



# Making conversation

## The state of COVID outcomes and why it matters to your business

My name is John Elliott and I lead a team called Collaborative Ventures Group that works on creating innovative solutions for groups of employers. Together, Collaborative Ventures Group and Health Action Council are bringing our aggregated analytics forward to foster meaningful dialogue to support self-funded employers and their strategic planning. Please know, these insights are driven by self-funded employers like yourself.

We hope you enjoy this month's topic - and please contact Kevin Gregory or myself - if you would like to discuss how we can apply these ideas to your health care strategy.

## Ranking State COVID Outcomes

As I write this month's edition, I am sitting on an airplane without a mask for the first time since February 2020. At this stage of the COVID crisis, I thought it was a good time to take stock and assess the variation within our health care system and how the states rank in their COVID outcomes. The charts below show the 5 top and lowest ranked states for COVID deaths per 1,000 for 2020 and 2021.<sup>1</sup> It may disappoint some, but I am not going to discuss whether these states are Red or Blue. Rather, I want to draw your attention to the 2019 America Health Rankings report, which is funded by the UnitedHealth Group Foundation. How well did the American Health Rankings report correlate to the cumulative state performance for COVID deaths per 1,000? You will see below that a state's overall health rankings correlated very well to their COVID outcomes and mortality rate.

### Top Ranked States

Let's start on a positive note! Shown below are the top 10% of states based on their COVID mortality rates and the percent of COVID deaths as percentage of COVID cases. By ranking 50th, Vermont had the lowest COVID deaths per 1,000 of any states in the nation. This is not too surprising as Vermont was ranked the healthiest state in the country prior to the pandemic. Hawaii and Utah also ranked within the top 10% of the US in both COVID deaths and the 2019 America Health Rankings. Alaska had the biggest disparity as it ranked 4th lowest in COVID deaths per 1,000, but was 27th in the America Health Rankings.

	COVID Deaths Per 1,000 Rank <sup>1</sup>	% of COVID Deaths Per Case <sup>1</sup>	2019 America Health Rankings <sup>2</sup>
Vermont	1st	0.5%	1st
Hawaii	2nd	0.6%	3rd
Utah	3rd	0.5%	5th
Alaska	4th	0.5%	27th
Washington	5th	0.9%	9th

## Lowest Ranked States

Now to address the states that are ranked in the bottom 10%. For these states, we see the same correlation between COVID death rates per 1,000 compared to the 2019 America Health Rankings. It should come to no surprise that states ranked poorly in the America Health Rankings report also had some of the poorest rankings for COVID mortality. **Combined, the 5 lowest ranked states for COVID deaths per 1,000 had a mortality rate that is more than double the 5 highest ranked states. In terms of deaths, that translates into 49,310 additional deaths in these lowest ranked states.**

	COVID Deaths Per 1,000 Rank <sup>1</sup>	% of COVID Deaths Per Case <sup>1</sup>	2019 America Health Rankings <sup>2</sup>
Mississippi	50th	1.6%	50th
Arizona	49th	1.5%	31st
Alabama	48th	1.5%	48th
Tennessee	47th	1.3%	44th
West Virginia	46th	1.4%	45th

## How does this impact my organization?

As shown above, and what UnitedHealthcare and Health Action Council have been studying for decades, your zip code influences your health status, costs and outcomes. The charts above show COVID outcomes, but that is simply a leading indicator for all community outcomes. If the lowest ranked states have double the mortality rate of the highest ranked states, they most likely struggle with other health care outcomes like asthma and diabetes as well. Based on our experience, the first step to taking action begins with assessing your population's health challenges and your organization's human capital needs. Listed below are three suggested population assessments to help craft a comprehensive action plan to assess how community health outcomes may be impacting your organization's performance.

- 1** Population Assessment: the first assessment is evaluating the profile of your population and the social barriers that exist within your workforce. For Health Action Council, 36% of members have one or more social risk. The plan sponsor with the greatest risk has more than half of its employees with one or more social risks. When you combine an employee's social risk with the local community outcomes, an employer can isolate their most vulnerable populations.
- 2** Chronic Disease Profile: understanding where your chronic members reside can help determine whether a local or national health improvement strategy is a best fit for your organization. A heat map of chronic spend by market can put into perspective the impact of a local market solution for those populations that will have health care spending year after year.
- 3** Critical Business Need: each company has critical workers for the success of their organization. Airlines need flight crews. Retailers need effective distribution centers to have stocked shelves. For your organization, is there a particular employee segment that should be of particular focus? By isolating the health status of your critical workers and understanding the community outcomes for these workers, you could create disproportionate returns to your organization's bottom line.

## Continuing the Conversation

Together, UnitedHealthcare and Health Action Council have been studying the underlying data that drives the risk profile for self-funded employers since 2010. We welcome the opportunity to continue this conversation with your organization and the action items suggested for a focused community health strategy. If you want to continue this conversation, please feel free to contact me or Kevin Gregory to schedule time.

<sup>1</sup> John Hopkins University & Medicine and Centers for Disease Control data as of April 22, 2022.

<sup>2</sup> America Health Rankings 2019 Annual Report



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