

A Systemic Approach to Advance Health Equity

Bridget Hurd Vice President, Inclusion and Diversity and Lead, Office of Health and Health Care Disparities

October 16, 2023



Health and health care disparities cost \$93 billion in excess health care costs and \$42 billion in lost productivity.

Source: Altarum and WK Kellogg Foundation

Health and health care disparities are often viewed through the lens of race and ethnicity, but they also occur across a broad range of dimensions.

"Health equity means that everyone has a fair and just opportunity to be as healthy as possible..."

Robert Wood Johnson Foundation

Health Disparity

HEALTH DISPARITY

- Illness (morbidity)
- Injury
- Disability
- Mortality

DIFFERENCES IN:

Health Care

Disparity

- Health insurance coverage
- Access to care
- Utilization of care
- Quality of care

- Socioeconomic status
- Gender
- Age
- Geography

- Language
- Citizenship status
- Disability status
- Sexual identity and orientation

...and other social determinants health





Blue Cross Blue Shield of Michigan's Multi-Year Strategy to Advance Health Equity





- BLUE CROSS BLUE SHIELD ASSOCIATION'S National Health Equity Strategy
- Protect Michigan Commission

Governor's Food Security Council

- Michigan Black Leadership Advisory Council
- Department of Licensing and R⁴egulatory Affairs Implicit Bias Training Rules Advisory Committee

COVID-19 shone the light on health and health care disparities and social determinants of health

In April 2020, the **Michigan Coronavirus Task Force on Racial Disparities** brought together stakeholders to address health and health care disparities.

Under the leadership of Lt. Governor Gilchrist, the Task Force worked to respond to pandemic surges and save lives, setting up community testing, mask distribution, and vaccination sites in high-need areas, improving data collection and analysis, and boosting access to telehealth, health insurance, and mobile health clinics in vulnerable communities. To improve long term outcomes for underrepresented communities and reduce racial disparities in health care access, the Task Force also targeted improved access to health care in schools and for people with sickle cell disease and reinforced maternal and infant healthcare. Blue Cross Blue Shield Blue Care Network of Michigan

In the early months of the pandemic, African-American/Black residents as well as Native American, Hispanic/Latino and people with disabilities faced many barriers such as:

- O1 Access to testing sitesO2 Unconscious bias at testing sites
- 03 Being frontline workers
- 04 Food insecurity
- 05 Underlying health conditions where disparities are already prevalent obesity, diabetes, hypertension, kidney disease and other conditions.

PHOTOS: Lt. Governor Gilchrist Delivers \$49.5 Million to Reduce Racial Disparities Under 'Make it in Michigan' Budget

LANSING, Mich.—Today, in Detroit, Lieutenant Governor Garlin Gilchrist II joined members of the Racial Disparities Task Force and Michigan Department of Health and Human Services Director Elizabeth Hertel to tour the Bethel Baptist Church East Community Health Clinic, meet frontline workers, and highlight the 'Make it in Michigan' budget's \$49.5 million investment to implement the recommendations of the COVID-19 Racial Disparities Task Force.

"Michigan's COVID-19 Racial Disparities Task Force brought together dedicated public servants to tackle racial health disparities and save lives," said **Lt. Governor Garlin Gilchrist II**. "Now, our state budget builds on the work of the task force by investing in innovative approaches to grow access to affordable healthcare and serve Michiganders in communities across our state. It funds mobile health units that meet patients where they are and local healthy community zones that help more Michiganders lead healthy lifestyles. Governor Whitmer and I will keep working with anyone to build healthy, equitable, prosperous communities where everyone can thrive."

Closing Racial Health Equity Gaps

In total, the budget invests \$49.5 million to implement the recommendations of the Michigan COVID-19 Racial Disparities Task Force. That investment includes:

- \$17 million for the Neighborhood Health Grant Program, which will transition 22 community-based COVID-19 testing sites into comprehensive community health and wellness centers by expanding to offer additional community-driven health services, such as blood pressure, diabetes, and cholesterol screenings, immunizations, COVID and HIV/STI testing, social services, and counseling.
- \$7 million to continue Michigan's national leadership in development of mobile health units and fill important gaps in access and care delivery that improves health outcomes. Mobile health units bring prevention and care to underrepresented and marginalized communities, meeting patients where they are and connecting them with the resources they need to thrive.
- \$16 million for Local Healthy Community Zones, pilot programs designed to address leading causes of health disparities in underrepresented communities, like a lack of healthy food or fitness opportunities, by concentrating resources on boosting opportunities for healthy lifestyles.
- \$2.5 million to support individuals with sickle cell disease and their families with counseling, support groups, and other assistance.
- **\$23 million** to support implementation of the RDTF's recommendations and address additional disparities in health care access.