

2023 National Hospital Equity Measures and Standards

COLOR KEY:

- **CMS HCHE:** [Centers for Medicare & Medicaid Services Hospital Commitment to Health Equity Measure](#) (Mandatory CY 2023)
- **CMS SDH:** [CMS Hospital Screening for Social Drivers of Health and Screening Positive Measures](#) (Voluntary CY 2023, Mandatory CY 2024)
- **TJC:** [The Joint Commission Health Care Disparities Reduction and Patient-Centered Communication Accreditation Standards](#) (1/1/2023)
- **OMH CLAS:** [U.S. Department of Health and Human Services Office of Minority Health National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care](#)
- **NCQA HE*:** [National Committee for Quality Assurance Health Equity Accreditation Standards](#)
- **NCQA HE PLUS*:** [National Committee for Quality Assurance Health Equity Plus Accreditation Standards](#)

For more information on the NCQA HEA and/or HE+ program(s), please visit www.datagen.info or contact Mandi Diamond, Senior Advisor, Practice Advancement Strategies, at mdiamond@datagen.info or 631-626-1062.

Engagement of hospital leadership

● CMS HCHE	<p>MUC 2021-106 Domain 5A</p> <p>Our hospital senior leadership, including chief executives and the entire hospital board of trustees, annually reviews our strategic plan for achieving health equity.</p>
● TJC	<p>Standard LD.04.03.08</p> <p>Reducing healthcare disparities for the [organization's] [patients] is a quality and safety priority.</p>
● OMH CLAS	<p>Standard 2</p> <p>Advance and sustain organizational governance and leadership that promotes CLAS and health equity through policy, practices, and allocated resources.</p>
● NCQA HE*	<p>HE 1: Organizational Readiness</p> <p>Support health equity goals and take action towards reducing bias and improving diversity, equity and inclusion.</p> <p>Element A: Building a Diverse Staff</p> <p>Element B: Promoting Diversity, Equity and Inclusion Among Staff</p>

Health equity plan

● CMS HCHE	<p>MUC 2021-106</p> <p>Domain 1A</p> <p>Our hospital strategic plan identifies priority populations who currently experience health disparities.</p> <p>Domain 1B</p> <p>Our hospital strategic plan identifies healthcare equity goals and discrete action steps to achieving these goals.</p> <p>Domain 1C</p> <p>Our hospital strategic plan outlines specific resources which have been dedicated to achieving our equity goals.</p>
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Health equity plan, continued

● TJC	Standard LD.04.03.08 Reducing healthcare disparities for the [organization's] [patients] is a quality and safety priority. EP 4 The [organization] develops a written action plan that describes how it will address at least one of the healthcare disparities identified in its [patient] population. EP 5 The [organization] acts when it does not achieve or sustain the goal(s) in its action plan to reduce healthcare disparities.
● OMH CLAS	Standard 9 Establish culturally and linguistically appropriate goals, policies, and management accountability, and infuse them throughout the organization's planning and operations.
● NCQA HE*	HE 5: Culturally and Linguistically Appropriate Services Programs Improve care and services for all members/patients. Element A: Program Description Element B: Annual Evaluation

Designated individual leads health equity activities

● TJC	Standard LD.04.03.08 Reducing healthcare disparities for the [organization's] [patients] is a quality and safety priority. EP 1 The [organization] designates an individual(s) to lead activities to reduce healthcare disparities for the [organization's] [patients].
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Collection of patient demographic data

● CMS HCHE	MUC 2021-106 Domain 2A Our hospital collects demographic information, including self-reported race and ethnicity and/or social determinant of health information on the majority of our patients. Domain 2B Our hospital has training for staff in culturally sensitive collection of demographic and/or social determinant of health information. Domain 2C Our hospital inputs demographic and/or social determinant of health information collected from patients into structured, interoperable data elements using a certified EHR technology.
● TJC	Standard RC.02.01.01 The [medical] record contains information that reflects the [patient's] care, treatment, and services. EP 28 The medical record contains the patient's race and ethnicity.

Collection of patient demographic data, continued

● NCQA HE*	HE 2: Race/Ethnicity, Language, Gender Identity and Sexual Orientation Data Collect information from members/patients that helps provide culturally and linguistically appropriate services. Element A: Systems for Individual-Level Data Element B: Collection of Data on Race/Ethnicity Element C: Collection of Data on Language Element D: Collection of Data on Gender Identity Element E: Collection of Data on Sexual Orientation Element F: Privacy Protections for Data Element G: Notification of Privacy Protections
● OMH CLAS	Standard 11 Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes and to inform service delivery.

Stratification of quality measures by patient demographic data

● CMS HCHE	MUC 2021-106 Domain 3A Our hospital stratifies key performance indicators by demographic and/or social determinants of health variables to identify equity gaps and includes this information on hospital performance dashboards. Domain 1B 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.
● TJC	Standard LD.04.03.08 Reducing healthcare disparities for the [organization's] [patients] is a quality and safety priority. EP 3 The [organization] identifies healthcare disparities in its [patient] population by stratifying quality and safety data using the sociodemographic characteristics of the [organization's] [patients].
● NCQA HE*	HE 6: Reducing Health Care Disparities Use data about the population to improve services and reduce disparities. Element A: Reporting Stratified Measures Element B: Use of Data to Assess Disparities Element C: Use of Data to Monitor and Assess Services Element D: Use of Data to Measure CLAS and Disparities

Healthcare disparities reduction

● CMS HCHE	MUC 2021-106 Domain 4A Our hospital participates in local, regional, or national quality improvement activities focused on reducing health disparities.
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Healthcare disparities reduction, continued

● TJC	<p>Standard LD.04.03.08 Reducing healthcare disparities for the [organization's] [patients] is a quality and safety priority.</p> <p>EP 4 The [organization] develops a written action plan that describes how it will address at least one of the healthcare disparities identified in its [patient] population.</p>
● NCQA HE*	<p>HE 6: Reducing Health Care Disparities Use data about the population to improve services and reduce disparities.</p> <p>Element A: Reporting Stratified Measures Element B: Use of Data to Assess Disparities Element C: Use of Data to Monitor and Assess Services Element D: Use of Data to Measure CLAS and Disparities</p>
● OMH CLAS	<p>Standard 10 Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement activities.</p>

Culturally and linguistically appropriate care and services

● TJC	<p>RI.01.01.01 The hospital respects, protects, and promotes patient rights.</p> <p>EP 29 The hospital prohibits discrimination based on age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, and gender identity or expression.</p>
● NCQA HE*	<p>HE 4: Practitioner Network Cultural Responsiveness Maintain a practitioner network that can meet the cultural and linguistic needs of members/patients.</p> <p>Element A: Assessment and Availability of Information Element B: Enhancing Network Responsiveness</p> <p>HE 5: Culturally and Linguistically Appropriate Services Programs Improve care and services for all members/patients.</p> <p>Element A: Program Description Element B: Annual Evaluation</p>
● OMH CLAS	<p>Standard 1 Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.</p>

Language assistance services

<p>● TJC</p>	<p>PC.02.01.21 The hospital effectively communicates with patients when providing care, treatment, and services.</p> <p>EP 1 The hospital identifies the patient’s oral and written communication needs, including the patient’s preferred language for discussing healthcare.</p> <p>EP 2 The hospital communicates with the patient during the provision of care, treatment, and services in a manner that meets the patient’s oral and written communication needs.</p>
<p>● NCQA HE*</p>	<p>HE 3: Access and Availability of Language Services Communicate effectively with members/patients.</p> <p>Element A: Written Documents</p> <p>Element B: Spoken Language Services</p> <p>Element C: Support for Language Services</p> <p>Element D: Notification of Language Services</p>
<p>● OMH CLAS</p>	<p>Standard 5 Offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all healthcare and services.</p> <p>Standard 6 Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.</p> <p>Standard 7 Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.</p> <p>Standard 8 Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.</p>

Training of Providers and Staff

<p>● NCQA HE*</p>	<p>HE 1: Organizational readiness Support health equity goals and take action towards reducing bias and improving diversity, equity and inclusion.</p> <p>Element A: Building a Diverse Staff</p> <p>Element B: Promoting Diversity, Equity and Inclusion Among Staff</p>
<p>● OMH CLAS</p>	<p>Standard 4 Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis.</p>

Workforce diversity

<p>● NCQA HE*</p>	<p>HE 1: Organizational readiness Support health equity goals and take action towards reducing bias and improving diversity, equity and inclusion. Element A: Building a Diverse Staff Element B: Promoting Diversity, Equity and Inclusion Among Staff</p> <p>HE 4: Practitioner Network Cultural Responsiveness Maintain a practitioner network that can meet the cultural and linguistic needs of members/patients. Element A: Assessment and Availability of Information Element B: Enhancing Network Responsiveness</p>
<p>● OMH CLAS</p>	<p>Standard 3 Recruit, promote, and support a culturally and linguistically diverse governance, leadership, and workforce that are responsive to the population in the service area.</p>

Community needs assessments

<p>● NCQA HE PLUS*</p>	<p>HE PLUS 1: Collection, Acquisition and Analysis of Community and Individual Data The organization acquires community data and collects individual data to segment or stratify its population and understand the similarities and differences between the social risks of the community and the social needs of the individuals it serves. Element B: Acquiring Communities' Social Risk Data Every 3 years, the organization acquires social risk data on communities...from: Factor 1: A community health assessment performed by a local public health agency or its equivalent. Element F: Population Segmentation or Risk Stratification [both by subpopulations of communities and individuals served] Element G: Prioritizing Social Risks and Social Needs</p>
<p>● OMH CLAS</p>	<p>Standard 12 Conduct regular assessments of community health assets and needs and use the results to plan and implement services that respond to the cultural and linguistic diversity of populations in the service area.</p>

Screening patients for health-related social needs

<p>● CMS SDH</p>	<p>Screening for Social Drivers of Health MUC2021–136 Numerator: Number of beneficiaries 18 and older screened for food insecurity, housing instability, transportation needs, utility assistance, and interpersonal violence. Denominator: Number of beneficiaries 18 and older in practice (or population). Screen Positive Rate for Social Drivers of Health MUC2021–134 Numerator: Number of beneficiaries 18 and older that screen positive for food insecurity, housing instability, transportation needs, utility assistance or interpersonal violence. Denominator: Total number of beneficiaries 18 and older screened for food insecurity, housing instability, transportation needs, utility assistance or interpersonal violence.</p>
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Screening patients for health-related social needs, continued

<p>● TJC</p>	<p>Standard LD.04.03.08 Reducing healthcare disparities for the [organization's] [patients] is a quality and safety priority. EP 2 The [organization] assesses the [patient's] health-related social needs and provides information about community resources and support services.</p>
<p>● NCQA HE PLUS*</p>	<p>HE PLUS 1: Collection, Acquisition and Analysis of Community and Individual Data The organization acquires community data and collects individual data to segment or stratify its population and understand the similarities and differences between the social risks of the community and the social needs of the individuals it serves. Element C: Collecting Individuals' Social Needs Data [including financial insecurity, food insecurity, housing stability, access to transportation, and interpersonal safety] HE PLUS 3: Data Management and Interoperability The organization has data privacy and security processes in place for managing access to, using and sharing individuals' social needs data.</p>

Interventions for patients for health-related social needs

<p>● TJC</p>	<p>Standard LD.04.03.08 Reducing health care disparities for the [organization's] [patients] is a quality and safety priority. EP 2 The [organization] assesses the [patient's] health-related social needs and provides information about community resources and support services.</p>
<p>● NCQA HE PLUS*</p>	<p>HE PLUS 4: Program to Mitigate Social Risks and Address Social Needs The organization has structures, processes and goals for improving its program to mitigate social risks and addressing social needs. [details include annual work plan, process for meaningful stakeholder engagement that is culturally and linguistically representative of communities and populations served, and annual written evaluation] HE PLUS 5: Referrals, Outcomes and Impact The organization refers individuals to social needs resources, accepts referrals from community-based organizations to track progress and evaluates the effectiveness of the referral process. [details include annual analysis to identify disparities by race/ethnicity, preferred language, sexual orientation, and gender identity]</p>

Community partnerships

<p>● CMS HCHE</p>	<p>MUC 2021-106 Domain 1D Our hospital strategic plan describes our approach for engaging key stakeholders, such as community-based organizations.</p>
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Community partnerships, continued

● NCQA HE PLUS*	HE PLUS 2: Cross-Sector Partnerships and Engagement The organization collaborates with community-based partners and initiatives to mitigate and address prioritized social risks and social needs. [Details include annual assessments of community resources to address social risks and to address social needs, and identifying and engaging with appropriate partners to deliver social needs resources or interventions.]
● OMH CLAS	Standard 13 Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.

Culturally and linguistically appropriate conflict and grievance resolution

● OMH CLAS	Standard 14 Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.
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Public reporting about health equity

● TJC	Standard LD.04.03.08 Reducing healthcare disparities for the [organization's] [patients] is a quality and safety priority. EP 6 At least annually, the [organization] informs key stakeholders, including leaders, licensed practitioners, and staff, about its progress to reduce identified healthcare disparities.
● OMH CLAS	Standard 15 Communicate the organization's progress in implementing and sustaining CLAS to all stakeholders, constituents, and the general public.

Adapted from California Department of Healthcare Access and Information Cross-Walk of Federal Government and National Hospital Equity Measures and Standards