

April 14, 2023

Dr. Karin Orvis Chief Statistician of the United States Office of Information and Regulatory Affairs, Office of Management and Budget, Executive Office of the President Attention: OMB-2023-0001

Submitted electronically to: http://www.regulations.gov

Re: Initial Proposals For Updating OMB's Race and Ethnicity Statistical Standards (OMB-2023-0001)

Dear Dr. Orvis:

Premier Inc. appreciates the opportunity to submit comments to the Office of Management Budget (OMB) regarding proposed updates to the federal government's race and ethnicity statistical standards. The OMB seeks comments on an initial set of proposed changes to the statistical standards used across federal agencies to collect data on race and ethnicity. A federal interagency working group will use this feedback to shape final recommendations to the OMB on ways these standards should be updated to better reflect changes in the U.S. population and evolving needs and uses for data.

Premier is generally supportive of proposed updates to collect more detailed data on race and ethnicity. Premier also advises the technical working group to:

- Prioritize patient-reported data to the extent feasible;
- Work with technical expert panels to refine imputation or sampling methodologies to address • challenges with small populations;
- Develop guidance for both surveyors and the public on the updated standards, including new • definitions and categories; and
- Explore development of an electronic central repository of race and ethnicity data.

We provide additional detail on these recommendations below.

Ι. BACKGROUND ON PREMIER INC.

Premier is a leading healthcare improvement company and national supply chain leader, uniting an alliance of 4.400 hospitals and approximately 250,000 continuum of care providers to transform healthcare. With integrated data and analytics, collaboratives, supply chain solutions, consulting and other services, Premier enables better care and outcomes at a lower cost. Premier is a data-driven organization with a 360-degree view of healthcare. Premier's sophisticated technology systems contain robust data gleaned from nearly half of U.S. hospital discharges, 812 million hospital outpatient and clinic encounters and 131 million physician office visits. Premier's work is closely aligned with healthcare providers, who drive the product and service contracting decisions using a data driven approach to remove biases in product sourcing and contracting and assure access to the highest quality products.

A Malcolm Baldrige National Quality Award recipient, Premier plays a critical role in the rapidly evolving healthcare industry, collaborating with healthcare providers, manufacturers, distributors, government and other entities to co-develop long-term innovations that reinvent and improve the way care is delivered to patients nationwide. Headquartered in Charlotte, North Carolina, Premier is passionate about transforming American healthcare.

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II. PROPOSED UPDATES TO OMB'S RACE AND ETHNICITY STATISTICAL STANDARDS

Background

The Statistical Policy Directive No. 15: Standards for Maintaining, Collecting, and Presenting Federal Data on Race and Ethnicity (SPD 15) was initially developed in 1977 as an interagency effort to provide consistent and comparable data on race and ethnicity throughout the federal government and federal datasets. The SPD 15 provides a minimum set of categories that all federal agencies must use if they intend to collect data on race and ethnicity regardless of the collection mechanism.

The current SPD 15 standards – which were last updated in 1997 – require a minimum of two separate race and ethnicity questions. The first question is a "yes" or "no" question regarding ethnicity and asks whether respondents are Hispanic or Latino. Multiple responses to this question are not allowed. The second question relates to race and asks respondents to select one or more from the following options: "American Indian or Alaska Native," "Asian," "Black or African American," "Native Hawaiian or Other Pacific Islander" and/or "White." Surveyors can collect more detailed information provided that the data can be aggregated or rolled up into the minimum reporting categories.

The OMB notes that there have been "large societal, political, economic, and demographic shifts" nationwide since the standards were last revised nearly 25 years ago. In 2022 OMB convened the Federal Interagency Technical Working Group on Race and Ethnicity Standards, which is comprised of federal career staff who represent programs that collect or use race and ethnicity data. This working group is tasked with making recommendations to the OMB and the Chief Statistician of the United States to consider when updating the SPD 15.

Proposals and Recommendations

The OMB requests comment on the preliminary recommendations from the interagency working group, which include:

- 1. Combining the two current race and ethnicity questions into one question
- 2. Adding "Middle Eastern or North African" (MENA) as a new minimum reporting category. MENA is defined as all individuals who identify with one or more nationalities or ethnic groups with origins in the Middle East and North Africa.
- 3. Requiring the collection of detailed race and ethnicity categories by default. The working group is considering several options for more detailed data collection and in the notice put forward an example which would set the more detailed categories based on country of origin. For example, respondents who selected "Hispanic or Latino" would also have the option of selecting from the following subgroups: "Mexican American," "Puerto Rican," "Cuban," "Salvadoran," "Dominican," "Columbian," and/or an open field where the respondent could enter additional details or other countries of origin not listed. In instances where it is infeasible to collect data on more detailed categories, such as when there is small sample size or data is being collected by proxy, the proposed standards would allow for less detailed data collection.
- 4. Updating several of the terms used in the SPD 15, including discontinuing the use of the term "majority" "and "minority"
- 5. Specifying that guidance is necessary to implement the SPD 15 revisions, including ensuring the updated standard guidance be placed online in a central location and include implementation guidance, such as when agencies must incorporate revisions; statistical methods to connect data from previous and revised collection formats; and procedures for collecting, processing and reporting detailed categories.

Premier generally supports the working group's recommendations to revise the SPD 15 to collect more granular data on race and ethnicity. As applied to healthcare, collecting data at this level will allow researchers, stakeholders and policymakers to better evaluate inequities in care and identify specific populations that are affected by certain diseases or health outcomes. Better data collection overall will allow

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for stakeholders to analyze and implement evidence-based interventions that drive clinical quality improvements and ultimately advance health equity.

Premier also recommends that the working group take the following guidance under consideration:

- To the extent possible, race and ethnicity should be patient-reported, particularly as the standard would now request more detailed data on country of origin, which will be difficult (if not impossible) for surveyors to ascertain observationally or through imputed methods. Premier understands that federal agencies, such as the Centers for Medicare & Medicaid Services (CMS), have continued to explore methods for imputing race and ethnicity based on administrative claims data. Premier continues to caution against use of indirect estimation techniques, which can lead to data inaccuracies.
- The OMB seeks input on techniques or methodologies for collecting detailed race and ethnicity data when population size may be a challenge. Existing methodologies, such as imputation and oversampling, do exist. However, each of these methods has its own unique challenges. As noted above, *Premier continues to caution against using existing imputation methods, as they can lead to inaccuracies in collected data. Premier strongly encourages the federal government to continue to work with technical expert panels to refine imputation or sampling methodologies to address challenges with small populations.*
- The federal government should develop guidance for both surveyors and the public on the differences between race and ethnicity and the new categories that would be added under the survey. When questions arise during the surveying process, the burden often falls on the surveyor or administrative clerk collecting the requested information to explain what the question is seeking. This can lead to inconsistencies in data collection, which will ultimately undermine the accuracy of data and subsequent analyses. As a result, *the federal government should consider developing "scripts" for surveyors to utilize when administering the survey and develop easy-to-understand definitions and responses to frequently asked questions.*
- Finally, *Premier encourages the federal government to explore development of an electronic central repository of race and ethnicity data which could be utilized for research purposes and quality improvement efforts*. This would help to reduce burden on healthcare providers and other stakeholders who currently must manually collect this data to support their work in reducing healthcare disparities. A central repository would also help to minimize burden on patients by reducing the frequency in which they must report on race and ethnicity.

III. CONCLUSION

In closing, Premier appreciates the opportunity to submit these comments on the initial proposals for updating the race and ethnicity statistical standards. If you have any questions regarding our comments, or if Premier can serve as a resource on these issues to the agency in its policy development, please contact Melissa Medeiros, Senior Director of Policy, at Melissa_Medeiros@premierinc.com.

Sincerely,

Soumi Saha, PharmD, JD Senior Vice President of Government Affairs Premier Inc.