

Shedding Light on Inequities in Care

2024 was an unsettling year, as Massachusetts health care experienced unprecedented access challenges, widespread clinician burnout, and other unanticipated disruptions. Through all the uncertainty and turmoil, I am proud to say that MHQP continued to be a reliable source of data to help us all better understand patient experiences, an innovative force for transparency and collaboration, and a steady voice for sense-making. 2024 was a year in which MHQP focused much of our energies and efforts on shedding a brighter light on the systemic inequities in our healthcare system. In addition, as a result of our work with the Center for Health Information and Analysis (CHIA) to monitor the primary care crisis through the Massachusetts Primary Care Dashboard, we inspired a range of high-profile media coverage calling for action to address the challenges in our state, contributing to legislation being passed to create a primary care task force. We look forward to working with our partners and other stakeholders to continue to make meaningful progress toward the goals of reducing racial and ethnic disparities, strengthening primary care, and improving care experiences for all patients throughout the Commonwealth in the year and years to come. Thank you, as always, for your support.

Barbra G. Rabson, President and CEO

Advancing a Statewide Initiative to Measure Disparities in Patient Experience

In 2024, we advanced MHQP's Measured Equity initiative, which was launched in the fall of 2023. This effort is bringing together Massachusetts healthcare leaders to create a comprehensive statewide system for consistently measuring, understanding, and reducing racial and ethnic disparities in patient experiences, using MHQP's statewide Patient Experience Survey as a platform.



The organizations that have worked with us in this initiative thus far are: Blue Cross Blue Shield of Massachusetts, Health New England, Mass General Brigham, Mass General Brigham Health Plan, Point32Health, Reliant Medical Group, Tufts Medicine Integrated Network, UMass Memorial Health, and Wellpoint. Together, we will jointly determine key principles for measuring disparities in patient experience, better understand the drivers of these disparities, and collectively determine how to address them.

The most critical progress made in 2024 toward these goals was our work with the Cambridge Health Alliance Health Equity Research Lab to determine how best to account for social risk to allow fair comparisons of performance across organizations. This effort, which was made possible by an award from the **Robert Wood Johnson Foundation's Evidence for Action** program, will enable participating organizations to compare their data against peer organizations and gain valuable insights to target improvement efforts. We plan to begin incorporating race and ethnicity data into our public reporting in 2025.

Convening Stakeholders to Develop Research Agendas to Help Address Inequities

Through three separate awards from the Patient-Centered Outcomes Research Institute (PCORI) Eugene Washington Engagement Award Program (EASCS #30430, EASCS #32674, and EASCS #35226), MHQP and partner organizations have been able to bring together patients with lived experience, along with providers, researchers, and health plan representatives to collectively identify directions for future patient-centered comparative clinical effectiveness research (CER). Our hope is that researchers will leverage the findings from these projects to study and identify the most effective interventions in improving care and reducing inequities.

Improving Care for Individuals with Sickle Cell Disease

MHQP and the Massachusetts Sickle Cell Association (MSCA) joined forces to identify new research directions aimed at improving pain crisis care for individuals with sickle cell disease (SCD). This project is built on a prior collaboration between the two organizations which focused on SCD pain self-management. Based on the learnings from two convenings, MHQP and MSCA published a [Roadmap for Future Research Directions into Sickle Cell Disease Pain Crisis Care](#) in April 2024.

“I wanted to join [the project] because... even though I’ve watched [sickle cell disease research] progress throughout the years, [it’s] still at some sort of stalemate so, I’ve dedicated the time and experience and expertise I’ve had throughout the years to be able to advocate for others as well as myself.” (Individual with sickle cell disease)

“When I had my follow up with the doctor, I was told at that time this is a ‘White women’s disease,’ and they didn’t know how to care for a Black woman.” (Black woman with endometriosis)

Advancing Equity in Endometriosis Care for Black Women

In January 2024, MHQP and the Endometriosis Association (EA) announced an effort to identify new research directions to reduce disparities in endometriosis care for Black women. Through two multistakeholder convenings, we learned about the diagnostic and treatment hurdles faced by all women with endometriosis, while highlighting the disproportionate burden faced by Black women as they navigate racial and other systemic inequities in the healthcare system when seeking endometriosis care. These narratives were central to creating a new *Patient-Centered Research Roadmap to Advance Equity in Endometriosis Care for Black Women*, which MHQP and the EA will be releasing in early 2025.

Addressing Mistrust Within the Black Community

In August 2024, MHQP launched a project in partnership with the Boston Medical Center, the Boston Public Health Commission, and the American Board of Family Medicine to identify new research directions to address mistrust in healthcare within the Black community. Disparities in trust have been documented in MHQP’s annual statewide Patient Experience Survey, and the eye-opening comments from participants have added qualitative insights that further contextualize and deepen our understanding of these findings. Recommended directions for research to address these concerns will be disseminated in 2025.

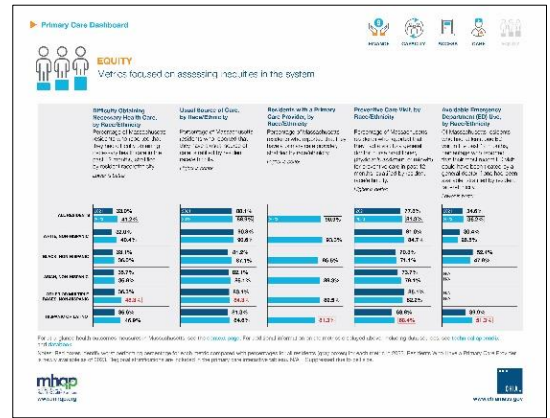
“You talk about mistrust. It ...took my entire family to say, ‘this just isn’t what care looks like.’ But then how do you [as] a Black person, sit back and say, ‘what does care look like when you’ve never had it before?’” (Black patient)

Monitoring the Health of Primary Care

In May 2024, CHIA and MHQP released an updated version of the Primary Care Dashboard, a set of metrics to monitor the health of primary care in the Commonwealth. The Dashboard is the culmination of several years of research to identify the best available, reliable and reproducible measures as a factual foundation to help drive policy initiatives and target resources to support primary care, including includes metrics focused on assessing inequities in the system.

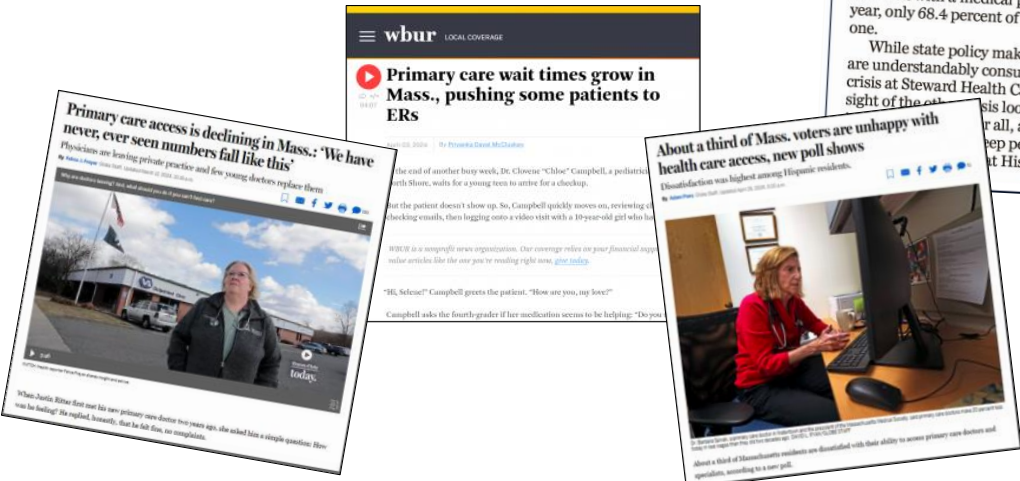
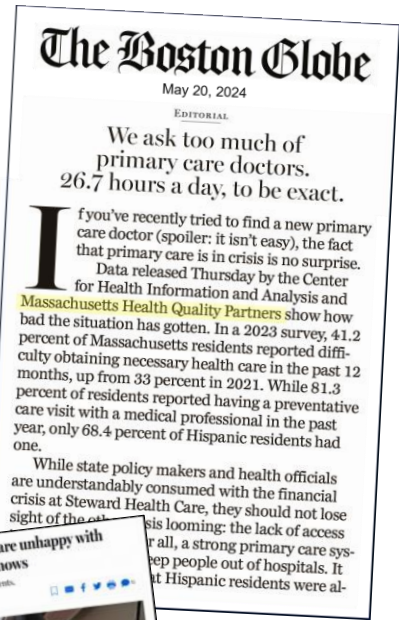
The metrics compiled in this release of the Dashboard continue to tell a frightening story of a primary care system in crisis due to low and declining investment, diminishing capacity, and racial and ethnic disparities. Key findings include:

- In 2023, 41.2% of Massachusetts residents reported difficulty obtaining necessary health care in the past 12 months, an increase from 33.0% in 2021.
- 6% of physicians left primary care in Massachusetts in 2021, an increase from 3.1% in 2019.
- In 2022, MassHealth MCO and ACO-As had the highest percentage of spending on primary care (7.5%), as well as the highest use of alternative payment methods.
- Between 2018 and 2022, cervical cancer screening rates dropped by 5.2 percentage points.
- There were substantial racial and ethnic disparities in access to and utilization of primary care. The downstream implications of such disparities are reflected in 2023 data that show Hispanic residents reporting higher rates of avoidable ED visits (51.3%) compared with all residents (36.2%).



Catalyzing Significant Media Coverage About Primary Care

The release of the updated Primary Care Dashboard and subsequent activities generated a significant amount of media coverage in Massachusetts, which helped to raise awareness about the state's fragile primary care system and contributed to legislation establishing a primary care task force in Massachusetts. We were proud to be a primary source cited in an editorial in the May 20th edition of the Boston Globe following the release of the Primary Care Dashboard.



Leadership Changes

MHQP was pleased to welcome many new important additions to our Board and Councils in 2024:

Board of Directors:

- Julita Mir, MD, (*Chair*), DotHouse Health
- Maggie Allard, MD, MPH, Community Health Design Corps
- Jeff Levin-Scherz, MD, MBA, WTW Health & Benefits
- Barbara Spivak, MD, Mount Auburn Cambridge IPA

Health Plan Council:

- Lora Council, MD, MPH, Fallon Health
- Maurice Sahar, MPH, Mass General Brigham Health Plan

Consumer Health Council

- Deb Zalvan, Wellist

Clinician Council:

- Mohammad Dar, MD, Community Care Cooperative
- Susan Dargon-Hart, LICSW, Massachusetts League of Community Health Centers
- Rachel Hitt, MD, MPH, Tufts Medicine Integrated Network
- Kara Keating Bench, MD, MPH, Cambridge Health Alliance
- Michelle Lock, MD, Pediatric Physicians' Organization at Children's
- Spencer Rittner, MD, Beth Israel Lahey Network
- Dan Slater, MD, MBA, Optum Massachusetts

We were also sad to see three key contributors term off our Board this year, although each will continue to work with MHQP in different capacities in the future:



James Roosevelt, Jr.
Board Chair 2018-2023



Rick Siegrist
Board Member 2015-2024



Lucilia Prates-Ramos
Chair of the Consumer Health
Council, 2019-2024,
Board Member, 2019-2024

About MHQP

Now in its 30th year, MHQP has built a strong legacy as a trusted local resource that drives positive and innovative change in our state's healthcare system. Our work enables provider organizations, health plans, and policymakers in Massachusetts to gain deep insights into patients' experiences, the primary care landscape, and health inequities, so they can make meaningful improvements in patients' experiences of care. We do this through:

- Multi-stakeholder convenings and collaboration
- Expert measurement via quantitative and qualitative data collection
- Sense-making analyses
- Reporting and sharing of insights with key stakeholder groups and decision makers