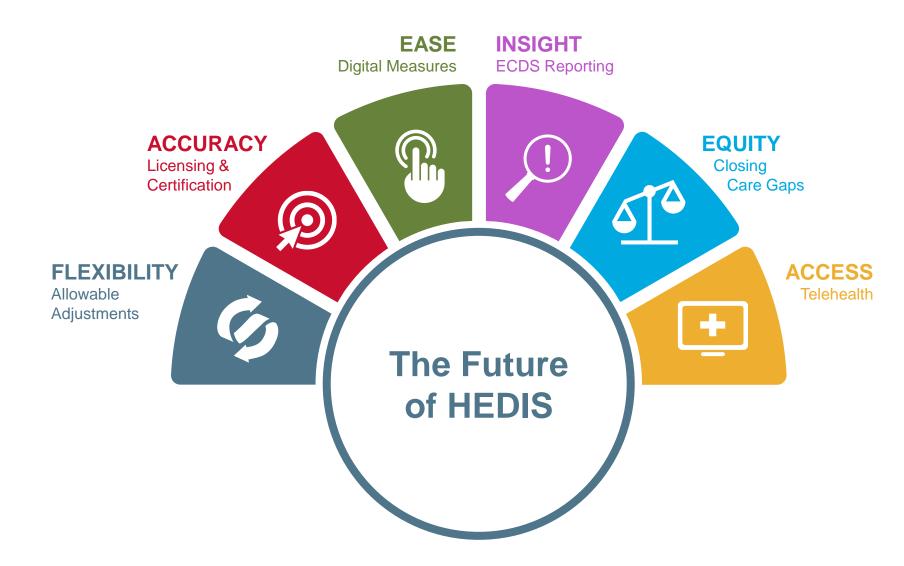


Andy Reynolds, Assistant Vice President, Communications Keirsha Thompson, MSW, Manager, Performance Measurement Sarah Paliani, MPH, Senior Research Associate, Performance Measurement October 6, 2022

6 themes

See our **Future of HEDIS** webinar series:

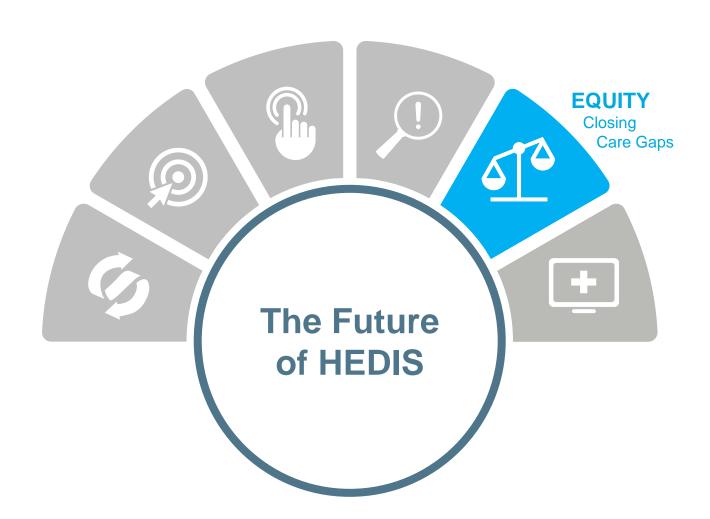
https://www.ncqa.org/ hedis/the-future-of-hedis/



6 themes

Equity

Closing care gaps to make care equitable makes care better.



The dea

High quality care is equitable care

No quality without equity

Build equity into all NCQA measures and programs

Addressing Health Equity with HEDIS

Goals



- Bring transparency to inequities in health care quality.
- Promote inclusive approaches to measurement and accountability.
- Address social needs to improve health outcomes.
- Incentivize equity with benchmarks and performance scoring.

Today we'll cover...

Measurement Year 2023

- "Tour of HEDIS": Where components of equity work are reflected in the volumes, as it relates to:
 - Race Ethnicity Stratification
 - Social Needs Quality Measurement
 - Gender-inclusive Measurement
- Upcoming learning opportunities & resources







Race Ethnicity Stratification Expansion

Measure List as of HEDIS MY 2023

Domain	Measure	
Prevention & Screening	Immunizations for Adolescents	
	Adult Immunization Status	
	Breast Cancer Screening	
	Colorectal Cancer Screening	
Respiratory	Asthma Medication Ratio	
Cardiovascular	Controlling High Blood Pressure	
Diabetes	Hemoglobin A1c Control for Patients With Diabetes	
Behavioral Health	Follow-Up After Emergency Department Visits for Substance Use	
	Pharmacotherapy for Opioid Use Disorder	
Access and Availability of Care	Initiation and Engagement of Substance Use Disorder Treatment	
	Prenatal and Postpartum Care	
Utilization	Well-Child Visits in the First 30 Months of Life	
	Child and Adolescent Well Care Visits	

Stay Tuned

Upcoming Project



Stratification is a tool for transparency, quality improvement and accountability.



Ongoing struggle to integrate race and ethnicity into structured quality reporting.



Need for practical insights and solutions, including baseline understanding of performance patterns.





Equity in HEDIS MY 2023

Social Needs Quality Measurement

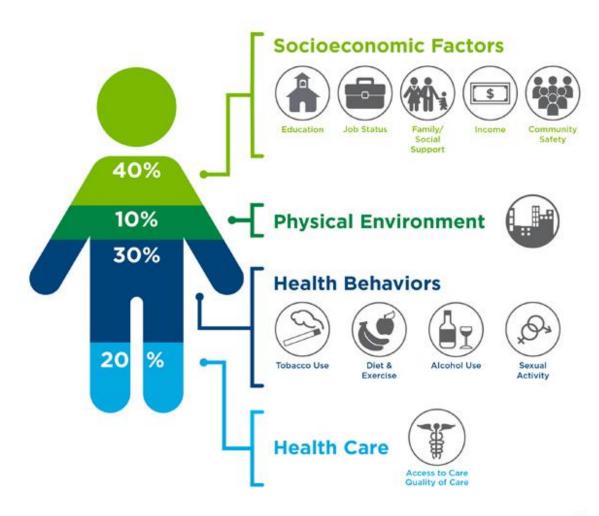
SARAH PALIANI, SENIOR RESEARCH ASSOCIATE



Why Address Social Needs?

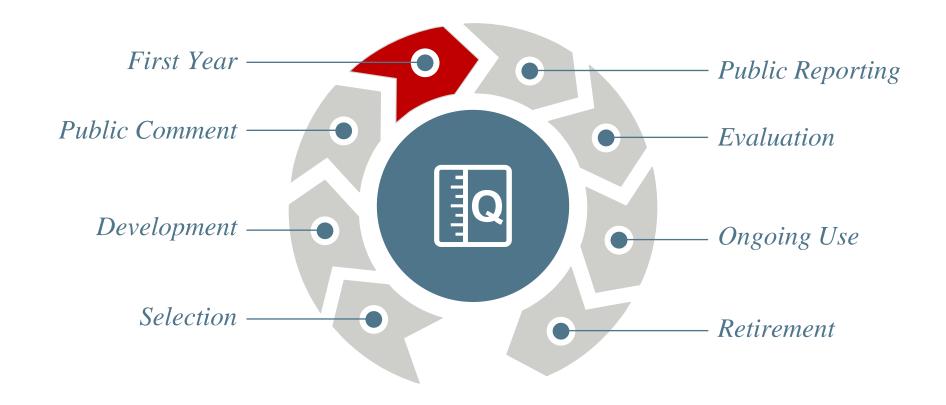
Social factors drive health outcomes

What Goes Into Your Health?



HEDIS Measure Development Process

New social need screening and intervention (SNS-E) measure status



Measure Specification

Social Need Screening and Intervention (SNS-E)

Measure Description

The percentage of members who, during the measurement period, were screened at least once for unmet food, housing and transportation needs using a pre-specified screening instrument and, if screened positive, received a corresponding intervention.

Six Indicators:

- 1. Food Insecurity Screening
- 2. Food Insecurity Intervention
- 3. Housing Screening
- 4. Housing Intervention
- 5. Transportation Insecurity Screening
- 6. Transportation Insecurity Intervention

Product Lines

Commercial, Medicaid, Medicare

Reporting Method

Electronic Clinical Data Systems

Exclusions

Hospice

I-SNP

LTI

Age Stratification

- ≤17
- 18-64
- 65+



Different Reporting Methods for HEDIS



Administrative Method: Transaction Data

Enrollment, Claims, Encounter



Hybrid Method: Administrative + Sample

Manual Medical Record Review



Survey Method

CAHPS®, Medicare Health Outcomes Survey



Electronic Clinical Data Systems Method

Enrollment, Claims, Encounter, EHRs, Registries, Case Management

Social Needs Electronic Data Standards

Gravity Project



- A national public collaborative that develops consensus-based data standards involving social determinants of health (SDOH).
- NCQA's Social Need Screening and Intervention measure aligns with current Gravity Project data elements.











Screening Indicators

Allowed Instruments

Numerator: Members with 1+ documented result on food/housing/transportation screening

Denominator: Members 0+ continuously enrolled during MY

Screening Instruments (Documented via LOINC):

- Accountable Health Communities
- AAFP Social Needs Screening Tool
- Health Leads Screening Panel
- Hunger Vital Sign™
- PRAPARE
- Safe Environment for Every Kid (SEEK)

- We Care Survey
- WellRx Questionnaire
- Housing Stability Vital Signs™
- Comprehensive Universal Behavior Screen (CUBS)
- PROMIS
- USDA Food Security Survey



Intervention Indicators

3 Intervention Indicators (Food, Housing, Transportation)

Interventions defined by Gravity Project value sets, and fall into 8 categories of intervention type.

Assessment Assistance Coordination Counseling Evaluation of Education eligibility Provision Referral

Members who received a corresponding intervention with in 30 days of first positive screen

Members with at least 1 positive result for food, housing, transportation

Volume 2: Technical Specifications for Health Plans

Volume 2 Narrative Specification

Outlines specific reporting requirements for each measure rate.

Social Need Screening and Intervention (SNS-E)

SUMMARY OF CHANGES TO HEDIS MY 2023

· This is a first-year measure.

Description

The percentage of members who were screened, using prespecified 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.



Volume 2: Technical Specifications for Health Plans

Volume 2 Narrative Specification

References value sets to support identification of interventions.

Value Sets:

- NCQA_Hospice-2.0.0
 - Hospice Encounter (https://www.ncga.org/fhir/valueset/2.16.840.1.113883.3.464.1004.1761)
 - Hospice Intervention (https://www.ncqa.org/fhir/valueset/2.16.840.1.113883.3.464.1004.1762)
- SNSE_HEDIS_MY2023-1.0.0
 - Food Insecurity Procedures (https://www.ncqa.org/fhir/valueset/2.16.840.1.113883.3.464.1004.2262)
 - Homelessness Procedures (https://www.ncqa.org/fhir/valueset/2.16.840.1.113883.3.464.1004.2410)
 - Housing Instability Procedures (https://www.ncqa.org/fhir/valueset/2.16.840.1.113883.3.464.1004.2412)
 - Inadequate Housing Procedures (https://www.ncqa.org/fhir/valueset/2.16.840.1.113883.3.464.1004.2411)
 - Transportation Insecurity Procedures (https://www.ncqa.org/fhir/valueset/2.16.840.1.113883.3.464.1004.2264)



Volume 2 Digital Specification

Digital Measure Specification

Includes human-readable and machine-readable digital version of the measure specification.

Social Need Screening and Intervention	Measure ID	SNS-E	
	The percentage of members who were screened, using prespecified 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 receive 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 inad 			
 Housing Intervention. The percentage of members who rec 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 w transportation insecurity.	no received a corresponding interv	ention within 1 month of screening positive for	
	The percentage of members who were screened, using prespecific housing and transportation needs, and received a corresponding • Food Screening. The percentage of members who were screened. Intervention. The percentage of members who received insecurity. • Housing Screening. The percentage of members who were. • Housing Intervention. The percentage of members who received housing instability, homelessness or housing inadequacy. • Transportation Screening. The percentage of members who. • Transportation Intervention. The percentage of members who.	The percentage of members who were screened, using prespecified instruments, at least once during housing and transportation needs, and received a corresponding intervention if they screened positi. • Food Screening. The percentage of members who were screened for food insecurity. • Food Intervention. The percentage of members who received a corresponding intervention with insecurity. • Housing Screening. The percentage of members who were screened for housing instability, however the percentage of members who received a corresponding intervention housing instability, homelessness or housing inadequacy. • Transportation Screening. The percentage of members who were screened for transportation. • Transportation Intervention. The percentage of members who received a corresponding intervention.	

Social Need Measurement Moving Forward

Expanding social need focus to additional domains





SARAH PALIANI, SENIOR RESEARCH ASSOCIATE



Advancing Equity and Inclusion in HEDIS

Sexual Orientation and Gender Identity

High quality care must be equitable care. How do we take action towards health equity for LGBTQ+ and gender diverse persons?

Current State of HEDIS

- Treats gender as a binary (Male, Female); no acknowledgement of other gender identities.
- Exclusionary in language and practice
 - Example: "Deliveries in which women..."
 - Example: "percentage of women screened for cervical cancer"
 - Example: Measures reported by HEDIS vendors use gender values; members without a value of M or F may be left out of reporting altogether.
- Silent on needs of LGBTQ+ population

Goals for Future State of HEDIS

- Less exclusive measures
- More intentionally inclusive measures
- Measure concepts that are meaningful to communities and help move the needle on barriers to care and disparities for sexual and gender minority populations.



Gender-inclusive Measurement

Opportunities to Improve – a Phased Approach

MY2023

published Aug 2022

Phase 1: Gender and Pregnancy

• HEDIS refers to female pregnancy/deliveries; excludes trans & non-binary individuals

MY2024 published Aug 2023

Phase 2: Gender-based Eligible Populations & Stratifications

- Go back to intent gender vs. physiology
- Alignment with practice guidelines for transgender and gender-diverse members

MY2025 published Aug 2024+

Phase 3. Gender in Risk Adjustment

How do we account for broader set of variables?

Phase 4. Sexual Orientation

How can we address quality of care and disparities for SGM populations?

Measures Updated

MY 2023 Updates

Category	Measure		
Delivery-based Measures	Prenatal and Postpartum Care		
	Prenatal Immunization Status		
	Controlling High Blood Pressure		
	Hospitalization Following Discharge From a Skilled Nursing Facility		
	Plan All-Cause Readmissions		
Pregnancy Exclusion	Statin Therapy for Patients with Cardiovascular Disease		
	Statin Therapy for Patients with Diabetes		
	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents		

Volume 2: Technical Specifications for Health Plans

Volume 2 Specifications: Delivery-based Measures

Delivery-based measures revised to be inclusive of all members who give birth (vs. limited to women).

Prenatal and Postpartum Care (PPC)

SUMMARY OF CHANGES TO HEDIS MY 2023

- Replaced all references of "women" to "member" throughout the measure specification.
- Added a required exclusion for members who died during the measurement year.
- Clarified continuous enrollment requirements for step 2 of the Timeliness of Prenatal Care numerator.
- Revised the "Other" criteria in the Nonclinical Components table under Rules for Allowable Adjustments of HEDIS.
- Revised the "Required exclusions" criteria in the Clinical Components table under Rules for Allowable Adjustments of HEDIS.



Volume 2: Technical Specifications for Health Plans

Volume 2 Specifications: Pregnancy Exclusions

Delivery-based measures revised to be inclusive of all members who give birth (vs. limited to women).

Statin Therapy for Patients With Cardiovascular Disease (SPC)

SUMMARY OF CHANGES TO HEDIS MY 2023

- Clarified in the "Event/diagnosis" criteria that required exclusions are not a step.
- Replaced the reference to "female members" with "members" in the pregnancy required exclusion.

Required exclusions

Exclude members who meet any of the following criteria:

 Members with a diagnosis of pregnancy (<u>Pregnancy Value Set</u>) during the measurement year or the year prior to the measurement year.



Future Directions for Gender-inclusive Measurement

Opportunities to Improve – a Phased Approach

MY2023

published Aug 2022

Phase 1: Gender and Pregnancy

• HEDIS refers to female pregnancy/deliveries; excludes trans & non-binary individuals

MY2024 published Aug 2023

Phase 2: Gender-based Eligible Populations & Stratifications

- Go back to intent gender vs. physiology
- Alignment with practice guidelines for transgender and gender-diverse members

MY2025 published Aug 2024+

Phase 3. Gender in Risk Adjustment

How do we account for broader set of variables?

Phase 4. Sexual Orientation

How can we address quality of care and disparities for SGM populations?

Gender-based Eligible Populations

Consequences of Specification



Does not capture individuals who do not have documented M/F gender



 Contributes to disparities in care by omitting gender-diverse members in need of services from quality targets and improvement efforts



 Updates to guidelines and new electronic and clinical data sources may provide opportunity to address past barriers

Gender-based Eligible Populations

Current HEDIS Measures which Require Revision

Measure	Data Source	Measure Language
Statin Therapy for Patients with	Administrative	Males 21–75 years of age and females 40–75 years
Cardiovascular Disease		
Osteoporosis Management in	Administrative	The percentage of women 67–85 years of age who
Women Who Had a Fracture		
Osteoporosis Screening in Older	Administrative	The percentage of women 65–75 years
Women		
Breast Cancer Screening	Administrative	The percentage of women 50–74 years
	ECDS	
Cervical Cancer Screening	Administrative	The percentage of women 21–64 years of age who were
	Hybrid	screened for cervical cancer
Chlamydia Screening in Women	Administrative	The percentage of women 16–24
Non-Recommended Cervical	Administrative	The percentage of adolescent females 16–20
Cancer Screening in Adolescent		
Females		
Non-Recommended PSA-Based	Administrative	The percentage of men 70 years and older
Screening in Older Men		



Where to learn more...



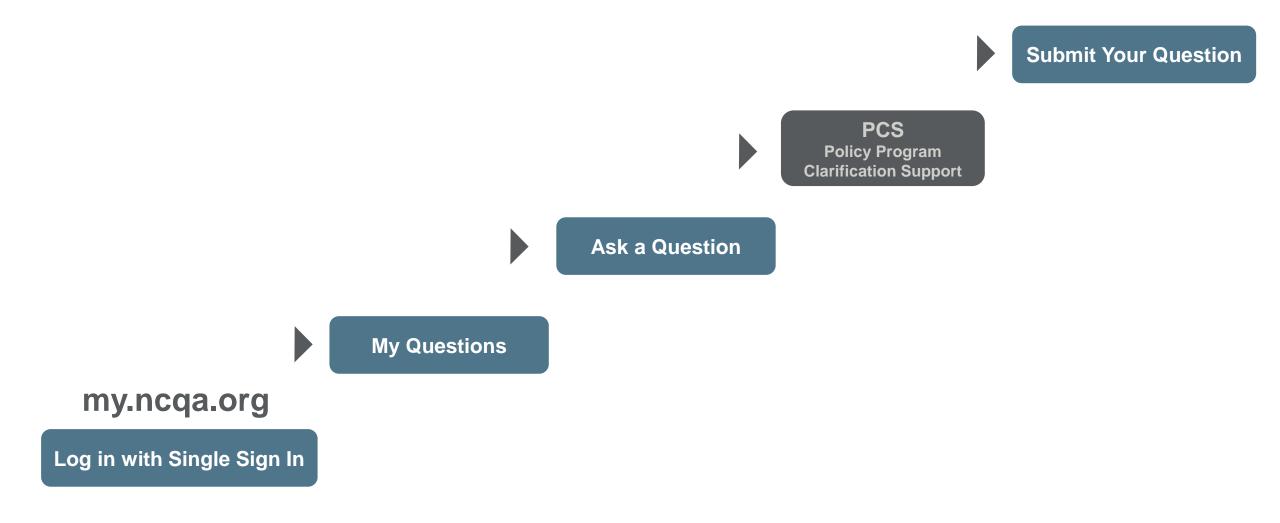
Want more details on HEDIS and equity?



Registration: ncqasummit.com

Social Need Quality Measurement in HEDIS Wednesday November 2, 3:30-4:20PM ET

How to ask questions after today's Q&A





Join our growing staff!





ncqa.org/jobs

Applied Research Scientist, Heath Equity

Applied Research Scientist, Behavioral Health

Director,
Digital Measurement
Community



