



CHCF 2023 Environmental Indicators Dashboard

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CHCF Board of Directors Meeting
June 15, 2023

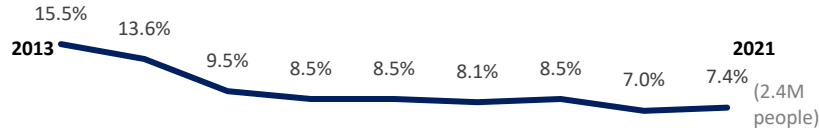
CHCF's Environmental Indicators Dashboard: Sixth Publication

- The Environmental Indicators Dashboard was designed at the request of the CHCF Board of Directors to orient Board members to the California health care environment by providing data on a set of statewide key performance indicators that pertain to our work. We originally shared this dashboard with the Board of Directors in June 2018; this is its sixth publication.
- This dashboard is a 30,000-foot view of key statistics relevant to CHCF's mission and work. These metrics focus on entrenched, systemic challenges. The data presented are not a direct measure of CHCF's impact as we alone cannot move these indicators, however, they do highlight where we are seeing progress and where there remains a need for CHCF's sustained, systemic efforts.
- Measure selection and dashboard design guiding principles include:
 - Align with CHCF goals and incorporate a strategic focus on Medi-Cal, Californians with low incomes, listening to consumers, and equity
 - Represent major quality domains (e.g., access, patient experience, clinical outcomes, equity, and cost)
- CHCF funds several of the data sources cited in the environmental indicators dashboard, including the California Health Interview Survey (CHIS) and the CHCF Health Policy Survey.
- Most of the measures include data from 2020 and later and therefore begin to reflect the impact of COVID-19.
- We are presenting the previous year's data for two measures — Preventable Hospitalizations and Medi-Cal Quality Performance — as these are the most recent data available from those datasets.

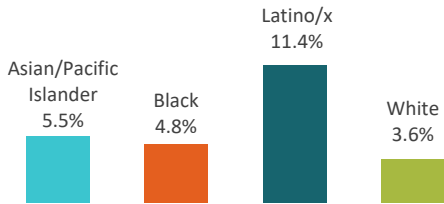
California Health Care System Environmental Indicators 2023 Edition

Access to Coverage

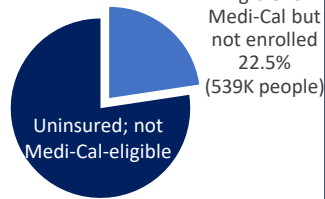
Uninsured, 2013–2021



Uninsured, by Race/Ethnicity, 2021



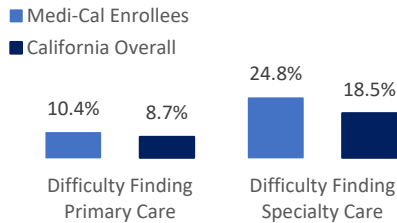
Medi-Cal Eligibility Among Uninsured, 2021



Source: California Health Interview Survey (CHIS)

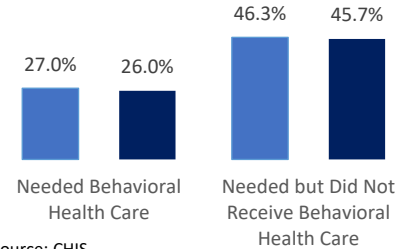
Access to Care

Difficulty Finding Care, 2019–2021



Source: CHIS

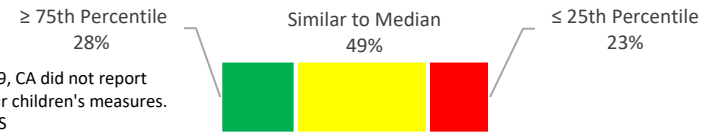
Needed Behavioral Health Care, 2019–2021



Source: CHIS

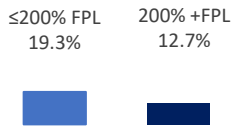
Medi-Cal Quality Performance, 2020

California Compared to Nation on CMS Core Measures



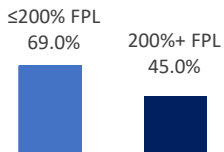
Affordability

People with High Health Care Cost Burden,* 2021



*Spend more than 10% of income on health care
Source: Current Population Survey (SHADAC)

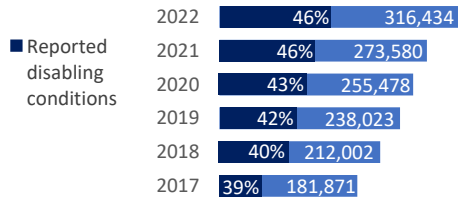
People Who Postponed or Skipped Care Due to Cost, 2021



Source: [CHCF Health Policy Survey](#)

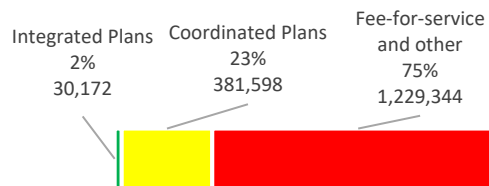
People-Centered Care

People Experiencing Homelessness, 2017–2022



Source: [California HDIS](#)

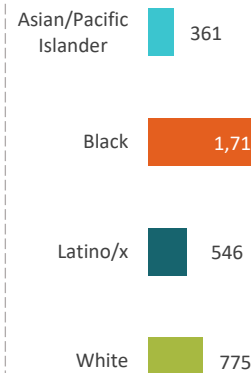
Older Adults w/ Complex Needs: Dually Eligible Californians by Medicare Delivery Model, 2023



Source: DHCS, CMS

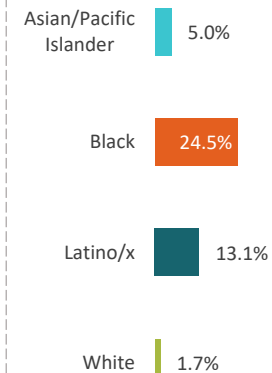
Differences by Race/Ethnicity

Preventable Hospitalizations per 100,000, 2017–2019



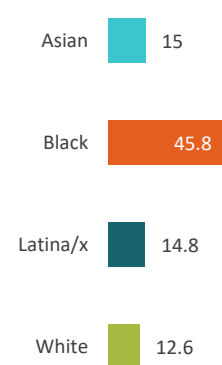
Source: HCAL via [racecounts.org](#)

Unfair Treatment Getting Medical Care Due to Race or Ethnicity, 2021



Source: CHIS

Pregnancy-Related Deaths per 100,000 Live Births, 2018–2020



Source: [California Department of Public Health](#)

Key Takeaways

- Important health care quality disparities by race and ethnicity:
 - Black Californians experience substantially more preventable hospitalizations than any other group (two times higher than White, three times higher than Latino/x, and almost five times higher than Asian/Pacific Islander).
 - The pregnancy-related mortality rate for Black birthing people is three times higher than the rate for other races/ethnicities.
 - Latino/x Californians are disproportionately uninsured.
- California's overall uninsured rate has leveled off after Affordable Care Act implementation. Nearly a quarter of uninsured Californians are eligible for Medi-Cal. Californians ineligible for public coverage due to immigration status comprise the largest portion of the remaining uninsured.
- Behavioral health care needs are immense and are continuing to increase. More than one in four Medi-Cal enrollees reports needing care, and more than 45% of those who needed care did not receive it.
- Medi-Cal enrollees have more difficulty finding both primary and specialty care than Californians overall. Large gaps in specialty care access persist with nearly one in four Medi-Cal enrollees reporting difficulty accessing specialty care.
- Compared to Medicaid plans nationally, Medi-Cal plans perform similarly or better on almost three-quarters of Centers for Medicare & Medicaid Services (CMS) core quality measures. Medi-Cal plans performed worse than the national average on 12 adult measures, 10 of which were behavioral health measures.
- One in two Californians overall and 7 in 10 Californians with low incomes are delaying or skipping care due to cost.
- The number of Californians experiencing homelessness continues to climb, and 46% of those experiencing homelessness also report a disabling condition.
- Only 2% of people dually enrolled in Medi-Cal and Medicare, most of whom are older adults with complex needs, are enrolled in fully integrated plans. With the end of Cal MediConnect, most older adults in those integrated plans have been shifted into coordinated plans that are exclusively aligned with a Medi-Cal managed care plan.
- ***What insights or reactions do you have about the data presented this year? Any surprises or concerns?***