Social Determinants of Health

CSTE DSWG Data Element Specific Team

11/15/2024

CSTE Data Standardization Workgroup Meeting

Please mute phone/ headset/ computer audio!

Agenda

- Welcome & Announcements
- Educational Attainment Value Set
- Insurance Background
- Insurance Discussion
- Income Discussion *(if time allows)*
- Next Steps
- Wrap-Up & Adjourn

Meeting ground rules

- Discussion Guidelines
  - "Raise" your hand
  - Use the chat to provide feedback and ask questions
  - When called, state your name and affiliation
  - Stay on point, be brief, and within the context of the discussion in progress
  - 80/20 consensus
  - Co-Chairs/moderators' prerogative to move the discussion forward as needed
    - Post-meeting input form is always available for additional comment
    - Be courteous and be open to new ideas

Active participation encouraged for all!

- Chats, voting, comments, etc.
- Includes STLT jurisdictions + CDC Programs + CSTE, etc.

Core Data: In Scope for DSWG

- Identify core data elements for surveillance **for transmission to CDC**
  - For situational awareness or routine, cross-condition case surveillance
  - For case-based surveillance (not syndromic, not aggregate reporting)
  - Within *selected* data classes (e.g., hospitalization, travel history) that are used for multiple conditions

- Identify common definitions, value sets/code sets, structure, and interpretation notes for those core data elements

- Recommend best practices for how selected data elements are collected, structured or populated within PHA surveillance systems, if/when that will affect the interpretation of the data transmitted to CDC

Core Data: Out of Scope for DSWG

Out of Scope:

- Defining how a question should be worded when conducting a case interview
  - These data may be collected during a case interview, but may also come from eCR, ELR, manual review of medical records, or relayed from a healthcare provider
- Defining how a data element must be worded within a jurisdictional surveillance system
- Limiting the value set for responses collected by a jurisdiction

Core Data FAQ

Core for CDC Transmission ≠ Required

Even if a data element or class is identified as appropriate for transmission to CDC, this does *not* mean we need to fill in or send an answer for every core element for every case!

- It is okay to leave the data field as blank or Unknown if the information is not available, not a priority, or not useful for particular conditions.

Data elements and data classes should be considered for core if they are relevant for many conditions

- There is no set number that defines "many".
- Would you rather see the element in (for example) a GenV3 MMG? or in the applicable disease-specific MMGs?

Background: SDOH - Education

Education: Why send it?

- Proxy for SDOH information
  - Proxy = not going to be correct in every instance
- Help in knowing the audience for development of communication materials
- Aligning with available denominator information is key for analysis estimating if a subgroup sees a higher than expected burden of disease.
- We are not conducting a survey of what educational attainment looks like in the general population.

ACS vs CPS vs NHIS

CDC uses ACS data for denominator information as the gold standard:

American Community Survey	Current Population Survey	National Health Interview Survey
Annual estimates for the nation, states, and cities and counties of 250,000 or more. **Areas as small as census block groups using multi-year averages.**	Nation, regions, and states for selected characteristics.	Available at the national and region level.
About 3.5 million housing units per year.	Annual sample size is about 100,000 addresses.	Each year, approximately 87,500 persons in 35,000 households.
Includes military, institutionalized, and non-institutionalized.	The CPS includes the *civilian, non-institutionalized* population.	The NHIS includes the *civilian, non-institutionalized* population.

Education: ACS Data Availability

- AGE BY EDUCATIONAL ATTAINMENT
  - Population 18 to 24 years
    - Less than high school graduate
    - High school graduate (includes equivalency)
    - Some college or associate's degree
    - Bachelor's degree or higher
  - Population 25 years and over
    - Less than 9th grade
    - 9th to 12th grade, no diploma
    - High school graduate (includes equivalency)
    - Some college, no degree
    - Associate's degree
    - Bachelor's degree
    - Graduate or professional degree

Education: Certifications

ACS: "The instructions specified that certificates or diplomas for training in specific trades or from vocational, technical or business schools were not to be reported. Honorary degrees awarded for a respondent's accomplishments were not to be reported."

- If we add a category in our responses for vocational/trade school certificate, there will not be denominator data for that, and representation in other categories will be affected if it takes away from those responses.

Discussion: Education

CSTE

Proposed DE: Highest Level of Education

Definition

- Highest degree or level of school completed by the person at the first epidemiologically relevant date associated with the case (i.e., CCCD).

Value Set:

- No schooling
- Less than 1st grade
- Grades 1-11
- Grade 12, no diploma
- High school graduate (includes equivalency - i.e., GED)
- Some college, no degree
- Associate's degree
- Bachelor's degree
- Graduate or Professional degree
- Unknown

ACS Value Sets

Value Set ACS Pop 25+:

- Less than 9th grade
- 9th-12th grade, no diploma
- High school graduate (includes equivalency - i.e., GED)
- Some college/*university*, no degree
- Associate's degree
- Bachelor's degree
- Graduate or Professional degree
- Unknown

Value Set ACS Pop 18-24:

- Less than high school graduate
- High school graduate (includes equivalency - i.e., GED)
- Some college/*university* or Associate's degree
- Bachelor's degree or higher
- Unknown

Poll #1 – Education Value Set

What granularity is preferred between these two options?

- Option 1 – More Granular
  - *Only available for ages 25+ in ACS*
- Option 2 – Less Granular

Option 1

- Less than 9th grade
- 9th-12th grade, no diploma

Option 2

- Less than high school graduate

Poll #2 – Education Value Set

What granularity is preferred between these two options?

- Option 1 – More Granular
  - *Only available for ages 25+ in ACS*
- Option 2 – Less Granular

Option 1

- Some college/*university*, no degree
- Associate's degree

Option 2

- Some college/*university* or Associate's degree

Poll #3 – Education Value Set

What granularity is preferred between these two options?

- Option 1 – More Granular
  - *Only available for ages 25+ in ACS*
- Option 2 – Less Granular

Option 1

- Bachelor's degree
- Graduate or Professional degree

Option 2

- Bachelor's degree or higher

Poll #4 – Trade/Vocational School Certificates

As part of core data, do we need to address trade school or vocational school certifications?

- Yes – Add a value to our value set
- No – Align with available ACS data

Background: SDOH - Insurance

Health Insurance Coverage

Defined by the U.S. Census Bureau as the comprehensive coverage at any time during the calendar year for the civilian noninstitutionalized population of the United States. Health insurance is a means for financing a person's health care expenses.

U.S. Census Bureau tracks insurance coverage trends through

American Community Survey (ACS)
Current Population Survey (CPS)
Survey of Income and Program Participation (SIPP)

National Health Interview Survey (NHIS) was redesigned again in 2019. Starting in 2019, health insurance coverage is assessed as part of the annual core in the Sample Adult and Sample Child questionnaires.

American Community Survey (ACS) & Health Insurance

Survey Question: Are you CURRENTLY covered by any of the following types of health insurance or health coverage plans? Mark "Yes" or "No" for EACH type of coverage in items a – h.

Valid Responses:

a. Insurance through a current or former employer or union (of yours or another family member)
b. Insurance purchased directly from an insurance company (by you or another family member)
c. Medicare, for people 65 and older, or people with certain disabilities
d. Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability
e. TRICARE or other military health care
f. VA (enrolled for VA health care)
g. Indian Health Service
h. Any other type of health insurance or health coverage plan – Specify

Case Notifications to CDC Message Mapping Guides (MMGs)

Respiratory & Invasive Bacterial Diseases (RIBD) MMG			
Data Element Name	**Data Element Description**	**Data Type**	**Value Set Name (VADS Hyperlink)**
Insurance	Insurance	Coded	Insurance Type (RIBD)

Insurance Type (RIBD): Incarcerated, Indian Health Service – Regular, Managed Care (Private), Managed Care Unspecified, Medicaid, Medicare, Military/VA Insurance, Other Insurance, Private Health Insurance, Uninsured, Unknown

Discussion: Insurance

Proposed DE: Insurance Coverage Type

Definition: Person's type of health insurance coverage. Select all that apply.

Value Set:

- Private insurance
- Medicare
- Medicaid
- Military (VA/Tricare)
- Indian Health Service
- Correctional Facility Health Care Service
- Uninsured
- Other
- Unknown

Poll #5 – Insurance

Is this definition appropriate for Insurance Coverage Type?

Person's type of health insurance coverage. Select all that apply.

- I can live with it
- No

Poll #6 – Insurance

Do you support the use of this value set?

- Yes
- No

Value Set:

- Private insurance
- Medicare
- Medicaid
- Military (VA/Tricare)
- Indian Health Service
- Correctional Facility Health Care Service
- Uninsured
- Other
- Unknown

Poll #7 – Insurance Core?

Should Insurance Coverage Type be considered a core data element for transmission to CDC?

- Yes
- No

Reminder:
Core data for surveillance = Data classes or elements used for situational awareness or routine, cross-condition case surveillance for transmission to CDC. These elements may remain empty for cases/conditions where not applicable or unavailable.

Next Steps

- Look for a draft document for SDOH to come out shortly.

- No more scheduled DESTs!

- The next large DSWG call will be on December 13 from 1-2pm ET.

NOTE:

All drafts released for DEST/DSWG review are drafts and the resulting recommendations passed to CSTE for final steps have not been made available. Please do not pass on draft documents as final products.