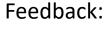
# Measuring Social Vulnerability: Opportunities to Strive for Equity in Collaborative Quality Initiatives

MSQC/ASPIRE Meeting

April 12, 2024

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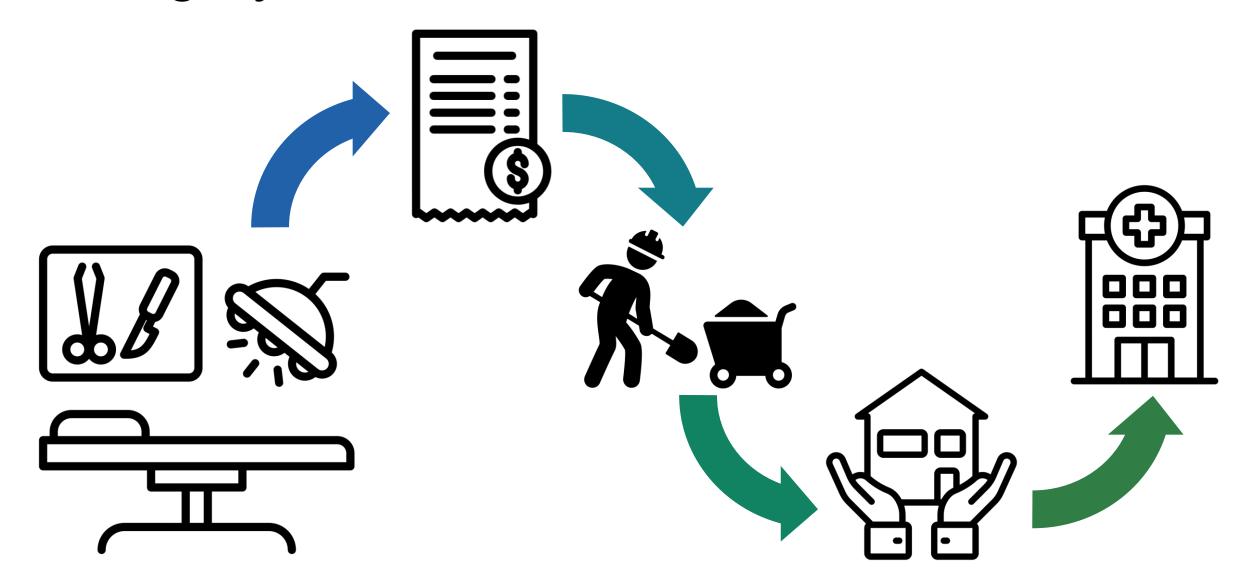


#### Disclosures

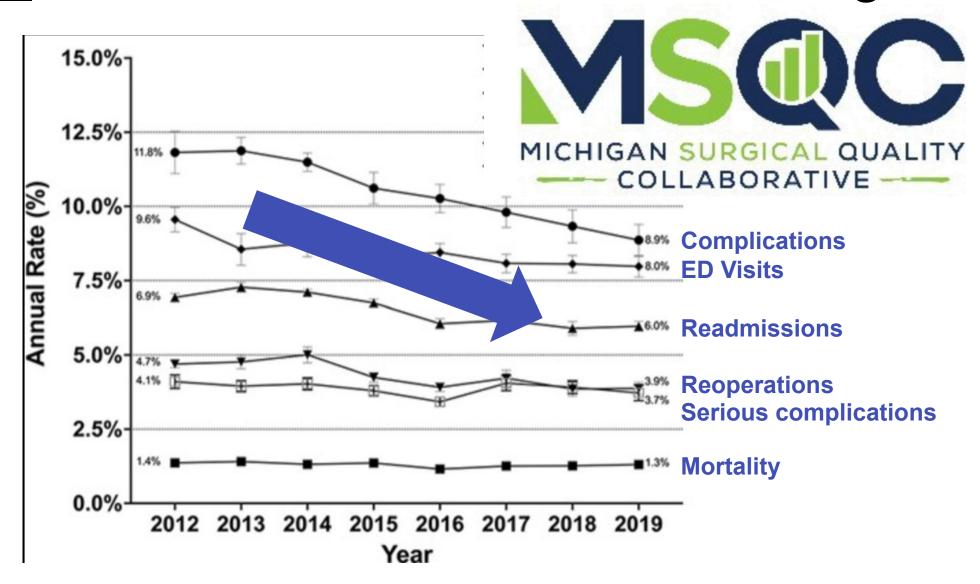
Dr. Harbaugh has funding from Blue Cross Blue Shield of Michigan Foundation and the University of Michigan Rogel Cancer Center which are unrelated to the content.



# Surgery is more than the OR



#### You have made care better in Michigan



# Are we improving care equitably?

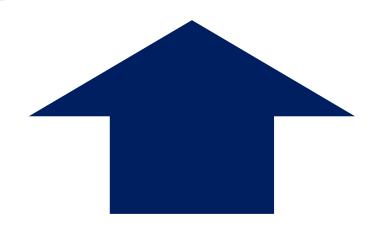


#### Reduce disparities

- Standardization
- Close practice gaps

#### Widen disparities

- Cherry-picking low-risk
- Not accounting for social risk
- Financial penalties





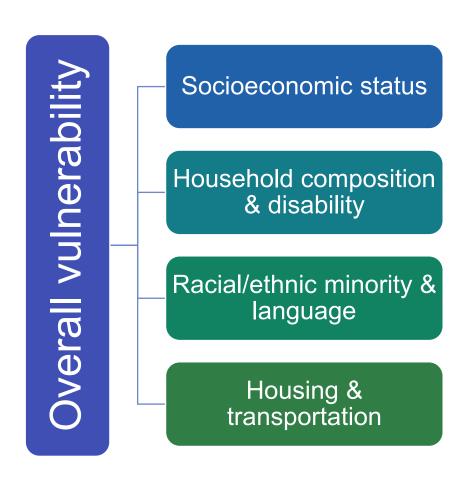
#### Objectives

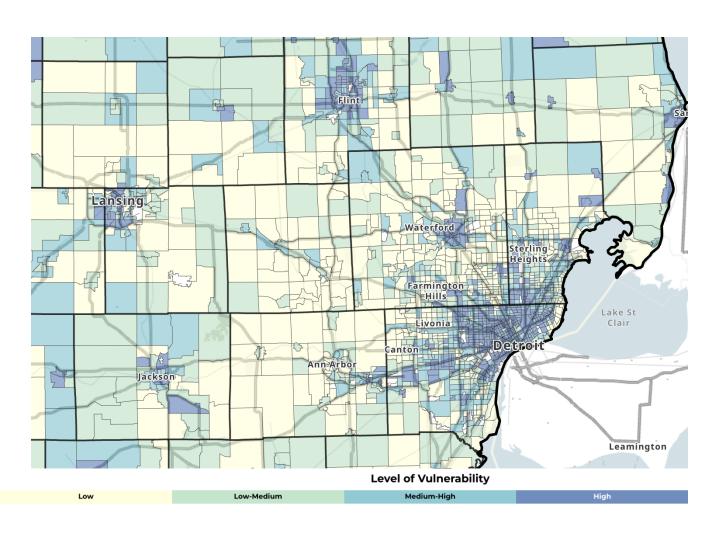
Introduce the social vulnerability index as a structural measure of social risk

Understand social vulnerability among MSQC patients

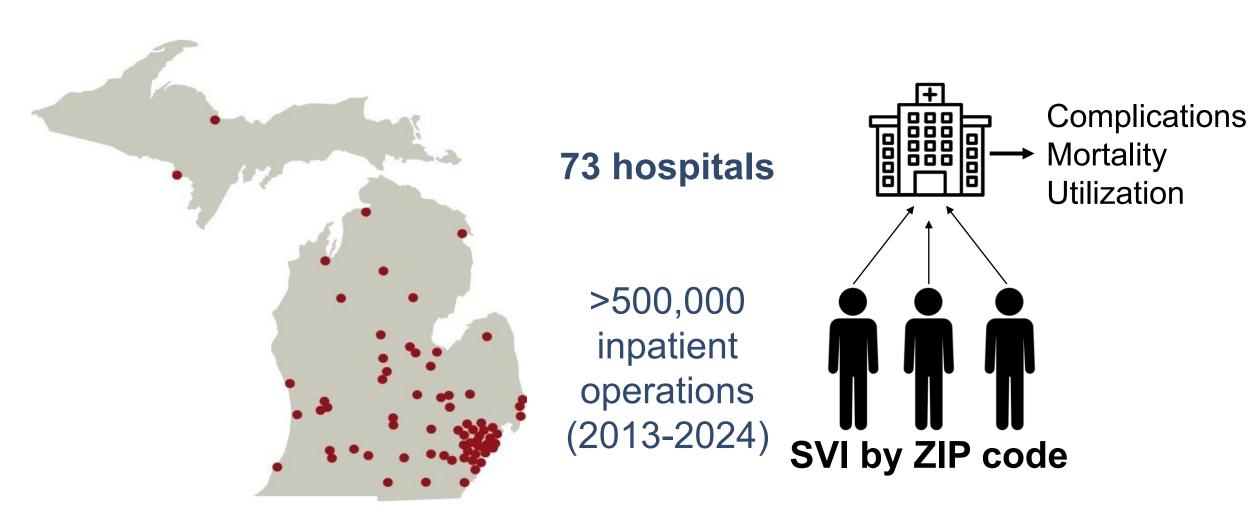
Explore CQI opportunities to strive for equitable care improvement

# Social Vulnerability Index (SVI)

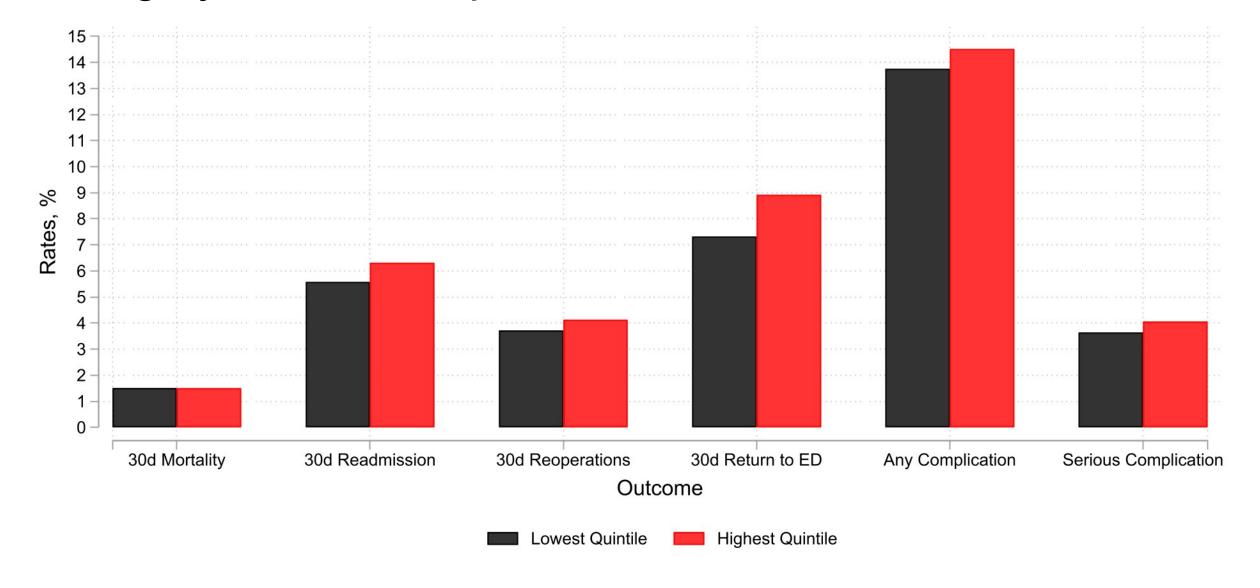




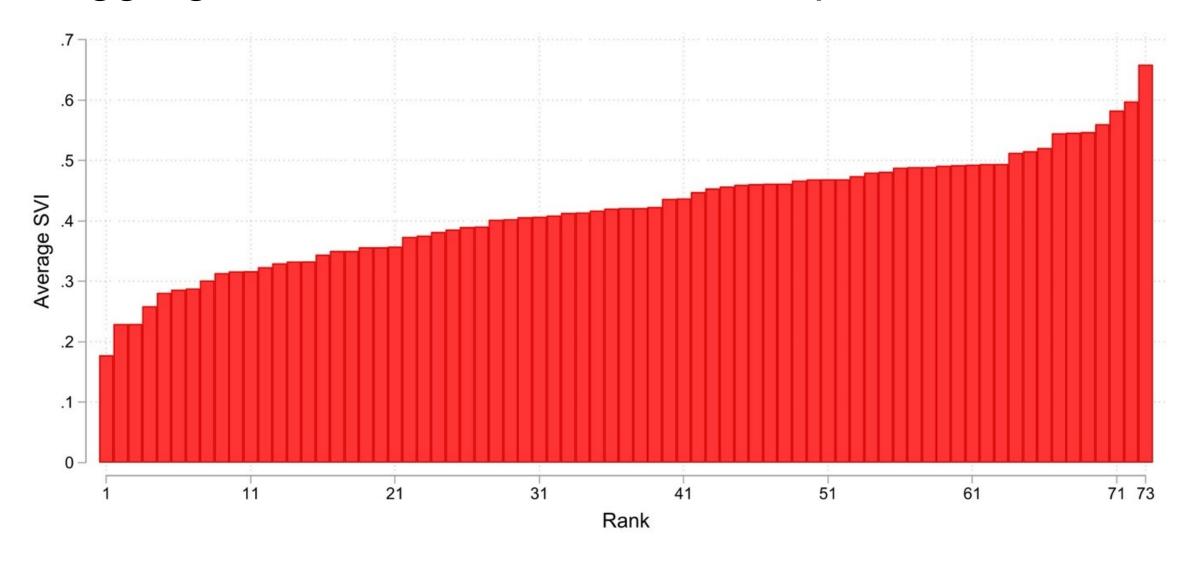
#### Does SVI matter in the MSQC?



#### Highly vulnerable patients have worse outcomes



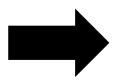
#### Aggregated SVI at each MSQC hospitals



# Opportunities to strive for equity in CQIs

Create visibility

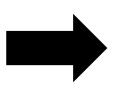
 in order to address patient-level disparities





Health Equity Dashboards

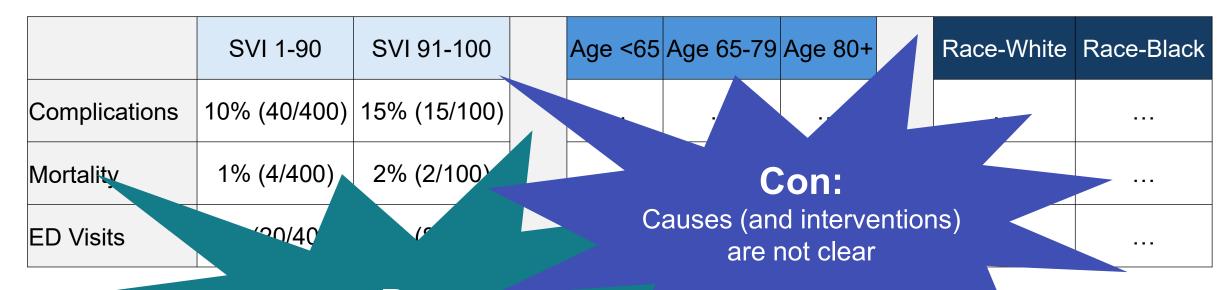
2. Systematically support hospitals carrying for disproportionately underserved populations





Equity-adjusted Financial Incentives

### Health Equity Dashboards



**Pro:**Makes disparities visible

# Equity-based adjustment for financial incentives





Hospital Value-Based Purchasing Program



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#### Please share feedback:



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