The Future of HEDIS®: Health Equity

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See our Future of HEDIS webinar series:

https://www.ncqa.org/hedis/the-future-of-hedis/
Closing care gaps to make care **equitable** makes care better.
The BIG Idea

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
Equity in HEDIS MY 2023

Race and Ethnicity Stratification
Race Ethnicity Stratification Expansion

*Measure List as of HEDIS MY 2023*

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

Measures stratified for MY 2022

Measures to be stratified for MY 2023
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
Why Address Social Needs?

Social factors drive health outcomes
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+
<table>
<thead>
<tr>
<th>Method</th>
<th>Data Source</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Administrative Method</strong>: Transaction Data</td>
<td>Enrollment, Claims, Encounter</td>
</tr>
<tr>
<td><strong>Hybrid Method</strong>: Administrative + Sample</td>
<td>Manual Medical Record Review</td>
</tr>
<tr>
<td><strong>Survey Method</strong></td>
<td>CAHPS®, Medicare Health Outcomes Survey</td>
</tr>
<tr>
<td><strong>Electronic Clinical Data Systems Method</strong></td>
<td>Enrollment, Claims, Encounter, EHRs, Registries, Case Management</td>
</tr>
</tbody>
</table>
• 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
- Education
- Evaluation of eligibility
- Provision
- Referral

Members who **received a corresponding intervention within 30 days** of first positive screen

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

<table>
<thead>
<tr>
<th>Description</th>
<th>Details</th>
</tr>
</thead>
</table>
| **Food Screening** | The percentage of members who were screened for food insecurity.  
  - 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.  
  - 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 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.  
  - 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 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.  
  - Transportation Intervention: The percentage of members who received a corresponding intervention within 1 month of screening positive for transportation insecurity. |
References value sets to support identification of interventions.

Value Sets:

- **NCQA_Hospice-2.0.0**
  - Hospice Encounter (https://www.ncqa.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)
  - 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)
## Digital Measure Specification

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

<table>
<thead>
<tr>
<th>Measure title</th>
<th>Social Need Screening and Intervention</th>
<th>Measure ID</th>
<th>SNS-E</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description</td>
<td>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.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **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.
Social Need Measurement Moving Forward

Expanding social need focus to additional domains

2023

New Social Need Screening and Intervention measure

2024

New Social Connection measure

2025+

Additional domains of social need?
Gender-Inclusive Measurement
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

Phase 1: Gender and Pregnancy
- HEDIS refers to female pregnancy/deliveries; excludes trans & non-binary individuals

Phase 2: Gender-based Eligible Populations & Stratifications
- Go back to intent – gender vs. physiology
- Alignment with practice guidelines for transgender and gender-diverse members

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

<table>
<thead>
<tr>
<th>Category</th>
<th>Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Delivery-based Measures</strong></td>
<td>Prenatal and Postpartum Care</td>
</tr>
<tr>
<td></td>
<td>Prenatal Immunization Status</td>
</tr>
<tr>
<td><strong>Pregnancy Exclusion</strong></td>
<td>Controlling High Blood Pressure</td>
</tr>
<tr>
<td></td>
<td>Hospitalization Following Discharge From a Skilled Nursing Facility</td>
</tr>
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<td></td>
<td>Plan All-Cause Readmissions</td>
</tr>
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<td></td>
<td>Statin Therapy for Patients with Cardiovascular Disease</td>
</tr>
<tr>
<td></td>
<td>Statin Therapy for Patients with Diabetes</td>
</tr>
<tr>
<td></td>
<td>Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</td>
</tr>
</tbody>
</table>
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 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 (Pregnancy Value Set) during the measurement year or the year prior to the measurement year.
Future Directions for Gender-inclusive Measurement

*Opportunities to Improve – a Phased Approach*

**Phase 1: Gender and Pregnancy**
- HEDIS refers to female pregnancy/deliveries; excludes trans & non-binary individuals

**Phase 2: Gender-based Eligible Populations & Stratifications**
- Go back to intent – gender vs. physiology
- Alignment with practice guidelines for transgender and gender-diverse members

**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

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

my.ncqa.org

Log in with Single Sign In

My Questions

Ask a Question

Submit Your Question

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Policy Program
Clarification Support
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Applied Research Scientist, Health Equity

Applied Research Scientist, Behavioral Health

Director, Digital Measurement Community
Thank you