



# Health Equity Quickinar Series

## Session 2

# Engaging Leadership in Health Equity

# OBJECTIVES

- Discuss the importance of engaging leadership in health equity.
- Review the HSAG HQIC business case for health equity.
- Identify the importance of leadership strategy in integrating health equity throughout the organization.

# 3 Keys to Success for any Initiative



Leadership support



Provider buy-in



Frontline engagement

# Who Is Responsible for Health Equity?

Case Management

C-Suite

Social Services



# Everyone!



**C-Suite and Board**

**Social Services**

**Case Management**

**Quality**

**Providers**

**Frontline Staff**

**Ancillary Staff**

**Patients and Families**

**Community**

# Leading the Charge

- Leadership must be engaged to lead the charge.
- Hospitals are looked at as a common convener by the community.
- Model behavior and actions.
- Send the message: “Health Equity is a priority.”



# Leadership Support in Health Equity



## Health Equity:

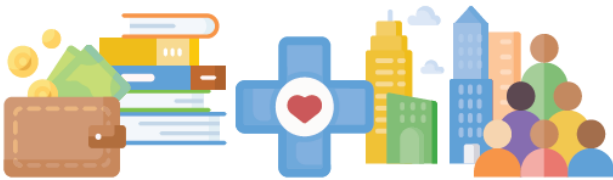
- Needs to be a strategic priority.
- Is a shared vision.
- Engages the community.
  - Community Health Needs Assessment (CHNA)
  - Collaboration and participation in community advocacy and projects
- Is a commitment of resources.
  - Time
  - People
  - Monetary

# A Business Case for Health Equity

## Consider The Impact of Health Disparities

Health disparities can lead to poor patient outcomes and significant excess financial cost.

**Social determinants of health include:**  
economic stability, education access and quality, healthcare access and quality, neighborhood and built environment, and social and community contexts.<sup>1</sup>



1 in 10 Americans live in poverty with the inability to afford healthcare, healthy food, and housing.<sup>1</sup>



### Health Outcome Contributors



80%-90%  
social  
determinants



10%-20%  
medical  
care<sup>3</sup>

Yet, an estimated 95% of health expenditures are on medical costs.<sup>4</sup>

### In the United States:

Health disparities have amounted to **\$93 billion** in excess medical cost annually.<sup>5</sup>



Patient outcomes and hospital finances are significantly impacted by health disparities.

Health outcomes are greatly impacted by social determinants.

You cannot improve outcomes without addressing health disparities.

### Dual Eligible Individuals



1.5 times higher hospital utilization



70% higher use of high-risk drugs



18% higher avoidable hospital readmissions

*as opposed to non-dual eligible individuals<sup>2</sup>*



# Other Strategies for Buy-In

## WIIFM—“What’s In It For Me?”

- Appeal to your audience based on what motivates them.
- Use patient stories.
- Align with the organization’s strategic goals.
  - CMS Measure: Hospital Commitment to Health Equity, Domain 1: Equity is a Strategic Priority.

## One-Minute Elevator Speech

- Short, concise synopsis
- Persuasive
- No more than 1 minute
- Grab their attention

**HSAG HQIC** One-Minute Elevator Speech Template

An elevator speech is a short, concise, and persuasive synopsis of your proposed project. It should be no more than one minute, or the time it takes to ride on an elevator. This template is designed to assist you in putting together your elevator speech.

*Introduce yourself, your team, department, etc. Focus on credentials that are relevant to the project.*

**1** Introduction  
10 seconds

*Provide an overview of the problem or root cause, who it impacts, and the harm or poor outcome that results.*

**2** Problem  
15 seconds

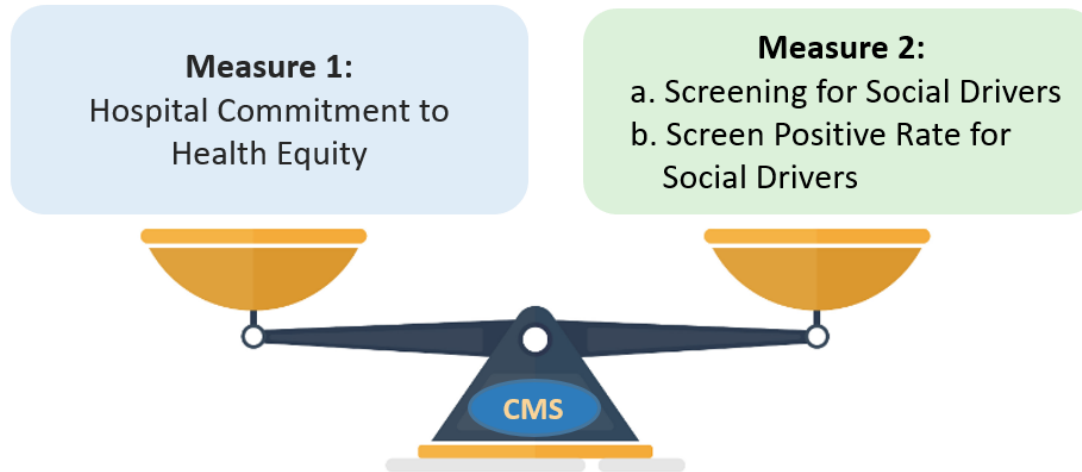
*Provide a brief overview of your proposed solution and how it will correct the identified problem or root cause.*

**3** Solution  
25 seconds

*Describe your ask or request of that person, which includes what you want them to do, the role you want them to play, as well as the resources needed to implement your solution.*

**4** Ask  
10 seconds

# CMS Quality Reporting Program



- CMS Final Rule added 2 health equity measures.
- Part of the Inpatient Prospective Payment System (IPPS).
- Penalties for not reporting through Annual Payment Update (APU) Failure.
  - Can be up to 25% of Market Basket Update.
- Two Inpatient Quality Reporting (IQR) Program measures.
- Structural measures reported annually.

# Leadership Engagement Is Imperative

**Not only is leadership engagement critical to driving health equity, it is also Domain 5 in the Hospital Commitment to Health Equity measure!**



Annually reviews, by senior leadership (including chief executives and the entire hospital board of trustees), the strategic plan for achieving health equity.



Annually reviews, by senior leadership (including chief executives and the entire hospital board of trustees), key performance indicators stratified by demographic and/or social factors.

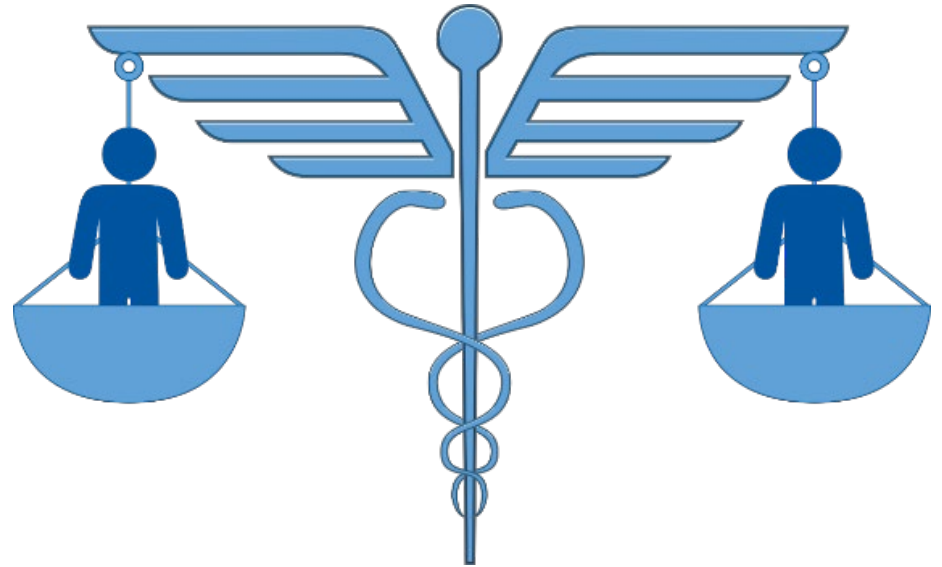
# Reporting Timelines

## Hospital Equity Commitment to Health Equity

- Begins CY2023/FY2025
- Initial submission May 2024

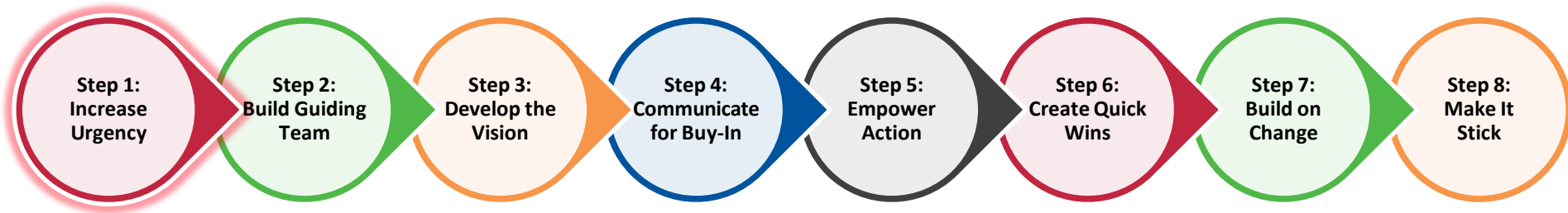
## Screening for Social Drivers of Health

- CY2023 Voluntary Reporting  
– May 2024
- CY2024 Mandatory Reporting  
– May 2025



# Create a Sense of Urgency!

## Kotter's 8-Step Change Model



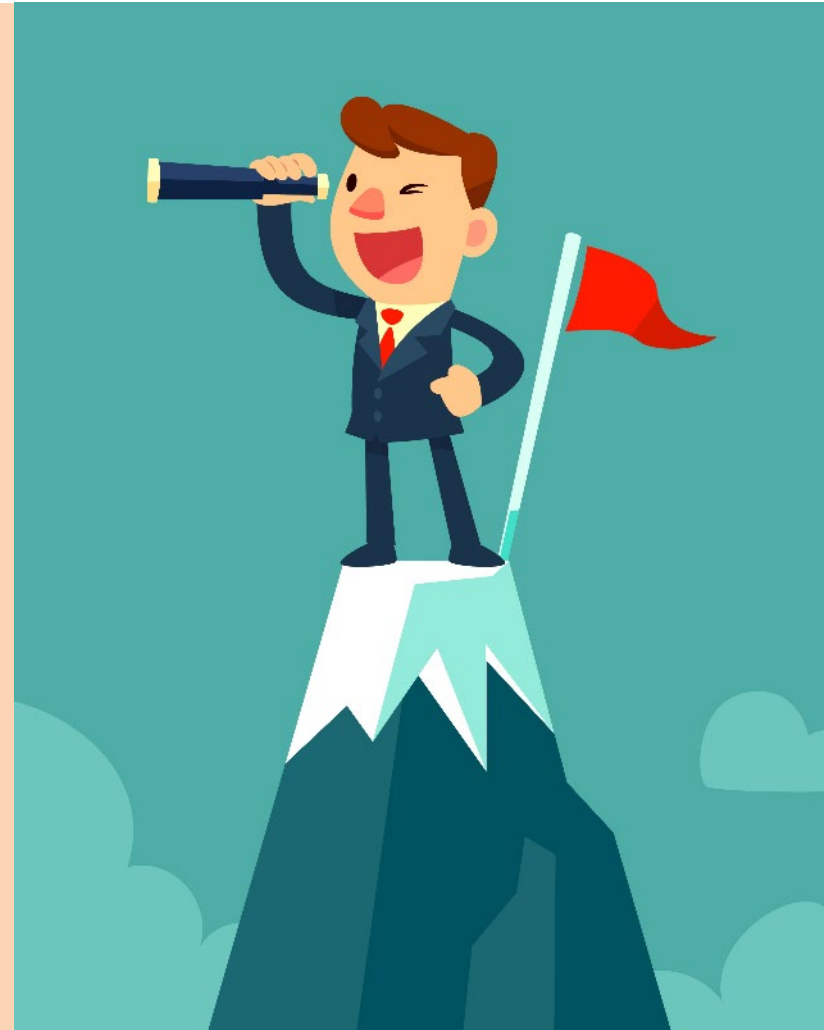
- Start now!
- Give yourself time to do it right the first time.
  - Spend time planning on the front end to reduce rework on the back end!
- Health equity and the CMS measures are intricate.
- Take advantage of the voluntary reporting period for Screening for Social Drivers of Health measure.

# Communicating Your Vision

“You communicate vision through little conversational nuggets and consistent daily sound bites—not speeches.”

“When vision is communicated well and repeatedly, people get inspired by their involvement because they discover their own vision inside of yours.”

—*Deborah Hoyer*



# Final Words on Communication

- People are guided by beliefs and emotions.
- Use persuasion rather than authority.
- Be a leader not a manager.
- Engage through your vision that:
  - Is easily understood.
  - Paints a visual picture.
  - Gives clear direction and purpose.
  - Conveys passion and enthusiasm.
  - Is about the staff, patients, and organization—not self.
  - Encourages collaboration—something bigger than yourself.
- Employ frequent and consistent communication.
- Strive for transparency.



# Key Concepts

- Leadership engagement is critical for addressing health equity.
  - Organizational engagement
  - Leadership driven
- Use the HSAG Business Case for Health Equity flyer.
- Part of the CMS Quality Reporting Program.
  - Hospital Commitment to Health Equity
  - Screening for Social Drivers of Health
- Start now—create a sense of urgency!





# Join Us for the Entire Series

Recordings, slides, and resource links will be posted for on-demand access after every session.

1. Health Equity, Hospitals, and CMS Reporting ▼

2. Engaging Leaders ▼

3. Health Equity as a Strategic Priority ▼

4. Collection and Validating REaL Data ▼

5. Social Determinants and Social Drivers of Health ▼

6. Screening for Social Drivers ▼

7. Culturally Competent Data Training ▼

8. Analysis and Stratification of Health Equity Data ▼

9. Health Equity Interventions ▼

10. Best Practices in Health Equity Interventions ▼

11. Community Paramedicine ▼

12. Identifying Community Health Disparities ▼

13. Community Engagement—Health Equity ▼

## 3. Health Equity as a Strategic Priority ▲

### Health Equity as a Strategic Priority

*Thursday, February 9, 2023 | 1 p.m. ET | 12 noon CT | 11 a.m. MT | 10 a.m. PT*

This session will examine strategic planning for health equity.

#### Objectives:

- Identify the importance of making health equity a strategic priority.
- Discuss the difference between a strategic plan for health equity and the community health needs assessment.
- Review resources to assist in creating a strategic priority for health equity.

# QUESTIONS?



# Thank you!

Questions: [hospitalquality@hsag.com](mailto:hospitalquality@hsag.com)

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