

2021 Edition — Quality of Care: Chronic Conditions

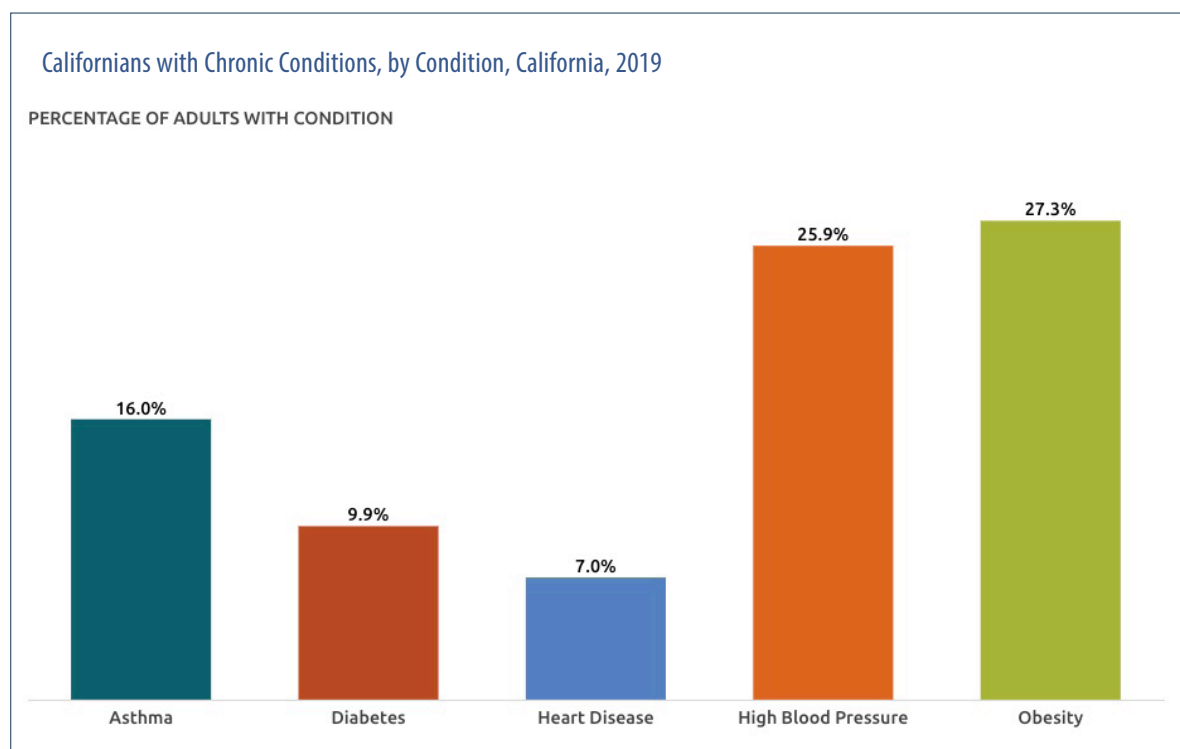
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Over the last few decades, the measurement and reporting of health care quality outcomes has grown significantly. As health care evolves, it is important to continue to monitor and report on the quality of care delivered to patients in California and across the US. This is part of a series of measures CHCF is publishing on the quality of care in the state. Topics range from maternal to end-of-life care, and include measures on behavioral health, chronic conditions, and providers.

This set of quality measures focuses on a range of chronic conditions, including diabetes, cancer, cardiovascular disease, and respiratory disease, and includes data by race/ethnicity, payer, and county.

Many adults in California have been diagnosed with chronic conditions.

Chronic conditions such as diabetes and heart disease were the leading cause of death and disability in the United States. In 2019, obesity and high blood pressure were the most common chronic conditions, affecting more than one in four adults in California

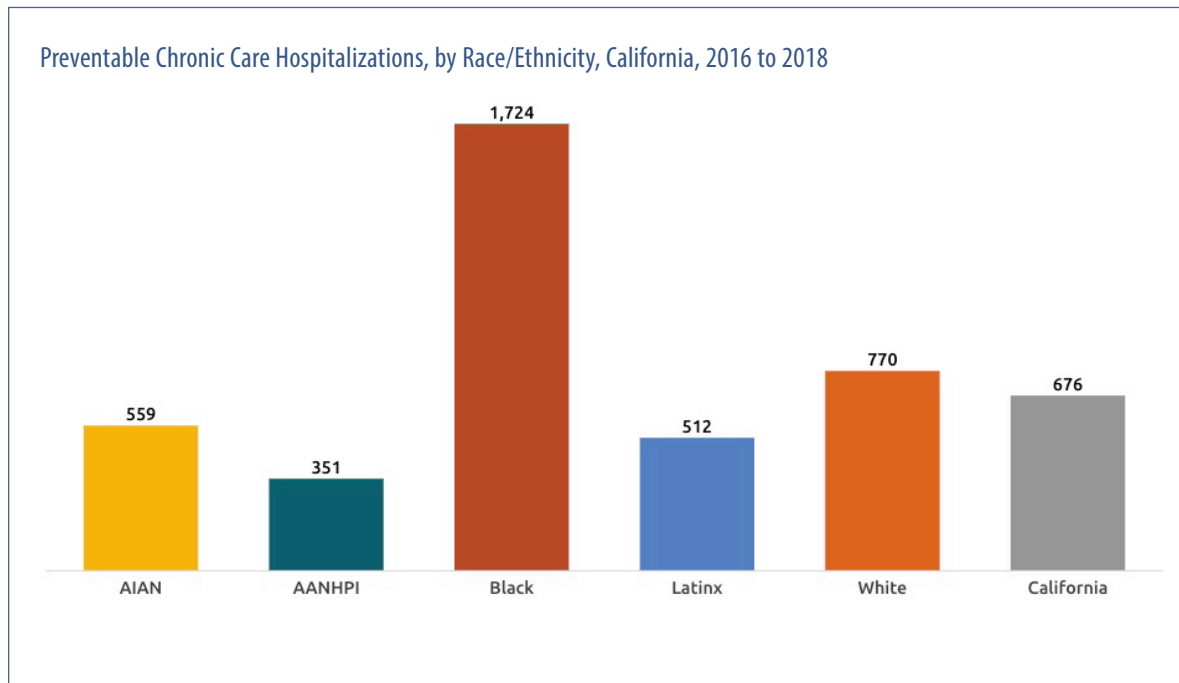


Note: Adults age 18 and older who have ever been told by a doctor that they have condition.

Source: California Health Interview Survey.

Preventable chronic care hospitalizations vary by race/ethnicity.

Based on a composite measure of hospital admission rates for eight chronic care conditions, 700 hospitalizations per 100,000 people in California were potentially preventable through effective chronic care management and access to high-quality primary care. Preventable hospitalizations varied by race/ethnicity from a high of 1,724 for Black adults to a low of 351 for Asian American / Native Hawaiian and Pacific Islander.

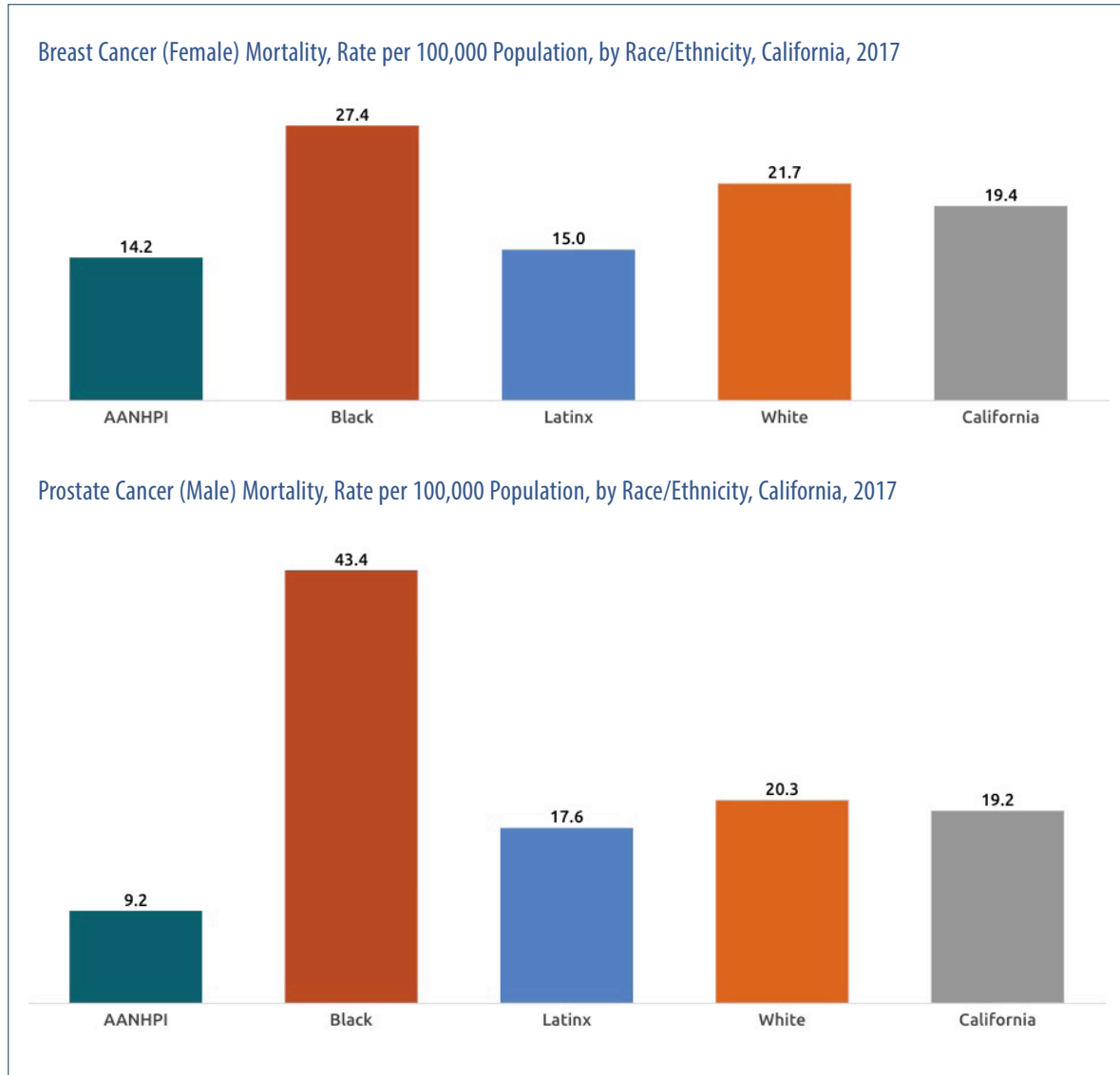


Notes: AIAN is American Indian / Alaska Native; AANHPI is Asian American / Native Hawaiian and Pacific Islander. Source uses *Native American*. Composite measure of adult (age 18+) hospitalization rate (observed) for eight chronic ambulatory care-sensitive conditions: diabetes short-term complications, diabetes long-term complications, chronic obstructive pulmonary disease (COPD or asthma in older adults [age 40+]), hypertension (high blood pressure), heart failure, uncontrolled diabetes, asthma in younger adults (age 18–39), and lower-extremity amputation among patients with diabetes.

Source: RaceCounts.

Black Californians have higher mortality rates for four leading cancers compared with other races/ethnicities.

Black Californians had higher mortality rates for breast, prostate, lung, and colorectal cancer than other races/ethnicities in 2017. The largest disparity was with prostate cancer; the prostate cancer mortality rate for Black men was two times higher than the overall rate in California.



Notes: Age-adjusted rates. Excludes in situ cancers. AANHPI is Asian American / Native Hawaiian and Pacific Islander. Source uses Hispanic.

Source: California Cancer Registry.



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Source: California Cancer Registry.

The companion Excel data file, which provides these data and more, is available for download at www.chcf.org/publication/2021-edition-quality-care-chronic-conditions. These materials are part of CHCF's California Health Care Almanac, an online clearinghouse for key data and analyses describing the state's health care landscape. See our entire collection of current and past editions of Quality of Care at www.chcf.org/collection/quality-care-almanac.