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# Health Equity Strategic Plan: **Status Update**

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Executive Director's Office (EDO) & Office of Cost Control and Quality Improvement (CCQI)



# Our Mission:

Improving health care equity, access and outcomes for the people we serve while saving Coloradans money on health care and driving value for Colorado.

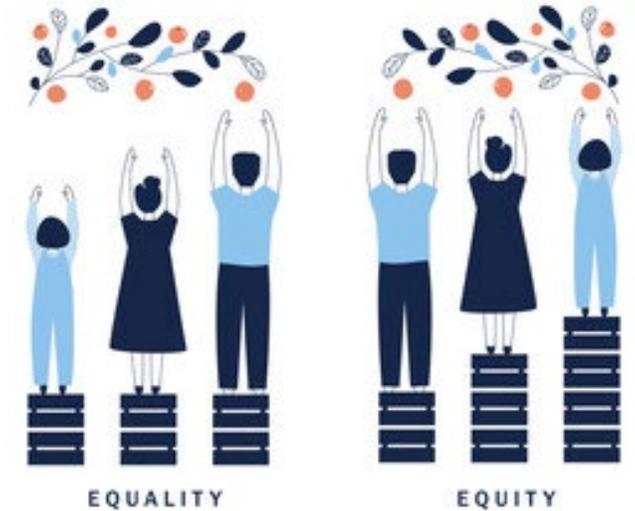


# Land Acknowledgement

“We would like to acknowledge that the land we live, work, learn, and commune on is the original homelands of many tribal nations. We acknowledge the painful history of genocide and forced removal from this territory, and we honor and respect the many diverse Indigenous peoples still connected to this land on which we gather.”

# Priority: Health Equity

- Health Equity Priorities: Vaccines, Maternity, Behavioral Health, and Prevention
- Modernized HCPF Mission Statement to include equity
- On track to implement Dept. Health Equity & Accessibility Plans
- June 30 to improve health equity (SB21-181 & HB21-1110)
- Plan is comprehensive and culturally-responsive
  - Coordinated care for client-centered outcomes
  - Stratified data aligned with quality
  - Adding health equity reports to vendor contracts
  - Social determinants of health, health factors
  - Strong community partnerships, safety net provider (rural, frontier & urban) engagement
  - Measure success in health outcomes, affordability and cost savings



# Health Equity



**Health equity** is achieved when every person has the opportunity to...

**Attain their full health potential** and no one is “disadvantaged from achieving this potential because of social position or other socially determined circumstances.”

Health inequities are reflected in differences in length of life; quality of life; rates of disease, disability, and death; severity of disease; and access to treatment.

Center for Disease Control

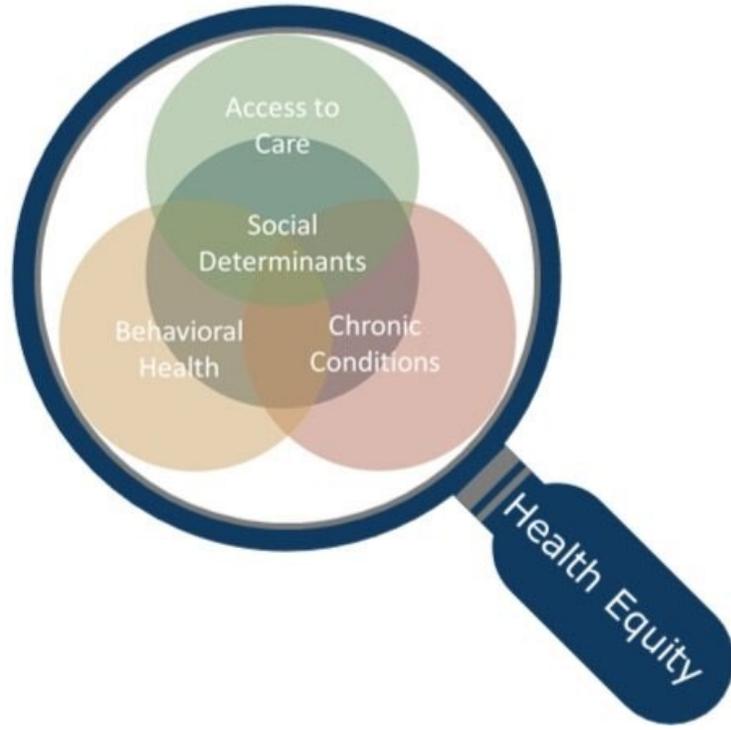


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# Health Equity Lens

Run each decision through an *Equity, Diversity, and Inclusion Lens* with the following questions:



- How are people from different underserved groups affected by this issue?
- What does the data tell us? What is missing from the data?
- If this policy is adopted, who is burdened most and who benefits most?
- If this policy is adopted, what are the health inequities, barriers or negative outcomes involved in the problem being examined?
- How can we ensure that this policy results in inclusive and equitable solutions?
- How can those most adversely affected by the issue be actively involved in solving it?
- How will the proposed policy, practice or decision be perceived by each group?
- If funding is involved, how do we ensure equitable distribution of resources across geographic areas?

## Additional EDI questions to consider:

- Historically, how has our use of data impacted disenfranchised communities we seek to serve? How does this decision address this?
- What must we do differently to center equity?



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# 5 Pillars of Health Equity

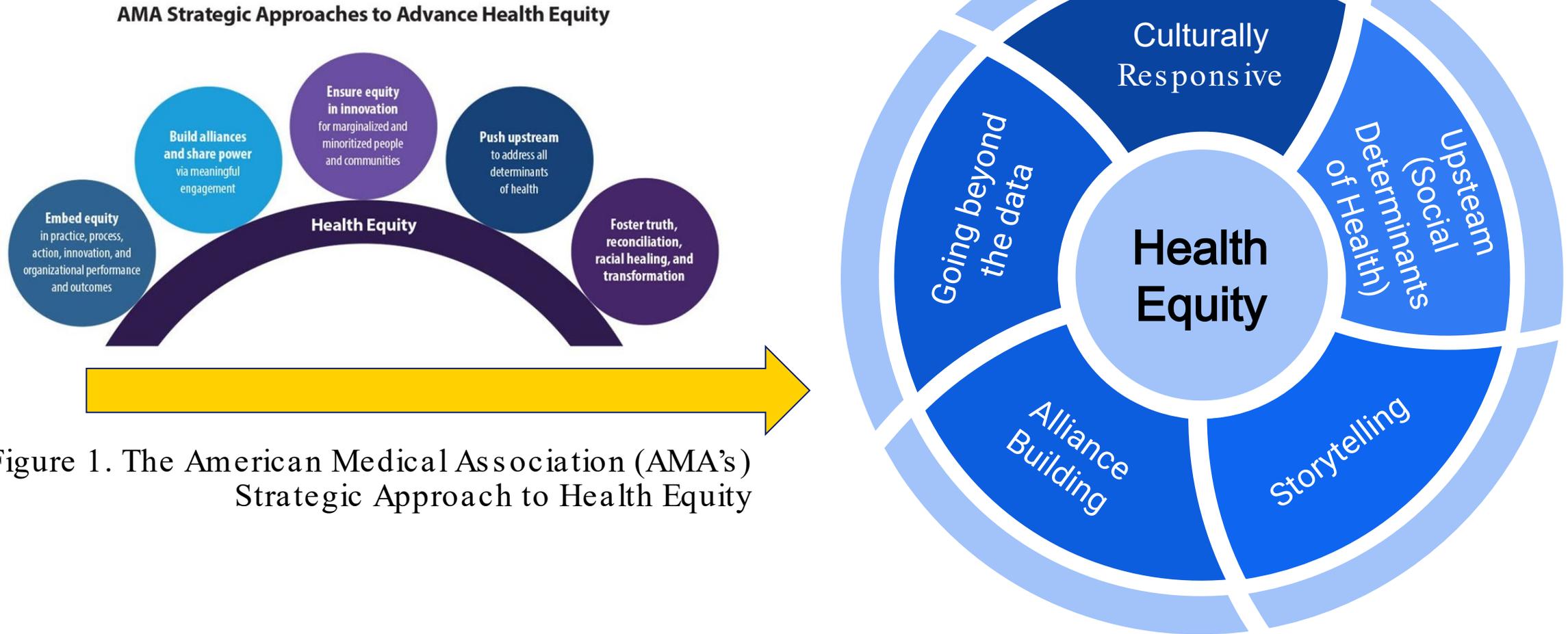


Figure 1. The American Medical Association (AMA's) Strategic Approach to Health Equity

# HCPF Health Equity Plan Status Update

**On track for June 30, 2022 implementation:**

- Aligning health equity Lens with Health Equity Commission (HEC)
- Internal Health Inequities Subcommittee advisory role to health equity
- Health Equity Framework to eliminate health disparities in CO
- Quality Dashboards focused on metrics and performance measures
- Highlighting Dept. initiatives, projects, programs and investments that drive health equity
  - ARPA Equity Study
  - 65 American Rescue Plan Act (ARPA) projects run through EDI lens
  - Internal Social Determinants of Health-Related Tracker (active)
  - Collaborating and partnering with MEAC, PIAC, and other groups
  - Health Equity Strengths, Weaknesses, Opportunities, and Threats (SWOT) Analysis to identify gaps and next steps

## Social Determinants of Health



Social Determinants of Health  
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Healthy People 2030

# Dept. Health Equity Initiatives

Our offices are engaged in various health equity projects:

- **Executive Director's Office**
  - Health Equity Framework, Health Equity Strategic Plan
  - Equal Pay for Equal Work
- **Office of Community Living (OCL)**
  - ARPA Equity Study
- **Cost Control & Quality Improvement (CCQI)**
  - Quality Dashboard & Quality Performance Measures by Race & Ethnicity
- **Finance Office (FIN)**
  - Health System Value Analysis Team
- **Health Information Office (HIO)**
  - Social Care Manage Tool
- **Health Programs Office (HPO)**
  - Behavioral Health Expansion
  - Senate Bill 21-222 Safety Net
- **Medicaid Operations Office (MOO)**
  - Member Contact Center Skills-Based Hiring
- **Pharmacy Office**
  - PDL-evidence based reviews considering racial and ethnic representation in clinical trials
- **Policy, Communications and Administration Office (PCA)**
  - EDI Communication Plan
  - Accessibility Plan





# Equitable Access & Outcomes For Members

Socialize the department's **health equity plan** that is comprehensive, culturally-responsive, and centers equity, diversity, and inclusion that drives down disparities and improves quality care and access for all members



**Critical:** develop and identify ways to actualize coordinated care for client-centered health outcomes

- Data collection needs to be stratified and aligned with expanding quality care
- Clear definition and actionable steps to address social determinants of health (SDOH)
- Develop strong partnerships with community members that goes from ideation to implementation
- Focus on safety net providers (rural, frontier and urban centers/clinics)
- Identify risk adjustment opportunities that leverages health factors of vulnerable and marginalized members
- Measuring success includes cost savings, and reinvestment into health equity strategies
- Updating our standards that is reflective of growing progress and change with an all hands-on-deck approach
- Annual Health Equity Report & Plan included in vendor contracts, eff. 7/1/22

# RAE Deliverable: Annual Health Equity Plan & Report

This report focuses on how RAEs are addressing health equity and decreasing health disparities for members from underserved and marginalized communities, **Contract Addendum Effective 7/1/22**

Specifically, the RAEs will be required to outline an annual health equity report that highlights the following criteria:

- Identify health disparities and priority populations
- Define RAE short term and long terms goals that are aligned with social determinants of health
- Storytelling: Member narratives and storytelling opportunities that demonstrate impact
- Health Equity Inventory: Highlight examples of health equity activities, projects and initiatives for the current fiscal year
- Data outcomes and deliverables
- Cost savings, affordability and fiscal investments in health equity
  - **Plan due by August 31, 2022; Mid-year due by November 14, 2022; Final Report 6/30/23**

# Guiding Principles: HCPF EDI Plan

Person-Centeredness;  
Accountability; Continuous  
Improvement; Employee  
Engagement; Integrity; and  
Transparency

Address health disparities and  
improve the community of equity  
and inclusion among HCPF staff

Values-Driven  
Intentionality  
Data-Focused  
Collaboration

Leverage data analytics to inform  
equity-focused decisions

Co-create, pilot, refine and  
implement an equity framework and  
lens



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# Health Equity in EDI Plan

<b>2. Long-Term Planning &amp; Reporting</b>	<ul style="list-style-type: none"><li>▪ Apply equity framework to guide decision-making</li><li>▪ Identify, analyze and maintain diversity metrics for EDI annual report (ex. diversity in hiring &amp; promotion; health equity for underserved populations; diversity in program utilization)</li></ul>
<b>3. Community Engagement</b>	<ul style="list-style-type: none"><li>▪ Adopt equity-focused community engagement principles</li><li>▪ Identify opportunities to enhance engagement among diverse member populations</li><li>▪ Develop plan to deepen engagement with providers on cultural considerations</li></ul>
<b>7. Policy, System, Program, and Services Review</b>	<ul style="list-style-type: none"><li>▪ Develop and implement equity framework to remove barriers to access &amp; utilization</li><li>▪ Identify 4 specific health disparities and establish numerical goals for addressing them</li></ul>



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# Questions?



Join us in this heart work,  
Thank you!

# Contact Info

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