

TennCare Changes and Their Impact on the County

Recent legislative changes made to TennCare will go into effect January 1, 2003. It is estimated that as many as 180,000 people will be cut from TennCare rolls.

The rising number of uninsured and *under-insured*, coupled with population growth in Rutherford County, will place a burden on current health and support systems, particularly those serving the economically disadvantaged. It is likely to have a negative impact on the health of children. Adults, particularly the elderly and those with chronic and disabling conditions, also will be adversely affected.

How will TennCare changes affect Rutherford County residents?

It is estimated that

- 3,426 people in Rutherford County, approximately 2% of all current enrollees, will lose TennCare.
- 1,009 children will lose coverage for Early and Periodic Screening, Diagnosis, and Treatment (EPSDT), as well as dental, vision, and other health benefits.

How will TennCare changes affect the elderly?

Approximately 25,000 elderly residents in the state will lose their coverage. Some may continue receiving pharmacy benefits if they meet cost-sharing obligations.

How will TennCare changes affect children?

Approximately 4,000 children who are above 200% of poverty will be cut from TennCare. Over 200,000 children will lose coverage for EPSDT and other health care services.

Source: Tennessee Health Care Campaign Web site, www.tenncare.org.

According to the American Cancer Society:

- Cancer is the #1 cause of death among Rutherford County residents aged 25-64. **Tennessee has the 9th-highest overall cancer mortality rate** in the country.
- Tobacco use among youth increased considerably during the 1990s except in states with vigorous tobacco control programs. **Tennessee per capita tobacco control funding is the second lowest in the nation!**
- Thirty percent of all cancer deaths and 87% of lung cancer deaths can be attributed to tobacco.
- **Breast cancer** mortality rates have been declining. Rutherford County's rate is 17.3, lower than the rates for Tennessee (22.6) and the U.S. (24.2). Black women are less likely than white women to survive five years after cancer detection; both white and black women have higher incidence and death rates than do women of other racial and ethnic groups.
- Since 1997, more women have died each year of **lung cancer** than breast cancer, which for over 40 years had been the major cause of cancer death among women. That said, lung cancer incidence and mortality rates in Rutherford County are highest among males; blacks have higher incidence and mortality rates than do whites.
- The *incidence* rate of **prostate cancer** in Rutherford County is 82.5. This is lower than the rates in Tennessee (91.9) and the U.S. (142.0). However, the *mortality* rate in Rutherford County is higher (29.3) than are the rates for the state (25.1) or nation (23.7). Mortality rates for black men, both in Tennessee and the U.S., are more than double the mortality rates for white men. Prostate cancer is the second leading cause of cancer death in men.

Source: American Cancer Society, Rutherford County Community Assessment, 2002

Rutherford County HEALTH WATCH

Center for Health and Human Services, Middle Tennessee State University • Vol. 4, No. 1, Fall 2002

Introduction

The Rutherford County Health Watch provides a brief sketch of the county's health status at a particular point in time. This edition highlights the following:

- Population growth
- Birth outcomes, including infant mortality
- Death measures
- Communicable diseases
- TennCare changes and their impact on the county
- American Cancer Society county assessment information

Population Growth

According to a report by the Business and Economic Research Center at Middle Tennessee State University, many more people are moving *into* Rutherford County than are moving out. In tax year 1999-2000, the county's population increased by 1,602 households and 3,055 people. With more residents comes an increased need for health care services.

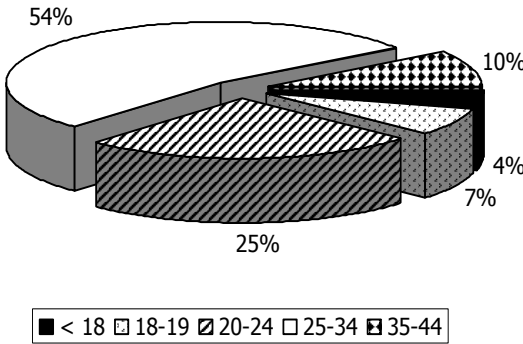
While Rutherford County's population grew by 3,055 persons in 1999-2000, the median adjusted gross income increased by only \$78. There is little overall difference in median income between those households migrating into the county and those migrating out. However, there is a striking difference in the median income of foreign residents. Of the foreign residents moving into Rutherford County, the median adjusted gross income was \$4,999, while those migrating out had a median income of \$14,230, a difference of \$9,231. While the total number of foreign residents moving into and out of the county is small, those moving in may

have greater health care needs based on low economic status and may be least able to access and afford health care services [See **Table 1**].

Birth Outcomes

There were 2,794 live births in Rutherford County in 2000, a rate of 15.3 births per 1,000 population. Of these, 325 births were to teenagers (117 to females under the age of 18). Nationally during the 1990s, teen birth rates declined by 20%. In Rutherford County, the birth rate for 18-19 year olds decreased between 1999 and 2000 but the birth rate for females age 10-17 increased (from 9.4 in 1999 to 11.5 in 2000). **Figure 1** shows the percentage of live births, by maternal age, in 2000.

FIGURE 1. Live Births by Maternal Age for Rutherford County, 2000



Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research.

Prepared by the Center for Health and Human Services, Middle Tennessee State University
Director, M. Jo Edwards, Ed.D., Adams Chair of Excellence in Health Care Services
Research Development, Carol M Smith, M.A.

The Center for Health and Human Services

collaborates with public and private institutions to develop programs designed to improve the health of the middle and greater Tennessee community. Among the Center's recent projects are:

Smart Mothers Are Resisting Tobacco (S.M.A.R.T. Moms); Youth Led Tobacco Use Prevention in Rutherford County; Tobacco Use Prevention Among Minority Youth Community; Diabetes Control Program; South Africa Squatter Settlement Research; Child Lead Poisoning Prevention Program; Health Sciences Teacher Training

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TABLE 1. Households Moving Into and Out of Rutherford County, 1999-2000

Rutherford County	Number House-holds Migrating In	Number Persons Migrating In	Median Adjusted Gross Income	Number House-holds Migrating Out	Number Persons Migrating Out	Median Adjusted Gross Income	Net Change House-holds Migrating	Net Change Persons Migrating	Difference in Median Income
U.S. & Foreign	6,814	13,251	23,127	5,212	10,196	23,049	1,602	3,055	78
U.S.	6,762	13,170	23,251	5,174	10,122	23,140	1,588	3,048	111
In Tennessee	4,436	8,266	23,229	3,237	6,187	22,998	1,199	2,079	231
Different State	2,326	4,904	23,297	1,937	3,935	23,503	389	969	-206
Foreign	52	81	4,999	38	74	14,230	14	7	-9,231

Source: Mid-State Economic Indicators, Vol. 12, No. 1

Adverse pregnancy and birth outcomes include no or inadequate prenatal care, premature births, and babies born with low birth weight. These outcomes can result in health and medical problems such as chronic asthma, cerebral palsy, and mental disabilities as well as neonatal and infant mortality. **Table 2** presents birth outcomes for the county and state and compares them with the U.S. Department of Health and Human Services Healthy People 2010 (HP2010) goals. Rutherford County outcomes are slightly better than those for Tennessee but still fall short of HP2010 targets. The same trend holds true for infant mortality rates [**Table 3**].

Figures 2 and **3** show low birth weight and infant mortality data for Rutherford County by maternal race.

TABLE 2. Birth Outcomes for Rutherford County and Tennessee, 2000

Birth Outcome	Rutherford County (%)	Tennessee (%)	Healthy People 2010 Goal (%)
Low birth weight (<2500 g)	8.5	9.2	5.0
Very low birth weight (<1500 g)	1.0	1.7	0.9
Premature births (<37 weeks)	11.0	10.7	7.6
Inadequate or no prenatal care	6.4	6.8	*

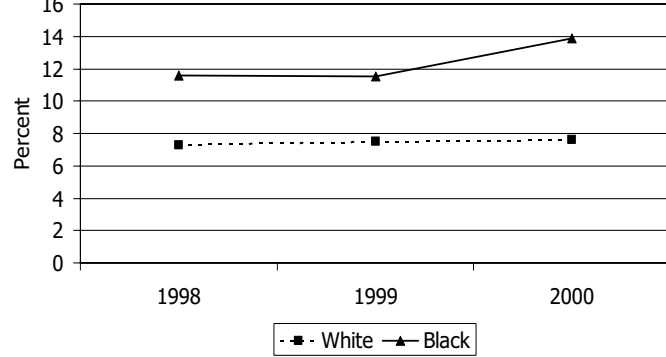
* HP2010 goal is "no more than 10% with no prenatal care in first trimester."
Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research; Health Information Tennessee and Statistical Profiling of Tennessee; U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion.

TABLE 3. Infant Mortality for Rutherford County and Tennessee, 2000

Infant Mortality	Rutherford County Rate	Tennessee Rate	Healthy People 2010 Target
Infant mortality per 1,000 live births	5.7	9.0	4.5
White infant mortality	5.0	6.6	4.5
Black infant mortality	13.6	18.1	4.5
Neonatal mortality	3.9	5.9	2.9
Post-neonatal mortality	1.8	3.2	1.5

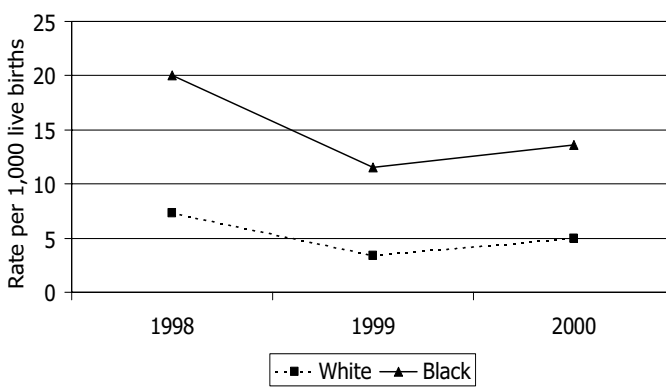
Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research; U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion.

FIGURE 2. Percent Low Birth Weight by Maternal Race for Rutherford County, 1998-2000



Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research; Health Information Tennessee and Statistical Profiling of Tennessee.

FIGURE 3. Infant Mortality Rates by Maternal Race for Rutherford County, 1998-2000



Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research; Health Information Tennessee and Statistical Profiling of Tennessee.

Death Measures

There were 1,141 deaths recorded in Rutherford County in 2000. Deaths from heart disease declined between 1998 and 2000 while deaths from malignant neoplasms (cancers) increased from 1999 to 2000. Deaths from suicides and from cerebrovascular diseases increased slightly between 1998 and 2000. **Table 4** presents death rates for the county and state for 1998-2000. Heart disease and cancer account for half of all deaths in Rutherford County in 2000 [**Figure 4**].

Infant mortality rates for both the county and state are higher than the HP2010 goals. The black infant mortality rate is especially high, nearly triple the white infant mortality rate [**Table 3**]. This is consistent with national trends.

TABLE 4. Death Rates for Rutherford County and Tennessee, 1998-2000

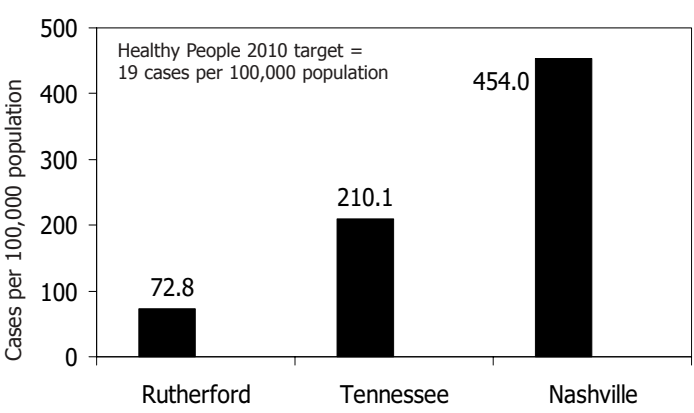
Deaths and Causes	Rutherford County Rates			Tennessee Rates		
	1998	1999	2000	1998	1999	2000
Total Deaths per 1,000 population	6.1	6.1	6.3	9.8	9.8	9.7
Deaths from diseases of the heart	182.5	185.5	165.9	303.2	295.3	280.6
Deaths from malignant neoplasms	165.6	137.7	151.6	220.4	216.8	214.8
Deaths from cerebrovascular disease	41.0	45.5	46.7	72.6	74.6	74.2
Deaths from motor vehicle accidents	15.7	21.6	17.0	22.4	23.3	23.0
Deaths from suicides	8.4	9.9	11.5	13.6	13.1	12.5

Note: Total deaths are per 1,000 population; other death rates are per 100,000 population.
Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research; Health Information Tennessee and Statistical Profiling of Tennessee.

Communicable Diseases

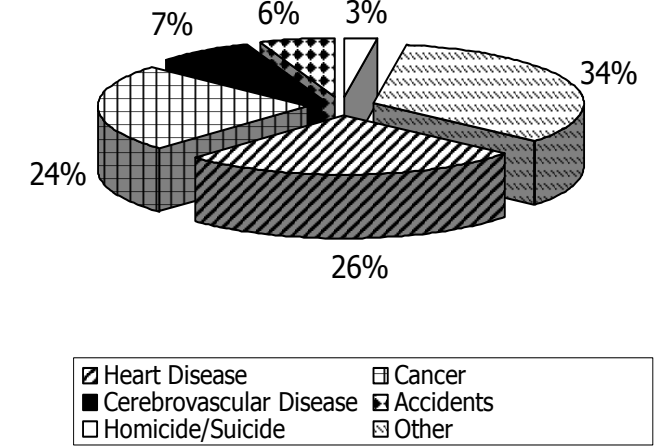
According to a recent report by the State University of New York Downstate Medical Center, large Southern cities and suburbs have high rates of communicable diseases such as syphilis and tuberculosis. The rates for Nashville are very high. Given Rutherford County's proximity to Nashville and the influx of residents into Rutherford from Davidson County, there is concern that the incidence of communicable diseases will increase here. **Figures 5, 6,** and **7** present rates of gonorrhea, syphilis, and tuberculosis for Rutherford County, Nashville, and Tennessee.

FIGURE 5. Gonorrhea Rates for Rutherford County, Nashville, and Tennessee



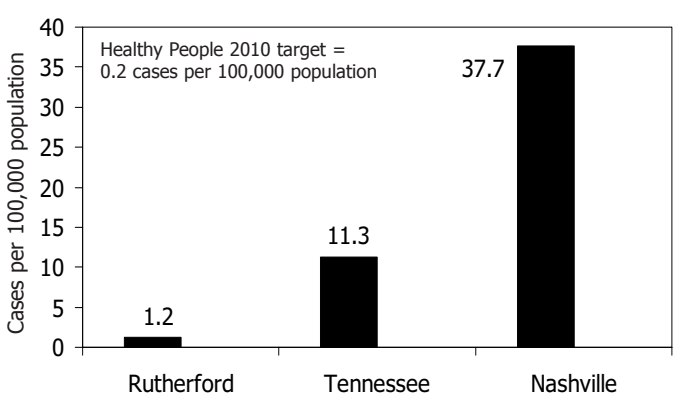
Source: Rutherford County and Tennessee data from Health Information Tennessee and Statistical Profiling of Tennessee, annualized for 1997-1999; Nashville data are for 2000, from Healthy Cities, Healthy Suburbs Report, SUNY Downstate Medical Center.

FIGURE 4. Deaths by Cause of Death for Rutherford County, 2000



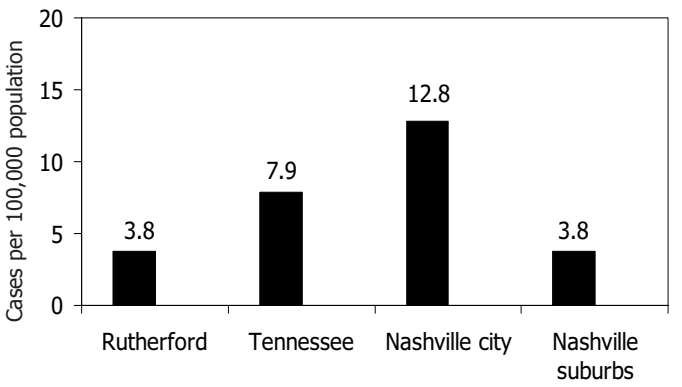
Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research.

FIGURE 6. Syphilis Rates for Rutherford County, Nashville, and Tennessee



Source: Rutherford County and Tennessee data from Health Information Tennessee and Statistical Profiling of Tennessee, annualized for 1997-1999; Nashville data are for 2000, from Healthy Cities, Healthy Suburbs Report, SUNY Downstate Medical Center.

FIGURE 7. Tuberculosis Rates for Rutherford County, Nashville, and Tennessee



Source: Rutherford County and Tennessee data from Health Information Tennessee and Statistical Profiling of Tennessee, annualized for 1997-1999; Nashville data are for 2000, from Healthy Cities, Healthy Suburbs Report, SUNY Downstate Medical Center.