Welcome to the webinar

Health Equity & COVID-19: Mitigating Impacts on Minority Populations

The Webinar will begin at 10:30

June 18, 2020









Health Equity & COVID-19: Mitigating Impacts on Minority Populations

COVID-19 Workshop Series

June 18, 2020









Housekeeping and Requests





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For today's call, everyone is muted.

- Please use the Chat box (right side of your screen) for questions and comments.
 - This webinar will be presented in an interview style, question and answer format and is intended to be conversational versus PowerPoint based. Although we have a variety of questions prepared, we want to answer YOUR questions – please type questions in the Chat box and send to "all participants"
- If we are unable to get to your question today, we will follow up with you
- Use to the Chat box to let us know who's here today your name, organization, state, and role

The IPRO QIN-QIO Who We Are





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The IPRO QIN-QIO

- A federally-funded Medicare Quality Innovation Network–Quality Improvement Organization (QIN-QIO)
- 12 regional CMS QIN-QIOs nationally

IPRO

New York, New Jersey, and Ohio

Healthcentric Advisors

Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont

Qlarant

Maryland, Delaware, and the District of Columbia



Working to ensure high-quality, safe healthcare for **20% of the nation's Medicare FFS beneficiaries**

Focus Areas Across Settings





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Nursing Homes	Community Coalitions
✓ Working with more than 1,500 of the	✓ Communities that encompass at least 65% of the Medicare beneficiaries in each state

- ✓ Members collaborating to improve outcomes for the communities they serve:
- Acute Care Hospitals
- Critical Access Hospitals
- Federally Qualified Health Centers
- Home Health Agencies

- Skilled Nursing Facilities
- Physician Practices
- Pharmacies
- Community Based Organizations

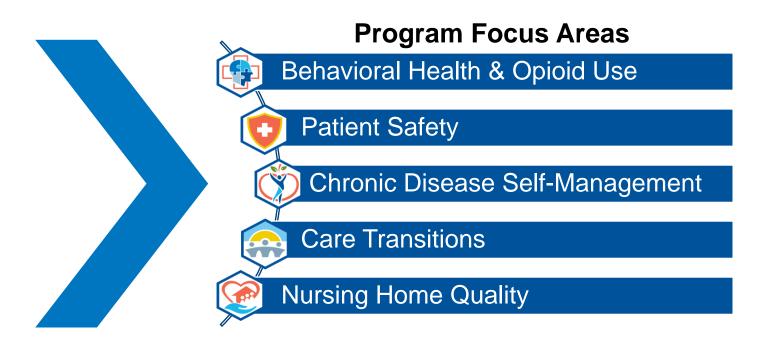
Cross-Cutting Priority Areas

- Health Information Technology
- Health Equity

nursing homes in

the region

- Trauma-Informed Care
- Patient & Family Engagement
- Rural Health
- Vulnerable Populations



The IPRO QIN-QIO







Quality Innovation Network – Quality Improvement Organizations (QIN-QIOs)

- Bring together healthcare providers, stakeholders, and Medicare beneficiaries to improve the quality of healthcare for targeted health conditions
- Work toward better care, healthier people & communities, and smarter spending
- Catalyze change through a data-driven approach to improving healthcare quality
- Collaborate with providers, practitioners and stakeholders at the community level to share knowledge, spread best practices and improve care coordination
- Promote a patient-centered model of care, in which healthcare services are tailored to meet the needs of patients









Laura Benzel

Project Manager & Health Equity Subject Matter Expert

Qlarant

Columbia, MD

Angel Santini

Vice President

Special Projects, Events, Marketing & Public Relations

Acacia Network

Bronx, NY

Michelle Matics

Assistant Vice President

Skilled Nursing Facility & Senior Services

Acacia Network

Bronx, NY









- Better understand how and why COVID-19 is disproportionately affecting minority and vulnerable populations
- Learn actionable strategies for mitigating the impact of the pandemic on these populations
- Hear how an organization is working to advance health equity in the face of this health emergency in New York City

7

COVID-19 Cases in the United States









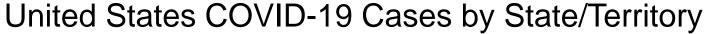


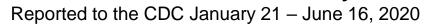
USA 2,104,346 TOTAL CASES

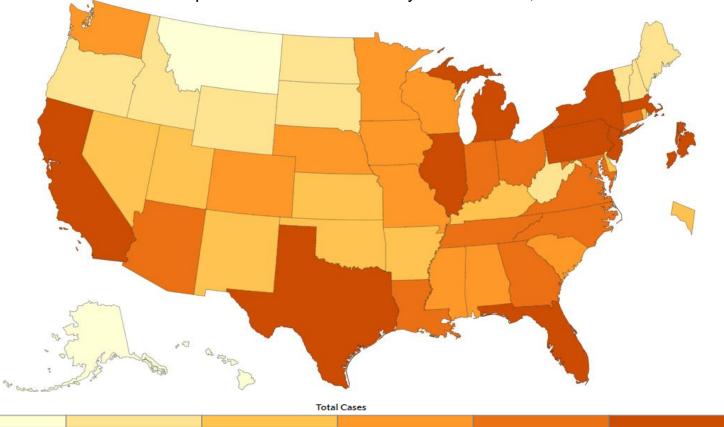
CDC | Updated: Jun 16 2020 5:45PM

Territories











COVID-19 Deaths in the United States











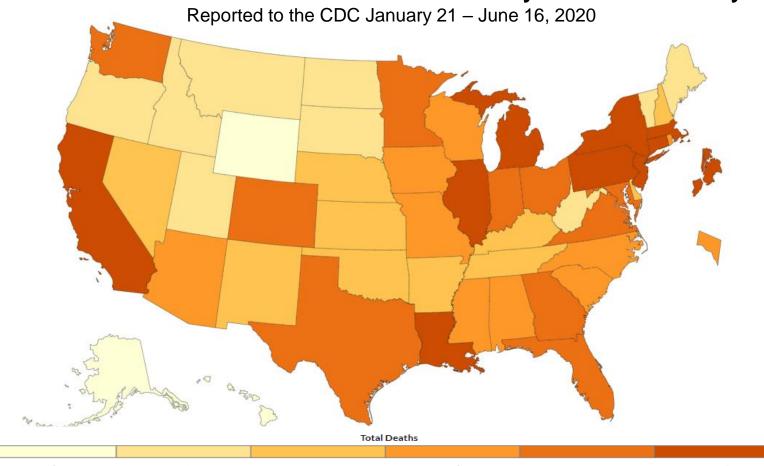
USA 116,140 TOTAL DEATHS

CDC | Updated: Jun 16 2020 5:45PM

Territories



United States COVID-19 Deaths by State/Territory





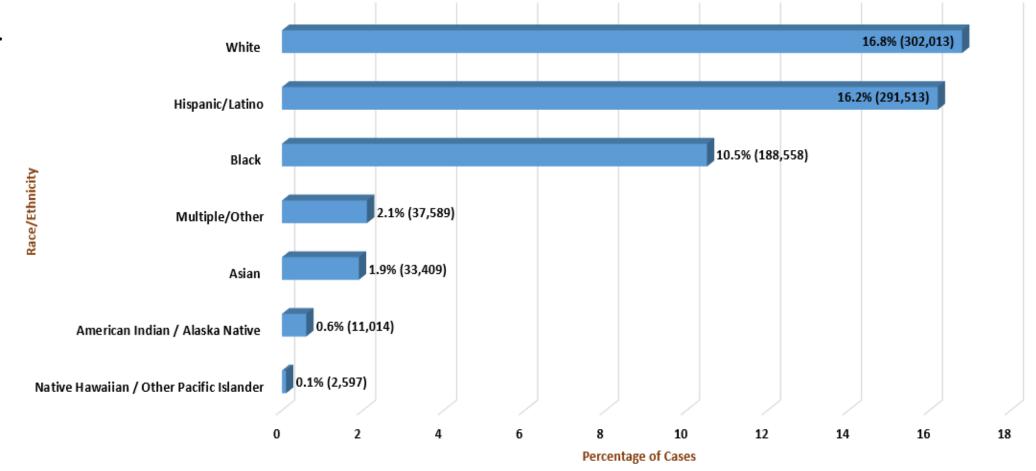
U.S. COVID-19 Cases by Race and Ethnicity





Race/ethnicity was available for 866,693 or 48% of cases

U.S. COVID-19 Cases by Race and Ethnicity CDC COVID-NET data from 1,802,416 cases (generated June 15th)







U.S. COVID-19 Deaths by Race and Ethnicity

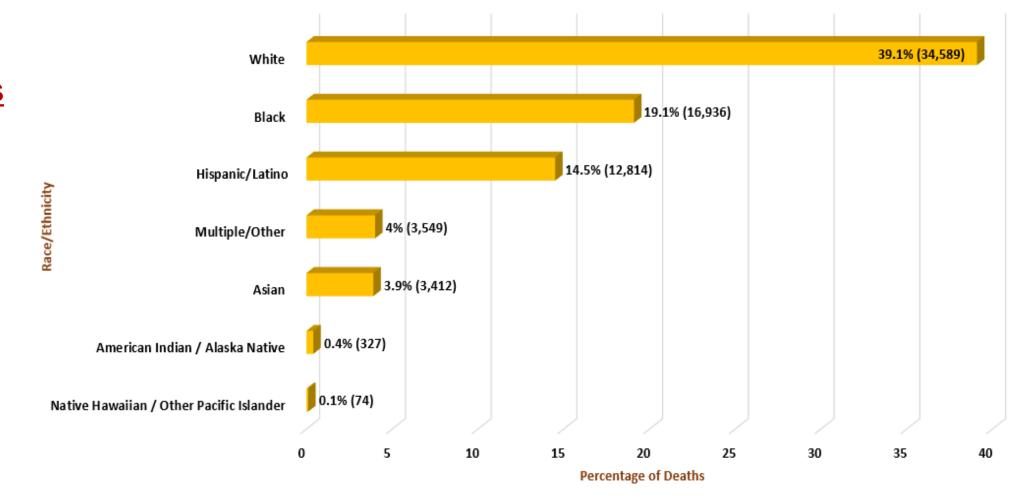




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Race/ethnicity was available for 71,701 or 80% of deaths

U.S. COVID-19 Deaths by Race and Ethnicity CDC COVID-NET data from 88,552 deaths (generated June 15th)





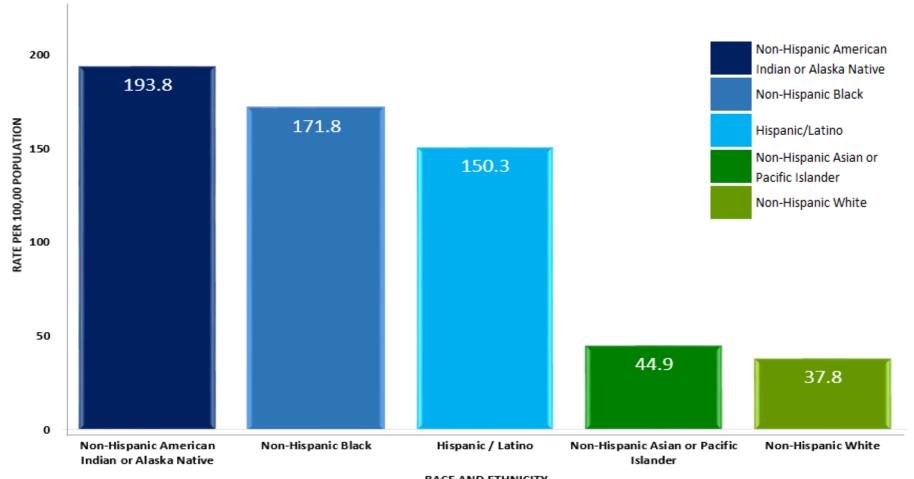
Age-adjusted COVID-19-associated hospitalization rates







Age-adjusted COVID-19-associated hospitalization rates by race and ethnicity CDC COVID-NET, March 1 – June 6, 2020







Blacks, Hispanics & Latinos Especially Impacted





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In Chicago, COVID-19 Is Hitting The Black Community Hard

Utah wasn't prepared to help Hispanics fight the coronavirus. And the cases have skyrocketed.

As coronavirus 'storm cloud' gathers, black church in Missouri braces for mourning

African Americans bear the brunt of Covid-19's economic impact

Grand Grand Grand Grand Weekly

Coronavirus cases in the nation's capital reveal a tale of two cities

Coronavirus disparity in Louisiana: About 70% of the victims are black, but why?

Covid-19's 'catastrophic' impact on Latino communities is driven by 'savage disparities,' leaders and lawmakers say



Other Vulnerable Groups Impacted by COVID-19





Rural Regions Persons with Disabilities

LGBTQ Community

Homeless

Incarcerated

Nursing Homes & COVID-19





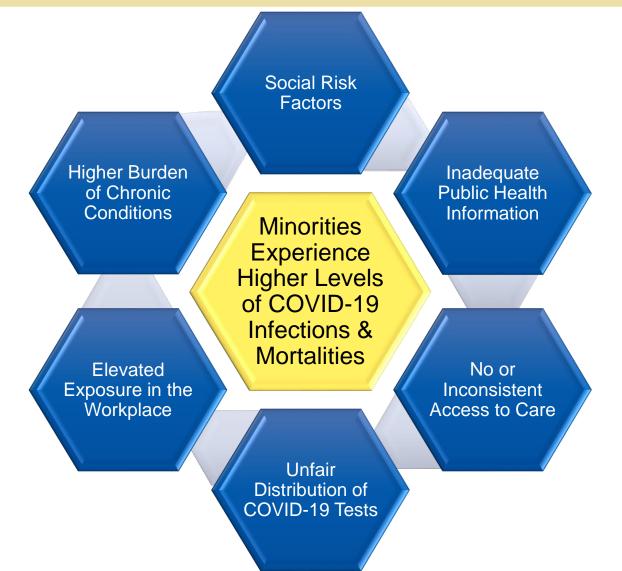


- As of Monday, CMS has reported 95,515 confirmed cases and 31,782 deaths in nursing homes (for data submitted as of week ending 5/31/2020)
- More than 60% of homes where at least 25% of the residents are Black or Latino have reported at least one coronavirus case
 - This is double the rate of homes where Black and Latino people make up less than 5% of the population
- Even homes with higher scores on the five-star rating system that serve mostly Black and Latino people have higher cases of coronavirus

Factors Contributing to Disproportionate Impact



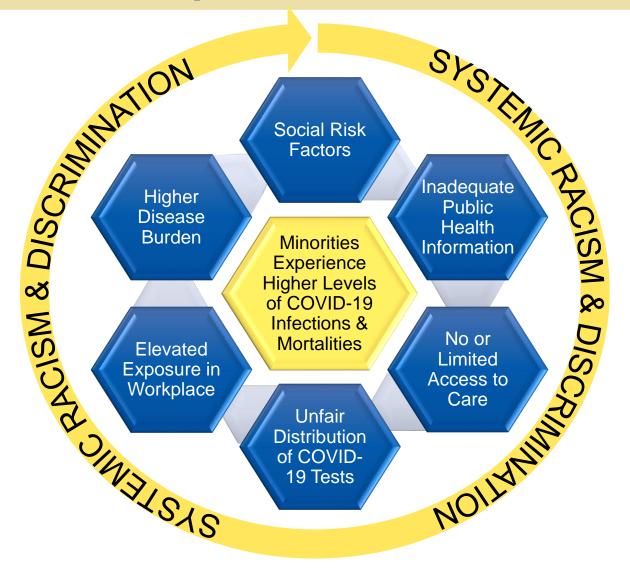




Factors Contributing to Disproportionate Impact







Actions to Mitigate the Risks of COVID-19 to Minority & Vulnerable Populations

Healthcare Providers



Actions Healthcare Providers Can Take





Short-Term Actions

- Be aware of the risks to minority and vulnerable populations
- Focus testing and resources in areas most impacted
- Implement standardized protocols
- Assess for implicit bias and address it
- Provide culturally and linguistically competent care
- Collect race, ethnicity, language, and social determinants of health data
- Connect patients to community resources to address social risk factors

Technology-Based Care







- Under the CARES Act, CMS broadened access to telehealth services
- Temporary measures to increase flexibility during the pandemic
- Any provider eligible to bill Medicare may use "non-public facing" applications
- Expanded the list of services that can be provided by telehealth

Actions Healthcare Providers Can Take





Longer-Term Actions

- Foster a culture of equity
- Systematically analyze data and implement quality initiatives to address disparities
- Encourage use of preventive services
- Implement a standardized system to address social determinants of health

Lessons from the Field

Angel Santini & Michelle Matics Acacia Network





Key Takeaways





- Reject the "here we go again" mentality
- Take action on those things you can change
- Another global public health crisis is likely to occur...let's prepare now

Resources







- Addressing Disparities in COVID-19 Treatment
 - CMS Office of Minority Health <u>COVID-19 Resources on Vulnerable</u> <u>Populations</u>
 - CDC COVID-19 in Racial and Ethnic Minority Groups
 - American Hospital Association <u>Updates and Resources on Novel</u> <u>Coronavirus (COVID-19)</u>
- National QIN-QIO Support Organization Bizzell <u>National Nursing Home Training</u> <u>Series</u>
- Implementing Telehealth and Telemedicine Service in My Practice
 - Download the <u>CMS General Telemedicine Toolkit</u>
 - Review this <u>AMA Telemedicine Quick Set-up Guide</u> in response to the COVID-19 national emergency.

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Slides 9 & 10:

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Slide 11 & 12:

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Slide 13:

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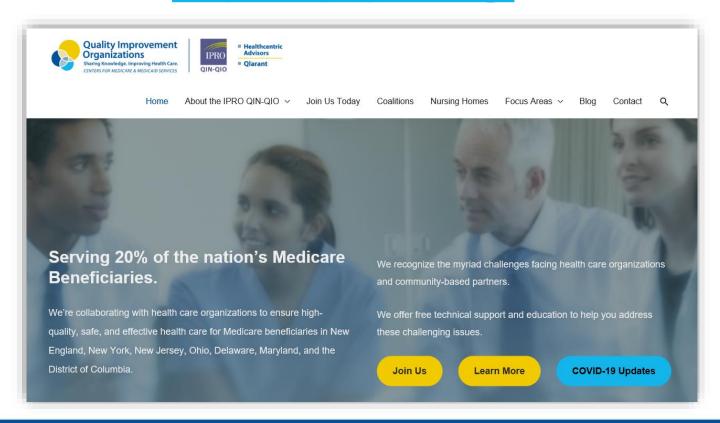
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Slide 17:

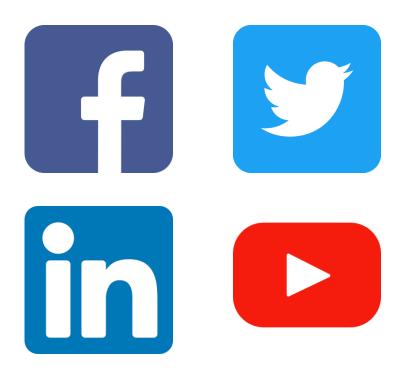
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This material was prepared by the IPRO QIN-QIO, a collaboration of Healthcentric Advisors, Qlarant and IPRO, serving as the Medicare Quality Innovation Network-Quality Improvement Organization for the New England states, NY, NJ, OH, DE, MD, and the District of Columbia, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents do not necessarily reflect CMS policy. 12SOW-IPRO-QIN-T1-A5-20-111



