# Agenda Item III: Potential Structural Measures for Hospital Equity Reports

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### Cross-Walk of Federal Government and National Hospital Equity Measures and Standards

Prepared for California Department of Health Care Access and Information (HCAI) Hospital Equity Measures Advisory Committee

Health Equity Topic	Centers for Medicare & Medicaid Services Hospital Commitment to Health Equity Measure	Centers for Medicare & Medicaid Services Hospital Screening for Social Drivers of Health Measures	Joint Commission  Health Care Disparities Reduction and Patient-Centered Communication Accreditation Standards	National Committee for Quality Assurance Health Equity Accreditation Standards	National Committee for Quality Assurance Health Equity Plus Accreditation Standards	U.S. Department of Health and Human Services Office of Minority Health National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care
Engagement of Hospital Leadership	MUC 2021-106 Domain 5A: Our hospital senior leadership, including chief executives and the entire hospital board of trustees, annually reviews our strategic plan for achieving health equity.		Standard LD.04.03.08: Reducing health care disparities for the [organization's] [patients] is a quality and safety priority.	HE Standard 1, Element A, Factor 2: Identifies at least one opportunity to improve diversity, equity, inclusion, or cultural humility for staff, leadership, committees, and governance bodies.  HE 5, Element A, Factor 6: Annual approval by governing body [of organization's written program description for improving culturally and linguistically appropriate services (CLAS)].	HE Plus Standard 4, Element A, Factor 4: Approval by a governing body [of organization's written program description for mitigating social risks and meeting social needs in a way that supports diversity, equity, inclusion, and cultural humility].	Standard 2: Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.

Topic being addressed by Hospital Equity Measures Advisory Committee or HCAI

Additional topics for Committee consideration ignatius.bau@gmail.com
UPDATED v.8-23-2022





# TABLE IX.E-01. THE HOSPITAL COMMITMENT TO HEALTH EQUITY MEASURES FIVE ATTESTATIONS

Attestation	Elements: Select all that apply (Note: Affirmative attestation of all elements within a domain would be required for the hospital to receive a point for the domain in the numerator)			
Domain 1: Equity i	s a Strategic Priority			
Hospital commitment to reducing healthcare disparities is strengthened when equity is a key organizational priority. Please attest that your hospital has a strategic plan for advancing healthcare equity and that it includes all the following elements.	<ul> <li>(A) Our hospital strategic plan identifies priority populations who currently experience health disparities.</li> <li>(B) Our hospital strategic plan identifies healthcare equity goals and discrete action steps to achieving these goals.</li> <li>(C) Our hospital strategic plan outlines specific resources which have been dedicated to achieving our equity goals.</li> <li>(D) Our hospital strategic plan describes our approach for engaging key stakeholders, such as community-based organizations.</li> </ul>			
Domain 2: D	Pata Collection			
Collecting valid and reliable demographic and social determinant of health data on patients served in a hospital is an important step in identifying and eliminating health disparities. Please attest that your hospital engages in the following activities.	<ul> <li>(A) Our hospital collects demographic information, including self-reported race and ethnicity and/or social determinant of health information on the majority of our patients.</li> <li>(B) Our hospital has training for staff in culturally sensitive collection of demographic and/or social determinant of health information.</li> <li>(C) Our hospital inputs demographic and/or social determinant of health information collected from patients into structured, interoperable data elements using a certified EHR technology.</li> </ul>			

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- 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.





# TABLE IX.E-01. THE HOSPITAL COMMITMENT TO HEALTH EQUITY MEASURES FIVE ATTESTATIONS (continued)

Attestation	Elements: Select all that apply (Note: Affirmative attestation of all elements within a domain would be required for the hospital to receive a point for the domain in the numerator)			
Domain 3: Data Analysis				
Effective data analysis can provide insights into which factors contribute to health disparities and how to respond. Please attest that your hospital engages in the following activities.	(A) Our hospital stratifies key performance indicators by demographic and/or social determinants of health variables to identify equity gaps and includes this information on hospital performance dashboards.			
Domain 4: Quality Improvement				
Health disparities are evidence that high-quality care has not been delivered equally to all patients. Engagement in quality improvement activities can improve quality of care for all patients.	(A) Our hospital participates in local, regional, or national quality improvement activities focused on reducing health disparities.			
Domain 5: Leadership Engagement				
Leaders and staff can improve their capacity to address disparities by demonstrating routine and thorough attention to equity and setting an organizational culture of equity. Please attest that your hospital engages in the following activities.	<ul> <li>(A) Our hospital senior leadership, including chief executives and the entire hospital board of trustees, annually reviews our strategic plan for achieving health equity.</li> <li>(B) Our hospital senior leadership, including chief executives and the entire hospital board of trustees, annually reviews key performance indicators stratified by demographic and/or social factors.</li> </ul>			

# Potential Measures for California HCAI Hospital Equity Report (continued)

- 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.



### Committee Vote

The Committee recommends that Hospital Equity Reports include the following five (5) structural measures that are included in the CMS hospital health equity reporting:

- 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



# **Public Comment**





MUC2021-	Screening for	Percent of beneficiaries 18 years and older
136	Social Drivers of	screened for food insecurity, housing instability,
	Health	transportation problems, utility help needs, and
		interpersonal safety.

MUC2021-	Screen Positive	Percent of beneficiaries 18 years and older who
134	Rate for Social	screen positive for food insecurity, housing
	Drivers of Health	instability, transportation problems, utility help
		needs, and interpersonal safety.



## Potential Measures for California HCAI Hospital Equity Report (cont'd)

- 6. Report on 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.
  - Food Screening: The percentage of members who were screened for food insecurity.
  - **Food Intervention:** The percentage of members who received a corresponding intervention within 1 month of screening positive for food insecurity.
  - **Housing Screening**: The percentage of members who were screened for housing instability, homelessness or housing inadequacy.
  - **Housing Intervention**: The percentage of members who received a corresponding intervention within 1 month of screening positive for housing instability, homelessness or housing inadequacy.
  - **Transportation Screening:** The percentage of members who were screened for transportation insecurity.
  - **Transportation Intervention:** The percentage of members who received a corresponding intervention within 1 month of screening positive for transportation insecurity.



### Committee Vote

The Committee recommends that the Hospital Equity Reports include the following HEDIS measure:

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.



# **Public Comment**





A complimentary publication of The Joint Commission

Issue 36, Date June 20, 2022

Published for Joint Commission-accredited organizations and interested health care professionals, *R3 Report* provides the rationale and references that The Joint Commission employs in the development of new requirements. While the standards manuals also may provide a rationale, *R3 Report* goes into more depth, providing a rationale statement for each element of performance (EP). The references provide the evidence that supports the requirement. *R3 Report* may be reproduced if credited to The Joint Commission. Sign up for email delivery.

### New Requirements to Reduce Health Care Disparities

# R<sup>3</sup> Report Requirement, Rationale, Reference

A complimentary publication of The Joint Commission

Issue 1, February 9, 2011

Published for Joint Commission accredited organizations and interested health care professionals,  $R^3$  Report provides the rationale and references that The Joint Commission employs in the development of new requirements. While the standards manuals also provide a rationale, the rationale provided in  $R^3$  Report goes into more depth. The references provide the evidence that supports the requirement.  $R^3$  Report may be reproduced only in its entirety and credited to The Joint Commission. To receive by e-mail, visit www.jointcommission.org.

### Patient-centered communication standards for hospitals



Potential
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(continued)

- 7. Designate an individual to lead hospital activities to reduce health care disparities.
- 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.



Potential
Measures for
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(continued)

9. Report percentage of patients with preferred language spoken.



### Committee Vote

The Committee recommends that the Hospital Equity Reports include the following 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 activities to reduce health care disparities.
- 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.
- 9. Report percentage of patients with preferred language spoken.



# **Public Comment**

