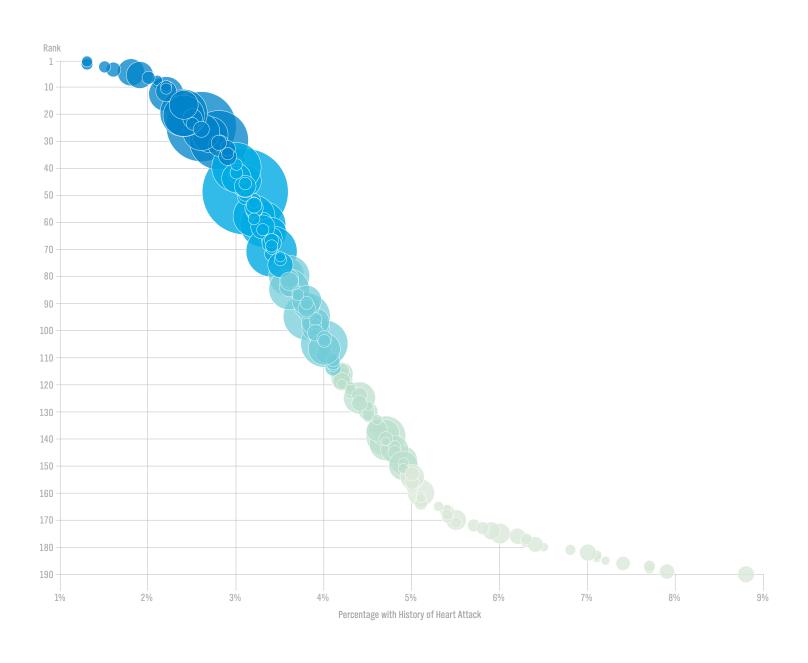
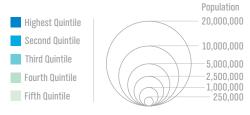


2015 Community Rankings for Incidence of Heart Attack





This graphic plots the ranks of 190 U.S. communities based on residents' lifetime incidence of heart attacks. The size of circle represents a given community's population, while the color represents the ranking quintile.



We are seeing a huge shift in mainstream medicine with more and more clinicians expressing interest in how to help patients use lifestyle behaviors to prevent and even treat many chronic conditions.

Cate Collings,
 M.D., F.A.C.C. M.S.
 Board of Directors, American
 College of Lifestyle Medicine

This report, part of the Gallup-Healthways *State of American Well-Being* series, examines the incidence of residents who have survived a heart attack in 190 communities nationwide and analyzes the impact of heart disease on important health and productivity outcomes.

Boulder and Ann Arbor have the lowest incidence of adults who have experienced a heart attack during their lifetime, each with 1.3%. Both communities have consistently demonstrated high well-being as measured by the Gallup-Healthways Well-Being Index since 2008, as well as low incidence of other chronic conditions such as high blood pressure, high cholesterol, and diabetes. Tallahassee, Provo, Austin, and San Jose are the other top metros; each with less than a 2.0% incidence of heart attack. At the other end of our rankings, eight communities have more than 7% of residents who have experienced a heart attack. These communities typically have low well-being and high rates of obesity, diabetes, high blood pressure, high cholesterol, and depression.

Heart disease places a tremendous toll on individuals, families, and caregivers. Gallup-Healthways research shows that people with heart problems are less active and productive, have lower self-rated job performance, and have more trouble concentrating at work due to physical and mental health issues. Those with recent heart problems miss almost three times more workdays over a four-week period than those who have never been diagnosed; and are more likely to be kept from usual activities due to poor physical or mental health two or more days per month. Those with recent heart problems also have 4.5 times higher hospital admissions and three times higher emergency room visits in the past year than those without heart problems.

Perhaps the most telling statistics relate to health behaviors. Even though many Americans know that unhealthy eating and inactivity contributes to heart disease, many patients who are diagnosed with a heart problem still have difficulty adopting healthier lifestyles. One explanation may be that those with heart problems need additional social support, structure and resources to successfully make sustained lifestyle changes. The field of Lifestyle Medicine is growing rapidly to address these needs, empowering individuals to transform their health and reverse chronic disease.

With a focus on reducing costs and improving outcomes, Medicare and commercial health plans are now covering lifestyle medicine programs, with more providers offering these programs. The ensuing outcomes are impressive—improving health, lowering costs, changing the way providers engage with their patients, and, most importantly, transforming patients' lives.

Top and Bottom 10 Communities for Incidence of Heart Attack

Have you ever been told by a physician or nurse that you have had a heart attack?

To	p 10 Communities	
1.	Boulder, CO	1.3%
2.	Ann Arbor, MI	1.3%
3.	Tallahassee, FL	1.5%
4.	Provo-Orem, UT	1.6%
5.	Austin-Round Rock, TX	1.8%
6.	San Jose-Sunnyvale-Santa Clara, CA	1.9%
7.	Visalia-Porterville, CA	2.0%
8.	San Luis Obispo-Paso Robles-Arroyo Grande, CA	2.1%
9.	Gainesville, FL	2.1%
10.	Green Bay, WI	2.2%

Bottom 10 Communities	
181. Kingsport-Bristol-Bristol, TN-VA	6.8%
182. North Port-Sarasota-Bradenton, FL	7.0%
183. Fort Smith, AR-OK	7.1%
184. Chico, CA	7.1%
185. Lake Havasu City-Kingman, AZ	7.2%
186. Youngstown-Warren-Boardman, OH-PA	7.4%
187. Huntington-Ashland, WV-KY-OH	7.7%
188. Duluth, MN-WI	7.7%
189. Deltona-Daytona Beach-Ormond	
Beach, FL	7.9%
190. Charleston, WV	8.8%

These data clearly show that having heart disease significantly impacts the quality of life, not just the length of it. But it doesn't have to be that way—at least 95% of heart disease is preventable.

And for those who have heart disease, Medicare and most insurance companies are covering our program for reversing heart disease. When individuals make comprehensive lifestyle changes—eat well, stress less, move more, love more—they feel so much better so quickly, they reframe their way of thinking from a fear of dying to the joy of living.

Dean Ornish,
 the founder and Chief Medical
 Officer of Ornish Lifestyle
 Medicine at Healthways,
 a Sharecare Company

Heart Disease: Relationship with Key Productivity, Health Outcome & Well-Being Metrics

Please indicate whether (and when) you have been diagnosed with heart / vascular problems by a healthcare professional.	12 : Problems	: Months oblems	S		
Percent difference is between those diagnosed in past 12 months with heart problems and those never diagnosed.	Diagnosed in Past 12 Months with Heart Problems	Diagnosed Over 12 Months Ago with Heart Problems	Never Diagnosed with Heart Problems	Percent Difference	Point Difference *
Productivity & Healthcare Outcomes	□ ≥	D A	23	<u> </u>	
Active and productive every day (% agree)	51%	48%	58%	-12%	-7
Self-rated high job performance	72%	77%	80%	-9%	-8
Trouble concentrating at work due to health or physical condition	47%	42%	28%	66%	19
Trouble concentrating at work due to depression or anxiety	23%	32%	22%	7%	1
2+ days poor physical health kept you from usual activities in last month	49%	43%	27%	80%	22
2+ days of poor mental health in last month	42%	35%	29%	42%	12
2+ days that poor mental health prevented usual activities in					
last month	46%	43%	34%	36%	12
Days of missed work due to personal illness in past 4 weeks	1.49	.97	.55	172%	n/a
Hospital admissions in past year	.60	.29	.13	352%	n/a
Emergency room visits in past year	.72	.47	.24	203%	n/a
Well-Being Outcomes					
Life evaluation (% thriving)	45%	46%	56%	-20%	-11
Physical well-being (% thriving)	16%	18%	32%	-48%	-16
Physical health near perfect	22%	23%	42%	-48%	-20
Financial well-being (% thriving)	35%	37%	41%	-15%	-6
Worried about money	47%	43%	38%	22%	9
Purpose well-being (% thriving)	34%	36%	44%	-23%	-10
Healthy Behaviors & Support	410/	410/	400/	150/	
Exercise (30+ min / 3+ days in last week)	41%	41%	49%	-15%	-8
Fresh produce consumption (5+ servings / 4+ days in last week)	45%	49%	53%	-15%	-8
Someone encourages me to be healthy	66%	66%	66%	1%	1
Friends and family give positive energy	65%	62%	64%	1%	0
Joined a fitness club or gym in past 3 months	13%	10%	9%	37%	4
Tried structured programs designed to help lose/maintain weight	17%	16%	15%	12%	2
Out to be for all relevant designables in challenges and as an extent of the					

Controls for all relevant demographics including age, gender, race/ethnicity, income, education, region, and marital status. *Data reflects point difference prior to rounding.

Best Practices for Implementing Lifestyle Medicine Programs for Heart Disease

Studies have shown that comprehensive lifestyle changes like those learned in this [Ornish Lifestyle Medicine] program can lead to improved heart function. There are immense benefits for patients who take part in this program, since reversal of symptoms can result in a higher quality of life.

– Dr. Panigrahi, medical director and interventional cardiologist, Sentara Healthcare

The Ornish Lifestyle
Medicine program isn't a
replacement for traditional
cardiac rehabilitation. It is a
complement. Both programs
work synergistically
alongside each other,
improving the lives of
Mississippians.

 Dr. Quintin Dickerson, medical director, St. Dominic Hospital

The Holy Grail for us is a healthy community. With the Ornish Lifestyle Medicine program, we moved quickly and effectively to change the trajectory of health in our community. It was the best way to embrace health in a scientific way and better align with our mission of a healthier community.

– Phil Newbold, CEO, Beacon Health System Below are best practices for health systems and hospitals that are currently or planning to implement lifestyle medicine programs for heart disease. Best-in-class programs have cooperative efforts that engage both administrative and clinical staff, as well as patients, their families, and their support systems.

On the following page, we highlight innovative hospitals, health systems, and a large provider group that have successfully implemented lifestyle medicine programs for heart disease. We also document the results for patient engagement and enrollment, and importantly for health and well-being outcomes.

Educate the Clinical Community



Engage and educate physicians and other clinicians on the science of using lifestyle medicine as treatment and provide materials on programs that support using this approach to make sustained behavior change.

Inform the Patient Community



Reach out to patients on new programs available to them based on their condition and reinforce that the health system / provider practice is supportive of them making these lifestyle changes.

Offer a Spectrum of Programs



Offer various types of programs allowing patients to find the treatment program that is the best fit for them (e.g. offer intensive cardiac rehab programs focusing on lifestyle changes alongside more traditional cardiac rehab programs).

Recognize Clinicians



Publicly promote and recognize physicians who support their patients in making lifestyle changes and highlight them as leaders in care serving to positively impact patients and other physicians.

Let the Patient Speak



Leverage patient testimonials—they resonate more than data and statistics—and people are encouraged that others, like them, have the ability to make and sustain behavior change.

Beacon Health System, South Bend, Indiana

Beacon Health System, led by CEO Phil Newbold, is working to improve the well-being of South Bend, Elkhart and the state of Indiana. Beacon Health System has taken a forward-thinking approach to lifestyle changes and well-being across the community by focusing on the mission to transform and maintain patients' health. Implementing both the Ornish Lifestyle Medicine program and the Blue Zones Project have been instrumental to this mission.

A focus on physician education helped grow both Ornish Lifestyle Medicine and traditional cardiac programs. Beacon Health System created an educational series for physicians and holds open houses for patients wanting to learn about cardiac programs. Physician letters also encourage participation. Over 81% of program referrals come from the medical staff at Beacon Health, highlighting their commitment to help patients transform their lives. Over 200 participants have graduated from the program at Beacon Health since August 2015. Health outcomes include a 6.1% weight loss, a 21.5% drop in total cholesterol, a 60% drop in depression scores and a 56.9% increase in exercise capacity.

St. Dominic Hospital, Jackson, Mississippi

Jackson, Mississippi has some of the highest rates of obesity and high blood pressure in the country. To combat these trends, the team at St. Dominic searched for a program that could help prevent heart disease and treat other co-morbidities. Their leadership team championed the effort and evaluated programs that were scientifically valid with demonstrated health outcomes. Implemented alongside of their traditional cardiac rehab program, the Ornish Lifestyle Medicine program provides St. Dominic with a new cardiac service line.

Physician engagement and education, coupled with patient outreach that includes letters, a regional magazine, and numerous video testimonials from graduates have been very effective in growing enrollment. Over 189 patients have enrolled since early 2015, and the traditional cardiac rehab program has also had a 47% increase in participant volume. Importantly, participants have had an average weight loss of 6.4%, an increase in exercise capacity of 60%, a total cholesterol decrease of 18.2%, and a drop in depression scores of 48.6%.

Sentara Healthcare, Norfolk, Virginia

Sentara Healthcare is a Virginia-based not-for-profit health system offering the Ornish Life-style Medicine program at Sentara Princess Anne Hospital with plans for additional locations. The program is offered to all employees, dependents and the community. The program's medical director and interventional cardiologist, Dr. Gunadhar Panigrahi, was influential in launching the program, after years of researching how lifestyle changes can lead to improved heart function.

Sentara implements best-in-class patient engagement and education, and is focused on continuous quality improvement, chronic disease management, and patient experience. Patient outreach filled their first three cohorts to capacity. Open houses are offered on the benefits of lifestyle medicine and the Ornish program. Sentara's community education includes profiling the program in six episodes of a TV series called Cooking from the Heart. Topics include cardiac disease, the Ornish program elements and heart healthy cooking demos. Results for the program include exceptional outcomes such as a 30% reduction in HbA1c and a 50% reduction in angina frequency.

The Heart Health Center, St. Louis, Missouri

The Heart Health Center team in St. Louis is implementing programs specifically aimed to prevent cardiovascular disease. This team is the first cardiology practice in the U.S. and the first location in Missouri to provide the Ornish Lifestyle Medicine program. These cardiologists are influencing their colleagues to think differently and offer lifestyle medicine solutions. Almost all referrals come from the nine doctors who are part of this physician's group.

Led by Dr. Joseph Craft III, the group built a facility within their practice and began to offer Ornish Lifestyle Medicine in November 2015. Since then, over 100 participants have gone through the program, with outcomes including a 4.6% reduction in weight, a 34% increase in exercise capacity and a 34.2% reduction in depression scores.

Research consistently shows that diet and lifestyle changes are often the most clinically effective, least invasive option to prevent and treat cardiovascular disease.

Blue Shield of California believes that offering members a comprehensive suite of evidence-based lifestyle solutions—from Ornish Lifestyle Medicine to digital well-being and diabetes prevention tools—helps members address virtually all-modifiable risk factors. The clinical results speak for themselves, as do our members, who report improved physical, mental and emotional well-being.

Bryce Williams,
 vice president Wellbeing,
 Blue Shield of California

Ornish Lifestyle Medicine, the leading intensive cardiac rehab program, integrates four equally-weighted elements: nutrition, stress management, exercise and love and support. The comprehensive and supportive design of this program, along with the integrated delivery team, guides and coaches participants along the way, resulting in sustained clinical results such as significant reductions in high blood pressure, high cholesterol, weight, and HbAlc. The program also achieves improvements in overall well-being and averages a greater than 50% reduction in depression scores.

"Today, after just 9 weeks on the program, they've suspended my heart transplant. Nobody's saying that it's out of the question yet, but my heart function has improved drastically in just 2 months, and the doctors no longer believe that a heart transplant is the right course of action for me. I have hope again. It's amazing."

- Dave F., Ornish Lifestyle Medicine Graduate, Beacon Health System

"I was looking for a program to help me make lifestyle changes to help with setbacks I've had over the years, and found it with the support of the Heart Health Center team. I missed out on a lot of things because of heart disease, but I'm on a path now where I've lost 30 pounds and gained more energy. I won't be missing out on things any more. I'd recommend the Ornish Lifestyle Medicine program to anyone."

– John F., Ornish Lifestyle Medicine Graduate, The Heart Health Center

"After some tests, the cardiologist notified me that I would need a serious intervention—probably stents or open heart surgery. But he also provided me with an alternative treatment option, one that would allow me to skip the surgical procedures: the Ornish Lifestyle Medicine program. I didn't want my chest cracked open, so I chose Ornish Lifestyle Medicine."

- Richard S, Ornish Lifestyle Medicine Graduate, Atlantic Health

"Once I started with the program, I began to experience health benefits very quickly. I stopped taking half of my medicines, I lowered my blood pressure, and I began to feel generally healthy. I no longer experience the chest pain and discomfort that used to be endless, and my blood work has improved drastically. Simply put, I feel better and have more energy than I did before; the program has changed my life."

- Cathy L., Ornish Lifestyle Medicine Graduate, Charleston Area Medical Center

"After my surgery, my doctor suggested the Ornish Lifestyle Medicine program, and I got in to their very next cohort. The support system and the roadmap this program gave me is amazing! I have a great community of support from people that can relate to what I was and continue to go through. The program is about getting everybody healthy to continue to live. If you want to live, there's no other option!"

– Adam S., Ornish Lifestyle Medicine Graduate, St. Jude Medical Center

"I am a very bad diabetic. This program has helped with that so much. I would wake up and my sugar would be 389. Now it is way below that. I am now doing things that I haven't been able to do in five years or more. My heart has joy now and before it didn't. I feel AMAZING now. That is the only way I can say it."

- Janet D., Ornish Lifestyle Medicine Graduate, KentuckyOne

Rank		Percent with Heart Attack	High Blood Pressure	High Cholesterol	Diabetes	Depression	Obesity
1.	Boulder, CO	1.3	20.3	18.0	4.9	16.1	16.4
2.	Ann Arbor, MI	1.3	22.0	18.0	7.4	18.3	28.9
3.	Tallahassee, FL	1.5	30.8	19.7	14.3	13.8	31.2
4.	Provo-Orem, UT	1.6	18.8	13.7	6.5	19.7	22.5
5.	Austin-Round Rock, TX	1.8	22.6	20.1	9.3	13.7	24.6
6.	San Jose-Sunnyvale-Santa Clara, CA	1.9	22.8	22.1	9.0	13.3	19.9
7.	Visalia-Porterville, CA	2.0	27.9	17.6	12.1	15.2	33.2
8.	San Luis Obispo-Paso Robles-Arroyo Grande, CA	2.1	26.5	21.2	10.7	18.5	23.9
9.	Gainesville, FL	2.1	24.6	19.7	9.2	15.7	25.2
10.	Green Bay, WI	2.2	24.9	26.6	8.0	16.2	31.0
11.	Kalamazoo-Portage, MI	2.2	25.8	23.1	11.4	21.3	28.9
12.	Salt Lake City, UT	2.2	22.5	19.6	8.3	21.0	24.9
13.	San Diego-Carlsbad, CA	2.2	25.3	22.2	9.8	16.8	22.3
14.	Jackson, MS	2.3	35.0	19.6	11.5	13.9	30.4
15.	Oxnard-Thousand Oaks-Ventura, CA	2.3	23.7	23.4	9.3	16.8	23.9
16.	McAllen-Edinburg-Mission, TX	2.3	26.4	20.3	15.7	15.6	40.2
17.	Sacramento–Roseville–Arden-Arcade, CA	2.4	26.2	21.9	11.2	18.4	25.6
18.	Medford, OR	2.4	35.4	26.5	11.1	21.1	23.3
19.	Amarillo, TX	2.4	24.1	21.7	7.8	17.0	21.5
20.	Washington-Arlington-Alexandria, DC-VA-MD-WV	2.4	26.2	22.7	9.3	13.3	23.6
21.	San Francisco-Oakland-Hayward, CA	2.4	25.8	21.0	8.4	16.6	21.4
22.	Grand Rapids-Wyoming, MI	2.5	26.5	20.6	10.0	17.4	30.5
23.	Santa Cruz-Watsonville, CA	2.5	20.5	24.7	9.4	19.1	19.8
24.	Vallejo-Fairfield, CA	2.5	32.5	22.9	13.3	19.4	31.0
25.	Los Angeles-Long Beach-Anaheim, CA	2.6	24.1	23.0		16.7	22.7
26.	Colorado Springs, CO	2.6	23.1	21.4	8.7	17.6	18.1
27.	Seattle-Tacoma-Bellevue, WA	2.6	24.4	20.7	8.7	19.6	22.9
28.	Minneapolis-St. Paul-Bloomington, MN-WI	2.7	24.1	21.7	8.2	17.8	23.6
29.	Charleston-North Charleston, SC	2.7	29.7	24.9	11.5	15.6	26.0
30.	Chicago-Naperville-Elgin, IL-IN-WI	2.8	27.4	23.4	10.0	13.4	27.8
31.	Springfield, MA	2.8	30.2	21.6	10.2	19.1	28.9
32.	Raleigh, NC	2.8	25.3	23.0	8.5	14.4	28.7
33.	Madison, WI	2.9	23.2	22.3	9.0	19.7	28.1
34.	Greeley, CO	2.9	22.4	21.1	10.2	13.8	29.5
35.	Beaumont-Port Arthur, TX	2.9	36.5	24.8	15.8	17.4	38.2
36.	Bakersfield, CA	2.9	28.3	19.1	13.0	16.4	33.6
37.	Allentown-Bethlehem-Easton, PA-NJ	3.0	32.1	24.8	11.5	17.2	26.2
38.	Fort Collins, CO	3.0	18.7	16.6	6.5	15.3	18.0

2nd Quintile (39 - 76)

3rd Quintile (77 - 114)

4th Quintile (115 - 152)

5th Quintile (153 - 190)

Rank		Percent with Heart Attack	High Blood Pressure	High Cholesterol	Diabetes	Depression	Obesity
39.	Trenton, NJ	3.0	26.6	24.5	9.9	15.3	24.6
40.	Houston-The Woodlands-Sugar Land, TX	3.0	26.9	22.7	11.2	14.0	28.6
41.	Fresno, CA	3.0	27.6	19.9	11.9	17.3	29.6
42.	Santa Maria-Santa Barbara, CA	3.0	21.3	20.5	9.2	15.4	22.9
43.	Ogden-Clearfield, UT	3.0	23.7	20.3	8.6	21.3	28.1
44.	Portland-Vancouver-Hillsboro, OR-WA	3.0	23.2	19.4	9.4	20.9	24.9
45.	Denver-Aurora-Lakewood, CO	3.1	21.9	20.4	8.9	17.5	20.0
46.	Salinas, CA	3.1	21.0	15.8	7.4	13.5	27.6
47.	Richmond, VA	3.1	32.2	24.7	11.8	17.9	27.8
48.	New Haven-Milford, CT	3.1	29.0	25.2	10.1	16.3	28.0
49.	New York-Newark-Jersey City, NY-NJ-PA	3.1	27.5	24.9	10.8	14.1	24.4
50.	Lexington-Fayette, KY	3.1	31.1	23.0	13.6	22.3	31.2
51.	Des Moines-West Des Moines, IA	3.1	25.0	25.0	10.7	15.6	30.1
52.	Huntsville, AL	3.2	32.6	26.6	13.5	12.8	28.2
53.	Rockford, IL	3.2	30.6	23.9	16.0	15.8	33.1
54.	Syracuse, NY	3.2	29.8	24.0	11.0	19.7	29.1
55.	Omaha-Council Bluffs, NE-IA	3.2	25.4	23.4	9.4	16.2	31.4
56.	Greensboro-High Point, NC	3.2	32.8	26.0	12.1	20.2	26.9
57.	Fayetteville-Springdale-Rogers, AR-MO	3.2	29.2	22.4	11.2	18.2	28.5
58.	Boston-Cambridge-Newton, MA-NH	3.2	25.8	24.7	9.2	17.5	22.2
59.	Peoria, IL	3.2	29.4	27.5	12.0	14.4	28.8
60.	Bridgeport-Stamford-Norwalk, CT	3.3	23.8	22.1	8.0	14.5	20.1
61.	Atlanta-Sandy Springs-Roswell, GA	3.3	29.9	23.6	11.6	15.2	26.6
62.	Milwaukee-Waukesha-West Allis, WI	3.3	30.6	24.0	10.1	16.2	27.3
63.	Manchester-Nashua, NH	3.3	22.9	19.4	8.3	15.7	28.0
64.	Charlotte-Concord-Gastonia, NC-SC	3.4	30.5	25.6	11.5	15.9	28.7
65.	Albuquerque, NM	3.4	26.7	20.9	11.7	21.0	23.6
66.	Hartford-West Hartford-East Hartford, CT	3.4	28.2	27.2	11.8	15.9	26.8
67.	Lancaster, PA	3.4	30.4	25.9	13.3	20.6	30.0
68.	Tucson, AZ	3.4	27.0	24.1	11.1	20.5	25.6
69.	Salem, OR	3.4	26.2	18.7	9.7	20.4	29.3
70.	Eugene, OR	3.4	30.6	22.5	10.8	22.7	28.8
71.	Dallas-Fort Worth-Arlington, TX	3.4	27.8	25.1	11.2	16.4	28.9
72.	Spokane-Spokane Valley, WA	3.4	27.2	22.2	8.6	21.1	27.8
73.	Kennewick-Richland, WA	3.5	25.7	26.9	10.3	22.0	33.5
74.	Reading, PA	3.5	30.8	26.1	12.0	18.7	28.2
75.	Binghamton, NY	3.5	30.2	24.1	10.3	11.7	25.8
76.	Virginia Beach-Norfolk-Newport News, VA-NC	3.5	29.4	24.7	12.6	16.0	32.0

2nd Quintile (39 - 76)

3rd Quintile (77 - 114)

4th Quintile (115 - 152)

5th Quintile (153 - 190)

Rank		Percent with Heart Attack	High Blood Pressure	High Cholesterol	Diabetes	Depression	Obesity
77.	Columbia, SC	3.5	34.9	23.6	13.3	17.5	30.9
78.	Jacksonville, FL	3.6	31.3	25.2	13.1	15.5	24.6
79.	Orlando-Kissimmee-Sanford, FL	3.6	28.9	22.8	12.7	18.4	28.4
80.	Phoenix-Mesa-Scottsdale, AZ	3.6	26.4	24.7	11.3	15.9	25.7
81.	Urban Honolulu, HI	3.6	27.1	24.4	12.6	10.2	19.9
82.	Worcester, MA-CT	3.6	28.5	26.8	9.8	17.8	31.0
83.	Cedar Rapids, IA	3.6	25.1	25.0	7.3	20.1	33.7
84.	Rochester, NY	3.6	30.5	25.0	13.1	19.4	29.1
85.	Riverside-San Bernardino-Ontario, CA	3.6	27.3	24.5	12.7	16.7	28.8
86.	Salisbury, MD-DE	3.7	40.1	27.0	13.5	17.5	29.4
87.	Savannah, GA	3.7	33.9	24.5	13.6	16.8	29.0
88.	Roanoke, VA	3.7	36.9	29.5	12.1	20.6	33.6
89.	San Antonio-New Braunfels, TX	3.8	28.7	22.8	13.0	16.6	32.2
90.	Port St. Lucie, FL	3.8	35.9	34.1	15.1	14.2	30.6
91.	Nashville-Davidson-Murfreesboro-Franklin, TN	3.8	29.5	25.2	11.7	18.8	26.2
92.	Baton Rouge, LA	3.8	32.8	25.6	13.1	19.3	32.8
93.	Charlottesville, VA	3.8	27.2	27.0	10.9	14.9	24.3
94.	Akron,OH	3.8	28.1	21.3	10.6	15.9	28.4
95.	Miami-Fort Lauderdale-West Palm Beach, FL	3.8	28.1	25.3	11.0	14.7	23.6
96.	Reno, NV	3.9	29.1	23.0	9.5	19.5	23.6
97.	Kansas City, MO-KS	3.9	30.9	26.3	11.1	17.4	29.0
98.	Montgomery, AL	3.9	31.4	21.9	12.6	12.7	31.1
99.	Cleveland-Elyria, OH	3.9	29.5	24.7	11.3	19.7	28.1
100.	Corpus Christi, TX	3.9		21.3		17.5	39.7
101.	Stockton-Lodi, CA	3.9	28.1	21.5	10.8	18.7	30.7
102.	Portland-South Portland, ME	3.9	28.4	26.1	9.7	18.4	25.8
103.	Toledo, OH	4.0	32.8	24.4	14.9	21.7	30.2
104.	York-Hanover, PA	4.0	28.5	30.1	12.8	18.4	32.7
105.	Philadephia-Camden-Wilmington, PA-NJ-DE-MD	4.0	29.2	23.9	11.2	18.3	27.3
106.	Harrisburg-Carlisle, PA	4.0	32.3	26.3	12.1	19.2	33.6
107.	St. Louis, MO-IL	4.0	30.6	24.2	12.3	17.0	28.9
108.	Erie, PA	4.0	32.4	26.2	14.2	21.7	31.2
109.	Little Rock-N Little Rock-Conway, AR	4.0	33.4	24.1	16.5	20.9	35.7
110.	Lafayette, LA	4.0	35.2	21.4	14.6	22.3	31.5
111.	Santa Rosa, CA	4.1	24.0	19.8	8.0	17.4	21.6
112.	Durham-Chapel Hill, NC	4.1	27.4	17.5	12.9	20.8	22.1
113.	Davenport-Moline-Rock Island, IA-IL	4.1	25.7	22.4	13.6	18.2	28.3
114.	Boise City-Nampa, ID	4.1	28.6	22.3	10.0	22.8	25.8

2nd Quintile (39 - 76)

3rd Quintile (77 - 114)

4th Quintile (115 - 152)

5th Quintile (153 - 190)

Rank		Percent with Heart Attack	High Blood Pressure	High Cholesterol	Diabetes	Depression	Obesity
115.	Augusta-Richmond County, GA-SC	4.2	36.3	27.7	10.9	19.7	35.2
116.	Oklahoma City, OK	4.2	31.8	23.1	12.0	20.4	32.3
117.	Albany-Schenectady-Troy,NY	4.2	31.6	28.5	12.1	17.3	26.7
118.	New Orleans-Metairie, LA	4.2	34.6	23.6	13.7	19.9	29.4
119.	Greenville-Anderson-Mauldin, SC	4.2	32.7	25.9	12.1	19.5	28.3
120.	Clarksville, TN-KY	4.2	35.8	26.1	14.4	15.4	29.8
121.	Lincoln, NE	4.3	22.2	24.6	8.5	17.5	26.6
122.	Spartanburg, SC	4.3	38.1	28.3	14.1	22.9	32.7
123.	Anchorage, AK	4.3	25.1	16.9	7.7	13.2	26.7
124.	Wichita, KS	4.4	27.9	23.0	12.3	17.4	29.5
125.	Baltimore-Columbia-Towson, MD	4.4	32.5	26.0	12.5	18.2	29.2
126.	Springfield, MO	4.4	29.0	22.9	12.4	20.4	33.6
127.	Winston-Salem, NC	4.4	33.7	27.7	13.4	19.5	28.0
128.	Lynchburg, VA	4.5	30.8	30.3	12.4	17.1	28.3
129.	Flint, MI	4.5	36.8	25.4	16.3	22.7	35.2
130.	Tulsa, OK	4.5	34.9	24.0	13.7	20.9	32.8
131.	Fort Wayne, IN	4.5	30.8	24.9	11.5	16.0	32.1
132.	Evansville, IN-KY	4.5	35.0	25.0	12.9	24.7	29.9
133.	Wilmington, NC	4.6	31.6	25.7	11.9	12.1	25.4
134.	Bremerton-Silverdale, WA	4.6	30.2	29.9	12.7	22.3	31.0
135.	Bellingham, WA	4.6	26.8	26.8	6.1	17.6	24.5
136.	El Paso, TX	4.6	26.9	18.6	13.2	17.7	26.6
137.	Louisville-Jefferson County, KY-IN	4.6	34.6	28.4	12.4	21.6	30.2
138.	Columbus, OH	4.7	30.1	24.8	13.7	20.5	30.6
139.	Detroit-Warren-Dearborn, MI	4.7	31.7	25.0	12.1	17.8	30.8
140.	Modesto, CA	4.7	31.6	22.7	13.7	19.7	31.9
141.	Daphne-Fairhope-Foley, AL	4.7	30.1	25.3	13.5	15.1	26.5
142.	Tampa-St. Petersburg-Clearwater, FL	4.7	32.4	27.8	12.5	17.1	28.3
143.	Mobile, AL	4.8	35.3	30.7	17.7	16.2	35.7
144.	Las Vegas-Henderson-Paradise, NV	4.8	28.3	22.1	11.0	15.9	26.0
145.	Pensacola-Ferry Pass-Brent, FL	4.8	35.4	26.2	14.3	21.3	28.4
146.	Dayton, OH	4.8	33.4	27.1	13.1	18.1	32.7
147.	Asheville, NC	4.8	31.4	28.5	10.6	19.1	24.1
148.	Cincinnati, OH-KY-IN	4.9	33.4	26.4	12.3	20.1	29.7
149.	Utica-Rome, NY	4.9	31.7	25.8	13.1	16.5	26.8
150.	Pittsburgh, PA	4.9	30.7	25.7	11.4	17.4	28.1
151.	Olympia, WA	4.9	28.4	22.1	12.0	21.3	26.4
152.	Gulfport-Biloxi-Pascagoula, MS	5.0	42.2	26.4	13.3	22.6	34.6

2nd Quintile (39 - 76)

3rd Quintile (77 - 114)

4th Quintile (115 - 152)

5th Quintile (153 - 190)

¥		Percent with Heart Attack	High Blood Pressure	High Cholesterol	Diabetes	Depression	Obesity
Rank							
153.	Scranton-Wilkes-Barre-Hazleton, PA	5.0	36.2	26.8	12.0	18.5	29.1
154.	Providence-Warwick, RI-MA	5.0	32.9	28.6	9.6	20.9	30.5
155.	Memphis, TN-MS-AR	5.0	37.1	26.5	13.7	16.2	34.3
156.	Palm Bay-Melbourne-Titusville, FL	5.0	35.1	31.1	13.0	19.5	24.5
157.	Lansing-East Lansing, MI	5.0	28.2	21.9	10.4	17.7	26.8
158.	Fayetteville, NC	5.0	33.7	25.9	12.3	21.6	27.4
159.	Crestview-Fort Walton Beach-Destin, FL	5.0	31.3	28.3	14.2	20.7	30.2
160.	Indianapolis-Carmel-Anderson, IN	5.1	32.5	26.9	13.2	21.0	31.0
161.	Barnstable Town, MA	5.1	32.4	26.2	8.7	20.0	23.6
162.	Topeka, KS	5.1	33.0	27.0	12.2	19.9	33.5
163.	Canton-Massillon, OH	5.1	33.0	25.4	12.0	15.9	32.5
164.	Killeen-Temple, TX	5.1	27.3	21.7	10.8	21.7	33.9
165.	Norwich-New London, CT	5.3	30.5	26.0	8.3	23.4	30.0
166.	Prescott, AZ	5.4	31.5	26.8	9.5	20.1	25.6
167.	Chattanooga, TN-GA	5.4	36.3	24.5	14.4	22.1	24.6
168.	South Bend-Mishawaka, IN-MI	5.4	28.7	23.4	15.3	18.6	26.2
169.	Naples-Immokalee-Marco Island, FL	5.4	29.1	29.5	11.8	11.5	22.1
170.	Birmingham-Hoover, AL	5.5	36.2	28.4	13.8	20.1	30.3
171.	Columbus, GA-AL	5.5	35.6	23.2	16.4	23.4	32.1
172.	Myrtle Beach-Conway-North Myrtle Beach, SC-NC	5.7	33.7	29.6	13.4	20.1	28.5
173.	Shreveport-Bossier City, LA	5.8	36.9	25.1	13.0	14.4	37.4
174.	Knoxville, TN	5.9	35.3	29.8	14.2	23.3	29.7
175.	Buffalo-Cheektowaga-Niagara Falls, NY	6.0	32.0	29.9	13.3	17.2	28.0
176.	Cape Coral-Fort Myers, FL	6.2	34.1	32.5	10.1	17.5	26.5
177.	Ocala, FL	6.3	37.8	32.8	15.0	21.4	24.6
178.	Hickory-Lenoir-Morganton, NC	6.3	38.8	30.1	16.8	23.4	34.9
179.	Lakeland-Winter Haven, FL	6.4	36.0	27.0	15.3	20.0	33.6
180.	Burlington-South Burlington, VT	6.5	26.1	19.2	9.1	19.8	25.5
181.	Kingsport-Bristol-Bristol, TN-VA	6.8	40.8	32.4	15.1	22.9	31.9
182.	North Port-Sarasota-Bradenton, FL	7.0	32.5	28.9	13.6	16.0	22.3
183.	Fort Smith, AR-OK	7.1	41.4	28.9	14.5	27.0	38.1
184.	Chico, CA	7.1	27.2	19.5	9.9	22.0	36.7
185.	Lake Havasu City-Kingman, AZ	7.2	35.1	29.8	14.9	17.4	25.6
186.	Youngstown-Warren-Boardman, OH-PA	7.4	36.6	33.4	15.1	22.4	35.1
187.	Huntington-Ashland, WV-KY-OH	7.7	37.8	26.9	13.6	27.7	31.8
188.	Duluth, MN-WI	7.7	28.4	24.1	9.6	23.5	29.2
189.	Deltona-Daytona Beach-Ormond Beach, FL	7.9	32.7	30.9	14.4	15.0	29.3
190.	Charleston, WV	8.8	43.5	31.4	17.6	26.8	40.6
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2nd Quintile (39 - 76)

3rd Quintile (77 - 114)

4th Quintile (115 - 152)

5th Quintile (153 - 190)



2015 Community Rankings for WELL-BEING Incidence of Heart Attack

Methodology

The community ranking data in this report are based on a subset of 353,983 telephone interviews with U.S. adults across all 50 states and the District of Columbia, conducted from January 2, 2014 to December 30, 2015. Gallup conducts 500 telephone interviews daily, resulting in a sample that projects to an estimated 95 percent of all U.S. adults. Metropolitan Statistical Areas (MSAs) are based on the U.S. Office of Management and Budget definitions. Only MSAs with at least 300 completed interviews are reported. Gallup conducts interviews in both English and Spanish and to both cellphone and landlines. Visit www.well-beingindex.com/about to learn

Other data presented in this report are from a Gallup Panel web study completed by 18,958 Panel members conducted in 2014-2015 and 16,103 Panel members conducted in 2015-2016. The specific survey field dates are March 26-May 14, 2014; March 2-April 1, 2015; and May 23-June 13, 2016. The Gallup Panel is a longitudinal panel of U.S. adults conducted via the web. The Gallup Panel is not an opt-in panel, and members do not receive incentives for participating.

About Gallup

Gallup delivers forward-thinking research, analytics, and advice to help leaders solve their most pressing problems. Combining more than 75 years of experience with its global reach, Gallup knows more about the attitudes and behaviors of the world's constituents, employees, and customers than any other organization. Gallup consultants help private and public sector organizations boost organic growth through measurement tools, strategic advice, and education.

About Healthways

Healthways is the largest independent global provider of well-being improvement solutions. Dedicated to creating a healthier world one person at a time, the company uses the science of behavior change to produce and measure positive change in well-being for our customers, which include employers, integrated health systems, hospitals, physicians, health plans, communities and government entities. The company serves approximately 68 million people on four continents.

About Sharecare

Sharecare is a health and wellness engagement solution providing people with personalized resources to help them live their healthiest lives. Nearly 41 million people have shared more than 6 billion data points about their health status and habits with Sharecare, which uses that information to create a comprehensive health profile allowing users to access all of their health resources in one place, and dynamically connect to the knowledge, evidence-based programs and health professionals they need. Learn more at www.sharecare.com.

About Ornish Lifestyle Medicine

Based on over three decades of research and peer-reviewed publications, Ornish Lifestyle Medicine brings the only scientifically-proven program to reverse the progression of heart disease to providers and consumers around the country. Covered by Medicare and many commercial insurers, Ornish Lifestyle Medicine leads the industry on superior clinical outcomes and sustained behavior change. For more information go to www.Ornish.com.