Agenda II: February 2023 Meeting Recap & Follow-up Items

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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.

Summary of Simpson's Paradox

- A statistical phenomenon where an association between two variables in a population emerges, disappears or reverses when the population is divided into subpopulations.
- Occurs in research analysis when the distribution of data into groups results in some groups having an unequal representation when compared with others. This event is known as a confounding variable and it may be because of the imbalance association between two variables.
- Happens because disaggregation of the data (e.g., splitting it into subgroups) can cause certain subgroups to have an imbalanced representation compared to other subgroups.



How might Simpson's Paradox occur in hospital equity measure analyses?

- Evaluating an entire health system vs its individual hospitals
- Performing multi-level analyses:
 - Readmissions by SDOH and behavioral health
 - Age and payor type
- Aggregating (or disaggregating) across different regions
- Disaggregating by racial/ethnic subcategory
- Comparing different hospital types by equity category
 - Safety net, rural/urban, investor owned/not for profit, academic, small/large



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

January 2026 to September 2027

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



January 2026



Post Equity Reports to HCAI website and Open Data Portal (ODP)



Hospitals and hospital systems to post Equity Reports to their website



October to December 2025

Basic Report Compliance Check (data validation to be determined)



Target to finalize regulations by **January 2025**

- Specify the measures to be analyzed
- Reporting specifications

Flow Chart for first year reporting. Will be generalizable to future year reporting, based on reporting deadlines as specified in regulations.





Hospitals and hospital systems:

- Identify data sources for measures that are specified in regulations
- Analyze and stratify each of those measures for the patient population based on available data
- For Systems: Aggregate all of the data across all individual hospitals
- Apply data de-identification guidelines to the data

January through December (calendar year)

 Hospitals and hospital systems to input the deidentified data into the standardized reporting format as specified by HCAI

September 30, 2025 – Report due date

- Individual and Hospital Systems Reports for the prior year are due September 30
- For Systems: Submit an equity report that is disaggregated at the individual hospital level and aggregated across all hospitals in the system.

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