



Breakout Sessions: County-Level SDOH Metrics with MVC Data



Support for MVC is provided by Blue Cross Blue Shield of Michigan and Blue Care Network as part of the BCBSM Value Partnerships program. Although Blue Cross Blue Shield of Michigan and MVC work collaboratively, the opinions, beliefs and viewpoints expressed by the author do not necessarily reflect the opinions, beliefs and viewpoints of BCBSM or any of its employees.

Agenda

- Welcome
- County-Level SDOH Metrics & MVC Data
- MVC Unblinded Data
- Group Discussion

Framing the Discussion

**Health starts in our homes,
schools, and communities.**

Live

Learn

Work

Play



Goals for our discussion include:

- Engage in collaborative learning about how sites across the MVC network are helping to support patients
- Explore how MVC could potentially support hospital & PO members in these efforts

BREAKOUT GROUP 1

Who is in the room?

Organization	Attendees
Ascension St Joseph	Emma Lossing
Ascension St Mary's Hospital	Lynnette Schneidewind, Niki Savage
BCBSM	Marc Cohen
Covenant HealthCare Partners	Gayle Biederman, Ronald Gonzales, Kelly Stehle
Great Lakes OSC	Justine Laplant
HBOM	Noa Kim
McLaren Central Michigan	Shannon Sharrar
Michigan Center for Rural Health	Laura Mispelon
MSHIELD	Matthias Kirch

Organization	Attendees
Munson Healthcare	Beverly Bey-Jones, Alex Callaway
MyMichigan Health	Meghan Gagne, Mary Greeley, Stephanie Pins
Primary Care Partners	Jeffery Vangelderren
Scheurer Health	Julia Harbuck-Valley
Sparrow Carson Hospital	Stacey Snyder
Sparrow Health System	Jennifer Anderson
The Farm at Trinity Health	Amanda Sweetman
University of Michigan	Nora Becker
UPHS-Marquette	Lisa Long

American Community Survey

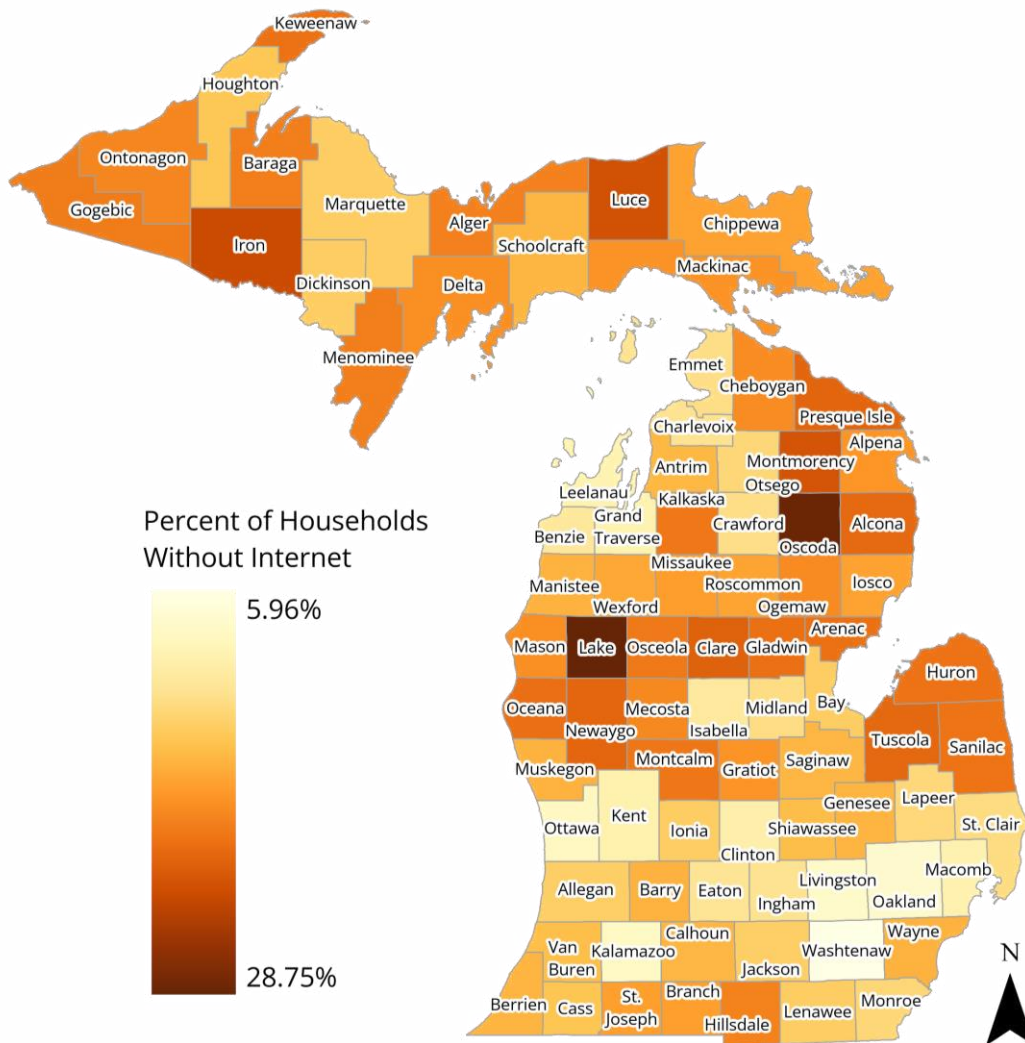
Social Determinants of Health Database

Metric	Group 1	Group 2	Group 3	All Counties
Average percent of households without internet at home	17.6%	13.2%	12.4%	15.9%
Average percent of households without a computing device	12.6%	9.3%	8.8%	11.4%
Average percent of housing units without a vehicle available	6.5%	5.9%	6.5%	6.4%
Average percent of households with public assisted income or food stamps/SNAP	13.3%	11.3%	12.4%	12.8%

Social Determinants of Health data were obtained from the American Community Survey, 2020 5-year estimates. Social Determinants of Health Database. Content last reviewed June 2023. Agency for Healthcare Research and Quality, Rockville, MD. <https://www.ahrq.gov/sdoh/data-analytics/sdoh-data.html>

ACS estimates the county percent of households without internet range from 5.96% - 28.75%.

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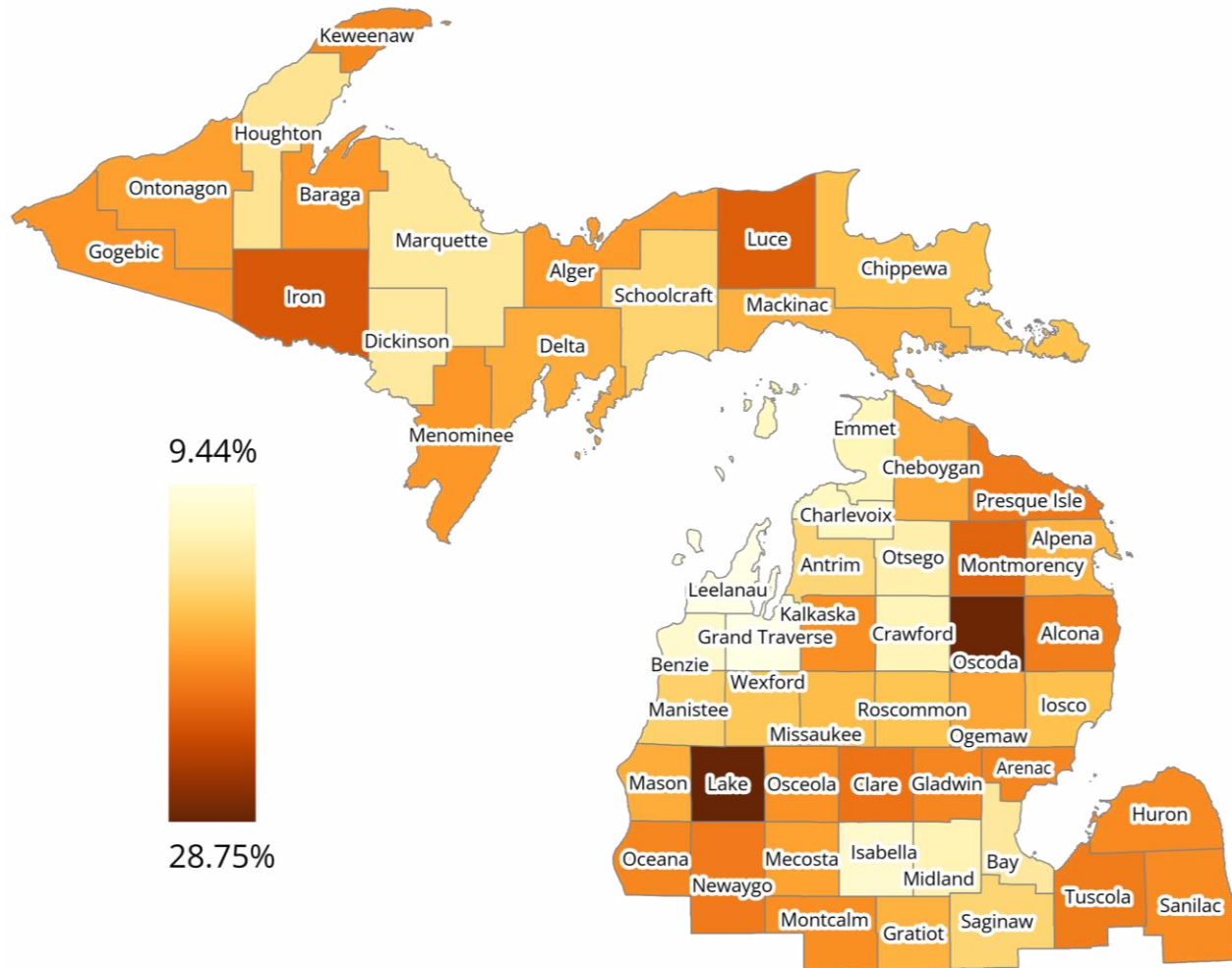
Group 1 Counties

Percent of Households Without Internet Access

All Counties Average: 15.9%

Group 1 Average: 17.6%

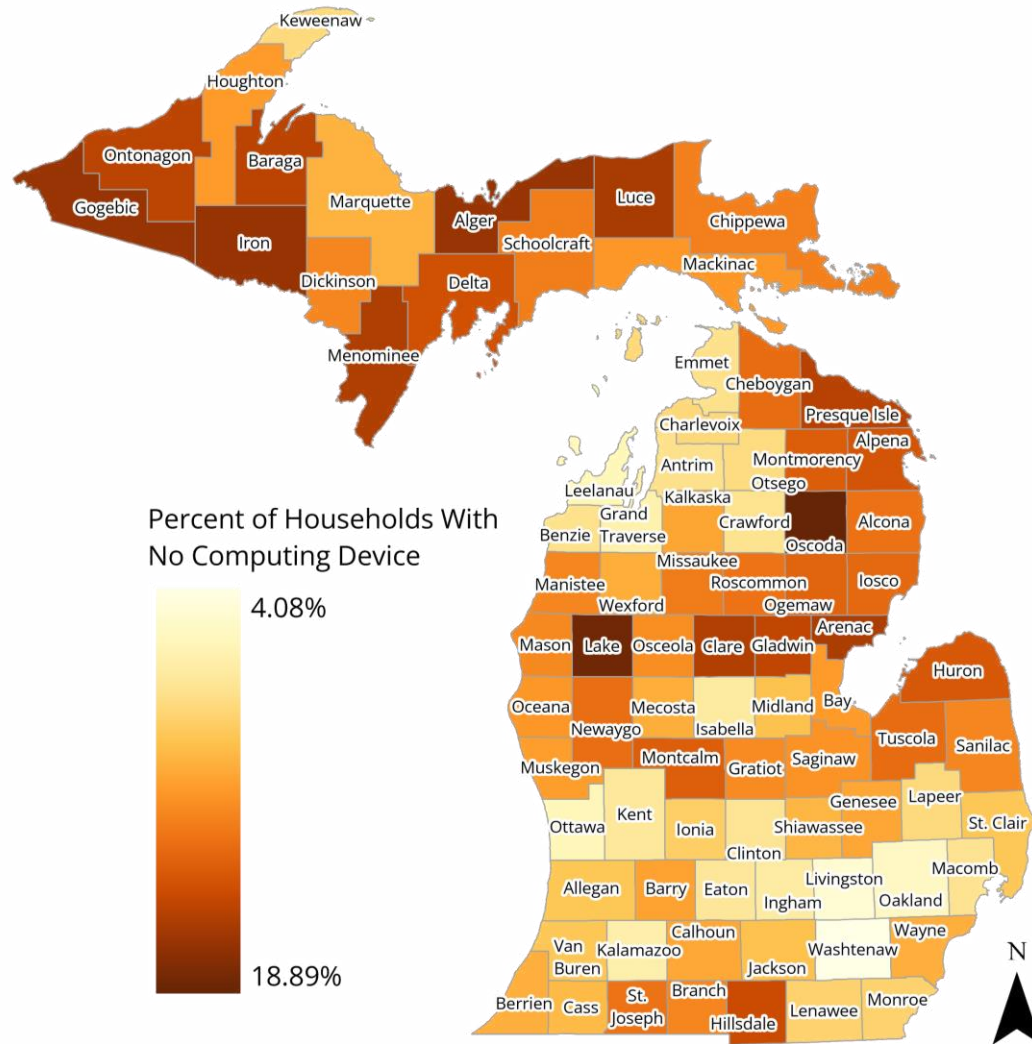
Group 1 Range: 9.44%-28.75%



Computing Devices

ACS estimates the county percent of households with no computing device range from 4.08% - 18.89%.

Lack of a home computing device may present a barrier to remote care, follow-up, and/or scheduling.



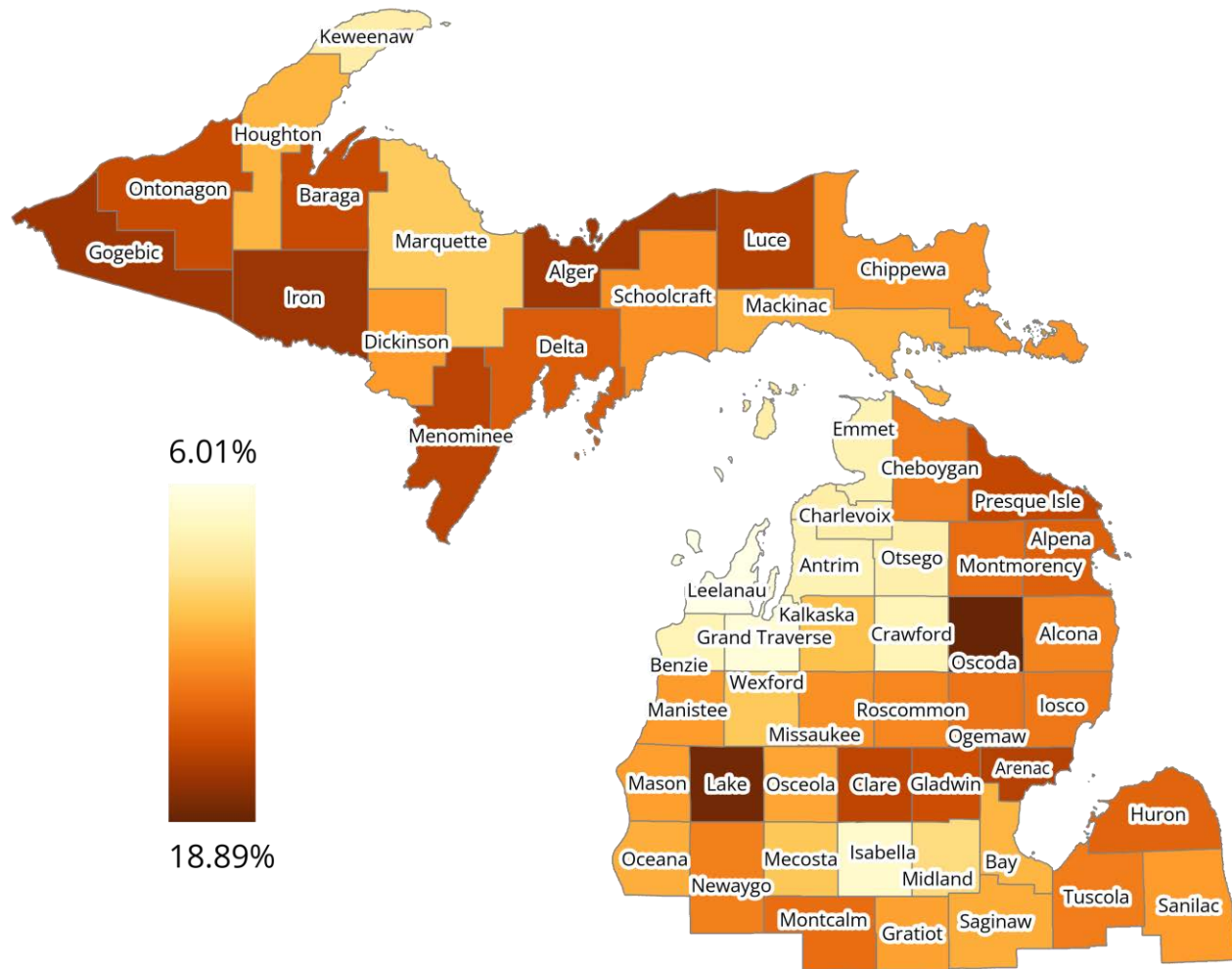
Group 1 Counties

Percent of Households With No Computing Device

All Counties Average: 11.4%

Group 1 Average: 12.6%

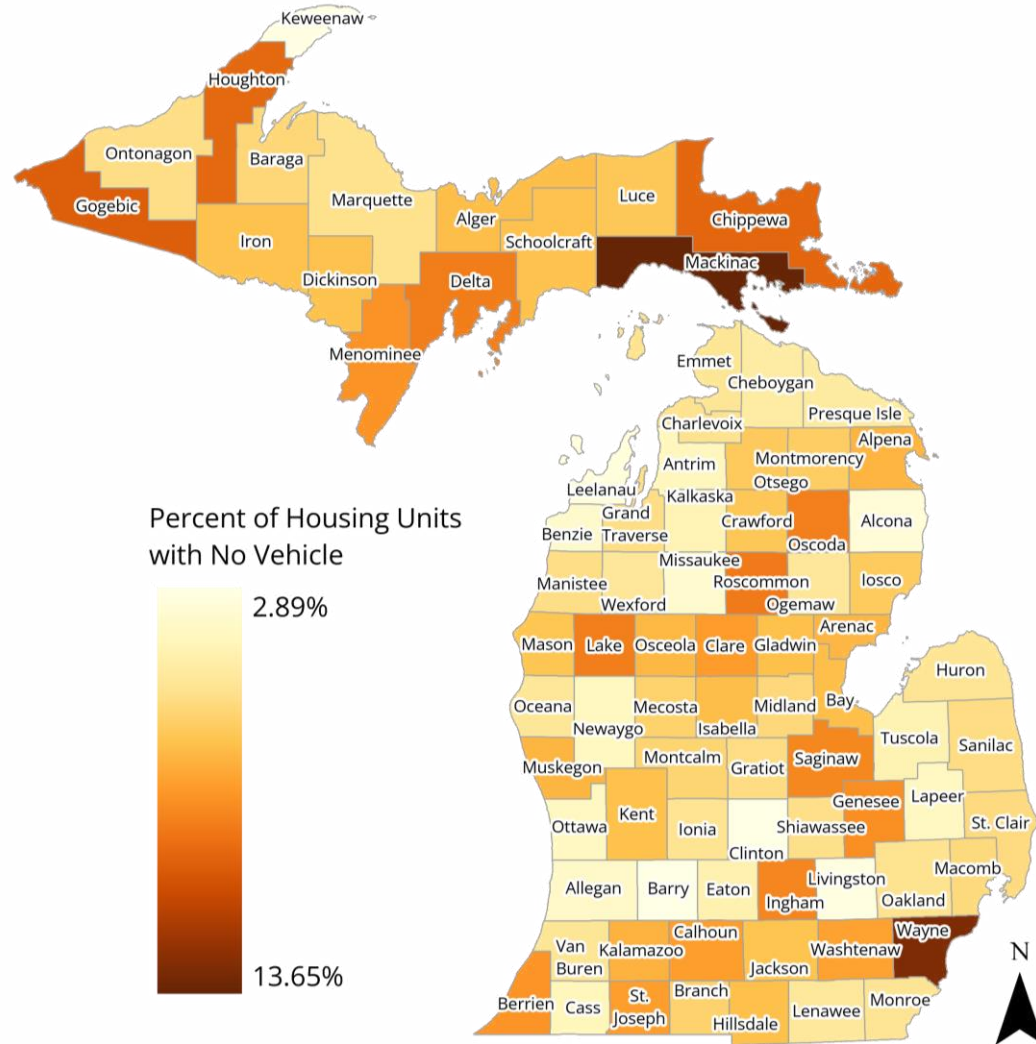
Group 1 Range: 6.01%-18.89%



Vehicle Access

ACS estimates the county percent of housing units with no vehicle range from 2.89% - 13.65%.

Access to a reliable vehicle may impact the feasibility or convenience of using preventative and/or follow-up care.



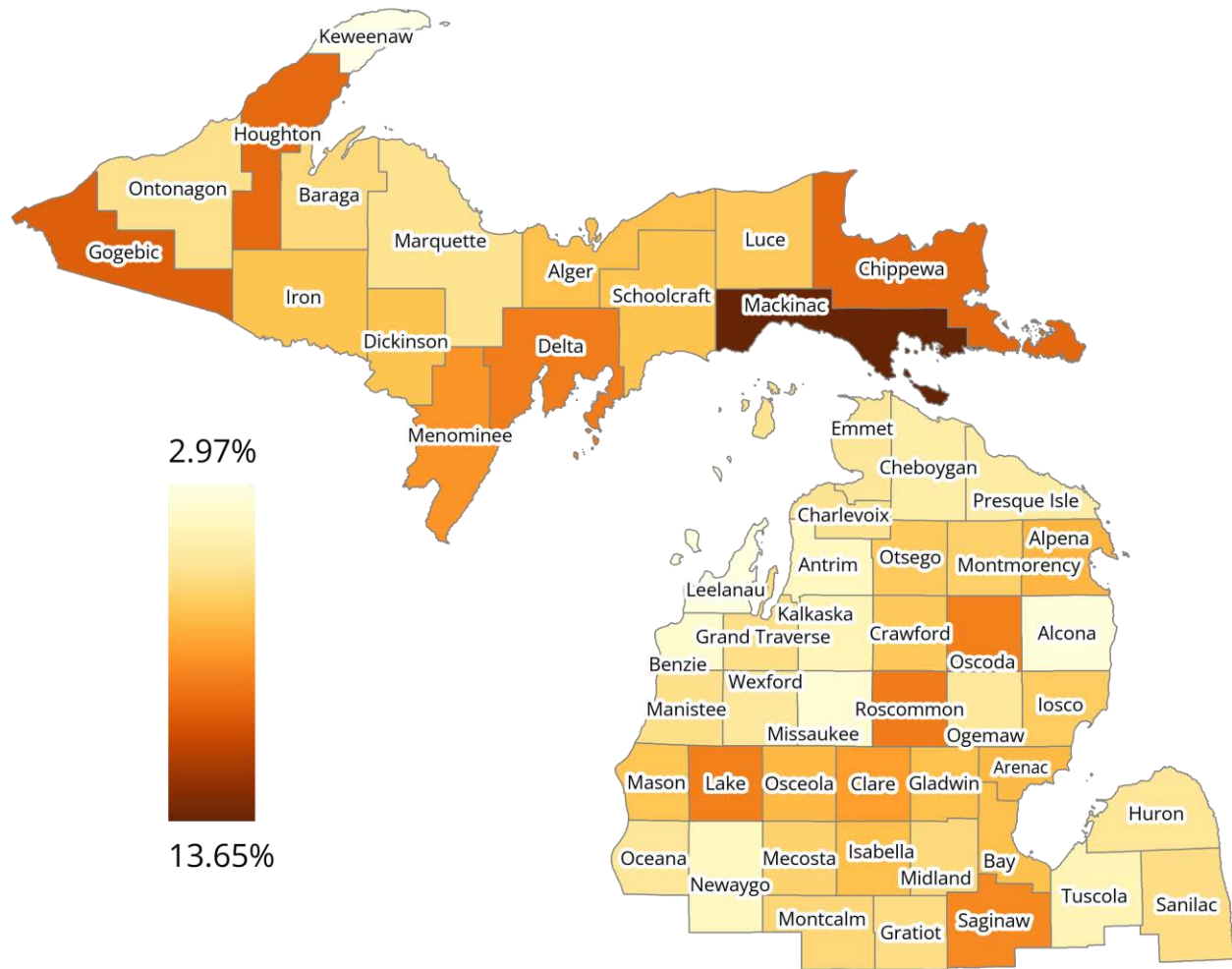
Group 1 Counties

Percent of Housing Units With No Vehicle

All Counties Average: 6.4%

Group 1 Average: 6.5%

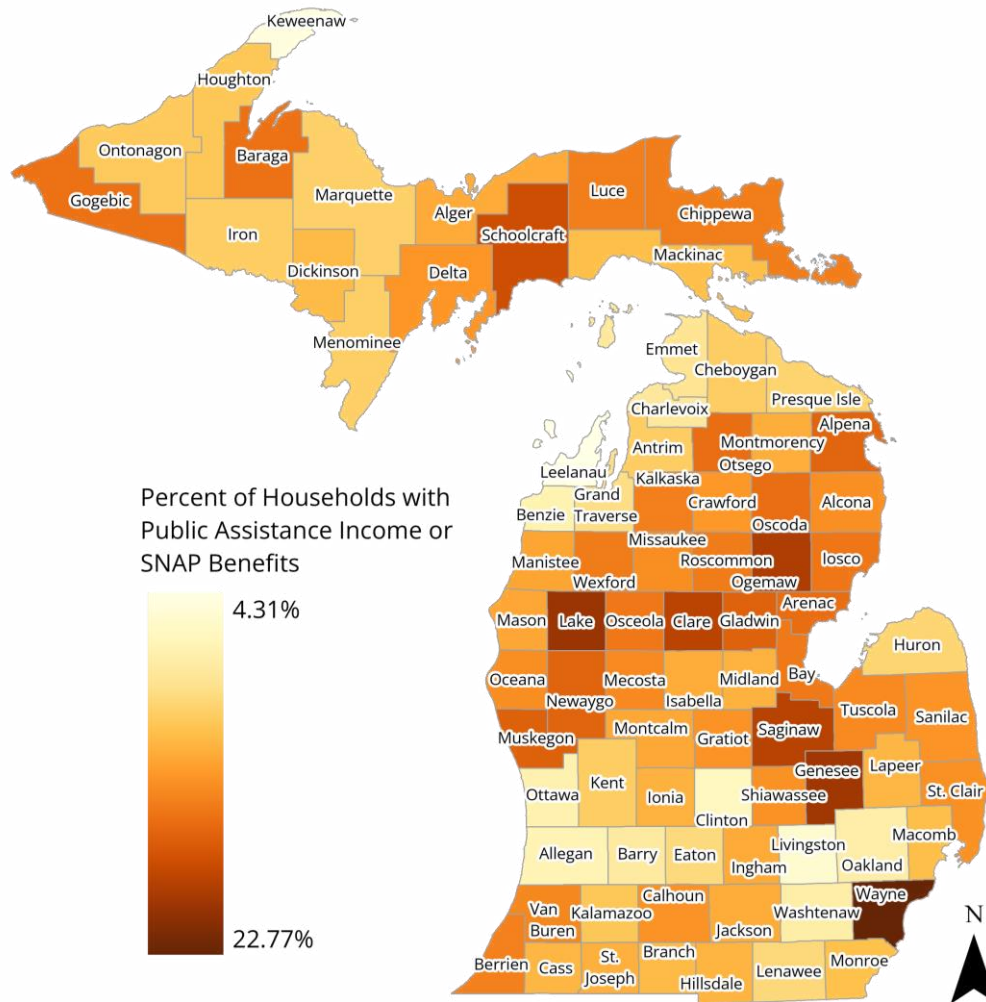
Group 1 Range: 2.97%-13.65%



Public Assistance

ACS estimates the county percent of households with public assistance/ SNAP benefits range from 4.31% - 22.77%.

Public assistance income and SNAP benefits serve as proxies for financial security.



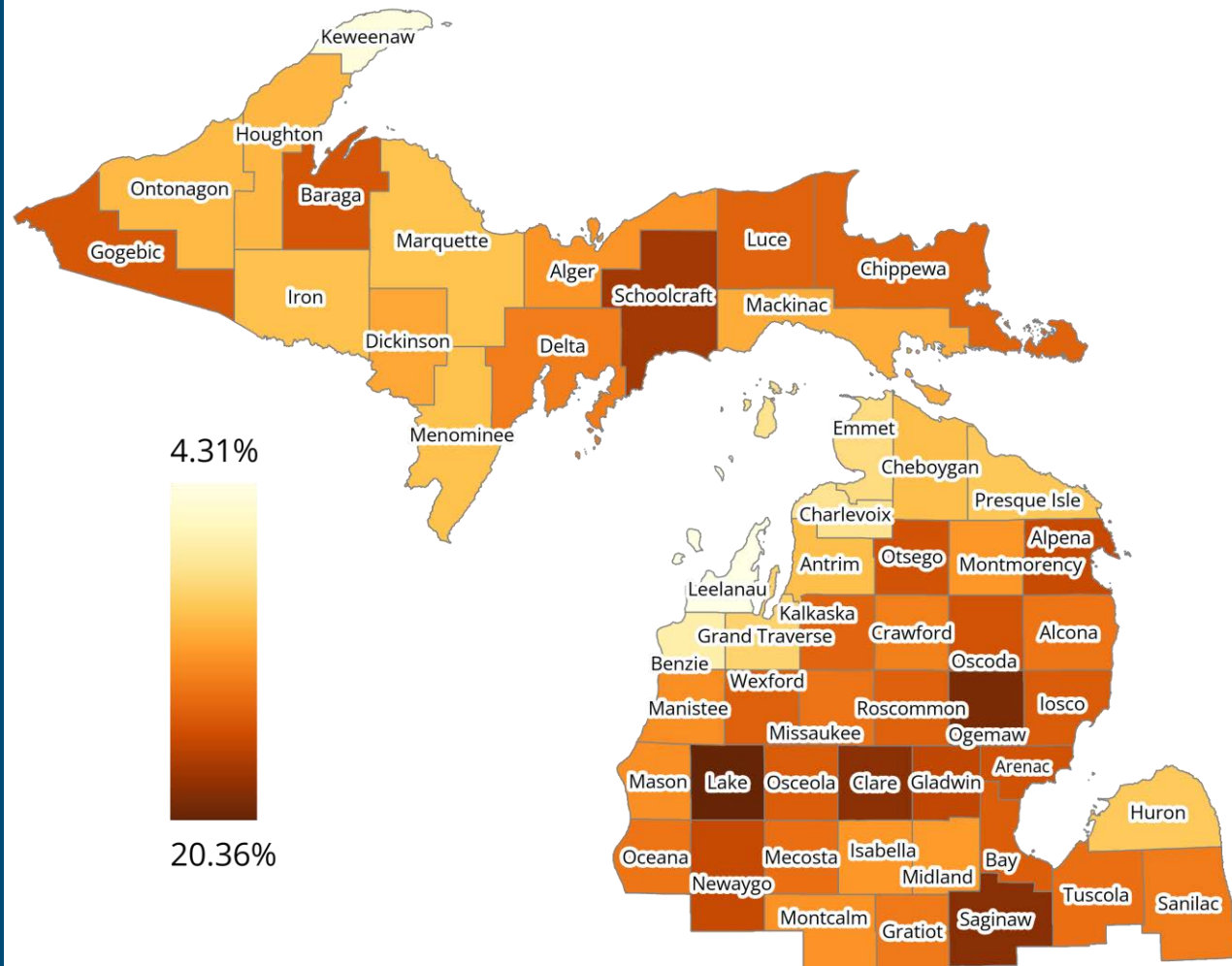
Group 1 Counties

Percent of Households Receiving Public Assistance Income or SNAP Benefits

All Counties Average: 12.8%

Group 1 Average: 13.3%

Group 1 Range: 4.31%-20.36%



A photograph of a hospital room, featuring a hospital bed with a blue blanket and pillow, and an IV stand with a bag. The image is overlaid with a semi-transparent blue filter. The text is positioned on the left side of the image.

Group 1 Unblinded Data: 30-Day Readmissions

Metric Definition

30-Day Readmission Rate

- 30-day readmission rate is defined as having ***at least one inpatient claim within 30 days after the index discharge***
- Inpatient claims are identified through the presence of DRGs on claims submitted after the index discharge

Analytic Cohort

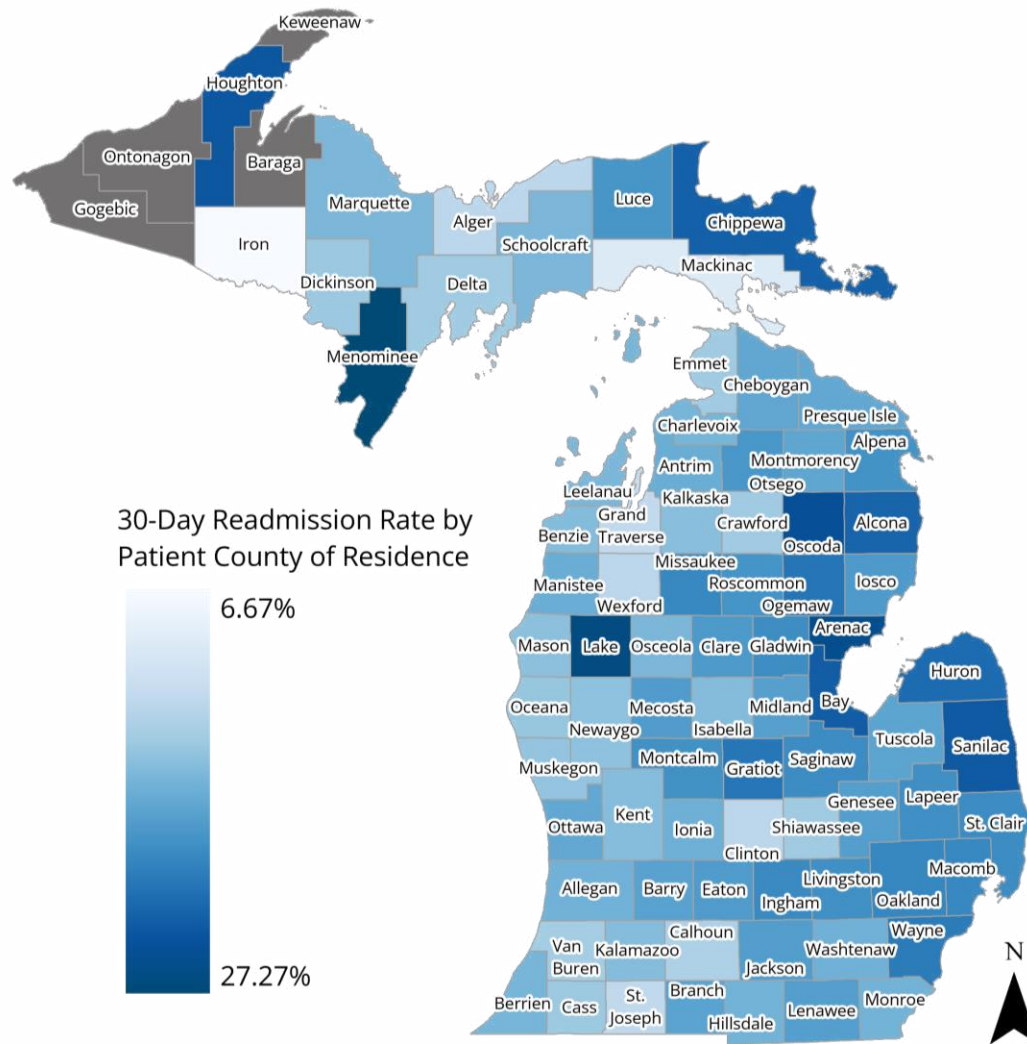
Denominator for unblinded data session

- Patient episodes represented:
 - 30-day episodes among patients hospitalized for congestive heart failure (CHF)
 - Index events 7/1/2019-6/30/22
- Payers Represented in **Hospital Data**:
 - BCN: HMO and Medicare Advantage (MA)
 - BCBSM: PPO Commercial and MA
 - Medicare
- Payers Represented in **PO Data**:
 - BCBSM: PPO Commercial and MA
 - Medicare
- Exclusions:
 - Episodes with COVID-19 in primary position of any claim
 - Hospitals with <11 episodes in timeframe
 - Counties with <11 episodes in timeframe

Readmission After Index CHF Hospitalization

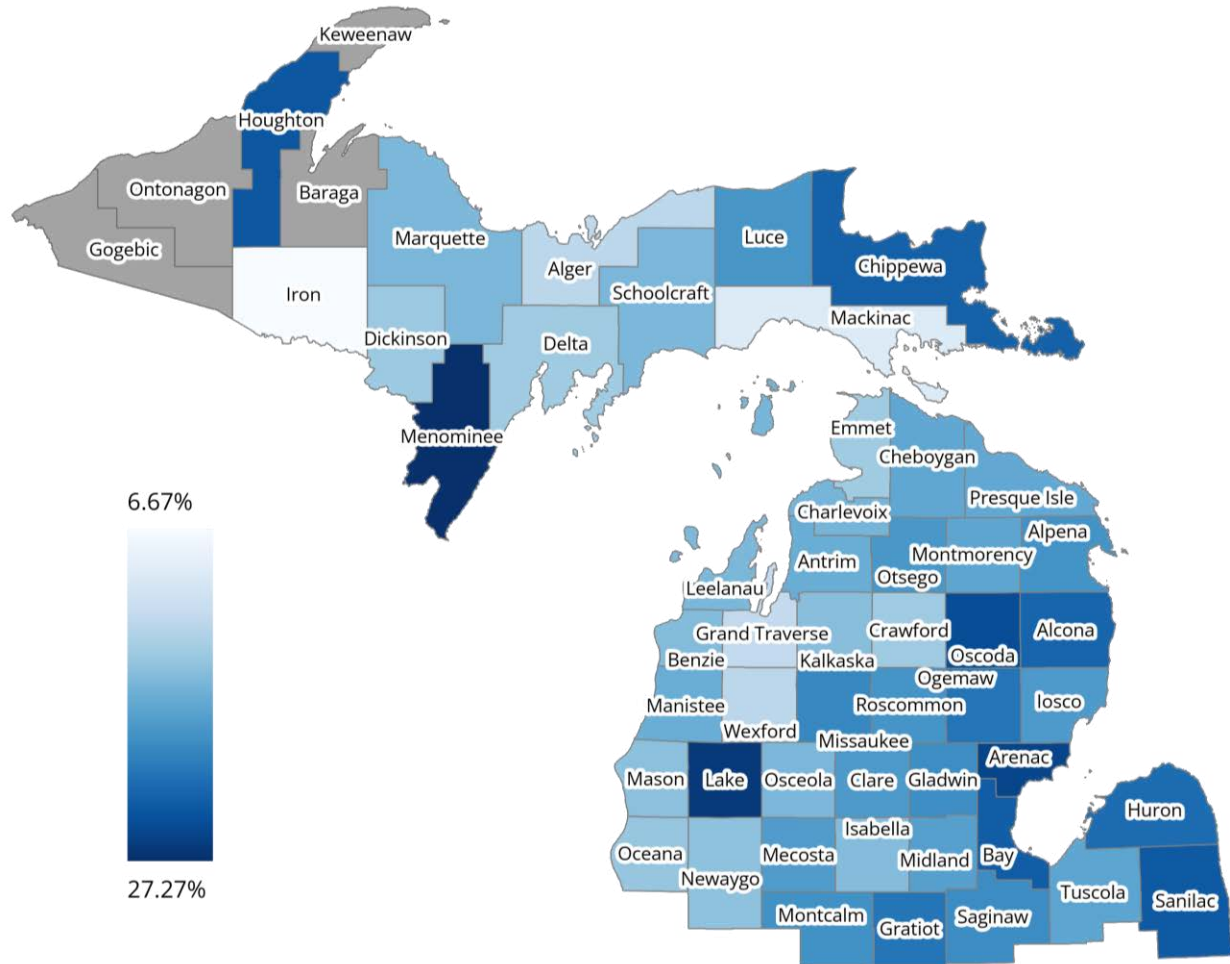
Statewide Benchmarking

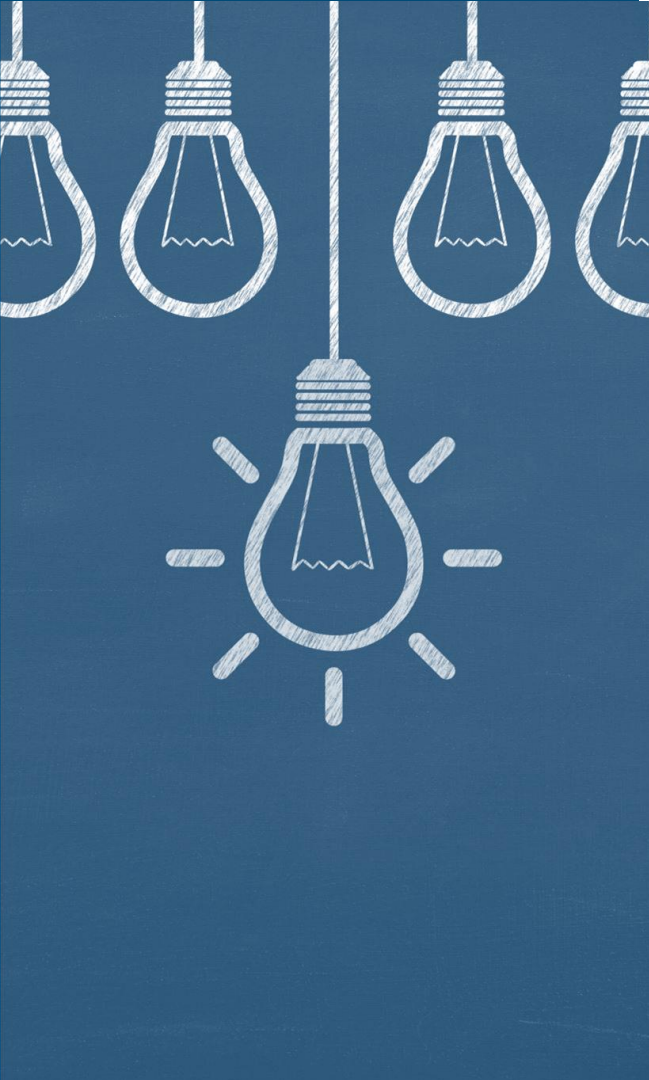
Counties in the UP and Northern Michigan generally have wide variation in readmission rates among residents



Group 1 Counties

**30-Day Readmission
Rate Among CHF
Patients with Index
Events between
7/1/2019-6/30/22**





Discussion

- What do you need to know about your patients to better support health equity efforts at your site?
- What projects are you working on, or what areas would you like to be working on, in the health equity space?
- What challenges or barriers are you facing in ensuring your patients are able to achieve their highest level of health?