



NATIONAL  
QUALITY FORUM

# Promoting Health Equity and Eliminating Disparities through Measurement

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# What we mean by performance measure?

- Healthcare performance measures are tools used to *quantify* the quality or cost of care provided to patients and their families.
- They allow us to *gauge* the quality of care that is provided and help us understand whether and how much improvement activities *improve* care and outcomes .



# Why do we measure?

*The primary goal of healthcare performance measurement is to **improve the quality of healthcare** received by patients (and ultimately, to **improve health**)*



***Measurement is a quality improvement tool, not an end in and of itself***

# What Are The Major Uses of Performance Measures?

- Internal quality improvement
- Benchmarking
- Accountability applications
  - Certification
  - Accreditation
  - Defining provider networks
  - Public reporting
  - Payment



# A Roadmap for Promoting Health Equity and Reducing Disparities



# Identify and Prioritize Reducing Health Disparities

- The volume of existing measures can make prioritization a challenge, but measures that can help to monitor and reduce disparities should be prioritized
- The NQF Disparities Committee recommended four criteria to help stakeholders identify and prioritize disparities:
  - 1. Prevalence:** *How prevalent is the condition among populations with social risk factors?*
  - 2. Size of the Disparity:** *How large is the gap in quality, access, and/or health outcome between the group with social risk factors and the group with the highest quality ratings for the measure?*
  - 3. Strength of the evidence:** *How strong is the evidence linking improvement in performance on the measure to improved outcomes in the population with social risk factors?*
  - 4. Ease and feasibility of improvement (actionable):** *Is the measure actionable (e.g. by providers/clinicians/health plans, etc.) among the population with social risk factors?*

# Implement Evidence-Based Interventions to Reduce Disparities

- Many studies have documented interventions that reduce disparities; however, these interventions are rarely implemented in practice
- The reduction of disparities will require multilevel, systemic, and sustained interventions.
- A large body of evidence and guidance demonstrates how all stakeholders can play a role in reducing disparities

Roadmap outlines the current state of the evidence:

- Majority of research focuses on overall improvement of outcomes in populations that are socially at risk (in absolute terms)
- Paucity of health equity-focused implementation science studies
- Few interventions address how to improve health systems for populations with social risk
- Few interventions address disparities based on disability, income, social relationships, health literacy, and residential and community context
- Many interventions have the potential to reduce multiple disparities

# Invest in the Development and Use of Health Equity Performance Measures

## Collaboration and Partnerships

- Collaboration across health and non health sectors
- Community and health system linkages
- Build and sustain social capital and social inclusion
- Promotion of public and private policies that advance equity

## Culture of Equity

- Equity is high priority
- Safe and accessible environments for individuals from diverse backgrounds
- Cultural competency
- Advocacy for public and private policies that advance equity

## Structure for Equity

- Capacity and resources to promote equity
- Collection of data to monitor the outcomes of individuals with social risk factors
- Population health management
- Systematic community needs assessments
- Policies and procedures that advance equity
- Transparency, public reporting, and accountability for efforts to advance equity

## Equitable Access to Care

- Availability
- Accessibility
- Affordability
- Convenience

## Equitable High Quality Care

- Person and family centeredness
- Continuous improvements across clinical structure, process, and outcome performance measures stratified by social risk factors
- Use of effective interventions to reduce disparities in health care quality



# Incentivize the Reduction of Health Disparities and the Achievement of Health Equity

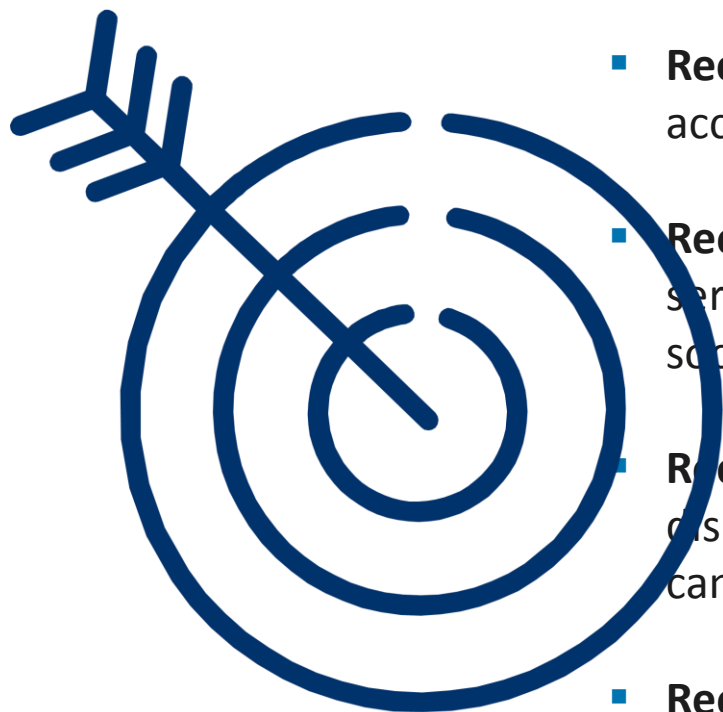
- The increased and varied use of performance measures offers numerous ways to incentivize the reduction of disparities
- Examples:
  - Accountable care models can include health equity measures that are linked to payment to spur both improvement and innovation.
  - Reporting the results of disparities sensitive and health equity measures can provide transparency as well as help identify and address disparities.
  - Public and private payers can adjust payments to providers based on social risk factors or offer additional payments for primary care or disease management programs (e.g., in-home monitoring of blood pressure).

# Recommendations

- **Recommendation 1:** Collect social risk factor data
- **Recommendation 2:** Use and prioritize stratified health equity outcome measures
- **Recommendation 3:** Prioritize measures in the domains of Equitable Access and Equitable High-Quality Care for accountability purposes
- **Recommendation 4:** Invest in preventative and primary care for patients with social risk factors
- **Recommendation 5:** Redesign payment models to support health equity



# Recommendations



- **Recommendation 6:** Link health equity measures to accreditation programs
- **Recommendation 7:** Support outpatient and inpatient services with additional payment for patients with social risk factors
- **Recommendation 8:** Ensure organizations disproportionately serving individuals with social risk can compete in value-based purchasing programs
- **Recommendation 9:** Fund care delivery and payment reform demonstration projects to reduce disparities
- **Recommendation 10:** Assess economic impact of disparities from multiple perspectives

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