EXECUTIVE SUMMARY

Key Findings

- **Access**: From 2000 to 2017, more than half of access measures showed improvement, 33% did not show improvement, and 14% showed worsening. For example, there were significant gains in the percentage of people who reported having health insurance.

- **Quality**: Quality of healthcare improved overall from 2000 through 2016-2017, but the pace of improvement varied by priority area:
  - **Person-Centered Care**: Almost 70% of person-centered care measures were improving overall.
  - **Patient Safety**: More than 60% of patient safety measures were improving overall.
  - **Healthy Living**: Almost 60% of healthy living measures were improving overall.
  - **Effective Treatment**: Almost half of effective treatment measures were improving overall.
  - **Care Coordination**: One-third of care coordination measures were improving overall.
  - **Care Affordability**: No care affordability measures changed overall.

- **Disparities**: Overall, some disparities were getting smaller from 2000 through 2016-2017, but disparities persist, especially for poor and uninsured populations in all priority areas.

  - Racial and ethnic disparities vary by group:
    - Blacks, American Indians and Alaska Natives (AI/ANs), and Native Hawaiians/Pacific Islanders (NHPIs) received worse care than Whites for about 40% of quality measures. Disparities were improving for only 4 measures for Blacks, 2 measures for AI/ANs, and 1 measure for NHPIs.
    - Hispanics received worse care than Whites for about 35% of quality measures. From 2000 to 2017, disparities were improving for 5 measures for Hispanics.
    - Asians received worse care than Whites for 27% of quality measures but better care than Whites for 28% of quality measures. Disparities were improving for only 2 measures for Asians.
About the National Healthcare Quality and Disparities Report

For the 16th year in a row, AHRQ is reporting on healthcare quality and disparities. The annual *National Healthcare Quality and Disparities Report* (QDR) is mandated by Congress to provide a comprehensive overview of the quality of healthcare received by the general U.S. population and disparities in care experienced by different racial and socioeconomic groups.

The report assesses the performance of our healthcare system and identifies areas of strength and weakness, as well as disparities, for access to healthcare and quality of healthcare. Quality measures are grouped by priority areas, including person-centered care, patient safety, healthy living, effective treatment, care coordination, and affordable care.

More than 250 measures used in these reports span a wide range of structure, process, and outcome measures for which existing national data sources can be used. This report presents selected findings in each priority area and examples of large disparities, disparities worsening over time, and disparities showing improvement. A U.S. Department of Health and Human Services (HHS) Interagency Work Group (IWG)\(^1\) that supports the reports selected the measures for tracking based on their importance, scientific soundness, and feasibility.

---

\(^1\) 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, Health Resources and Services Administration, Indian Health Service, National Institutes of Health, and Veterans Health Administration.