Agenda II: 2022 Meeting Recap

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Hospital Equity Measures 2022 Roadmap

July 2022

Establishment of the Advisory Committee (AC).

Discussed role of AC and overview of the reporting program.

Discussed quality measurement at hospitals and health equity resources.

August 2022

Overview of federal and national health equity measures and standards including CMS Final Rule

Analysis of association of quality measures with disparities

Discussion of principles and criteria for measures selection

September 2022

Discussion of health equity terms and associated definitions

Review of hospital quality measures for consideration and the measures selection criteria.

October 2022

Discussion of health equity structural measures for inclusion.

Continued discussion and preliminary vote on hospital quality measures

November 2022

Review and vote on health equity structural measures

Recap of the voted-on hospital quality measures

Discussion and vote on remainder of hospital quality measures.

December 2022

Discuss approach for children's and psychiatric hospitals.

Review of Recommendations – to be published by December 31, 2022* per statute

Hospital Equity Measures 2023 Roadmap

February 2023

Recap of 2022 meetings

Discussion on identification of disparities in the data and approaches for reduction

Data stratification discussion

Topics of interest from the Committee

April 2023

Recap of February 2023 meeting

Discussion on report formats

Discussion of measures evaluation process

Topics of interest from the Committee

August 2023

Recap of April 2023 meeting.

Regulations Workshopping - data collection, submission, and reporting.

Topics of interest from the Committee

October 2023

Recap of August 2023 meeting

Discussion on technical assistance to hospitals

Preview plan for 2024

Topics of interest from the Committee

December 2023

(if needed)

Recap of 2023 activities

Review and confirm plan for 2024

Topics of interest from the Committee

January to December 2024

Establish regulations to specify reporting requirements

Outreach to hospitals to prepare for first annual submission

Continue meeting with Health Care Equity Measures Advisory Committee

Hospital Equity Measures 2024 to 2027 Roadmap

January - December 2024

Establish regulations to specify reporting requirements

Develop data collection system

Outreach to hospitals to prepare for first annual submission

Continue meeting with the AC

January – October 2025

Provide technical assistance to hospitals in the development of first annual hospital equity reports

Submission of first equity reports by hospitals due September 30, 2025*

Continue meeting with the AC

November 2025 - December 2026

Review of first year data sets with the AC

January – December 2027

By September 30, 2027,* AC to develop and recommend second set of recommendations regarding the submitted hospitals' health equity plans.

*Note: Due dates are set per statute as the CMS Health Equity Measures were finalized in August 2022.

Scope of the Committee

- Make recommendations to the HCAI Director on the appropriate measures that hospitals are required to report in their annual equity reports.
- Provide recommendations to the HCAI Director on the measurable objectives and specific timeframes in which disparities for vulnerable populations identified in the data need to be addressed.
- Advise HCAI Director in identifying the 10 widest disparities in health care quality for vulnerable populations, in terms of access or outcome and priority performance areas.
- After first year reporting make a second set of recommendations to the HCAI Director regarding the submitted hospitals' health equity plans. (Due September 30, 2027*)



All Quality Measures Required by All Hospitals

- At the November meeting the committee voted to require all hospitals to report on all quality measures
- Considerations for this approach:
 - Ensures that all hospitals report on all applicable measures that the committee deems highest priority.
 - Does not allow hospitals to select/pick measures to report on.
 - There will need to be hospital waivers for core measures where services are not provided (e.g., non-birthing hospitals) and alternate measures where circumstances goes outside the measure options.
 - Some hospitals will submit fewer measures because not all measure will apply



Structural Measures to include in Hospital Equity Reports – recommended 11/03/2022

The committee recommends that Hospital Equity Reports include the **following five (5) structural measures that are included in the CMS hospital health equity reporting** with additional specifications to be defined by the committee (to adopt as one measure):

- 1. Hospital attests that hospital has a strategic plan for advancing health equity.
- 2. Hospital attests that hospital engages in demographic and social determinant/drivers of health data collection.
- 3. Hospital attests that hospital engages in data analysis activities to identify equity gaps.
- 4. Hospital attests that hospital engages in local, regional, or national quality improvement activities focused on reducing health disparities.
- 5. Hospital attests that hospital engaged in leadership activities, annually reviewing strategic plan for achieving health equity, and annually reviewing key performance indicators stratified by demographic and/or social factors.
- **6. HEDIS measure Social Need Screening and Intervention (SNS-E)**: The percentage of members who were screened, using pre-specified instruments, at least once during the measurement period for unmet food, housing and transportation needs, and received a corresponding intervention if they screened positive.

Hospital Equity Reports include the following 3 structural measures based on the Joint Commission Accreditation's Health Care Disparities Reduction and Patient-Centered Communication Accreditation Standards:

- 7. Designate an individual to lead hospital health equity activities.
- 8. Provide documentation of policy prohibiting discrimination based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sexual orientation, and gender identity or expression and how workers are trained on that policy.
- 9. Report percentage of patients by preferred language spoken.

Recommended Measures to include in Hospital Equity Reports	Measure Type	Date Recommended
Breastfeeding rate	Core Hospital Quality Measure	10/06/2022
HCAHPS – Would recommend hospital	Core Hospital Quality Measure	10/06/2022
HCAHPS – Received information and education	Core Hospital Quality Measure	10/06/2022
Hospital-wide readmission rate	Core Hospital Quality Measure	10/06/2022
Sepsis management	Core Hospital Quality Measure	11/03/2022
Cesarean birth rate (NTSV)	Core Hospital Quality Measure	11/03/2022
Pneumonia death rate	Core Hospital Quality Measure	11/03/2022
Death after serious treatable condition	Core Hospital Quality Measure	11/03/2022
Vaginal birth after delivery (VBAC) rate	Core Hospital Quality Measure	11/03/2022
Time in the ED without being seen	Core Hospital Quality Measure	11/03/2022
Behavioral health (TBD)	Core Hospital Quality Measure	11/03/2022

Recommended Measures to include in Hospital Equity Reports (Psychiatric Hospitals) by Advisory Committee to HCAI for consideration	Measure Type	Date Recommended
30-Day All-Cause unplanned readmission following psychiatric hospitalization in an inpatient psychiatric facility (IPF)	Core Psychiatric Hospital Quality Measure	12/01/2022
Timely transmission of transition record	Core Psychiatric Hospital Quality Measure	12/01/2022
Screening for metabolic disorders	Core Psychiatric Hospital Quality Measure	12/01/2022
SUB-3: Alcohol and Other Drug Use Disorder Treatment Provided or Offered at Discharge and SUB-3a: Alcohol and Other Drug Use Disorder Treatment at Discharge	Core Psychiatric Hospital Quality Measure	12/01/2022
TOB3: Tobacco Use Treatment Provided or Offered at Discharge and TOB-3a: Tobacco Use Treatment at Discharge	Core Psychiatric Hospital Quality Measure	12/01/2022
HBIPS-2: Hours of Physical Restraint Use* *pending ability to aggregate at regional or statewide level.	Core Psychiatric Hospital Quality Measure	12/01/2022
HBIPS-3: Hours of Seclusion Use* *pending ability to aggregate at regional or statewide level.	Core Psychiatric Hospital Quality Measure	12/01/2022
HBIPS-5: Patients discharged on multiple antipsychotic medications with appropriate justification* *pending ability to aggregate at regional or statewide level.	Core Psychiatric Hospital Quality Measure	12/01/2022

Recommended Measures to include in Hospital Equity Reports (Children's Hospitals) by Advisory Committee to HCAI for consideration	Measure Type	Date Recommended
Child HCAHPS	Core Hospital Quality Measure	12/01/2022
All-cause readmission rate (including the Behavioral Health measure)	Core Hospital Quality Measure	12/01/2022
Sepsis management* *Not SEP-1, specifications to be defined in 2023	Core Hospital Quality Measure	12/01/2022
Breastfeeding – birthing only	Core Hospital Quality Measure	12/01/2022
NTSV Cesarean birth – birthing only	Core Hospital Quality Measure	12/01/2022
VBAC rate – birthing only	Core Hospital Quality Measure	12/01/2022

Posting of Hospital Equity Measures Advisory Committee Recommendations

- A summary of the Advisory Committee
 Hospital Equity Measures Recommendations
 can be found on the HCAI Website.
- HCAI also developed a full summary of the process the committee undertook to finalize the measures. This summary will be posted on the HCAI website and shared out with the committee.

