Agenda Item 5: Commission Recommendations

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Evolution of HSDC's Work

March 2021

 Commission formed under AB 962 authority

November 2022

 First year <u>recommendations</u> <u>report</u> published

March 2023

 First "En Banc" style meeting, based on commission recommendatio ns

October 2023

 AB 1392 chaptered; expands commission role to develop voluntary guidelines and provide recommendations for outreach & assistance.

May 2024

 Discussion with commission to update recommendations



AB 1392 Summary – Commissions Role

- AB 1392 expands data collection requirements including a plan for increasing procurement from diverse suppliers.
 - First updated plans are due July 2025
- Authorizes HCAI to undertake **outreach and assistance** and work with the commission to provide recommendations on those activities.
- Directs HCAI, in collaboration with the commission, to **develop voluntary guidelines for hospitals** to use when conducting their procurement.
- Adds two additional commissioners to HSDC.
- Authorizes HCAI to create a supplier/database clearinghouse, pending Legislative appropriation.
- AB 1392 Fact Sheet



Recommendations to Hospitals

- Further refine "audience" for recommendations
- How to build governance / information sharing across the organization
- Balancing precision with broadness when it comes to recommendations
- More specificity around alignment for outreach efforts.

Recommendations to Other Entities

- Consider the role of distributors
- Changing "unique" to "distinct" in Recommendation 26
- Consider whether there is value in tracking the number of diverse vendors a GPO includes

Recommendations to HCAI

- Develop an economic impact report
- Adopt a rating system that provides a diversity study of hospitals and suppliers.

Support for Diverse Suppliers

- Importance of in- person events where there are actionable opportunities and minimum barriers to entry.
- Public resource to share various events and opportunities for contracting.
- Educational components to supporting understanding the health care supply chain
- Support with negotiations
- Support for B2B collaborations or joint ventures

Voluntary Guidelines

- Have a supplier diversity policy statement
- Participate or host an annual outreach event at minimum
- Develop an RFP process that includes at least 1 diverse vendor to be included as part of the review
- Use data to drive continuous process improvement for the supplier diversity program
- Consider how to link supplier diversity efforts to the broader organizational health equity priorities.
- While the guidelines are voluntary, we are committed to stretch goals

Voluntary Guidelines



DRAFT Voluntary Guidelines

Commission Recommendations

Supplier Diversity Policy
Statement

Review internal procurement policies

Supplier diversity webpage

Require third party certification

External Resources

American Hospital Association

Children's Hospital of Philadelphia

Harvard Business Review

Areas Needing Further Discussion

Recommendations around metrics

Recommendations around prime supplier requirements

Recommendations around GPO requirements

Addressable spend

Other commission input



Draft Voluntary Guidelines



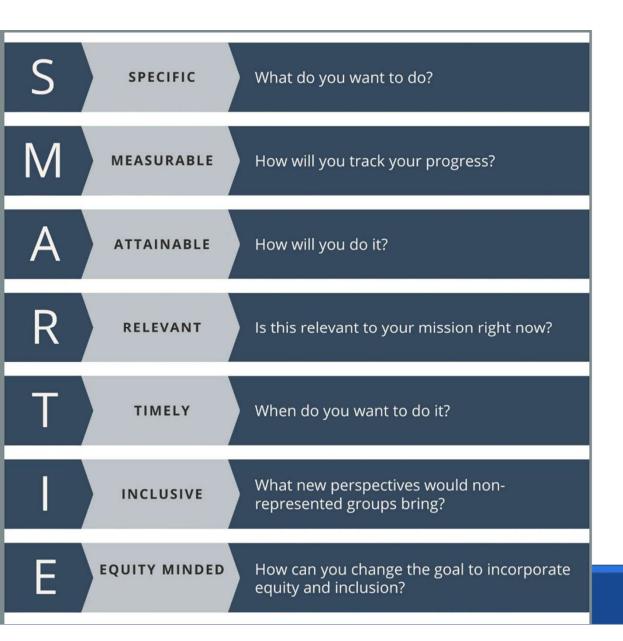
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Voluntary
Guidelines October
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Hospital Supplier Diversity Commission Draft Voluntary Guidelines

Organizational Strategy

- Create a supplier diversity policy statement that promotes the use of diverse suppliers. (HSDC Year 1 Recommendation)
- Define goals for a supplier diversity program and draft a clear mission statement.
 Create a code of conduct that ensures fair access to all suppliers (<u>AHA</u> Increasing Supplier Diversity in Health Care Manual)
- Consider opportunities to diversify other hospital contracts, such as those for advertising and marketing. (<u>AHA Increasing Supplier Diversity in Health Care</u> <u>Manual</u>)
- A visid framing the cumpliar diversity program as a gueste system or social





Framework for developing action oriented Voluntary Guidelines



Recommendations around Metrics

- Executive leadership should develop and implement outreach and reporting metrics that support contracting with diverse suppliers.
- Executive leadership should develop and implement hospital supplier diversity procurement metrics that are owned by executive leadership.
- Executive leadership should develop, implement, and fund an internal hospital accountability system to meet specified metrics related to outreach, diverse business usage and provision of technical support for implementation.
- Executive leadership should develop and implement an inclusion policy for hospitals to identify and track spend with diverse business enterprises (E.g., MBE, WBE, DVBE, LGBTQBE).

- Should these
 recommendations be
 formatted into
 Voluntary Guidelines?
- 2. How should they be reformatted to be more actionable considering the SMARTIE framework?



Recommendations around requirements for Prime Suppliers

- Executive leadership should require prime suppliers to measure and report on spend with diverse suppliers.
- Executive leadership should require the review of contract language with prime suppliers to require supplier diversity metrics for any relevant sub-contracts.
- Should these
 recommendations be
 formatted into
 Voluntary Guidelines?
- 2. How should they be reformatted to be more actionable considering the SMARTIE framework?



Recommendations around requirements for GPOs

- Executive leadership should update how hospitals track and report their supplier diversity outreach efforts, in order to report on how many diverse entities are onboarded as suppliers or manufacturers (e.g., GPOs and direct suppliers).
- Executive leadership should establish a percentage goal for diverse suppliers in GPOs

- Should these recommendations be formatted into Voluntary Guidelines?
- 2. How should they be reformatted to be more actionable considering the SMARTIE framework?



Healthcare Anchor Network

Addressable Spend – Commission Discussion



- ➤ In calculating the percentage of their total spend annually that is diverse, health systems have often excluded different purchasing categories to create an "addressable spend" denominator.
- ➤ To address this problem, HAN has sought to create a shared definition regarding spend exclusions for the healthcare sector.
- ➤ Reasonable Exclusions:
- Spend that is not truly procurement (e.g., taxes, compensation);
- Spend that is highly regulated (e.g., blood and organ procurement);
- Spend with outsized impact (e.g., prime pharmaceutical distributor); and
- Spend that is resource intensive to track (e.g., building leases).

333 Year Parity Report

Facilitating Growth for Minority-owned Businesses

How rethinking supplier diversity and creating

- Corporations often gravitate to 'tail spend' or 'indirect spend' categories when looking to increase their supplier diversity spending.
- Areas such as construction, low-growth manufacturing, catering/food services, or janitorial services, while easy targets for supplier diversity, often tend to be in low margin and low growth areas of the economy.
- Corporations should commit to procuring from MBEs in high-growth, high-margin areas of the economy, such as advanced manufacturing, technology and professional services.



Outreach & Assistance Recommendations



Outreach and Assistance Activities

- HCAI is required to establish two sets of outreach & assistance activities based on the commission's recommendations:
 - Outreach and assistance to hospitals, manufacturers, vendors, or group purchasing organizations of hospital goods and services who are:
 - a. Seeking to adopt the commission's recommendations, or
 - Looking to increase procurement from minority, women, LGBT, and disabled veteran business enterprises
 - 2. Outreach and assistance to minority, women, LGBT, and disabled veteran business enterprises who are:
 - a. Seeking to be a supplier for a hospital, manufacturer, vendor, or group purchasing organization of hospital goods and services

Hospitals,
Manufacturers,
Vendors or GPOs,

Adopting the commission's recommendations

Increase procurement with diverse suppliers

Diverse Suppliers

Becoming a supplier for hospitals, manufacturers, vendors or GPOs



Goals for Outreach & Assistance

- 1. Ensure awareness and understanding of the reporting requirements, commission recommendations, and voluntary guidelines
- 2a. Aid hospitals to implement commission recommendations and voluntary guideline
- 2b. Aid diverse suppliers in accessing opportunities with hospitals
- 3. Facilitate peer-to-peer learning to drive improvements in supplier diversity across the state





Goal 1: Ensure awareness and understanding of the reporting requirements, commission recommendations, and voluntary guidelines

HCAI Help Desks

Hospital Supplier Diversity Inbox

Commission Meetings

 Opportunity to share resources with members of the public including hospitals and diverse suppliers

On-Demand Resources

- Hospital Supplier Diversity Program Webpage
- Regulations summary document
- Voluntary Guidelines (to be drafted)



Goal 2a: Aid hospitals to implement commission recommendations and voluntary guidelines

HCAI Help Desks

Hospital Supplier Diversity Inbox

Webinars

 HCAI hosted webinars to share voluntary guidelines and provide context for them

Partnerships

 Partner with hospital associations to socialize recommendations and voluntary guidelines.



Goal 2b: Aid diverse suppliers in accessing opportunities with hospitals

HCAI Help Desks

Hospital Supplier Diversity Inbox

Webinars

 HCAI hosted webinars to share how to utilize hospital plans to learn about their procurement processes.

Partnerships

 Partner with third party certification entities, chambers of commerce, and other state entities on diverse supplier engagement opportunities.



Goal 3: Facilitate peer-to-peer learning to drive improvements in supplier diversity across the state

Supplier Diversity Symposium

 Partnerships with PUC, CDI, DGS, Office of the Small Business Advocate and CalTrans

Matchmaking Events

 Opportunity to connect diverse suppliers with hospitals seeking procurement needs

Hospital Learning Collaborative

 Hospital learning network to share best practices for supplier diversity.



Discussion Questions

- 1.How should HCAI allocate resources to effectively conduct outreach and assistance activities to hospitals and diverse suppliers?
- 2. What recommendations do you have for other outreach and assistance activities HCAI should conduct?



Next Steps

- Finalize draft voluntary guidelines
- Discuss recommendations for outreach & assistance

November 2024 Meeting

May 2025 Meeting

- Vote on final voluntary guidelines
- Finalize draft recommendations for outreach & assistance.

 Vote on recommendations for outreach and assistance.

> August 2025 Meeting



Public Comment

