

# AHS HQIC Monthly Health Equity Office Hours



**Rosa Abraha, MPH, Alliant Health Solutions**

*Topic: CMS Hospital Health Equity Strategic Planning*

December 21, 2023

# Rosa Abraha, Alliant Health Solutions

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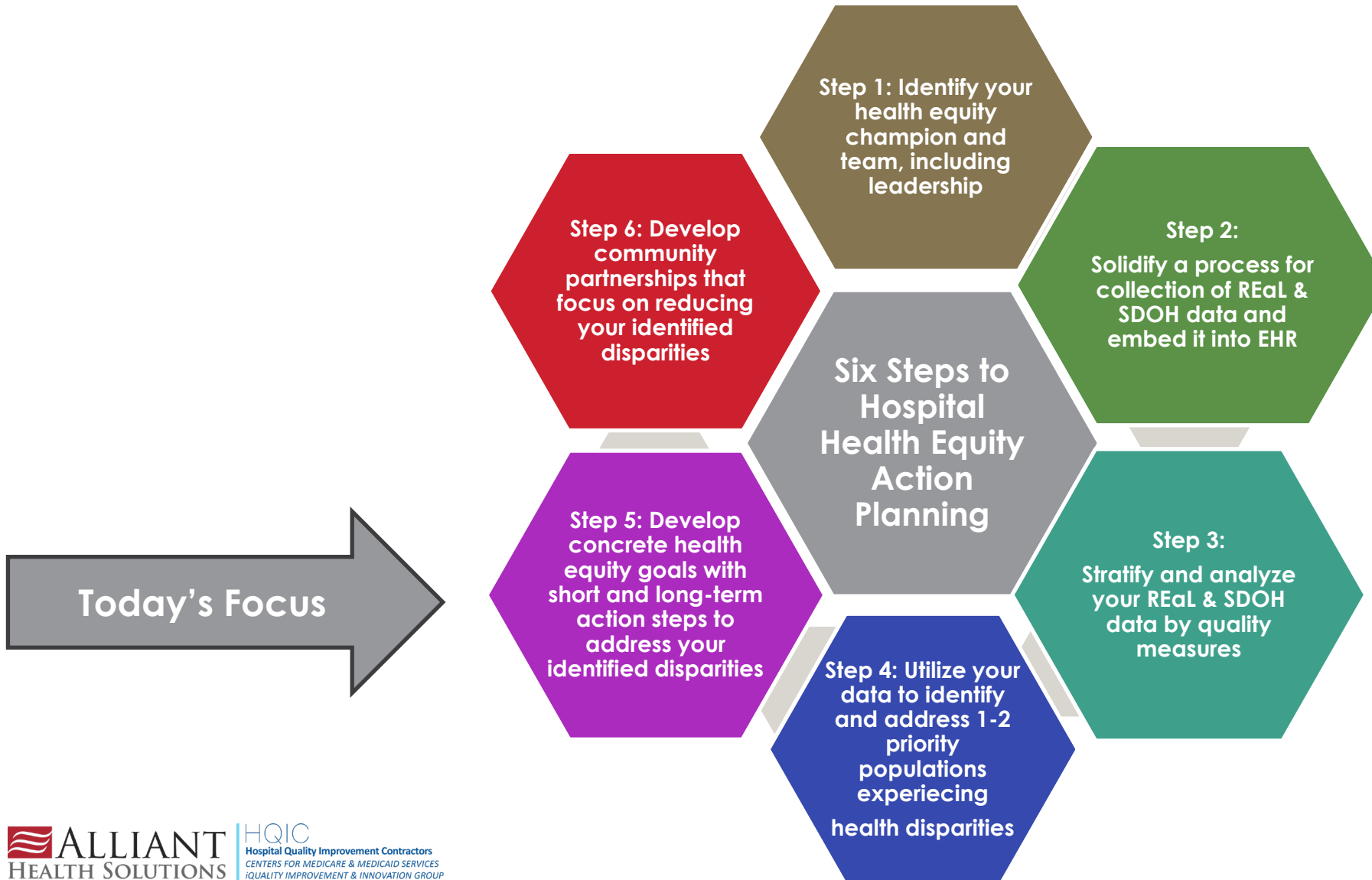


Rosa Abraha, MPH  
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Rosa leads Alliant Health Solution's health equity strategic portfolio and embeds health equity in the core of Alliant's work. Rosa has 10+ years of experience in public health advisory for premier agencies, including the Centers for Disease Control and Prevention (CDC), the National Institutes of Health (NIH), and the Food and Drug Administration (FDA). She holds a master of Public Health in Health Policy and Management from Emory University.

# Six Steps for Hospital Health Equity Action Planning



# CMS Attestation on HCHE Measure Domain 1 (MANDATORY CY23)



**Domain 1: Hospital commitment to reducing healthcare disparities is strengthened when equity is a key organizational priority.**

Under Domain 1, a strategic plan is defined as a *written* plan to address health equity that is shared across the hospital. Domain 1's sub-domains of 1a, 1b, 1c and 1d are defined further in [Text Box 1](#).

- This falls under the CMS Hospital Commitment to Health Equity (HCHE) measure
- **Reporting on HCHE is MANDATORY for CY23 and the submission period is April 1, 2024, to May 15, 2024**
- Each domain (including this one) is worth one point, for a total of five possible points
- Hospitals **must attest to ALL elements of a domain to receive the one point**, so attest "YES" if you're doing any of this work
- To report on these, go to <https://hqr.cms.gov>. On the dashboard on the left-hand side of the screen, click "data submissions," then "structural measures"
- CMS will publicly report the scores

**1A. Our hospital strategic plan identifies priority populations who currently experience health disparities.**

Examples of "priority populations" include but are not limited to:

- Persons belonging to minority racial or ethnic groups
- Persons living with a disability
- Being a member of the lesbian, gay, bisexual, transgender, and queer (LGBTQ+) community
- Being a member of a religious minority
- Living in a rural area
- Being near or below the poverty level
- Populations impacted by drivers of health, such as social determinants (e.g., language proficiency, housing or food insecurity, low literacy, difficulty with access to transportation, or other factors unique to a hospital's patient community)
- Any other populations that have been underserved and/or historically marginalized by the healthcare system

**1B. Our hospital strategic plan identifies healthcare equity goals and discrete action steps to achieving these goals.**

No additional clarification is provided for this attestation sub-domain.

**1C. Our hospital strategic plan outlines specific resources which have been dedicated to achieving our equity goals.**

Examples of specific resources include but are not limited to dedicated staffing, structural resources, funding, and trainings.

**1D. Our hospital strategic plan describes our approach for engaging key stakeholders, such as community-based organizations.**

Examples of key stakeholders include but are not limited to community-based organizations and collaboratives, patient and family advisory groups, elected officials, and existing institutional partnerships or coalitions.



# CMS Attestation on HCHE Measure Domain 5 (MANDATORY CY23)



**Domain 5: 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.**

Domain 5 sub-domains of 5a and 5b are defined further in [Text Box 5](#).

**5A. Our hospital senior leadership, including chief executives and the entire hospital board of trustees, annually reviews our strategic plan for achieving health equity.**

CMS defines “hospital senior leadership” as the C-suite and board of trustees, and not just quality committees or sub-committees of the board, as well as the Chief Medical Officer and senior leaders among hospital medical staff.

**5B. 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.**

See above CMS definition of “hospital senior leadership.”

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- **Reporting on HCHE is MANDATORY for CY23 and the submission period is April 1, 2024, to May 15, 2024**
- Each domain (including this one) is worth one point, for a total of five possible points
- Hospitals **must attest to ALL elements of a domain to receive the one point**, so attest “YES” if you’re doing any of this work
- To report on these, go to <https://hqr.cms.gov>. On the dashboard on the left-hand side of the screen, click “data submissions,” then “structural measures”
- CMS will publicly report the scores

# NEW! Alliant Tool for Hospital Health Equity Strategic Planning

[https://quality.allianthealth.org/media\\_library/hospital-health-equity-strategic-planning-tool/](https://quality.allianthealth.org/media_library/hospital-health-equity-strategic-planning-tool/)

The purpose of this tool is to provide a framework for hospital leadership and staff in the development of a health equity strategic plan that meets the CMS Hospital Inpatient Quality Reporting (IQR) Program Attestation Guidance for the Hospital Commitment to Health Equity Measure. Per Domain 5 Leadership Engagement in the guidance, this plan is to be reviewed and updated at least annually.

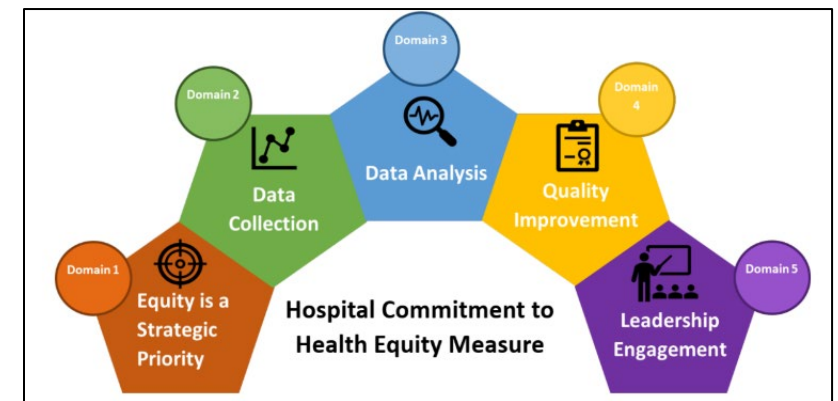
The screenshot shows the top portion of a form titled "HOSPITAL HEALTH EQUITY STRATEGIC PLANNING TOOL". The header includes the Alliant Health Solutions logo and the HQIC logo (Hospital Quality Improvement Contractors, Centers for Medicare & Medicaid Services, Quality Improvement & Innovation Group). A blue banner on the right contains the title "HOSPITAL HEALTH EQUITY STRATEGIC PLANNING TOOL". Below the header, there is a paragraph of introductory text. The form contains several input fields: "Hospital Name:", "Chief Health Equity Officer/Health Equity Champion:", "Strategic Plan Approved by Senior Leadership and the Hospital Board on:", "Executive Summary:", "Hospital(s) Background:", and "Health Equity Statement:". Each of these labels is followed by a large, empty rectangular box for text entry.

# Full CMS Attestation Guidance on Health Equity

## For CY 2023 Reporting Period/FY 2025 Payment Determination

- For the CY 2023 reporting period/FY 2025 payment determination under the Hospital IQR Program, hospitals will need to confirm that they engaged in the activities described in this attestation guidance document from January 1, 2023, - December 31, 2023. If hospitals participate or complete qualifying activities at any time within the reporting year, they may answer yes to their attestation. Hospitals must complete their attestation for the CY 2023 reporting period/FY 2025 payment determination between April 1, 2024 - May 15, 2024.

| File Name  | File Type | File Size |                          |
|--|-----------|-----------|--------------------------|
| Attestation Guidance for the Hospital Commitment to Health Equity Measure (06/2023)  | PDF       | 485 KB    | <a href="#">Download</a> |
| Hospital Commitment to Health Equity Structural Measure Specifications (06/2023)   | PDF       | 305 KB    | <a href="#">Download</a> |
| Screening for Social Drivers of Health Measure and the Screen Positive Rate for Social Drivers of Health Measure (December 2022) | PDF       | 122 KB    | <a href="#">Download</a> |
| Frequently Asked Questions: Social Drivers of Health (SDOH) Measures   | PDF       | 281 KB    | <a href="#">Download</a> |



# Important Notes on CMS Health Equity Reporting

**Question 10:** **Is the Hospital Commitment to Health Equity (HCHE) a pass/fail measure, and must we meet all five domains? If we answer No and do not meet all the domains, will our hospital be penalized?**

The HCHE measure is required to be reported under the Hospital IQR Program. This is a pay-for-reporting measure; hospitals will receive credit for the reporting of their measure results regardless of their responses to the attestation questions. For public display purposes, a hospital's responses to the attestation questions will be scored as described below.

The HCHE measure includes five attestation-based questions, each representing a separate domain of commitment. For a hospital to affirmatively attest to a domain, and receive credit for that domain, the hospital will evaluate and determine whether it engages in each of the elements that comprise the domain. Hospitals receive one point for each domain to which they attest Yes, stating they are meeting the required competencies; a hospital's score can be a total of 0 to 5 points (1 per domain). For each domain, there are between one and four associated Yes/No sub-questions for related structures or activities within the hospital. Hospitals will only receive a point for each domain if they attest Yes to all related sub-questions. There is no "partial scoring" for sub-questions. For example, in Domain 1, hospitals must attest Yes to sub-questions A–D to earn the point for that domain. If hospitals participate or complete qualifying activities at any time within the reporting year, they may attest Yes for that domain.

| Measure 1                            | Measure 2   |
|--------------------------------------|---|
| Hospital Commitment to Health Equity | Screening for Social Drivers of Health            |
|                                      | Screen Positive Rate for Social Drivers of Health |
| Mandatory                            | Optional  |

- Report on the HCHE measure, even if your hospital can not attest to any element under any domain.
- Currently, there is no financial penalty for scoring a zero.
- Failing to report data under the Hospital Inpatient Quality Reporting (IQR) Program can automatically reduce Medicare reimbursement by 25%.

For more information, click the link: [https://www.qualityreportingcenter.com/globalassets/iqr-2023-events/iqr12423/iqr\\_qa-summary-document\\_1.24.23\\_06132023508.pdf](https://www.qualityreportingcenter.com/globalassets/iqr-2023-events/iqr12423/iqr_qa-summary-document_1.24.23_06132023508.pdf)



# Alliant Health Solutions Health Equity Coaching Package

| HEALTH EQUITY  |  | COACHING PACKAGE  |
|--|--|---|
| Purpose: Use the evidence-based best practices and resources to create quality improvement action plans. |  |   |
| Category   | Best Practices/Interventions   | Links to Resources, Toolkits, Webinars, Etc.  |
| Beginning Health Equity Journey  | Begin health equity journey with planning and preparation  | <a href="#">Roadmap for Success: Implementing Equitable Care (HSAG HQIC, 2021)</a>                                      |
|  |  | <a href="#">Health Equity Snapshot: A Toolkit for Outcomes</a>  |
|  |  | <a href="#">The Health Equity Roadmap (AHA/IFDHE)</a>   |
|  | Become familiar with federal and private sector definitions, standards and requirements for hospital health equity | <a href="#">CMS New SDOH Standards - Remington Report</a>   |
|  |  | <a href="#">NPSG.16.01.01 Improving health care equity for the hospital's patients is a quality and safety priority</a> |
|  |  | <a href="#">CMS Health Equity Fact Sheet</a>  |
|  |  | <a href="#">CMS Health Equity Programs</a>  |
|  |  | <a href="#">CMS Framework for Health Equity 2022 - 2032</a>   |
|  | <a href="#">The Joint Commission Health Equity R3 Report</a>   |   |
|  | Conduct an equity of care gap analysis   | <a href="#">Health Equity Organizational Assessment (MHA)</a>   |
| Review resources on best practices for effective hospital health equity implementation                   | <a href="#">A Practical Guide for Implementing Hospital Health Equity - AHS HQIC LAN</a>                           |   |
|  | <a href="#">AHS Health Equity Presentation to Alabama Hospital Association</a>                                     |   |
|  | <a href="#">Change Path of Health Equity Resources (Feb 28, 2023)</a>  |   |
|  | <a href="#">Building an Organizational Response to Health Disparities (CMS, 2020)*</a>                             |   |
|  |  | *Contains links to other resources  |

[https://quality.allianthealth.org/wp-content/uploads/2023/04/2023-Coaching-Package-Health-Equity\\_508.pdf](https://quality.allianthealth.org/wp-content/uploads/2023/04/2023-Coaching-Package-Health-Equity_508.pdf)

# Questions?

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Email us at [HospitalQuality@allianthealth.org](mailto:HospitalQuality@allianthealth.org)

or call us 678-527-3681.

# Alliant HQIC Health Equity Office Hours is being extended into 2024!



**January 2024 Registration:**  
<https://allianthealth-org.zoom.us/meeting/register/tZUkcOGsrz8jG9xfCIIbH2n0QMI2ika9ZWM#/registration>

**February - August 2024 Registration:**  
<https://allianthealth-org.zoom.us/meeting/register/tZEvd eqsrT8qHdLmWzdwsrkV3w0tF4r2nXM a#/registration>



## JOIN OUR UPCOMING WEBINAR EVENT

**ALLIANT HQIC**  
**Health Equity Office Hours**  
 Tues, Jan. 16 from 3-4:00 p.m. ET & Every 3rd Thursday from 3-4:00 p.m. ET from February through August 2024 via ZOOM

- [01.16.24\\_TO3\\_HQIC Health Equity Office Hours](#)
- [02.15.24\\_TO3\\_HQIC Health Equity Office Hours](#)
- [03.21.24\\_TO3\\_HQIC Health Equity Office Hours](#)
- [04.18.24\\_TO3\\_HQIC Health Equity Office Hours](#)
- [05.16.24\\_TO3\\_HQIC Health Equity Office Hours](#)
- [06.20.24\\_TO3\\_HQIC Health Equity Office Hours](#)
- [07.18.24\\_TO3\\_HQIC Health Equity Office Hours](#)
- [08.15.24\\_TO3\\_HQIC Health Equity Office Hours](#)



**OVERVIEW:**  
 Interested in networking with peers and learning about the health equity regulatory requirements and best ways to implement at your hospital? Join our subject matter experts from Alliant Health Solutions and Tift Regional Medical Center (GA) for monthly Interactive office hours.

Office hours are participant driven and with minimum slide presentations. Discussions will focus on the six health equity planning and action steps as well as other questions from the hospitals, e.g., CEO engagement.



Office Hours will be held the 3rd Thursday of the month from 3-4:00 p.m. ET. Please register to attend.

Jan. 16, 2024 • Feb. 15, 2024 • Mar. 21, 2024 • Apr. 18, 2024  
 May 16, 2024 • Jun. 20, 2024 • Jul. 18, 2024 • Aug. 15, 2024

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### FEATURED SPEAKERS:



**ROSA ABRAHA, MPH**  
 Health Equity Lead  
 Alliant Health Solutions



**LEANN PRITCHETT, MSN, RN, CPHQ**  
 System Director of Quality and Safety  
 Tift Regional Medical Center

### AUDIENCE:

Health equity team leaders, quality and patient safety professionals, clinical social workers, community and population health professionals, clinical team members, leadership

# Alliant Health Solutions HQIC Health Equity Office Hour Materials

What can we help you find?

## Upcoming Events

Presentation  
Materials  
Found Here

### HQIC Office Hours

HQIC Health Equity Planning Office Hours -   
November 16, 2023

HQIC Health Equity Planning Office Hours -   
December 21, 2023

[SHOW MORE](#)

### HQIC LAN Events

[SHOW MORE](#)

### HQIC Community of Practice Calls (COP) Events

The Core Elements for Antibiotic Stewardship in Action - National Antibiotic Stewardship Updates | Nov. 9, 2023 

[SHOW MORE](#)



# Making Health Care Better *Together*

## **COLLABORATORS:**

Alabama Hospital Association  
Alliant Health Solutions  
Comagine Health  
Georgia Hospital Association  
KFMC Health Improvement Partners  
Konza

## Hospital Quality Improvement



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Thank you for joining us!  
How did we do today?

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