

## **Public Comment for Quality Council**

Dear members of the Quality Council,

My name is Dashni Sathasivam. Thank you for the opportunity to publicly comment on behalf of Health Equity Solutions (HES), where I serve as the Manager of Policy & Outreach. HES is a nonprofit organization with a statewide focus on promoting policies, programs, and practices that result in equitable health care access, delivery, and outcomes for all people in Connecticut.

Has the Council considered NCQA accreditation for advance practices and insurance carriers? For example, NCQA's Multicultural Health Care Distinction (MHC), which evaluates entities on how well they: collect race/ethnicity and language data(which could support a REL completeness measure being discussed today), provide language assistance, their cultural responsiveness, quality improvement of CLAS, and reduction of health care disparities. In 2019 Pennsylvania Medicaid required it's MCO's to achieve distinction in MHC. California's state-run health plan Marketplace (Covered California) have required all of their health plans to meet requirements by 2022 and achieve NCQA Health Plan Accreditation by 2024. As a part of Individual Market Quality Health Plan contracts, they also expect plans to "Achieve 80% self-identification of racial or ethnicity identity for Covered California enrollees". The NCQA's Health Equity Accreditation also seems like a promising way to outsource the oversight of health equity initiatives. While we understand that approval of NCQA accreditation for CT payers is not under your immediate scope, would the Council consider recommending this as a future action for consideration?

As always, we are grateful for the Quality Council's intentional focus on embedding equity into this work. Thank you for the opportunity to comment.

Sincerely,  
Dashni

Dashni Sathasivam  
Manager of Policy & Outreach  
Health Equity Solutions