



THE ROLE OF INSURANCE IN ADDRESSING HEALTH INEQUITIES

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“Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.”

- Robert Wood Johnson Foundation

CareFirst is a partner in making meaningful change



Put a stop to injustices in our communities through tangible steps



Remove barriers preventing equitable health, well-being and safety for all



Engage in community events and discussions to listen and understand what we can do to end systemic racism in our communities



Be loud, clear, and constant in voicing our contempt against racism, hate, discrimination, and violence and boldly denounce racism throughout our communities



Work together, pursuing equality, justice and good health for all within our companies and communities

Health Inequities are Not a One-Dimensional Problem

Disparities in health care exist among racial and ethnic minorities and other underserved populations



69.4%
of Black and
67.1%
of Hispanic adults
with any mental illness reported
receiving no
treatment



In MD, the adult prevalence of
diagnosed diabetes is **highest**
(13.3%)
in Non-Hispanic Blacks, followed
by Non-Hispanic Asians (9.7%),
and Hispanics (9.4%), and lowest
in Non-Hispanic
Whites (8.0%)



MD's maternal mortality
rate from 2013-2017
ranked 22nd
among states, with the rate for
African Americans almost **4X**
that of Whites



Densely populated MD counties
were giving out 800 doses per
100,000 adults, compared with just
615 doses
in rural localities as
of mid-April

1 <https://www.samhsa.gov/sites/default/files/covid19-behavioral-health-disparities-black-latino-communities.pdf>

2 <https://phpa.health.maryland.gov/ccdpc/Documents/Diabetes%20Action%20Plan%20documents/Diabetes%20Action%20Plan%20June%201%202020.pdf>

3 <https://hsrca.maryland.gov/Documents/Modernization/SIHIS%20Proposal%20-%20CMMI%20Submission%2012142020.pdf>

4 <https://www.washingtonpost.com/dc-md-va/2021/04/30/vaccine-disparities-maryland-virginia-dc/>

It is the responsibility of health insurers to find ways to address social determinants of health and the best way to do that is to collaborate with the community, state, and national health leaders

Strategies include:



Collect data and analytics to measure disparities:

- Standardized data collection
- Uncover insights
- Transparent reporting
- Ongoing evaluation



Incentivize provider performance to embrace health equity:

- Value based care
- MedStar partnership
- Integration of data and systems



Invest strategically to improve social, economic and health outcomes:

- \$10M regional diabetes funding
- \$4.5M COVID-19 relief funding
- \$5M initiative to deliver personal protective equipment



Partner with community-based organizations, public sectors and others to improve community health:

- Baltimore City Public Private Partnership
- Cityblock Health
- Federally Qualified Health Centers



Advocate policy decisions at the state and federal levels to reduce disparities:

- Value based care
- Health Equity Resource Communities

“This work has just begun. We cannot accept this reality. We can do more. We must embrace the need to change. Each of us individually and collectively as a society.”

— Brian Pieninck, CEO, CareFirst



THANK YOU

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