



# Better data for more equitable healthcare

Advancing health equity begins with accurate data collection



## An opportunity for equity

We've known for some time that our healthcare system doesn't serve everyone equally. Inequities, disparities, and social determinants of health (SDOH) are the primary barriers to high-quality care for millions of people in the US. Progress requires that we break down silos and tailor programs to address the needs of individuals. The first step is collecting more comprehensive and accurate data.

Healthcare stakeholders have a unique opportunity to advance health equity and help create a healthier society by leveraging relevant data to get to the root cause of disparities in health outcomes. Health plans play a critical role in driving this effort because of their end-to-end visibility into individual care needs.<sup>1</sup> New requirements being mandated at the federal and state levels will also drive accountability for equitable healthcare.

## Where are we now, and where do we go from here?

As the healthcare industry continues to advance its efforts to address health equity, health plans are going a step further. Plans are looking to embed health equity into their overall structures and corporate cultures through the role of the chief health equity officer.<sup>2</sup> These leaders are largely responsible for overseeing strategic initiatives across the organization with the goal of driving measurable impact around the member experience to improve health outcomes.

Regulatory agencies and industry organizations are also taking action to support health equity. In April 2022, the Centers for Medicare & Medicaid Services (CMS) Office of Minority Health released the CMS Framework for Health Equity, a set of goals designed to address health disparities.<sup>3</sup> Although some have called it insufficient guidance, this is still a positive step.<sup>4</sup> The goals include better collection, reporting, and analysis of data, as well as advancing language access, health literacy, and the provision of culturally appropriate services. CMS will also require hospitals and health systems to survey for social drivers of health beginning in 2024 under its FY 2023 Hospital Inpatient Prospective Payment System final rule.

**Healthcare stakeholders have a unique opportunity to advance health equity and help create a healthier society by leveraging relevant data to get to the root cause of disparities in health outcomes.**





Another significant step came in August 2022 when the National Committee for Quality Assurance (NCQA) announced changes to its Healthcare Effectiveness Data and Information Set quality measures.<sup>5</sup> The measures will now require stratification of more health equity data than ever before, including race, ethnicity, sexual orientation, and gender identity.<sup>6</sup>

Even with these important changes, there are still many opportunities for improvement. Some changes that seem relatively simple still face significant obstacles. For example, the Telephone Consumer Protection Act (TCPA) limits health plans in their ability to engage with their members via text messaging. This is the preferred form of communication for many individuals, and they often face challenges communicating with their plan through other channels.

Additionally, while many social service programs help address disparities, silos still exist between these organizations and health plans, making it difficult to connect members with needed services. Data sharing is also limited between providers and health plans. Approximately

half of Medicaid plans and over a quarter of Medicare Advantage plans are missing race and ethnicity information for at least 50% of their membership.<sup>7</sup>

While systemic change takes time, plans need to get started now; the health of members who are medically underserved is at stake.

## Advancing health equity through data collection

Collecting more data is key to advancing health equity. Health plans cannot understand where disparities exist and effectively promote health equity for their members if they don't have all the relevant data. Collecting race and ethnicity information is a good start, but plans also need to collect language, sexual orientation and gender identity (SOGI), and SDOH information to have the most comprehensive view of their members.<sup>8</sup>

This data should be stratified by category and analyzed to determine members' needs. Plans should then act by developing programs to meet those needs.

## Health plans that fill in data gaps and get to know their members will be able to achieve the following:

- Build a relationship with each member first
- Strengthen trust by communicating with the member in their preferred language and in a culturally appropriate way
- Help members see their relationship with the plan as an annual journey
- Create a personalized engagement experience for each member
- Meet members where they are
- Make sure members know they matter and treat them accordingly

## Acting on the data

As health plans collect more data and begin uncovering care inequities, it can be difficult to know what to do with the information and how to take action on all that needs to be done. Plans can start by personalizing their outreach to be more relevant to each member, which can also help establish trust and encourage engagement. For example, using members' identified pronouns is something they don't always expect from a health plan and can be a good first step.

"Intent is so important here," says Abner Mason, founder and CEO of SameSky Health. "To earn members' trust, they need to know how their personal information will be used and in turn, what the benefits to them will be for providing it."

Some plans may be hesitant to begin making changes out of concern they are not ready to fully address a particular social determinant, but it's important to start moving forward. An easy first step is to acknowledge the issues and allow for discourse that helps members feel heard and understood. It's always better to be aware of the challenges, even if plans can't address them all at once.

Plans also don't have to invest in these solutions on their own. Many programs and interventions can be provided to members at no cost to plans by connecting them with local social service providers in their area.



## Community assistance programs that can help address health care disparities:

- **The Supplemental Nutrition Assistance Program (SNAP)** is a federal program to help ensure people have access to food. SNAP provides nutrition benefits to families so they can purchase healthy food and move toward self-sufficiency.<sup>9</sup>
- **findhelp (formerly Aunt Bertha)** is a search and referral network of free and reduced-cost resources including food, housing, goods, transit, health, money, care, education, work, and legal assistance.<sup>10</sup>
- **The Emergency Food Assistance Program (TEFAP)** helps supplement the diets of low-income people by providing them with emergency food assistance at no cost.<sup>11</sup>
- **The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)** provides federal grants to states for supplemental food, healthcare referrals, and nutrition education for low-income, pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age five who are found to be at nutritional risk.<sup>12</sup>
- **The Farmers Market Nutrition Program (FMNP)** provides fresh, unprepared, locally grown fruits and vegetables to WIC participants.<sup>13</sup>
- **The Seniors Farmers' Market Nutrition Program (SFMNP)** and Commodity Supplemental Food Program provide low-income older adults with access to healthy foods, including locally grown fruits, vegetables, honey, and herbs.<sup>14</sup>
- **The Food Distribution Program on Indian Reservations (FDPIR)** increases access to healthy foods for income-eligible households living on Indian reservations and for Native American households residing in designated areas near reservations or in Oklahoma.<sup>15</sup>



## Now is the time for health equity

There has never been more emphasis on advancing health equity, and data collection will play a critical role in uncovering and addressing disparities. An important first step is collecting helpful types of health equity data, including race, ethnicity, and language (REL), SOGI, and SDOH data. Plans can then tailor outreach and benefits to ensure all of their members receive high-quality care.

Doing this at scale requires digital health solutions, and plans may benefit from working with a partner. SameSky Health helps plans fill in the gaps and missing data within member profiles to create personalized healthcare journeys throughout the member life cycle.

Everyone benefits when we make progress toward health equity. Members get connected to the resources and services they need, and health plans see better health outcomes at lower costs. With the right data, we can get to the root causes of the barriers members are facing and address them. It's time to take action towards creating a healthcare system that works better for everyone.

**There has never been more emphasis on advancing health equity, and data collection will play a critical role in uncovering and addressing disparities.**



Everyone benefits when we make progress toward health equity.

## References

1. Clark, E., Rost, J., Stolyarova, A. Innovation and value: What payer-led managed-care models may look like. McKinsey & Company. Dec. 2, 2021. <https://www.mckinsey.com/industries/healthcare-systems-and-services/our-insights/innovation-and-value-what-payer-led-managed-care-models-may-look-like>.
2. The rise of the chief health equity officer. AHIP. April 20, 2022. <https://www.ahip.org/news/articles/the-rise-of-the-chief-health-equity-officer>.
3. CMS Framework for Health Equity. Centers for Medicare and Medicaid Services. April 22, 2022. Retrieved Aug. 6, 2022, from <https://www.cms.gov/About-CMS/Agency-Information/OMH/equity-initiatives/framework-for-health-equity>.
4. Janelle Alleyne and Stefanie Jones Doyle. CMS' Framework for Health Equity Sets Goals Without Details. Bloomberg Law. Aug. 5, 2022. Retrieved Aug. 8, 2022, from <https://news.bloomberglaw.com/health-law-and-business/cms-framework-for-health-equity-sets-goals-without-details>.
5. Kelsey Waddill. NCQA Adds New HEDIS Quality Measures to Improve Race, Gender Health Equity. Health Payer Intelligence. Aug. 1, 2022. Retrieved Aug. 9, 2022, from <https://healthpayerintelligence.com/news/ncqa-adds-new-hedis-measures-for-race-ethnicity-data-gender-inclusivity>.
6. NCQA new HEDIS measures for measurement year 2023. NCQA. Retrieved Aug. 10, 2022, from <https://www.ncqa.org/hedis/measures/>.
7. HEDIS Measures and Technical Resources. NCQA. Retrieved Aug. 22, 2022, from <https://www.ncqa.org/hedis/measures/>.
8. Jennifer M. Haley, et al. Collection of Race and Ethnicity Data for Use by Health Plans to Advance Health Equity. Urban Institute. July 20, 2022. Retrieved Aug. 8, 2022, from <https://www.urban.org/research/publication/collection-race-and-ethnicity-data-use-health-plans-advance-health-equity>.
9. Supplemental Nutrition Assistance Program (SNAP). USDA Food and Nutrition Service. Retrieved Aug. 21, 2022, from <https://www.fns.usda.gov/snap/supplemental-nutrition-assistance-program>.
10. Nation's Leading Social Care Network Announces New Name, Aligning Brand to Mission in Time of Momentous Impact. Nov. 1, 2021. Retrieved Aug. 21, 2022, from <https://www.prnewswire.com/news-releases/nations-leading-social-care-network-announces-new-name-aligning-brand-to-mission-in-time-of-momentous-impact-301411821.html>.
11. The Emergency Food Assistance Program. USDA Food and Nutrition Service. Retrieved Aug. 22, 2022, from <https://www.fns.usda.gov/tefap/emergency-food-assistance-program>.
12. Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). USDA Food and Nutrition Service. Retrieved Aug. 21, 2022, from <https://www.fns.usda.gov/wic>.
13. Farmers Market Nutrition Program. USDA Food and Nutrition Service. Retrieved Aug. 22, 2022, from <https://www.fns.usda.gov/fmnp/wic-farmers-market-nutrition-program>.
14. Seniors Farmers' Market Nutrition Program. USDA Food and Nutrition Service. Retrieved Aug. 21, 2022, from <https://www.fns.usda.gov/sfmnp/senior-farmers-market-nutrition-program>.
15. Food Distribution Program on Indian Reservations. USDA Food and Nutrition Service. Retrieved Aug. 22, 2022, from <https://www.fns.usda.gov/fdpir/food-distribution-program-indian-reservations>.

## About SameSky Health

SameSky Health is a cultural experience company that removes barriers to care and forms meaningful relationships to bring people to health. We guide health plan members on their annual wellness journeys by building trusted relationships that encourage dignity, autonomy and companionship as they navigate disparate life experiences within a complex healthcare system.

Launched in 2017, SameSky Health engages 2.3 million+ members across 15 states, in 25+ different languages. The company's cultural expertise and technology-based solutions enable health plans to grow member engagement, improve quality measures and increase overall health outcomes. SameSky Health is based in North Hollywood, CA.



5250 Lankershim Blvd. Ste. 540,  
North Hollywood, CA 91601  
info@sameskyhealth.com  
(855) 735-6726