

# Rutherford County HEALTH WATCH

Center for Health and Human Services, Middle Tennessee State University • Vol. 7, No. 1, Fall 2005

## Highlights

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

- **TennCare changes and the impact in Rutherford County**  
*TennCare changes will affect county adults*
- **Birth outcomes, including infant mortality**  
*Black infant mortality rate lower than white rate for first time; premature, low weight, and cesarean births all increasing*
- **Death measures**  
*Death rates remained steady, suicide rates down; motor vehicle accident deaths increased*
- **Rutherford County health priorities**  
*Includes cancer and stroke data; rates rising among black adults*
- **Fast facts about Rutherford County**  
*Selected health and vital statistics*

## TennCare Changes and the Impact in Rutherford County

On January 1, 1994, Tennessee began the health care reform program called TennCare. This program essentially replaced the Medicaid program. TennCare was designed as a managed care model. It extended coverage to uninsured and uninsurable persons who were not eligible for Medicaid. The current TennCare program is really two programs: *TennCare Medicaid*, for persons who are Medicaid eligible, and *TennCare Standard*, for persons who are not Medicaid eligible but who meet the state's criteria as being either uninsured or uninsurable. TennCare is currently undergoing reform. On July 1, 2005, TennCare began mailing letters to all affected

### For More Information on TennCare

- For information on TennCare changes and eligibility, go to [www.tennessee.gov/tenncare/](http://www.tennessee.gov/tenncare/).
- For "Safety Net" providers and resources, go to [www.tnanytime.org/4tnwell/search](http://www.tnanytime.org/4tnwell/search) and select Rutherford County.

TennCare enrollees regarding the *first phase* of benefit and cost-sharing changes. All adults age 21 and older received a notice. Many changes took effect on August 1, 2005, and other changes may follow.

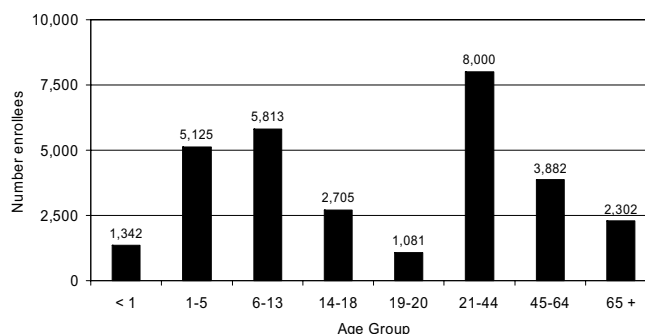
In Rutherford County, the number of residents receiving TennCare grew between 2003–2005, from 26,418 in 2003 to 28,408 in 2004 and 30,250 on June 30, 2005 (before TennCare reform). During this period, 60% of county TennCare recipients were females and 40% were males; approximately 50% were children under the age of 19. Hispanic recipients increased slightly between 2003 and 2005, though there has been little overall change in enrollee ethnicity (see **Table 1**). With the recent changes in TennCare eligibility, the number of county recipients may decrease by approximately 3,550 adults; children will not be disenrolled. **Figure 1** shows TennCare recipients in Rutherford County by age group for the first half of 2005. **Figure 2** (shown on next page) shows what the age distribution will look like as adults are disenrolled in TennCare.

**TABLE 1. Ethnicity of TennCare Recipients in Rutherford County, 2003-2005**

Recipient Ethnicity	2003	2004	2005
White	70%	69%	68%
Black	20%	20%	20%
Hispanic	3%	4%	6%
Other	6%	7%	6%

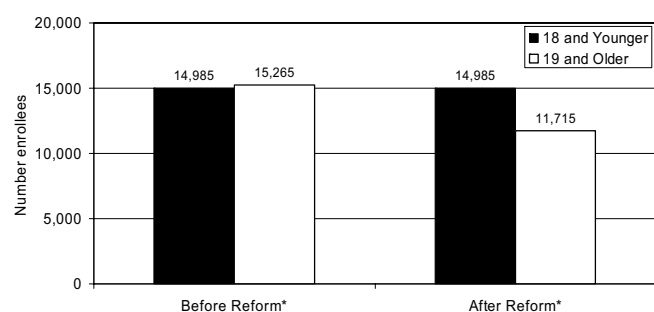
Source: Bureau of TennCare, personal communication (M. Drescher, 10/4/05). Data as of June 30 of each year.

**FIGURE 1. TennCare Recipients in Rutherford County by Age Group on June 30, 2005**



Source: Bureau of TennCare, personal communication (M. Drescher, 10/4/05).

**FIGURE 2. TennCare Recipients in Rutherford County by Age, Before and After TennCare Reform, 2005**



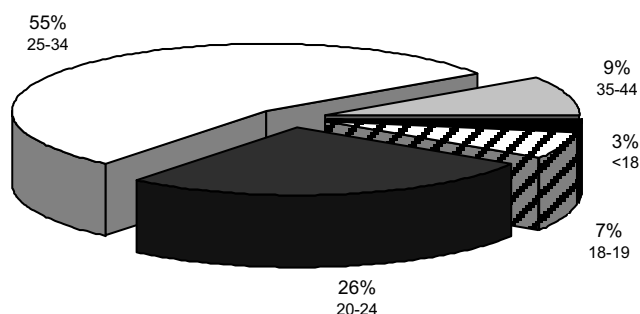
\* "Before Reform" is as of June 30, 2005. "After Reform" is estimated for 2005 after all changes are made.

Source: Bureau of TennCare, personal communication (M. Drescher, 10/4/05).

## Birth Outcomes

There were 3,088 live births in Rutherford County in 2003, an increase of almost 4% over the 2,980 live births in 2002. Of these, 9%, or 287 births, were to females aged 10–19. There were 81 births to females under the age of 18 in 2003, an increase of nearly 29% from the 63 births in 2002, though still less than the 91 births to young teens in 2001. The number of births to females aged 18–19 remained virtually unchanged, with 206 births in 2003 and 203 in 2002. Births to females aged 35 and older continued to decline, from 316 in 2002 to 293 in 2003. **Figure 3** shows the percentage of live births, by maternal age, in 2003.

**FIGURE 3. Live Births by Maternal Age, Rutherford County, 2003**



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

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 chronic health and medical problems as well as neonatal and infant mortality. The data for Rutherford County offer both positive and negative trends. The percent of births to women receiving late or no prenatal care decreased over the last four years, as has tobacco use during pregnancy, though it is still high. However, the percentage of premature births and babies born at low birth weight increased. And the rate of cesarean deliveries to county women is now one-third of all deliveries,

more than double the goal for Healthy People 2010.

**Table 2** presents 2003 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. **Table 3** provides rates of specific birth outcomes in Rutherford County over the last four years.

**TABLE 2. Birth Outcomes, Rutherford County and Tennessee, 2003**

Birth Outcome	Rutherford County (%)	Tennessee (%)	Healthy People 2010 Goal (%)
Low birth weight (<2500 g)	9.5	9.4	5.0
Very low birth weight (<1500 g)	1.8	1.7	0.9
Premature births (<37 weeks)	12.7	10.8	7.6
Inadequate or no prenatal care	2.8	7.1	*
Tobacco use during pregnancy	12.6	16.4	1.0

\* HP2010 goal is "no more than 10% with no prenatal care in first trimester."

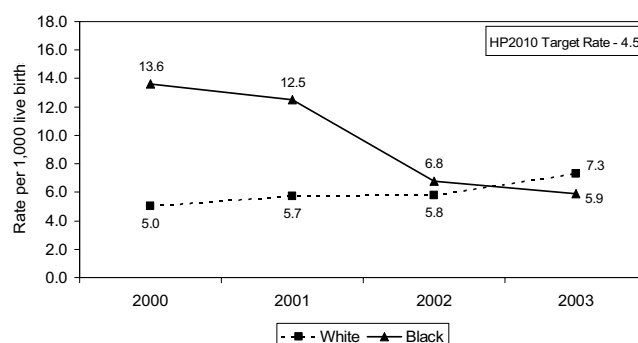
Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research; Health Information Tennessee and Statistical Profiling of Tennessee; U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion.

**TABLE 3. Birth Outcomes, Percent in Rutherford County, 2000-2003**

Birth Outcome	2000	2001	2002	2003
Low birth weight (<2500 g)	8.5	9.1	7.9	9.5
Premature births (<37 weeks)	11.0	13.0	11.4	12.7
Inadequate or no prenatal care	6.4	4.5	3.5	2.8
Tobacco use during pregnancy	15.5	13.2	13.3	12.6
Cesarean delivery	25.6	28.3	30.3	33.5

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

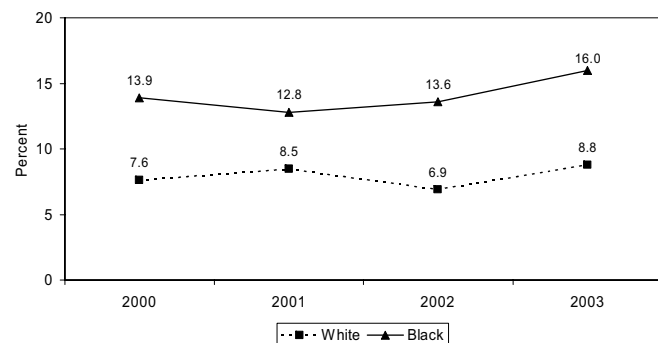
**FIGURE 4. Infant Mortality Rates by Maternal Race, Rutherford County, 2000-2003**



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

In Rutherford County, overall infant mortality rates are on the rise. The infant mortality rate for 2001–2003 was 8.8 per 1,000 live births, up from an infant mortality rate of 6.1 from 1998–2000. For the first time, in 2003, the infant mortality rate was lower for black babies than for white infants. Rates of low birth weight among babies born to black mothers continued to be double that of white mothers. **Figures 4** (shown on previous page) and **5** show infant mortality rates and low birth weight for Rutherford County by maternal race.

**FIGURE 5. Percent Low Birth Weight by Maternal Race, Rutherford County, 2000–2003**



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

## Death Measures

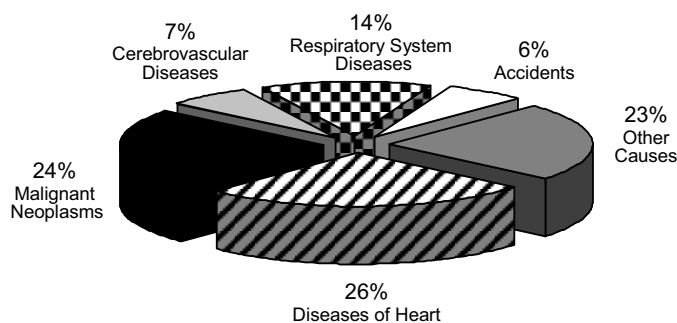
There were 1,217 deaths recorded in Rutherford County in 2003, up slightly from 1,187 deaths in 2002. There have been small increases in the overall county and state death rates during the last three years. In Rutherford County, deaths from cardiovascular diseases and suicides decreased between 2002 and 2003, but deaths due to malignant neoplasms, diabetes, and motor vehicle accidents increased during the same time period. **Table 4** presents death rates for the county and state for 2001–2003. **Figure 6** presents Rutherford County deaths, by cause of death, in 2003. Heart disease and cancers accounted for half of all deaths in Rutherford County in 2003, just as they did in 2002 and 2001.

**TABLE 4. Death Rates, Rutherford County and Tennessee, 2001–2003**

Deaths and Causes	Rutherford Co. Rates			Tennessee Rates		
	2001	2002	2003	2001	2002	2003
Death rate per 100,000 population	614.4	623.9	625.3	961.4	976.6	979.8
Deaths from major cardiovascular diseases	241.3	242.8	214.3	368.4	373.2	362.8
Deaths from malignant neoplasms	134.4	138.8	148.0	213.2	216.1	215.7
Deaths from diabetes mellitus	20.4	17.3	18.5	30.4	30.2	31.7
Deaths from motor vehicle accidents	16.7	13.1	19.0	22.7	21.3	22.2
Deaths from suicides	14.0	11.6	9.8	12.4	13.4	13.0

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

**FIGURE 6. Deaths by Cause of Death, Rutherford County, 2003**

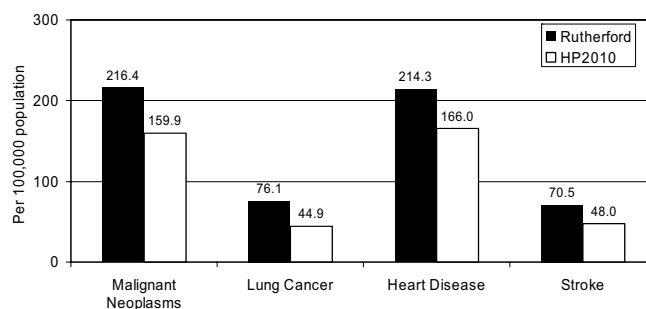


Source: Tennessee Department of Health, Bureau of Health Informatics, Health Statistics and Research; Health Information Tennessee and Statistical Profiling of Tennessee.

Generally, death rates among Rutherford County residents are higher than Healthy People 2010 target rates, although the county death rate for those with diabetes complications is lower than the HP2010 goal. **Figures 7** and **8** show age-adjusted death rates by selected causes per 100,000 population for Rutherford County and compare them with HP2010 target rates.

**FIGURE 7. Age-Adjusted Death Rates by Cause of Death, Rutherford County, 2003, and HP2010 Targets**

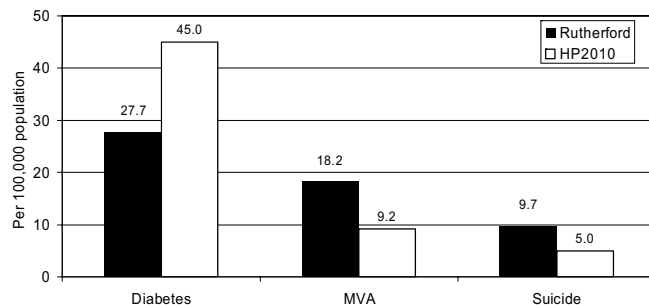
### Malignant Neoplasms, Lung Cancer, Heart Disease, Stroke



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

**FIGURE 8. Age-Adjusted Death Rates by Cause of Death, Rutherford County, 2003, and HP2010 Targets**

### Diabetes, Motor Vehicle Accidents, Suicides



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

## Tennessee and Rutherford County Health Priorities

The Tennessee Health Commissioner has identified six health priorities for the state:

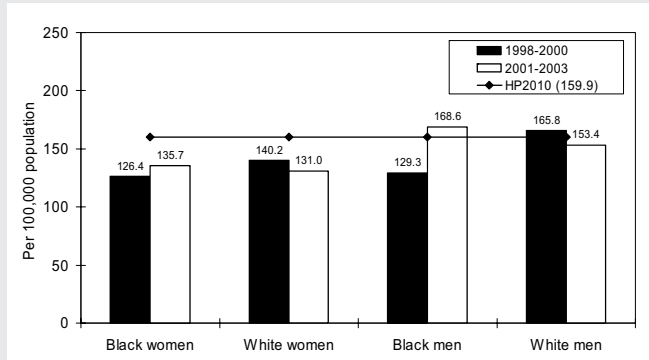
- **Three LifeStart priorities** – Infant Mortality, Adolescent Pregnancy, and Prenatal Care
- **Three LifeStyle priorities** – Cardiovascular Disease, Diabetes, and Obesity

Through a needs assessment, the state Department of Health identified two top health concerns for Rutherford County:

- Cancer rates among black females
- Stroke rates among black males and females

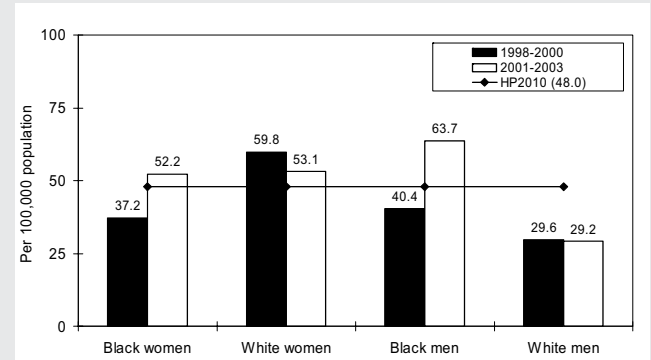
Data indicate that death rates for malignant neoplasms (cancers) are increasing among black residents while decreasing among whites. For 2001–2003, death rates for black men with malignant neoplasms were higher than the HP2010 target rate (**Figure 9**). Death rates for cerebrovascular disease or stroke have gone up considerably for black men and women. Death rates are above the HP2010 goal for all groups except white men (**Figure 10**).

**FIGURE 9. Death Rates for Malignant Neoplasms (Cancers) by Race and Sex, Rutherford County, 1998-2003**



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

**FIGURE 10. Death Rates for Cerebrovascular Disease (Stroke) by Race and Sex, Rutherford County, 1998-2003**



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

## Fast Facts about Rutherford County

- The Chamber of Commerce states that Rutherford County is one of the fastest growing counties in America, with a growth rate of over 63% during the past 12 years. Income levels also have increased; current per capita income is just over \$25,000 per year and median household income is \$50,000 per year.
- According to the National Bureau of Labor Statistics (2005), Rutherford County has the highest percentage of new job growth in the nation. The Chamber of Commerce indicates that the overall unemployment rate hovers between 2% and 4%, well below the national average. However, the Tennessee Commission on Children and Youth cites the Rutherford County youth unemployment rate was 18% in 2003, up from 12% in 2002. The youth unemployment rate for Tennessee in 2003 was 19%.
- Approximately 26% of the county's population is under the age of 18; nearly 8% are age 65 and older.
- 87% of county residents are white, 10% are black or African American, and 3% are of another race or ethnicity.
- Between 1997 and 2003, there were 23 SIDS deaths (Sudden Infant Death Syndrome) in Rutherford County. Only two other counties in the state had more — Davidson and Shelby — both large, metropolitan counties. Hamilton County had as many SIDS deaths as Rutherford (23), and Knox County had 21.
- In 2003, approximately 20% of Rutherford County children were eligible for free or reduced price school lunches, compared with 38% in Tennessee.

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## 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 the following:

**Career Mapping Handbook; Comprehensive Cancer Control Program;  
 Maternal and Child Health Needs Assessment; Prevention through Understanding:  
 Investigating Unexpected Infant Death; Smart Mothers Are Resisting Tobacco  
 (S.M.A.R.T. Moms); Youth-Led Tobacco Use Prevention Project.**

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