

Hospital Equity Measures Reporting Program: How CMQCC and HQI are Partnering to Support Your Facility

featuring special guests from HCAI and HQI

Tuesday, July 29, 2025

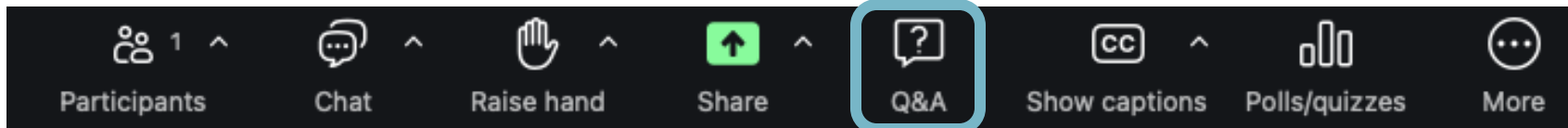
Britney Pheng, MPH / CMQCC Data Analyst, Maternal Data Center

Melinda Kent, MSN, RNC-OB, C-EFM, C-ONQS / CMQCC Associate Director, Maternal Data Center

Tamar Boyadjian, MPH / CMQCC Program Manager Lead, Maternal Data Center

Webinar Logistics

- Everyone has been automatically muted to prevent background noise
- CMQCC, HCAI, and HQI staff look forward to answering your questions during the second half of today's webinar → Please use the **Q&A** to submit your questions



- Slide deck is already posted in the Maternal Data Center (MDC) Support Section with user guide links embedded in the deck; recording will be posted in the MDC Support section shortly after the meeting

Today's Speakers and Subject Matter Experts

- **California Maternal Quality Care Collaborative (CMQCC)**
 - Britney Pheng, MDC Data Analyst
 - Melinda Kent, MDC Associate Director
 - Tamar Boyadjian, MDC Program Manager Lead
- **Department of Health Care Access and Information (HCAI)**
 - Shannon Conroy, Research Scientist Supervisor
 - Ying Yang, Manager, Quality and Indicators Group
 - Zachary Gersten, Research Scientist
- **Hospital Quality Institute (HQI)**
 - Scott Masten, VP, Measurement Science and Data Analytics

AB 1204:
What brings us together today?

New HCAI Requirement: Hospital Equity Report

- *AB 1204: Hospital Equity Measures Reporting Program*
- Effective 2025, all California hospitals must submit an annual equity report to HCAI:
 - *Requires hospitals to submit annual reports for measures on patient access, quality, and outcomes by race, ethnicity, language, disability status, sexual orientation, gender identity, and payer. The reports must include a plan to prioritize and address disparities for identified vulnerable populations.*
- Reports must be submitted by **September 30th**
 - Reporting portal now live
 - Hospitals may request a 60-day extension

Don't have access to the MDC?
Send us an email at
datacenter@cmqcc.org and we
can share the names and
contacts of your facility's *MDC
Administrators!*

HCAI Hospital Equity Report in the MDC

- CMQCC is supporting CA member hospitals by providing partially stratified data via a .CSV report, downloadable from the MDC, on the following three measures from the *HCAI Hospital Equity Report: Measures Submission Guide*:
 - “CMQCC NTSV Cesarean Birth Rate” (a.k.a. PC-02)
 - “CMQCC VBAC-TSV Rate, Uncomplicated” (a.k.a. IQI 22)
 - “CMQCC Exclusive Breast Milk Feeding” (a.k.a. PC-05)
 - *See note on following slide*

A Note on Breastfeeding Data

- At this time, the submission of PC-05 (i.e., *Exclusive Human Milk Feeding*) data to the MDC is optional
 - If your hospital does not currently submit PC-05 data to the MDC, all relevant columns will be blank in the MDC Report
- If your hospital would like for its 2024 breastfeeding data to be included in the report with the available stratifications, please review the following resources (and/or email us!):
 - [User Guide: PC-05 in the MDC](#)
 - May 2025 *MDC Lightning Round: MDC Tools to Support Breastfeeding QI* ([Recording](#) | [Slides](#))

HCAI Hospital Equity Report: What Data Will be Provided?

- The following HCAI-requested stratifications of the three measures **are** included in the MDC report:

- ☐ **Expected Payor**
- ☐ **Maternal Age**
- ☐ **Preferred Language**
- ☐ **Race and Ethnicity (R&E)***

***A special note on R&E stratifications**

While HCAI is requesting the 2024 federal stratifications set forth by the Office of Management and Budget (OMB), they understand that CA hospitals currently report R&E to CMQCC via the Birth Certificate (BC), which is not aligned with the OMB stratifications at this time (e.g., Middle Eastern/North African (“MENA”) is not a stratification available in the MDC). Once the CA BC categorizations are modified to reflect the OMB stratifications, CMQCC will update the categorizations in the MDC to align.

HCAI Hospital Equity Report: What Data Will **Not** be Provided?

- The following HCAI-requested stratifications of the three measures **are not** included in the MDC report:

- ☐ **Disability Status**

- **Note:** CMQCC plans to eventually add *Disability Status* to the list of supplemental data elements hospitals may choose to upload to the MDC

- ☐ **Gender Identity***

- ☐ **Sex Assigned at Birth***

- ☐ **Sexual Orientation***

HCAI Hospital Equity Report: How Data is Displayed

- If data is missing or unavailable, these cells will be **blank**
 - E.g., cells for measures stratified by disability status
- If data is available, and the “true” value of the cell is zero (i.e., no patients), these cells will display **zeroes**
 - E.g., if your facility had no Asian patients in its breastfeeding denominator for 2024, the numerator, denominator, and rate cells will all display zeroes
- Rates for each of the three measures are displayed differently:
 - NTSV Cesarean Birth/PC-02: Reported as **direct rate/proportion** (e.g., 0.273)
 - VBAC-TSV/IQI 22: Reported as **rate per 1,000 discharges** (e.g., 272.7)
 - Exclusive Human Milk Feeding/PC-05: Reported as **percentage** (e.g., 27.3)

HCAI Hospital Equity Report: Accessing the Report

Clinical Quality Measures view all 164 by name [reporting org.](#) or topic

★ [HCAI Hospital Equity Report](#)

Description: As part of the Department of Health Care Access and Information (HCAI)'s Hospital Equity Measures Reporting Program (Assembly Bill 1204, Chapter 751), hospitals and hospital systems are mandated to submit aggregate data on their overall and stratified rates of key health measures, as well as their top 10 disparities as identified in the prepared data, to the HCAI Hospital Equity Report Portal.

CMQCC Role: CMQCC has special reports in the Maternal Data Center that hospitals can optionally use to support their reporting.

Measures: [Open measure list](#)

- [Cesarean Birth: NTSV - Nullip Term Singleton Vertex \(PC-02 TJC v2024B\)](#)
- [Vaginal Birth After Cesarean \(VBAC\) Rate, TSV \(AHRQ IQI 22\)](#)
- [Exclusive Breast Milk Feeding \(PC-05 TJC v2024B\)](#)

Special Notes:

- At this time, CMQCC is only able to stratify the three measures noted above by Payor, Preferred Language, and Race/Ethnicity, per the data available in the MDC.
- For the CY 2024 reporting period, HCAI is requesting the submission of PC-02 and PC-05 data as outlined in Version 2024B of the Joint Commission's measure specification manual (hence the "TJC v2024B" in the parentheses above).
- For hospitals that are working with the Hospital Quality Institute (HQI) to support the fulfillment of their reporting requirements via the Hospital Quality Improvement Platform (HQIP), CMQCC's report is compatible with upload to the HQIP for streamlined data synthesis.

[See My Hospital's Action Steps for Using the MDC for this Reporting Program](#)

HCAI Hospital Equity Report: Accessing the Report

Home > Alpha Medical Center > Reporting Programs > HCAI Hospital Equity Report

HCAI Hospital Equity Report: Action Items

Status: January 2024 - December 2024

PDD for January 2024 - December 2024

By 08/31/2025 [Complete](#)

PC-05 Supplemental Data

By 08/31/2025 [Incomplete](#)



Download HCAI Equity Report

Download Hospital Equity Report

Download System Equity Report

Note: The *System Equity Report* is only for use by systems that will be compiling their hospital analytics for HCAI independently; otherwise, HQIP will create the system report for you!

[See HCAI Equity Report](#)

Important! If your facility's L&D unit closed partway through 2024, but you would still like to use the MDC to facilitate your health equity reporting, please email us at datacenter@cmqcc.org to discuss next steps.

HCAI Hospital Equity Report: Preparing Data for Submission

Option 1: HQI-Facilitated Reporting

- HQI can support hospitals' fulfillment of equity reporting requirements via its *Hospital Quality Improvement Platform* (HQIP), a fee-for-service platform programmed to stratify reports for calculable measures and generate pre-filled, templated equity reports with available data for hospitals to edit as desired
 - Step 1: Complete all data submissions to the MDC
 - Step 2: Download the Report from the MDC
 - Step 3: Upload the Report to the HQIP
 - Step 4 (automatic): Perinatal data will be integrated with the rest of the hospital's data, de-identified per *Data De-Identification Guidelines (DDG)* to protect patients from reidentification
 - Step 5: Incorporate your hospital's/system's improvement plan

HCAI Hospital Equity Report: Preparing Data for Submission

Option 2: Independent Reporting

- Hospitals may opt to complete their own analytics (e.g., stratify and de-identify data, complete rate-ratio (RR) calculations, identify top ten disparities based on all aggregated data, etc.)
 - Step 1: Complete all data submissions to the MDC
 - Step 2: Download the Report from the MDC
 - Step 3: Incorporate data into the rest of your hospital or system report
 - Step 4: Incorporate your hospital's/system's improvement plan

HCAI Hospital Equity Report: Submitting Data to HCAI

- **Hospitals and systems are responsible for their own data submissions!**
Neither CMQCC nor HQI are involved in the data submission process
- Hospitals and systems are also responsible for establishing their own improvement plans to prioritize and address disparities identified in the data to be submitted
- Upcoming webinar from HCAI: *Hospital Equity Reporting: DDG, Rate Ratios, and Online Submission Overview*
 - Monday, August 18th from 10:00-11:00 AM PT | [Register here](#)
 - Hospitals performing their own analytics are highly encouraged to attend



Hospital Quality Institute

Leadership in quality and patient safety

HQI Supports CMQCC's Maternal Measures for AB 1204 Equity Reporting

Scott Masten, HQI VP Data Analytics

smasten@hqinstitute.org

Overview of AB 1204 Hospital Equity Reporting Requirements

Law: 2021 (AB 1204) Medical Equity Disclosure Act ([HSC §§127370-127376](#)); Regulations ([CCR, Title 22, Division 7, Chapter 8.4 \(Sections 95300-95316](#), approved June 4, 2025)

All CA Hospitals are Required to Submit a Yearly Equity Report (with 2 sections):

- 1. Equity Report:** 11 structural measures and 2-9 core quality measures stratified by 9 demographic/condition variables (e.g., race/ethnicity, age, payor, and language)
- 2. Equity Plan:** Identify the Top 10 Disparities among stratified core measures, provide a plan to prioritize and reduce them including “population impact,” measurable objectives, and specific timeframes, and describe performance across 6 priority areas (e.g., care coordination, access to care, etc.)

Separate Reports: Hospital & System-level reports for general acute, children’s, and acute psychiatric hospitals

Equity Report Core Quality Measures: General Acute Care Hospitals

9 Core Quality Measures for General Acute Care Hospitals

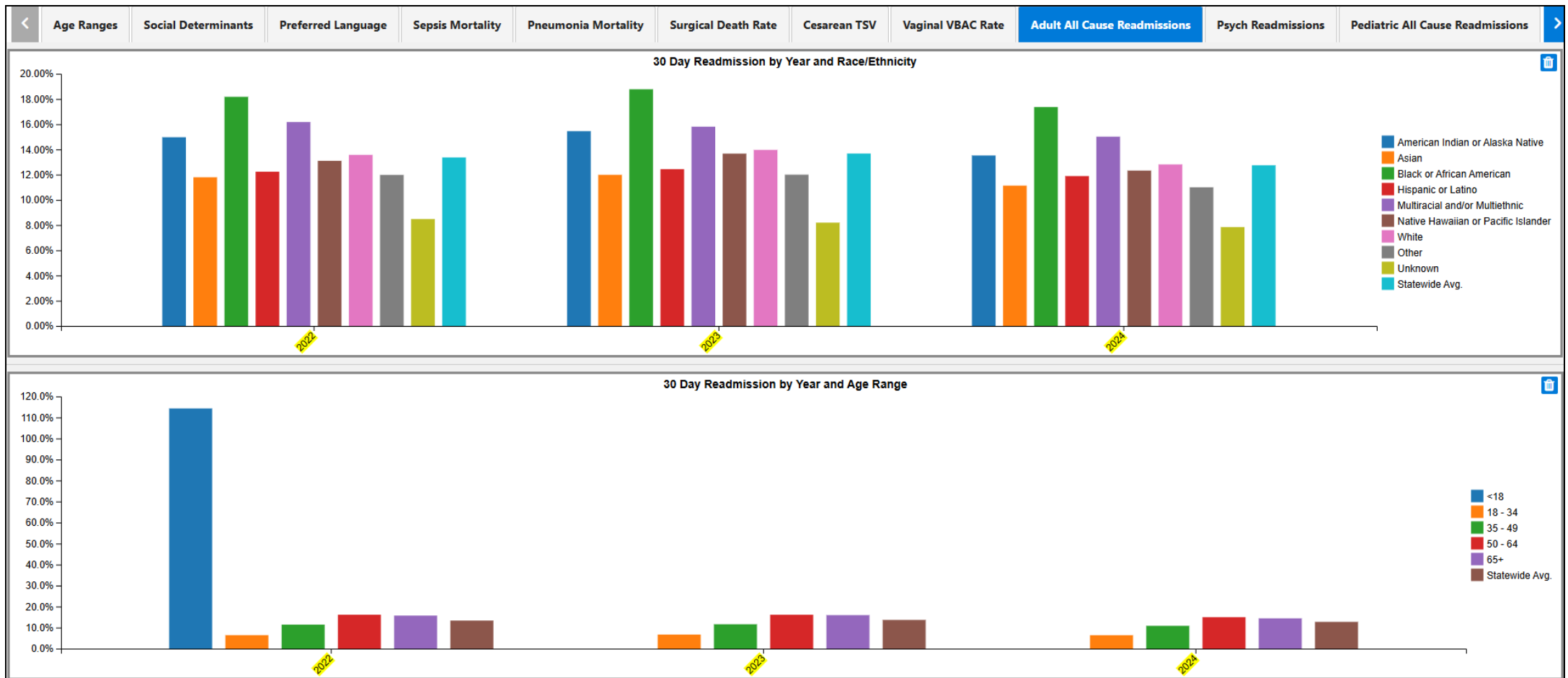
1. HCAHPS survey: Would recommend hospital (H-RECMND-DY)
2. HCAHPS survey: Received information and education (H-COMP-6-Y-P)
3. AHRQ Quality Indicator Pneumonia Mortality Rate (IQI 20)
4. AHRQ Patient Safety Indicator Death Rate among Surgical Inpatients with Serious Treatable Complications (PSI 04)
- 5. CMQCC Nulliparous, Term, Singleton, Vertex (NTSV) Cesarean Birth Rate (PC-02)[†]**
- 6. CMQCC Vaginal Birth After Cesarean (VBAC) Rate (IQI 22)[†]**
- 7. CMQCC Exclusive Breast Milk Feeding (PC-05)[†]**
8. HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate (HCAI-SS-HWR)
9. HCAI All-Cause Unplanned 30-Day Hospital Readmission Rate, stratified by behavioral health diagnosis (#8 x CHIA BHC)

[†]Maternity measure data available from the CMQCC Maternal Data Center.

HQIP Equity Dashboard

Rates Displayed in Figures and Tables

HQIP Figures and Tables Provide Context for Understanding the Disparities



HQIP Equity Dashboard

Identification of Top 10 Disparities

The HQIP Equity Dashboard Calculates and Lists Your Top 10 Disparities


**Maternity
Measures
Not
Displayed**

Disparity	Measure	Stratification	Disparity Group	Disparity Rate	Reference Group	Reference Rate	Rate Ratio	Preferred Rate
1	No Behavioral Health Diagnosis Readmission	Age	65 and older	14.7	18 to 34	3.0	4.9	Lower Rate Preferred
2	Readmission	Age	65 and older	15.0	18 to 34	3.8	4.0	Lower Rate Preferred
3	No Behavioral Health Diagnosis Readmission	Age	50 to 64	11.6	18 to 34	3.0	3.8	Lower Rate Preferred
4	No Behavioral Health Diagnosis Readmission	Expected Payor	Medicare	15.8	Private	4.4	3.6	Lower Rate Preferred
5	Readmission	Age	50 to 64	13.4	18 to 34	3.8	3.6	Lower Rate Preferred
6	Readmission	Expected Payor	Medicare	16.2	Private	4.9	3.3	Lower Rate Preferred
7	Substance Use Disorders Readmission	Expected Payor	Medicare	18.8	Private	5.7	3.3	Lower Rate Preferred
8	No Behavioral Health Diagnosis Readmission	Race and/or Ethnicity	Black or African American	15.9	Asian	6.7	2.4	Lower Rate Preferred
9	Substance Use Disorders Readmission	Expected Payor	Medicaid	13.3	Private	5.7	2.3	Lower Rate Preferred
10	No Behavioral Health Diagnosis Readmission	Age	35 to 49	7.0	18 to 34	3.0	2.3	Lower Rate Preferred

HQIP Equity Dashboard


Support for CMQCC Maternal Measures

Upload the HCAI Hospital Equity Measures Report File into HQIP

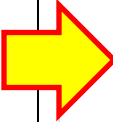


Hospital Quality Institute
Leadership in quality and patient safety

Pomona Valley Hospital Medical Center - 106190630


Download Final Report 

Powered by SpeedTrack

 Upload CMQCC File (General Acute Birthing Hospital)

Drag&Drop files here
or
Upload File

— Uploaded Files

hcai_report_2025-07-24 14_33_43 -0700.csv 

HQIP Equity Dashboard of Top 10 Disparities including CMQCC Maternity Measures

Maternal Disparities are NOW Included in Your HQIP Top 10 Disparities

**Maternity
Measures
Now
Displayed**

Disparity	Measure	Stratification	Disparity Group	Disparity Rate	Reference Group	Reference Rate	Rate Ratio	Preferred Rate
1	Readmission	Age	50 to 64	16.4	18 to 34	4.8	3.4	Lower Rate Preferred
2	Readmission	Age	65 and older	16.2	18 to 34	4.8	3.4	Lower Rate Preferred
3	Readmission	Expected Payor	Medicare	17.1	Private	5.3	3.2	Lower Rate Preferred
4	AHRQ PSI Death	Race and/or Ethnicity	White	275.0	Hispanic or Latino	132.5	2.1	Lower Rate Preferred
5	Readmission	Age	35 to 49	9.7	18 to 34	4.8	2.0	Lower Rate Preferred
6	Readmission	Expected Payor	Medicaid	10.4	Private	5.3	1.9	Lower Rate Preferred
7	Readmission	Race and/or Ethnicity	Black or African American	16.9	Asian	8.8	1.9	Lower Rate Preferred
8	No Behavioral Health Diagnosis Readmission	Sex Assigned at Birth	Male	15.4	Female	8.2	1.9	Lower Rate Preferred
9	Readmission	Sex Assigned at Birth	Male	16.5	Female	9.3	1.8	Lower Rate Preferred
	NTSV	Age	30 to 39	26.9	18 to 29	15.7	1.7	Lower Rate Preferred

HQIP Equity Dashboard

10 Hospital-Provided Fields

- 10 fields require input, primarily Equity Plan details

- [Hospital Equity Report User Input Template](#)


- Copy/Paste into HQIP Equity Report Input Template


1. Web address for the Hospital Equity Report on the hospital's website (60 characters max)	<input type="text"/>
2. Do you have a designated individual who leads hospital health equity activities? <input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Do you provide documentation of policy prohibiting discrimination? <input type="checkbox"/> Yes <input type="checkbox"/> No	
4. Equity Plan: What actions are planned to address the Top 10 Disparities identified in the data, including population impact, measurable objectives, and specific timeframe. (5000 characters max)	<input type="text"/>
5. Describe your performance in the priority area of <i>Person-Centered Care</i> . (5000 characters max)	<input type="text"/>
6. Describe your performance in the priority area of <i>Patient Safety</i> . (5000 characters max)	<input type="text"/>
7. Describe your performance in the priority area of <i>Addressing Patient Social Determinants of Health</i> . (5000 characters max)	<input type="text"/>
8. Describe your performance in the priority area of <i>Effective Treatment</i> . (5000 characters max)	<input type="text"/>
9. Describe your performance in the priority area of <i>Care Coordination</i> . (5000 characters max)	<input type="text"/>
10. Describe your performance in the priority area of <i>Access to Care</i> . (5000 characters max)	<input type="text"/>

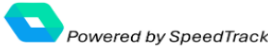

HQIP Equity Dashboard

Generate Final Report

HQIP Creates the Final Formatted Report to Upload to HCAI




[Download Final Report](#) 




+ Upload CMQCC File (General Acute or Birthing Hospitals)

Top 10 Disparities

[Export to PDF](#) 

Disparity	Measure	Stratification	Disparity Group	Disparity Rate	Reference Group	Reference Rate	Rate Ratio	Preferred Rate
1	No Behavioral Health Diagnosis Readmission	Age	65 and older	14.7	18 to 34	3.0	4.9	Lower Rate Preferred
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Equity Report Input Template

 Saved

Web address for the location of the Hospital Equity Report on the hospital's website (character limit: 60)

0/60

Do you have a designated individual who leads hospital health equity activities? (Y/N)

☐ Yes ☐ No

hqianalytics@hqinstitute.org

HQI Support for Mandatory Health Equity Reporting under AB 1204

- **Hospital Quality Improvement Platform Details MSA BAA**
 - **Equity Reporting Solution Details Contract**
- **Health Equity Reporting User Guide** – Generate Top 10, add CMQCC data, final csv
- **Hospital Equity Report User Input Template** – 10 User Inputs needed from hospitals
- **Hospital Equity Report Website Posting Guidance** – Must also be DDG compliant

HQI Webinar: Finalizing AB 1204 Equity Reports Aug 27 @ 10 AM ([Link](#))

Open Q&A Session

Health Equity Reporting Resources

■ From CMQCC

- User Guide: [HCAI Hospital Equity Report in the Maternal Data Center \(MDC\)](#)
- Questions? datacenter@cmqcc.org

■ From HQI

- [Hospital Quality Improvement Platform \(HQIP\)](#)
- [HQIP Resources Page](#)
- Questions? hqianalytics@hqinstitute.org

Health Equity Reporting Resources

■ From HCAI

- [QuickStart Guide Series: Getting Started](#)
- [Hospital Equity Measures Reporting Program Main Webpage](#)
- [Hospital Equity Report: Measures Submission Guide Version 1.2](#)
- [Hospital Equity Data Toolkit](#)
- Hospital Equity Report Format File Specs 3/10/25 ([Excel](#)) ([Word](#))
- [California HH&S “Data De-Identification Guidelines \(DDG\),” – 9/23/16](#)
- Questions? hospitalequity@hcai.ca.gov

Thank you!

CMQCC