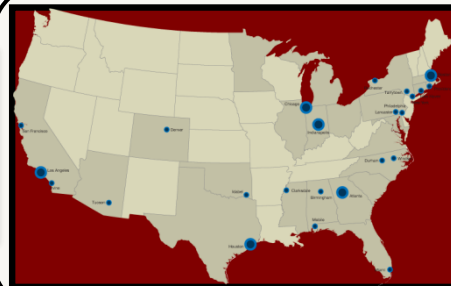


# Overview and Orientation

**Learning Collaborative All Team Convening – January 2023**

# Program Background

## National Grantee Program



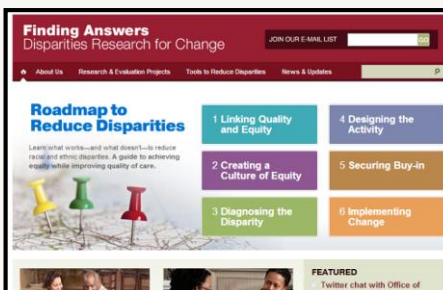
- Test innovative programs
- 36 grantees nationally
- Rigorous evaluation

## Systematic Reviews

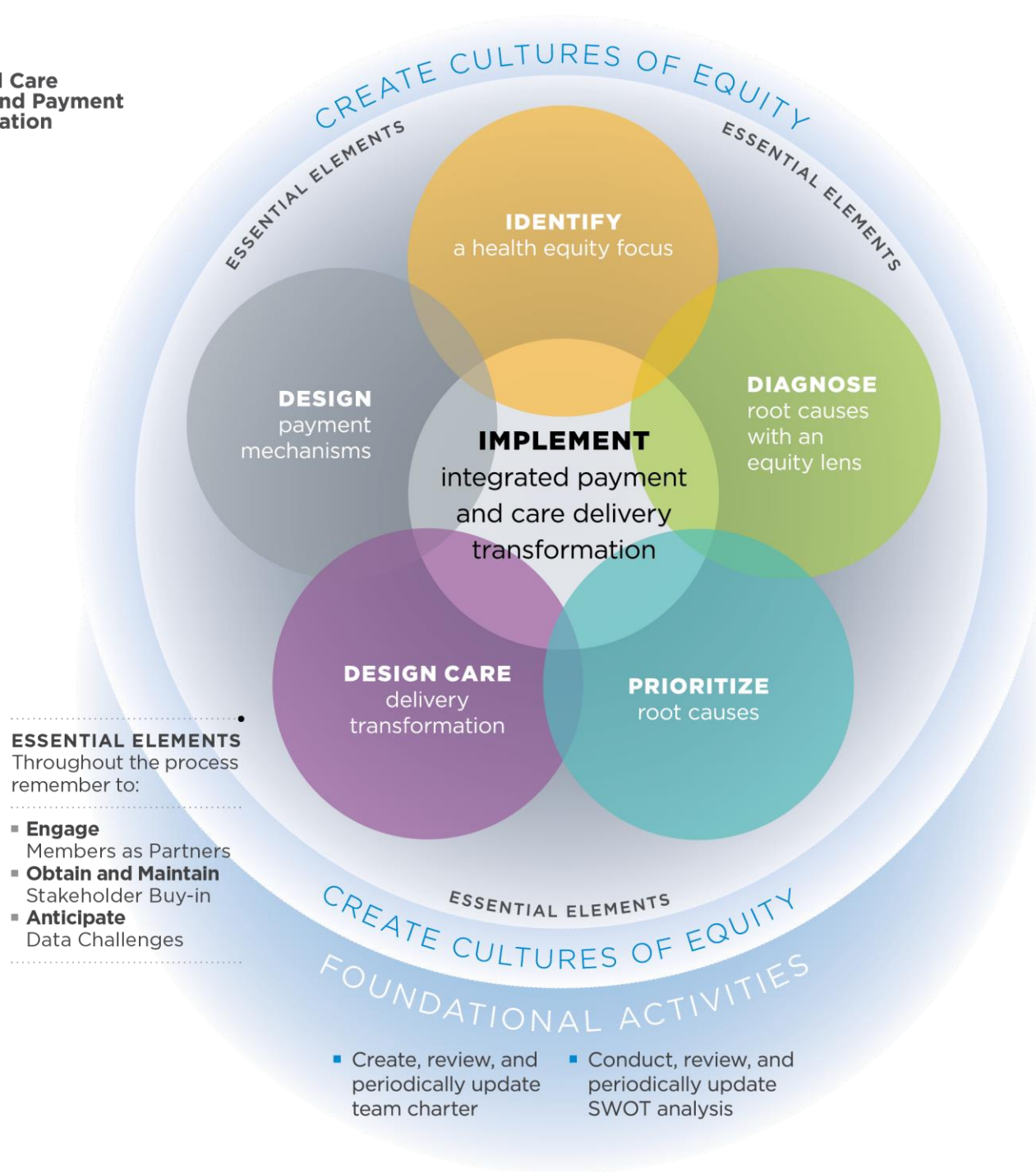


- 11 systematic reviews
- Cross-cutting themes
- Searchable database

## Technical Assistance



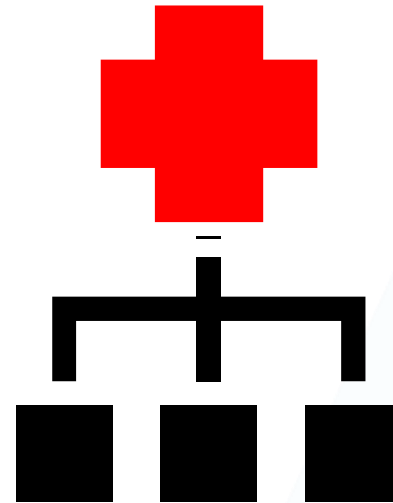
- Roadmap to Reduce Disparities
- Resource and implementation Guides
- Learning Collaboratives



# Bringing Payers and Providers Together



**State Medicaid  
agencies**



**Medicaid managed  
care organizations**



**Clinical providers**

# Learning Collaborative Teams

## Cohort 1

- Delaware
- Illinois
- Maine
- New Jersey
- Pennsylvania
- Tennessee
- Washington

## Cohort 2

- District of Columbia
- Louisiana
- Mississippi
- New York
- Pennsylvania

# Updated Program Goals

1. **Advance Health Equity** by using an anti-racist lens to eliminate unjust differences in health and healthcare in populations that have been historically marginalized resulting from racism and other forms of structural oppression.
2. **Facilitate a Learning Community** that adopts anti-racist approaches to improve equity-focused care transformation and payment model design. Disseminate key lessons to organizations in the field working on reducing health and healthcare inequities.
3. **Transform Care** by partnering with patients and communities to address health and healthcare inequities by providing high-quality, culturally relevant care and addressing social drivers of health.
4. **Transform Payment** by designing and implementing payment reform mechanisms that support and incentivize the transformation of healthcare delivery to reduce health and health care inequities by meeting medical and social needs.
5. **Transform Systems** by aligning state Medicaid offices, managed care organizations, and healthcare organization's efforts with community member perspectives and priorities to reduce health and healthcare inequities.

# Current National Context



# Exciting Opportunities to Advance Health Equity with Payment Reform and Care Transformation



# CMS Innovation Strategy Refresh

- // “Embed health equity in every aspect of CMS Innovation Center models and increase focus on underserved populations.”
- // ACO REACH (realizing equity, access, and community health)
- // CMS Health Care Payment Learning and Action Network Health Equity Advisory Team – Technical guide Advancing Health Equity Through Alternative Payment Models

# CMS Hospital Inpatient Quality Reporting Health Equity Measures

- // Commitment to establishing culture of equity
  - Commitment to health equity as strategic priority
  - Sociodemographic and health-related social needs (HRSN) data
  - Analyze those data
  - QI for health disparities
  - Leadership engagement for equity
- // Report % adults screened for HRSNs
- // Report % adults screen positive for HRSNs

# Understanding and Addressing the Impact of Structural Racism and Discrimination on Minority Health and Health Disparities (R01 Clinical Trial Optional)

RFA-MD-21-004

**February 24  
and 25, 2022**

**VIRTUAL  
MEETING**



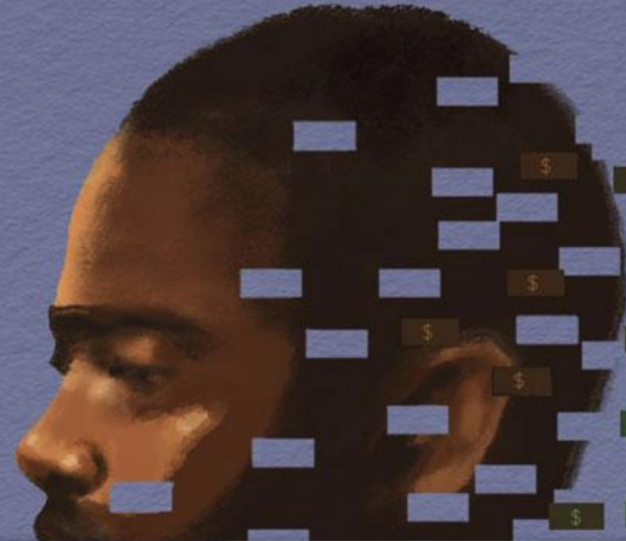
**Designing Interventions  
That Address Structural  
Racism to Reduce Kidney  
Health Disparities**



**NIH**

National Institute of  
Diabetes and Digestive  
and Kidney Diseases





**POLICY FORUM**  
JAN 2023

Peer-Reviewed

# What Should Antiracist Payment Reform Look Like?

Kimberly A. Singletary, PhD and Marshall H. Chin, MD, MPH

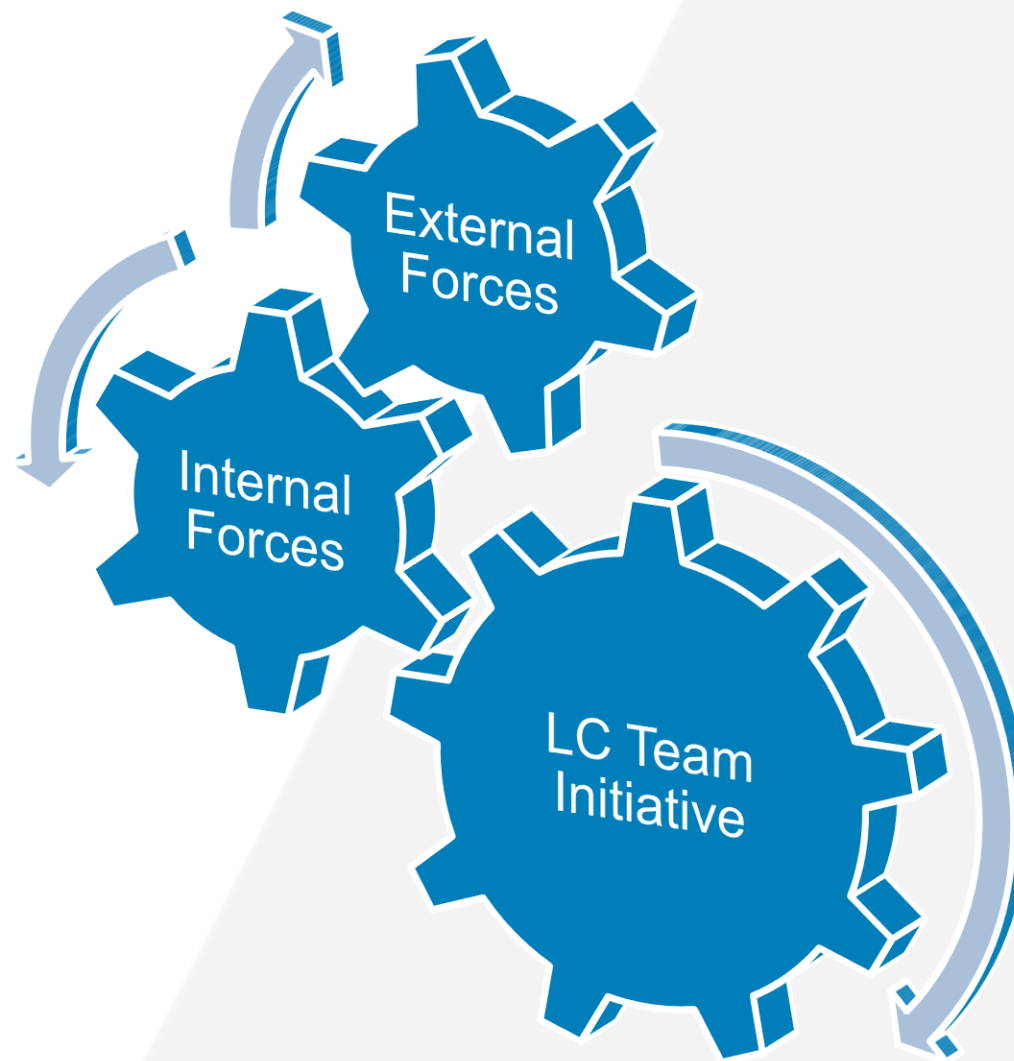
## 6 Antiracist Payment Reform Strategies

- // Increase and sustain access to quality insurance
- // Improve scope of insurance coverage to **meet medical and social needs**
- // Institute managed-care **contracts standards for racial equity**
- // Support safety net institutions and the racially minoritized populations they serve
- // Define and operationalize nonprofit hospital status requirements to substantially benefit marginalized communities
- // **Implement payment incentives to advance health equity**

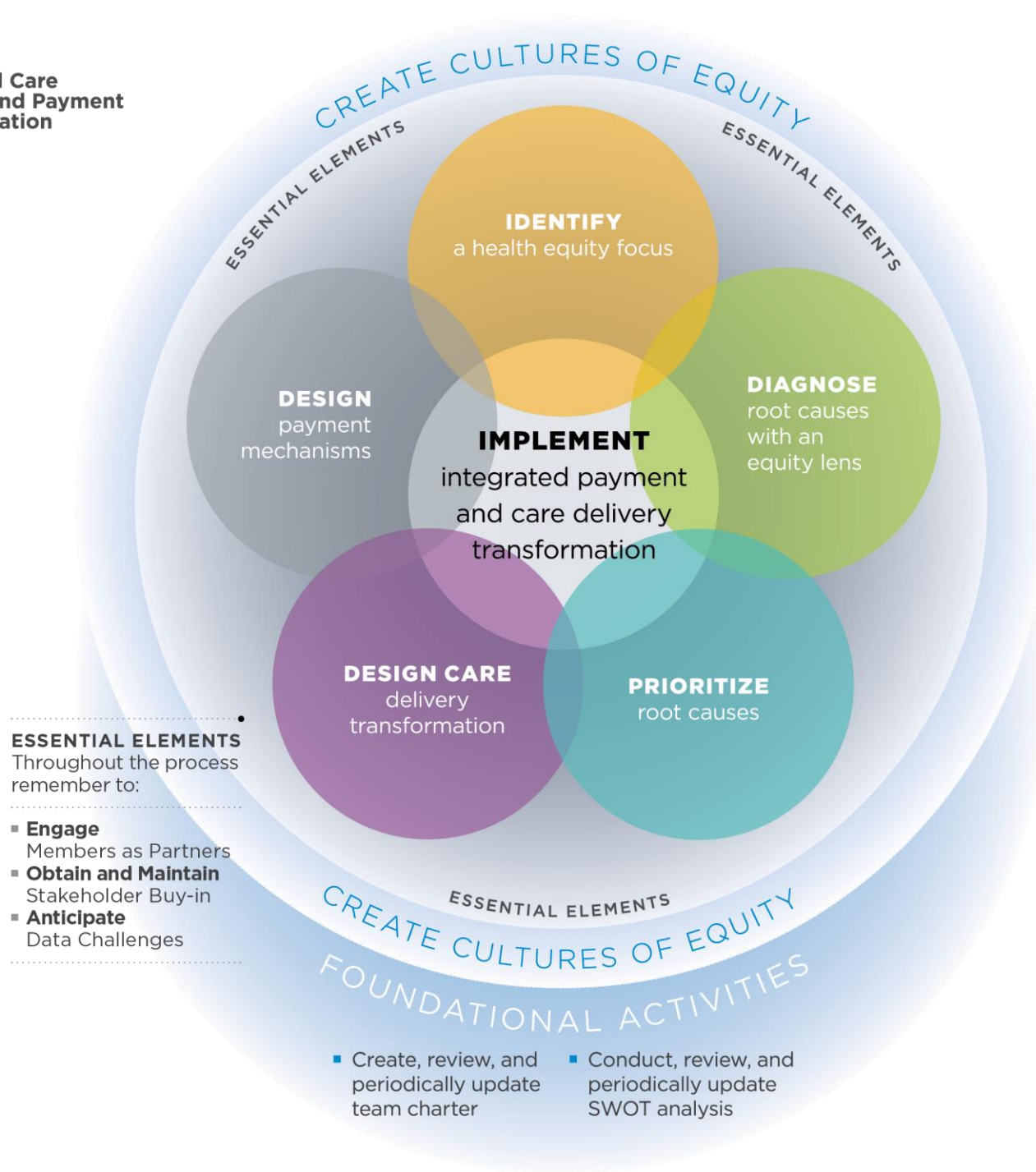
Singletary and Chin. AMA J Ethics. Jan. 2023

# Current Opportunities and Challenges

# Internal and External Forces







# Internal and External Forces



# Internal and External Forces



# World View

- The way you frame the world and what it means to you
  - One's conceptual framework
  - How you think the world works
  - Your philosophy of life



# World View

Why do African-American and Black children with asthma in our health plan have a higher rate of hospitalization due to complications compared to other children?

Why is our health system less successful helping African-American and Black children with asthma stay out of the hospital compared to other children?

# Cycle of Socialization

How we develop our world view



## CULTURE:

shared experiences and commonalities that have developed and continue to evolve in relation to changing social and political contexts based on multiple social group memberships in the context of oppression

**SOCIALIZATION** through:  
family, friends, community, peers,  
schooling, media, work,  
religious institutions,  
government, legal system,  
healthcare system, etc.

## WORLD VIEW

Source:© 2009 Barnes-Jewish Hospital Center for Diversity and Cultural Competence

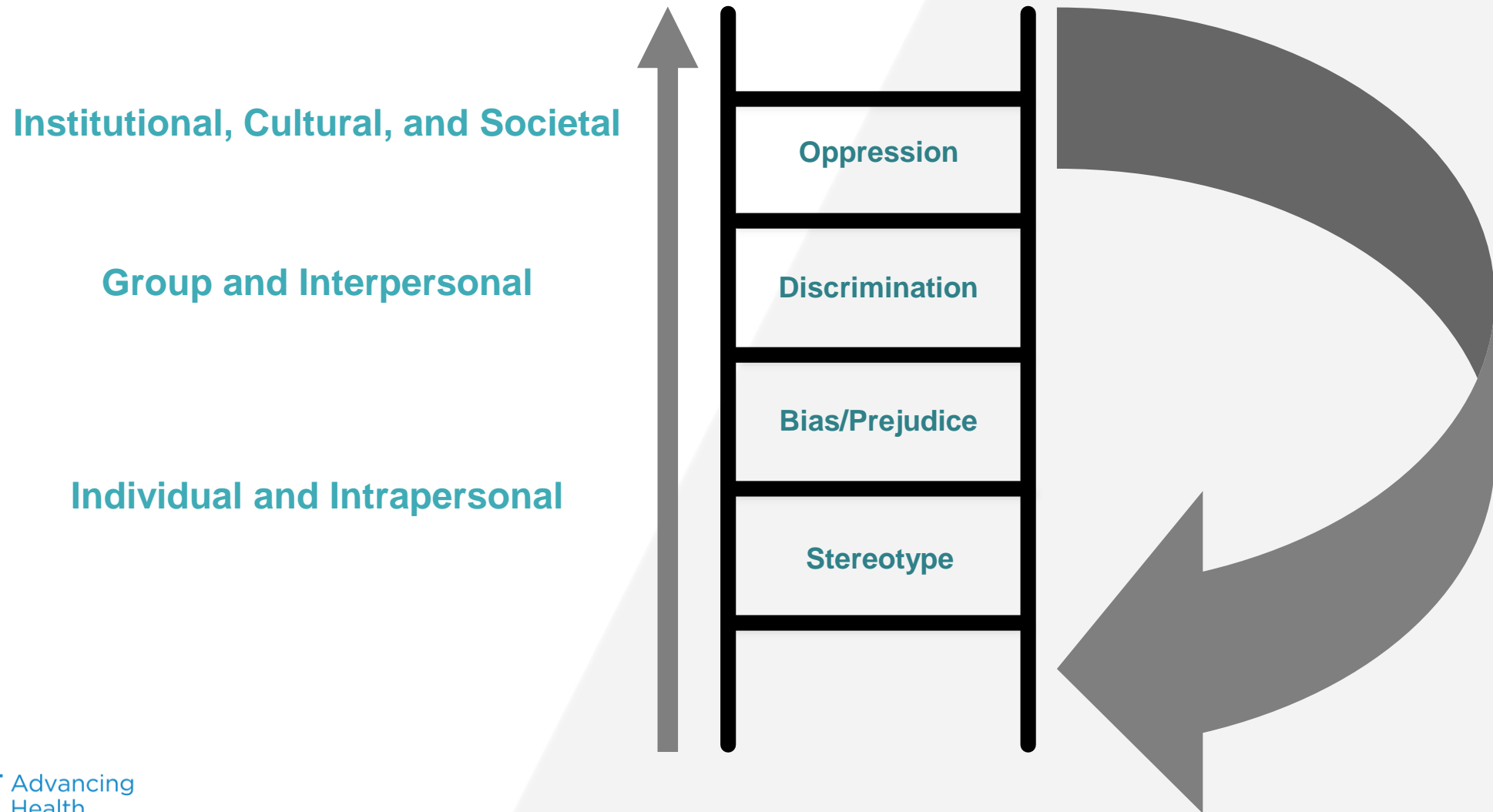
Source: Cycle of Socialization developed by Bobbie Harro

# Shifting the Cycle of Socialization

- /// **Critical Theory** Umbrella term referring to theories that emphasize power analysis as an approach to understanding and transforming structures by targeting the root causes of social injustice (e.g., feminist, critical race theories).
- /// **Structure** "...political, social, cultural, historical, and economic forces that influence individual behavior and thus create predictable patterns based on social location".

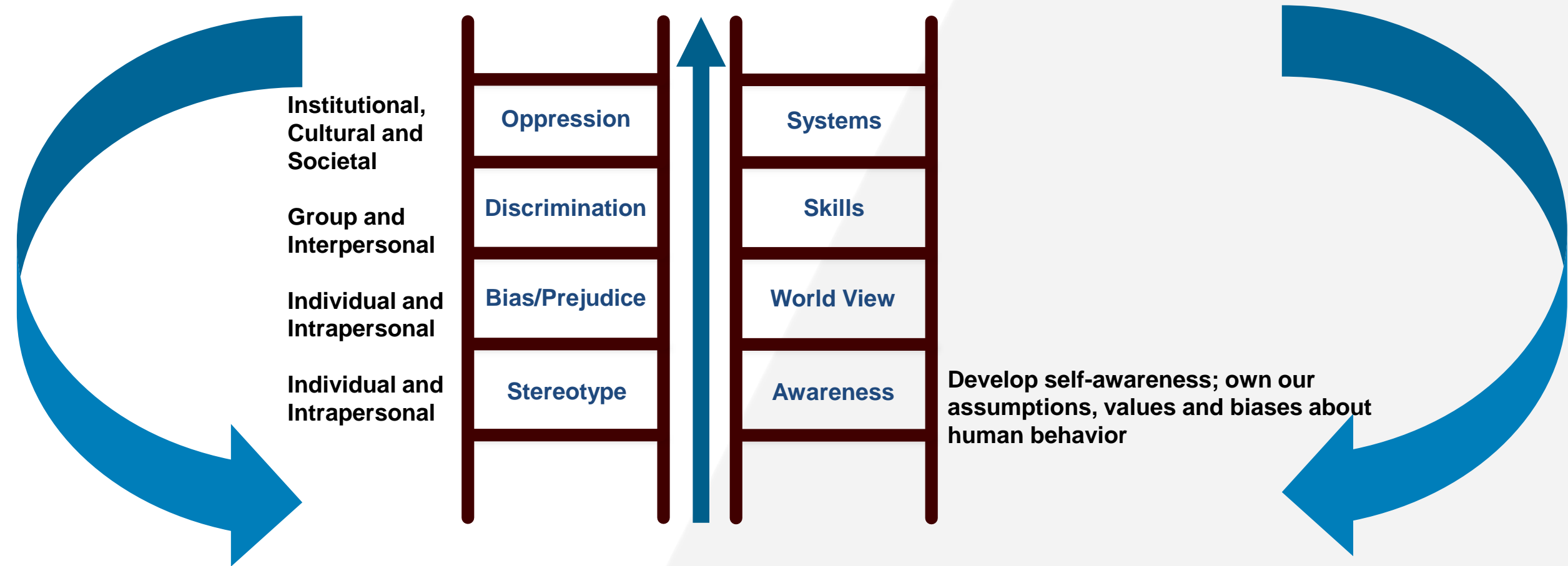
Paradis, E., Nimmon, L., Wondimagegn, D., & Whitehead, C. R. (2020). Critical theory: Broadening our thinking to explore the structural factors at play in health professions education. *Academic Medicine*, 95(6), 842-845. <https://doi.org/10.1097/ACM.00000000000003108>

# Ladder of Oppression

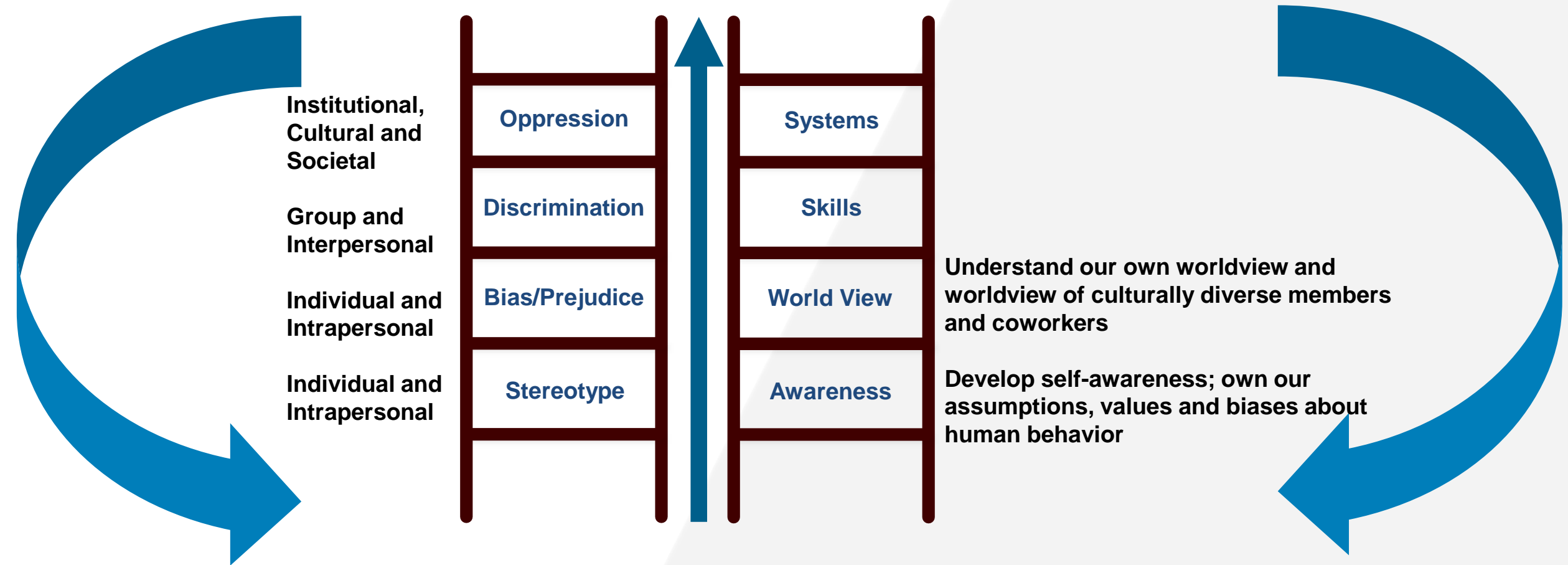




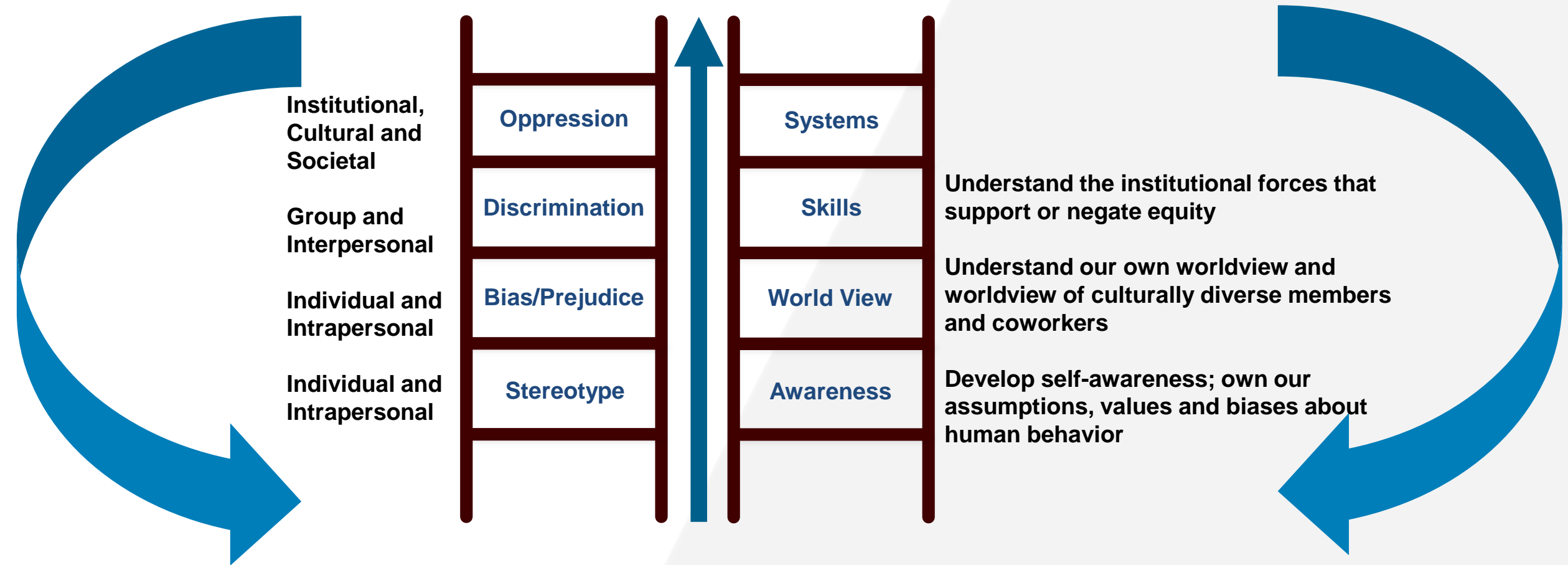
# Ladders of Oppression and Culture of Equity



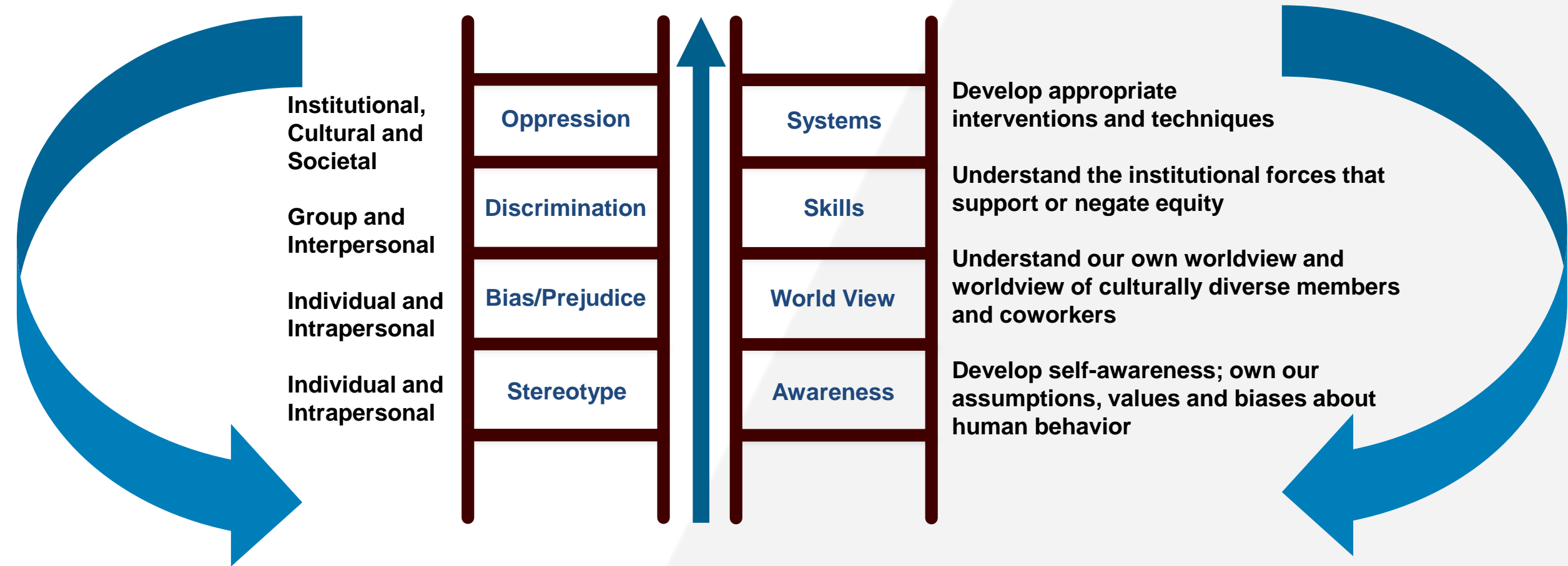
# Ladders of Oppression and Culture of Equity



# Ladders of Oppression and Culture of Equity



# Ladders of Oppression and Culture of Equity



# Exposing and Undoing the Influence of Socialization

Martín-Baró, I. (1994). Toward A Liberation Psychology. (A. Aron, Trans.). In A. Aron & S. Corne (Eds.), *Writings for a Liberation Psychology* (pp. 17-32). Harvard University Press.

Cook, S. C, Todić, J, Spitzer, S., Quintana, V., Singletary, K. A., McGinnis, T., Patel, S., Montasir, S., Ducas, A., Martin, J., Glenn, N., Shaw, M., & Chin, M. H. (in press). Opportunities for psychologists to advance health equity: Using liberation psychology to identify key lessons from 17 years of praxis. *American Psychologist*. <https://doi.org/10.1037/amp0001126>

# Exposing and Undoing the Influence of Socialization

- /// Reorient from individual level to structural-level root causes of poor health.
  - Includes recognizing that all organizations of the healthcare system function as social drivers of health; public and private payers, health plans, care provider organizations and regulatory agencies.
  - Part of the root causes of health and healthcare inequities.

# Exposing and Undoing the Influence of Socialization

- // Problematize circumstances that produce poor health.
- // Utilize critical consciousness to engage in praxis to transform unjust conditions and power dynamics.
  - For example, embedding equity into mission, vision, and value statements
  - Create strong and accountable cultures within healthcare organizations that take action to improve internal and external diversity, inclusion, and equity.
  - Holding healthcare leadership accountable for making measurable positive change.

# Exposing and Undoing the Influence of Socialization

## ■ Denaturalize discrimination and oppression.

- Emphasize building the knowledge and skills necessary within healthcare organizations to identify discrimination and oppression operating outside of and within their work settings.
- Skills of power analysis and utilizing cross-discipline knowledge, including the knowledge of non-academic and non-system communities experienced in social justice and antiracism work.
- Requires self and group introspection, honesty, sometimes difficult conversations, and shifting power.



# Exposing and Undoing the Influence of Socialization

- ✓ Recover historical memory to understand the etiology of oppression and understand the lived experiences of those experiencing oppression.
  - Partner with the patients, families and members of excluded communities living with and impacted by health inequities
  - Learn their perspectives and experiences regarding the multi-sectoral healthcare system, its organizations, and the roles that they play.

# Exposing and Undoing the Influence of Socialization

- Use the recovered historical memory to deideologize everyday experience by critically questioning the imposed dominant messages regarding health and healthcare equity and why inequities exist.
  - Healthcare organizations and individuals within them self-reflect about their individual, professional, organizational socialization that creates and reinforces racism and white supremacy

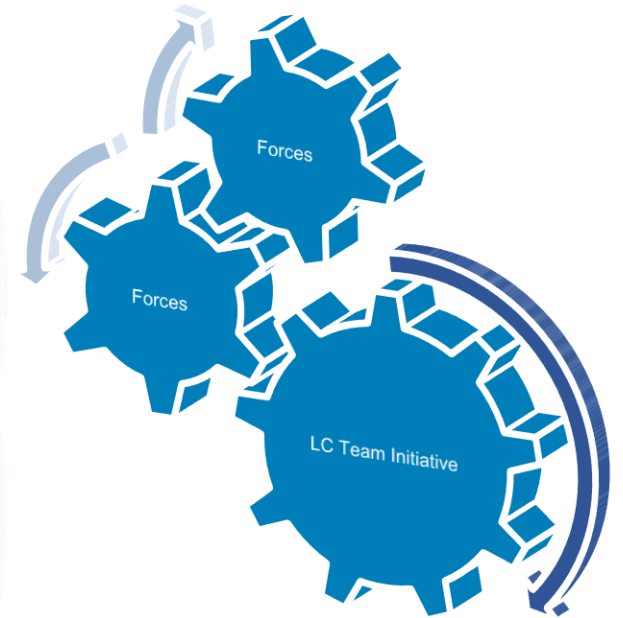
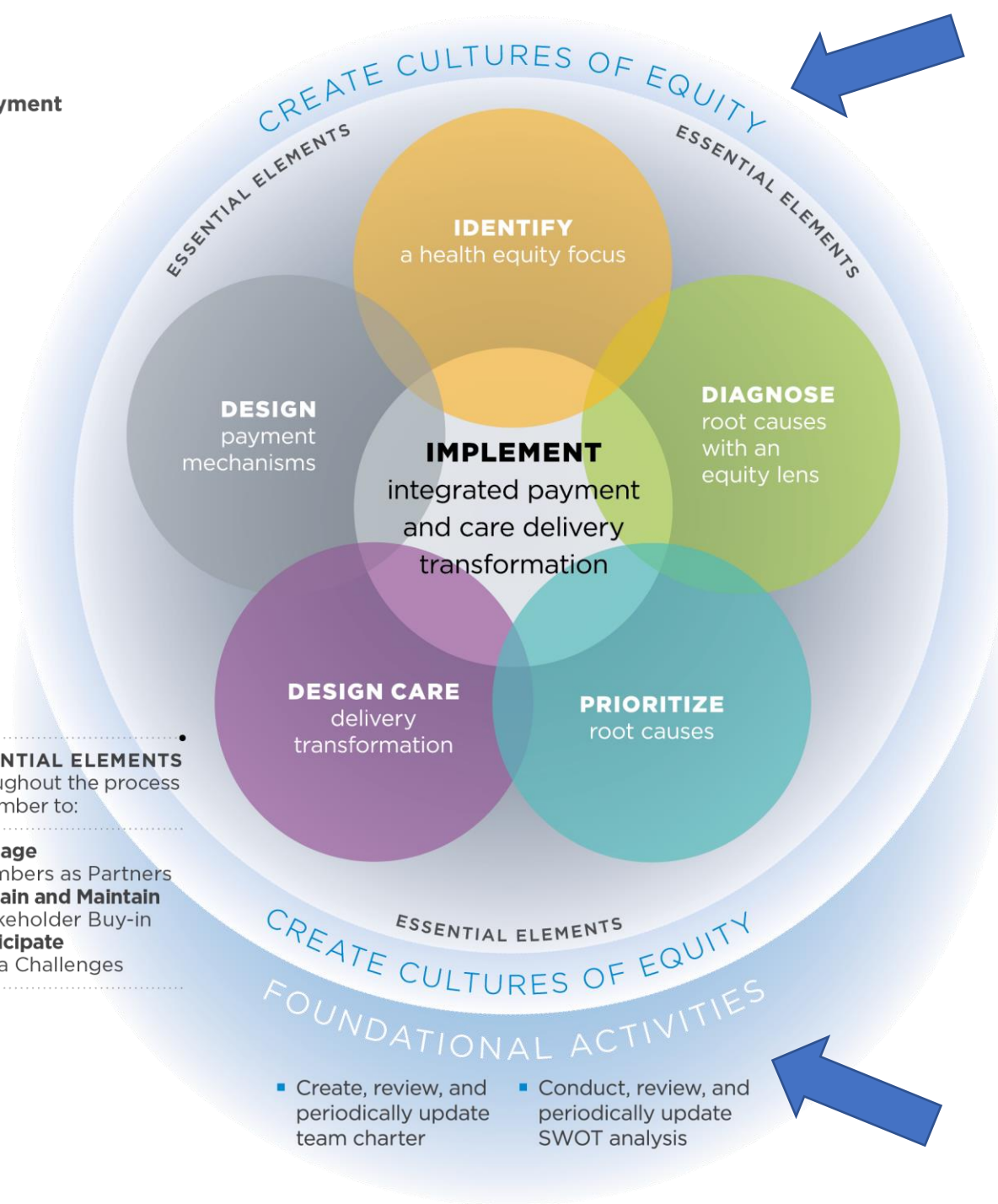
# Exposing and Undoing the Influence of Socialization

- ✓ See marginalized individuals and communities through a strengths-based perspective, valuing their resilience, knowledge, and lived experiences as critical for transforming unjust social structures and imagining new ones.
  - Partner with patients, family members, and community organizations to identify and eliminate the root causes of health and healthcare inequities
  - Value the lived experience and expertise of patients and communities living with health inequities at least as much, if not more than, those working within healthcare organizations and academic settings
  - Cede decisional authority and power to them
  - Provide equitable and adequate compensation for their lived experience and expertise.



**ESSENTIAL ELEMENTS**  
Throughout the process remember to:

- **Engage**  
Members as Partners
- **Obtain and Maintain**  
Stakeholder Buy-in
- **Anticipate**  
Data Challenges



- Create, review, and periodically update team charter
- Conduct, review, and periodically update SWOT analysis

# Next Steps

# Existing Learning Collaborative Teams

- /// Assess current status utilizing the Roadmap to Advance Health Equity as a guide.
  - Successes. Reinforce. Build-upon
  - Opportunities. Where has the system pushed-back on your forward momentum? Ameliorate.
- /// Verify and/or update current objectives, goals, and action plan

# Existing Learning Collaborative Teams

- // Shift to more tailored and adaptive technical assistance
- // Implementation, sustainability, key stakeholder status assessment
- // Move away (after current status assessment) from standard monthly meetings toward regular and tailored working sessions (versus reporting) with specific goals and objectives to move the project forward; tailored attendees.

# Existing Learning Collaborative Teams

- Increased focus on Foundational Activities, Partnering with Medicaid Members and CBOs, and enhancing Cultures of Equity. Might include:
  - Team structure and function
  - Relationship building/strengthening. Our meetings will start to look and feel different.
  - Integrating an antiracism approach
  - Begin working with our newest organizational partner, The Justice Collective



# New Learning Collaborative Teams

- // Ground and orient our new partnership.
- // Establish team goals and objectives.
- // Begin with a strong focus on Foundational Activities, Partnering with Medicaid Members and CBOs, and enhancing Cultures of Equity.
  - Develop team structure and function (or assess current status). Encourage a co-leadership model.
  - Start with and keep antiracism at the forefront
  - Relationship building/strengthening
- // Regular and tailored working sessions with specific goals and objectives to move the project forward; tailored attendees.

# Questions