

# Hospital Equity Measures Report

## General Information

Report Type:	Hospital Equity Measures Report
Year:	2024
Hospital Name:	SAN JOSE BEHAVIORAL HEALTH
Facility Type:	Acute Psychiatric Hospital
Hospital HCAI ID:	106434032
Report Period:	1/1/2024 - 12/31/2024
Status:	Complete
Due Date:	11/29/2025
Last Updated:	02/13/2026
Hospital Location with Clean Water and Air:	Y
Hospital Web Address for Equity Report:	<a href="https://www.sanjosebh.com/">https://www.sanjosebh.com/</a>

## Overview

Assembly Bill No. 1204 requires the Department of Health Care Access and Information (HCAI) to develop and administer a Hospital Equity Measures Reporting Program to collect and post summaries of key hospital performance and patient outcome data regarding sociodemographic information, including but not limited to age, sex, race/ethnicity, payor type, language, disability status, and sexual orientation and gender identity.

Hospitals (general acute, children's, and acute psychiatric) and hospital systems are required to annually submit their reports to HCAI. These reports contain summaries of each measure, the top 10 disparities, and the equity plans to address the identified disparities. HCAI is required to maintain a link on the HCAI website that provides access to the content of hospital equity measures reports and equity plans to the public. All submitted hospitals are required to post their reports on their websites, as well.

## Laws and Regulations

For more information on Assembly Bill No. 1204, please visit the following link by copying and pasting the URL into your web browser:

[https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill\\_id=202120220AB1204](https://leginfo.legislature.ca.gov/faces/billTextClient.xhtml?bill_id=202120220AB1204)

## Hospital Equity Measures

### Joint Commission Accreditation

Acute psychiatric hospitals are required to report three structural measures based on the Commission Accreditation's Health Care Disparities Reduction and Patient-Centered Communication Accreditation Standards. For more information on these measures, please visit the following link by copying and pasting the URL into your web browser:

<https://www.jointcommission.org/standards/r3-report/r3-report-issue-36-new-requirements-to-reduce-health-care-disparities/>

The first two structural measures are scored as "yes" or "no"; the third structural measure comprises the percentages of patients by five categories of preferred languages spoken, in addition to one other/unknown language category.

Designate an individual to lead hospital health equity activities (Y = Yes, N = No).

Y

Provide documentation of policy prohibiting discrimination (Y = Yes, N = No).

Y

Number of patients that were asked their preferred language, five defined categories and one other/unknown languages category.

4299

Table 1. Summary of preferred languages reported by patients.

Languages	Number of patients who report preferring language	Total number of patients	Percentage of total patients who report preferring language (%)
English Language	4020	4299	94
Spanish Language	2210	4299	51
Asian Pacific Islander Languages	0	4299	0
Middle Eastern Languages	210	4299	1
American Sign Language	25	4299	1
Other Languages	178	4299	1

## Centers for Medicare & Medicaid Services (CMS) Hospital Commitment to Health Equity Structural (HCHE) Measure

There are five domains that make up the CMS Hospital Commitment to HCHE measures. Each domain is scored as "yes" or "no." In order to score "yes," a acute psychiatric hospital is required to confirm all the domain's attestations. Lack of one or more of the attestations results in a score of "no." For more information on the CMS Hospital Commitment to HCHE measures, please visit the following link by copying and pasting the URL into your web browser:  
<https://data.cms.gov/provider-data/topics/hospitals/health-equity>

### Centers for Medicare & Medicaid Services (CMS) Hospital Commitment to Health Equity Structural (HCHE) Measure Domain 1: Strategic Planning (Yes/No)

- Our hospital strategic plan identifies priority populations who currently experience health disparities.
- Our hospital strategic plan identifies healthcare equity goals and discrete action steps to achieve these goals.
- Our hospital strategic plan outlines specific resources that have been dedicated to achieving our equity goals.
- Our hospital strategic plan describes our approach for engaging key stakeholders, such as community-based organizations.

Y

### CMS HCHE Measure Domain 2: Data Collection (Yes/No)

- Our hospital strategic plan identifies healthcare equity goals and discrete action steps to achieve these goals.
- Our hospital has training for staff in culturally sensitive collection of demographics and/or social determinant of health information.

- Our hospital inputs demographic and/or social determinant of health information collected from patients into structured, interoperable data elements using a certified electronic health record (EHR) technology.

Y

### CMS HCHE Measure Domain 3: Data Analysis (Yes/No)

- Our hospital stratifies key performance indicators by demographic and/or social determinants of health variables to identify equity gaps and includes this information in hospital performance dashboards.

Y

### CMS HCHE Measure Domain 4: Quality Improvement (Yes/No)

- Our hospital participates in local, regional or national quality improvement activities focused on reducing health disparities.

Y

### CMS HCHE Measure Domain 5: Leadership Engagement (Yes/No)

- Our hospital senior leadership, including chief executives and the entire hospital board of trustees, annually reviews our strategic plan for achieving health equity.
- Our hospital senior leadership, including chief executives and the entire hospital board of trustees, annually review key performance indicators stratified by demographic and/or social factors.

Y

## Centers for Medicare & Medicaid Services (CMS) Social Drivers of Health (SDOH)

Acute psychiatric hospitals are required to report on rates of screenings and intervention rates among patients above 18 years old for five health related social needs (HRSN), which are food insecurity, housing instability, transportation problems, utility difficulties, and interpersonal safety. These rates are reported separately as being screened as positive for any of the five HRSNs, positive for each individual HRSN, and the intervention rate for each positively screened HRSN. For more information on the CMS SDOH, please visit the following link by copying and pasting the URL into your web browser:

<https://www.cms.gov/priorities/innovation/key-concepts/social-drivers-health-and-health-related-social-needs>

Number of patients admitted to an inpatient hospital stay who are 18 years or older on the date of admission and are screened for all of the five HRSN

4299

Total number of patients who are admitted to a hospital inpatient stay and who are 18 years or older on the date of admission

4299

Rate of patients admitted for an inpatient hospital stay who are 18 years or older on the date of admission, were screened for an HRSN, and who screened positive for one or more of the HRSNs

100

Table 2. Positive screening rates and intervention rates for the five Health Related Social Needs of the Centers of Medicare & Medicaid Services (CMS) Social Drivers of Health (SDOH).

<b>Social Driver of Health</b>	<b>Number of positive screenings</b>	<b>Rate of positive screenings (%)</b>	<b>Number of positive screenings who received intervention</b>	<b>Rate of positive screenings who received intervention (%)</b>
<b>Food Insecurity</b>	2400	56	2400	56
<b>Housing Instability</b>	730	17	730	17
<b>Transportation Problems</b>	2579	60	2579	60
<b>Utility Difficulties</b>	99	2	99	2
<b>Interpersonal Safety</b>	515	12	515	12

## Core Quality Measures for General Acute Psychiatric Hospitals

There are two quality measures from the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey. For more information on the HCAHPS survey, please visit the following link by copying and pasting the URL into your web browser:

<https://hcahpsonline.org/en/survey-instruments/>

### Patient Recommends Hospital

The first HCAHPS quality measure is the percentage of patients who would recommend the hospital to friends and family. For this measure, acute psychiatric hospitals provide the percentage of patient respondents who responded "probably yes" or "definitely yes" to whether they would recommend the hospital, the percentage of the people who responded to the survey (i.e., the response rate), and the inputs for the percentages. The percentages and inputs are stratified by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. The corresponding HCAHPS question number is 19.

Number of respondents who replied "probably yes" or "definitely yes" to HCAHPS Question 19, "Would you recommend this hospital to your friends and family?"

512

Total number of respondents to HCAHPS Question 19

512

Percentage of total respondents who responded "probably yes" or "definitely yes" to HCAHPS Question 19

100

Total number of people surveyed on HCAHPS Question 19

1872

Response rate, or the percentage of people who responded to HCAHPS Question 19

27

Table 3. Patient recommends hospital by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

Race and/or Ethnicity	Number of "probably yes" or "definitely yes" responses	Total number of responses	Percent of "probably yes" or "definitely yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
American Indian or Alaska Native	suppressed	suppressed	suppressed		
Asian	12	12	100		
Black or African American	142	142	100		
Hispanic or Latino	201	201	100		
Middle Eastern or North African	suppressed	suppressed	suppressed		
Multiracial and/or Multiethnic (two or more races)	suppressed	suppressed	suppressed		
Native Hawaiian or Pacific Islander	0	0			
White	180	180	100		

  

Age	Number of "probably yes" or "definitely yes" responses	Total number of responses	Percent of "probably yes" or "definitely yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
Age < 18	104	104	100	378	28
Age 18 to 34	206	206	100	608	16
Age 35 to 49	84	84	100	357	24
Age 50 to 64	72	72	100	325	22
Age 65 Years and Older	46	46	100	204	23

  

Sex assigned at birth	Number of "probably yes" or "definitely yes" responses	Total number of responses	Percent of "probably yes" or "definitely yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
Female	260	260	100	942	28
Male	252	252	100	930	27
Unknown	0	0	0	0	0

  

Payer Type	Number of "probably yes" or "definitely yes" responses	Total number of responses	Percent of "probably yes" or "definitely yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
Medicare	100	100	100		
Medicaid	238	238	100		
Private	52	52	100		
Self-Pay	0	0	0		
Other	0	0	0		

  

Preferred Language	Number of "probably yes" or "definitely yes" responses	Total number of responses	Percent of "probably yes" or "definitely yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
English Language	194	194	100		
Spanish Language	201	201	100		
Asian Pacific Islander Languages	suppressed	suppressed	suppressed		
Middle Eastern Languages	suppressed	suppressed	suppressed		
American Sign Language	16	16	100		
Other/Unknown Languages	0	0	0		

<b>Disability Status</b>	<b>Number of "probably yes" or "definitely yes" responses</b>	<b>Total number of responses</b>	<b>Percent of "probably yes" or "definitely yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>Does not have a disability</b>	14	25	56		
<b>Has a mobility disability</b>	suppressed	suppressed	suppressed		
<b>Has a cognition disability</b>	suppressed	18	suppressed		
<b>Has a hearing disability</b>	suppressed	suppressed	suppressed		
<b>Has a vision disability</b>	suppressed	suppressed	suppressed		
<b>Has a self-care disability</b>	0	0	0		
<b>Has an independent living disability</b>	0	0	0		

  

<b>Sexual Orientation</b>	<b>Number of "probably yes" or "definitely yes" responses</b>	<b>Total number of responses</b>	<b>Percent of "probably yes" or "definitely yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>Lesbian, gay or homosexual</b>	97	97	100	210	46
<b>Straight or heterosexual</b>	210	210	100	389	54
<b>Bisexual</b>	suppressed	15	suppressed	15	100
<b>Something else</b>	suppressed	suppressed	suppressed		suppressed
<b>Don't know</b>	0	0	0		0
<b>Not disclosed</b>	18	18	100	26	69

  

<b>Gender Identity</b>	<b>Number of "probably yes" or "definitely yes" responses</b>	<b>Total number of responses</b>	<b>Percent of "probably yes" or "definitely yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>Female</b>	240	240	100	840	29
<b>Female-to-male (FTM)/ transgender male/trans man</b>	20	20	100	102	20
<b>Male</b>	200	200	100	878	23
<b>Male-to-female (MTF)/ transgender female/trans</b>	52	52	100	52	100
<b>Non-conforming gender</b>	0	0	0		0
<b>Additional gender category or other</b>	0	0	0		0
<b>Not disclosed</b>	0	0	0		0

## Patient Received Information in Writing

The second HCAHPS quality measure is the percentage of patients who reported receiving information in writing on symptoms and health problems to look out for after leaving the hospital. Acute psychiatric hospitals are required to provide the percentage of patient respondents who responded "yes" to being provided written information, the percentage of the people who responded to the survey (i.e., the response rate), and the inputs for these percentages. These percentages and inputs are stratified by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. The corresponding HCAHPS question number is 17.

Number of respondents who replied "yes" to HCAHPS Question 17, "During this hospital stay, did you get information in writing about what symptoms or health problems to look out for after you left the

hospital?"

1800

Total number of respondents to HCAHPS Question 17

1872

Percentage of respondents who responded "yes" to HCAHPS Question 17

96

Total number of people surveyed on HCAHPS Question 17

1872

Response rate, or the percentage of people who responded to HCAHPS Question 17

100

Table 4. Patient reports receiving information in writing about symptoms or health problems by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

<b>Race and/or Ethnicity</b>	<b>Number of "yes" responses</b>	<b>Total number of responses</b>	<b>Percentage of "yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>American Indian or Alaska Native</b>	45	45	100	45	100
<b>Asian</b>	15	15	100	15	100
<b>Black or African American</b>	460	468	98	468	100
<b>Hispanic or Latino</b>	555	567	98	567	100
<b>Middle Eastern or North African</b>	suppressed	suppressed	suppressed	suppressed	suppressed
<b>Multiracial and/or Multiethnic (two or more races)</b>	120	120	100	120	100
<b>Native Hawaiian or Pacific Islander</b>	suppressed	suppressed	suppressed	suppressed	suppressed
<b>White</b>	593	645	92	645	100

<b>Age</b>	<b>Number of "yes" responses</b>	<b>Total number of responses</b>	<b>Percentage of "yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>Age &lt; 18</b>	842	842	100	842	100
<b>Age 18 to 34</b>	672	672	100	672	100
<b>Age 35 to 49</b>	154	154	100	154	100
<b>Age 50 to 64</b>	165	165	100	165	100
<b>Age 65 Years and Older</b>	39	39	100	39	100

<b>Sex assigned at birth</b>	<b>Number of "yes" responses</b>	<b>Total number of responses</b>	<b>Percentage of "yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>Female</b>	900	900	100	900	100
<b>Male</b>	972	972	100	972	100
<b>Unknown</b>	0	0	0	0	0

<b>Payer Type</b>	<b>Number of "yes" responses</b>	<b>Total number of responses</b>	<b>Percentage of "yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>Medicare</b>	720	720	100	720	100
<b>Medicaid</b>	897	897	100	897	100
<b>Private</b>	255	255	100	255	100
<b>Self-Pay</b>	0	0	0	0	0
<b>Other</b>	0	0	0	0	0

<b>Preferred Language</b>	<b>Number of "yes" responses</b>	<b>Total number of responses</b>	<b>Percentage of "yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>English Language</b>	1112	1112	100	1112	100
<b>Spanish Language</b>	662	662	100	662	100
<b>Asian Pacific Islander Languages</b>	68	68	100	68	100
<b>Middle Eastern Languages</b>	suppressed	suppressed	suppressed	suppressed	suppressed
<b>American Sign</b>	suppressed	suppressed	suppressed	suppressed	suppressed
<b>Other/Unknown Languages</b>	19	19	100	19	100

<b>Disability Status</b>	<b>Number of "yes" responses</b>	<b>Total number of responses</b>	<b>Percentage of "yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>Does not have a disability</b>	1678	1678	100	1678	100
<b>Has a mobility disability</b>	64	64	100	64	100
<b>Has a cognition</b>	30	30	100	30	100
<b>Has a hearing disability</b>	35	35	100	35	100
<b>Has a vision disability</b>	suppressed	suppressed	suppressed	suppressed	suppressed
<b>Has a self-care</b>	20	20	100	20	100
<b>Has an independent living disability</b>	suppressed	suppressed	suppressed	suppressed	suppressed

<b>Sexual Orientation</b>	<b>Number of "yes" responses</b>	<b>Total number of responses</b>	<b>Percentage of "yes" responses (%)</b>	<b>Total number of patients surveyed</b>	<b>Response rate of patients surveyed (%)</b>
<b>Lesbian, gay or homosexual</b>	60	60	100	60	100
<b>Straight or heterosexual</b>	1589	1589	100	1589	100
<b>Bisexual</b>	20	20	100	20	100
<b>Something else</b>	suppressed	suppressed	suppressed	suppressed	suppressed
<b>Don't know</b>	suppressed	suppressed	suppressed	suppressed	suppressed
<b>Not disclosed</b>	suppressed	suppressed	suppressed	suppressed	suppressed



Gender Identity	Number of "yes" responses	Total number of responses	Percentage of "yes" responses (%)	Total number of patients surveyed	Response rate of patients surveyed (%)
Female	878	878	100	878	100
Female-to-male (FTM)/ transgender male/trans man	69	69	100	69	100
Male	902	902	100	902	100
Male-to-female (MTF)/ transgender female/trans woman	20	20	100	20	100
Non-conforming gender	suppressed	suppressed	suppressed	suppressed	suppressed
Additional gender category or other	suppressed	suppressed	suppressed	suppressed	suppressed
Not disclosed	0	0	100	0	100

## Agency for Healthcare Research and Quality (AHRQ) Indicators

Acute psychiatric hospitals are required to report on two indicators from the Agency for Healthcare Research and Quality (AHRQ). For general information about AHRQ indicators, please visit the following link by copying and pasting the URL into your web browser:

<https://qualityindicators.ahrq.gov/>

## Pneumonia Mortality Rate

The Pneumonia Mortality Rate is defined as the rate of in-hospital deaths per 1,000 hospital discharges with a principal diagnosis of pneumonia or a principal diagnosis of sepsis with a secondary diagnosis of pneumonia present on admission for patients ages 18 years and older. Acute psychiatric hospitals report the Pneumonia Mortality Rate by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. The corresponding AHRQ Inpatient Quality Indicator is 20. For more information about this indicator, please visit the following link by copying and pasting the URL into your web browser:

[https://qualityindicators.ahrq.gov/Downloads/Modules/IQI/V2023/TechSpecs/IQI\\_20\\_Pneumonia\\_Mortality\\_Rate.pdf](https://qualityindicators.ahrq.gov/Downloads/Modules/IQI/V2023/TechSpecs/IQI_20_Pneumonia_Mortality_Rate.pdf)

Number of in-hospital deaths with a principal diagnosis of pneumonia or a principal diagnosis of sepsis with a secondary diagnosis of pneumonia present on admission

0

Total number of hospital discharges with a principal diagnosis of pneumonia or a principal diagnosis of sepsis with a secondary diagnosis of pneumonia present on admission

4299

Rate of in-hospital deaths per 1,000 hospital discharges with a principal diagnosis of pneumonia or a principal diagnosis of sepsis with a secondary diagnosis of pneumonia present on admission

0

Table 5. Pneumonia Mortality Rate by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

<b>Race and/or Ethnicity</b>	<b>Number of in-hospital deaths that meet the inclusion/exclusion criteria</b>	<b>Number of hospital discharges that meet the inclusion/exclusion criteria</b>	<b>Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)</b>
<b>American Indian or Alaska Native</b>	0	45	0
<b>Asian</b>	0	118	0
<b>Black or African American</b>	0	477	0
<b>Hispanic or Latino</b>	0	1685	0
<b>Middle Eastern or North African</b>	0	87	0
<b>Multiracial and/or Multiethnic (two or more)</b>	0	500	0
<b>Native Hawaiian or Pacific Islander</b>	0	29	0
<b>White</b>	0	1358	0

<b>Age</b>	<b>Number of in-hospital deaths that meet the inclusion/exclusion criteria</b>	<b>Number of hospital discharges that meet the inclusion/exclusion criteria</b>	<b>Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)</b>
<b>Age &lt; 18</b>	0	842	0
<b>Age 18 to 34</b>	0	2712	0
<b>Age 35 to 49</b>	0	545	0
<b>Age 50 to 64</b>	0	149	0
<b>Age 65 Years and Older</b>	0	51	0

<b>Sex assigned at birth</b>	<b>Number of in-hospital deaths that meet the inclusion/exclusion criteria</b>	<b>Number of hospital discharges that meet the inclusion/exclusion criteria</b>	<b>Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)</b>
<b>Female</b>	0	2048	0
<b>Male</b>	0	2251	0
<b>Unknown</b>			

<b>Payer Type</b>	<b>Number of in-hospital deaths that meet the inclusion/exclusion criteria</b>	<b>Number of hospital discharges that meet the inclusion/exclusion criteria</b>	<b>Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)</b>
<b>Medicare</b>	0	282	0
<b>Medicaid</b>	0	2456	0
<b>Private</b>	0	1561	0
<b>Self-Pay</b>	0	0	0
<b>Other</b>	0	0	0

<b>Preferred Language</b>	<b>Number of in-hospital deaths that meet the inclusion/exclusion criteria</b>	<b>Number of hospital discharges that meet the inclusion/exclusion criteria</b>	<b>Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)</b>
English Language	0	2080	0
Spanish Language	0	1785	0
Asian Pacific Islander Languages	0	89	0
Middle Eastern Languages	0	59	0
American Sign Language	0	45	0
Other/Unknown Languages	0	241	0

<b>Disability Status</b>	<b>Number of in-hospital deaths that meet the inclusion/exclusion criteria</b>	<b>Number of hospital discharges that meet the inclusion/exclusion criteria</b>	<b>Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)</b>
Does not have a disability	0	3809	0
Has a mobility disability	0	289	0
Has a cognition disability	0	89	0
Has a hearing disability	0	72	0
Has a vision disability	0	35	0
Has a self-care disability	0	suppressed	0
Has an independent living disability	0	suppressed	0

<b>Sexual Orientation</b>	<b>Number of in-hospital deaths that meet the inclusion/exclusion criteria</b>	<b>Number of hospital discharges that meet the inclusion/exclusion criteria</b>	<b>Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)</b>
Lesbian, gay or homosexual	0	421	0
Straight or heterosexual	0	3778	0
Bisexual	0	87	0
Something else	0	13	0
Don't know	0	0	0
Not disclosed	0	0	0

<b>Gender Identity</b>	<b>Number of in-hospital deaths that meet the inclusion/exclusion criteria</b>	<b>Number of hospital discharges that meet the inclusion/exclusion criteria</b>	<b>Rate of in-hospital deaths per 1,000 hospital discharges that meet the inclusion/exclusion criteria (%)</b>
Female	0	2000	0
Female-to-male (FTM)/ transgender male/trans man	0	48	0
Male	0	2221	0
Male-to-female (MTF)/ transgender female/trans woman	0	30	0
Non-conforming gender	0	0	0
Additional gender category or other	0	0	0
Not disclosed	0	0	0

## HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate

Acute psychiatric hospitals are required to report several HCAI All-Cause Unplanned 30-Day Hospital Readmission Rates, which are broadly defined as the percentage of hospital-level, unplanned, all-cause readmissions after admission for eligible conditions within 30 days of hospital discharge for patients aged 18 years and older. These rates are first stratified based on any eligible condition, mental health disorders, substance use disorders, co-occurring disorders, and no behavioral health diagnosis. Then, each condition-stratified hospital readmission rate is further stratified by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. For more information on the HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate, please visit the following link by copying and pasting the URL into your web browser:

[https://hcai.ca.gov/wp-content/uploads/2024/10/HCAI-All-Cause-Readmission-Rate-Exclusions\\_ADA.pdf](https://hcai.ca.gov/wp-content/uploads/2024/10/HCAI-All-Cause-Readmission-Rate-Exclusions_ADA.pdf)

## HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate in an Inpatient Psychiatric Facility (IPF)

Number of inpatient admissions to an IPF which occurs within 30 days of the discharge date of an eligible index admission and were 18 years or older at time of admission

255

Total number of patients who were admitted to an IPF and were 18 years or older at time of admission

4299

Rate of hospital-level, unplanned, all-cause readmissions after admission for any eligible condition within 30 days of hospital discharge for patients aged 18 and older

6

Table 6. HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate for any eligible condition by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

Race and/or Ethnicity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
American Indian or Alaska Native	0	45	0
Asian	suppressed	118	suppressed
Black or African American	48	477	10.6
Hispanic or Latino	45	1685	2.7
Middle Eastern or North African	suppressed	87	suppressed
Multiracial and/or Multiethnic (two or more races)	74	500	15
Native Hawaiian or Pacific Islander	0	29	0
White	81	1358	5.9

Age	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Age 18 to 34	89	2712	3.3
Age 35 to 49	147	545	27.0
Age 50 to 64	9	149	6.0
Age 65 Years and Older	10	51	19.6

Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	134	2048	6.5
Male	121	2251	5.4
Unknown	0	0	0

  

Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	98	282	35
Medicaid	125	2456	5.1
Private	32	1561	2.0
Self-Pay	0	0	0
Other	0	0	0

  

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	198	2080	9.5
Spanish Language	55	1785	3.1
Asian Pacific Islander Languages	0	89	0
Middle Eastern Languages	suppressed	59	suppressed
American Sign Language	suppressed	45	suppressed
Other/Unknown Languages	0	241	0

  

Disability Status	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Does not have a disability	210	3809	5.5
Has a mobility disability	suppressed	289	suppressed
Has a cognition disability	18	89	20.2
Has a hearing disability	0	72	0
Has a vision disability	0	35	0
Has a self-care disability	16		
Has an independent living disability	suppressed		suppressed

  

Sexual Orientation	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Lesbian, gay or homosexual	47	421	11.1
Straight or heterosexual	134	3778	3.6
Bisexual	26	87	29.9
Something else	16		
Don't know			
Not disclosed	0		0

Gender Identity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	119	2000	6
Female-to-male (FTM)/transgender male/trans man	15	48	31
Male	98	2221	4
Male-to-female (MTF)/transgender female/trans woman	23	30	77
Non-conforming gender	0	0	0
Additional gender category or other	0	0	0
Not disclosed	0	0	0

## HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate - Mental Health Disorders

Number of inpatient admissions to an IPF which occurs within 30 days of the discharge date for mental health disorders and were 18 years or older at time of admission

255

Total number of patients who were admitted to an IPF and were 18 years or older at time of admission

4299

Rate of hospital-level, unplanned, all-cause readmissions after admission for mental health disorders within 30 days of hospital discharge for patients aged 18 and older

6

Table 7. HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate for mental health disorders by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

Race and/or Ethnicity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
American Indian or Alaska Native	0	45	0
Asian	suppressed	118	suppressed
Black or African American	48	477	10.6
Hispanic or Latino	45	1685	2.7
Middle Eastern or North African	suppressed	87	suppressed
Multiracial and/or Multiethnic (two or more races)	74	500	15
Native Hawaiian or Pacific Islander	0	29	0
White	81	1358	5.9

  

Age	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Age 18 to 34	89	2712	3.3
Age 35 to 49	147	545	27.0
Age 50 to 64	9	149	6.0
Age 65 Years and Older	10	51	19.6

Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	134	2048	6.5
Male	121	2251	5.4
Unknown	0	0	0

  

Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	98	282	35
Medicaid	125	2456	5.1
Private	32	1561	2.0
Self-Pay	0	0	0
Other	0	0	0

  

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	198	2080	9.5
Spanish Language	55	1785	3.1
Asian Pacific Islander Languages	0	89	0
Middle Eastern Languages	suppressed	59	suppressed
American Sign Language	suppressed	45	suppressed
Other/Unknown Languages	0	4299	0

  

Disability Status	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Does not have a disability	210	3809	5
Has a mobility disability	suppressed	289	suppressed
Has a cognition disability	18	89	20.2
Has a hearing disability	0	72	0
Has a vision disability	0	35	0
Has a self-care disability	16	0	1
Has an independent living disability	suppressed	0	suppressed

  

Sexual Orientation	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Lesbian, gay or homosexual	47	421	11.1
Straight or heterosexual	134	3778	3.6
Bisexual	26	87	29.9
Something else	16		
Don't know	32		
Not disclosed	0		0

Gender Identity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	119	2000	6
Female-to-male (FTM)/transgender male/trans man	15	48	31
Male	98	2221	4
Male-to-female (MTF)/transgender female/trans woman	23	30	77
Non-conforming gender	0	0	0
Additional gender category or other	0	0	0
Not disclosed	0	0	0

## HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate - Substance Use Disorders

Number of inpatient admissions to an IPF which occurs within 30 days of the discharge date for substance use disorders and were 18 years or older at time of admission

0

Total number of patients who were admitted to an IPF and were 18 years or older at time of admission

4299

Rate of hospital-level, unplanned, all-cause readmissions after admission for substance use disorders within 30 days of hospital discharge for patients aged 18 and older

0

Table 8. HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate for substance use disorders by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

Race and/or Ethnicity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
American Indian or Alaska Native	0		0
Asian	0		0
Black or African American	0		0
Hispanic or Latino	0		0
Middle Eastern or North African	0		0
Multiracial and/or Multiethnic (two or more races)	0		0
Native Hawaiian or Pacific Islander	0		0
White	0		0

  

Age	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Age 18 to 34	0		0
Age 35 to 49	0		0
Age 50 to 64	0		0
Age 65 Years and Older	0		0



Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	0		0
Male	0		0
Unknown	0		0

  

Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	0		0
Medicaid	0		0
Private	0		0
Self-Pay	0		0
Other	0		0

  

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	0		0
Spanish Language	0		0
Asian Pacific Islander Languages	0		0
Middle Eastern Languages	0		0
American Sign Language	0		0
Other/Unknown Languages	0		0

  

Disability Status	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Does not have a disability	0		0
Has a mobility disability	0		0
Has a cognition disability	0		0
Has a hearing disability	0		0
Has a vision disability	0		0
Has a self-care disability	0		0
Has an independent living disability	0		0

  

Sexual Orientation	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Lesbian, gay or homosexual	0		0
Straight or heterosexual	0		0
Bisexual	0		0
Something else	0		0
Don't know	0		0
Not disclosed	0		0

Gender Identity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	0		0
Female-to-male (FTM)/transgender male/trans man	0		0
Male	0		0
Male-to-female (MTF)/transgender female/trans woman	0		0
Non-conforming gender	0		0
Additional gender category or other	0		0
Not disclosed	0		0

## HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate - Co-occurring disorders

Number of inpatient admissions to an IPF which occurs within 30 days of the discharge date for co-occurring disorders and were 18 years or older at time of admission

193

Total number of patients who were admitted to an IPF and were 18 years or older at time of admission

4299

Rate of hospital-level, unplanned, all-cause readmissions after admission for co-occurring disorders within 30 days of hospital discharge for patients aged 18 and older

4

Table 9. HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate for co-occurring disorders by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

Race and/or Ethnicity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
American Indian or Alaska Native	0	4299	0
Asian	2	4299	0
Black or African American	36	4299	1
Hispanic or Latino	34	4299	1
Middle Eastern or North African	3	4299	0
Multiracial and/or Multiethnic (two or more races)	56	4299	1
Native Hawaiian or Pacific Islander	0	4299	0
White	62	4299	1

  

Age	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Age 18 to 34	67	4299	2
Age 35 to 49	111	4299	3
Age 50 to 64	7	4299	0
Age 65 Years and Older	8	4299	0

Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	101	4299	2
Male	92	4299	2
Unknown	0	4299	0

  

Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	74	4299	2
Medicaid	95	4299	2
Private	24	4299	1
Self-Pay	0	4299	0
Other	0	4299	0

  

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	150	4299	3
Spanish Language	41	4299	1
Asian Pacific Islander Languages	0	4299	0
Middle Eastern Languages	2	4299	0
American Sign Language	0	4299	0
Other/Unknown Languages	0	4299	0

  

Disability Status	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Does not have a disability	159	4299	4
Has a mobility disability	4	4299	0
Has a cognition disability	14	4299	0
Has a hearing disability	0	4299	0
Has a vision disability	0	4299	0
Has a self-care disability	12	4299	0
Has an independent living disability	4	4299	0

  

Sexual Orientation	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Lesbian, gay or homosexual	36	4299	1
Straight or heterosexual	101	4299	2
Bisexual	20	4299	0
Something else	12	4299	0
Don't know	0	4299	1
Not disclosed	0	4299	0

Gender Identity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	90	4299	2
Female-to-male (FTM)/transgender male/trans man	11	4299	0
Male	74	4299	2
Male-to-female (MTF)/transgender female/trans woman	18	4299	0
Non-conforming gender	0	4299	0
Additional gender category or other	0	4299	0
Not disclosed	0	4299	0

## HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate - No Behavioral Health Diagnosis

Number of inpatient admissions to an IPF which occurs within 30 days of the discharge date with no behavioral diagnosis and were 18 years or older at time of admission

0

Total number of patients who were admitted to an IPF and were 18 years or older at time of admission

4299

Rate of hospital-level, unplanned, all-cause readmissions after admission with no behavioral diagnosis within 30 days of hospital discharge for patients aged 18 and older

0

Table 10. HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate with No Behavioral Diagnosis by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

Race and/or Ethnicity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
American Indian or Alaska Native	0		0
Asian	0		0
Black or African American	0		0
Hispanic or Latino	0		0
Middle Eastern or North African	0		0
Multiracial and/or Multiethnic (two or more races)	0		0
Native Hawaiian or Pacific Islander	0		0
White	0		0

  

Age	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Age 18 to 34	0		0
Age 35 to 49	0		0
Age 50 to 64	0		0
Age 65 Years and Older	0		0

Sex assigned at birth	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	0		0
Male	0		0
Unknown	0		0

  

Payer Type	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Medicare	0		0
Medicaid	0		0
Private	0		0
Self-Pay	0		0
Other	0		0

  

Preferred Language	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
English Language	0		0
Spanish Language	0		0
Asian Pacific Islander Languages	0		0
Middle Eastern Languages	0		0
American Sign Language	0		0
Other/Unknown Languages	0		0

  

Disability Status	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Does not have a disability	0		0
Has a mobility disability	0		0
Has a cognition disability	0		0
Has a hearing disability	0		0
Has a vision disability	0		0
Has a self-care disability	0		0
Has an independent living disability	0		0

  

Sexual Orientation	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Lesbian, gay or homosexual	0		0
Straight or heterosexual	0		0
Bisexual	0		0
Something else	0		0
Don't know	0		0
Not disclosed	0		0

Gender Identity	Number of inpatient readmissions	Total number of admitted patients	Readmission rate (%)
Female	0		0
Female-to-male (FTM)/transgender male/trans man	0		0
Male	0		0
Male-to-female (MTF)/transgender female/trans woman	0		0
Non-conforming gender	0		0
Additional gender category or other	0		0
Not disclosed	0		0

## CMS Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program Screening for Metabolic Disorders

Acute psychiatric hospitals are required to report the rate of structured screenings for metabolic disorders among patients with a prescription for one or more routinely scheduled antipsychotic medications. The structured screenings must contain (1) body mass index (BMI), (2) blood pressure, (3) blood glucose or HbA1c, and (4) a lipid panel, and be completed at least once in the 12 months prior to the patient's date of discharge. The rate of patient screenings for metabolic disorders are stratified by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. For more information on the structured screenings for metabolic disorders, please see page 92 of the report by visiting the following link by copying and pasting the URL into your web browser:

[https://www.qualityreportingcenter.com/globalassets/2021/05/iqr/ipfqr\\_programmanualv7.0\\_final508.pdf](https://www.qualityreportingcenter.com/globalassets/2021/05/iqr/ipfqr_programmanualv7.0_final508.pdf)

Number of patients with a prescription for one or more routinely scheduled antipsychotic medications who received a metabolic screening in the 12 months prior to discharge, either prior to or during the index IPF stay

304

Number of discharges from an IPF during the measurement period with a prescription for one or more routinely scheduled antipsychotic medications

409

Rate of patients discharged from an IPF with a prescription for one or more routinely scheduled antipsychotic medications for which a structured metabolic screening was completed in the 12 months prior to discharge, either prior to or during the index IPF stay

74

Table 11. Rate of patients who received structured metabolic screenings with a prescription for a routinely scheduled antipsychotic medication by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

<b>Race and/or Ethnicity</b>	<b>Number of eligible patients who received metabolic screening</b>	<b>Total number of eligible discharges</b>	<b>Rate of eligible patients who received metabolic screening (%)</b>
American Indian or Alaska Native	suppressed	suppressed	suppressed
Asian	suppressed	12	suppressed
Black or African American	62	85	73
Hispanic or Latino	66	90	73
Middle Eastern or North African	suppressed	suppressed	suppressed
Multiracial and/or Multiethnic (two or more races)	58	80	73
Native Hawaiian or Pacific Islander	0	0	0
White	101	132	77

<b>Age</b>	<b>Number of eligible patients who received metabolic screening</b>	<b>Total number of eligible discharges</b>	<b>Rate of eligible patients who received metabolic screening (%)</b>
Age < 18	suppressed	20	suppressed
Age 18 to 34	108	140	77
Age 35 to 49	128	170	75
Age 50 to 64	44	60	73
Age 65 Years and Older	suppressed	19	suppressed

<b>Sex assigned at birth</b>	<b>Number of eligible patients who received metabolic screening</b>	<b>Total number of eligible discharges</b>	<b>Rate of eligible patients who received metabolic screening (%)</b>
Female	162	215	75
Male	142	194	73
Unknown	0	0	0

<b>Payer Type</b>	<b>Number of eligible patients who received metabolic screening</b>	<b>Total number of eligible discharges</b>	<b>Rate of eligible patients who received metabolic screening (%)</b>
Medicare	63	90	70
Medicaid	183	250	73
Private	50	60	83
Self-Pay	suppressed	suppressed	suppressed
Other	suppressed	suppressed	suppressed

<b>Preferred Language</b>	<b>Number of eligible patients who received metabolic screening</b>	<b>Total number of eligible discharges</b>	<b>Rate of eligible patients who received metabolic screening (%)</b>
English Language	240	320	75
Spanish Language	57	80	71
Asian Pacific Islander Languages	suppressed	suppressed	suppressed
Middle Eastern Languages	suppressed	suppressed	75
American Sign Language	suppressed	suppressed	suppressed
Other/Unknown Languages	suppressed	suppressed	suppressed

<b>Disability Status</b>	<b>Number of eligible patients who received metabolic screening</b>	<b>Total number of eligible discharges</b>	<b>Rate of eligible patients who received metabolic screening (%)</b>
Does not have a disability	250	330	76
Has a mobility disability	suppressed	15	suppressed
Has a cognition disability	22	30	73
Has a hearing disability	suppressed	suppressed	suppressed
Has a vision disability	suppressed	suppressed	suppressed
Has a self-care disability	suppressed	15	suppressed
Has an independent living disability	suppressed	suppressed	suppressed

  

<b>Sexual Orientation</b>	<b>Number of eligible patients who received metabolic screening</b>	<b>Total number of eligible discharges</b>	<b>Rate of eligible patients who received metabolic screening (%)</b>
Lesbian, gay or homosexual	62	80	78
Straight or heterosexual	188	250	75
Bisexual	25	35	71
Something else	suppressed	suppressed	suppressed
Don't know	15	24	62
Not disclosed	suppressed	suppressed	suppressed

  

<b>Gender Identity</b>	<b>Number of eligible patients who received metabolic screening</b>	<b>Total number of eligible discharges</b>	<b>Rate of eligible patients who received metabolic screening (%)</b>
Female	150	200	75
Female-to-male (FTM)/transgender male/trans man	15	20	75
Male	127	170	75
Male-to-female (MTF)/transgender female/trans woman	suppressed	15	67
Non-conforming gender	suppressed	suppressed	50
Additional gender category or other	0	suppressed	0
Not disclosed	suppressed	suppressed	suppressed

## The Joint Commission SUB-3: Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge

Acute psychiatric hospitals are required to report the rate of structured screenings for metabolic disorders among patients with a prescription for one or more routinely scheduled antipsychotic medications. The structured screenings must contain (1) body mass index (BMI), (2) blood pressure, (3) blood glucose or HbA1c, and (4) a lipid panel, and be completed at least once in the 12 months prior to the patient's date of discharge. The rate of patient screenings for metabolic disorders are stratified by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. For more information on the structured screenings for metabolic disorders, please see page 92 of the report by visiting the following link by copying and pasting the URL into your web browser:

[https://www.qualityreportingcenter.com/globalassets/2021/05/iqr/ipfqr\\_programmanualv7.0\\_final508.pdf](https://www.qualityreportingcenter.com/globalassets/2021/05/iqr/ipfqr_programmanualv7.0_final508.pdf)



Number of hospitalized inpatients 18 years of age or older with an alcohol or drug use disorder who received or refused a prescription medication for the disorder or a referral for addictions treatment

84

Total number of hospitalized inpatients 18 years of age and older identified with an alcohol or drug use disorder

107

Rate of hospitalized inpatients 18 years of age or older with an alcohol or drug use disorder who received or refused a prescription medication for the disorder or a referral for addictions treatment

79

Table 12. Rate of eligible patients who received or refused prescription or referral for treatment by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

<b>Race and/or Ethnicity</b>	<b>Number of eligible patients who received or refused prescription or referral for treatment</b>	<b>Total number of hospitalized patients at least 18 years or older identified with an alcohol or drug use disorder</b>	<b>Rate of eligible patients who received or refused prescription or referral for treatment (%)</b>
<b>American Indian or Alaska Native</b>	0	0	0
<b>Asian</b>	suppressed	suppressed	suppressed
<b>Black or African American</b>	15	20	75
<b>Hispanic or Latino</b>	14	18	78
<b>Middle Eastern or North African</b>	suppressed	suppressed	suppressed
<b>Multiracial and/or Multiethnic (two or more races)</b>	18	25	72
<b>Native Hawaiian or Pacific Islander</b>	0	0	0
<b>White</b>	34	40	85

  

<b>Age</b>	<b>Number of eligible patients who received or refused prescription or referral for treatment</b>	<b>Total number of hospitalized patients at least 18 years or older identified with an alcohol or drug use disorder</b>	<b>Rate of eligible patients who received or refused prescription or referral for treatment (%)</b>
<b>Age 18 to 34</b>	29	35	83
<b>Age 35 to 49</b>	36	45	80
<b>Age 50 to 64</b>	suppressed	suppressed	suppressed
<b>Age 65 Years and Older</b>	suppressed	suppressed	suppressed

  

<b>Sex assigned at birth</b>	<b>Number of eligible patients who received or refused prescription or referral for treatment</b>	<b>Total number of hospitalized patients at least 18 years or older identified with an alcohol or drug use disorder</b>	<b>Rate of eligible patients who received or refused prescription or referral for treatment (%)</b>
<b>Female</b>	44	56	79
<b>Male</b>	40	51	78
<b>Unknown</b>	0	0	0

<b>Payer Type</b>	<b>Number of eligible patients who received or refused prescription or referral for treatment</b>	<b>Total number of hospitalized patients at least 18 years or older identified with an alcohol or drug use disorder</b>	<b>Rate of eligible patients who received or refused prescription or referral for treatment (%)</b>
<b>Medicare</b>	19	25	76
<b>Medicaid</b>	46	60	77
<b>Private</b>	17	20	85
<b>Self-Pay</b>	suppressed	suppressed	suppressed
<b>Other</b>	suppressed	suppressed	suppressed

<b>Preferred Language</b>	<b>Number of eligible patients who received or refused prescription or referral for treatment</b>	<b>Total number of hospitalized patients at least 18 years or older identified with an alcohol or drug use disorder</b>	<b>Rate of eligible patients who received or refused prescription or referral for treatment (%)</b>
<b>English Language</b>	66	83	80
<b>Spanish Language</b>	16	22	73
<b>Asian Pacific Islander Languages</b>	0	0	0
<b>Middle Eastern Languages</b>	suppressed	suppressed	suppressed
<b>American Sign Language</b>	0	0	0
<b>Other/Unknown Languages</b>	suppressed	suppressed	suppressed

<b>Disability Status</b>	<b>Number of eligible patients who received or refused prescription or referral for treatment</b>	<b>Total number of hospitalized patients at least 18 years or older identified with an alcohol or drug use disorder</b>	<b>Rate of eligible patients who received or refused prescription or referral for treatment (%)</b>
<b>Does not have a disability</b>	69	85	81
<b>Has a mobility disability</b>	suppressed	suppressed	suppressed
<b>Has a cognition disability</b>	suppressed	suppressed	suppressed
<b>Has a hearing disability</b>	suppressed	suppressed	suppressed
<b>Has a vision disability</b>	suppressed	suppressed	suppressed
<b>Has a self-care disability</b>	suppressed	suppressed	suppressed
<b>Has an independent living disability</b>	suppressed	suppressed	suppressed

<b>Sexual Orientation</b>	<b>Number of eligible patients who received or refused prescription or referral for treatment</b>	<b>Total number of hospitalized patients at least 18 years or older identified with an alcohol or drug use disorder</b>	<b>Rate of eligible patients who received or refused prescription or referral for treatment (%)</b>
<b>Lesbian, gay or homosexual</b>	16	20	80
<b>Straight or heterosexual</b>	48	60	80
<b>Bisexual</b>	suppressed	suppressed	suppressed
<b>Something else</b>	suppressed	suppressed	suppressed
<b>Don't know</b>	suppressed	suppressed	suppressed
<b>Not disclosed</b>	0	0	0

Gender Identity	Number of eligible patients who received or refused prescription or referral for treatment	Total number of hospitalized patients at least 18 years or older identified with an alcohol or drug use disorder	Rate of eligible patients who received or refused prescription or referral for treatment (%)
Female	41	52	79
Female-to-male (FTM)/transgender male/trans man	suppressed	suppressed	suppressed
Male	35	45	78
Male-to-female (MTF)/transgender female/trans woman	suppressed	suppressed	suppressed
Non-conforming gender	0	0	0
Additional gender category or other	0	0	0
Not disclosed	0	0	0

## The Joint Commission SUB-3: Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge

Acute psychiatric hospitals are required to report the rate of patients 18 years of age or older with an alcohol or drug use disorder who received or refused a prescription medication for the disorder or a referral for addictions treatment. This rate is stratified by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity. For more information on the rate calculation and inclusion/exclusion criteria, please visit the following link by copying and pasting the URL into your web browser:

<https://manual.jointcommission.org/releases/TJC2024B/MIF0221.html>

Number of hospitalized inpatients 18 years of age or older with an alcohol or drug use disorder who received or refused a prescription medication for the disorder or a referral for addictions treatment

41

Total number of hospitalized inpatients 18 years of age and older identified with an alcohol or drug use disorder

107

Rate of hospitalized inpatients 18 years of age or older with an alcohol or drug use disorder who received or refused a prescription medication for the disorder or a referral for addictions treatment

38

Table 13. Rate of patients who received or refused prescription or referral for treatment by race and/or ethnicity, non-maternal age categories, sex, payer type, preferred language, disability status, sexual orientation, and gender identity.

<b>Race and/or Ethnicity</b>	<b>Number of patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria</b>	<b>Total number of identified with an alcohol or drug use disorder who meet inclusion/exclusion criteria</b>	<b>Rate of eligible patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria (%)</b>
<b>American Indian or Alaska Native</b>	0	suppressed	0
<b>Asian</b>	suppressed	suppressed	suppressed
<b>Black or African American</b>	suppressed	22	suppressed
<b>Hispanic or Latino</b>	suppressed	25	suppressed
<b>Middle Eastern or North</b>	suppressed	suppressed	suppressed
<b>Multiracial and/or Multiethnic (two or more races)</b>	suppressed	18	suppressed
<b>Native Hawaiian or Pacific Islander</b>	0	0	0
<b>White</b>	12	34	35

  

<b>Age</b>	<b>Number of patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria</b>	<b>Total number of identified with an alcohol or drug use disorder who meet inclusion/exclusion criteria</b>	<b>Rate of eligible patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria (%)</b>
<b>Age 18 to 34</b>	15	40	38
<b>Age 35 to 49</b>	17	45	38
<b>Age 50 to 64</b>	suppressed	suppressed	suppressed
<b>Age 65 Years and Older</b>	suppressed	suppressed	suppressed

  

<b>Sex assigned at birth</b>	<b>Number of patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria</b>	<b>Total number of identified with an alcohol or drug use disorder who meet inclusion/exclusion criteria</b>	<b>Rate of eligible patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria (%)</b>
<b>Female</b>	22	58	38
<b>Male</b>	19	49	39
<b>Unknown</b>	0	0	0

  

<b>Payer Type</b>	<b>Number of patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria</b>	<b>Total number of identified with an alcohol or drug use disorder who meet inclusion/exclusion criteria</b>	<b>Rate of eligible patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria (%)</b>
<b>Medicare</b>	suppressed	20	suppressed
<b>Medicaid</b>	26	65	40
<b>Private</b>	suppressed	18	suppressed
<b>Self-Pay</b>	suppressed	suppressed	suppressed
<b>Other</b>	0	suppressed	0

<b>Preferred Language</b>	<b>Number of patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria</b>	<b>Total number of identified with an alcohol or drug use disorder who meet inclusion/exclusion criteria</b>	<b>Rate of eligible patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria (%)</b>
English Language	31	80	39
Spanish Language	suppressed	24	suppressed
Asian Pacific Islander Languages	0	suppressed	0
Middle Eastern Languages	suppressed	suppressed	suppressed
American Sign Language	0	0	0
Other/Unknown Languages	0	0	0

<b>Disability Status</b>	<b>Number of patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria</b>	<b>Total number of identified with an alcohol or drug use disorder who meet inclusion/exclusion criteria</b>	<b>Rate of eligible patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria (%)</b>
Does not have a disability	33	85	39
Has a mobility disability	suppressed	suppressed	suppressed
Has a cognition disability	suppressed	suppressed	suppressed
Has a hearing disability	suppressed	suppressed	suppressed
Has a vision disability	suppressed	suppressed	suppressed
Has a self-care disability	suppressed	suppressed	suppressed
Has an independent living disability	0	suppressed	0

<b>Sexual Orientation</b>	<b>Number of patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria</b>	<b>Total number of identified with an alcohol or drug use disorder who meet inclusion/exclusion criteria</b>	<b>Rate of eligible patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria (%)</b>
Lesbian, gay or homosexual	suppressed	20	suppressed
Straight or heterosexual	24	60	40
Bisexual	suppressed	12	suppressed
Something else	suppressed	suppressed	suppressed
Don't know	suppressed	suppressed	suppressed
Not disclosed	0	0	0

<b>Gender Identity</b>	<b>Number of patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria</b>	<b>Total number of identified with an alcohol or drug use disorder who meet inclusion/exclusion criteria</b>	<b>Rate of eligible patients who received or refused prescription or referral for treatment who meet inclusion/exclusion criteria (%)</b>
<b>Female</b>	20	52	38
<b>Female-to-male (FTM)/ transgender male/trans man</b>	suppressed	suppressed	suppressed
<b>Male</b>	16	42	38
<b>Male-to-female (MTF)/ transgender female/trans woman</b>	suppressed	suppressed	suppressed
<b>Non-conforming gender</b>	0	0	0
<b>Additional gender category or other</b>	0	0	0
<b>Not disclosed</b>	0	0	0

## Health Equity Plan

All acute psychiatric hospitals report a health equity plan that identifies the top 10 disparities and a written plan to address them.

## Top 10 Disparities

Disparities for each hospital equity measure are identified by comparing the rate ratios by stratification groups. Rate ratios are calculated differently for measures with preferred low rates and those with preferred high rates. Rate ratios are calculated after applying the California Health and Human Services Agency's "Data De-Identification Guidelines (DDG)," dated September 23, 2016.

Table 14. Top 10 disparities and their rate ratio values.

Measures	Stratifications	Stratification Group	Stratification Rate	Reference Group	Reference Rate	Rate Ratio
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate in an Inpatient Psychiatric Facility (IPF).	Age (excluding maternal measures)	35 to 49	3.4	50 to 64	0.2	16.3
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate in an Inpatient Psychiatric Facility (IPF).	Preferred Language	English Language	4.6	Spanish Language	1.3	3.6
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate in an Inpatient Psychiatric Facility (IPF).	Disability Status	Does not have disability	5	Mobility disability	0.12	40.7
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate in an Inpatient Psychiatric Facility (IPF).	Sexual Orientation	Straight or heterosexual	3.12	Bisexual	0.60	5.2
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate in an Inpatient Psychiatric Facility (IPF).	Gender Identity	Female	2.77	Female-to-male (FTM)/ transgender male/ trans man	0.35	7.9
CMS Inpatient Psychiatric Facility Quality Reporting (IPFQR) program Screening for Metabolic Disorders.	Age (excluding maternal measures)	65 and older	47	18 to 34	77	0.6
CMS Inpatient Psychiatric Facility Quality Reporting (IPFQR) program Screening for Metabolic Disorders.	Disability Status	Independent Living disability	50	Does not have disability	76	0.7
The Joint Commission SUB-3: Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge and SUB-3a: Alcohol and Other Drug Use Disorder Treatment at	Preferred Language	Spanish Language	38	English Language	39	0.9
HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate in an Inpatient Psychiatric Facility (IPF).	Age (excluding maternal measures)	18 to 34	2.1	50 to 64	0.21	9.9
The Joint Commission SUB-3: Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge and SUB-3a: Alcohol and Other Drug Use Disorder Treatment at	Disability Status	Independent Living disability	0	Does not have disability	39	0.0

#### Plan to address disparities identified in the data

Analysis of stratified performance data identified variation in outcomes across age groups, preferred language, disability status, sexual orientation, and gender identity for select quality measures, including unplanned 30-day readmissions, metabolic screening, and substance use disorder treatment at discharge. While overall performance remained stable, the hospital identified targeted opportunities to strengthen equity-focused care delivery.

To address these disparities, the hospital will implement the following actions:

Enhanced discharge planning and care transitions for higher-risk age groups, including reinforced follow-up appointment scheduling, medication reconciliation, and post-discharge outreach.

Continued strengthening of language access services, including timely interpreter use, culturally appropriate discharge education, and reinforcement of staff training on language access requirements.

Focused monitoring of preventive screening compliance, particularly for older adults and patients with disabilities, to ensure consistent metabolic screening and documentation.

Inclusive care practices and staff education, emphasizing culturally responsive, trauma-informed, and LGBTQ+-affirming care to support equitable treatment and engagement.

Ongoing data monitoring and validation, with attention to small subgroup sizes and data completeness, to refine interventions and assess progress over time.

The hospital will continue to review equity-stratified data annually and adjust improvement strategies as needed to promote equitable access, quality, and outcomes for all patient populations.

## **Performance in the priority area**

Acute psychiatric hospitals are required to provide hospital equity plans that address the top 10 disparities by identifying population impact and providing measurable objectives and specific timeframes. For each disparity, hospital equity plans will address performance across priority areas: person-centered care, patient safety, addressing patient social drivers of health, effective treatment, care coordination, and access to care.

### **Person-centered care**

The hospital promotes person-centered care by engaging patients in treatment planning, respecting individual preferences, and supporting shared decision-making throughout the inpatient stay. Care teams incorporate culturally responsive and trauma-informed approaches to address the diverse needs of the patient population. Patient experience data and equity-stratified measures are reviewed regularly to identify opportunities to enhance communication, engagement, and overall care experience.

### **Patient safety**

Patient safety remains a core priority, with ongoing monitoring of high-risk processes, adherence to evidence-based safety protocols, and continuous staff education. The hospital reviews safety-related events and quality indicators to identify trends and implement targeted improvements. Equity-focused data analysis supports the identification of potential safety risks affecting specific populations, guiding interventions to maintain a safe care environment for all patients.

### **Addressing patient social drivers of health**

The hospital addresses patient social drivers of health through screening, assessment, and integration of identified needs into care planning and discharge processes. Social work and care coordination teams support patients experiencing barriers related to housing, transportation, food access, and social support. Ongoing review of SDOH-related data informs targeted interventions and community partnerships aimed at reducing barriers and promoting equitable health outcomes.

## **Performance in the priority area continued**

Performance across all of the following priority areas.



### Effective treatment

The hospital demonstrated effective treatment performance across identified priority measures, including substance use disorder treatment at discharge, metabolic disorder screening, and inpatient psychiatric care outcomes. Evidence-based clinical protocols were applied consistently, with standardized assessment, treatment planning, and discharge processes supporting patient stabilization and recovery. Ongoing performance monitoring identified opportunities to further strengthen treatment effectiveness for specific patient subgroups, informing targeted quality and equity improvement initiatives.

### Care coordination

Care coordination efforts focused on safe transitions across the continuum of care, including discharge planning, outpatient follow-up coordination, medication reconciliation, and communication with community providers. Data review highlighted the importance of timely discharge processes and post-discharge support for higher-risk populations. The hospital continues to enhance interdisciplinary collaboration and care transition workflows to support continuity of care and reduce unplanned readmissions.

### Access to care

Access to care was supported through timely inpatient services, language access resources, and coordination of follow-up services at discharge. The hospital maintained interpreter availability and culturally responsive communication to support diverse patient populations. Ongoing review of equity-stratified data identified opportunities to further reduce barriers related to age, disability status, and language, guiding targeted efforts to promote equitable access to services and follow-up care.

## Methodology Guidelines

Did the hospital follow the methodology in the Measures Submission Guide? (Y/N)

Y