Race, Ethnicity, and Language Data Collection via Providers

**Project Goals**

1. **Goal 1:** Determine the feasibility and practicality of collecting patient REL data from providers.
2. **Goal 2:** Determine what methods are the most efficient in collecting patient REL data from providers.
3. **Goal 3:** Gather qualitative provider feedback regarding their potential role in providing patient REL data to health carriers.
4. **Goal 4:** Evaluate what incentives exist for providers to submit patient REL data to health carriers.

**Process Undertaken During DLP**

1. Conducted provider focus groups with providers of varying size practices.
2. Explored opportunities to conduct pilot test with identified UHC contracted providers.
3. Explored opportunity to conduct pilot test with academic institution.
4. Exploring opportunity to conduct pilot test with American Medical Association and other stakeholders.

**Challenges/Barriers**

- Competing Internal business priorities.
- Partnership approval process – The process of approval to partner with the AMA took longer than expected, and identifying providers for the pilot continues to be an ongoing process.
- Stakeholder alignment – In identifying additional stakeholders to partner with on this pilot, there has been the challenge of confirming mutually agreeable roles and project priorities.
- Provider participation – Providers have a natural skepticism of projects done with insurance carriers because of potential future requirements that may be placed on providers.

**Lessons Learned & Next Steps**

1. Partnerships are key to implementation. A health insurance company alone may not be the best entity to conduct the pilot because of provider skepticism.
2. Providers need to be educated on the “WIIFM” to providing patient REL data to health insurance carriers.
3. Continue exploring opportunity with AMA and other stakeholders.