

Item #5: Presentation on HCAI Providing Quality Assurance and Quality Control Around Data De- identification Validation

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Technical Assistance (TA) Phases

Hospital Equity Measures (HEM) Reporting

Data De-identification Guidelines (DDG) TA

Launch	Maintenance	Post-submission
<ul style="list-style-type: none">• Engage stakeholders, consulting hospitals• Website resources• TA webinar	<ul style="list-style-type: none">• Continue to consult hospitals• Review completed reports	<ul style="list-style-type: none">• Continue to review completed reports• Quality control/quality assurance

TA Phase: Launch

- Written resources published on the HCAI Hospital Equity Measure (HEM) [website](#)
- 1:1 consultations via email and phone

TA Phase: Launch

- Written resources published on the HCAI HEM [website](#)
- **1:1 consultations via email and phone**
 - Approximately 24 hours of direct technical assistance with hospitals
 - Email and phone calls with 11 hospitals (General Acute Care, Acute Psychiatric Hospital, and Children's; size range)

TA Phase: Launch

- Written resources published on the HCAI HEM [website](#)
- **1:1 consultations via email and phone**
 - Approximately 24 hours of direct technical assistance
 - Email and phone calls with 11 hospitals (GAC, APH, and children's; size range)

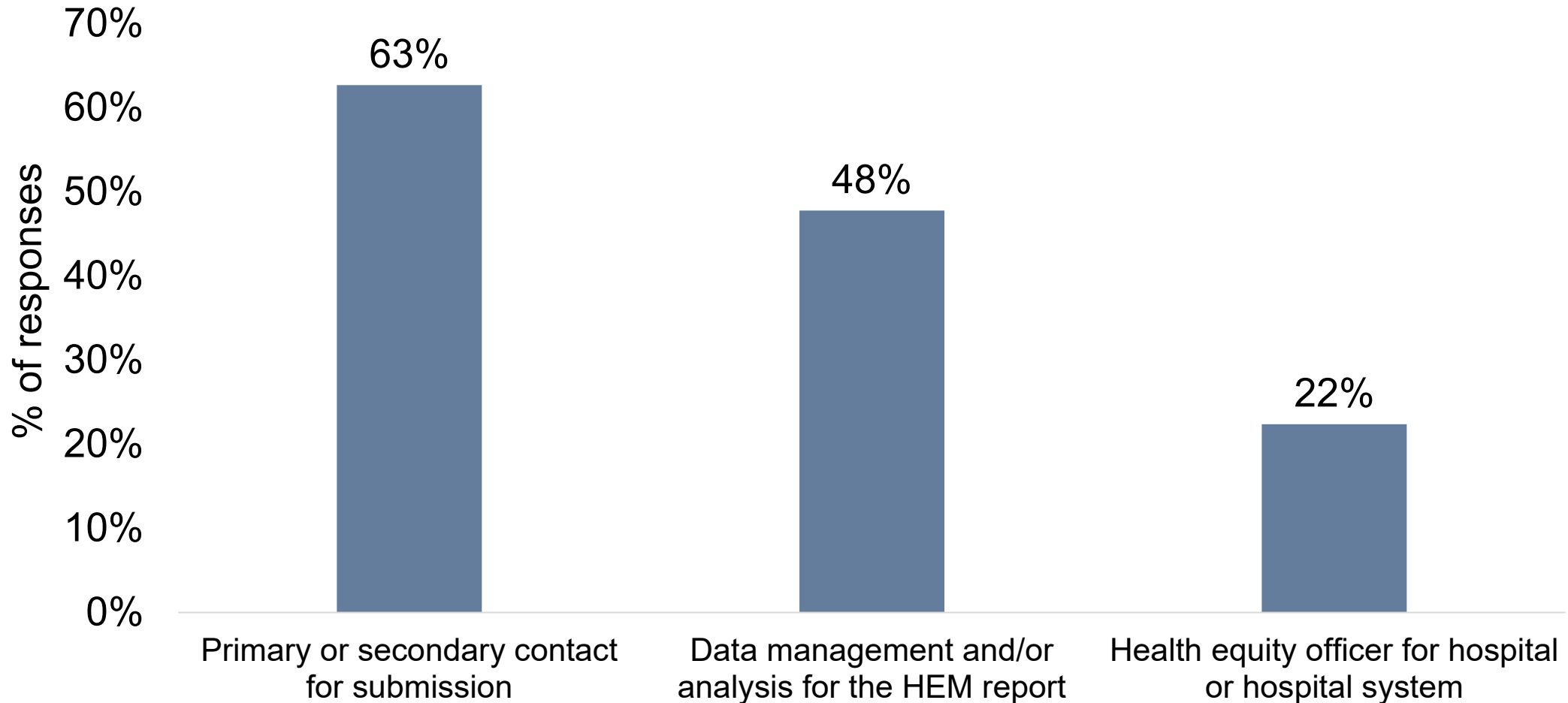
Example 1: Applying DDG

Hospital sought support in data identification risk assessments for stratification groups. We provided step-by-step instructions on how to apply the HCAI-approved Publication Criteria Score method in an example scenario by email. Hospital continues to reach out with other data de-identification guideline (DDG)-related questions.

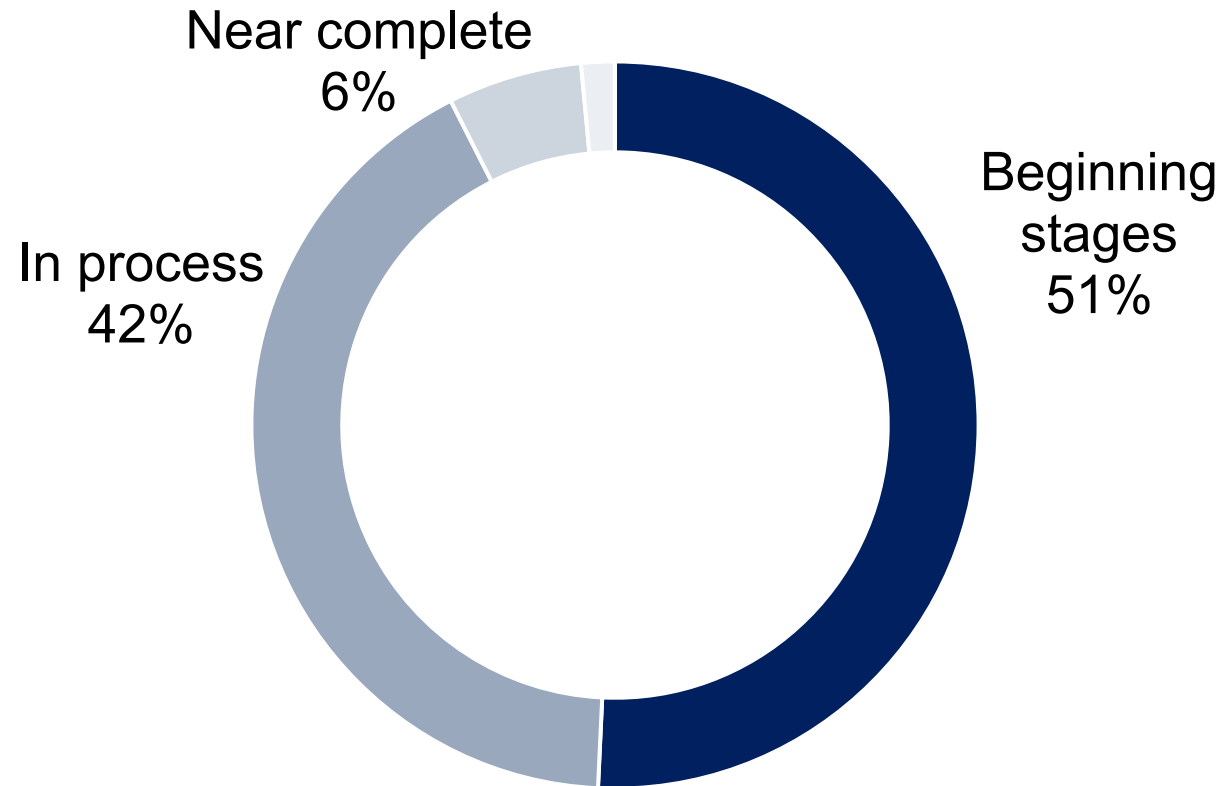
TA Phase: Launch

- Written resources published on the HCAI HEM [website](#)
- 1:1 consultations via email and phone
- **DDG training webinar**
 - Pre-training survey to design webinar for hospital needs

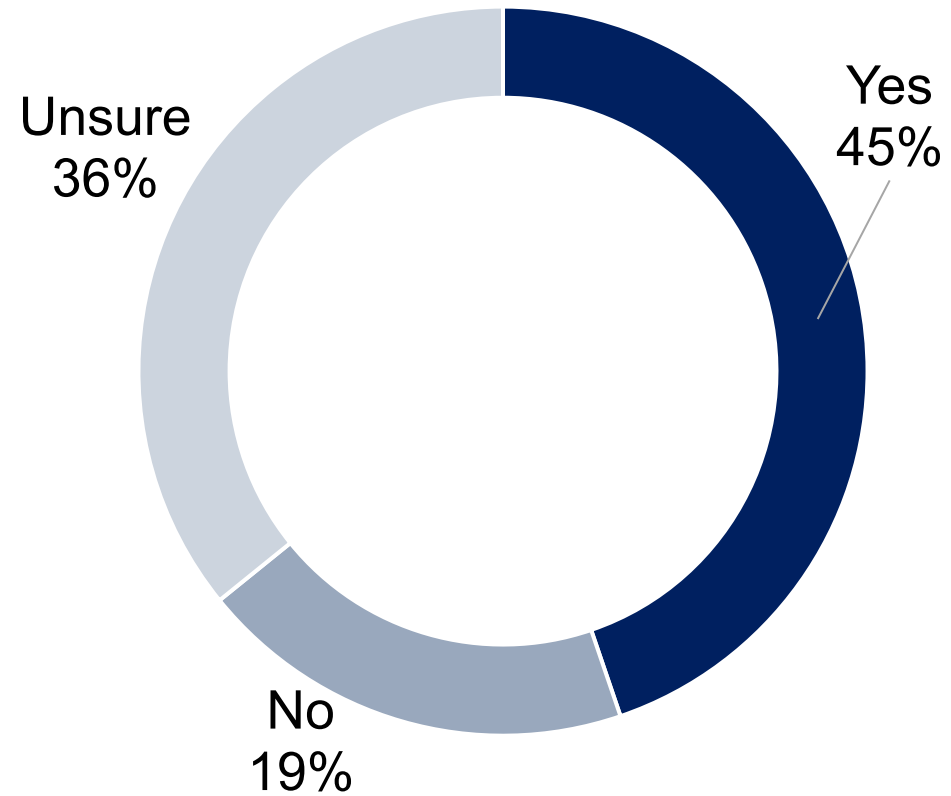
Pre-Training Survey: HEM Reporting Role



Pre-Training Survey: Report Progress



Pre-Training Survey: Use of External Services



TA Phase: Launch

- Written resources published on the HCAI HEM [website](#)
- 1:1 consultations via email and phone
- **DDG training webinar**
 - Pre-training survey to design webinar for hospital needs
 - Approximately 230 attendees with diverse hospital representation
 - Topics covered DDG and risk assessment
 - Workshop for HEM reporting using example data

Training Webinar: Workshop Example

HCAHPS Question 19: Numerator

- Number of patients who responded “probably yes” or “definitely yes”
- Stratification group: sex assigned at birth
- Count: 8 patients who identify as female

Variable	Assessment	Score
Events	<11 events	+7
Sex assigned at birth		+1
Time	1 year	+0
Service geography	Address	+3
Variable interactions	Events, Time, and geography +1 variable	+1
TOTAL	12	
MASKING	NO	

Training Webinar: DDG Questions

- How should hospitals report identified disparities and action plans if the related data needs to be masked?
- How should small hospitals report top 10 disparities when DDG masking leave little or no data?

TA Phase: Maintenance

- Continue to engage hospitals through 1:1 consultations
- Review submitted HEM reports
 - Data completeness
 - Data masking

TA Phase: Maintenance

- Continue to engage hospitals through 1:1 consultations
- Review submitted HEM reports
 - **Data completeness:** Ensures adherence to HEM reporting regulations
 - Joint Commission Structural Measures, Health Equity Plan
 - Data masking

TA Phase: Maintenance

- Continue to engage hospitals through 1:1 consultations
- Review submitted HEM reports
 - Data completeness
 - **Data masking:** Assess under- and over-masking

Review Data Masking: Under-Mask

- **Review for “under-masked” data**
 - Audit small cells that meet the conditions for data identification risk assessment (numerators <11; denominators <20,000)
 - Review complementary mask is consistent
 - Work with hospitals to appropriately mask data

Review Data Masking: Over-Mask

- **Review for “over-masked” data**
 - Project risk scores and identify measures with low likelihood of masking
 - Identify possible excessive data masking
 - Work with hospitals to appropriately un-mask data

TA Phase: Post-Submission (Near-Term Validation)

- **Compare HEM 2024 reports to 2023 patient discharge data**
 - Review and compare the data distributions
 - Available measures for comparison:
 - AHRQ Pneumonia Mortality Rate
 - AHRQ Death Rate among Surgical Inpatients with Serious Treatable Complications
 - CMQCC Vaginal Birth after Cesarean Section Rate, Uncomplicated

TA Phase: Post-Submission (Mid-Term Validation)

- **Compare HEM 2025 reports to HEM 2024 reports**
 - Level of masking by year, measures, and stratification groups
 - All measures available for comparison