



HPC Health Equity Annual Update

July 18, 2024



Eliminating health inequities is integral to achieving the HPC's mission.



“ The HPC is committed to better health and better care – at a lower cost – for all residents of the Commonwealth. Through market oversight, data-driven analysis, and independent policy insights, our goal is to make health care more **affordable, transparent, and equitable.**”

The HPC's statute states that the agency should seek to address health care disparities through its work:

“ The commission shall establish goals that are intended to **reduce health care disparities** in racial, ethnic, and disabled communities and in doing so shall seek to incorporate the recommendations of the health disparities council and the office of health equity.”

As part of its commitment to advance health equity and promote social and economic justice throughout its work, the HPC recognizes the need to continually examine how this work is being done and where improvements can be made.

Embedding Health Equity into HPC Internal Processes

	INTEGRATE	Integrate health equity principles into operations and workstreams to ensure that an “equity in everything” approach is applied to all current and future projects.
	DESIGN	Plan the design of program and research activities around targeting inequities in health care access and outcomes
	ALIGN	Actively seek opportunities to align, partner, and support other state agencies, the health care system, and other organizations toward common health equity goals .
	REVIEW	Continually track and review projects for the extent to which they deepen the understanding of health inequities and disparities in the Commonwealth.
	LEARN	Follow data and methodology advances in health equity practice and engage in knowledge sharing activities to expand staff capacity and fluency in equity principles to enhance agency work products.

The HPC incorporates a health equity lens in its four core strategies.



MARKET OVERSIGHT

Monitor and intervene when necessary to assure market performance

CONVENE

Bring together stakeholder community to influence their actions on a topic or problem



RESEARCH AND REPORT

Investigate, analyze, and report trends and insights

PARTNER

Engage with individuals, groups, and organizations to achieve mutual goals

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Implementation Activities: Research and Report

- Integrate the best available **data on race and ethnicity** (or proxy data when necessary) into analyses, including linking discharge data with the APCD to examine differences in spending by race/ethnicity.
- Develop an **affordability index model** that measures differential impacts of premiums and out-of-pocket spending by factors like income, geography, and market segment, as part of the broader push toward affordability standards in the Commonwealth.
- Continue to highlight issues of equity in the **Annual Health Care Cost Trends Report:**
 - Affordability section focused on small-firm employees
 - Chartpack incorporating data on community income and race and ethnicity
 - Dashboard measuring performance on health equity and affordability metrics
- **Release publications** with a focus on health equity:
 - Chartpack on [Severe Maternal Morbidity in MA](#), detailing disparities in spending, affordability, and health care experiences during the post-partum period by race/ethnicity
 - DataPoints issue examining [sites of flu vaccinations](#) by community income
 - Upcoming DataPoints issue examining trends in GLP-1 weight loss drugs, with data on community income and geography for commercially-insured members

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Implementation Activities: Market Oversight

- Recognize and assess an entity's baseline position in the market and specific historic trends **during the annual performance improvement plan (PIP) review process**. Consider where spending increases may be attributed to necessary investments in care for underserved populations or market corrections to address historic disparities in pricing.
- Incorporate patient characteristics (e.g., race/ethnicity, geography, insurance types), potential impacts on affordability and accessibility, and parties' plans for improving equitable access to care into the **review of proposed market changes**.
- Examine **trends and patterns in provider supply over time**, including geographic and demographic data from provider expansions and closures. The HPC found that acute care hospitals with an inpatient service line closure from 2016-2021 were more likely to serve lower income patients and communities with greater social need compared to hospitals without closures.
- Assess the nature and impacts of **private equity and other for-profit investors** often acquiring or funding health care entities that serve older adults and MassHealth members, recommending options for better monitoring and **guarding against potential negative outcomes** of their involvement.

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Implementation Activities: Convene



- Appointed new members to the **HPC Advisory Council** for the 2023 – 2024 term, prioritizing broadening and diversifying membership of this body to encompass more perspectives and experiences within the health care system.
- Convene HPC investment program awardees to **elevate equity topics**, e.g., a **Patient Experience Committee** of Black doulas and Black birthing people to advise on key themes and evaluation design of the BESIDE program.
- Host **investment program awardees** at HPC public meetings to inform HPC commissioners on **impact of equity-focused initiatives** (e.g., MassUp, C4SEN, BESIDE)
- Ensure that the “equity in everything” approach extends into discussions during HPC public meetings, including utilizing the **Annual Health Care Cost Trends Hearings** as an opportunity to bring increased attention and transparency to health equity over the past several years.

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Implementation Activities: Partner



- Continue to advance health equity through **ACO Certification standards**, certifying 14 ACOs in 2023-2024 under an updated **Health Equity Requirement** that pertains to: data-driven interventions; patient engagement initiatives, and strategic planning.
- Expand focus on **maternal health equity** through the BESIDE investment program and the newly-announced HEART-BP program:
 - HEART-BP will fund initiatives to address existing inequities in **severe maternal morbidity** driven by hypertensive disorders in pregnancy.
 - In partnership with BESIDE awardees, **more than 70 babies** have been born through racially concordant doula services for Black birthing people.
- Support MassUP awardees in **reaching program goals to address inequities in social determinants of health**, e.g., engaging families in economic empowerment activities; expanding the work of a resident-led Food Policy Council; advocating for BIPOC-led agriculture within the food system; and building a community of practice of small childcare providers.
- Align efforts with and support the work of the Executive Office for Health and Human Services' **Advancing Health Equity in Massachusetts (AHEM) taskforce**, including recent work to apply the Child Opportunity Index to AHEM's focus communities.

BESIDE Investment Program: Birth Equity and Support through the Inclusion of Doula Expertise

This short video highlights the work of Birth Equity and Support through the Inclusion of Doula Expertise (BESIDE) Investment Program awardee, Baystate Medical Center. It features Massachusetts State Senator Liz Miranda, Baystate Medical Center staff and their doula service partners, Springfield Family Doulas, along with a participant of the BESIDE program.



1 WORK IN THE PIPELINE

The HPC has several equity-focused projects that will be released in the next year. These include:

- Upcoming **Cost Trends Report** that will include a dashboard on health equity, examinations of cesarean births by race/ethnicity, and other expanded equity and affordability work.
- The **5-year retrospective Cost and Market Impact Review on the Beth Israel Lahey Merger** (expected in 2024); and
- A report on **primary care access challenges**, with data on disparities by race/ethnicity and income.

2 CONTINUED COMMITMENT TO TRANSPARENCY

The HPC will continue to provide updates on how **health equity principles are integrated into operations and workstreams**. This includes keeping current the [HPC's website](#) with information on projects and resources, holding public discussions during HPC Board and Advisory Council meetings and hearings, and annual updates to the [Health Equity Practice and Style Guide](#).

3 COLLABORATION AND PARTNERSHIP

The HPC actively seeks opportunities to **align, partner, and support** other state agencies, the health care system, and other organizations toward **common health equity goals** in an effort to foster shared learning and collective accountability to reducing health inequities.

July 12, 2023

MASSACHUSETTS
HEALTH POLICY COMMISSION



HPC Health Equity Annual Update

July 12, 2023



The HPC's Commitment to Health Equity



**Eliminating
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*The HPC's mission is to advance a more transparent, accountable, and **equitable** health care system through its independent policy leadership and innovative investment programs. The HPC's overall goal is better health and better care – at a lower cost – **for all residents** across the Commonwealth*

The HPC's statute states that the agency should seek to address health care disparities through its work:

*The commission shall establish goals that are intended to **reduce health care disparities** in racial, ethnic, and disabled communities and in doing so shall seek to incorporate the recommendations of the health disparities council and the office of health equity.*

As part of its commitment to advance health equity and promote social and economic justice throughout its work, the HPC recognizes the need to continually examine how this work is being done and where improvements can be made.

Progress Towards Embedding Health Equity into HPC Internal Processes



Integrate health equity principles into operations and workstreams to ensure that an **“equity in everything”** approach is applied to all current and future projects.



Actively seek opportunities to **align, partner, and support** other state agencies, the health care system, and other organizations toward **common health equity goals**.



Explicitly build equity into the **design of measurement and evaluation plans** for investment programs, e.g., equity-focused patient experience data collection.



Hold regular **journal and book clubs** to stay up-to-date on equity themes and best practices and increase team fluency of health equity concepts.



Continually review and update the **HPC Health Equity Practice and Style Guide** to promote intentional and consistent use of language and terminology across all agency work products.

The HPC employs its four core strategies to advance health equity.



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Implementation Activities: Research and Report

- Integrating the best available **data on race and ethnicity** (or proxy data when quality race/ethnicity data is not available) into all research and data analyses.
- Continuing to highlight issues of equity in the **Annual Health Care Cost Trends Report:**
 - Affordability section focused on small-firm employees
 - Chartpack incorporating data on community income and race and ethnicity
 - Dashboard measuring performance on health equity, including metrics of affordability, access, and disparities by income and race/ethnicity
- **Release publications** with a focus on health equity:
 - DataPoints issues on [Oral Health Access and Equity in the Commonwealth](#) and [Persistent Cost-sharing for Contraception](#)
 - Report on [Telehealth Use in the Commonwealth](#)
 - Chartpack on [Health Care Workforce Trends and Challenges in the Era of COVID-19](#)

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Implementation Activities: Partner

- Deepened focus on maternal health equity through participation in **DPH's Maternal Health Task Force** and an interagency **doula workgroup**.
- Advanced **certification standards for Accountable Care Organizations (ACOs)** focused on “Learning, Equity, and Patient-centeredness” (LEAP) for 2024 by requiring ACOs report on three key areas: data collection and use, patient engagement, and strategy.
- Continued implementation of **innovative, health equity-focused investment programs** that integrate racial equity principles (BESIDE, C4SEN, and MassUP programs).
- Extended partnership with DPH to administer funding from the **State's Opioid Response** in support of projects aimed at **addressing inequities in access to medication for opioid use disorder** for birthing people with OUD.
- Continued participation in EOHHS's **Health Equity Technical Advisory Group** to advise on specific standards for providers and plans to collect patient demographic data.

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Implementation Activities: Convene

- Appointed new members to the **HPC Advisory Council** for the 2023 – 2024 term, prioritizing broadening and diversifying membership of this body to encompass more perspectives and experiences within the health care system.
- Convene HPC investment program awardees to **elevate equity topics**, e.g., a **Patient Experience Committee** of Black doulas and Black birthing people to advise on key themes and evaluation design of the BESIDE program.
- Host **ad hoc special events and support other organizations and agencies** with events and webinars, e.g., the HPC's Building a Robust Health Care Workforce event and the Health Equity Compact's inaugural Equity Trends Summit.
- Continue to highlight issues related to health equity at public meetings, including utilizing the **Annual Health Care Cost Trends Hearings** as an opportunity to bring increased attention and transparency to health equity.

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Implementation Activities: Watchdog

- Include recognition and assessment of an entity's baseline position in the market and historic trends **during the annual performance improvement plan (PIP) process**. Consider whether spending increases reflect necessary investments to enhance services for underserved populations.
- Examine various **health-system factors that can drive disparities in health outcomes** for different populations, to be included in forthcoming report to the Legislature on health disparities.
- Incorporate patient characteristics (e.g., race, income) and impacts on access and equity into the **review of proposed market changes**.
- The **Office of Patient Protection** monitors **trends in consumer issues**, looking out for disparities between different patient populations and escalating any concerning trends to the Division of Insurance.

Looking Ahead



1 WORK IN THE PIPELINE

The HPC has several equity-focused projects that will be released in the next year. These include:

- A report on **Supply, Access, and Affordability: How Health System Factors Perpetuate Disparities** (expected fall 2023);
- The **5-year retrospective Cost and Market Impact Review on the Beth Israel Lahey Merger** (expected in 2024); and
- A new project exploring spending and outcomes for **pregnancy, delivery, and postpartum care** with a particular focus on lower-income populations and populations of color (in planning phase).

2 CONTINUED COMMITMENT TO TRANSPARENCY

The HPC will continue to provide updates on how **health equity principles are integrated into operations and workstreams**. This includes keeping current the [HPC's website](#) with information on projects and resources, holding public discussions during HPC Board and Advisory Council meetings and hearings, and keeping the public and stakeholders engaged through communications like the [Transforming Care newsletter](#).

3 COLLABORATION AND PARTNERSHIP

The HPC actively seeks opportunities to **align, partner, and support** other state agencies, the health care system, and other organizations toward **common health equity goals**.

The Health Equity Compact's Equity Trends Summit: June 13, 2023



The Health Equity Compact comprises over **70 leaders of color** across a diverse set of Massachusetts organizations – including hospitals, health centers, payers, academic institutions and public health – who have come together to advance health equity in Massachusetts.

The Compact's bill, ***An Act to Advance Health Equity*** (H.1250 and S.799), is currently under consideration by the Massachusetts legislature.

- The inaugural summit highlighted **disparities in health, health care, and patient outcomes** in Massachusetts, including a new report released in partnership with the Blue Cross Blue Shield Foundation: [*The Time is Now: The \\$5.9 Billion Case for Massachusetts Health Equity Reform*](#).
- Panels convened leaders from the **health care industry, businesses, state agencies, legislators, and other sectors** to discuss and make public commitments on how they will address health equity in the Commonwealth.
- Key Themes and Takeaways:
 - Creating a collaborative, coordinated approach to advance health equity for all residents of the Commonwealth is a **shared responsibility**.
 - The importance of **engaging directly with communities, including non-traditional health care partners**, to identify disparities, address social determinants of health, and improve care delivery.
 - The importance of **improving data collection standards** to better reflect racial, socioeconomic, and other disparities in health outcomes between communities.

June 7, 2023

MASSACHUSETTS
HEALTH POLICY COMMISSION



HPC Health Equity Spotlight

June 7, 2023



Health Equity Spotlight: Using Multiple Data Sets to Better Understand Health Inequities



WHY IT'S IMPORTANT

While some data sets do have information on race/ethnicity, sexual orientation/gender identity, immigration status, and other factors that are important to consider when trying to improve health equity, most of this data originates from survey data. However, survey data does not capture health care utilization and spending in as much detail as claims data.

WHAT WE ARE DOING

HPC researchers use two CHIA data sets for research: the All-Payer Claims Database (APCD) and the Acute Hospital Case-Mix Databases (Case-mix). Case-mix contains information on race/ethnicity for every patient that has an ED visit, observation stay, or inpatient stay at an acute-care facility in MA. The APCD does not contain information on race-ethnicity, but it does contain information on spending, cost-sharing, and follow-up care received after an ED visit or hospital stay.

Health Equity Spotlight: Using Multiple Data Sets to Better Understand Health Inequities



HOW WE ARE DOING IT

The Research and Cost Trends team is developing a method to **understand spending, cost-sharing, and follow-up care for persons by race/ethnicity** after emergency department, observations stays, and inpatient stays by using both the case-mix data (to calculate statewide incidence) and the APCD or public fee schedules (to track spending and follow-up care).

IN ACTION

Researchers could examine **adverse birthing morbidity events by race/ethnicity** in the case-mix data. This will provide a baseline number of adverse events in the state and the type of adverse events. Researchers will then use the APCD to **calculate additional health care costs and cost-sharing due to these adverse outcomes** for the commercial population and the MassHealth fee schedule for the MassHealth population.

April 12, 2023

MASSACHUSETTS
HEALTH POLICY COMMISSION



HPC Health Equity Spotlight

April 12, 2023

Health Equity Spotlight: Accountable Care Organization Certification



SPOTLIGHT ON

Integrating health equity into **Accountable Care Organization (ACO) Certification**.

WHY IT'S IMPORTANT

ACO Certification offers an opportunity both to **gather information** about ACOs' efforts to integrate health equity into their work and to **set expectations and create accountability** via payer-agnostic standards.

HOW WE ARE DOING IT

By **reviewing** prior ACO Certification submissions related to health equity, **researching** the health equity landscape (e.g., among payers, accreditation bodies, thought leaders), and **engaging** with key stakeholders on relevant priorities and capabilities.

Health Equity Spotlight: Accountable Care Organization Certification



WHAT WE ARE DOING

Updating our ACO Certification requirements to enable the HPC to **track progress on ACO capacity** to design, implement, and refine interventions, programs, and/or processes to advance health equity for their patients.

These updates emphasize specific ACO progress and commitments to improving health equity via three broad categories of activity:

(1) making organization-wide **strategic commitments** to improving health equity, (2) **harnessing data** to identify and address health inequities, and (3) **engaging patients** in the design of interventions to close these inequities.

Health Equity Spotlight: Accountable Care Organization Certification



Example of how the HPC will track progress on ACOs' capacity to engage patients in the design of interventions to close health inequities

ACOs identify their current **status** on the activity and provide a short description or example to illustrate progress in the past two years, if applicable, and plans or commitments for progress in the next two years

ACTIVITY

To inform design and implementation of care delivery interventions and/or population health management programs with an equity focus, the ACO **meaningfully engages with patients experiencing the targeted health inequity.**

STATUS *(Dropdown menu options)*

Patients **SHARE IN DECISION-MAKING** with the ACO on design and implementation

ACO has **CONSULTED** patients on design and implementation

ACO has **INFORMED** patients about design and implementation

ACO has **not engaged** patients in design and implementation

N/A, no equity-focused interventions designed or implemented

July 13, 2022

MASSACHUSETTS
HEALTH POLICY COMMISSION



Health Equity Framework Implementation Update

July 13, 2022

The HPC's Commitment to Health Equity



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The HPC's statute states that the agency should seek to address health care disparities through its work:

*The commission shall establish goals that are intended to **reduce health care disparities** in racial, ethnic and disabled communities and in doing so shall seek to incorporate the recommendations of the health disparities council and the office of health equity.*

To reflect the HPC's commitment to advance health equity and promote social and economic justice throughout its work, the HPC has proposed an action plan **to ensure that health equity is a core component of the HPC's work today and going forward.**

Progress Towards Embedding Health Equity into HPC Internal Processes



Launched an “**Equity in Every Project**” tool to identify specific opportunities to address health equity in external-facing care delivery transformation workstreams.



Formed a dedicated **health equity implementation workstream** with an accountable leader to support equity-focused initiatives, and hold regular meetings to measure progress.



Created a **health equity metric** for all ongoing and planned projects to ensure that a majority have a health equity component.



Regularly **review and incorporate literature** on the impacts of health care market changes on access and affordability for certain patient groups, especially when data resources are limited.



Stay up-to-date on equity themes and best practices by **reviewing health equity-focused articles** and other resources, and compiling them into a designated library for internal use.

The HPC employs its four core strategies to advance health equity.



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CONVENE

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Implementation Activities: Research and Report



- Infrastructure building around health equity, including **developing and testing multiple algorithms** to identify people with disabilities in claims data sets and **examining race/ethnicity data** through CHIA's hospital inpatient database.
- Updating **Annual Cost Trends Report** to focus on equity:
 - Examining changes in ambulatory care by community income and geography
 - Expanded affordability section
 - Added an equity-focused health disparities dashboard
- **Publish reports** with equity focus:
 - Entries in the HPC's DataPoints series analyzing inequities in pregnancy-related care and oral health care, increasing health care unaffordability, and access to urgent care/retail clinics
 - Chartpack on Certified Nurse Midwives and Maternity Care
 - Legislative reports on the state of the health care workforce; telehealth; and health disparities in the Commonwealth

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Implementation Activities: Partner



- Implementation of **Birth Equity and Support through the Inclusion of Doula Expertise (BESIDE) Investment Program** and **Moving Massachusetts Upstream (MassUP) Investment Program**, both focusing on health equity.
- Issued and implemented a new set of **certification standards for Accountable Care Organizations (ACOs)** focused on “Learning, Equity, and Patient-centeredness” (LEAP).
- Extended collaboration with **Department of Public Health** and **Perinatal-Neonatal Quality Improvement Network of Massachusetts (PNQIN)**:
 - Apply State Opioid Response funding to projects aimed at identifying inequities in access to care for substance use disorder
 - Engage patients/families with lived experience in hospitals’ perinatal quality improvement efforts
- Participation in EOHHS’s **Health Equity Technical Advisory Group** to advise on how to capture relevant metrics in data and improve the ability to understand health equity.

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Implementation Activities: Convene



- Continue to utilize the **Annual Cost Trends Hearings** as an opportunity to bring increased focus and attention to health equity.
- Update and maintain **health equity webpage** with equity-focused work and implementation strategies.
- Update and maintain ***Health Equity Practice and Style Guide***, an internal reference tool that includes general guidance, specific recommendations, and useful resources.
- Center health equity as a theme in the ***HPC's Transforming Care* email newsletter.**
- Develop principles and practices for **embedding equity into stakeholder engagement work.**

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Implementation Activities: Watchdog



- Incorporate patient characteristics (e.g., race, income) into the **review of proposed market changes**, including the HPC's comment on Mass General Brigham's proposed expansions and HPC analysis of the acquisition of Harrington Hospital by UMass Memorial Health Care.
- Examine various **health-system factors that can drive disparities in health outcomes** for different populations, to be included in forthcoming legislative report on health disparities.
- The **Office of Patient Protection** continues to monitor **trends in consumer issues** through a health equity lens and aims to address each inquiry, waiver, and external review in a fair and consistent manner.

Looking Ahead: Challenges and Opportunities

As part of its commitment to advance health equity and promote social and economic justice throughout its work, the HPC recognizes the need to continually examine how this work is being done and where improvements can be made.

1

QUALITY AND RELIABILITY OF DATA

A core persisting challenge is the **lack of consistent, reliable collection of patient-level data** on race, ethnicity, language, disability, sexual orientation, and gender identity, namely within the All Payer Claims Database (APCD). The HPC recognizes the need for a **broad, multi-stakeholder approach** to resolving this problem at the state level, and the HPC's unique role in advancing these conversations.

2

DEFINING A STRATEGIC APPROACH

As the HPC continues to think and learn broadly about how to advance health equity goals, there is also advantage in **defining a set of specific health equity priority areas or targets** to bring a more concentrated focus to health equity, which could translate into more tangible results over time.

3

LEVERAGING HPC TOOLS AND RESOURCES

Exploring and leveraging the **tools that the HPC specifically possesses** in order to affect change and identifying **where the HPC can support the work of other organizations** already engaging in meaningful and impactful work.

July 14, 2021



MASSACHUSETTS
HEALTH POLICY COMMISSION

Health Equity Framework

**Presented at the July 14, 2021 meeting
of the HPC Board of Commissioners**

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Exemplar Questions to Guide the HPC's Work in Applying an Equity Lens



Step 1: INITIATION

- How are different populations affected by the status quo? Who might benefit from a change in practice/policy/program?
- What are the demographics and health needs of the populations relevant to this work?
- What sources did the research/data that informed this issue area rely on? Is there any existing bias?



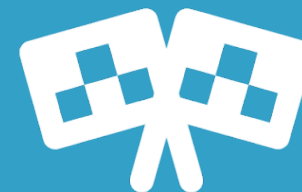
Step 2: PLANNING

- What are the anticipated impacts of a given workstream? What are the expected outcomes and for whom?
- Could there be unintended consequences, or differential impacts by population? If so, how can they be mitigated to ensure that inequities are not exacerbated?
- Whose voices are at the table, and whose are not and how can we include them?



Step 3: IMPLEMENTATION

- Have differences correlated with social, economic, and/or environmental conditions been observed?
- How can these differences be interpreted; do they represent inequities?
- If so, how can the context (policies, practices, decisions) that contributed to these inequities be explained?
- If the data/information to speak to these inequities directly is lacking, are there available alternatives?



Step 4: CLOSEOUT

- What are the implications of the work and for whom?
- Were there unintended or inequitable effects? If so, how could the course of this work be corrected?
- What can be done differently to promote more equitable outcomes?
- Was the language used to describe all disparities and identify upstream factors consistent, precise, and respectful?
- Were results/publications/learnings disseminated to all relevant stakeholders, in ways that could benefit them?

Implementation Activities: Research and Report

RESEARCH AND REPORT



- Updated the **Annual Cost Trends Reports** to focus on equity:
 - Expanded the affordability section in the main benchmark chapter to be an explicit “equity and affordability” section
 - Added equity-focused measures to the dashboard to be tracked on an annual basis
 - Aim to have a full, new chapter with an equity-relevant topic or analysis in each annual report
- Examine how additional data could be incorporated in the **MA Registration of Provider Organizations (MA-RPO) dataset** to support health equity work.
- Draw upon **qualitative data insights from the Office of Patient Protection** to highlight the impact of policies on consumers.
- Explore the creation of **maps and other accessible data resources** to describe the structural issues that perpetuate health inequities in the Commonwealth.

Implementation Activities: Partner

PARTNER



- Develop standard procedures and tools for embedding equity considerations into the **design, procurement process, and operations** of all investment and certification programs, including:
 - Conceptualizing program goals
 - Developing and implementing standard language for Requests for Proposals (RFPs) that defines the HPC's health equity framework and establishes baseline expectations for applicants/awardees
 - Developing and implementing a list of equity-focused questions to discuss with awardees during routine check-ins to advance equity goals
- Develop and implement **equity-focused standards for certifying Accountable Care Organizations** (ACOs) in 2022 and beyond

Implementation Activities: Convene

CONVENE



- Utilize the **Annual Cost Trends Hearings** as an opportunity to bring increased focus and attention to health equity by:
 - Highlighting issues of inequity and injustice in the Commonwealth and nationally
 - Inviting experts in health equity research and practice to contribute to discussions and presentations
 - Engaging local health care leaders and market participants
- Ensure that all event programming **includes and amplifies perspectives from underrepresented communities** through both participants and audiences
- Publish, update, and maintain **health equity webpage** with updates on HPC projects, workstreams, and resources

Implementation Activities: Watchdog

WATCHDOG



- Expand the **equity-related questions posed to providers and payers** under market oversight, either through transactional reviews or Performance Improvement Plans.
- Include impacts to equity more explicitly in summaries of anticipated impacts from individual Material Change Notice reviews.
- Include **explicit sections on health equity in Cost and Market Impact Review reports**, pharmaceutical drug pricing reports, and any similar reports.
- Continue to monitor health insurers' **implementation of language access requirements** in the Office of Patient Protection regulations and identify whether health insurer policies may negatively and disproportionately impact communities of color, residents with limited-English proficiency, and residents with low incomes.

Accountability and Action Plan

Public Commitment to Advancing Health Equity

Presentation of the Health Equity Framework and Revised Mission Statement to the HPC’s Board and Advisory Council



Public posting of the Health Equity Framework on the HPC’s website, with regular updates in consultation with HPC’s Board, Advisory Council, and staff



Dedicated time in public meetings, including the Annual Health Care Cost Trends Hearings, to address issues of health equity and the HPC’s efforts in this space



Internal Action Steps

Development and implementation of operational framework to incorporate health equity principles and lens in all HPC workstreams



Promote diversity, equity, and inclusion in order to more fully cultivate the culture of anti-racism within our agency and engagement experts to provide staff workshops and discussions



Identification and implementation of specific goals to evaluate progress of integrating health equity principles in all HPC workstreams



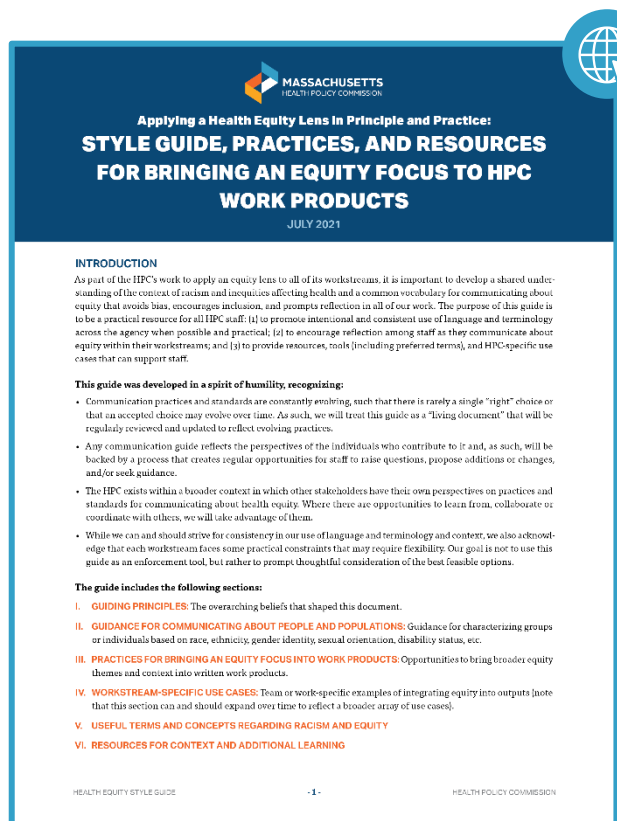
Regular internal meetings to review the agency’s health equity efforts and to inform updates to the HPC’s Health Equity Framework



Establishment of health equity as an integrated workstream with regular assessment of resources (e.g., staff, training, funds) to support health equity focus



Health Equity Practice and Style Guide



As part of the HPC's work to apply an equity lens to all of its workstreams, it is important to develop a **shared understanding of the context of racism and inequities affecting health and a common vocabulary for communicating about equity** that avoids bias, encourages inclusion, and prompts reflection in all of our work.

The ***Health Equity Practice and Style Guide*** is an internal reference tool that includes general guidance, specific recommendations, and useful resources.

The Health Equity Practice and Style Guide is available now on the HPC's website.

July 22, 2020



MASSACHUSETTS
HEALTH POLICY COMMISSION

Health Equity Framework

**Presented at the July 22, 2020 meeting
of the HPC Board of Commissioners**

Background on Health Equity and the Imperative for Action

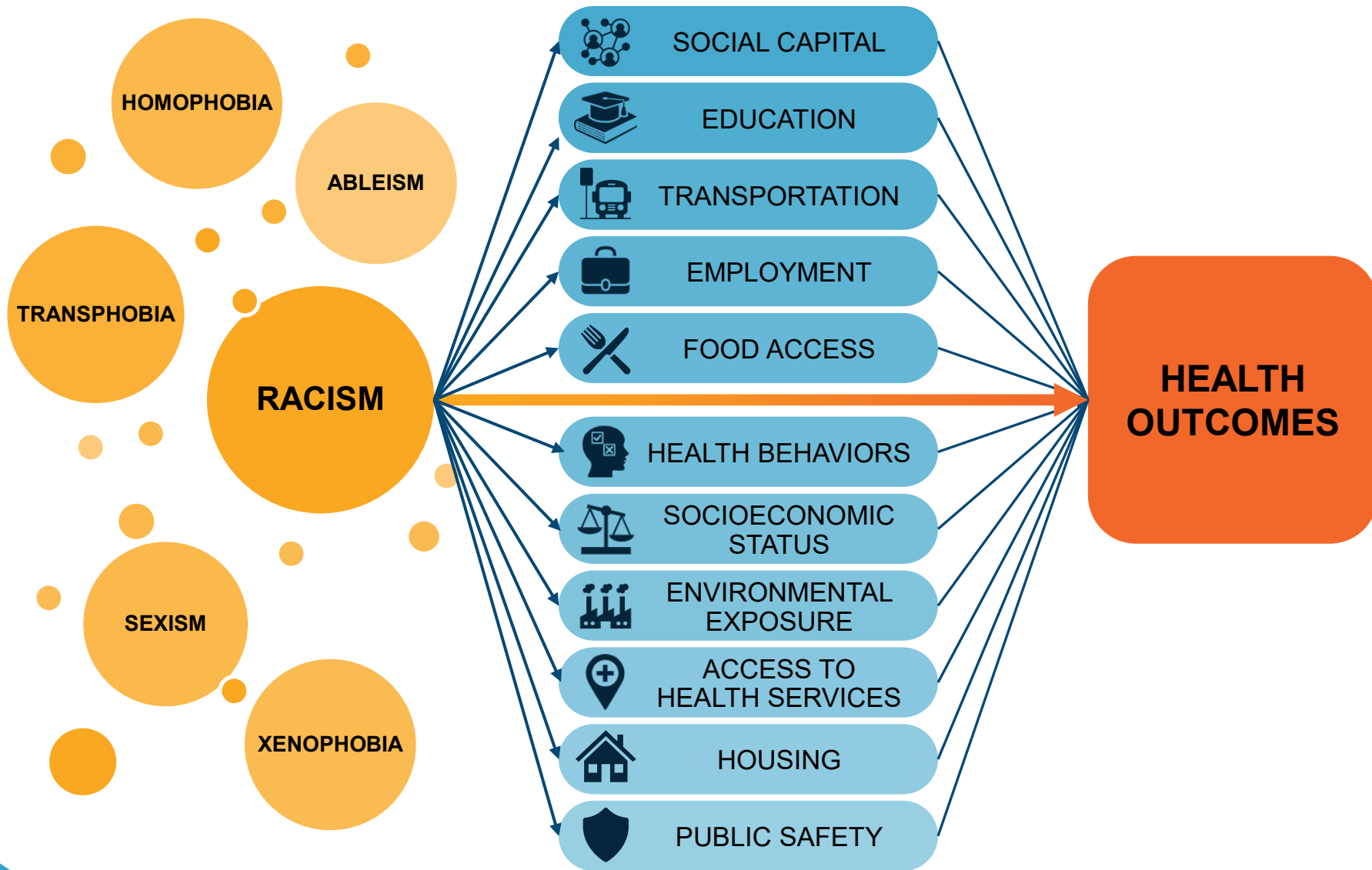
The disparate impact of COVID-19 on communities of color and ongoing injustices of police brutality across the country expose systemic racism and deeply embedded structural inequities.

These inequities are not unique to the health care system but are reflected in persistent health disparities and increased disease burden for communities of color and other marginalized populations. In addition to their impact on health and well-being, these inequities result in higher health care spending and an imbalanced distribution of resources for both individuals and for all people of the Commonwealth of Massachusetts.

Health equity is the opportunity for everyone to attain their full health potential, with no one disadvantaged from achieving this potential due to socioeconomic status or socially assigned circumstance (e.g., race, gender, ethnicity, religion, sexual orientation, geography).

Health inequities in the Commonwealth have been well documented by the Massachusetts Department of Public Health (DPH), the Center for Health Information and Analysis (CHIA), the Office of the Attorney General, the HPC, and others. The **Office of Health Equity** within DPH works to address social determinants so everyone can attain their full health potential.

Racism, Among Many Structural Inequities, Negatively Impacts Health Outcomes and Other Social Determinants of Health



The HPC's Commitment to Health Equity

Eliminating Health Inequities is Integral to Achieving the HPC's Mission

*The HPC's mission is to advance a more transparent, accountable, and **equitable** health care system through its independent policy leadership and innovative investment programs. The HPC's overall goal is better health and better care – at a lower cost – **for all residents** across the Commonwealth*

The HPC's statute states that the agency should seek to address health care disparities through its work:

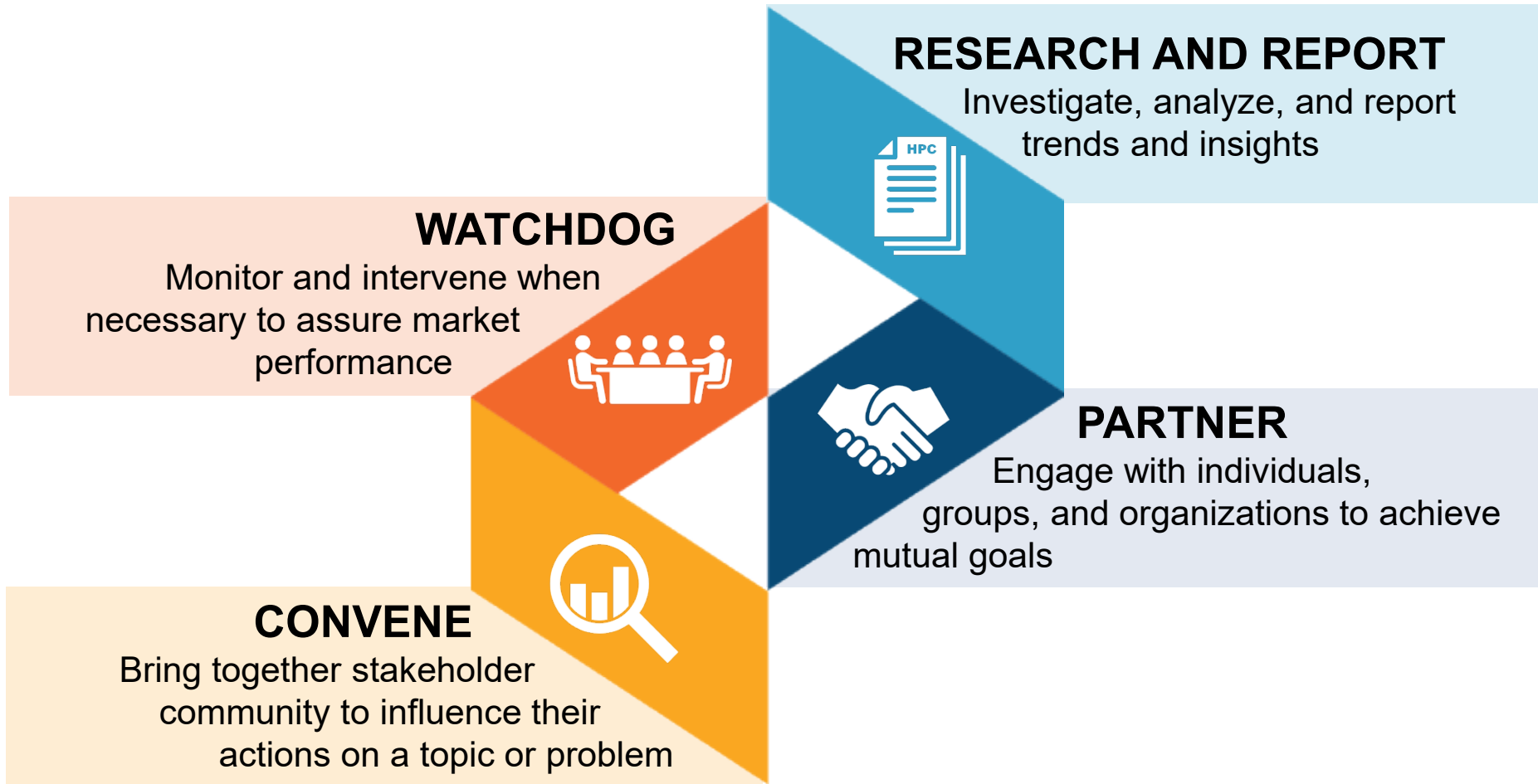
*The commission shall establish goals that are intended to **reduce health care disparities** in racial, ethnic and disabled communities and in doing so shall seek to incorporate the recommendations of the health disparities council and the office of health equity.*

To reflect the HPC's commitment to advance health equity and promote social and economic justice throughout its work, the HPC is proposing an action plan **to ensure that health equity is a core component of the HPC's work today and going forward.**

Principles for Integrating Health Equity into the HPC's Work

- The HPC acknowledges the pervasiveness of health inequities – and the systemic racism that underlies them – and **that eliminating inequities is integral to achieving the HPC's mission** of better health and better care at a lower cost for all residents of the Commonwealth.
- The HPC will **embed health equity concepts** in all aspects of our work and will **apply all four of its core strategies** to the goal of advancing health equity in the Commonwealth: research and report, convene, watchdog, and partner.
- The HPC's work will be **informed and guided by those with lived experience** of inequities.
- The HPC will educate itself about the impact of systemic racism and will **promote diversity, equity, and inclusion in our workplace** in order to more fully cultivate the culture of anti-racism within our agency.
- Advancing health equity in the Commonwealth is a **shared responsibility**. The HPC will actively seek opportunities to align, partner, and support other state agencies, the health care system, and organizations working for health equity on these goals.

The HPC Will Use All Four of its Core Strategies to Advance Health Equity



HPC Health Equity Lens in Action: Research and Report



Research and Report

- Partner with other state agencies and stakeholders to develop standardized data collection requirements and practices that will promote the use of data to address health inequities
- Report on subpopulations across applicable analyses, to inform how health care trends may disproportionately impact populations by income, geography, or race / ethnicity
- Prioritize the collection of qualitative data to contextualize quantitative findings and inform how inequities manifest in Massachusetts communities
- Regularly review existing data sources to determine what additional data is needed to identify inequities (e.g., more robust demographic information)



Applying an Equity Lens: The HPC will continue its focus on affordability (e.g., health care premiums, pharmaceutical costs) with a goal to contextualize the ways health care spending impacts disproportionately impacts different communities in the Commonwealth. One of the goals of this work is to make concrete how costly health care is, why it is so costly, and how those costs create inequities – particularly in access – across various sub-populations of Massachusetts residents in concrete terms.

HPC Health Equity Lens in Action: Convene



Convene

- Commit to utilizing the HPC's role as a convener to spotlight health equity-related topics and disseminate information on identified inequities and disparities
- Solicit input from diverse and underrepresented populations through both formal and informal channels (e.g., HPC Advisory Council, stakeholder engagement for procurement processes)
- Ensure that the impact of the social determinants of health and systemic racism inform policy recommendations
- Work with other state agencies to align and coordinate health equity efforts
- Maximize accessibility of HPC proceedings and publications



Applying an Equity Lens: The HPC will make health equity a focus at the upcoming 2020 Annual Health Care Cost Trends Hearing, specifically regarding the impact of COVID-19 on communities of color. Speakers and panelists will include individuals with lived experience and/or organizations focused on upstream social determinants of health, such as housing, food security, or social services.

HPC Health Equity Lens in Action: Watchdog



Watchdog

- Examine the impact of proposed market changes (i.e., provider mergers and affiliations, expansions, relocations and closures) on diverse populations, including communities of color, non-English speaking populations, and low-income populations
- Analyze the spending performance of payers and providers in the context of the populations and communities they serve and the services they provide
- Collect comprehensive data to understand and report on the current structure and distribution of health care resources in Massachusetts
- Solicit information from diverse populations in the course of drug pricing reviews



Applying an Equity Lens: In its reviews of proposed transactions, the HPC's Market Oversight and Transparency team considers access factors that are relevant to health equity, e.g., to what extent are the provider organizations providing services to low-income patients, MassHealth patients, non-English speaking patients, and communities of color? Will there be any impact on MassHealth participation? Will relocated services be accessible for populations that rely on public transportation? Where and for what populations are resources being invested?

HPC Health Equity Lens in Action: Partner



Partner

- Embed health equity considerations and expectations into HPC's delivery system transformation programs (e.g., investment programs, certification)
- Explicitly include health equity elements as key competitive factors in selection criteria and review and selection committee processes
- Ensure that investment program awardees have a foundational understanding of health equity and the social determinants of health, and the resources to collect and analyze data that will inform health equity advancement
- Invest in programs and support policies that address the underlying causes of health inequities (i.e. the social determinants of health)



Applying an Equity Lens: The MassUP investment program is supporting four partnerships between health care providers and community organizations to address a social determinant of health that is leading to health inequities in particular Massachusetts communities. Awardees were required to demonstrate understanding of racial equity principles in their proposals and must engage residents with lived experience of inequities to inform their activities.

Exemplar Questions to Guide the HPC's Work in Applying an Equity Lens



Step 1: INITIATION

- How are different populations affected by the status quo? Who might benefit from a change in practice/policy/program?
- What are the demographics and health needs of the populations relevant to this work?
- What sources did the research/data that informed this issue area rely on? Is there any existing bias?



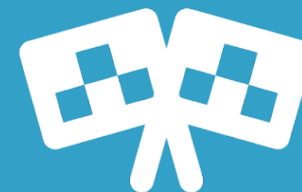
Step 2: PLANNING

- What are the anticipated impacts of a given workstream? What are the expected outcomes and for whom?
- Could there be unintended consequences, or differential impacts by population? If so, how can they be mitigated to ensure that inequities are not exacerbated?
- Whose voices are at the table, and whose are not and how can we include them?



Step 3: IMPLEMENTATION

- Have differences correlated with social, economic, and/or environmental conditions been observed?
- How can these differences be interpreted; do they represent inequities?
- If so, how can the context (policies, practices, decisions) that contributed to these inequities be explained?
- If the data/information to speak to these inequities directly is lacking, are there available alternatives?



Step 4: CLOSEOUT

- What are the implications of the work and for whom?
- Were there unintended or inequitable effects? If so, how could the course of this work be corrected?
- What can be done differently to promote more equitable outcomes?
- Was the language used to describe all disparities and identify upstream factors consistent, precise, and respectful?
- Were results/publications/learnings disseminated to all relevant stakeholders, in ways that could benefit them?

Health Equity Accountability and Action Plan

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Dedicated time in public meetings, including the Annual Health Care Cost Trends Hearings, to address issues of health equity and the HPC's efforts in this space

Internal Action Steps

Development and implementation of operational framework to incorporate health equity principles and lens in all HPC workstreams

Engagement of experts to provide staff training and promote diversity, equity, and inclusion in order to more fully cultivate the culture of anti-racism within our agency

Identification and implementation of specific goals to evaluate progress of integrating health equity principles in all HPC workstreams

Regular internal meetings to review the agency's health equity efforts and to inform updates to the HPC's Health Equity Framework

Recognition of health equity as an integrated workstream, and regular assessment of resources (e.g., staff, training, and funds) to support health equity focus
