



# **Health Reform: A Foundation for Eliminating Health Disparities and Creating Health Equity**

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Resource Allocation

Systems

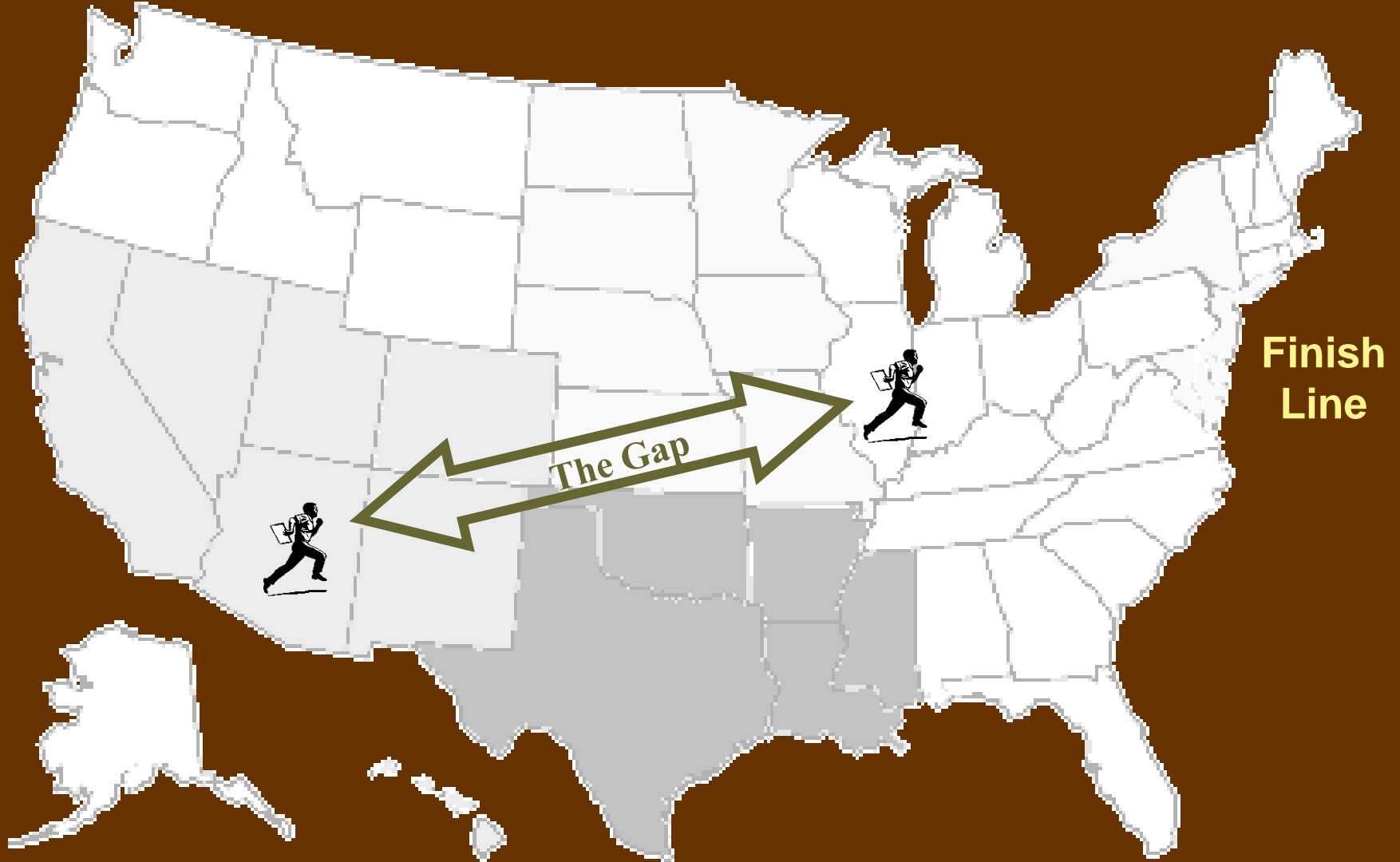
Research Evaluation

Advocacy

Policy

Workforce

Services



# What Are Health Disparities?

- The disproportionate burden of disease, disability and death among a particular population or group when compared to the proportion of their population.
- A chain of events signified by a difference in (1) environment; (2) access to, utilization of, and quality of care; (3) health status; or (4) a particular health outcome that deserves scrutiny.

# What is Health Equity?

- The ability of marginalized groups to achieve optimal health (like those with access to social determinants) is referred to as health equity. (Adapted from Promoting Health Equity: A Resource to Help Communities Address Social Determinants of Health, Centers for Disease Control & Prevention).

Source: Ohio Department of Health

# **The Patient Protection and Affordable Care Act Key Provisions for Health Disparities**

## **Improves Data Collection**

By no later than 2010, the new health reform law will require that data be collected and reported by race, ethnicity, sex, and primary language for participants at the smallest geographic level possible for all federally funded health programs.

# **The Patient Protection and Affordable Care Act Key Provisions for Health Disparities**

## **Expands the Role of the Office of Minority Health**

- I. Re-designates National Center on Minority Health and Health Disparities as the National Institute on Minority Health and Health Disparities

II. Gives official power to the Office of Minority Health, requiring the office to report directly to the Secretary of Health and Human Services and authorizing a Deputy Assistant Secretary for Minority Health. Funding is provided from 2011-2016.

### III. Creates permanent Offices of Minority Health within the following agencies:

- CDC
- HRSA
- SAMHSA
- AHRQ
- FDA
- CMS

# The Patient Protection and Affordable Care Act Key Provisions for Health Disparities

## Promotes Language Access

- Includes provisions pertaining to language services in the health exchanges:
  - Uniform summary of coverage documents
  - Culturally and linguistically appropriate
  - Grants to train providers in culturally appropriate care and services

# The Patient Protection and Affordable Care Act Key Provisions for Health Disparities

## Increases Workforce Diversity

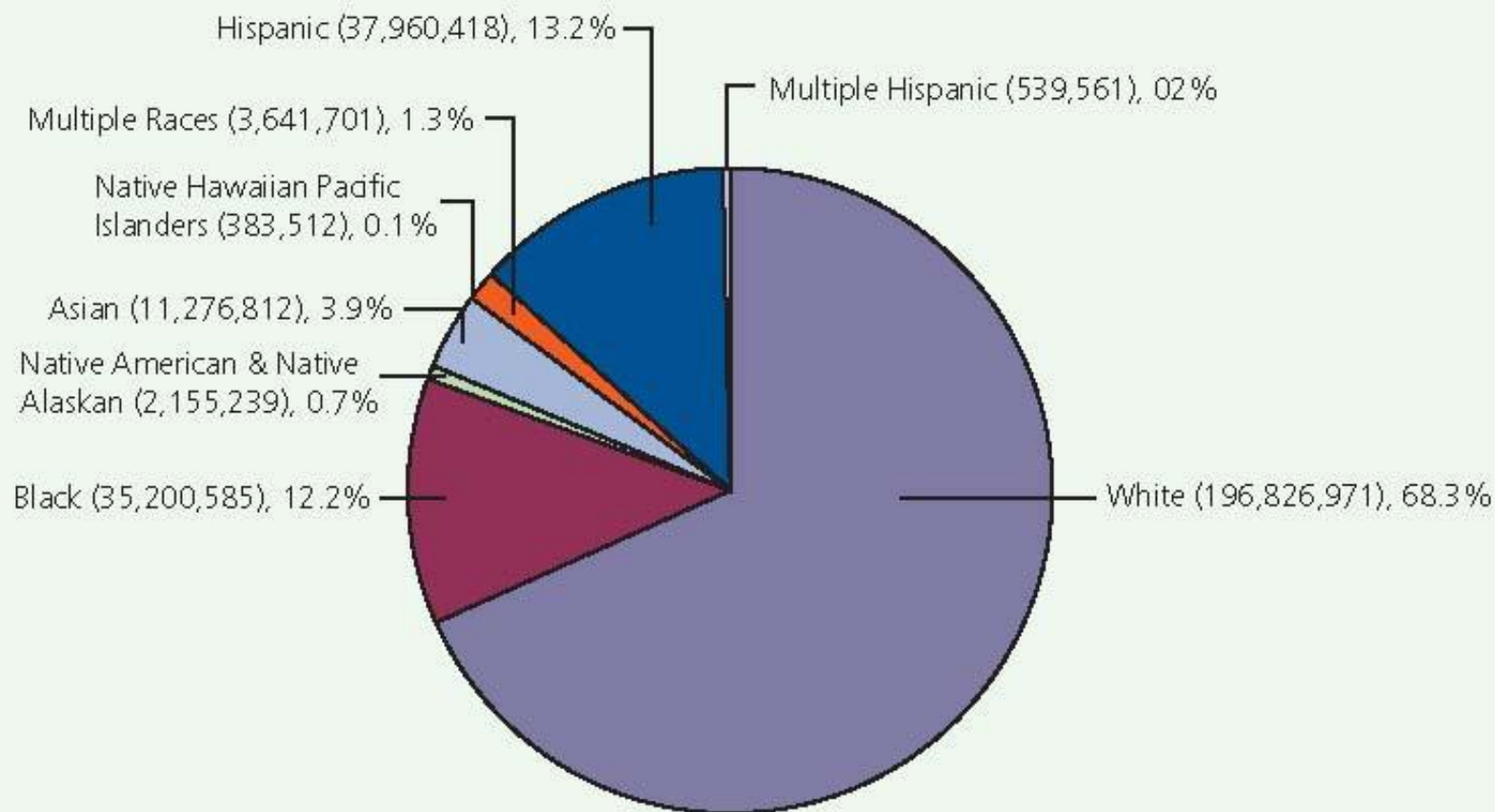
Main Approaches:

- I. Create a diverse workforce through scholarships, grants and loan repayment programs for health care professionals
- II. Provide continuing education support for health professionals who serve minority and underserved populations.

III. Appropriates grants to improve health care services, increase retention, and increase the representation of minority faculty members and health professionals.

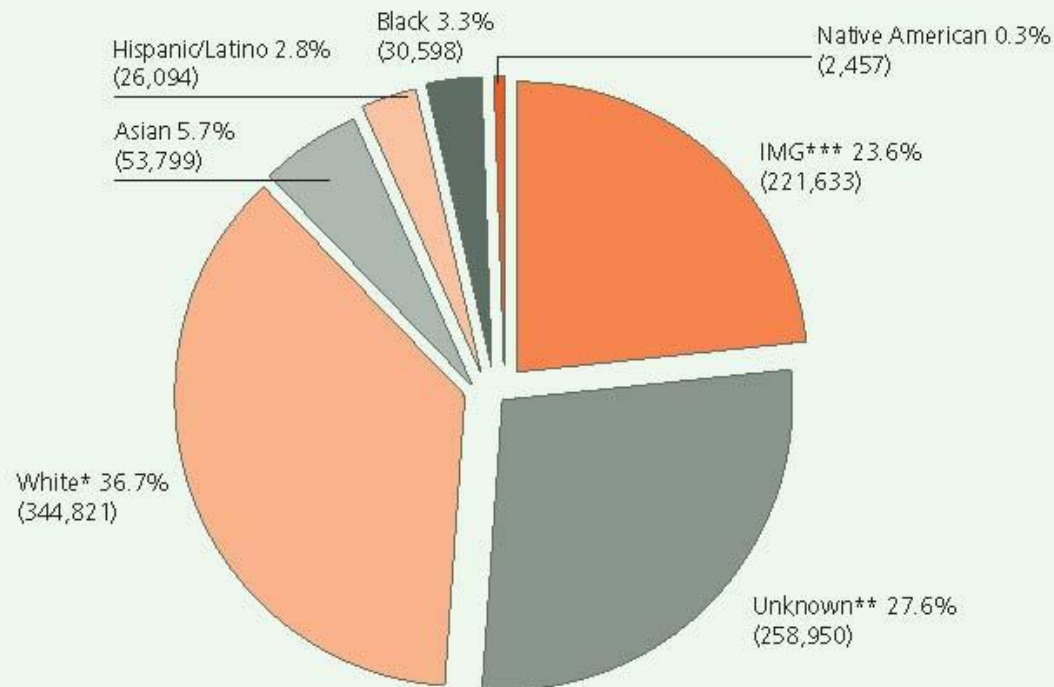
IV. Establish a National Health Care Workforce Commission by no later than September 30, 2010.

## Estimated Population by Race/Ethnicity, 2002



Data Source: Population Division, U.S. Census Bureau: Table 3: Annual Estimates of the Population by Sex, Race and Hispanic or Latino Origin for the United States: April 1, 2000 to July 1, 2005 (NCEST2005-03).  
Release Date: May 10, 2006.

## U.S. Physicians by Race and Ethnicity, 2004



Note: Asian includes Chinese, Filipino, Korean, Japanese, Vietnamese, Indian/Pakistani, Other Asian; Hispanic/Latino includes Mexican American, C'wealth Puerto Rican, Mainland Puerto Rican, Other Hispanic; Native American includes American Indian/Alaska Native, and as of 1996, Native Hawaiians.

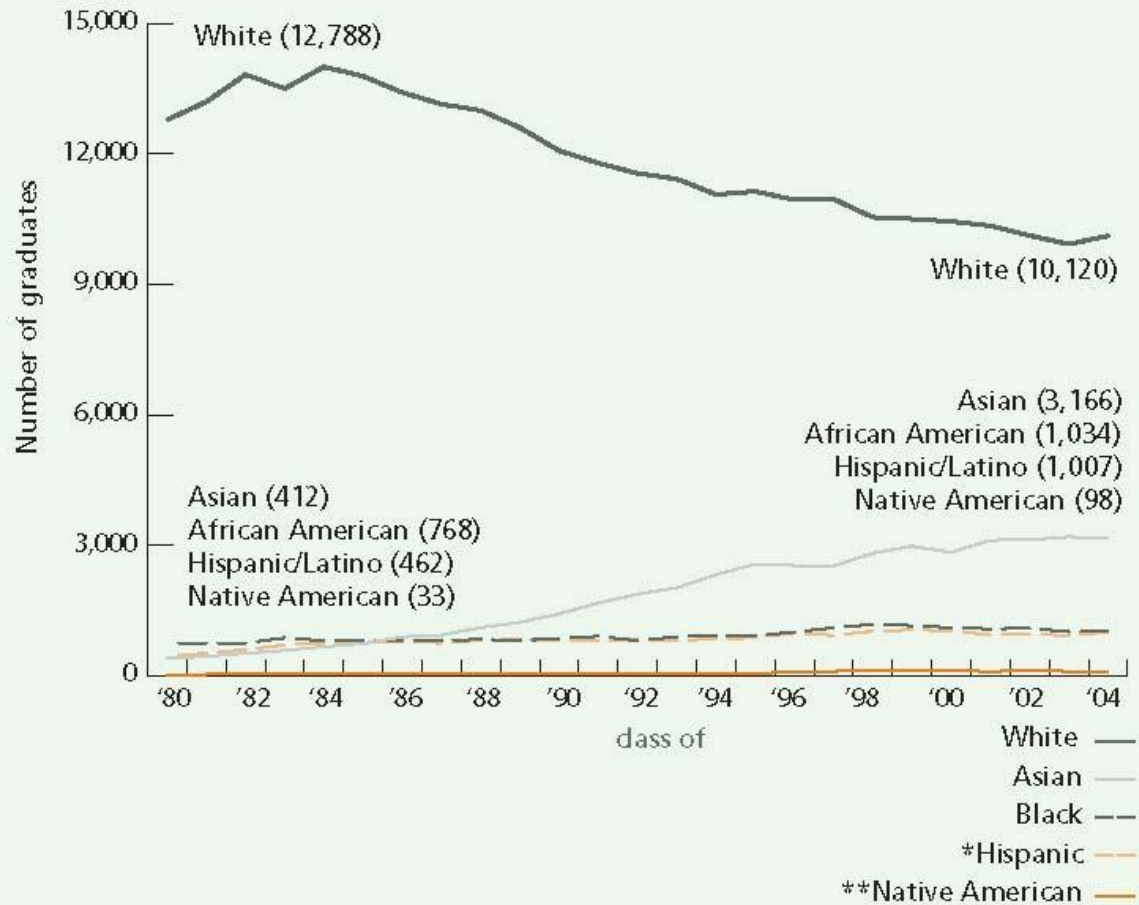
\*These data mainly represent White physicians who graduated from U.S. allopathic medical schools from 1978-2004.

\*\*Includes physicians who graduated from Canadian medical schools, doctors of osteopathic medicine, and most likely Whites who graduated prior to 1978.

Data Source: AAMC Data Warehouse: Minority Physician Database, Applicant-Matriculant File, and AMA Physician Masterfile, as of March 16, 2006.

\*\*\*International Medical Graduates.

## Medical School Graduates by Race and Ethnicity, 1980-2004



\* Hispanic includes Mexican-American, Puerto Rican, and Other Hispanic. \*\* From 1997 forward, includes Native American/Alaska Native and Native Hawaiian. Prior to 1997, includes only Native American and Alaska Native.  
Data Source: AAMC Data Warehouse: Student\_IND, as of 1/05/2005.

# The Patient Protection and Affordable Care Act Key Provisions for Health Disparities

## Supports Community Health Workers

- I. Provides additional support to community health workers through the appropriation of grants to division of state, a public health department, a free health clinic, a hospital, or a federally qualified health center that hosts community health workers and promotes positive behaviors and outcomes in medically underserved communities, especially communities of color.

II. Provides funding for the training, supervision, and support of community health workers for fiscal years 2010 through 2014

**Unity 2010 Conference**  
**“Community Health Workers -**  
**The Heart of It All”**

**June 7-10, 2010**

**Hyatt on Capital Square**

**Columbus, Ohio**

**<http://www.usm.edu/csho/unity.html>**

# **The Patient Protection and Affordable Care Act Key Provisions for Health Disparities**

**Reauthorizes the Indian Health  
Care Improvement Act**

# Suggested Readings

- *Report of Secretary's Task Force on Black and Minority Health* (1985)
- *The National Partnership for Action to End Health Disparities*, DHHS (pending)
- *Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care*, Institute of Medicine (2003) [www.iom.edu](http://www.iom.edu)
- *National Standards on Culturally and Linguistically Appropriate Services* (CLAS Standards) (2001)
- *The Economic Burden of Health Inequalities in the United States*, Joint Center for Political and Economic Studies (2009)



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