The Intersection of Value, Equity and the Social Determinants

October 8, 2018

The Root Cause Coalition National Summit on the Social Determinants of Health
Session Overview

- Health care affordability and **value**
- **Health equity**
- **Social Determinants of health**
- The **connection** between value, health equity and the social determinants of health
- **AHA tools and resources**
ADVANCING HEALTH IN AMERICA
THE PATH FORWARD

Our vision: A society of healthy communities where all individuals reach their highest potential for health.

Our commitment:

1. Access: Access to affordable, equitable health, behavioral and social services
2. Value: The best care that adds value to lives
3. Partners: Embrace diversity of individuals and serve as partners in their health
4. Well-being: Focus on well-being and partnership with community resources
5. Coordination: Seamless care propelled by teams, technology, innovation and data
9 out of 10 Americans have health insurance

Out-of-pocket expenses for premiums and deductibles are growing faster than overall inflation and earnings.
The Average worker spends almost $6,000 each year on health insurance for a family plan.

Source: Kaiser/HRET Surveys of Employer-Sponsored Health Benefits
Health Care Affordability

- In employer-sponsored health insurance plans, the combination of a high-deductible health plan and a Health Savings Account increases affordability pressure.*
  - In 2015, **24%** of all workers were enrolled in a high-deductible plan.
  - Within the next three years, **44%** of employers are expected to offer high-deductible plans as the only option.**

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Affordability is one of the most important challenges influencing American’s ability to access health care.

One in four Americans (25%) say the cost of health care is the biggest concern facing their family.¹

One in three Americans (33%) report that they could not access care in the last year because of cost.²

Leader Input & Insights

- We cannot stand on the sidelines
- We have to collaborate with other stakeholders and convene discussion
- We have to take a leadership role in providing solutions
- We have to collect data on the topic, and track our progress
- We have to provide support to our members to enact change
- We have to advocate for policies that support affordability
Recommended AHA Activities

**Advocacy and Representation**

- Build upon AHA’s advocacy agenda to promote affordability and improved value

**Thought Leadership Knowledge Exchange Agent of Change**

- An AHA program of services to address Affordability and the four value strategies
  - Create resources and provide educational opportunities for our members (e.g. podcasts, toolkits and learning collaboratives)
  - Engage with other stakeholders impacting affordability
  - Identify metrics to measure affordability
The Value Initiative

**Thought leadership on affordability**

- **Issue Briefs:** Start the conversation
- **Executive Forums:** Perspectives and strategies
- **Innovative Activities:** Real solutions that promote value
- **Members in Action Series:** Success stories from the field
- **Voices on Value:** Expert insights from outside the field
- **Data:** Trends and support for federal policy solutions
Addressing Affordability Through the Lens of Value

- Significant interest and discussion about value
- No agreed-upon definition or expectation
- Perspectives vary widely, can be inconsistent and may not align
- Stakeholders approach this issue from different angles and with different goals
Addressing Affordability Through the Lens of Value

Value = Outcomes & Patient Experience / Cost
# Addressing Affordability Through the Lens of Value

## Redesign the Delivery System
- Coordination of care
- Clinically integrated networks
- Primary Care Medical Homes
- Chronic care management
- Telehealth
- Community-based alternatives
- Community partnerships including public health

## Improve Quality and Outcomes
- Address equity of care and health disparities
- Evidence-based care/analytics
- Reduce clinical and operational variation
- Eliminate unnecessary utilization
- Advanced medical technologies
- Personalized medicine

## Manage Risk and Offer New Payment Models
- Move to value-based payments
- Population health management
- Address social determinants
- High-need/high-cost approaches
- Partner/own health plan

## Implement Operational Solutions
- New process improvements
- Cost reductions
- Utilize cost accounting and data
- Support clinicians’ practices to their level of education
- Create a culture geared to value not volume
Health Equity
Your Zip Code and Not Your Genetic Code

- Children from the lowest-income ZIP codes accrued:
  - $8.4 M more individual hospitalizations-level standardized costs
    (counting all hospitalizations separately)
  - $13.6 M more patient-level standardized costs
    (grouping multiple hospitalizations for the same child together)
Infant mortality rate for preterm births before 32 weeks of pregnancy is 70 times greater than the infant mortality rate for infants born between weeks 37 and 41.
Average medical cost for a baby from birth through first year of life; Healthy, full-term baby from birth through the first year = $5,085. Premature and/or low-birth weight baby (less than 37 weeks gestation and/or less than 2.5 kg) = $55,393
Cost as a Barrier to Care

Percentage of non-elderly adults who did not see a doctor for care because of cost

- Hispanic: 24%
- Black: 21%
- American Indian or Alaska Native: 19%
- Native Hawaiian or Pacific Islander: 15%
- White: 14%
- Asian: 11%

—Kaiser Family Foundation

America's Health-Inequality Problem

When it comes to health disparities, the U.S. is outranked only by Portugal and Chile, a new study finds.
Lower Extremity Amputations Done in Illinois By County (2008-2012)

- **Cook**
  - Number of Amputations: 856
  - Per capita: 0.130

- **Union**
  - Number of Amputations: 166
  - Per capita: 6.210
Social Determinants of Health – current environment

- **1.48 million** individuals are **homeless**
- **3.6 million** people cannot access medical care due to lack of **transportation**
- **42 million** Americans face **hunger**
- **12.7%** of households are **food insecure**
Impact of Social Determinants of Health

- **20%** of a person’s health and well-being is related to *access to care* and *quality of services*

- The *physical environment*, *social determinants* and *behavioral factors* drive **80%** of health outcomes

Source: Institute for Clinical Systems Improvement; Going Beyond Clinical Walls: Solving Complex Problems, 2014 Graphic designed by ProMedica.
# Impact of Social Determinants of Health

**Economic Stability:**
- Employment
- Income
- Expenses
- Debt
- Medical Bills
- Support

**Neighborhood & Physical Environment:**
- Housing
- Transportation
- Safety
- Parks
- Playgrounds
- Walkability

**Education:**
- Literacy
- Language
- Higher Education
- Vocational Training
- Early Childhood Education

**Food:**
- Hunger
- Access to Healthy Options

**Community & Social Context:**
- Social Integration
- Community Engagement
- Support Systems
- Discrimination

**Health Care Systems:**
- Health Coverage
- Provider Availability
- Provider Linguistic & Cultural Competency

**Health Outcomes:**
- Mortality
- Life Expectancy
- Health Care Expenditures
- Health Status
- Functional Limitations

Connecting the Dots – Value and Health Equity

- Health Equity impacts each component of the value equation – cost, quality and patient experience
- Improvements in health equity provide tremendous value to patients, hospitals and the health care delivery system
Connecting the Dots – Value and Health Equity

$93 billion
excess health care costs
due to health disparities.

$42 billion
untapped productivity due
to health disparities.

$230 billion
projected economic gain each
year if health disparities
eliminated by 2050

Connecting the Dots – Value and Health Equity

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Clinch Valley Medical Center

- Bridge Program is a partnership with local not-for-profit
- Focused on transitioning patients from hospital to home to renewed health
- Home visits and assessments uncover health disparities
- Program has reduced readmissions and out-of-pocket prescription drug costs for patients
Asthma Care Partners is a community focused effort to address disproportionate asthma burden in inner-Chicago.

- Participants had 59-62% reduction in asthma symptoms and use of quick-relief medication, such as inhalers.
- Decreased urgent health resource use.
- $3 - $8 in health care costs averted for every $1 spent.
Boston Medical Center

- Investing in Affordable Housing
- “Too often, we prescribe medicine to a family, when what they need just as much for long-term health is a prescription for stable housing.” Kate Walsh, President and CEO
- “There is a direct health benefit, but that in turn creates significant savings in health care spending. Most importantly, we are building healthy communities, where families can thrive financially and physically.” Megan Sandel, Pediatrician
West Side United: Community Revitalization in Chicago
Presbyterian Healthcare Services

- Supporting Local Agriculture and Food Access in Albuquerque, NM

![Graphs showing population and adult fruit/vegetable consumption and SNAP benefits in Central NM, New Mexico, and the United States.]
Investing in Communities: Richmond, VA

**Public Safety**
Concerns about effective policing, neighborhood watch and gangs

**Acute Care**
Historical reputation of the hospital presented engagement challenges

**Blight**
Includes boarded up houses, graffiti and trash

**Access to Jobs**
Especially service sector or entry-level jobs in the surrounding community

**Housing Security**
Concern about paying the rent, safety and environmental issues such as mold and lead paint

**Transportation**
Poor public transit and lack of car ownership prevented community members from getting to work or school
Investing in Communities: Richmond, VA

USA Today Names Church Hill One of '10 up-and-coming neighborhoods around the USA'

American Hospital Association
Advancing Health in America
Connecting the Dots – Value and Health Equity

Innovative Partnerships
Atrium Health, Novant Health and Mecklenburg County Public Health have united to address social determinants of health in six zip codes around Charlotte, NC
Anchor Institutions

Hire locally and develop talent
- Employment preference initiative
- Career ladder development
- Skills training
- Mentoring and coaching

Buy and source locally
- Local purchasing program
- Local labor for capital projects
- Apprenticeship
- Diversity hiring and contracts

Invest locally
- Impact investing in local communities
- Local business incubation to fulfill sourcing needs

Volunteer and support community building
- Employee engagement in local communities
- Leveraging employee expertise (e.g., teaching skills class)
COPD Readmissions June 2017

Z Score Calculator for 2 Population Proportions

- Defects in Population “African American”: 15
- Population “African American”: 202
- Defects in Population “White”: 24
- Population “White”: 356
- Significance Level: 0.05

- Two Tailed Z Test

- Result: The Z-Score is 0.3046. The p-value is 0.76418. The result is not significant at p < 0.05. The proportion of Yes or No responses for Observation 1 is 0.074. The proportion for Observation 2 is 0.067.

Significant disparity in COPD readmissions for AA compared to white in baseline period has resolved.
Creating Strategic Alliances...

**CEO-Trustee Connection**
Connect hospital and health system CEOs with local Urban League leaders interested in opportunities to serve on governing boards at hospitals and health systems.

**Community Health Worker**
Develop resources for the field and share best practices on community health worker programs.

American Hospital Association
Advancing Health in America

National Urban League

UNIDOSUS
Stronger Communities. Stronger America.
The Path Forward

- Make Health Equity a Strategic Priority
- Develop structures and processes to support health equity work
- Board Engagement and Education
- Strengthening linkages between quality with equity addressing SDOH
- Develop partnerships with community organizations
- Decrease racism, implicit and unconscious bias
- Developing Anchor Institution approach
Social Determinants of Health Resources

To access more resources, please visit www.aha.org/
The Value Initiative Resources

To learn more about The Value Initiative, please visit www.aha.org/TheValueInitiative
Innovation Resources

- Market intelligence
- Education and learning
- Products and services
- Data and applied research

To learn more about AHA’s Center for Health Innovation, please visit [www.aha.org/center](http://www.aha.org/center)