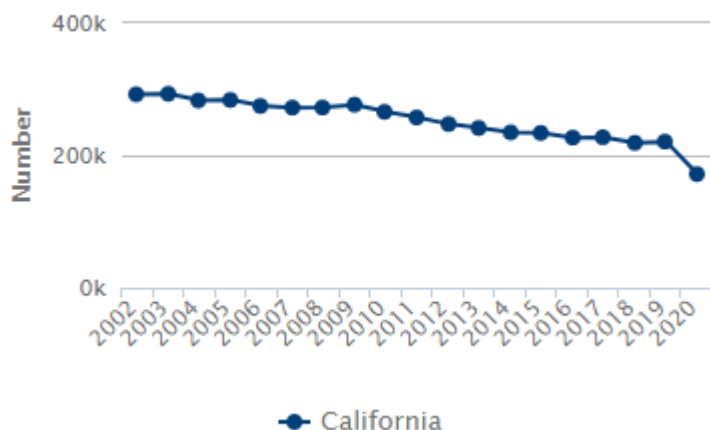


# Hospital Use Among California Children

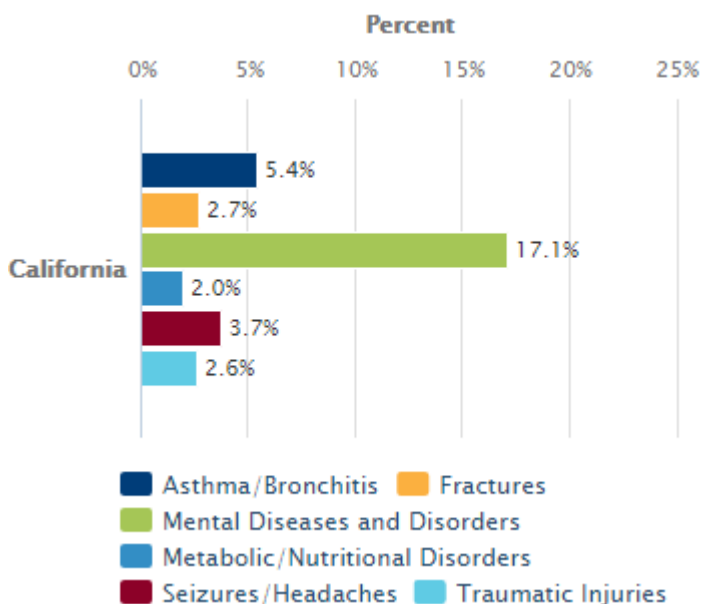
## Number of Hospital Discharges Among Children Ages 0-17



**Definition:** Number of hospital discharges among children ages 0-17, excluding newborns (e.g., in 2020, there were 171,769 hospitalizations among California children).

**Data Source:** California Dept. of Health Care Access and Information custom tabulation (Feb. 2021).

## Percentage of Hospital Discharges Among Children, by Primary Diagnosis: 2020



**Definition:** Percentage of hospital discharges among children ages 0-17 for the 11 most common primary diagnoses, excluding childbirth (e.g., in 2020, 5.4% of hospitalizations among California children were for a primary diagnosis of asthma/bronchitis).

**Data Source:** California Dept. of Health Care Access and Information custom tabulation (Feb. 2021).

## What It Is

Kidsdata.org provides the following measures of hospital use among children ages 0-17:

- **Emergency department (ED) visits**, in which a patient is treated and released without being admitted to the hospital. The number of ED visits overall, the number and percentage of visits for the most common primary diagnoses, and the number and percentage of visits by expected source of payment are available for the state, counties, and county groups.
- **Hospital discharges**, which reflect stays that generally involve a longer course of treatment for which a patient is admitted to the hospital. As with ED visits, data are presented for hospital discharges overall, the most common primary diagnoses for hospital stays, and expected sources of payment for hospitalization expenses.

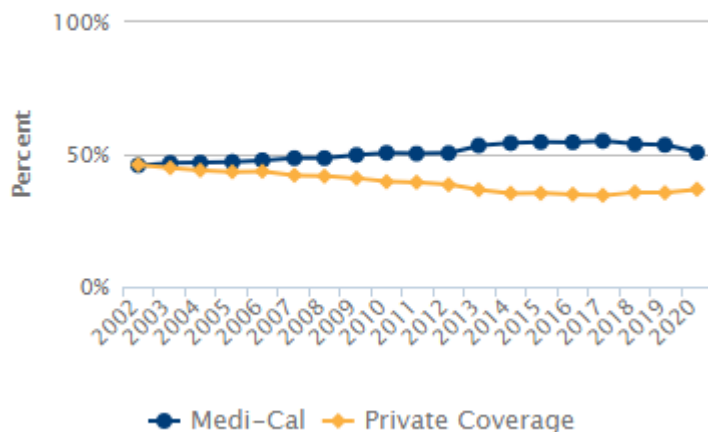
## Why This Topic Is Important

All children should have high-quality, accessible, affordable health care, including hospital care when needed. Children with special health care needs, in particular, may require more frequent hospital visits and specialized, intensive medical services. Ensuring that all children have consistent access to affordable, evidence-based, well coordinated, comprehensive, and family-centered care—all within the context of a medical home—can maximize positive outcomes. This type of care also may reduce costly hospitalizations and emergency department visits.

While emergency departments (EDs) are critical sources of acute care for children, frequent or non-urgent ED visits may be an indication of unmet health needs or difficulty accessing appropriate pediatric care. Children from vulnerable groups, especially young children ages 0-5 and those from low-income households, tend to have disproportionately high rates of ED use.

Data on hospital use can illuminate trends in health and health care needs, and can inform disease surveillance and public health prevention efforts. For example, data show that ED visits for psychiatric issues have been rising among young people nationwide, with teens and youth of color experiencing the largest increases. Additionally, mental illness has become the most common cause of

## Percentage of Hospital Discharges Among Children, by Source of Payment California



**Definition:** Percentage of hospital discharges among children ages 0-17, excluding newborns, by payer expected to cover the greatest share of expenses for treatment (e.g., in 2020, Medi-Cal was the expected source of payment for 50.7% of hospitalizations among California children).

**Data Source:** California Dept. of Health Care Access and Information custom tabulation (Feb. 2021).

## Percentage of Emergency Department Visits Among Children, by Primary Diagnosis: 2020

California	Percent
Asthma/Bronchitis	3.2%
Burns	0.4%
Diabetes	0.2%
Fractures	4.0%
Mental Diseases and Disorders	2.9%
Metabolic/Nutritional Disorders	0.4%
Pneumonia/Pleurisy	2.8%
Poisoning	0.7%
Seizures/Headaches	2.4%
Traumatic Injuries	12.3%
Viral Illnesses or Fevers of Unknown Origin	8.2%

**Definition:** Percentage of emergency department visits among children ages 0-17 for the 11 most common primary diagnoses (e.g., in 2020, 3.2% of emergency department visits among California children were for a primary diagnosis of asthma/bronchitis).

**Data Source:** California Dept. of Health Care Access and Information custom tabulation (Feb. 2021).

hospitalization among children in California and the U.S. Children admitted to the hospital for mental health reasons also are more likely to have unplanned readmissions than children with other diagnoses. These data point to urgent mental health care needs among youth nationwide.

## How Children Are Faring

In 2020, the first year of the COVID-19 pandemic, California children ages 0-17 made almost 1.2 million fewer visits to emergency departments (EDs) than in 2019—a drop of 43%. Traumatic injuries are the most common primary diagnosis among children visiting the ED, representing more than 12% of visits statewide in 2020, followed by viral illnesses or fevers of unknown origin (8%) and fractures (4%). As in previous years, Medi-Cal was the payment source for almost two thirds (63%) of childhood ED visits in 2020, compared with private insurance at 29%. At the local level, payment sources for ED visits vary widely; e.g., the share of visits covered by Medi-Cal in 2020 ranged from 33% to 80% across counties and county groups.

In 2020, there were 171,769 hospital discharges among California children, a 22% decrease from 2019. More than one in six (17%) of those hospital stays were for a primary diagnosis of mental disease or disorder, followed by asthma/bronchitis (5%) and seizures/headaches (4%). Although mental illness has been the most common cause of childhood hospitalization statewide since 2008, wide variation exists across regions. For instance, in 2020, the share of discharges for mental diseases and disorders was higher than 25% for Placer and Sonoma counties and lower than 10% for Butte, Imperial, and Santa Barbara counties. Among California children discharged in 2020, Medi-Cal covered the hospitalization expenses for more than half (51%) of those stays, compared with private insurance at 37%. Since 2002, the percentage of hospitalizations covered by private insurers has generally decreased, while the percentage covered by Medi-Cal has increased.

*View references for this text and additional research on this topic:*

<https://sanfrancisco.kidsdata.org/topic/52/hospital-use/summary>



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