

Executive Brief

2023 Annual Report



In partnership with



Data show highest rates of chronic conditions and premature death in *America's Health Rankings* history.

For 34 years, *America's Health Rankings*® has provided a comprehensive analysis of the nation's health on a state-by-state basis. As chronic conditions and premature death reach the highest levels recorded in the report's history, the United Health Foundation remains committed to providing data-driven insights that encourage action toward the improvement of health outcomes for all.

This United Health Foundation's *America's Health Rankings 2023 Annual Report*, released in partnership with the American Public Health Association, examines 87 measures of health from 28 distinct data sources to present a comprehensive overview of the health and well-being of the nation. The report reveals that in 2022, the rates of eight chronic conditions all reached their highest levels since *America's Health Rankings* began tracking them. Furthermore, in 2022 more than 29 million adults reported having three or more chronic conditions. Disparities across nearly all measured demographic groups existed in chronic condition prevalence, and certain racial/ethnic groups experienced disparities in the management of diabetes, asthma and cardiovascular diseases. This came as the nation's premature death rate rose to its highest level in *America's Health Rankings* history.

The data also show bright spots that represent recent improvements, such as an increase in mental health

providers. However, other measures that had improved in recent years have returned to 2019 levels.

The findings of this report underscore the urgent need to confront the nation's broad and diversifying health challenges — especially the high and rising prevalence of chronic conditions — through policies and actions that tackle disparities and help communities across the nation improve their health and well-being.

“Efforts like *America's Health Rankings* and *Healthy People* underscore the importance of having high-quality demographic population data for benchmarking, as well as for tracking where we are and where we need to go.”

Dr. David Huang, PhD, MPH, CPH

Chief of Health Promotion Statistics Branch
National Center for Health Statistics, CDC



New Data and Demographic Groups Available

This report features new measures that provide further insight into environmental health, as well as new demographic group analyses by disability status, sexual orientation and veteran status. Visit AmericasHealthRankings.org to explore the new data, methodology and details on how demographic groups were defined and language limitations.

Chronic Conditions Rise to Record Highs; Broad Disparities Across Nearly All Measures and Demographics

Eight chronic conditions — arthritis, depression, diabetes, asthma, cancer, cardiovascular diseases (CVDs), chronic obstructive pulmonary disease (COPD) and chronic kidney disease (CKD) — reached their highest levels since *America's Health Rankings* began tracking these measures. Notably, between 2021 and 2022, depression prevalence surged to 21.7%, affecting nearly 54.2 million adults. Diabetes prevalence also increased to 11.5%, impacting nearly 31.9 million adults, while asthma prevalence rose to 10.4%, affecting nearly 26 million adults. Additionally, 8.3% of adults reported ever having been diagnosed with cancer (excluding non-melanoma skin cancer), with nearly 21.4 million affected in 2022.¹

For all eight of these chronic conditions, there were striking disparities across measures by nearly every measured demographic group. The most notable disparities include:

Disability Status

- COPD was 7.7 times higher (26.3% vs. 3.4%), CKD was 6.5 times higher (13.7% vs. 2.1%) and asthma was 3.2 times higher (23.4% vs. 7.4%) among adults who reported self-care difficulty than those without a disability.

Race/Ethnicity

- COPD was 7.1 times higher among American Indian/ Alaska Native (10.6%) than Asian (1.5%) adults.
- Cancer was 3.9 times higher among white (10.8%) than Asian (2.8%) adults.

Geography

- Depression was 2.3 times higher in Tennessee (29.2%) than Hawaii (12.5%).
- Diabetes was 2.1 times higher in West Virginia (17.4%) than Colorado (8.1%).

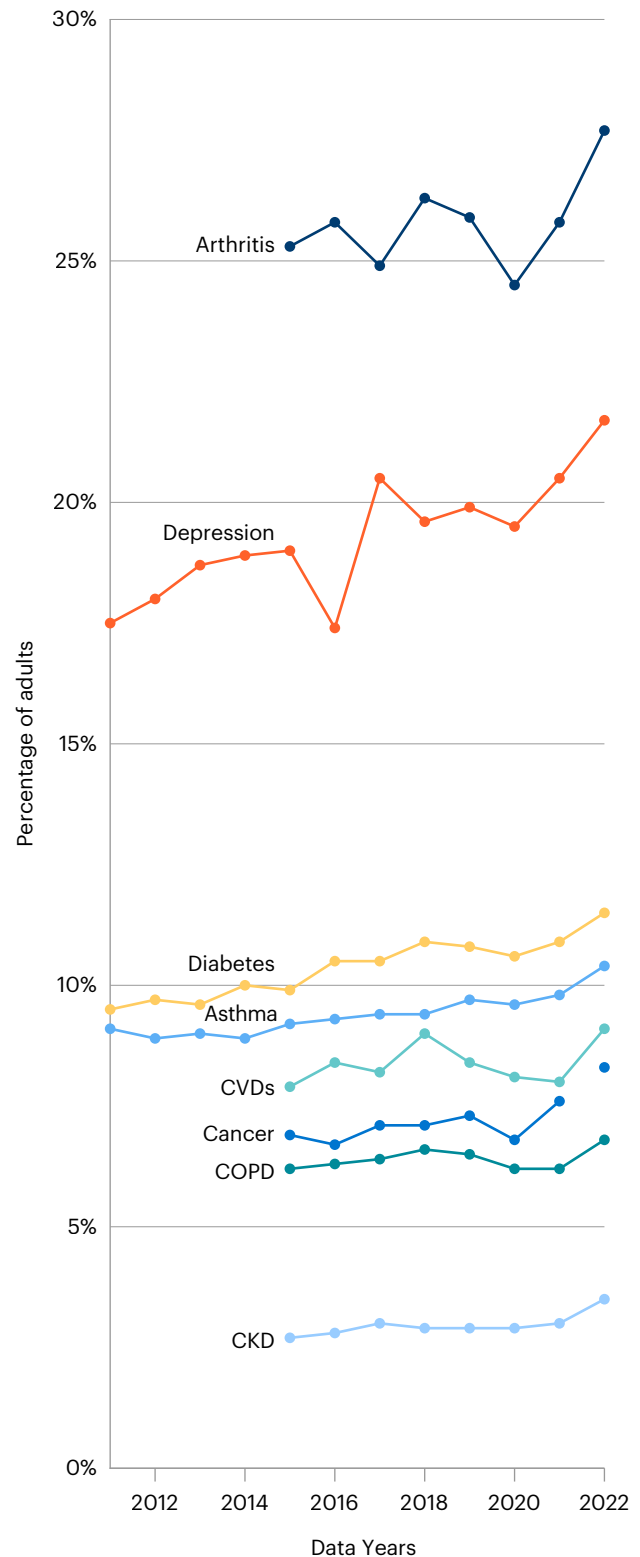
Veteran Status

- CVDs were 2.1 times higher (17.6% vs. 8.3%) and cancer was 1.8 times higher (13.5% vs. 7.6%) among adults who have served in the U.S. armed forces than those who haven't served.

Sexual Orientation

- Depression was 2.4 times higher (45.4% vs. 19.2%) and asthma was 1.6 times higher (15.2% vs. 9.7%) among adults who identified as LGBQ+ than straight adults.
- Cancer was 1.7 times higher among adults who identified as straight (8.7%) than LGBQ+ adults (5.0%).

Prevalence of Chronic Conditions Continues to Increase



Source: CDC, Behavioral Risk Factor Surveillance System, 2011 – 2022.

¹ 2022 cancer value is not comparable to prior years due to a change in the survey question. The trend graph reflects this with a break in the trendline.

Chronic Condition Prevalence and Disparities in 2022

Depression

21.7%

of adults had depression, affecting nearly 54.2 million adults.

Disparities by state

2.3x

higher in Tennessee (29.2%) than in Hawaii (12.5%).

Disparities by sexual orientation

2.4x

higher among LGBTQ+ (45.4%) than straight (19.2%) adults.

Diabetes

11.5%

of adults had diabetes, impacting nearly 31.9 million adults.

Disparities by state

2.1x

higher in West Virginia (17.4%) than in Colorado (8.1%).

Asthma

10.4%

of adults had asthma, with nearly 26 million adults affected.

Disparities by disability status

3.2x

higher among adults who reported self-care difficulty (23.4%) than those without a disability (7.4%).

Disparities by sexual orientation

1.6x

higher among LGBTQ+ (15.2%) than straight (9.7%) adults.

Cancer

8.3%

of adults had cancer (excluding non-melanoma skin cancer), with nearly 21.4 million affected.

Disparities by race/ethnicity

3.9x

higher among white (10.8%) than Asian (2.8%) adults.

Disparities by veteran status

1.8x

higher among adults who have served in the U.S. armed forces (13.5%) than those who haven't served (7.6%).

Source: CDC, Behavioral Risk Factor Surveillance System, 2022.

Furthermore, in 2022, 29.3 million adults — 11.2% of the adult population — reported having three or more of these eight conditions. These adults with multiple chronic conditions face a large burden in terms of costs, complexity of care and limitations on daily life, and a substantial portion of health care spending nationwide goes toward managing multiple chronic conditions, according to the [Agency for Healthcare Research and Quality](#).

Different demographic groups faced significant disparities in the prevalence of multiple chronic conditions. Specifically, the rate was 5.2 times higher among American Indian/Alaska Native (17.8%) compared with Asian (3.4%) adults.

Number of Primary Care Providers Declined

While the prevalence of chronic conditions has reached an all-time high since being added to the *Annual Report*, there are notable challenges related to treatment. Notably, the number of primary care providers — who often serve as a patient’s main point of contact and, [according to experts](#), play a pivotal role in effective chronic condition management due to their comprehensive and continuous care approach — decreased 13% from 265.3 to 232.0 providers per 100,000 population between 2022 and 2023. This resulted in a nationwide decline of over 107,000 providers.

Moreover, there were striking disparities in the number of primary care providers between states. The number of providers was 1.8 times higher in Massachusetts (322.1) than in California (178.9) and was highest in Washington, D.C., at 411.3 providers per 100,000 population.

Racial and Ethnic Disparities in Chronic Condition Care

Newly available [data on chronic condition care](#) from *America’s Health Rankings* highlight broad racial/ethnic disparities in the management of certain chronic conditions, notably diabetes, high blood pressure and asthma.

Between 2011 and 2021, the percentage of adults with diabetes who had their A1c checked improved; however, the most significant improvements were among white, college-educated and higher-income adults. Hispanic (81.1%) and Black (84.6%) adults with diabetes were less likely to have their A1c checked compared with white (93.3%) adults with diabetes. Without proper monitoring in the form of an A1c check, the most commonly used test to control and treat diabetes, adults may need additional care for their diabetes. Hispanic (45.1%) and Black (40.3%) adults were significantly more likely to have uncontrolled A1c compared with white (27.7%) adults with diabetes, and 2.1 times and 1.8 times more likely, respectively, compared with multiracial (21.8%) adults.

Black adults had higher prevalence of high blood pressure and were less likely to have their

blood pressure “controlled” (less than 130/80 mm Hg). White (55.4%) adults were 1.5 times more likely to have controlled blood pressure compared with Black (37.4%) adults with high blood pressure.

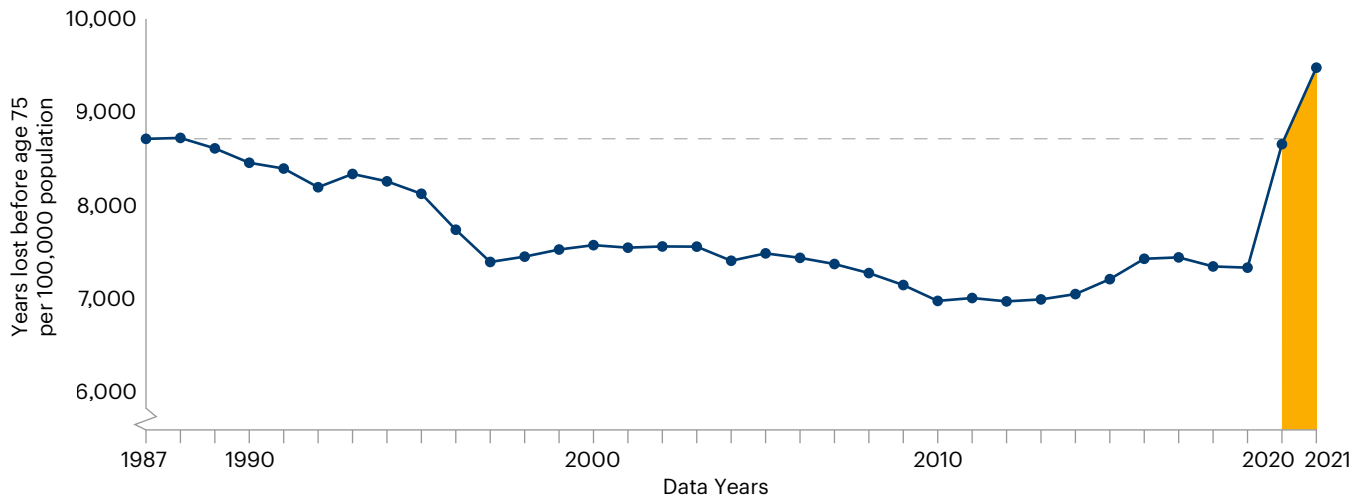
In 2013-2016, asthma-related emergency room visits were 2.5 times higher among Black (22.6%) compared with white (9.2%) adults and 2.3 times higher among high school graduates (16.8%) compared with college graduates (7.3%).

“A collaborative, data-driven approach is the only way we’re going to create substantial change in improving chronic disease outcomes and reducing health disparities.”

Dr. Roxana Cruz

Director of Medical & Clinical Affairs
Texas Association of Community Health Centers (TACHC)

Premature Death Increased 9%▲



Source: CDC WONDER, Multiple Cause of Death Files, 1987 – 2021.

Premature Death Rate Reached Highest Value

The premature death rate — years of potential life lost before age 75 per 100,000 population — increased 9% nationwide between 2020 and 2021, a continued rise from last year’s *Annual Report*. This stark increase marked the highest value recorded by *America’s Health Rankings*. This alarming trend was not isolated geographically, as the premature death rate increased in 39 states, led by 21% in Alaska (9,409 to 11,430 years lost before age 75 per 100,000 population) and 17% in three states: Idaho (7,145 to 8,365), New Mexico (11,896 to 13,946) and Oklahoma (10,873 to 12,764).

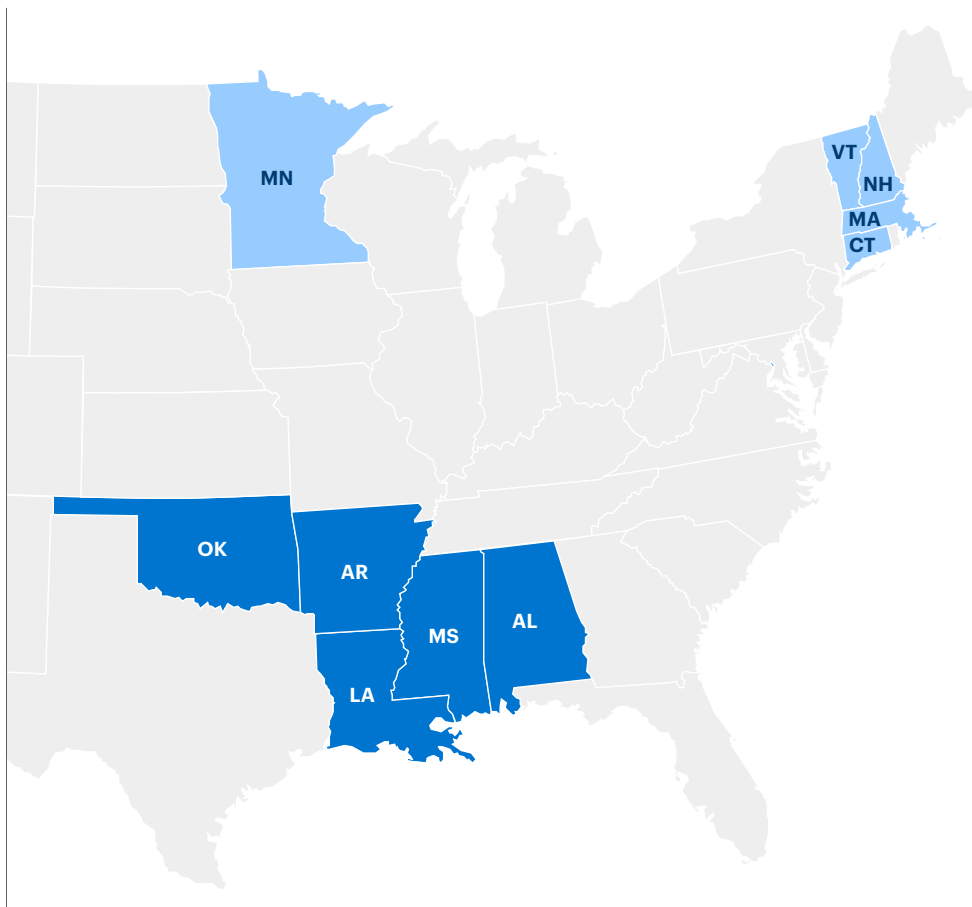
Chronic conditions played a significant role in driving this rate, as they contributed to six of the top 10 leading causes of death before age 75, according to *America’s Health Rankings’* analysis of data from CDC WONDER. In 2021, cancer (337,997 deaths) and heart disease (282,559) were the two leading causes of death before age 75. Together, these chronic conditions had larger impacts than other major contributors (COVID-19, accidents including drug-related fatalities, suicide and homicide) to mortality among those younger than 75 in 2021.

Between 2020 and 2021, drug deaths — deaths due to drug injury (unintentional, suicide, homicide or undetermined) per 100,000 population — increased 15% from 27.9 to 32.1. At the same time, firearm deaths of all types, including accidents, suicides and homicides, increased 7% from 13.7 to 14.7. Homicide, a new measure added to this year’s report, increased a striking 33% from 5.8 to 7.7 deaths per 100,000 population between 2018-2019 and 2020-2021.

Number of Mental Health Providers Continued to Increase; Other Measures Returned to 2019 Rates

Some positive trends continued to improve following the end of the COVID-19 pandemic. The number of mental health providers — psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists and advanced practice nurses specializing in mental health care — increased 7% from 305.0 to 324.9 providers per 100,000 population between 2022 and 2023. However, the demand for mental health services may have also increased in the past several years, as demonstrated by an 8% increase in frequent mental distress — the percentage of adults who reported their mental health was not good 14 or more days in the past 30 days — from 14.7% to 15.9% between 2021 and 2022.

While there were continued improvements in the number of mental health providers, many measures that appeared to be pandemic-era successes have returned to 2019 rates. For example, excessive drinking increased 6% from 17.3% to 18.4% of adults between 2021 and 2022. Additionally, frequent physical distress — the percentage of adults who reported their physical health was not good 14 or more days in the past 30 days — increased 14% from 10.9% to 12.4% between 2021 and 2022. Suicide, which significantly decreased between 2019 and 2020, increased 4% from 14.0 to 14.5 deaths per 100,000 population between 2020 and 2021.



**2023 Annual Report
State Rankings**

Healthiest and least healthy states ranked across social and economic factors, physical environment, clinical care, behaviors and health outcomes.

● Healthiest States

- 1. New Hampshire**
- 2. Massachusetts**
- 3. Vermont**
- 4. Connecticut**
- 5. Minnesota**

● Least Healthy States

- 46. Alabama**
- 47. Oklahoma**
- 48. Arkansas**
- 49. Mississippi**
- 50. Louisiana**

Source: *America's Health Rankings* composite measure, 2023.

**Improving Future Health Outcomes
Across the Nation**

Annual Report data highlight pressing challenges in our nation's health — notably, the rising prevalence of chronic conditions and other major drivers of higher premature death rates and lower life expectancy in the nation.

In light of these findings, we urge policymakers and leaders to utilize this report as a snapshot of the post-pandemic health landscape. Improving health outcomes for all needs to remain at the forefront of the nation's priorities.



UNITED HEALTH FOUNDATION®

About the United Health Foundation

Through collaboration with community partners, grants and outreach efforts, the United Health Foundation® works to improve our health system, build a diverse and dynamic health workforce and enhance the well-being of local communities. The United Health Foundation was established by UnitedHealth Group (NYSE: UNH) in 1999 as a not-for-profit, private foundation dedicated to improving health and health care. To date, the United Health Foundation has committed more than \$700 million to programs and communities around the world. To learn more, visit UnitedHealthFoundation.org.



About the American Public Health Association

The APHA champions the health of all people and all communities. The APHA strengthens the public health profession, promotes best practices and shares the latest public health research and information. The APHA is the only organization that combines a 150-year perspective, a broad-based member community and the ability to influence federal policy to improve the public's health. Learn more at www.apha.org.



For more information, contact:

The United Health Foundation
Jenifer McCormick
jenifer_mccormick@uhg.com
(952) 936-1917

AmericasHealthRankings.org

