What Can Reduce Health Disparities in the U.S. And Barriers to Implementation

Marshall H. Chin, MD, MPH
Richard Parrillo Family Professor
RWJF Finding Answers: Solving Disparities Through Payment and Delivery System Reform
University of Chicago
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Learning Objectives

- Review what works to reduce disparities
- Outline payment reform to achieve equity
- Discuss role of education and advocacy to improve equity
Access and Health Insurance
Out of Scope for Talk

- First step – Helpful but insufficient alone
- Disparities persist among the insured
A Roadmap and Best Practices for Organizations to Reduce Racial and Ethnic Disparities in Health Care


www.solvingdisparities.org

National Academy of Medicine – Systems Practices for Care of Socially At-Risk Populations

Centers for Medicare and Medicaid Services – CMS Equity Plan for Improving Quality in Medicare
Roadmap Principles

- No magic bullet
- Systematic process - awareness and prioritization of achieving equity, tailoring of solutions to local organizational and patient contexts, iterative QI addressing specific barriers and facilitators to change, implementation science.
- Menu of evidence-based interventions – organizations/providers like options/model
Roadmap for Reducing Racial and Ethnic Disparities in Care

1) Recognize disparities and commit
2) Implement QI infrastructure and process
3) Make equity an integral part of quality
4) Design intervention(s)
5) Implement, evaluate, and adjust intervention(s)
6) Sustain intervention(s)

Chin MH et al. JGIM 2012; 27:992-1000
Roadmap Step 4 (Cont.)

- Evidence-based strategies
  - Multifactorial attacking different levers
  - Culturally tailored QI
  - Team-based care
  - Families and Community partners
  - Community health workers
  - Interactive skills-based training
Payment / Value-Based Purchasing
Motivation

- Intrinsic
  - Professionalism
  - Do the right thing

- Extrinsic
  - Financial
  - Other rewards
Payment / Value-Based Purchasing

- Pay for performance
- Infrastructure - Preventive and primary care
  - e.g. community health workers
- Social determinants of health / population health
MACRA (Medicare Access and CHIP Reauthorization Act)

- 2019 – Quality Payment Programs
  - Merit-Based Incentive Payment System (MIPS)
  - Advanced Alternative Payment Model (APM)
- Quality metrics, Health IT, Cost accountability
Where’s Equity?
Creating the Business Case for Achieving Health Equity

Chin MH. JGIM 2016; 31:792-796.

National Academy of Medicine – Systems Practices for Care of Socially At-Risk Populations

Equity Leadership Forum – American Hospital Association, the Joint Commission

Families USA

National Quality Forum
CMS and Private Payors
Align the Financial Incentives

- Require public reporting of stratified disparities data
- Pay for reducing disparities
  - Include equity accountability measures in payment programs – structure/process/outcome
- Strengthen incentives for prevention and primary care
  - Update MD RVU payment schedule – cognitive
  - Global payment / shared savings – flow of money
  - Intersectoral partnerships – Social determinants

Chin MH. JGIM 2016.
Align the Financial Incentives 2

- Align equity measures across public & private payors

- **Take care of safety net providers**
  - Adequate payment
  - Calibrate DSH reductions to insurance expansion
  - Support for quality improvement
  - **Risk adjustment** to create level playing field

- Conduct payment and delivery **demo** projects

- **Have explicit equity lens - payment and QI**
Moonshots, Opioids, and Incentives

- “So, why do health disparities persist? A simple answer is that our country tolerates them.”
- “way we pay for medical care largely does not support efforts to achieve health equity.”

Chin MH. The Health Care Blog 2016.
“I believe movement advocacy can break down ingrained structural barriers and policies that impede health equity, while clinicians, health care organizations, and advocates build trusting relationships and resolve conflict with mutual respect and honesty.”

Chin MH. JNMA. 2017.
“We must combine advocacy and relationship building to end disparities. Achieving health equity will require policy changes, and personalized clinical care and organizational transformation that are dependent on good will and trust.”

Chin MH. JNMA. 2017.
Payment and Delivery System Reform

- “Equity must be a priority in all health policy issues.”
"Leadership matters. It is our professional responsibility as clinicians, administrators, and policymakers to improve the way we deliver care to diverse patients. We can do better."

Chin MH. NEJM 2014.