

Healt Equit

HEALTH EQUITY UPDATES



Patient/Provider Racial Concordance Associated with Increase in Life Expectancy and Reduced Mortality

A <u>study</u> recently published in JAMA Network Open offers strong evidence that a higher prevalence of Black primary care physicians is associated with longer life expectancy and lower mortality for Black individuals. The study showed that Black individuals that resided in counties with more Black physicians had lower mortality from all causes and decreased disparities in mortality rates compared to their White counterparts.

A significant finding from the study is that counties with more Black physicians had lower all-cause mortality and disparities in mortality rates for Black residents, whether or not the residents received care from one of the Black physicians. These findings persisted even in counties with one Black physicians. The study reinforces the importance of building a more diverse, representative health care workforce to reduce disparities and improve outcomes for racial and ethnic minorities.

CMS Proposes Health Equity Adjustment for the Hospital Value-Based Purchasing Program

CMS recently issued its hospital inpatient prospective payment system (IPPS) and long-term care hospital (LTCH) proposed rule for fiscal year 2024. One of the proposed changes to the Hospital Value-Based Purchasing Program is the adoption of a health equity adjustment that would add bonus points to hospitals' Total Performance Score to reward excellent care for underserved patients. This adjustment would consider two factors: a hospital's performance on existing program measures and the proportion of patients with dual eligibility status that the hospital served. CMS is also proposing to change the <u>severity designation</u> of three ICD-10-CM codes for homelessness from non-complication or comorbidity (NonCC) to complication or comorbidity (CC) that will result in a higher payment to reflect the increased hospital resource use.

May 2023

This Month

Asian American, Native Hawaiian & Pacific Islander Heritage Month

Advancing Leaders through Opportunity

In May, we celebrate AANHPI heritage and its contributions to American history, society and culture.

- Census Bureau data estimates there are 24 million Asian individuals in the U.S. This represents individuals who reported a specific Asian group alone or in combination with one or more other Asian groups or races.
- According to the <u>NIH</u>, about 70% of Asian Americans are foreign-born and may have limited English proficiency (LEP). They experience unique health disparities because of their cultural beliefs and unfamiliarity with the Western health system.
- The AANHPI population faces disparities in chronic diseases and cancer. It is the only population with cancer as the leading cause of death.

The HHS Office of Minority Health has <u>information and resources</u> on AANHPI subgroups and related health disparities.

May is Mental Health Month

Each May, we recognize Mental Health Month to raise awareness and help reduce the stigma of mental and behavioral health issues. This year, Mental Health America (MHA) highlights the impact of surroundings on mental health: safe and stable housing, neighborhoods and towns, healthy home environments, and access to outdoors and nature. Also of note, SAMHSA's <u>E4 Center</u> is working to reduce disparities with resources, trainings, and technical assistance to advance community-based implementation of evidence-based practices and programs for vulnerable older adults who experience the greatest behavioral and physical health disparities.

Nursing Home Payment Tied to Worker Retention

On April 18th, the Biden Administration announced "the most sweeping set of executive actions to improve care in history" including directing HHS to tie nursing home payment to worker retention to build on minimum staffing requirements. The Executive Order includes more than 50 directives to expand access to care across federal agencies with a focus on long-term care and child care. In addition to staffing retention issues, long-term care costs have risen by 40% in the last decade, making it less accessible, especially for underserved individuals and those with lower socioeconomic status.

MDS 3.0 Social Determinants of Health SPADE

In early April, CMS released a draft of the Minimum Data Set (MDS) v1.18.11 Resident Assessment Instrument (RAI) manual that has significant edits and almost 400 additional pages compared to the previous manual. The draft manual includes a new social determinants of health (SDOH) Standardized Patient Assessment Data Element (SPADE) to help assess health equity using resident self-reported data. The new MDS SDOH data items are: Ethnicity A1005); Race (A1010); Preferred Language (A1110); Interpreter Services (A1110); Health Literacy (B1300); Transportation (A1250); and Social Isolation (D0700). The new MDS will be effective on October 1, 2023.

FY24 SNF PPS Proposed Health Equity Adjustment

On April 3, CMS issued a proposed rule that would update Medicare payment policies and rates for skilled nursing facilities (SNF) under the SNF Prospective Payment System (SNF PPS), SNF Quality Reporting Program (QRP) and the SNF Value-Based Purchasing (VBP) Program for fiscal year 2024. CMS is proposing a health equity adjustment in the SNF VBP Program SNF that rewards SNFs that perform well and whose resident population includes at least 20% of residents with dual eligibility status. This adjustment would begin with the fiscal year 2027 program year and fiscal year 2025 performance year.



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Upcoming Events

2023 CMS Quality Conference

Centers for Medicare & Medicaid Services

Dates: May 1 – 3, 2023

Agenda

Registration

Health Equity Organizational Assessment Affinity Group (Session 6 of 6) *IPRO* Date: May 11, 2023

Time: 12:00 PM - 12:45 PM ET

CMS Inaugural Health Equity Conference

Centers for Medicare & Medicaid Services

Dates: June 7 – 8, 2023

Registration (virtual only)

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