

Racial, Ethnic, And Economic Disparities In California Medicare Fee-for-Service

Hispanics

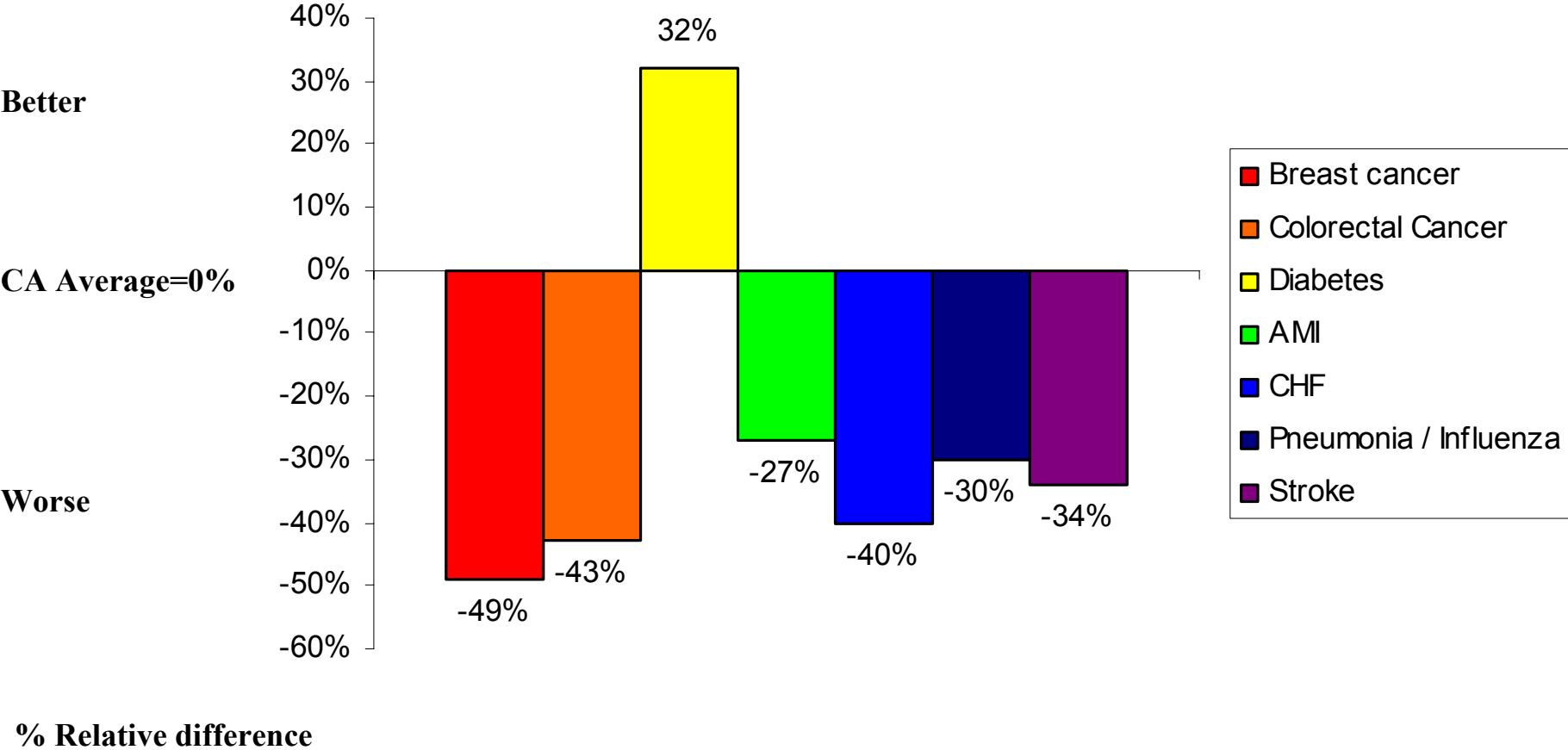
Selected indicators from:

Medicare Fee-For-Service in California:

Disparities in Quality by Place, Race and Economic Status

California HealthCare Foundation and CMRI

Hispanics have much better than average mortality rates on all conditions studied, except for diabetes.



Hispanics hospitalized more frequently than state average for AMI, CHF, and pneumonia; more likely to be readmitted for CHF and pneumonia.

Hospitalization rate/1,000 population, 2000	Hispanics	California	U.S.*
Acute myocardial infarction	9.3	8.8	14.9
Atrial fibrillation	3.6	5.2	n/a
Congestive heart failure	22.2	16.1	22.1
Pneumonia	23.5	18.8	23.7
Stroke	17.3	17.6	20.6

* Source: 1999 National Hospital Discharge Survey, age 65 years and over

Percent with 30-Day Readmission, 2000	Hispanics	California
Acute myocardial infarction	2.0	2.5
Atrial fibrillation	8.0	8.6
Congestive heart failure	6.0	5.8
Pneumonia	3.2	2.8
Stroke	3.8	3.0

Percent with 30-Day Mortality, 2000	Hispanics	California
Acute myocardial infarction	3.3	3.4
Atrial fibrillation	0.1	0.3
Congestive heart failure	0	0.3
Pneumonia	0.5	1.4
Stroke	0.2	0.5

Hispanics have better cancer outcomes than California or U.S. averages.

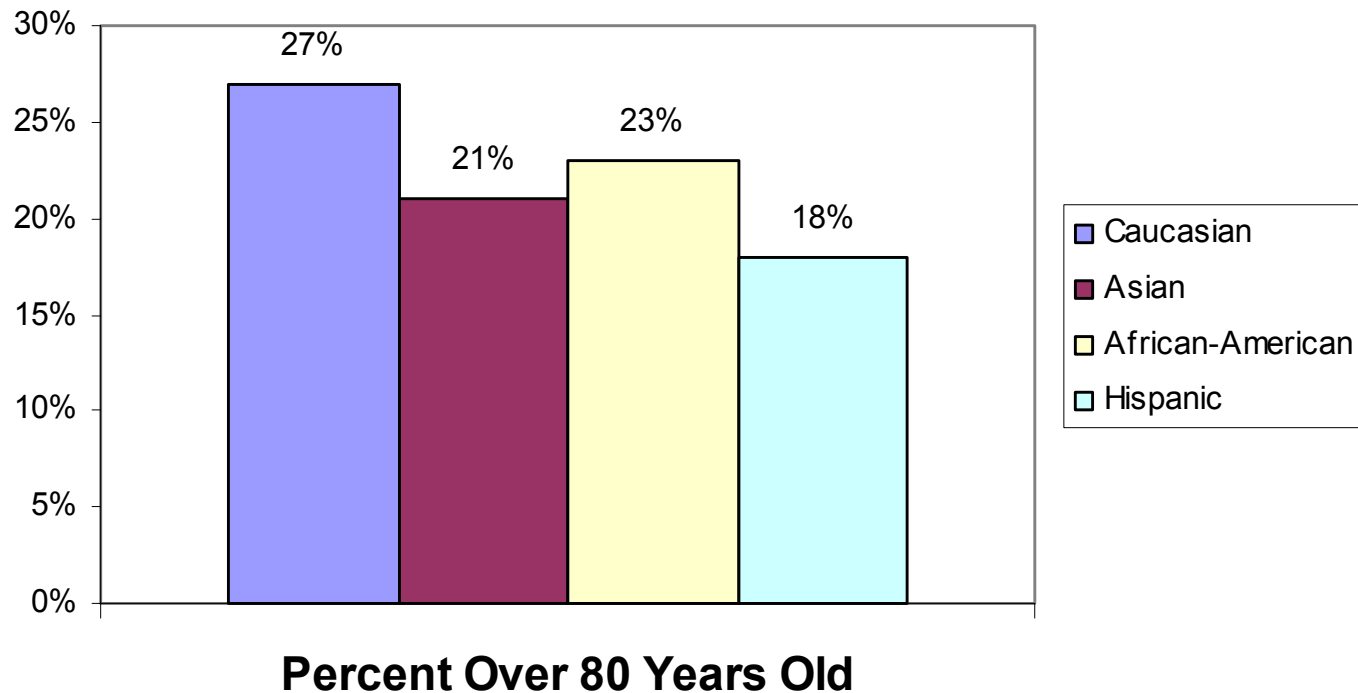
	Breast Cancer			Colorectal Cancer		
	Hispanics	California	U.S.*	Hispanics	California	U.S.*
Cancer Incidence [†] , 1998 (cases per 100,000 population; age 65+)	149	259	n/a	185	306	n/a
% Late stage diagnosis [‡] , 1998 (as % of all diagnoses; age 65+)	1.3%	2.6%	6%	11.5%	11.1%	20%

* Source: SEER Cancer Statistics Review 1973-1999.

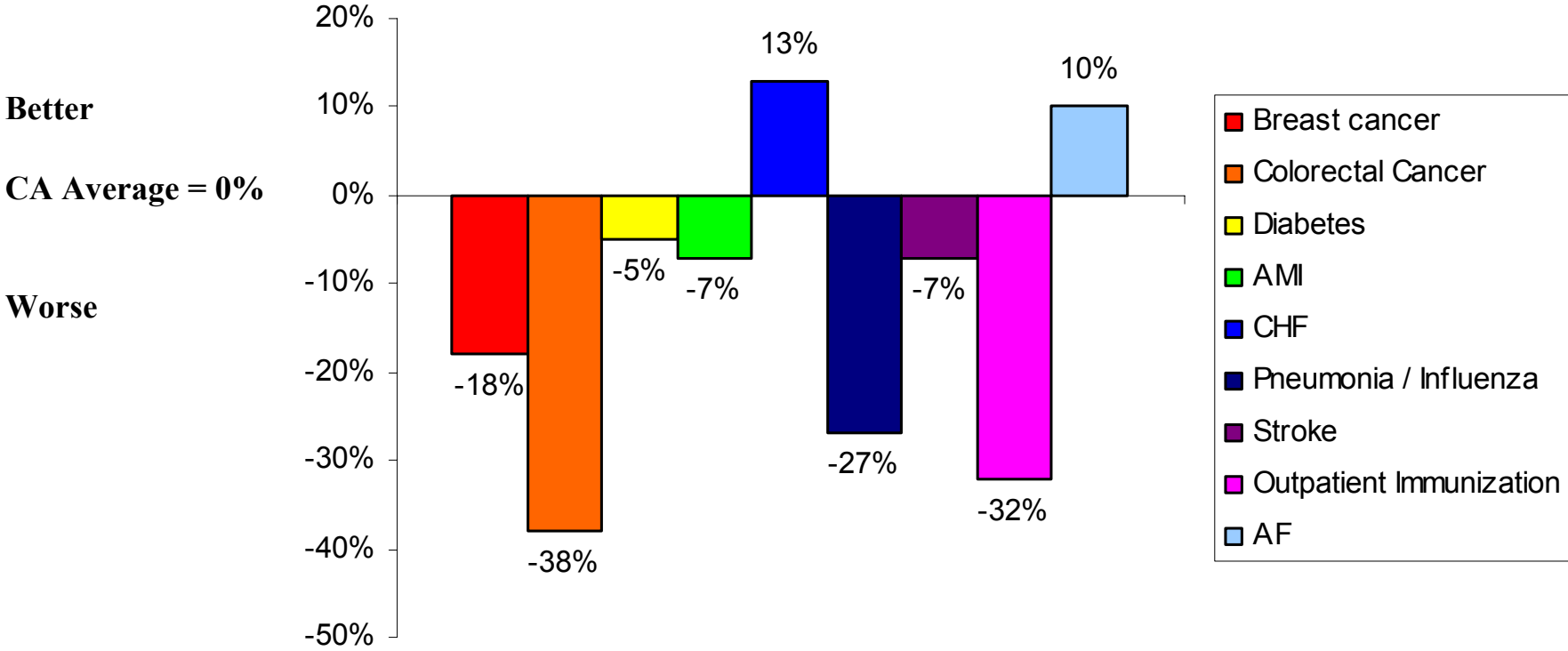
† Number of newly diagnosed cancer cases (average age-adjusted annual incidence over five years - 1994-1998).
California Cancer Registry public use file *Cancer in California: 1988-1998*.

‡ Based on staging criteria published by the American Joint Committee on Cancer. A late stage diagnosis identifies advanced cancer, which has a higher risk of death than earlier stages.

The Hispanic Medicare population is younger than other ethnic groups.



Hispanic beneficiaries do worse than California average on most quality indicators studied.



% Relative Difference

Effect of SES on Hispanic beneficiaries' likelihood of receiving preventive care—generally, but not always, lower SES is associated with lower quality.

SES Measure	SES Status	Breast Cancer Mammography	Colorectal Cancer Screening	Diabetes: Annual A1C test	Diabetes: Biennial eye exam	Diabetes: Biennial lipid	Outpatient Immunization: Influenza Vaccine	Outpatient Immunization: Pneumococcal Vaccine
Dual Eligible	DE	42	14	64	75	67	17	21
	Not	43	13	68	67	70	16	19
Educated Neighborhood	E	39	12	62	76	67	16	20
	Not	43	14	66	73	68	17	21
mpoverished Neighborhood	I	40	13	62	75	67	16	21
	Not	45	14	65	74	68	17	21
Hispanic Neighborhood	H	40	13	62	75	68	16	20
	Not	44	15	69	73	67	18	21
CA	all	52	21	70	72	73	26	28
US	all	56	44	71	69	57	66	46

Note: DE= Dual Eligible, E = undereducated neighborhood, I=impoverished area, H=Hispanic area, Not = Does not reside in lower SES area Values are percentages, not rates

Questions For Further Study

- What accounts for better than average health status among Hispanic beneficiaries, since they received worse than average care on most quality indicators studied?