

**Introduced by Senator Hernandez**

February 21, 2013

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An act to add Chapter 5 (commencing with Section 128955) to Part 5 of Division 107 of the Health and Safety Code, relating to public health.

LEGISLATIVE COUNSEL'S DIGEST

SB 508, as introduced, Hernandez. Health disparity report.

Existing law provides that the Office of Statewide Health Planning and Development, within the California Health and Human Services Agency, is the single state agency designated to prescribe health facility or clinic data for use by all state agencies.

This bill would require the office, with support from the agency, to develop a health disparity report based upon the inpatient hospital discharge data set. The bill would require the report to focus on specified areas of concern, such as cardiovascular disease and breast cancer. The bill would also require the office and agency, by January 1, 2016, to complete and deliver the report to the Legislature.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

*The people of the State of California do enact as follows:*

- 1 SECTION 1. The Legislature finds and declares all of the
- 2 following:
- 3 (a) In California, there is a great risk that the prevalence of
- 4 health disparities may increase as our population becomes even
- 5 more multicultural. By the year 2040, it is expected that two out
- 6 of three Californians will be Latino, Asian American, or African

1 American. As the state becomes increasingly diverse, the vision  
2 of a healthy and productive California will rely more on our ability  
3 to eliminate racial and ethnic disparities, and our actions to improve  
4 the health of our multicultural communities.

5 (b) The Office of Statewide Health Planning and Development  
6 within the California Health and Human Services Agency maintains  
7 the inpatient hospital discharge data set, a consolidated database  
8 of health diagnoses and procedures as reported from licensed health  
9 facilities throughout the state. This database contains 3.8 million  
10 observations per year in 18 variable categories, including  
11 diagnoses, procedures, race, ethnicity, insurance, and residence  
12 ZIP Code. This data set has shown several instances of racial and  
13 ethnic health disparities, including African Americans having  
14 greater hospitalization rates for ambulatory sensitive conditions  
15 such as diabetes and heart failure than any other racial group.

16 SEC. 2. Chapter 5 (commencing with Section 128955) is added  
17 to Part 5 of Division 107 of the Health and Safety Code, to read:

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#### CHAPTER 5. HEALTH DISPARITY REPORT

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22 128955. (a) The Office of Statewide Health Planning and  
23 Development, with support from the California Health and Human  
24 Services Agency, shall, based on the inpatient hospital discharge  
25 data set, develop a health disparity report to assess the levels of  
26 measurable health disparities in the state among minorities. The  
27 health disparity report shall focus on the following areas of  
28 concern, consistent with the Healthy People 2020 priorities:

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(1) Cardiovascular disease.

(2) Breast cancer.

(3) Cervical cancer.

(4) Diabetes.

(5) HIV/AIDS.

(6) Infant mortality.

(7) Asthma.

(8) Mental health.

(9) Trauma.

(b) Key principles of the health disparity report shall include,  
but not be limited to, both of the following:

1 (1) Consideration of the effects of current policies in public  
2 health, social welfare, housing, and education that contribute to  
3 health disparities.

4 (2) The ability of public and private partnerships, including  
5 federal, state, local, and community-level efforts, to reduce health  
6 disparities.

7 (c) By January 1, 2016, the Office of Statewide Health Planning  
8 and Development and the California Health and Human Services  
9 Agency shall complete the report and deliver it to the Legislature.

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