Consensus-driven Standards on Social Determinants of Health

Personal Health Literacy Kickoff
Feb 03, 2022
Welcome

Thank you for joining the Gravity Project Community meeting!

Due to the large number of attendees, participants are muted upon entry. Please remain muted to avoid background noise.

This call is being recorded; recording will be available on the Gravity Confluence page following.

You are encouraged to actively participate in the discussion using the Webex chat feature (bottom right of the Webex Meeting window).

Please send chats to “Everyone.”
Gravity Project Anti-Trust Practices

• Gravity Project participants have the responsibility to comply fully with federal and state antitrust laws.

• Individuals speaking or providing written communications shall refrain from any discussion which may provide the basis for an inference that they have agreed to take any action relating to prices, services, production and allocation of markets or any other matter having a market effect.

• Participants shall not discuss their pricing or others’ pricing or any term that might affect pricing or fees, such as costs, discounts, terms of sales or profit margins.

• Adherence to these guidelines involves not only avoidance of antitrust violations, but avoidance of behavior that might be so construed.
Gravity Project Participation

• If you have not already done so, we invite you to officially join the project here: https://confluence.hl7.org/display/GRAV/Join+the+Gravity+Project

• If you want to check whether you have already signed up or if others from your organization have signed up, please review the existing membership here:

• For all other Gravity Project information, please visit:
  https://confluence.hl7.org/display/GRAV/The+Gravity+Project

2/4/22
Project Founders, Grants, and In-Kind Support To-Date

https://confluence.hl7.org/display/GRAV/Gravity+Project+Sponsors
Gravity Project Sponsorship

• The Gravity Project is currently seeking additional sponsors for our 2022 operations
  • This is an opportunity to be a recognized contributor to our critical national work

• If you are interested in learning more about sponsoring opportunities, please send an email to GravityProject@emiadvisors.net or visit https://confluence.hl7.org/display/GRAV/Gravity+Project+Sponsors
# Agenda

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<td>Community Homework and Next Steps</td>
<td>Sarah</td>
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Please submit questions and comments using the Webex chat feature.
Announcements
Announcements

• Request for Information (RFI) on Strengthening Community Health Through Technology, Comments due Feb 28th
• CMS Commits Over $49 Million to Reduce Uninsured Rate Among Children and Boost Medicaid Enrollment Among Parents, Pregnant People, Applications due March 28th
• CMS CY 2023 Medicare Advantage and Part D Proposed Rule (CMS-4192-P)
• Current Opening at NIDDK: Program Director for Health Equity and Type 2 Diabetes
• See more details regarding Gravity’s announcements here: https://confluence.hl7.org/pages/viewpage.action?pageId=91996855#TheGravityProject-Announcements
Introductions
New Acting Technical Director

Greg Harris, Chief Technology Officer, NewWave Technologies
Project Schedule and Overview
Gravity Overview: 2022 Roadmap

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**Terminology**
- Personal Health Literacy
- Under Insurance
- Medical Cost Burden

**Technical**
- Gravity FHIR IG STU2 Ballot
- FHIR IG STU2 Ballot Reconciliation
- Reference Implementation Update
- FHIR IG STU2 Updates
- FHIR IG STU2 Publication
- HL7 FHIR Connectathons
- SDOH FHIR IG Pilots

**Key**
- WE ARE HERE
- LOINC Code Release (FEB/AUG)
- SNOMED Code Release (MAR/SEP)
- ICD-10 Code Release (APR/OCT)

**Pilots**
- SDOH FHIR IG Pilots

**Build and Dissemination**
- To Be Determined

**Build, Dissemination and Evaluation**
- To Be Determined

**Dates**
- 2/4/22
Questions?

You are encouraged to actively participate in the discussion using the Webex chat feature (bottom right of the Webex Meeting window). Please send all chats to Everyone.
Terminology
Terminology Build Updates and Action Steps
Terminology Build Updates and Action Steps

• VSAC Update December 2021
  • Added value sets with existing codes for last group of 2021 domains
  • Elder Abuse, Intimate Partner Violence, Social Connection, Stress, Veterans Status

• Upcoming Terminology Releases
  • LOINC – mid–February 2022
  • SNOMED CT – March 2022 (value sets will be updated in new terms by April)

• ICD10-CM Coordination & Maintenance Committee
  • March 8-9th Meeting
  • Gravity submitted requests for new and revised terms December 2, 2021

• ICD-11
  • Developed process to submit proposals for new and revised ICD-11 terms based on completed domains
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Community Terminology Development
A social determinants of health lexicon

• Social Determinants of Health: “the conditions in which people are born, grow, live, work and age,” which are “shaped by the distribution of money, power and resources.” WHO (Alderwick and Gottlieb, 2019)
  • Can offer both positive and negative forces
    • Positive Forces > Protective Factors
    • Negative Forces > Social Risks
Personal Health Literacy Kickoff
Health Literacy Definitions

Healthy People 2030 Health Literacy Definitions

• **Personal Health Literacy** is the degree to which individuals have the ability to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.

• **Organizational Health Literacy** is the degree to which organizations equitably enable individuals to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.

Health Risks Associated w/ Personal Health Literacy

Low health literacy can result in:

- Medication errors
- Barriers to following care plans and treatment plans due to insufficient patient/provider communication
- Reduced use of preventive services and unnecessary emergency room visits
- Barriers to self-management of chronic conditions
- Longer hospital stays and increased hospital re-admissions
- Poor responsiveness to public health emergencies

Compared to those with proficient health literacy, adults with low health literacy experience:

- **4 times** higher health care costs
- **6%** more hospital visits
- **2 day** – longer hospital stays

Source: Partnership for Clear Health Communication at the National Patient Safety Foundation

Source: Center for Health Care Strategies, Health Literacy Fact Sheet, 2013
Who has Low Health Literacy?

90 million Americans have low health literacy, including many with:

- Lower socioeconomic status or education
- Elderly
- Low English proficiency (LEP) and/or who are non-native speakers of English; and
- Those receiving publicly-financed health coverage or other socio-economic assistance

Source: Center for Health Care Strategies, Health Literacy Fact Sheet, 2013
Personal Health Literacy Common Tools

**REALM/R** (Rapid Assessment of Adult Literacy in Medicine): Measures ability to read common medical words.

**SAHL-S&E** (Short Assessment of Health Literacy – Spanish & English): Measures health literacy related to pronunciation, numeracy, and information seeking.

**TOFHLA** (Test of Functional Health Literacy in Adults): Measures reading and numeracy using common medical scenarios and materials. Assigns inadequate, marginal, or adequate health literacy scores to users. Also available in a shortened seven-minute s-TOFHLA version (original version is 22 minutes long).

**MEPS** (Medical Expenditure Panel Survey): MEPS is the most complete source of data on the cost and use of health care and health insurance coverage (health literacy panel).
Healthy People 2030 Health Literacy–Related Objectives

Core objectives
Increase the proportion of adults who report that their health care provider always asked them to describe how they will follow instructions (HC/HIT-01).

Reduce the proportion of adults who report poor patient and provider communication (i.e., listening, explanations, disrespect, time) (HC/HIT-02).

Increase the proportion of adults who report that their health care providers always involved them in decisions about their health care as much as they wanted (HC/HIT-03).

Developmental objectives
Increase the proportion of persons who find their online medical record easy to understand (HC/HIT-D10).
Increase the percentage of limited-English-proficient (LEP) adults who report that their doctors or other health providers always explained things in a way that was easy to understand.

Research objective
Increase the health literacy of the population (HC/HIT-R01).
Questions?

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Policy Update

A snapshot of recent policy drivers to build a culture of SDOH data collection, exchange, and use:

• White House’s RFI on Strengthening Community Health Through Technology

• CMS’s Proposed Rule to Require SDOH Assessments by all Medicare Advantage Special Needs Plans

• ONC’s Draft U.S. Core Data for Interoperability version 3

• ONC’s new Interoperability Standards Workgroup for USCDI v3
White House RFI on Strengthening Community Health Through Technology

- On January 5, the Office of Science and Technology Policy (OSTP) requested input on how digital health technologies can transform community health and health equity.
  - Comments are due February 28 and cannot exceed three pages.
  - RFI topics: successful models, barriers, trends from the pandemic, user experience, tool and training needs, proposed government actions, health equity.

- The PMO will draft a comment letter, the bulk of which will describe the Gravity Project as a successful national model and collaborative process.

- The letter will conclude with four recommendations:
  - Explicitly incorporate Gravity’s standards across regulations, grants, contracts, pilots, etc., to enable nationwide interoperability and use of SDOH—as agencies are already beginning to do, e.g. USCDI v2.
  - Establish funding and training to help community-based and social-service organizations on the ground build out capacity, workflows, use cases.
  - Bridge digital divides that continue to be barriers for underserved communities.
  - Integrate bi-directional exchange and write API access now, so patients, family caregivers, and community organizations can contribute SDOH data, and providers, public health, etc. have access to the critical missing data—as COVID has illustrated daily.
CMS Proposed Rule to Require SDOH Assessments by All Medicare Advantage Special Needs Plans

- On January 12, CMS published proposed policy and technical changes for Medicare Advantage in 2023.

- Among them, CMS proposes to require all MA Special Needs Plans (SNPs) to include standardized questions on housing stability, food security, and access to transportation as part of their currently required health risk assessments.
  - CMS intends to align the required standardized questions with the SDOH Assessment data element integrated in USCDI v2!
  - CMS would not enforce until contract year 2024.

- Additional issues for comment:
  - Should CMS include other domains besides food, housing, and transportation, such as health literacy or social isolation?
  - Should CMS defer enforcement until contract year 2025 or later?

- Comments due March 7, 2022.
On January 19, ONC released its Draft U.S. Core Data for Interoperability (USCDI) version 3.

- Comments are due April 30, 2022. ONC will publish final USCDI v3 in July 2022.
- **USCDI v2**, published July 2021, included Gravity’s SDOH Assessment, SDOH Goals, SDOH Problems/Health Concerns, and SDOH Interventions data elements.

**USCDI v3’s core principles track Gravity’s recommendations** last year to ONC’s USCDI Task Force, to prioritize additional national imperatives and use cases as well as clinical care:

- “a core set of structured and unstructured data needed to support patient care and facilitate patient access using health IT”
- “a consistent baseline of harmonized data elements that can be broadly reused across use cases, including those outside of patient care and patient access”
- “expands over time . . . weighing both anticipated benefits and industry-wide impacts”

Added **all of the data elements that Gravity recommended** as priorities for USCDI v3 and building blocks for multiple purposes and use cases:

- Disability Status
- Functional Status
- Mental Status, including more specific Cognitive Status
- Pregnancy Status
- Health Insurance Information

Also added Occupation and Occupation Industry.
ONC’s New Interoperability Standards Workgroup

- ONC and its Health Information Technology Advisory Committee (HITAC) appointed a new Interoperability Standards Workgroup to **review and provide recommendations on the Draft USCDI Version 3 and other interoperability standards.**
  - Review proposed new data classes and elements in Draft USCDI v3.
  - Review submitted data classes and elements not included in Draft USCDI v3.
  - Identify opportunities to update ONC’s Interoperability Standards Advisory (ISA) to address the HITAC priority uses of health IT, including related standards and implementation specifications.

- Review proposed new data classes and elements in Draft USCDI v3, specifically including
  - Realigning value sets for **Sex Assigned at Birth** and **Gender Identity** (both in Patient Demographics data class) with HL7’s Gender Harmony Project.

- Review and update standards to address HITAC priority uses of health IT, specifically including
  - SDOH standards: **Gravity standards**, and **CDC Race/Ethnicity vocabulary subsets**.

- Workgroup’s recommendations to HITAC are due April 13 and June 16, 2022.
Technology
FHIR IG Workgroup Meetings

- HL7 SDOH CC FHIR IG Public Meetings are scheduled Wednesdays from 3:00pm to 4:00pm ET
- View agenda and past meeting materials here.
- View HL7 calendar information here.
Technology Update
SDOH Clinical Care FHIR Implementation Guide

1. The SDOH Clinical Care IG is a framework Implementation Guide (IG) and supports multiple domains

2. The IG supports the following clinical activities
   - Assessments
   - Health Concerns / Problems
   - Goals
   - Interventions/ Referrals
   - Consent
   - Aggregation for exchange/reporting
   - Exchange with Patient/Client applications
   - Draft specifications for Race/Ethnicity exchange

3. Published August 5, 2021 as a Standard for Trial Use Level 1 (STU1)

4. STU2 Ballot closed on 1/10/22

Detailed Exchanges Supported by the SDOH FHIR IG

Note: Where two FHIR APIs are shown, it is for drawing simplicity and not a technical requirement.
STU2 Updates Overview

• Add support for patient / client workflow
  • Patient task
  • Support for questionnaires (risk, status, application, outcome)
  • Support to cancel referral/request for information
  • Support for exchange of supporting information
  • Support for providing contact information

• Separate Tasks for referral and patient workflow
• Synchronization process for patient and CBO applications with multiple APIs
• Adopted US Core value sets where appropriate
• Added support for VSAC and 211-LA taxonomy
• Added draft support for collection and communication of race and ethnicity including source and method of collection
• Complete summary of changes is at http://build.fhir.org/ig/HL7/fhir-sdoh-clinicalcare/stu2_changes.html
Results from the January SDOH Clinical Care IG STU2 Ballot

• Results of ballot
  • Affirmative 66
  • Negative 23
  • Abstain 46
  • No Vote 48
  • Total 183

The ballot had 74.2% affirmative votes and exceeded the 60% threshold required to publish as an STU

• Ballot comments submitted
  • Total ballot comments: 100
  • Total technical corrections, comments and questions: 27
  • Total comments regarding Race/Ethnicity: 30

The ballot reconciliation process will start on public calls on started on 1/26/2022 and is expected to continue until the end of April.
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Questions?

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Community Homework & Next Steps
Homework

• General
  • Catch up as needed on materials and recordings on Gravity Project Materials Confluence page
    https://confluence.hl7.org/display/GRAV/The+Gravity+Project+Materials

• Personal Health Literacy
  • Submit concepts
    https://confluence.hl7.org/display/GRAV/Personal+Health+Literacy
Join the Gravity Project!

https://confluence.hl7.org/display/GRAV/Join+the+Gravity+Project

Learn More

- Public Collaborative meets bi-weekly on Thursdays 4:00 to 5:30pm ET. View meeting details here: https://confluence.hl7.org/display/GRAV/Gravity+Project+Meetings
- SDOH FHIR IG Workgroup meets weekly Wednesdays 3:00 to 4:00pm ET. View meeting details here: https://confluence.hl7.org/display/GRAV/FHIR+IG+Work+Group+Meetings

Help us find new sponsors and partners

Partner with us on development of blogs, manuscripts, dissemination materials

Help us with Gravity Education & Outreach

Submit SDOH domain data elements:

https://confluence.hl7.org/display/GRAV/Data+Element+Submission

Use Social Media handles to share or tag us to relevant information

@thegavityproj

https://www.linkedin.com/company/gravity-project

2/4/22
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Additional questions? Contact: gravityproject@emiadvisors.net or visit https://thegravityproject.net