



NATIONAL PARTNERSHIP FOR ACTION

to End Health Disparities



Office of Minority Health

Interdepartmental Tribal Justice, Safety, and Wellness Conference

Wednesday, June 16, 2010



U.S. Department of Health & Human Services



Discussion Points

1. About the Office of Minority Health
2. Relationship to the Indian Health Service, Office of Intergovernmental Affairs, and Administration for Native Americans
3. Patient Protection and Affordable Care Act
4. National Health Disparities Priorities





Office of Minority Health

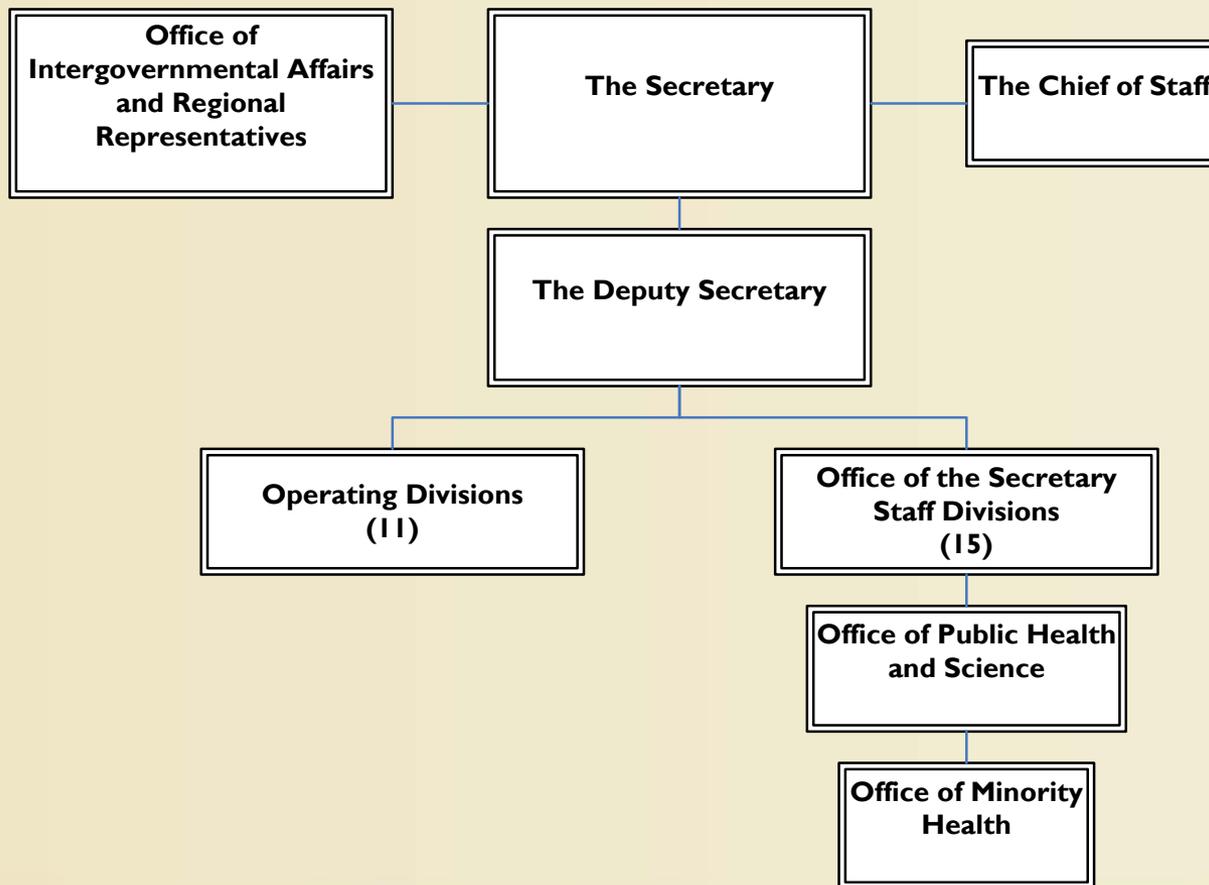
- Federal focal point for eliminating health disparities
- Advises HHS Secretary and Assistant Secretary for Health on policies/programs
- Works with Federal, state, Tribal, and local governments; community and faith-based organizations; academia; private sector; etc.
- Funds demonstration grant programs





Office of Minority Health

Organizational Location





Office of Minority Health

Grant Program Examples

- National Umbrella Cooperative Agreement Program
- AI/AN Health Disparities Program
- Community Partnerships to Eliminate Health Disparities
- Bilingual/Bicultural Demonstration Program





Office of Minority Health

Reauthorized by the Patient Protection and Affordable Care Act

- Deputy Assistant Secretary for Minority Health reports to the Secretary
- Retains/strengthens authorities for improving health/health care and eliminating disparities
- Provides authority to award grants, contracts, memoranda of understanding, agreements
- Mandates evaluation of health disparities activities and those supporting communities





Patient Protection and Affordable Care Act

Select Provisions

Six New Mandated Offices of Minority Health

- Agency for Healthcare Research and Quality
- Centers for Disease Control and Prevention
- Centers for Medicare and Medicaid Service
- Food and Drug Administration
- Health Resources and Services Administration
- Substance Abuse and Mental Health Services Administration





Patient Protection and Affordable Care Act

Select Provisions

Data Collection and Reporting Requirements

- Sets standards for data collection, analysis, reporting, availability, and sharing
- Ensures federally conducted/supported programs or activities collect data on race, ethnicity, primary language, and disability status
- Extends Medicare requirements to address health disparities to Medicaid and CHIP
- Data collected will be shared w/ FOMH & others





Patient Protection and Affordable Care Act

Select Provisions

Workforce Diversity & Cultural Competence

- National Health Care Workforce Commission (recommendations include needs of minorities)
- Health care workforce development grants that address diversity
- Grants to promote positive health behaviors through use of community health workers
- Education, training, loans, scholarships, and programs for faculty and disadvantaged students





Patient Protection and Affordable Care Act

Select Provisions

Community Transformation Grants

- Grants to implement, evaluate, and disseminate community preventive health activities to reduce chronic disease rates, prevent secondary conditions, address health disparities
- Eligible entities shall be a governmental agency
 - Indian Tribes, local governmental agency, network of community-based organizations, State or local non-profit organization





Economic Burden of Health Inequities

September 2009

Findings for Study Period of 2003-2006	
Combined costs of health inequalities and premature death in the U.S.	\$ 1.24 trillion
Eliminating health disparities for minorities would have reduced direct medical care expenditures	\$ 229.4 billion
Direct medical care expenditures for African Americans, Asians, & Hispanics – excess costs due to health inequalities	30.6 %
Eliminating health inequalities for minorities would have reduced indirect costs associated with illness and premature death	\$ 1 trillion

*Joint Center for Political and Economic Studies (Researchers and authors: LaVeist, Gaskin, Richard)





National Plan for Action

- Increase awareness of the significance of health disparities
- Strengthen and broaden leadership
- Improve health and life system experience
- Improve cultural & linguistic competency
- Improve coordination and use of research and evaluation outcomes





**Together we can.
Together we will.**

<http://www.minorityhealth.hhs.gov/>

