Race, Ethnicity, Language, & Disability (REALD) and Sexual Orientation and Gender Identity (SOGI) Updates & What does it mean for us?

Educational webinar
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Today’s Objectives

• REALD Importance - OHA’s 2030 goal and health equity
• REALD background & summary
  • Laws, OARs
  • What is REALD
  • Why collect REALD (& SOGI)

• Activities to date (and or planned)

• Workgroup Recommendations
  • Using REALD (& SOGI)
  • Common Questions & Concerns

• Time permitting – more about HB 3159
OHA Strategic Goal to eliminate health inequities by 2030

- OHA core value of health equity: “We consider the diversity of Oregon’s communities as we make decisions about how policy and practice are developed, and how resources are distributed.”

- OHPB strategic priority to advance health equity

Collection of REALD and SOGI data play a key role in meeting this goal!
Structural Discrimination (racism, sexism, ableism, classism)

Root Cause

Tool

Systems

Outcomes

Laws (political process, statutes, cases, budgetary decisions, regulations, enforcement)

Public Health & Health Care

Neighborhood & Built Environment

Health & Wellbeing

Education

Economic Stability

Eliminating Health Inequities by 2030

• What gets measured, gets counted; currently we cannot adequately assess how racism, disablism and lack of language access impact individual and community health

• The lack of granularity in race/ethnicity can “...mask important inequities in health and health care.” (Ulmer et al., 2009)

• REALD is a tool to help identify and eliminate systemic health inequities
What are the laws around REALD?

HB 2134 (2013)
* Came from communities most impacted by health inequities (APANO & OHEA)
* Established REALD collection for OHA and ODHS
* Based upon local, state, and national standards and best practices

HB 4212 (2020)
* Required REALD collection for COVID encounters
* Updated HB 2134 OARs in 2020

HB 3159 (2021)
* Adds SOGI
* Requires REALD and SOGI collection on all patients from providers & insurers
**What are the REALD data?**

<table>
<thead>
<tr>
<th>Race &amp; Ethnicity questions</th>
<th>Language</th>
<th>Disability</th>
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</thead>
<tbody>
<tr>
<td>• Three questions:</td>
<td>• Multiple questions including:</td>
<td>• Nine questions</td>
</tr>
<tr>
<td>• Open text question</td>
<td>• Languages used at home*</td>
<td>• Three added in 2020*</td>
</tr>
<tr>
<td>• Multi-select from 39 options (Five added in 2020*)</td>
<td>• preferred spoken/written</td>
<td>• Two questions apply to all individuals</td>
</tr>
<tr>
<td>• Primary Race</td>
<td>• interpreter needs, English proficiency*</td>
<td>• Seven apply to those over age of 5</td>
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*2020 changes
Why collect REALD (& SOGI)?

REALD & SOGI

• Helps ensure access and equity in services, processes and outcomes
• Provides consistency in data collection

• With REALD & SOGI data, together we can:
  • Identify inequities; determine what groups are most impacted
  • Use information to improve client/patient/member services and reduce inequities
  • Address identified inequities through policy and legislative efforts
  • Reallocate resources and funds needed to effectively address these inequities
  • Design culturally appropriate and accessible interventions
Activities to Date & or Planned

• Expanding REALD & SOGI Unit within OEI
  • Enable in-depth facilitated technical assistance and development of resources & training to facilitate implementation

• RAC for SOGI data standards – Feb/March 2022

• Planning for HB 3159 Registry
  • Tacking challenges of mapping national standards to local standards (best practices)
  • Community engagement
  • Leverage and align to new technologies and standards such as FHIR (Fast Healthcare Interoperability Resource) to find ways to collect and exchange REALD and SOGI in the most efficient way
  • Engage interested parties and partners before, during, after the process
Using REALD (& SOGI) to help meet recommendations

• OHPB Committee Membership Workgroup - Selected Recommendations (October 2021):
  o All OHPB Committees should engage diverse, under-represented, and excluded communities
  o Support recruitment and retention of more diverse OHPB Committee members

Committee Membership Workgroup’s Final Findings and Recommendations Report:
Using REALD (& SOGI) to help meet Committee Membership Workgroup recommendations

• What we learned
  • Implicit bias – double standard tendencies
  • Survey results – generally positive
  • Some concerns outside of survey - about disability questions - not allowing folks to self-identify in the ways that makes sense for themselves
    • Will address in next rules advisory committee meeting (RAC) – open text disability identity questions

• Challenges to address (long term)
  • Public Records Act - cannot assure confidentiality
Commonly Asked Questions / Statements

• Why do I need to answer questions that don’t relate to my role as a committee or board member?

• REALD questions are too personal, and I don’t feel comfortable answering them.

• I don’t want to answer the REALD questions, it takes too long.

• Why does it matter if I answer the REALD questions if I just mark decline to answer on every question?

• What are you planning to do with the data, and will my individual privacy be protected?

• Can I get the REALD questions in a different format or language?
What can patients expect?

• 2017, REALD data were starting to be collected during Medicaid enrollment

• Fall 2020, REALD questions were updated and patients with a COVID encounter have been asked for their REALD information
  • May be a paper form or in the form of an interview (phone/video)
  • Data submitted to OHA:
    • May be electronic through portal
  • REALD data only need to be collected on a patient once every 365 days

• Future – patients will be asked for their REALD and SOGI information by their health care provider or insurance payer once every 365 days
Addressing HB 4212 Challenges and Moving onward to HB 3159

• Near term
  • Developing OSU internship with small providers to uncover challenges
  • Working towards a survey tool to collect REALD data using a patient app

• Longer term
  • Planning and implementation of a centralized registry
  • Leverage and align to new technologies and standards such as FHIR (Fast Healthcare Interoperability Resource) to find ways to collect and exchange REALD and SOGI in the most efficient way
  • Engage interested parties and partners before, during, after the process
What are the requirements in HB 3159?

• Development of centralized registry
  • Providers and insurers to submit REALD & SOGI data at least annually regardless of type of ‘encounter’
  • Providers and health plans can query the registry for information on their patients
  • Patients can add and update information in the registry directly

• Providers/Insurers must inform patients that:
  • REALD & SOGI data is reported to OHA
  • How the data is used; how the data may not be used
  • That they are not required to answer (can decline)

• OHA is planning to exempt CCOs from collecting REALD and SOGI to the registry

*SOGI data standards to be added to HB 2134 OARs – rules advisory committee (RAC) planned for Spring 2022
The ONE System and the Registry under HB 3159 – what does it mean for Medicaid?

- HB 3159 applies to all patients, and it requires REALD and SOGI data collection every 365 days
  - The registry under HB 3159 will provide a centralized collection place for all REALD and SOGI data – from providers & insurers
- The ONE System collects REALD data during initial Medicaid enrollment and will collect SOGI data in the future; Medicaid recipients are not asked for this information during renewals
  - Possible that ONE system can be enhanced with the registry data
Reflections and Questions?

Resources:

• REALD Website/Resources: [https://www.oregon.gov/oha/OEI/Pages/REALD.aspx](https://www.oregon.gov/oha/OEI/Pages/REALD.aspx)
  Email Questions: OHAREALD.Questions@dhsoha.state.or.us