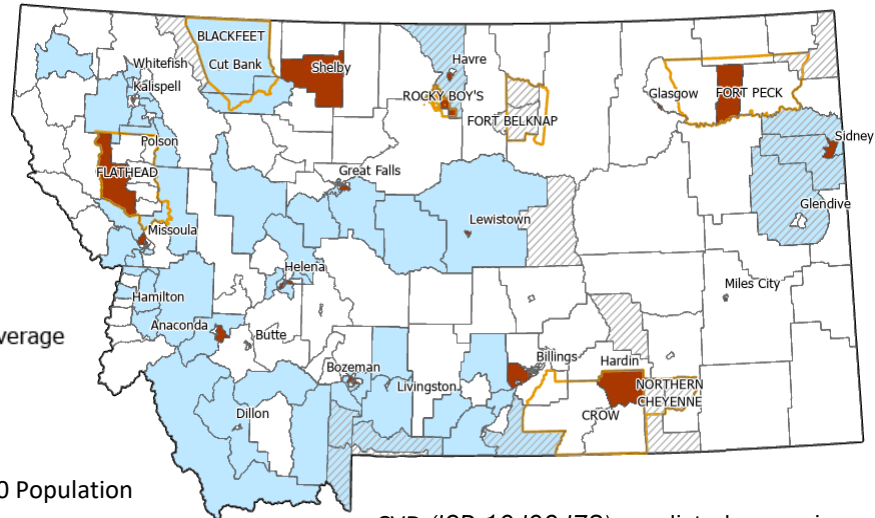


Cardiovascular Disease (CVD) Mortality in Montana, 2015-2019



- Significantly Higher than the State Average
- Not Significantly Different from the State Average
- Significantly Lower Than the State Average
- American Indian Reservations
- Unreliable Census Tract Estimate

2015-2019 State Average: 262 Deaths/100,000 Population

CVD (ICD 10 I00-I78) was listed as a primary cause in **14,077 Montana deaths** from 2015-2019.

Note: Due to the map scale some tracts are not easily visible.

Background:

Using the [Rate Stabilizing Tool](#), the Montana (MT) Cardiovascular Health Program was able to generate reliable census tract estimates of age-adjusted CVD mortality rates. These rates are spatially-smoothed by providing estimates that are [more accurate and precise](#) for areas with small populations. Smoothing uses an algorithm to stabilize rates by borrowing information from neighboring geographic areas. The following key findings from the data include:

- 39 of MT's 271 census tracts had CVD mortality rates that were significantly higher than the state average.
- One census tract within Gallatin county had a rate of 776 CVD deaths per 100,000 population; this is the highest rate calculated and three times higher than the state average rate.
- CVD mortality rates within some American Indian Reservations were very high. Rocky Boy's had a rate of 750 deaths per 100,000 population. For the Blackfeet, Fort Peck, and Flathead reservations rates ranged from 399-654 deaths per 100,000 population. Reliable data was obtained for all reservations except Fort Belknap and Northern Cheyenne.
- 61% of the 39 census tracts with significantly higher rates than the state average are located within or near urban areas like Billings, Bozeman, Great Falls, Helena, and Kalispell.

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Data Source: Montana Department of Public Health and Human Services, Montana Vital Statistics Analysis Unit, Montana Death Certificates, 2015-2019.

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