

2023 Edition — Quality of Care: Providers

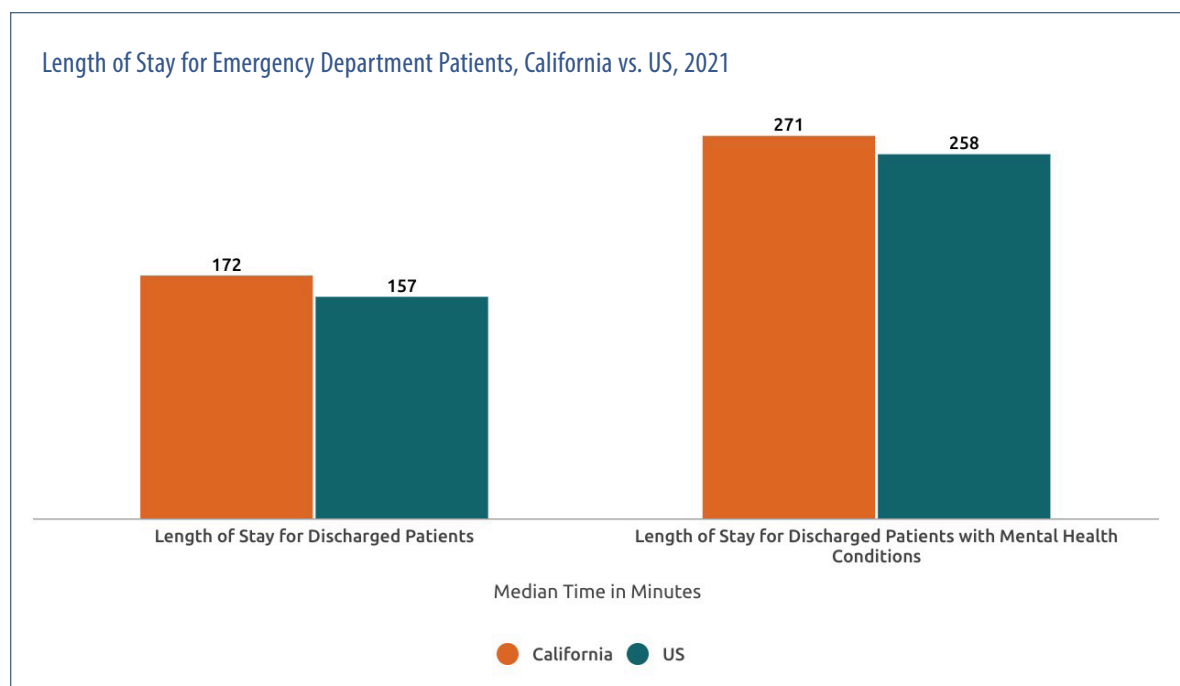
Jen Joynt, Independent Health Care Consultant

Over the last few decades, there has been significant growth in the measurement and reporting of health care quality outcomes. 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 publishes on the quality of care in our 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 providers, including ambulatory surgery centers, emergency departments, inpatient hospitals, nursing homes, home health care, and hospice.

Patients with mental health conditions spent much more time in California’s emergency departments than other patients.

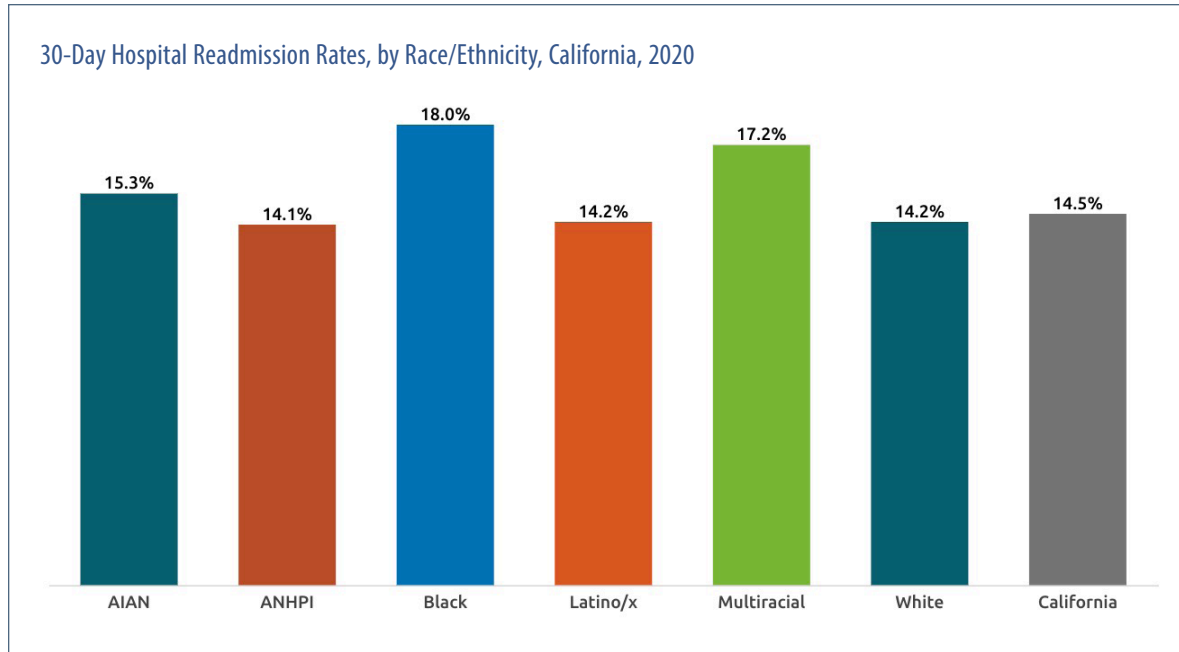
Patients with mental health conditions visiting California emergency departments (EDs) in 2021 spent four and a half hours in the ED before being sent home, compared to less than three hours for other patients. In both cases, California patients spent more time in the ED than patients nationwide.



Source: “Timely and Effective Care,” Centers for Medicare & Medicaid Services, archived data, October 26, 2022.

Black and multiracial Californians had higher 30-day hospital readmission rates than Californians of other races/ethnicities.

In 2020, California’s rate of unplanned hospital readmissions within 30 days exceeded the Let’s Get Healthy California target of 11.9%. Black Californians (18.0%) and multiracial Californians (17.2%) had higher readmission rates than Californians of other races/ethnicities.

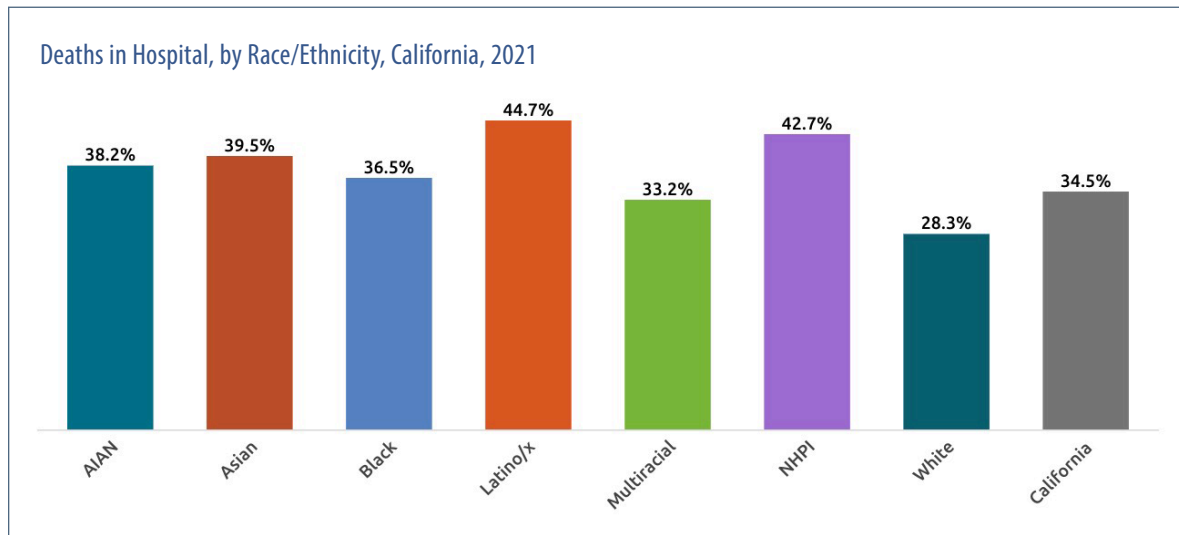


Notes: *AIAN* is American Indian and Alaska Native; *ANHPI* is Asian, Native Hawaiian, and Pacific Islander. Source uses *African American*, *Hispanic*, and *Native American*.

Source: All-Cause Unplanned 30-Day Hospital Readmission Rate, CalHHS, last updated Jan 23, 2023.

About one in three Californian deaths occurred in the hospital in 2021.

While a recent survey of Californians¹ found that only 15% would prefer to die in the hospital, 35% of Californian deaths occurred in the hospital in 2021. Deaths in the hospital varied by race/ethnicity, with at least four in 10 Asian, Latino/x, and Native Hawaiian and Pacific Islander Californians dying in the hospital.



Note: AIAN is American Indian and Alaska Native. ANHPI is Asian, Native Hawaiian, and Pacific Islander. Source uses *Black or African American, Hispanic or Latino, and More than 1 race*.

Source: "Underlying Cause of Death," WONDER database, CDC.

The companion Excel data file, which provides these data and more, is available for download at www.chcf.org/publication/quality-care-providers-2023-edition. 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.

1. Help Wanted: Californians' Views and Experiences of Serious Illness and End-of-Life Care, California Health Care Foundation, 2019.