM METRIC	Waldo data or Maine data				U.S. (Benchmark)	
	BASELINE RATE	CURRENT RATE	Change	FY 2028 TARGET*	CURRENT RATE	+/-
1. Cardiovascular Disease						
Deaths per 100,000 population**	2010-12 211.9	2019-21 219.8	◎	≤175	2019-21 191.2	!
2. Cancer						
Deaths per 100,000 population**	2010-12 178.5	2019-21 171.1	◎	≤140	2019-21 158.1	◎
New cases per 100,000 population**	2008-10 506.8	2018-20 497.5	◎	≤450	2018-20 469.2	◎
3. Diabetes						
% ever told has Diabetes	2011-13 9.4%	2018-20 9.7%	◎	≤9%	2018-20 10.5%	◎
4. Behavioral Health						
a. Substance Misuse and Dependence						
Drug-overdose deaths per 100,000 population**	2010-12 18.5	2019-21 25.6	◎	≤12	2019-21 37.3	◎
b. Mental Health Conditions						
Suicides per 100,000 population**	2010-12 18.1	2019-21 19.4	◎	≤14	2019-21 18.7	◎
5. Healthy Aging: Falls Prevention						
% 65+ year-olds reported falling 1+ times within the past 12 months	2012-14 30.6%	2018-20 31.1%	◎	≤26%	2018-20 28.4%	◎
6. Child & Adolescent Immunizations						
% of infants up-to-date for combined 7-vaccine series by age 35 months	2017-19 80.5%	2020-22 80.0%	◎	≥80%	2020-22 75.1%	◎
7. Tobacco & Nicotine Dependence						
% 18+ yr-olds currently smoke	2011-13 19.5%	2018-20 19.8%	◎	≤14%	2018-20 17.3%	◎
% high school students used any tobacco or electronic vapor product in past 30 days	2015 24.2%	2023 17.2%	◎	≤20%	2021 18.1%	◎
8. Obesity						
% 18+ yr-olds with obesity	2012-14 30.4%	2018-20 30.4%	◎	≤26%	2018-20 31.0%	◎
% high school students with obesity	2009 16.9%	2023 22.5%	◎	≤13%	2021 15.0%	◎
9. Social Determinants of Health						
% households experiencing food insecurity	2017 13.0%	2021 10.9%	†	≤11%	2021 10.5%	†
% of individuals under age 65 who are uninsured	2012 14.3%	2021 8.7%	★	TBD	2021 7.3%	◎

*MaineHealth targets have been set to use the most recent years of data be available as of September 30, 2028.
** Rates have been age-adjusted to the U.S. 2000 standard population
† Statistical significance cannot be determined - Confidence intervals unavailable
^ Data suppressed due to low numbers

York County Health Index Priority Issues for MaineHealth, updated January 2024

Symbols for *Change* columns:	Symbols for +/- columns:
!　health issue is getting worse over time	!　York/ME is doing worse than MHSA/ME/U.S.
★　health issue is getting better over time	★　York/ME is doing better than MHSA/ME/U.S.
◎　health issue was not statistically significant	◎　York/ME is doing the same as MHSA/ME/U.S.

HEALTH INDEX PRIORITY LONG-TERM METRIC	York data or Maine data				U.S. (Benchmark)	
	BASELINE RATE	CURRENT RATE	Change	FY 2028 TARGET*	CURRENT RATE	+/-
1. Cardiovascular Disease						
Deaths per 100,000 population**	2010-12 175.9	2019-21 171.9	◎	≤175	2019-21 191.2	★
2. Cancer						
Deaths per 100,000 population**	2010-12 174.0	2019-21 158.5	◎	≤140	2019-21 158.1	◎
New cases per 100,000 population**	2008-10 515.6	2018-20 476.3	★	≤450	2018-20 469.2	◎
3. Diabetes						
% ever told has Diabetes	2011-13 9.4%	2018-20 9.0%	◎	≤9%	2018-20 10.5%	◎
4. Behavioral Health						
a. Substance Misuse and Dependence						
Drug-overdose deaths per 100,000 population**	2010-12 12.2	2019-21 34.9	!	≤12	2019-21 37.3	◎
b. Mental Health Conditions						
Suicides per 100,000 population**	2010-12 16.9	2019-21 21.8	◎	≤14	2019-21 18.7	◎
5. Healthy Aging: Falls Prevention						
% 65+ year-olds reported falling 1+ times within the past 12 months	2012-14 29.2%	2018-20 25.2%	◎	≤26%	2018-20 28.4%	◎
6. Child & Adolescent Immunizations						
% of infants up-to-date for combined 7-vaccine series by age 35 months	2017-19 80.5%	2020-22 80.0%	◎	≥80%	2020-22 75.1%	◎
7. Tobacco & Nicotine Dependence						
% 18+ yr-olds currently smoke	2011-13 19.5%	2018-20 15.6%	◎	≤14%	2018-20 17.3%	◎
% high school students used any tobacco or electronic vapor product in past 30 days	2015 25.3%	2023 16.4%	★	≤20%	2021 18.1%	◎
8. Obesity						
% 18+ yr-olds with obesity	2012-14 27.5%	2018-20 30.9%	◎	≤26%	2018-20 31.0%	◎
% high school students with obesity	2009 10.2%	2023 12.6%	◎	≤13%	2021 15.0%	◎
9. Social Determinants of Health						
% households experiencing food insecurity	2017 11.3%	2021 8.9%	†	≤11%	2021 10.5%	†
% of individuals under age 65 who are uninsured	2012 11.2%	2021 6.8%	★	TBD	2021 7.3%	◎

*MaineHealth targets have been set to use the most recent years of data be available as of September 30, 2028.
** Rates have been age-adjusted to the U.S. 2000 standard population
† Statistical significance cannot be determined - Confidence intervals unavailable
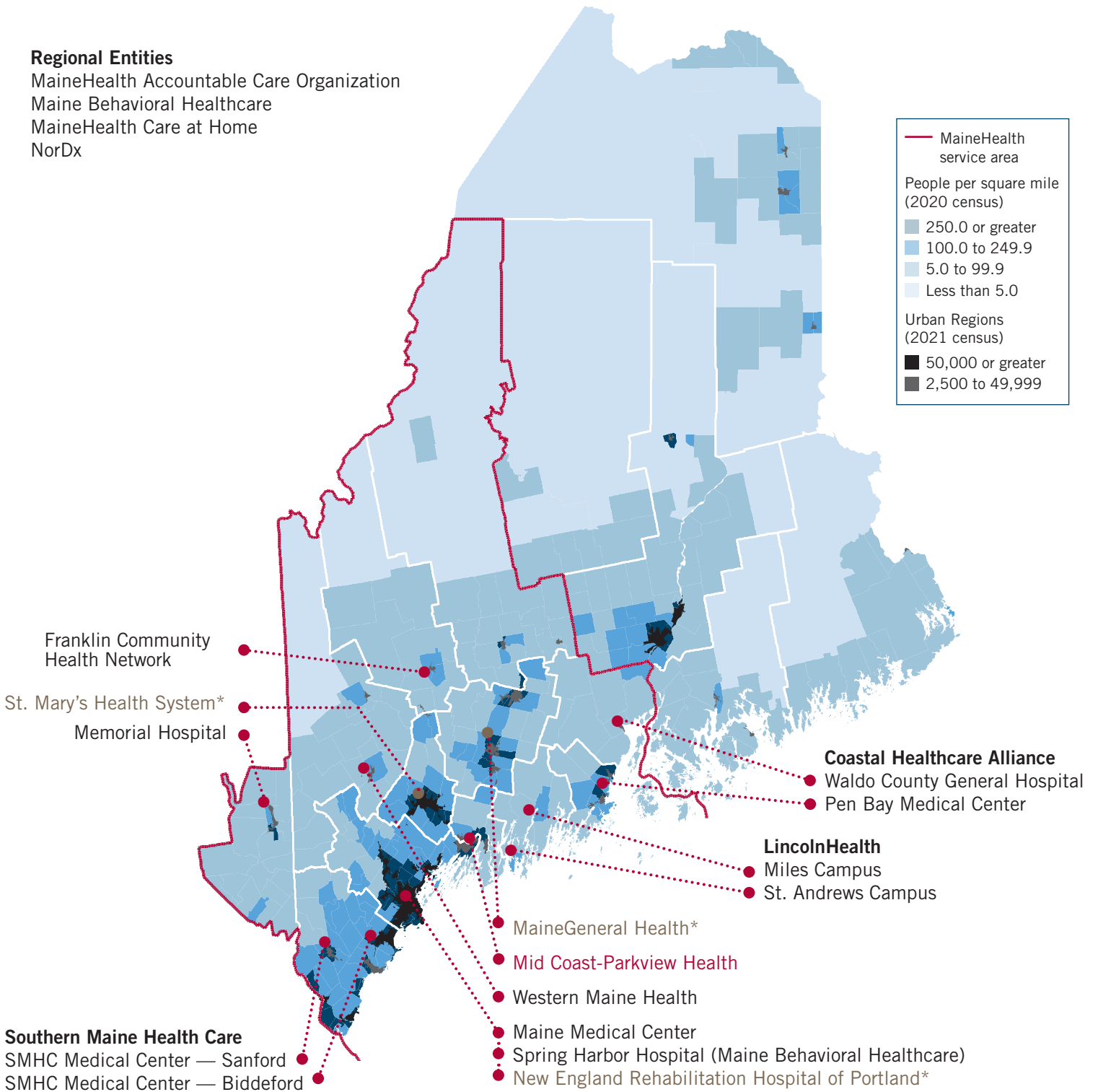^ Data suppressed due to low numbers

Resources

Source	Website
America's Health Rankings	www.americashealthrankings.org/
Behavioral Risk Factor Surveillance System	https://www.cdc.gov/brfss/brfssprevalence/index.html
Community Health Needs Assessment Data	www.maine.gov/dhhs/mecdc/phdata/MaineCHNA/final-CHNA-reports.shtml
County Health Rankings	www.countyhealthrankings.org/reports
Health Index	www.mainehealth.org/about/health-index-initiative
Maine Kids Count	https://mekids.org/data-books/
Maine Integrated Youth Health Survey	https://www.maine.gov/miyhs/
Maine Measures of Growth	https://www.mdf.org/economic-policy-research/measures-of-growth-report/
Maine Youth Risk Behavior Survey	www.maine.gov/miyhs/fact-sheets
U.S. CDC WONDER Underlying Causes of Death	https://wonder.cdc.gov/

MaineHealth and the Communities We Serve

Regional Entities
MaineHealth Accountable Care Organization
Maine Behavioral Healthcare
MaineHealth Care at Home
NorDx

Legend:
— MaineHealth service area

People per square mile (2020 census)
- 250.0 or greater
- 100.0 to 249.9
- 5.0 to 99.9
- Less than 5.0

Urban Regions (2021 census)
- 50,000 or greater
- 2,500 to 49,999

Franklin Community Health Network

St. Mary's Health System*
Memorial Hospital

Coastal Healthcare Alliance
Waldo County General Hospital
Pen Bay Medical Center

LincolnHealth
Miles Campus
St. Andrews Campus

MaineGeneral Health*
Mid Coast-Parkview Health
Western Maine Health
Maine Medical Center
Spring Harbor Hospital (Maine Behavioral Healthcare)
New England Rehabilitation Hospital of Portland*

Southern Maine Health Care
SMHC Medical Center — Sanford
SMHC Medical Center — Biddeford

*Affiliates

About MaineHealth

The MaineHealth system reaches more than 1.1 million residents in central, southern and western Maine and eastern New Hampshire. Our system includes Franklin Memorial Hospital/Franklin Community Health Network, LincolnHealth, Maine Behavioral Healthcare, MaineHealth Care at Home, Maine Medical Center, Memorial Hospital, Mid Coast–Parkview Health, NorDx, Pen Bay Medical Center, Waldo County General Hospital, Southern Maine Health Care, Spring Harbor Hospital and Stephens Memorial Hospital/Western Maine Health Care. MaineHealth affiliates include Maine General Health and St. Mary's Regional Medical Center. Joint Venture Partners include New England Rehabilitation Hospital of Portland. It is also a significant stakeholder in the MaineHealth Accountable Care Organization.