



HEALTH EQUITY

QUARTERLY

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Director's Message

Welcome to the Spring 2022 edition of Health Equity Quarterly, where the Centers for Medicare & Medicaid Services (CMS) Office of Minority Health (OMH) is able to highlight activities, messages from leadership, and work across the U.S. Department of Health and Human Services to address health care disparities.

CMS OMH recently released the [CMS Framework for Health Equity](#), which outlines a 10-year agency approach to promote health equity and to enhance initiatives that are focused on mitigating health disparities for all disadvantaged or underserved populations. The Framework incorporates 5 priority areas that CMS will use to develop and initiate policies and programs to support health for all people served by Medicare, Medicaid, the Children's Health Insurance Program (CHIP), and the Health Insurance Marketplaces. The priority areas include expanding the collection, reporting, and analysis of standardized data; assessing the causes of disparities within CMS's programs and addressing inequities in policies and operations to close gaps; building the capacity of health care organizations and the workforce to reduce health and health care disparities; advancing language access, health literacy, and the provision of culturally tailored services; and increasing all forms of accessibility to health care services and coverage.

On April 28, CMS OMH hosted the CMS Framework for Health Equity Symposium where we discussed the Framework, the importance of data collection, the connection to

stakeholder and partner efforts to improve health equity, and additional health equity information and updates from CMS. This symposium offered us a chance to hear from various partner organizations and CMS officials about the importance of addressing systemic barriers to health equity across all of our Centers and Offices. Click [here](#) to view the recording.

CMS OMH strives to ensure that all of the populations that we serve have access to quality health care, regardless of race, ethnicity, disability, sexual orientation, gender identity, socioeconomic status, geography, preferred language, or other factors that affect access to care and health outcomes. The [CMS Framework for Health Equity](#) establishes a foundational roadmap for how we can continue supporting health care organizations, health care professionals and partners—providers, health plans, federal, state, and local partners, tribal nations, individuals and families, quality improvement partners, researchers, policymakers, and other stakeholders—in activities to achieve health equity.

- Dr. LaShawn McIver

CMS Framework for Health Equity

Research Updates

CMS OMH maintains a series of data snapshots, data highlights, and other reports. Here are the latest data reports published by CMS OMH:

- [Disparities in Health Care in Medicare Advantage by Race, Ethnicity, and Sex](#) – This 2022 stratified report summarizes the quality of health care received by Medicare Advantage enrollees nationwide, highlighting racial and ethnic differences in health care experiences and comparing the quality of care between men and women.
- [Health Equity Challenges and CMS Resources to Help Address Them](#) – This infographic outlines various barriers to health equity and related challenges that populations often face and shares CMS resources that can help close the health equity gap.
- [Utilization of Z Codes for Social Determinants of Health among a Sample of Medicare Advantage Enrollees, 2017 and 2019 \(April 2022\)](#) – This data highlight focuses on analyzing the utilization of Z codes in a sample of Medicare Advantage enrollees from 2016 to 2019. The report describes sociodemographic data, Z codes claims data collected, and highlights potential incentives to increasing the use of Z codes to help reduce health care disparities.
- [Chronic Kidney Disease Disparities in Medicare Fee-For-Service Beneficiaries](#) – This updated data snapshot provides resources for providers and people with Medicare to educate themselves about the causes and treatment options available for individuals living with chronic kidney disease.

- [Chronic Obstructive Pulmonary Disease Disparities in Medicare Fee-For-Service Beneficiaries](#) – This updated data snapshot provides resources for providers and people with Medicare to educate themselves about the risk factors, causes, and prevalence of chronic obstructive pulmonary disease among fee-for-serve beneficiaries.
- [Inventory of Resources for Standardized Demographic and Language Data Collection](#) – This updated inventory provides resources on standardized data collection, which include standards, reports, guides, toolkits, and articles.

Equity Initiatives Across CMS

- [CMS Framework for Health Equity 2022–2023](#) - This Framework details CMS's integrated, action-oriented approach to advance health equity among members of communities, providers, plans, and other organizations serving communities that are underserved or disadvantaged.
- [CMS Health Equity Pillars Fact Sheet](#) – This fact sheet addresses CMS's strategy to advance health equity across all Centers and Offices, which is the first pillar of CMS's updated strategic plan.
- [CMS Behavioral Health Strategy Fact Sheet](#) – This fact sheet addresses CMS's strategy to improve access to prevention and treatment services for substance use disorders, mental health services, crisis intervention, and pain care.
- [CMS Innovation Center \(CMMI\) 2021 Strategy Refresh](#) – This strategy refresh drives our delivery system toward meaningful transformation, including focusing on equity in all stages of model design, operation, and evaluation, and aligned with other CMS programs and initiatives.
- [Building On The CMS Strategic Vision: Working Together For A Stronger Medicare](#) - *This Health Affairs* article synthesizes how CMS can advance health equity, expand access, drive high-quality, person-centered care, and promote affordability and sustainability in the Medicare program.
- [Black Health & Wellness \(recording\): Building a More Equitable Health Care System](#) - In February 2022, CMS hosted a special live-streamed virtual roundtable discussion with CMS Administrator Chiquita Brooks-LaSure to acknowledge Black History Month.

Health Equity Successes

- **Utah's Primary Care Network (PCN) Section 1115 Demonstration Amendment** – CMS approved an amendment to Utah's PCN section 1115 demonstration. The demonstration will allow the state to provide housing-related services and supports, including tenancy support, community transition and supportive living services to adults, ages 19 through 64 with income at zero percent of the federal poverty level, with no dependent children, who are enrolled in the targeted adult population under the demonstration and who meet other needs-based criteria and risk factors.
- **CMS Proposes Policies to Advance Health Equity** – CMS published the Fiscal Year (FY) 2023 Inpatient Prospective Payment System (IPPS) and Long-Term Care Hospital (LTCH) Prospective Payment System (PPS) rule, which includes measures that will encourage hospitals to build health equity into their core functions, thereby improving care for people and communities who are disadvantaged and/or underserved by the health care system. The rule includes three health equity-focused measures in hospital quality programs.
- **CMS Proposes Policies to Advance Maternal Health** – CMS published the FY 2023 IPPS LTCH PPS rule, which proposes a “Birthing-Friendly” hospital designation and additional quality measure reporting to drive improvements in maternal health outcomes and maternal health equity.
- **Special Enrollment Period for Low Income Consumers** - The Biden-Harris Administration is announcing a new Special Enrollment Period (SEP) opportunity for low-income consumers at or below 150% of the Federal Poverty Level (FPL), which is approximately \$19,000 for an individual and \$40,000 for a family of four. This SEP will be available to consumers who have applied for Marketplace coverage since Open Enrollment ended and who didn't have access to another SEP from a recent life event, such as a loss of coverage, and will enable eligible consumers to enroll in a Marketplace plan.

Request for Information: FY 2023 IPPS and LTCH PPS Rule

CMS is seeking public comment on promoting health equity through possible future incorporation of hospital performance for socially at-risk populations into the Hospital Readmissions Reduction Program. CMS is also seeking public input on how to optimally measure health care quality disparities, including what to prioritize in data collection and reporting as well as approaches to consider in driving provider accountability across hospital quality programs. Once the comment period has opened, the public will have 60 days to provide comment.

For more information on the Request for Information on social determinants of health, particularly related to homelessness, reported by hospitals on Medicare claims, please click the resources below.

- The proposed rule: <https://www.federalregister.gov/public-inspection/current>.

- Fact sheet on the proposed payment rule: <https://www.cms.gov/newsroom/fact-sheets/fy-2023-hospital-inpatient-prospective-payment-system-ipps-and-long-term-care-hospitals-ltch-pps>.
- Fact sheet specific to the maternal health and health equity measures included in the proposed payment rule: <https://www.cms.gov/newsroom/fact-sheets/fy-2023-hospital-inpatient-prospective-payment-system-ipps-and-long-term-care-hospitals-ltch-pps-0>.

Proposed Rule