## Race and Ethnicity Patient Self-Identification For use on and after January 1, 2019

Please mark clearly

Hospitals and other healthcare facilities are required by law to provide the California Department of Health Care Access and Information (HCAI) with information regarding the race and ethnicity of their patient population. (California Health and Safety Code Division 107, Part 5, Sections 128735, 128736, and 128737.) The data will be used for health projects including diagnostic research, identification and correction of disparities in healthcare access and outcomes, management of healthcare delivery and public health programs, quality of care, healthcare trends, and supporting informed decisions. Individually identifiable patient information is protected and encrypted within the State system.

Each patient's **self-reporting** of their Ethnicity and Race supports integrity and quality of demographic data. A family member or guardian shall complete this information when the patient is not capable.

## Mark one selection in the Ethnicity box and up to five selections in the Race box.

STEP 1: Choose one Ethnicity category:  HISPANIC or LATINO
NON HISPANIC or LATINO
STEP 2: Choose up to FIVE Race categories:
AMERICAN INDIAN or ALASKA NATIVE
ASIAN
BLACK or AFRICAN AMERICAN
NATIVE HAWAIIAN or OTHER PACIFIC ISLANDER
WHITE
OTHER - Any race not covered in the above categories.