

The HHS Action Plan to Reduce Disparities

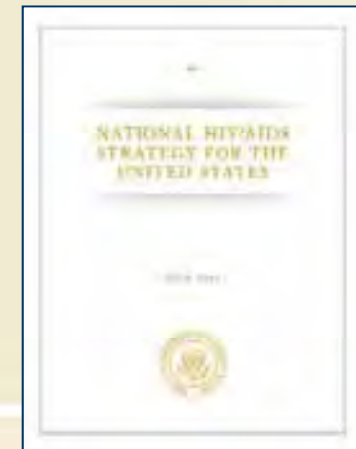
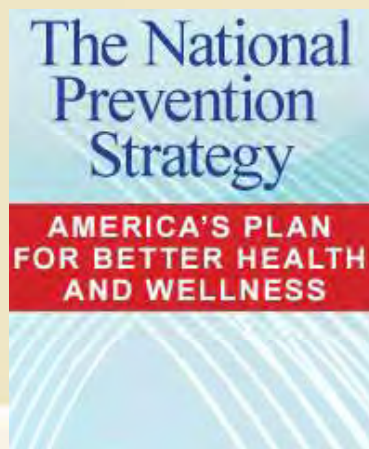


National Committee on Vital and Health Statistics (NCVHS)
September 22, 2011



National Initiatives for Eliminating Health Disparities

- Healthy People 2020
- *Let's Move!* & White House Task Force on Childhood Obesity
- The National HIV/AIDS Strategy
- HHS Strategic Action Plan to End the Tobacco Epidemic
- HHS Strategy to Reduce Disparities in Influenza Vaccination
- National Prevention Strategy
- National Partnership for Action to End Health Disparities (NPA)
- HHS Strategic Plan for Environmental Justice (coming soon!)



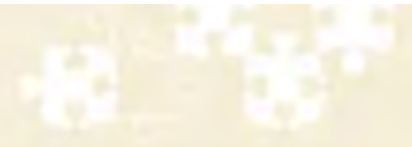


The National Prevention Strategy

America's Plan for Better Health and Wellness

- Called for by the Affordable Care Act
- Released on June 16, 2011
- Created by the National Prevention Council (NPC) charged with providing coordination and leadership on prevention efforts across the federal government and nation
- NPC chaired by the U.S. Surgeon General;
- NPC supported by 17 Federal department council members and 25 member non-federal advisory group
- OMH leads the NPC Health Disparities Workgroup





The National Prevention Strategy

America's Plan for Better Health and Wellness

- Provides recommendations and action items that public, private, nonprofit organizations and individuals can take to reduce preventable death, disease and disability in the U.S.

Overarching goal:

- Increase the number of Americans who are healthy at every stage of life.

Four Strategic Directions:

- Building Healthy and Safe Community Environments
- Expanding Quality Preventive Services in Both Clinical and Community Settings
- Empowering People to Make Healthy Choices
- Eliminating Health Disparities





The National Partnership for Action

The National Partnership for Action to End Health Disparities (NPA) aims to mobilize a nationwide, comprehensive, and community-driven approach to combating health disparities. The five goals of the NPA are:

1. **Awareness** - Increase awareness of health disparities, their impact on the nation, and the actions necessary to improve health outcomes.
2. **Leadership** - Strengthen and broaden leadership for addressing health disparities at all levels.
3. **Health System and Life Experience** - Improve health and healthcare outcomes for racial, ethnic, and underserved populations.
4. **Cultural and Linguistic Competency** - Improve cultural and linguistic competency and the diversity of the health-related workforce.
5. **Data, Research, and Evaluation** - Improve data availability, utilization, and diffusion of research and evaluation outcomes.



NPA Implementation Framework

STRATEGY

National Stakeholder Strategy

- Awareness
- Leadership
- Health Systems & Life Experience
- Cultural & Linguistic Competency
- Data, Research, and Evaluation

Plans for Action

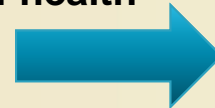
- FIHET Subcommittee Plans
- HHS Plan
- Regional Blueprints
- Tribal Blueprint
- LGBT Blueprint
- Disability Blueprint
- State Partnership Grants

Implementation Partners

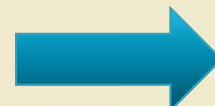
- FIHET
- RHECs
- States, Tribes, and Communities
- National Partners

SCOPE

Social determinants of health



Increasing leadership and public demand



Changing policies, procedures, and practices

SUCCESS

Successful implementation of goals, strategies, and actions

Increased leadership and public demand to address the social determinants of health in order to achieve a healthier nation

Improved policies, procedures, and practices of systems that affect social determinants of health

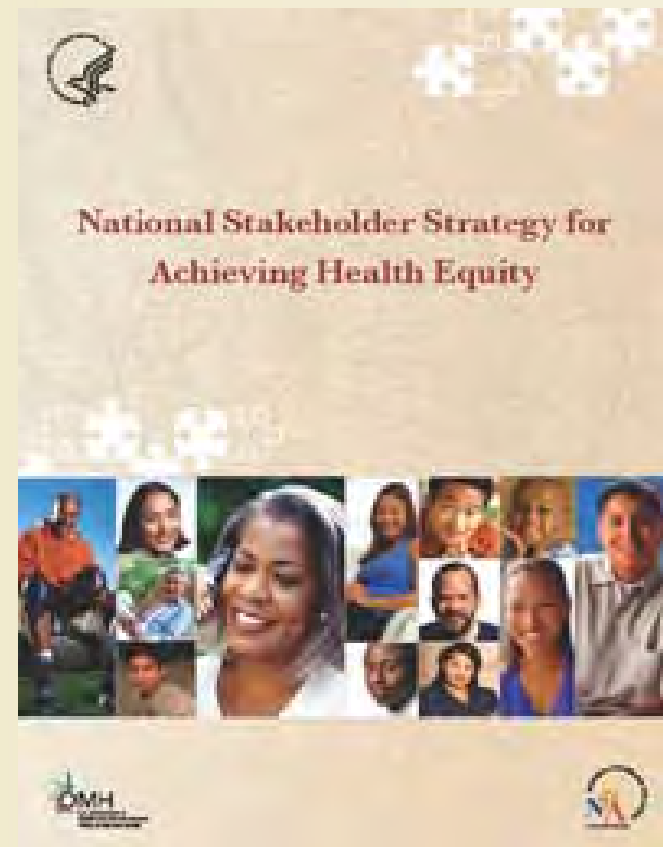
STRUCTURE

Implementation, Communications, and Evaluation

SUPPORT

National Stakeholder Strategy (NSS)

- Reflects the commitment of thousands individuals across the country from within the health sector and among other sectors, such as housing, education, environment and agriculture.
- Provides 20 specific strategies for reaching the 5 NPA goals.
- Guides stakeholders (federal, regional, tribal, state, and local) to adopt the most effective strategies for their communities.



HHS Action Plan to Reduce Racial and Ethnic Health Disparities

- A Department-wide response and complement to the NSS
- Overarching Secretarial priorities, goals and strategies HHS will take to reduce health disparities
- Builds on health disparity reduction provisions in the Affordable Care Act
- An HHS commitment to continuously assess the impact of all policies and programs on racial and ethnic health disparities.





Alignment of HHS Action Plan to NSS

Action Plan	National Stakeholder Strategy	Areas of Alignment
Secretarial Priorities	Strategies 1, 2, 6 – Health care agenda, partnerships and funding priorities	Making disparities a priority in agendas, partnerships & funding
Goal I – Coverage, Access & Quality	Strategy 8 – Access to Quality Healthcare Strategy 13 – Socio-economic Conditions	Reduce Disparities in Insurance Coverage and Access to Care
Goal II – Workforce	Strategy 14 – Workforce Strategy 15 – Diversity	Improve cultural competency and diversity of the healthcare workforce
Goal III – Population & Public Health	Strategy 5 – Capacity Building Strategy 9 – Children Strategy 11 – Health Communications	Increase awareness of disparities
Goal IV – Data & Research	Strategy 17 – Data Strategy 20 – Knowledge Transfer	Increase availability and diffusion of data and research on race & ethnicity
Goal V – Monitor & Evaluate	Strategy 18– Community-based Research Strategy 19 – Coordination of Research	Conduct research to inform disparities reduction initiatives



Overarching Secretarial Priorities of the HHS Action Plan

- I. Assess and heighten the impact of all HHS policies, programs, processes, and resource decisions**
 - Action steps include requiring program grantees to submit health disparity impact statements.
- II. Increase the availability, quality, and use of data**
 - Action steps include requiring Federally funded programs to collect data on race, ethnicity, primary language, gender, and disability status.
- III. Measure and incentivize better health care quality**
 - Action steps include setting measures and providing incentives to improve health care through CMS.
- IV. Monitor and evaluate the Department's progress**
 - Action steps include a biannual review and report on progress.



Agency Goals for the HHS Action Plan

- I. Transform Healthcare** (Coverage, Access and Quality)
- II. Strengthen the Nation's Health and Human Services Infrastructure & Workforce** (Workforce)
- III. Advance the Health, Safety, and Well Being of the American People** (Public and Population Health)
- IV. Advance Scientific Knowledge and Innovation** (Data and Research)
- V. Increase Efficiency, Transparency, and Accountability of HHS Programs** (Monitor and Evaluate)

Goal I - Transform Health Care

(Coverage, Access and Quality)

Goal I Strategies: Reduce disparities in health insurance coverage and access to quality care

➤ HHS Action Steps: Expand insurance coverage and access to care through Medicaid; Adoption of electronic health records; Health insurance exchanges; New service delivery sites; and Medical homes.

Affordable Care Act Provisions:

- Allows those with pre-existing conditions to gain and keep coverage
- Covers preventive services recommended by the U.S. Preventive Services Task Force (USPTF) in Medicare and private health plans
- Promotes coverage of preventive services recommended by the USPTF in Medicaid



Goal I - HHS Health IT Strategies

Federal Strategic Plan to Reduce Health IT Disparities : Developed under the leadership of the Office of the National Coordinator for Health IT (ONC) and OMH, the plan includes:

- Adoption of Electronic Health Records (EHRs) in underserved communities of color
- Supports new uses of health IT in areas of research and application, public and population health
- Protects confidentiality, integrity, and availability of health information
- Engages individuals with health IT through consumer health IT initiatives
- Posted for public comment <http://www.healthit.gov/buzz-blog/from-the-onc-desk/federal-strategic-plan-disparities/>





Goal I - HHS Health IT Initiatives

Houston EHR Donation Program:

- Partners: National Health IT Collaborative, Quest Diagnostics/MedPlus
- Action: Donated over 75 EHR licenses, including equipment and training

Innovations in Diabetes Care- Demonstrating the Impact of mHealth:

- Partners: AT&T, American Association of Diabetes Educators, Baylor Health System
- Action: Offered evidence-based diabetes self-management education to older adults within underserved communities via smartphone- skype

Multi-State EHR Education and Adoption Initiative:

- Partners: American Health Information Management Association, North Shore Medical Labs/Nortec
- Action: Offered over 100 EHR licenses, equipment, and training services to healthcare providers in AL, MS, and NC in underserved communities



Goal II - Strengthen the Nation's Health and Human Services Workforce (Workforce)

Goal II Strategies:

- Increase the ability of health professions and the health care system to identify and address racial & ethnic health disparities
- Increase the diversity of the healthcare workforce and the use of community health workers, such as promotoras.
- HHS Action Steps: Pipeline program for recruiting undergraduates from underserved communities for public health and biomedical sciences careers; Promote health care interpreting and translation; and increase use of promotoras.

Affordable Care Act Provisions:

- Sec. 5101 – National Health Care Workforce Commission
- Sec. 5307 – Model Curricula for Cultural Competency and Public Health





Goal II - HHS Workforce Initiatives

Increase Use of Promotoras:

- launched the Promotores de Salud Initiative and National Steering Committee (May 2011)
- Interagency Agreement between the USDA and OMH to develop national training curricula and materials for use by Promotores

Enhance the National Standards for Culturally and Linguistically Appropriate Services in Health Care (CLAS) Initiative:

- Released OMH cultural competency website portal www.thinkculturalhealth.hhs.gov to support organizations as the national standards for CLAS are updated (July 2011)

Advancement of Translation Services:

- The Certification Commission for Healthcare Interpreters created and released educational & outreach materials for community colleges, academic institutions, and healthcare providers (August 2011)



Goal III - Advance the Health, Safety & Well-Being of the American People (Public and Population Health)

Goal III Strategies: Increase the availability and effectiveness of community-based programs and policies designed to improve the quality of life among racial and ethnic minorities.

- HHS Action Steps: Implement Community Transformation Grants; and targeted efforts to achieve improvements in cardiovascular disease, childhood obesity, tobacco-related diseases, maternal and child health, and flu and asthma.

Affordable Care Act Provisions:

Sec. 4201 – Community Transformation Grants



Goal III - HHS Public and Population Health Initiatives

Build Community Capacity:

- Announced \$100 million funding opportunity for the Community Transformation Grants initiative (May 2011)
- Supports implementing evidence-based policy, environmental, programmatic, and infrastructure changes

Cardiovascular Disease Prevention:

- Launched the HHS-wide Million Hearts Initiative (September 2011)
- Supports community and clinical prevention interventions to reduce cardiovascular disease among all Americans, including minority populations at greater risk

Tobacco Prevention:

- Awarded \$2 M/yr x 3 yr grants for community-based youth tobacco prevention and cessation in four communities (August 2011)

Goal IV – Advance Scientific Knowledge and Innovation (Data and Research)

Goal IV Strategies:

- Increase the availability and quality of data collected and reported
- Conduct and support research to inform disparities reduction initiatives
 - HHS Action Steps: Implement a new health data collection and analysis strategy, and increase patient-centered outcomes research.

Affordable Care Act Provisions:

- Sec. 1946 – Evaluating Data Collection Approaches
- Sec. 3101 – Data Collection, Analysis, Quality, Availability, Reporting and Dissemination
- Section 4302 – Understanding Health Disparities Data Collection and Analysis

Goal IV –HHS Comparative Effective Research Initiatives

OMH Patient Centered Care Collaboration:

- Responds to Federal Coordinating Committee on CER investment in dissemination, adoption, and use of evidence informed CER among racial and ethnic minority patients, providers, health care and community health systems
- Addresses disparities in cardiovascular disease, muscular skeletal diseases, and diabetes using IOM recommended interventions; clinical and community-based multi-level interventions
- Engages health care and community partners, community health systems organizations, patients, and providers in identifying, promoting, and disseminating CER to racial and ethnic minorities in the targeted geographic area
- \$2 Million to OMH for PCOR Adoption and Dissemination Initiative





Goal IV – HHS Section 4302 Requirements

- Requires HHS to establish data collection standards for five specific demographic: Race, Ethnicity, Sex, Primary Language, and Disability Status
- Standards must be developed within 2 years, and in compliance with OMB standards
- Calls for the standards to be used in data collection and reporting by any federally conducted or supported “health care or public health program, activity, or survey”
- Instructs that data be used for analyses and results be reported.
- Provides authority to require additional demographic data be collected on all Departmental surveys and to develop appropriate data collection standards



Implementing Section 4302

- Multi-step development process started with a focus on population health survey data; clinical and administrative data focus is currently being planned.
- HHS sought public comment on proposed data collection standards for use in all population health surveys (June 29- Aug. 1, 2011).
- Proposed strategy for LGBT data collections was also released June 29, 2011. HHS is developing a progression plan for LGBT that will include establishing a disparities baseline, tracking, and data collection process.
- OMH held three stakeholder listening sessions to gather feedback on proposed standards. Groups recommended obtaining more granularity, especially, for race, ethnicity, and primary language.



Section 4302 Public Comments

A total of 466 public comments were received:

- Race and ethnicity: Expand categories to include Hispanic/Latino subgroup, multiracial category, and/or country of origin
- Primary language: Distinguish between spoken language and preferred language used in medical settings
- Gender/LGBT: Two options of male/female should be expanded to reflect the correct categories of LGBT
- Disability: Expand category to ensure all types of disabilities are captured; such as intellectual, developmental, speech, and others
- New categories: Socioeconomic status, age group, country of birth, year of arrival to the U.S., citizenship status, and geographic region
- Other issues: Option “other, specify” should be added to all categories



Proposed Standards in line with OMB

Proposed Data Standards for Ethnicity:

- Hispanic or Latino: (Mexican, Mexican American or Chicano), Puerto Rican, Cuban, (another Hispanic, Latino or Spanish origin)

Proposed Data Standards for Race:

- Race: White, Black or African American, American Indian or Alaska Native
- Asian: Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, Other Asian
- Native Hawaiian or Other Pacific Islander: Native Hawaiian, Guamanian or Chamorro, Samoan, Other Pacific Islander





HHS ACA Section 4302 Working Group

- Tasked with providing recommendations for data standards and additional demographic data
- Comprised of staff experts from across HHS, in collaboration with the HHS Data Council, Office of the National Coordinator for Health IT, Office of Management and Budget, and U.S. Census Bureau
- Will review public comments and issue final rule on proposed data collection standards in Fall 2011
- Within 18 months of adoption of the data collection standards, will provide plans for analyzing and reporting on data collected using the new standards



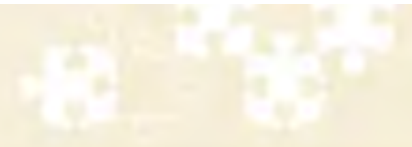
Goal V- Increase Efficiency, Transparency, and Accountability of HHS Programs (Monitor and Evaluate)

Goal V Strategies:

- Strengthen the HHS infrastructure by establishing six new Offices of Minority Health
- Streamline grants administration for health disparities funding
- Monitor and evaluate implementation of the HHS Strategic Action Plan
 - HHS Actions Steps: Ensure assessments of policies and programs on health disparities become part of all HHS decision-making; and evaluations measure progress toward reducing health disparities.

Affordable Care Act Provisions:

Sec. 10334 – Establish Federal Offices of Minority Health and National Center on Minority Health and Health Disparity



Goal V- HHS Monitoring and Evaluation Initiatives

Implementing the HHS Action Plan:

- Key HHS offices, along with the new agency offices of minority health/health equity, who serve on the HHS Health Disparities Council (HDC) are responsible for implementing the HHS Action Plan
- HDC will review agency progress and report results to the Secretary on a biannual basis (every 6 months)
- April 8, 2011 through October 8, 2011 constitutes the first 6-month period
- HHS will compile an annual report to congress describing progress on health disparities elimination activities



HHS Action Plan and the Affordable Care Act

- ▶ Secretary Sebelius called for an HHS Response to NSS that included health equity provisions from the Affordable Care Act.
- ▶ First ever HHS Action Plan to reduce health disparities - builds on health disparity reduction provisions in the Affordable Care Act.
- ▶ These plans and the new OMHs have elevated HHS' commitment to reducing health disparities.

