

HCAi California Hospital Equity Measures Reporting

Every calculation associated with all report fields has been evaluated for our hospital. While this AB 1204 Equity Report may appear sparsely populated and lacking values in some areas, this reflects the complexity of the reporting requirements—not a deficiency in the report itself. Many blank cells are the result of limited availability of certain stratification variables. Our hospital remains committed to advancing equity reporting and looks forward to additional regulatory guidance on whether and how these data elements should be collected in the future. Even when the final numbers are few, the work behind them is substantial—and necessary for accurate and compliant reporting.

Encompass Health Rehabilitation Hospital of Murrieta



Healthcare Disparities Management Action Plan

Encompass Health Murrieta is working to decrease healthcare disparities for dual eligible patients as it relates to reducing the occurrence of acute care transfers.

The Director of Case Management, reviewed data from Q1 of 2024 related to *dual eligible patients and their acute care transfer rate*. An area for improvement was identified. The DCM noticed that our patient population for dual eligible patients had an acute care transfer rate of 15.4 percent vs non dual eligible Medicare patients which was only 7 percent.

Goal: Decrease the gap of the acute care transfer rates of Medicare dual eligible patients vs non dual eligible Medicare patients

Data will be reviewed with ACT Committee:

- Acute care transfers of Medicare dual eligible patients vs none Medicare dual eligible patients
- Review high react and very high react patients and how many were acute care transfers
- At the end of each quarter data will be compared to the initial data collected in Q1 2024

Overall Focus and Specific Actions	Responsible Party	Start Date	Due Date	Desired Outcome/ Success Measures
1-Monitor dual eligible patients rate of transfer to acute care	DCM, DQR, CEO, CNO	QTR1	QTR 1	Identify the disparity and how wide the gap in acute care transfers compared to Medicare/Medicare Advantage patients
2-Rehab physicians and Internal medicine physicians, nursing leadership, and CEO will meet to discuss action plan	Physicians, DQR, CNO, CEO, DCM	QTR 2	QTR 2	Plan to ensure physicians have a mechanism to identify high risk patients
3-Formulate a plan to educate the PMR and IM physicians	Physicians, CNO, CEO, DQR, DCM	QTR 2	QTR 2	Plan is implemented which will enable the team to pull data at the end of Q3
4-Nursing to increase monitoring of very high react patient to now include high react patients	CNO	QTR 2	QTR 2	— Increase the rounding from twice per shift only on very high patients to now include twice per shift on high react patients as well
5-Document and measure results obtained each month	DCM, DQR, CEO, CNO	QTR 2	QTR 3	Marked decrease in acute care transfers for dual eligible Medicare patients

6-Assess whether solutions solved problem	CEO, physicians, CNO, DCM, DQR	QTR 3	QTR 4	Decreased in acute care transfers in the dual eligible populations compared to Medicare/Medicare Advantage