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Hospital Equity Measures Advisory Committee Draft Meeting Minutes for August 3, 2023

Members Attending: Denny Chan, Justice and Aging; Dannie Ceseña, California LGBTQ Services Network; Dr. Amy Adome, Sharp Healthcare; Denise Tugade, Service Employees International Union; Kristine Toppe, National Committee for Quality Assurance; Dr. Neil Maizlish, Public Health Alliance of Southern California; Robyn Strong, Department of Health Care Access and Information (HCAI); Nathan Nau, California Department of Managed Health Care (DMHC); Julie Nagasako, California Department of Public Health (CDPH); Taylor Priestley, Covered California

Members Absent: Dr. Anthony Iton, California Endowment; Cary Sanders, California Pan-Ethnic Health Network; Silvia Yee, Disability Rights Education & Defense Fund; and Pamela Riley, California Department of Health Care Services (DHCS)

Presenters: Elia Gallardo, Deputy Director of Legislative and Government Affairs and Chief Equity Officer, HCAI; Christopher Krawczyk, PhD, Chief Analytics Officer, HCAI; Denard Uy, Utilization and Disclosures Reporting Section Manager, HCAI; Bruce Spurlock, MD, Hospital Quality Measures Expert, HCAI Consultant; Natalie Graves, MPH, Hospital Quality Measures Expert, HCAI Consultant; Ignatius Bau, JD, Health Equity Expert, HCAI Consultant; Asha Jennings, JD, Assistant Chief Counsel, HCAI

Public Attendance⁴⁶

Agenda Item I. Call to Order, Welcome, and Meeting Minutes

Denise Tugade, Committee Chair, welcomed everyone and called the meeting to order with roll call of committee members and state partners.

Elia Gallardo, Deputy Director Legislative and Government Affairs and Chief Equity Officer, HCAI, provided a review of meeting procedures and ground rules, reminding attendees that all meetings going forward will be in person due to the end of the Bagley Keene Open Meeting Act extension ending on July 1, 2023.

Questions/Comments from the Committee:

The committee reviewed the April 6, 2023 meeting minutes and requested clarification in the language regarding stratification, emphasizing that it does not create high-risk groups but rather helps identify their presence, and highlighted the importance of considering effect modification. They also expressed that the minutes should have included a key point about analyzing patient populations in relation to neighborhood demographics, which was not adequately summarized. The committee could not vote on approving the meeting minutes due to the lack of a quorum, and a vote is scheduled for the October 5 meeting.



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Questions/Comments from the Committee:

There were no questions or comments from the Committee.

Public Comment:

There were no public comments received for this agenda item.

Agenda Item II. Reappointment of Committee Members

Elia Gallardo, Deputy Director of Legislative and Government Affairs and Chief Equity Officer, HCAI, thanked committee members who have agreed to be reappointed for a subsequent two-year term. The ending of Dr. Lown's tenure was shared as a reminder, and Dr. Ash Amarnath's appointment will begin with the October meeting.

Public Comment:

There were no public comments received for this agenda item.

Agenda Item III. April 2023 Meeting Recap

Elia Gallardo, Deputy Director of Legislative and Government Affairs and Chief Equity Officer, HCAI, provided a recap from the April 2023 meeting, including a summary of the statutory requirements for the program, discussion of supporting hospitals in collecting, analyzing, and interpreting disparities, and potential reporting formats. There was a guest presentation from the Lown Institute.

It was shared that HCAI has been holding regulation workshoping sessions with hospitals to better understand hospital landscape to further develop the regulations.

Looking ahead, over the next four years HCAI will be establishing the reporting requirements, developing data systems, assisting hospitals with report submissions, reviewing first year data with the advisory committee, and supporting the committee in developing the second set of recommendations required in 2027.

Questions/Comments from the Committee:

There were no questions or comments from the committee.

Public Comment:

There were no public comments received for this agenda item.

Agenda Item IV: Program Update

Christopher Krawczyk, PhD, Chief Analytics Officer, HCAI, provided an overview on the extensive outreach with diverse hospitals via surveys and focus groups, emphasizing the



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need for greater program awareness among hospitals and identifying potential technical support requirements for data analysis.

Questions/Comments from the Committee:

The committee expressed interest in understanding any more information regarding the vendors hospitals use for their electronic health records systems, specifically considering how hospitals that are part of health systems are thinking about interoperability and reporting methods, particularly with regard to vendor and in-house capabilities, given HCAI's upcoming data analytics and reporting requirements. The committee also expressed concern regarding potential bias when considering hospitals' data analysis capabilities, and not wanting the limited capabilities of hospitals to be the driver of setting too low of a bar for hospitals. Committee members called for a more balanced approach that not only considers hospital capability, but also maintains a patient-focused decision-making approach.

The committee expressed support about the rich qualitative HCAI data gathered from six listening sessions with over 120 participants. The committee stressed the importance of comprehending hospitals' challenges and barriers, especially concerning the data analysis capabilities required and highlighted the need for intentional technical assistance in the future. The committee also discussed hospitals' utilization of electronic health record (EHR) vendors, revealing diverse approaches within healthcare systems, including reliance on vendors for analytics, in house investments, and transitions to different EHR systems.

Public Comment:

There were no public comments received for this agenda item.

Agenda Item V. Hospital Equity Measures Reports: Updates on Considerations for Preparation and Submission Process

Denard Uy, Utilization and Disclosures Reporting Section Manager, HCAI, shared feedback HCAI received from hospitals gathered during workshop interviews regarding the methods for preparing and submitting their equity reports.

Questions/Comments from the Committee:

The committee praised the presentation's clarity and strongly advocated for standardized reporting structures to ensure consistency among hospitals. The committee sought clarity on a data table column related to reporting percentages by race, ethnicity, and payer category, emphasizing the importance of data accuracy and precision to minimize errors in hospital reporting. HCAI clarified that it was a mockup example and the department has yet to finalize and develop the categories.

The committee sought clarification about integrating the health equity plan with the reporting process, emphasizing the need for structured reporting forms and the inclusion of an executive summary for improved understanding and communication. The committee



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also proposed the idea of annotating specific measures to enhance clarity and accuracy, especially when hospitals report “zeros”, as annotations could provide valuable context.

Public Comment:

One member of the public expressed agreement with the need for standardization and structure of reports to ensure data integrity and facilitate meaningful comparisons between hospitals while emphasizing the importance of avoiding the use of the report solely as a marketing tool. They also emphasized the need for clarity in distinguishing between the community benefits report and the equity report, as well as understanding the roles of each. They also inquired as to whether HCAI plans to provide a comprehensive report on all hospitals, aggregating the uploaded information into an annual report for public access. They emphasized the importance of providing more detailed demographic data, including granular race, ethnicity, language, and other categories, in future reports.

Agenda Item VI. Hospital Equity Measures Evaluation: Updates on Supporting Hospitals to Collect, Analyze, and Interpret Disparities Data

Christopher Krawczyk, PhD, Chief Analytics Officer, HCAI, presented on preliminary information received from hospitals regarding providing support to hospitals to collect, analyze, and interpret disparities data. Bruce Spurlock, MD, Hospital Quality Measures Expert, HCAI Consultant, and Natalie Graves, MPH, Hospital Quality Measures Expert, HCAI Consultant, provided an update on feedback received around the analytic tool proposed to be developed to support hospitals with data analysis.

Questions/Comments from the Committee:

Committee members noted that a key component of successful implementation is working on the front end to ensure that patients within health facilities are understanding why more detailed demographic data is being collected, especially as it relates to Sexual Orientation and Gender Identify Data as it was noted that these could be sensitive topics to raise with patients without the proper context. The committee also noted that it is not just the patients themselves that need to be informed, but hospital staff themselves would need to be educated on why this data collection is important and how to accomplish it in a culturally sensitive manner. It was also noted that in addition to data collection training, including cultural competency training not just for the LGBTQ community, but for those living with disabilities as well as for other marginalized populations would be an important component. It was also noted that Covered California has an eligibility and enrollment function and is working with their community partners who support Covered California in enrolling consumers to participate in communication with members and support enrollment partners with data collection best practices. There was also interest in creating guidance that documents the best practices for data collection, recognizing it may vary from hospital to hospital, but noting the importance of standardization wherever possible.



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Committee members noted that it was not a surprise that hospitals have low experience with AHRQ software as CMS does not require hospitals to use their platform and many hospitals are using vendors that serve as the intermediary and are able to supply CMS with that data, after which CMS takes care of loading into the AHRQ platform. Members also noted that HEDIS measures are mostly used in the inpatient setting and are considered more of a “plan” measure. While there is interest in exploring how HEDIS measures could be applied outside of the plan setting, the current landscape has it more as a plan measure and less relevant for this program.

Regarding the analytic tool, members noted that it could look very different depending on what the goal is. Ultimately it was noted, as it was in HCAI’s outreach, that having some support for hospitals to build their capacity would be important. Once the measures are finalized and there is a clear understanding of what the hospitals will be required to analyze, further clarity will emerge regarding what the tool could support.

The committee expressed a desire to better understand what the department will be doing with the data once the reports start coming in and how the information will be shared with the committee. They also expressed interest in better understanding what the completeness level of the data will be.

The committee also noted that the current outreach had identified only about a third of participants had familiarity with the program, and that it will be important to do additional outreach and communications about the program to ensure hospitals are aware of what measures will be required, how the data will be used, and why this effort is being undertaken.

Public Comment:

One member of the public provided comment to note that it could be helpful to survey the hospitals to better understand their capacity provide training for their staff in data collection and cultural competency, as well as including a survey question about the technical assistance needed for data analytics capacity.

Agenda Item VII. Updates on the National Hospital Equity Standards

Ignatius Bau, JD, Health Equity Expert, HCAI Consultant, presented on the Joint Commission standards and Centers for Medicare and Medicaid measures related to health equity.

Questions/Comments from the Committee:

The committee was informed if HCAI accepts the recommendation of the committee to adopt the CMS measure as a requirement, that accreditation could be a way for hospitals to demonstrate that they have met those requirements.

The committee commented that they appreciate the inclusion of workforce diversity training in the health care equity certification program.



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Public Comment:

There were no public comments received for this agenda item.

Agenda Item VIII. Hospital Equity Measures Program Regulatory Process Preparation, Timeline

Asha Jennings, Assistant Chief Counsel, HCAI, and Christopher Krawczyk, PhD, Chief Analytics Officer, HCAI, gave a presentation on the Hospital Equity Measures Program regulatory process and updates.

Questions/Comments from the Committee:

The committee was informed that the rulemaking process would be complete by the end of 2024 with actual implementation beginning in 2025. It was noted that the goal of rulemaking is to indicate how the program will be implemented and operationalized to provide understanding for the public. The regulations influence components of the implementation, but not all components will need to be directly included in the regulations.

The committee was informed that the regulations will speak to enforcement and compliance; in the initial statute there was language requiring HCAI to publicly identify the entities who do not submit a report and a fee of up to \$5,000 was also included for failure to submit.

Public Comment:

There were no public comments received for this agenda item.

Agenda Item IX. Committee Wrap-Up

Denise Tugade, Committee Chair gave the closing discussion including recap of items covered and action items for the next advisory committee meeting scheduled for Thursday, October 5, 2023.

Questions/Comments from the Committee:

The committee asked for EHR vendors to present to the committee at future meetings to provide greater clarity around capabilities at the hospital. The committee was encouraged to provide any additional recommendations for external speakers that could add further value to the work of the committee, such as the Lown Institute which was invited to present back at the April meeting.

Agenda Item X. Public Comment

There were no public comments received for this agenda item.

Agenda Item XI. Adjournment

Chair Tugade adjourned the meeting at 11:50 a.m.