

June 21, 2024

Submitted via email: PennieRegulations@pennie.com

Ana Paulina Gomez Chief Counsel Pennsylvania Health Insurance Exchange Authority P.O. Box 536 Harrisburg, PA 17108

RE: Proposed 31 Pa. Code Ch. 5001 – Health Equity Accreditation (54 Pa.B. 2993)

Ana Paulina Gomez,

On behalf of URAC, thank you for the opportunity to provide comments in response to proposed 31 Pa. Code Ch. 5001 regarding health equity accreditation in the Commonwealth's State-based health insurance marketplace. We applaud your agency's commitment to leadership on health equity issues in your state and support the inclusion of health equity accreditation requirements into health plan certification for Pennie. URAC strongly supports state Exchanges, Medicaid programs, and insurance regulators that seek to demonstrate a commitment to health equity by mandating that health plans participating in the marketplace obtain health equity accreditation from national accrediting entities.

As the Exchange Authority considers rulemaking on health equity accreditation, we urge you to consider the full range of qualified national accrediting organizations as is contemplated in the proposed rule language. Proposed Sec. 5001.3 (Definitions) provides the Exchange Authority with the power to determine which health equity accreditation programs are recognized to the qualified under the new regulations and we urge the Exchange Authority to avoid unnecessary restrictions on available accreditors. As you work to finalize requirements for recognized health equity accreditation organizations and begin to implement the new regulations, we write to you today to introduce you to URAC's new health equity designation, which we believe will set an industry standard for driving change and enhancing equity.

URAC is the independent leader in promoting health care quality through accreditation, measurement, and innovation. URAC is a non-profit organization that uses evidence-based measures and develops standards through inclusive engagement with a range of stakeholders committed to improving the quality of health care. Our portfolio of accreditation and certification programs spans the health care industry, addressing digital health, health care management and operations, health plans, pharmacies, physician practices, and more. URAC accreditation is a symbol of excellence for organizations to showcase their validated commitment to quality and accountability.

Corporate Member Organizations

Academy of Managed Care Pharmacy

America's Health Insurance Plans

American Association of Payers, Administrators and Networks

American Health Quality Association

American Hospital Association

American Medical Association

American Nurses Association

American Property Casualty Insurance Association

American Psychiatric Association

Blue Cross Blue Shield Association

Case Management Society of America

National Alliance of Healthcare Purchaser Coalitions

National Association of Insurance Commissioners

Pharmaceutical Care Management Association

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Shawn Griffin, MD, FAAFP President and CEO



We applaud the Exchange Authority for drafting proposed regulations that take a broad approach to health equity accreditation by allowing all qualified offerors of high-quality health equity accreditation programs to apply for recognition to be qualified to offer accreditation to insurers offering plans through the Exchange. Our experience has shown us that unnecessary restrictions on available accreditors ultimately diminishes competition and hinders efforts to drive quality improvement and patient safety. Limiting health equity certification offerings deprives patients of other valuable programs and creates an unreasonable administrative burden for health plans that seek accreditation from other accreditors. We believe that limiting accreditation to only one provider is anti-competitive and will ultimately serve to slow the advancement of health equity in the states.

URAC believes that every person should have access to high quality health care and, as such, we believe that we must address the environmental and social factors impacting individual health. Environmental and social factors, including disparate treatment and impacts in poor and minority communities, must be addressed in order to make meaningful gains in health equity. In support of this belief, URAC has formulated a plan to emphasize and advance health equity in our health care delivery system. Our work is ongoing and includes partnering with organizations that have expertise in health equity and community health so that we may revise our standards and include language and concepts in our programs that advance solutions to environmental and social determinants of health in poor and underserved communities. URAC's process in the development of our health equity offerings was specifically designed to incorporate input from organizations with a proven record of impactful leadership in the world of health equity. The work of integrating these standards and goals into our programs is a critical element of our effort to advance health equity using the tools available in the accreditation space. This means introducing concepts of health equity in all of our new and revised recognition programs.

URAC is not only prioritizing the work of implementing health equity into our new and existing recognition programs. We also recently launched a health equity accreditation program that will be a foundational part of driving health equity in accreditation. As part of this new accreditation, we have worked closely with partners in the health equity community to solicit feedback and guidance. URAC's health equity accreditation was developed in collaboration with the National Minority Quality Forum to allow health care organizations of all kinds to highlight their commitment in addressing health disparities within the communities they serve. Additionally, URAC convened a Health Equity Council to provide input on accreditation standards. This Council consisted of organizations such as the American Public Health Association, National Black Nurses Association, National Health Council, and the American Hospital Association that were chosen for having successfully implemented

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equity principles in their work. Feedback from our partners indicates that organizations throughout the health care ecosystem are at various levels of maturity relative to the execution of their health equity strategies. We have heard clearly that the availability of accurate and actionable data to support health equity is critical to driving change. For that reason, URAC's designation offers a glidepath to support organizations regardless of where they are in their health equity journey. This is necessary to achieve growth in the health equity space and ensure that the goals and programs are accessible to all.

There are several elements of this designation with the ultimate goal of promoting health equity throughout the health care system. Our designation requires staff education addressing concepts including cultural competency, implicit bias, and health equity organizational principles. It also requires organizations to include services designed to improve access and availability of services. For example, the standards encourage organizations to offer interpretation and translation services to vulnerable populations. Furthermore, organizations must assess how service offerings are equitable across patient populations served and address individual social determinants of health. Given the paucity of available data, the framework requires that organizations identify and collect data, identify gaps, and use this information to drive health equity improvement strategies.

As one of the nation's premier accreditors of health plans, URAC has unique insight into the health accreditation space and the potential impacts of new or amended state accreditation standards like those for health equity accreditation. URAC applauds your agency's commitment to advancing health equity and stands ready to assist in your efforts, particularly as they relate to requirements for health equity accreditation or certification. If your schedule permits, we would greatly value the opportunity to discuss our health equity accreditation program offering as well as our work on health equity generally and other issues related to accreditation.

If you have any questions about URAC's health equity accreditation or if you would like to schedule time to discuss health equity in the accreditation space, please contact URAC's Director, State Relations, Joshua Keepes at jkeepes@urac.org.

Sincerely,

Shawn Griffin, M.D.

President and CEO of URAC

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