

FACT SHEET | HEALTH EQUITY BY DESIGN

Advancing Health Equity

Health Equity By Design

Health equity by design focuses on the need to include health equity at the outset and as a key feature during the design, build, and implementation of health IT policies, programs, projects, and workflows. A health equity by design approach helps identify existing gaps and disparities in health equity where the technology itself anticipates, avoids, and reduces, not exacerbates, health disparities.

Why This Matters:

- Health equity data, which may include information on community-level social determinants and dynamic drivers of health, community- or individual- social risks factors, and individual-level social needs, can help care teams identify and address health disparities, which leads to improved health outcomes at an individual and population level. Data can make it possible to streamline social care referrals and improve care delivery, person-centered decision-making, research, population health improvement, and public health.
- ONC recognizes and embraces the potential of health IT to mitigate, and ideally eliminate, widespread health disparities borne from systematic inequities that remain pervasive within the U.S. health and health care systems.
- ONC takes a health equity by design approach to our work, advancing the use of interoperable, standardized data to represent social needs and the conditions and environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, function, and quality of life outcomes and risks.

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ONC Actions:

ONC efforts to advance interoperability in health care, including data standardization and network connectivity at scale, directly support the Biden-Harris Administration and HHS commitment to advancing health equity, and prioritize "health equity by design" as part of public health and health care programs.



→ The ONC Health IT Certification Program

The ONC Health IT Certification Program supports the use of interoperable social determinant of health (SDOH) data and other health equity related data that can be electronically captured, used, and exchanged. ONC aims to ensure that data can be used in ways that enhance health equity. Since ONC launched the Health IT Certification Program in 2010, almost all U.S. hospitals and close to 80 percent of office-based physicians use certified electronic health records. This program serves as an important driver to advance the access, exchange, and use of health equity data across the health system.

- Using a health equity by design approach, the ONC Health IT Certification Program ensures that technology is enabling, rather than limiting, the availability of detailed, equity-relevant health information for health care providers, such as race, ethnicity, and language; sexual orientation and gender identity; and SDOH data.
- ONC's Health Data, Technology, and Interoperability: Certification Program Updates, Algorithm Transparency, and Information Sharing (HTI-1) final rule establishes first of its kind transparency requirements for the artificial intelligence and other predictive algorithms that are part of health IT certified to the decision support intervention certification criterion. HHS' leading-edge regulatory approach promotes the safe development and use of artificial intelligence, machine learning and predictive clinical decision support by supporting health equity, fairness, and identifying issues of bias.
- ONC's Health IT Certification Program's Impact on Health Equity: The Health IT Certification Program supports the access, exchange, and use of data across the U.S. health system that is essential to addressing a patient's unique needs, while also supporting health equity at the population level.



→ Data Standards

ONC works with the health IT community to identify and rapidly prioritize health IT challenges and subsequently develop and harmonize standards to solve those challenges. ONC's <u>U.S. Core Data for Interoperability (USCDI)</u> is a standardized set of health data elements for nationwide, interoperable health information exchange. Through its baseline set of core data elements, the USCDI creates the opportunity to improve health equity across a variety of settings across the care continuum. The USCDI can help address disparities in health outcomes for all patients, including those who may be marginalized and underrepresented.



USCDI Version 3 (USCDI v3) included new data elements that promote health equity (consistent with the Executive Order On Advancing Racial Equity and Support for Underserved Communities Through the Federal Government and the Executive Order on Further Advancing Racial Equity and Support for Underserved Communities Through The Federal Government). The use of USCDI v3 supports data users' abilities to identify, assess, and analyze gaps in care, which could in turn be used to inform and address the quality of health care through interventions and strategies. This could lead to better patient care, experiences, and health outcomes.

USCDI v3 Equity Promoting Data Standards

Data elements that can capture:

- SDOH assessment data (e.g., food insecurity, housing insecurity, transportation, etc.)
- Associated problem/condition, interventions, and patient/caregiver goals
- Disability status
- Mental function
- Tribal affiliation
- Insurance Information
- Race
- Ethnicity
- Preferred Language

The meaning, context, and expected use of sexual orientation and gender identity can have substantive quality and safety impacts on a person's care.

Data elements include:

- Sex
- Sexual orientation
- · Gender identity



USCDI's Impact on Health Equity: Hundreds of thousands of providers and their patients benefit from standardized health information required in USCDI v3, which helps with the capture of accurate and complete patient characteristics that are reflective of patient diversity, inclusion, and health goals.





→ Coordination

ONC works collaboratively with federal partners, ONC's Health IT Advisory Committee (HITAC) and others in the health sector to advance the electronic exchange and use of health equity data and SDOH data to help improve individual and population health by:



Guiding the development, dissemination, and adoption of health standards.



Informing policy development to overcome SDOH interoperability challenges and data use.



Supporting public- and private-sector partners as they help build infrastructure for SDOH data.



Driving innovation in care delivery by advancing health IT tools and standards to integrate SDOH data into workflows.



Identifying policy levers for the adoption of standards within the federal government and throughout the public and private sectors.



Coordinating with the HHS Office for Civil Rights on the privacy of individual's protected health information (PHI).

ONC's Coordination Efforts Impact on Health Equity: ONC's efforts across HHS and the federal government improve the access, exchange, and use of equity-sensitive data (including race and ethnicity data) across the health care and public health landscape.

HHS Data Strategy

HHS's <u>2023-2028 Data Strategy</u> acknowledges the need for the exchange of human services data to deliver whole-person care, and tasks ONC with the responsibility for leading the development and harmonization of interoperability standards between health and human services data.

→ Workforce

Through its Public Health Informatics & Technology (PHIT) Workforce Development Program, ONC awarded over \$75 million to 10 institutions of higher education to strengthen U.S. public health IT efforts, improve COVID-19 data collection, and grow the public health IT workforce. This program will train 5,000+ students at Historically Black Colleges and Universities, Hispanic-Serving Institutions, Asian American and Native American Pacific Islander-Serving Institutions, Minority-Serving Institutions, and other institutions of higher education.





Current Gaps:

Gaps in standardized, health equity data make it difficult to leverage available technology (electronic health records (EHRs), patient portals) to collect, share, and use it for individual and community health.

Disparities in EHR adoption & health information exchange

 EHR adoption and participation in health information networks lags among small hospitals, and across specialties (e.g., long-term and postacute providers, behavioral health providers).

Gaps in interoperability affect underserved individuals

- Hospitals that treat patients from areas with high social deprivation were less likely to engage in interoperable exchange than other hospitals.
- Lower resourced hospitals (i.e., small, critical access, rural, independent hospitals) were significantly less likely to report routinely collecting <u>social</u> <u>needs</u> data compared to their higher resourced counterparts.

Racial/ethnic disparities in patient access to electronic health information (EHI)

- In 2022, Black and Hispanic individuals <u>reported</u> being offered online access to their medical records by their health care provider at significantly lower rates than white individuals.
- Persistent racial/ethnic differences in rates of patient portal access and use at the national level may perpetuate already existing health disparities.

Opportunities:

While health IT cannot address all of the societal and institutional factors that drive health inequities in the United States, it is vital that we mobilize to use health IT to identify and mitigate health disparities where applicable and take steps to prevent health IT from perpetuating or magnifying health equity gaps endemic in our systems today.

Accurate data collection is paramount to understanding health inequities, evaluating system effects on individuals and populations, and measuring change. Through standards, certification, exchange, and coordination efforts, we are working to advance the use of health IT to help each person attain their full health potential. ONC will continue to work with federal partners and industry to identify health IT solutions that promote health equity, in alignment with the Biden-Harris Administration's commitment to advance equity for all.





