

2023

National Healthcare Quality and Disparities Report Introduction



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2023 NATIONAL HEALTHCARE QUALITY AND DISPARITIES REPORT

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Introduction

This **Introduction** provides background on the annual *National Healthcare Quality and Disparities Report* (NHQDR) and modifications that have occurred over time.

Background on the National Healthcare Quality and Disparities Report

For the 21st year in a row, the Agency for Healthcare Research and Quality (AHRQ) has reported on progress and opportunities for improving healthcare quality and reducing healthcare disparities. As mandated by the U.S. Congress, the report focuses on “national trends in the quality of health care provided to the American people” (42 U.S.C. 299b-2(b)(2)) and “prevailing disparities in health care delivery as it relates to racial factors and socioeconomic factors in priority populations” (42 U.S.C. 299a1(a)(6)).

The NHQDR is produced with the support of a Department of Health and Human Services (HHS) Interagency Work Group (IWG)ⁱ and guided by input from AHRQ’s National Advisory Council and the Institute of Medicine (IOM), now known as the Health and Medicine Division of the National Academies of Sciences, Engineering, and Medicine.

The 2023 NHQDR tracks about 700 measures and Appendix B presents more than 550 of them (see the section on changes to the 2023 NHQDR below for more details on Appendix B). The measures cover a wide variety of conditions and settings. Data years vary across measures.

All measures are available in the Data Query Tool (<https://datatools.ahrq.gov/nhqdr/>).

Changes to the National Healthcare Quality and Disparities Report

The NHQDR was significantly shaped by several IOM reports. Two of these reports, *Crossing the Quality Chasm*¹ and *To Err Is Human*² raised awareness about gaps in the quality of healthcare and patient safety. The extensive literature review included in a third report, *Unequal Treatment*,³ drew attention to disparities in the care rendered to racial and ethnic populations, low-income populations, and other vulnerable groups.

Since the report’s inception as the *National Healthcare Quality Report* (NHQR) and *National Healthcare Disparities Report* (NHDR) in 2003, AHRQ has worked continuously to enhance and refine the NHQDR. These enhancements include:

- Introducing coreⁱⁱ measures and composite measures and refining the methods of analysis.

ⁱ Federal participants on IWG: AHRQ, Administration for Children and Families, Administration for Community Living, Assistant Secretary for Planning and Evaluation, Centers for Disease Control and Prevention, Centers for Medicare & Medicaid Services, Food and Drug Administration, Health Resources and Services Administration, Indian Health Service, National Institutes of Health, Office of the Assistant Secretary for Health, Substance Abuse and Mental Health Services Administration, and Veterans Health Administration.

ⁱⁱ Core measures are used in the main NHQDR. They summarize the status of overall quality, status of disparities, and trends in quality and disparities. Core measures are approved by the NHQDR Interagency Work Group for inclusion and are nationally representative. AHRQ receives these data regularly.

- Expanding the patient safety section to include sections on healthcare-associated infections and patient safety culture and adding sections on lifestyle modification and care coordination.
- Adding measure-specific benchmarks that reflect the high level achieved by the best performing states.
- Categorizing the measures into six priority areas (e.g., Patient Safety, Healthy Living) that could help achieve the Triple Aim.ⁱⁱⁱ
- Combining the NHQR and NHDR into the NHQDR to provide a more complete and integrated assessment of access to and quality of healthcare, as well as disparities. Also included measures related to other key populations, including women, children, older adults, people with disabilities and at the end of life, and residents of rural areas and inner cities.
- Producing a Portrait of American Healthcare section as an overview of the U.S. population and healthcare systems, as well as sections on special emphasis topics.

Organization of the 2023 National Healthcare Quality and Disparities Report and Data Source Updates

The 2023 NHQDR presents a comprehensive overview of the healthcare landscape, features key topics related to healthcare delivery settings and strategies, provides more comprehensive data for all measures, and provides indepth analyses for five special emphasis topics.

The **Portrait of American Healthcare** section provides readers with a contextual understanding of the structural factors, including societal inequities, that affect how today’s healthcare is organized, financed, and delivered. It offers an expanded description of the current U.S. population as it relates to mortality, health conditions, and social determinants of health and the healthcare delivery infrastructure through which they receive services.

This section also offers lessons learned about healthcare delivery organizations, including the healthcare workforce and changes in the workforce during and after the coronavirus disease-2019 (COVID-19) pandemic. In addition, the section provides new information about healthcare expenditures and variations in healthcare quality.

The **Special Emphasis Topics** that follow delve into healthcare delivery during the COVID-19 pandemic and lessons learned. For the 2023 NHQDR, the topics are the impact of COVID-19 on population health, impact of COVID-19 on hospital care, impact of COVID-19 on ambulatory care, impact of COVID-19 on nursing homes, and growth of telehealthcare during COVID-19 pandemic. The NHQDR focuses on topics for which we anticipated that the COVID-19 public health emergency would affect healthcare quality and disparities and where relevant data were available.

ⁱⁱⁱ More information on the Triple Aim is available from the Institute for Healthcare Improvement at <http://www.ihl.org/Engage/Initiatives/TripleAim/Pages/default.aspx>.

Each topic section discusses key issues related to healthcare delivery in the setting of interest (e.g., hospitals), such as patient safety, delays in care, and increased use of new care delivery methods (e.g., telehealthcare). The sections also discuss barriers to effective and timely care during the pandemic. Charts and corresponding bullets highlight key aspects of quality and disparities for the most recent data year and over time. The sections end with a conclusion and resources aimed at improving healthcare access and quality in each care setting.

The **Quality and Disparities Tables** in Appendix B display the 2023 NHQDR's extensive collection of measures, organized into nine areas: COVID-19 experiences, access, affordable care, effective care, patient safety, person-centered care, care coordination, healthy living, and supplemental measures. Each area is further organized into sub-areas to help readers learn more about specific domains within healthcare delivery (e.g., the Affordable Care area has sub-areas on Financial Burden of Healthcare and Usual Source of Care). Each appendix area provides a brief introduction about the topic and key findings from the NHQDR analyses.

The tables display key statistics for all measures, including measure title, data source, benchmark, data years, trends over time, and disparities between subpopulations for the most recent data year.

Updates in Data Source Availability

For the first time, this year's report includes data from:

- Centers for Disease Control and Prevention, National Center for Immunization and Respiratory Diseases, National Immunization Survey - Adult COVID Module.
- Centers for Disease Control and Prevention, National Center for Immunization and Respiratory Diseases, National Immunization Survey - Child COVID Module.
- Centers for Disease Control and Prevention COVID Data Tracker.
- Centers for Medicare & Medicaid Services Provider COVID-19 Vaccination data.

Readers also should note that the 2021 National Survey on Drug Use and Health data cannot be compared or combined with any prior years of data due to methodological changes in this survey.

Additional information on each measure can be found in the Data Query section of the NHQDR website (<https://datatools.ahrq.gov/nhqdr>). Below each table generated are links to:

- [Data Sources](#), which provide information about each database analyzed for the report, including data type, sample design, and primary content. The list of data sources is available in Appendix A (<https://www.ahrq.gov/research/findings/nhqdr/nhqdr23/index.html>).
- [Measure Specifications](#), which provide information about how measures are generated and analyzed for the report. Measures highlighted in the report are described, as well as other measures that were examined but not included in the text of the report. The measure specifications can be found on the NHQDR website (<https://datatools.ahrq.gov/nhqdr>).

References

1. Corrigan JM, Donaldson MS, Kohn LT, et al. Committee on Quality of Health Care in America, Institute of Medicine. Crossing the Quality Chasm: A New Health System for the 21st Century. Washington, DC: National Academy of Sciences, National Academies Press; 2001. <https://www.nap.edu/catalog/10027/crossing-the-quality-chasm-a-newhealth-system-for-the>. Accessed December 7, 2023.
2. Kohn LT, Corrigan JM, Donaldson MS, eds; Committee on Quality of Health Care in America, Institute of Medicine. To Err Is Human: Building a Safer Health System. Washington, DC: National Academy Press; 2000. <http://www.nap.edu/catalog/9728.html>. Accessed December 7, 2023.
3. Institute of Medicine. Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care. Washington, DC: National Academies Press; 2003. <https://www.nap.edu/catalog/12875/unequal-treatment-confronting-racial-and-ethnic-disparitiesin-health-care>. Accessed December 7, 2023.

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