



National Committee on Vital and Health Statistics (NCVHS)
Full Committee Meeting
April 11, 2024

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Gravity Overview

A collaborative initiative with the goal to develop consensus-driven data standards to support the collection, use, and exchange of data to address the social determinants of health (SDOH).





2024 Project Sponsors, Members and Partners



























































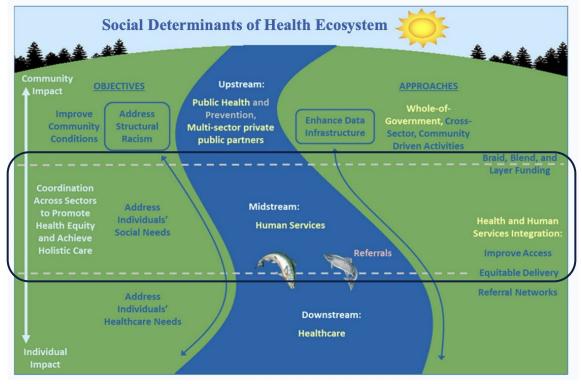


Special thanks to the following for your in-kind contributions to Gravity Project: CMS, AMA and Civitas Networks for Health

HHS Strategic Approach to Addressing SDOH to Advance Health Equity



Data standards (i.e. Gravity) to support health and human services integration



Gravity Project Timeline

Food

Insecurity

2019

Launch

becomes an

Accelerator

HL7 FHIR

August:

Gravity

Project





SIREN

Contracts with

EMI to Initiate

Gravity Project



Financial Insecurity Inadequate Housing Unemployment Veterans Education Material Hardship **Intimate Partner** Violence Elder Abuse Stress Social Isolation 2021 NIH National Library of Medicine November: Gravity Value Sets in VSAC USCDI July: Gravity Data Gravity IG STU2 Sets in USCDI v2 **MHL7** FHIR August: Gravity IG

Medical Cost Burden Health Insurance Digital Access **Coverage Status Health Literacy** Digital Literacy 2022 2023 September: **Gravity Pilots** Affinity Group launch **HL7**'FHIR'

November:

Published

April: Gravity Pilots Phase II Launch: Focus on Public Health/ Health Equity

January, May, Q2: IG Testing and Updates

MHL7 FHIR

July: Gravity IG STU2.1 Published

July: Supplemental Benefits for Social Needs demonstration

2024 February: Gravity

Language Barriers

Utility Insecurity

Legal Access /

Incarceration

Implementation Affinity Group Re-Launch

February: Social Care Co-Design Final Report Release

March: Discovery to advance national data standards for payment and reporting use case

April/May: Open Program Taxonomy

Italicized text is planned.

SIREN/Academy

Stakeholder

Group

Health Host Multi-

5 THEGRAVITYPROJECT.NET

STU1 Published

Maintain

Gravity Terminology Curation Process

Well-Established, Rigorous and Efficient



EVIDENCE-BASED
Leveraging literature, and national domain subject matter experts

CONSENSUS-DRIVEN
Centering community perspectives to ensure pragmatism in open HL7-aligned public process

SEMANTICALLY CONSISTENT
Aligned with federal and community social care taxonomies

PRINCIPLED
Grounded in the ethics of Data Justice and Social Justice

Formal 6-Month Cycle **February & August Start End-to-End** Consensus Terminology Pre-Work **Analyze** Identify Review Vote Build Convening Community: Open Consensus-Submissions to Standard **Based Recommendation Development Code Systems** U.S. National Library of Medicine

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Terminology Workstream:

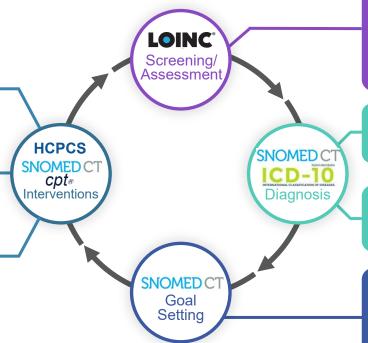
Example Food Insecurity Terminology Build



PROCEDURE: Referral to Special Supplemental Nutrition Program for Women Infants and Children (WIC) 464111000124106 (SNOMED CT)

PROCEDURE: Provision of food voucher 464411000124104 (SNOMED CT)

PROCEDURE: Referral to Community Health Worker 464131000124100 (SNOMED CT)



Food Insecurity Screening/Assessment Q. Within the past 12 months we worried whether our food would run out before we got money to buy more. 88122-7 (LOINC) A. Often true, Sometimes true, Never true, don't know/refused. LL4730-9 (LOINC)

Food Insecurity Diagnoses Food Insecurity 733423003 (SNOMED CT)

Food Insecurity Diagnoses Food Insecurity Z59.41 (ICD-10-CM)

Food Insecurity Goals
Food Security 1078229009
Feels food intake quantity is adequate for meals 671331000124107
(SNOMED CT)

All Gravity Project Success Factors

Integration of Data Standards Into...



POLICY

(e.g., White House SDOH Strategy, ONC HTI-1 USCDI)

INNOVATION

New tools for capture, aggregation, analytics, and use

PRACTICE

(e.g., repeatable process for adoption, implementation, and use of SDOH data at practice level)

QUALITY MEASURES

(e.g., NCQA (HEDIS), CMS eCQM, IQR, HOQR, MIPS, IPPS)



PAYMENT MODELS

(e.g., CMMI ACO REACH, AHEAD)

PROGRAMS

(e.g., Medicare Advantage, Medicaid Managed Care, Hospital QRRP, MIPS, CMS SNP HRA).



OTHER STANDARDS

HL7 FHIR Accelerators (DaVinci, Argonaut, CARIN), MCC eCare Plan

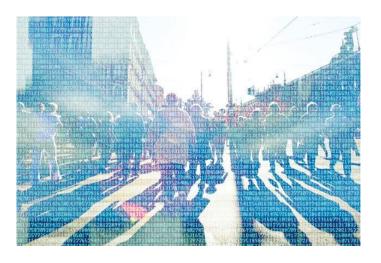




Gravity Data Use Principles for Equitable Health and Social Care



- Improving Personal Health Outcomes
- Improving Population Health Equity
- Ensuring Personal Control
- Designing Appropriate Solutions
- Ensuring Accountability
- Preventing, Reducing, and Remediating Harm



Gravity Implementation Across the Nation



This is a sample (not all-inclusive list) of organization locations that have participated in the Gravity Pilots Affinity Group. We are grateful to all organizations adopting the work of Gravity to advance SDOH standards.



2023:

- Focus on public health and health equity in partnership with Civitas Networks for Health, with support from the Robert Wood Johnson Foundation*.
- Pilot sites: Bronx (RHIO)/New York State, MyHealth Access Network/Oklahoma State; University of Colorado Hospital/Denver Metro Area; Pima County Department of Public Health & Southwest Tribe/Pima County Arizona
- Significant advancement in implementation materials

2024:

- NY State 1115 Waiver: Continue assistance for state-wide implementation of the Gravity SDOH IG and aligned Gravity terminologies
 - Domains: Food Insecurity, Housing Instability, Homelessness, Inadequate Housing, Transportation Insecurity, and Utility Insecurity
 - Activities: Screening, Diagnosis, and Referral (Service Request)
- Monthly Gravity Implementation Affinity Group open learning forum

^{*}Support for this initiative was provided by the Robert Wood Johnson Foundation. The views expressed here do not necessarily reflect the views of the Foundation.

More Opportunities to Address Real-World Challenges





Opportunities for national standards to:

- Address needs at individual, family/household/other group and population/community levels
- Reduce burden and improve sustainability for CBOs
- Evaluate inequities to facilitate structural solutions
- Expand data support for use cases to center whole-person care
- Further capacity for intelligent social care navigation

The Social Care Co-Design was part of the Gravity Project and Civitas Networks for Health 2023 implementation effort, developed in partnership with HealthBegins. Support for this initiative was provided by the Robert Wood Johnson Foundation. The views expressed here do not necessarily reflect the views of the Foundation.

Thank you!



Visit us at:

Gravity Website: https://thegravityproject.net/

Gravity Confluence Page: https://confluence.hl7.org/display/GRAV/The+Gravity+Project

Help us with Gravity Education & Outreach

Use Social Media handles to share or tag us to relevant information:

https://www.linkedin.com/company/gravity-project

gravity PROJECTS

Appendix

Gravity Strategic Goals



- Grow and maintain a vibrant community with sustainable governance, funding, and an operational model that strengthens Gravity Project partnerships and community-led consensus-based goals
- Convene and support a diverse community with expertise and lived experience of addressing and meeting social needs, through care, administrative support and informatics
- Accelerate data standard solutions to address the payment and reporting needs of community-based organizations and other stakeholders that promote equitable health and social care, leveraging HL7[®] FHIR [®], in conjunction with other standards as needed
- Enable Health and Social Care organizations to effectively implement and test Gravity Project SDOH data exchange and terminology standards to ensure they better meet community needs
- Increase awareness of Gravity work among broader stakeholder groups

Refreshed March 2023

An SDOH Lexicon



 Health Equity: Health equity is the state in which everyone has a fair and just opportunity to attain their highest level of health

• Social Determinants of Health (SDOH): "The conditions in which people are born, grow, live, work and age," which are "shaped by the distribution of money, power and resources

Population & Structural-Level

SDOH can offer both positive and negative forces:

Positive Forces

 Protective Factors: Characteristics or strengths of individuals, families, communities or societies that act to mitigate risks and promote positive well-being and healthy development.

Person-Level

Negative Forces

- Social Risks: Adverse social conditions associated with poor health.
- Social Needs: Patient-prioritized social risks.

Positive Force

Protective Factors

Social Risks

How to Engage



Gravity convenes participants from across the health and human services ecosystem via the following virtual public open meetings (all times in ET):

- 1. Terminology Workstream: Community Collaborative **Bi-weekly** Thursdays 4:00 5:30pm
- 2. Technical Workstream: Implementation Guide Bi-weekly Wednesdays 1:00 2:00pm
- 3. Pilots Workstream: Implementation Affinity Group Last Thursday each month 2:30 4:00pm

View the <u>Upcoming Meeting Information</u> confluence page and HL7 conference call calendar for meeting details: <u>https://www.hl7.org/concalls/</u>



Become a Gravity Project sponsor!