

About Us



Organizational Background

The efforts of policy makers, payers, patients, healthcare delivery organizations, and community-based organizations to achieve health equity must be aligned if they are to be effective. For almost 20 years, the Robert Wood Johnson Foundation (RWJF), the Advancing Health Equity: Leading Care, Payment, and Systems Transformation program (AHE), and its predecessor, Finding Answers, have been national leaders in driving meaningful changes that move key stakeholders in the healthcare system away from merely documenting health inequities toward implementing solutions.

AHE is guided by its comprehensive [Roadmap to Advance Health Equity](#). The Roadmap integrates the creation of a culture of equity with the technical steps required for organizations to: identify inequities; determine the root causes of those inequities; and design and implement care delivery interventions and payment models to support and sustain them. The AHE program is based at the University of Chicago and partners closely with the Center for Health Care Strategies, the Institute for Medicaid Innovation, and The Justice Collective to provide services and achieve program goals.

Our Mission

AHE's mission is to transform patient care by bringing together multi-partner teams of state Medicaid agencies, health plans, healthcare delivery organizations, patients, and community-based organizations. These coalitions work together to develop and implement payment reform and care transformations that address the medical and social needs of patients and communities. With a focus on creating an anti-racist culture of equity, these multi-stakeholder teams work toward:

- healthcare systems alignment with the health equity interests of community members and those enrolled in Medicaid;
- innovating and scaling the capacity of health and healthcare systems to advance health equity via technical assistance, training, and tailored resource provision;
- anti-racist culture change; and
- payment reform.

AHE currently works with 12 state/district Learning Collaborative teams (DC, DE, IL, LA, ME, MS, NJ, NY, TN, WA, and two cohorts from PA). We believe that building relationships and aligning motivating forces across these entities is critical to our ability to: accurately address health equity focus areas; diagnose factors leading to health inequities; and design and implement a tailored, integrated care and payment transformation.

What Makes AHE Unique?

AHE understands what it takes to practically advance health equity sustainably at scale within the healthcare system. The most powerful and effective reforms to advance health equity require coordination and collaboration across different entities. No one group has the necessary power for transformative change. AHE's superpower is helping teams of organizations collaborate. Based on our decades of experience working to advance health equity, we have learned that successful solutions require both technical and cultural changes. Health care delivery systems must be intentionally designed to address the medical and social needs of patients and populations. The way we pay for care must be changed to support care transformation in which creating a business case from the perspective of each healthcare entity enables each person to have a fair and just opportunity to maximize their health and well-being.

AHE helps multi-stakeholder groups plan and implement health equity strategies over short-, medium-, and long-term periods. We realize that healthcare organizations are playing under the current rules of the game, and some change needs to be incremental. At the same time, long-term transformational work that advances health equity and maximizes a social return on investment is not supported by the current system. All key stakeholders need to enact policies that support and incentivize organizations to do their mission-driven equity work.

To learn more about AHE, please see our [website](#) and [LinkedIn profile](#).