

Governing for Health and Healthcare Equity

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Outline

- What shapes my perspective
- Review of terminology used
- Challenges in Texas
- Hospital's roles assuring health and healthcare equity
- A framework for governance leaders

Brief Review of Terms

- Health disparities
- Health equity
- Health care equity
- Health care inequities
- Social determinants of health
- Health drivers

(These ≠ DEI)

Health Disparities

- [Healthy People 2020](#): “a particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage”
- Adversely affect groups who have systematically experienced greater obstacles to health based on race, ethnicity, religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disabilities.



Health Equity

“Health equity means that everyone has a **fair and just opportunity** to be as healthy as possible. This requires **removing obstacles** to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.”

Health Care Equity

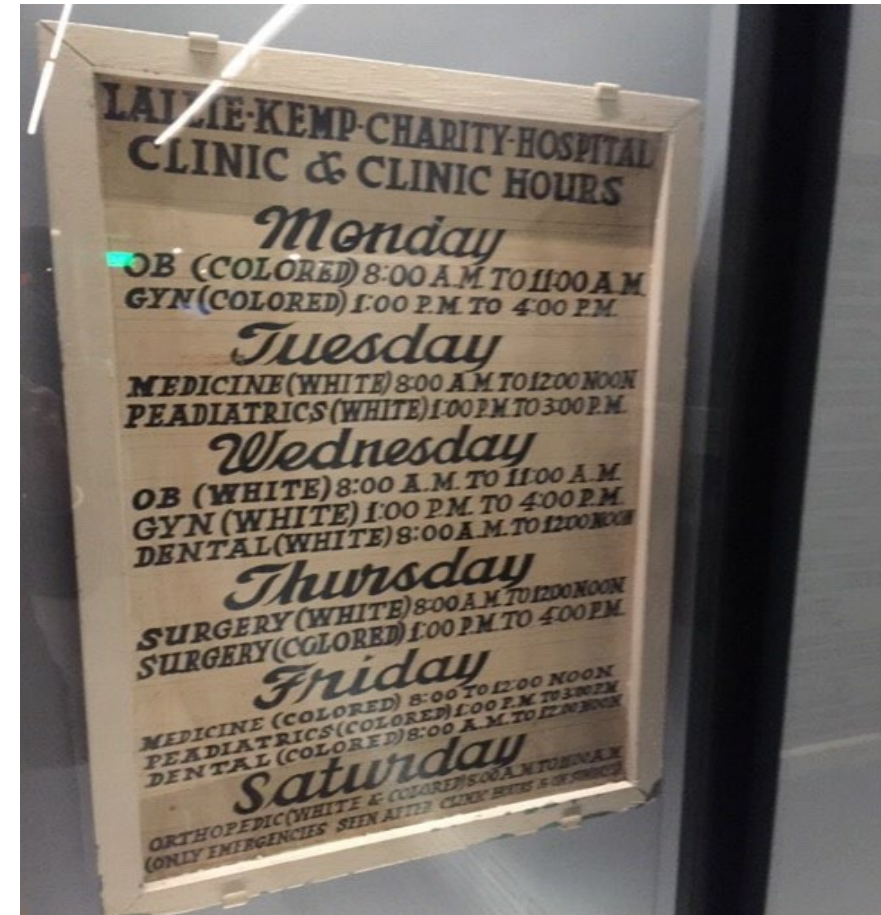
Care does not vary due to individual characteristics such as gender, ethnicity, geography, and socioeconomic status.

Health Care Inequities

Avoidable, systematic health care differences adversely affecting economically or socially disadvantaged groups

Adapted from:

What Is Health Equity? And What Difference Does a Definition Make? RWJF, 2017



Social Determinants of Health

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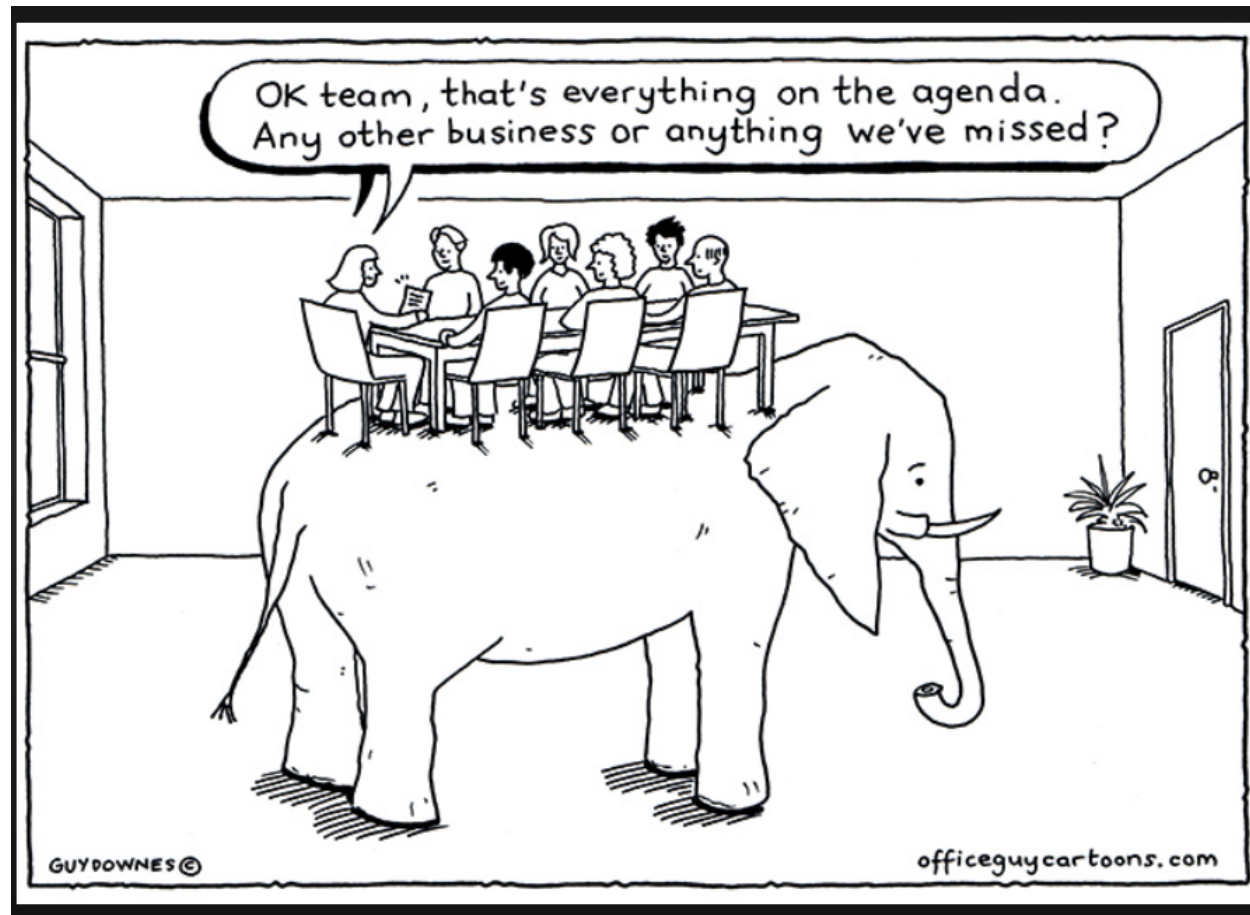


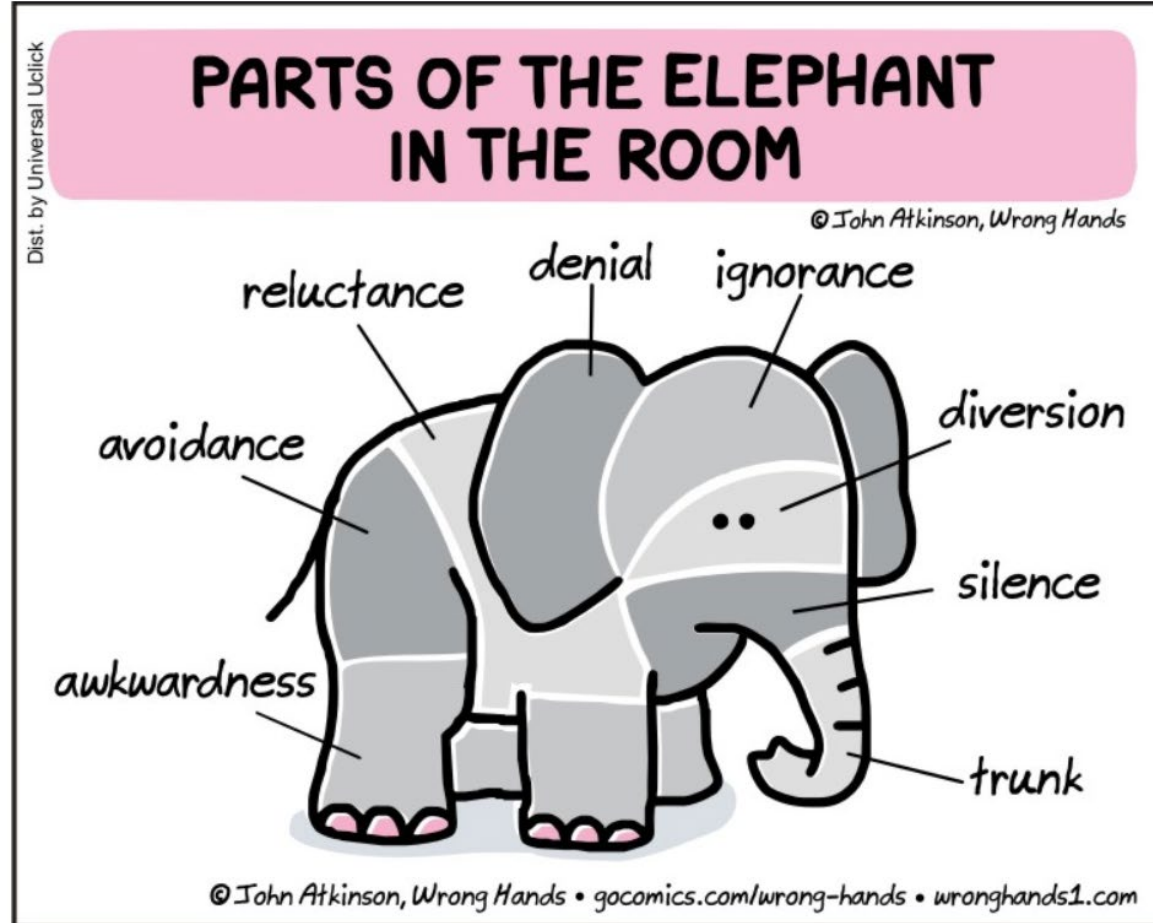
Health Drivers

“conditions in the places where people live, learn, work, and play that affect a wide range of health risks and outcomes.” They include everything from educational support for at-risk kids, safe and affordable housing, skills training for jobs, food security for families, and much more.

<https://treatthecost.com/drivers-of-health/>

Communicating for Understanding, Consensus and Strategy





Texas-sized Challenges to Health Care Equity

- Uninsurance rate
- Access to care
- Health care costs
- Workforce shortages
- Low investment in public health
- Collision of health policy and politics



Texas-sized Challenges to Health Care Equity

- Demographics
- Limited actionable data
- Language Access
- Limited broadband access
- Climate
- Leadership

Texas Organization of Rural and Community Hospital Priorities

State Legislative Priorities

- **Medicaid Payments to Rural Hospitals** – Realize the intent of state statute (SB170) that requires cost-based reimbursement to rural hospitals in Medicaid (traditional and managed care, inpatient and outpatient)
- **Obstetrics** – Increase targeted Medicaid rate enhancement for deliveries at rural hospitals
- **Workforce** – Increase appropriation and annual payment amounts for health care professional loan repayment programs based on health professional shortage area score
- **Behavioral Health** – Increase state funding to ensure timely and appropriate access to inpatient and outpatient, community-based services and supports for Texans with a behavioral health diagnosis
- **Trauma** – Maintain consistent funding for the state's trauma care network and allow flexibility for low volume (level 4) centers specific to trauma coordinator staffing
- **Telehealth** – Support the implementation of Medicaid telehealth legislation (HB4) from prior session
- **Broadband** – Ensure new funding and office are making progress in the most geographically isolated areas of Texas

TORCH is the voice and principle advocate for rural and community hospitals/clinics in Texas and provides leadership in addressing the special needs of those facilities in the communities they serve.

Texas Hospitals' 2023 Legislative Priorities

- State budget
- Workforce
- Financial sustainability
- Health care coverage
- Behavioral health access
- Public health and equity
- Patient Access to care
- Liability

For Healthcare Equity - Think Quality

- Safe
- Timely
- Efficient
- Effective
- Person-centered
- Equitable

(All of these are components of quality)

And transparent, trustworthy, value-promoting, accountable, accessible, culturally and linguistically appropriate

JCAHO Health Care Equity

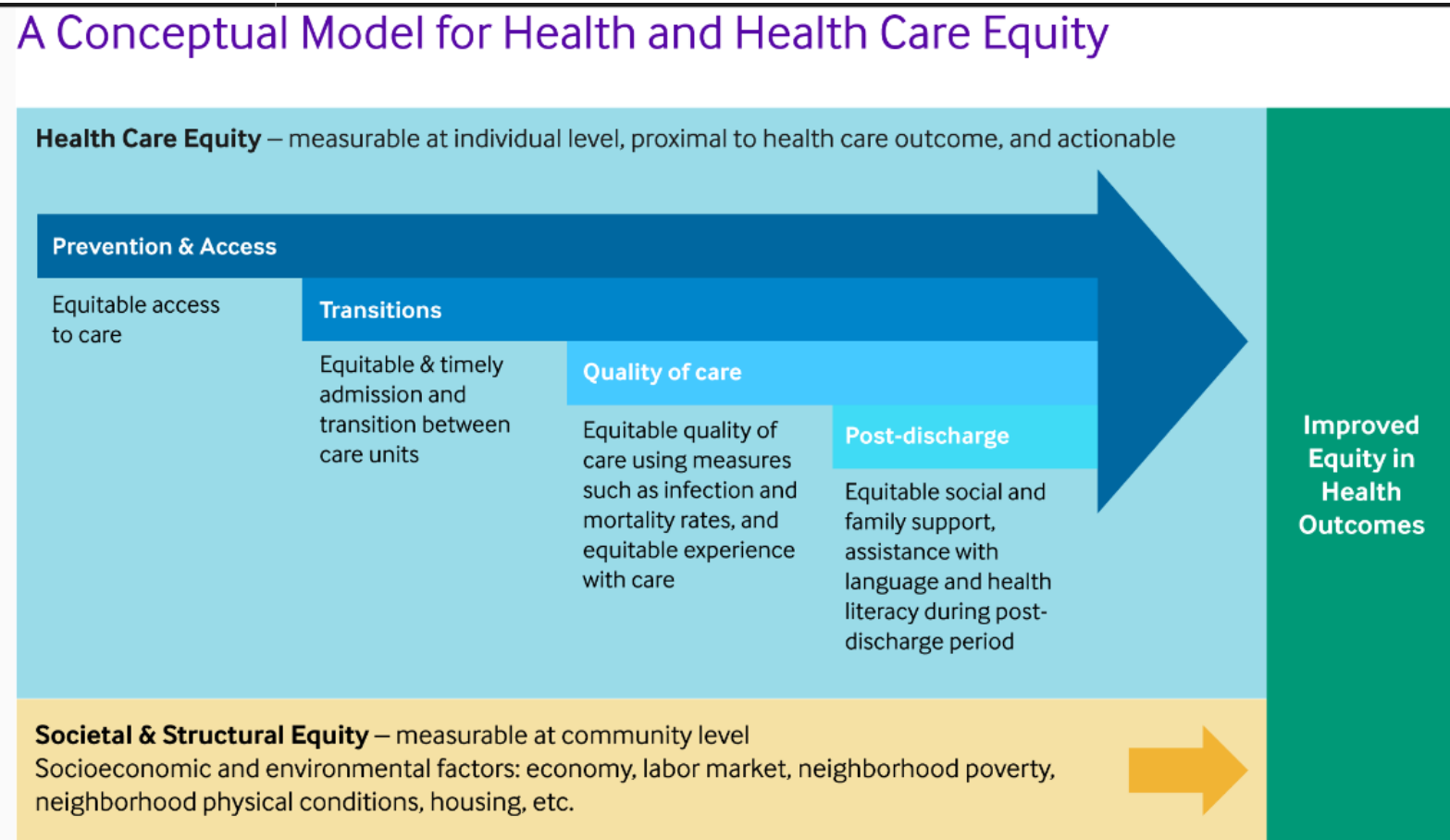
“And although health care equity is often viewed through a social justice lens, we understand it to be first and foremost a quality-of-care problem. Which means to achieve sustainable improvement we need to approach health care equity in the same way we approach other crucial patient safety priorities – by understanding the root causes and implementing targeted standards of care.”

<https://www.jointcommission.org/our-priorities/health-care-equity/>

Health Care Equity Standards Compliance

- Identify an individual to lead activities to improve health care equity
- Assess the patient's health-related social needs
- Analyze quality and safety data to identify disparities
- Develop an action plan to improve health care equity
- Act when the organization does not meet its goals
- Inform key stakeholders about progress to improve health care equity









Leadership, collaboration, data collection, provision of care, performance improvement



Your Texas-Sized Opportunities

- Health care coverage expansion advocacy
- Language access
- Vaccine advocacy
- Primary care support, expansion
- New medical schools
- Education and workforce development
- Broadband for telemedicine +
- Emergency preparedness infrastructure
- Multiple frameworks for accurate data collection exist
- Community health assessments and improvement plans
- Strong economy

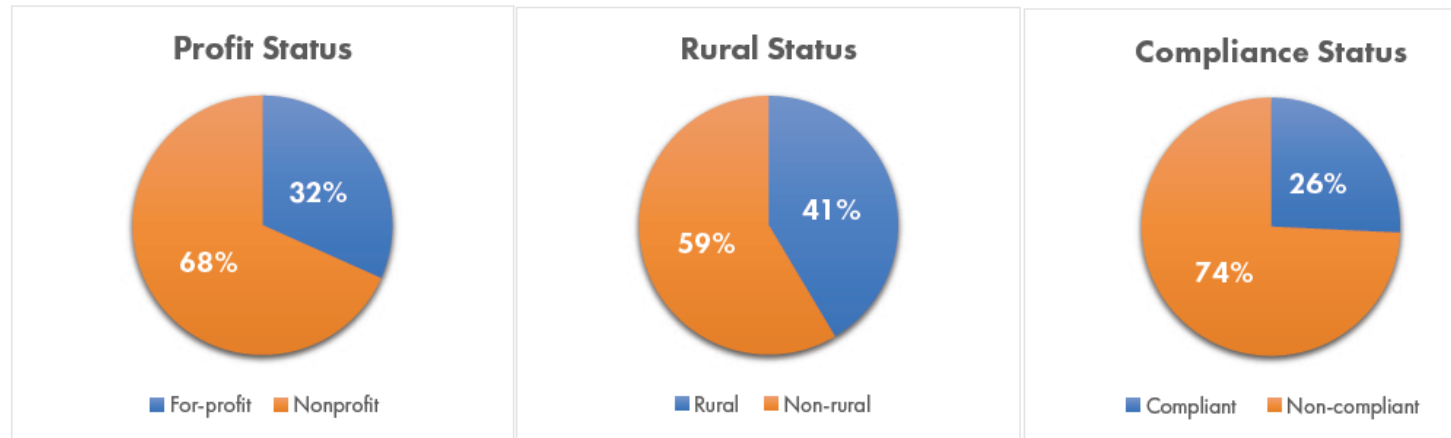
Community Benefit Requirement TX

Compare	State	Community Benefit Requirement 	Minimum Community Benefit Requirement 	Community Benefit Reporting Requirement 	Community Health Needs Assessment 	Community Benefits Plan/Implementation Strategy 	Financial Assistance Policy 	Financial Assistance Policy Dissemination 	Limitations on Charges, Billing, and Collections 
	Filter:	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<https://www.hilltopinstitute.org/our-work/hospital-community-benefit/hcbp-state-comparison/>

Hospital Community Benefit Compliance

Figure 1
Composition of Texas Hospitals



Variable	Number of Hospitals	Percent of Hospitals
For-profit	117	31.7%
Nonprofit	252	68.3%
Rural	153	41.5%
Non-rural	216	58.5%
Compliant	95	25.7%

Note. Produced using data from personal communication, Baker Institute at Rice University, March 2022, [Turquoise Health](#), March 2022, and authors' calculations.

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- **Invest in community health, wealth and well-being**

Become and Anchor Institution

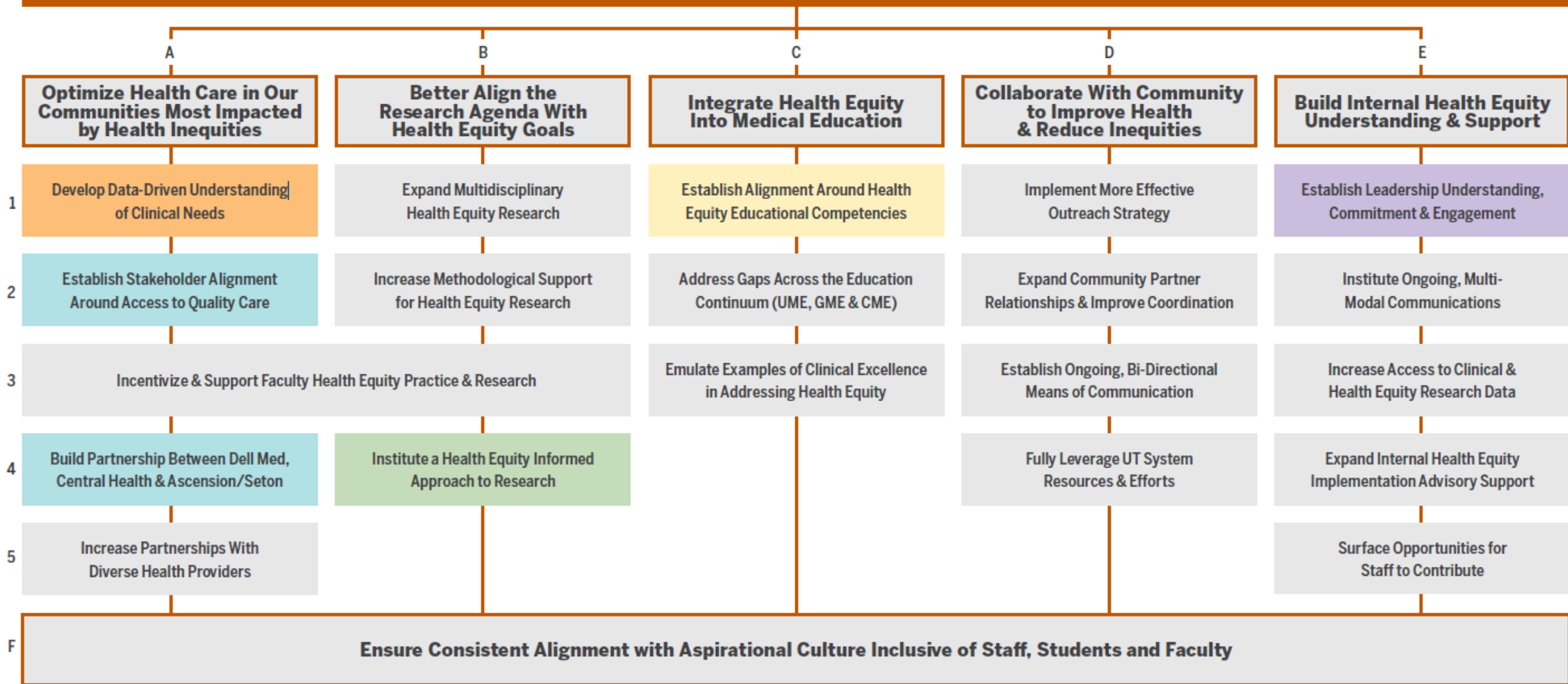
EQUITY

THE HEALTHCARE ANCHOR NETWORK (HAN) CATALYZES HEALTH SYSTEMS TO LEVERAGE THEIR HIRING, PURCHASING, INVESTING, AND OTHER KEY ASSETS TO BUILD INCLUSIVE LOCAL ECONOMIES TO ADDRESS ECONOMIC AND RACIAL INEQUITIES IN COMMUNITY CONDITIONS THAT CREATE POOR HEALTH.

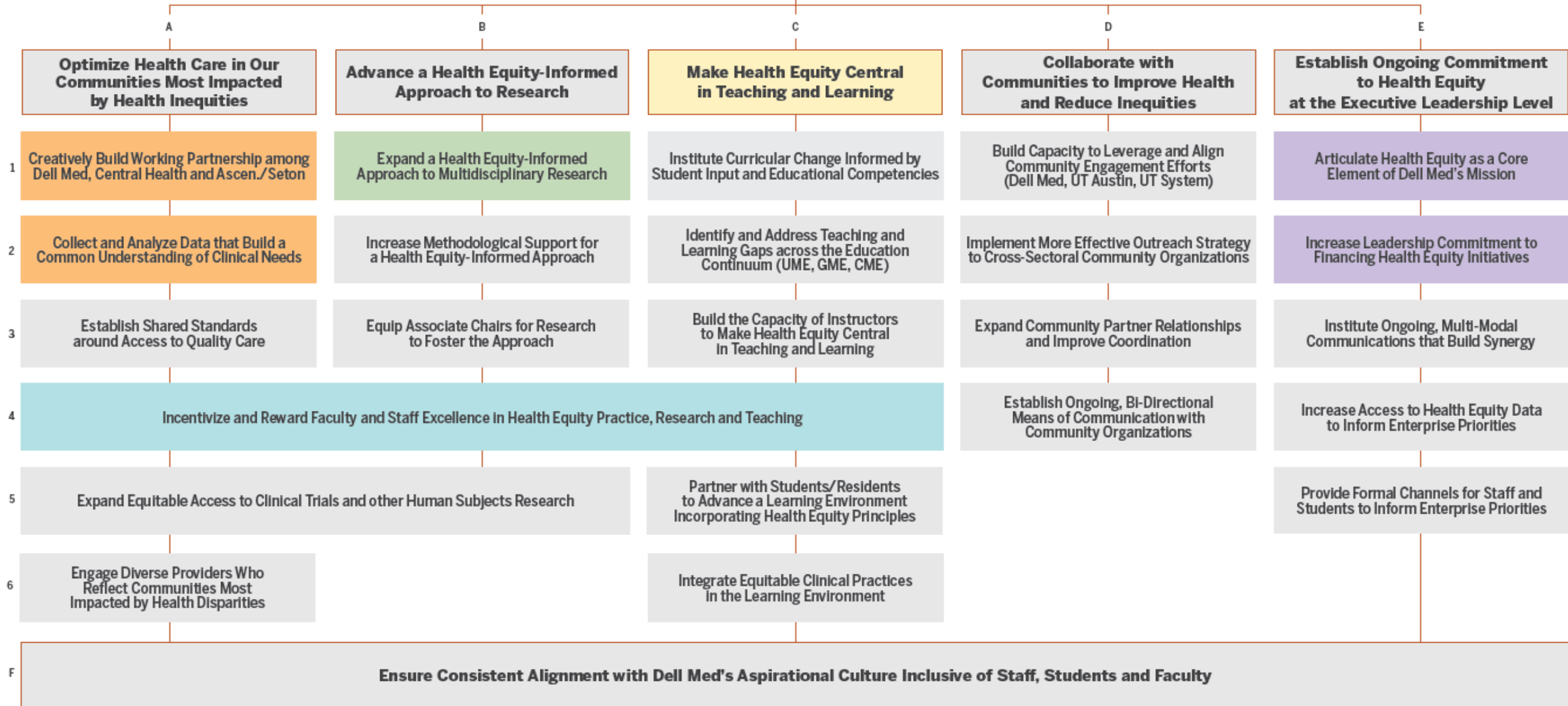
Equity ↔ Quality

- JCAHO
- Institute for Healthcare Improvement
- American Hospital Association Health Equity Roadmap

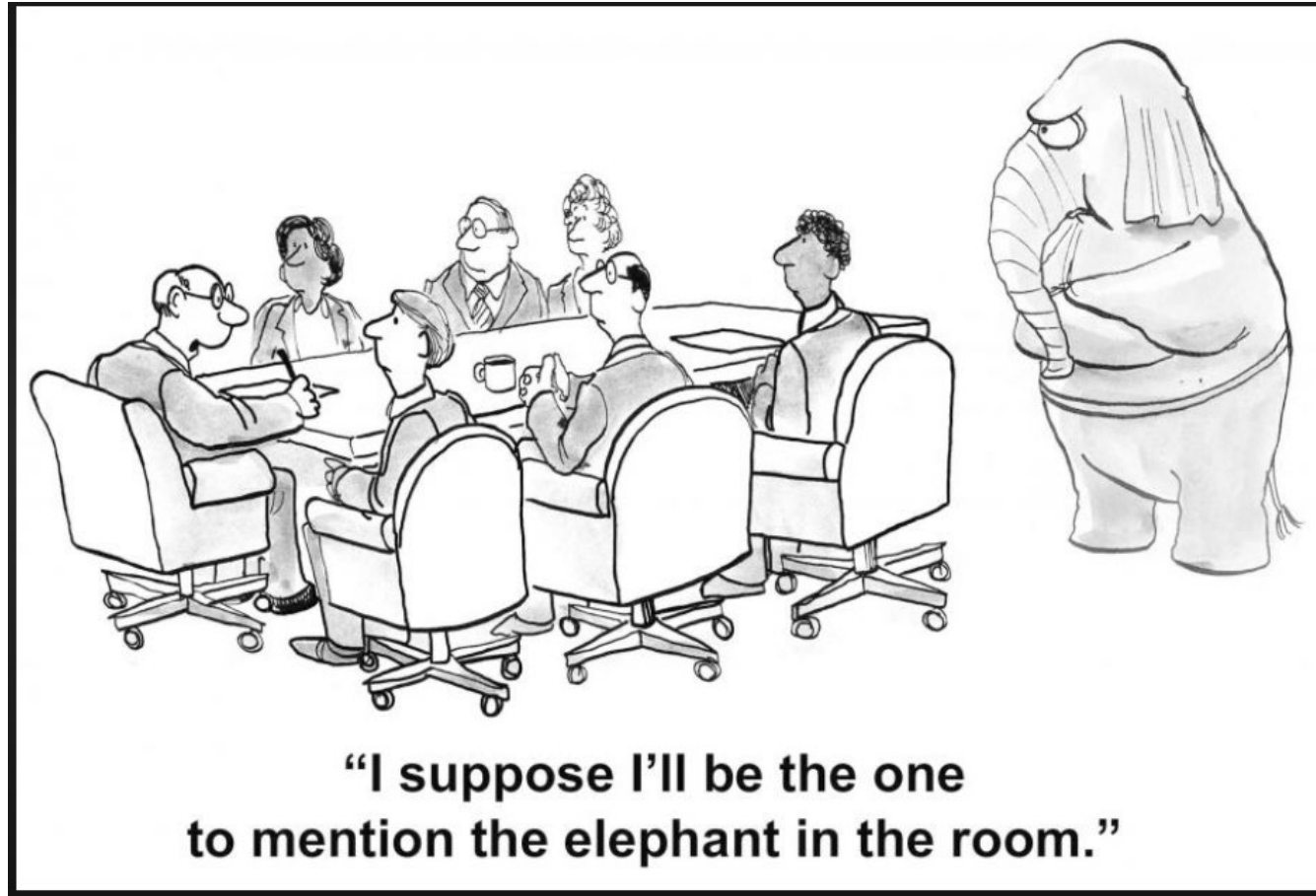
**DEMONSTRABLY & SUSTAINABLY EMBED HEALTH EQUITY AS AN OPERATING PRINCIPLE
IN ALL AREAS OF DELL MEDICAL SCHOOL TO ENSURE ACHIEVEMENT OF ITS MISSION**

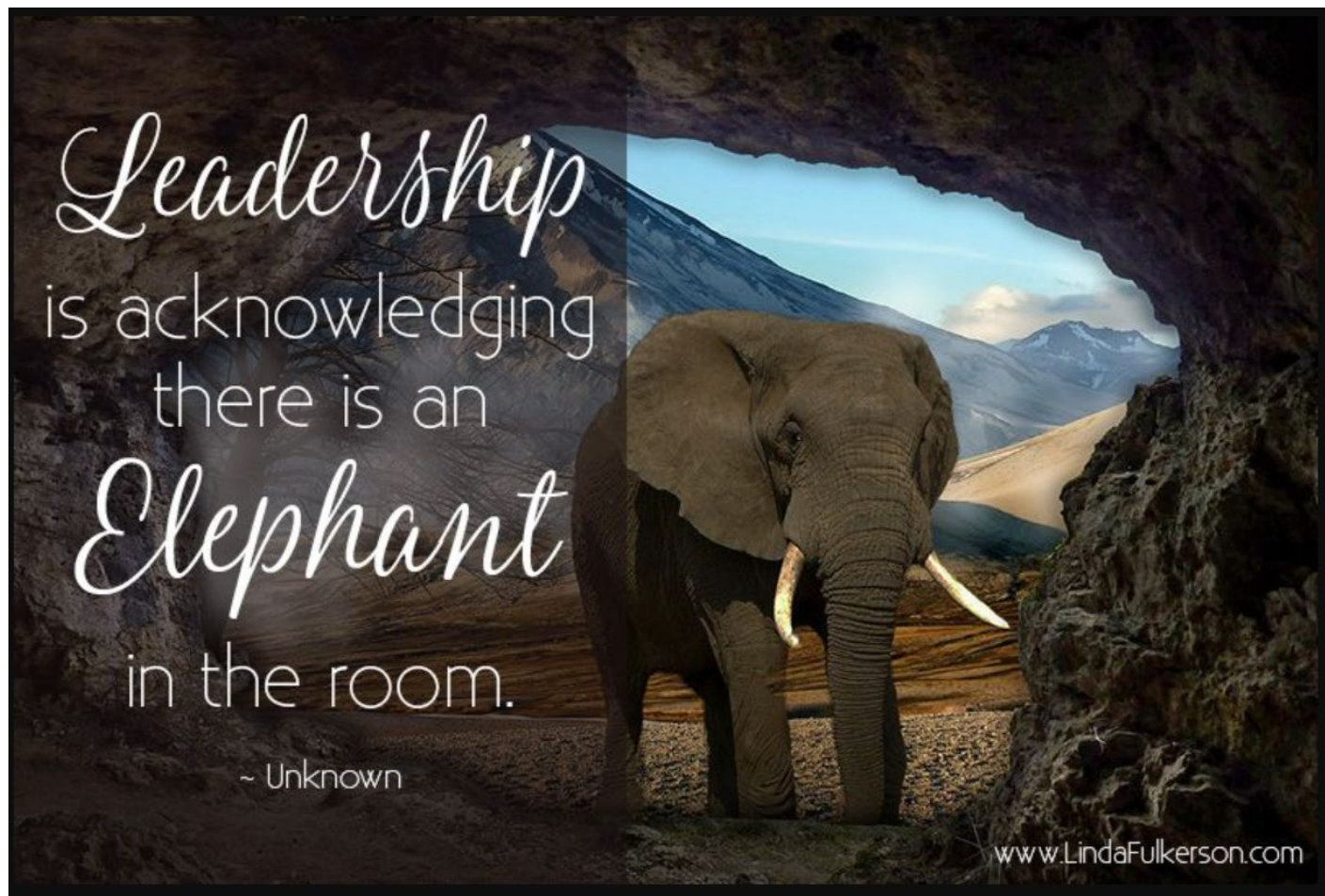


**DEMONSTRABLY & SUSTAINABLY PRIORITIZE HEALTH EQUITY AS AN OPERATING PRINCIPLE
IN ALL AREAS OF DELL MEDICAL SCHOOL**



Communicating for Understanding, Consensus and Strategy







THANK YOU

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