Mercer Webcast

Impacting the Health of Your Hispanic Employees: Disparities, Costs, Trends

July 26, 2016
TODAY’S SPEAKERS

DR. DIEGO RAMIREZ
Mercer Global Health Management Consultant

Diego is a Global Health Management Consultant with more than 14 years of global experience. Diego worked in Mexico developing health management practices for the Latin America region, including wellness programs, benefits design, onsite clinic implementation and ROI studies. Diego leads Mercer’s initiatives in the area of innovative health management solutions. These focus on healthcare aspects such as diversity, women’s healthcare, LGBT benefits, elder employee care and job mobility. Diego is a Doctor of Medicine and has two master’s degrees. One of these degrees is in Health Administration and the other is in Strategic Marketing, currently he is based in San Francisco.

DR. JOSEPH R. BETANCOURT, MD, MPH
Director, The Disparities Solutions Center

Dr. Betancourt is also the Senior Scientist at the Mongan Institute for Health Policy, Director for Multicultural Education at the Massachusetts General Hospital and Associate Professor of Medicine at Harvard Medical School.

Dr. Betancourt received his Bachelor of Science from the University of Maryland, his medical degree from Rutgers-New Jersey Medical School, and completed his residency in Internal Medicine at the New York Hospital-Cornell Medical Center. Following residency, he completed The Commonwealth Fund-Harvard University Fellowship in Minority Health Policy, and received his Master’s in Public Health from the Harvard School of Public Health.

DR. ALFREDO RATNIEWSKI
Borrego Community Health Foundation Chief Medical Officer

Dr. Ratniewski is also the Medical Advisor to ConsejoSano. Borrego network of clinics serves a mostly Hispanic population and includes 6 clinics founded by Alfredo, which he later sold to the larger Borrego organization. He is a Professor in the Department of Community and Family Medicine at the University of California, San Diego and member of the California Medical Association, the San Diego County Medical Society, a Fellow of the American College of Physicians, and the American College of International Physicians.
AGENDA
WHAT WE’LL COVER TODAY

• A Business Imperative: Context for Employers
• An Academic Perspective: Improving Quality and Achieving Equity – Disparities in Healthcare for Hispanics and Hispanic issues
• Patient Perspective: Today’s Experience
• A Solution: ConsejoSano & Mercer Alliance
• Q&A
A BUSINESS IMPERATIVE
CONTEXT FOR
EMPLOYERS
DIVERSITY & INCLUSION
CREATE AN INCLUSIVE WORKFORCE TO DRIVE STRONGER BUSINESS OUTCOMES

- An inclusive organization:
  - Drives innovation and business success by respecting, valuing, and leveraging individual differences
  - Offers a competitive advantage that differentiates teams, products, services, and solutions
  - Helps people recognize, understand, and believe in a broad set of diverse dimensions
65% of Hispanics speak Spanish in the home

22 million Hispanic Employees and growing

In 2050 the US will be the largest Spanish-speaking country in the world

54 Million Hispanics In the U.S.

17% of the total population in the U.S. is Hispanic but only 5% of doctors speak Spanish
## Hispanic Employee View on Healthcare

<table>
<thead>
<tr>
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<th>U.S. Workforce</th>
<th>Hispanic Employees</th>
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<tbody>
<tr>
<td>Preferred source of treatment</td>
<td>Professional healthcare provider</td>
<td>Advice from family, self care or traditional medicine</td>
</tr>
<tr>
<td>Knowledge of U.S. healthcare system</td>
<td>Sufficient to get care</td>
<td>Basic or non-existent</td>
</tr>
<tr>
<td>Prevention and lifestyle</td>
<td>Health insurance covers prevention and access to health information</td>
<td>No insurance or preventive care not covered, limited access to health information</td>
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<tr>
<td>Interaction with healthcare providers</td>
<td>Expertise higher priority than relationship – 15 minute visit</td>
<td>Trust and relationship priority – 60–90 minute visit</td>
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<tr>
<td>Pharmaceuticals</td>
<td>Prescription required for many drugs and used to using them</td>
<td>Prescription not required for many drugs, used to OTC or home remedies</td>
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AN ACADEMIC PERSPECTIVE: IMPROVING QUALITY AND ACHIEVING EQUITY
HIGH-VALUE IN A TIME OF HEALTHCARE TRANSFORMATION

Value-based purchasing and health care reform will alter the way health care is delivered and financed; *quality* not quantity…

Increasing Access: Assuring appropriate utilization

- Linking to the PCMH, decreasing ED use & avoidable hospitalizations

Improving Quality: Providing the best care

- Importance of Wellness, Population Management

Controlling Cost: Focusing on the Pressure Points

- Importance of hot spotting and preventing readmissions, avoiding medical errors, and improving patient experience
- Banding together and risk-sharing through ACO’s
Increasing Diversity

Health care organizations need to prepare staff to work with patients and colleagues from diverse cultural backgrounds.

Current and Projected Resident Population of the United States

1998
- White, 72%
- African American, 12%
- Latino, 11%
- Asian American, 4%
- Native American, 1%

2030
- White, 60%
- African America, 13%
- Latino, 19%
- Asian American, 7%
- Native American, 1%

Diabetes-related Death Rate, 2014
Deaths per 100,000 Population

- White: 22.8
- Black: 50.1
- HISP/LTN: 33.6
- AI/AN: 50.3
- Asian/PI: 18.4
WHAT CAUSES THESE RACIAL/ETHNIC DISPARITIES IN HEALTH?

- Social Determinants
- Access to Care
- Health Care
RACIAL AND ETHNIC DISPARITIES IN HEALTH CARE
A HIGH-VALUE TARGET

• Racial/Ethnic disparities found across a wide range of health care settings, disease areas, and clinical services, even when various confounders (SES, insurance) controlled for

• Many sources contribute to disparities – no one suspect, no one solution
  – Navigation
  – Communication
  – Stereotyping
  – Mistrust

• Variations in care and quality, inefficiencies, costly care and poor outcomes are the epitome of low-value
IOM’s Unequal Treatment Recommendations

• Increase awareness of existence of disparities
• Address systems of care
  – Support race/ethnicity data collection, quality improvement, evidence-based guidelines, multidisciplinary teams, community outreach
  – Improve workforce diversity
  – Facilitate interpretation services
• Provider education
  – Health Disparities, Cultural Competence, Clinical Decision-making

Patient education, navigation, activation

• Research
  – Promising strategies, Barriers to eliminating disparities
A VIEW FROM THE FIELD

• Based on MGH and Disparities Leadership Program Data Collection (race/ethnicity, language, education, other)
  – 312 Individuals, 142 organizations, 77 hospitals, 45 health plans, 31 States

• Performance Measurement and Monitoring
  – Dashboards, Annual Reports that stratify quality measures

• Interventions
  – Interpreter Services
  – Cross-Cultural Communication Training of Doctors, Nurses, Staff
  – Health Care Coaches, Navigators, Community Health Workers
    - Focus on Wellness, Population Health, Readmissions, ED Use, Avoidable Hospitalizations
    - Limited resources to meet needs of growing Latino population
PREPARING FOR THE FUTURE

• Addressing variations in quality – such as racial/ethnic disparities in health care – will be essential going forward if we are to achieve equity, high-performance and high-value.

• This is not just about equity for equity’s sake – cost is key – as equity connects to all areas of quality:
  – Population Management
  – Transitions of Care and Readmissions
  – Appropriate Utilization and Avoidable Hospitalizations
  – Patient Safety
  – Patient Experience

• Healthcare organizations ignore this at their own peril… action will separate winners from losers…
HISPANIC PATIENT EXPERIENCE TODAY
THE PATIENT EXPERIENCE

Language
Culture
Values
Trust
**What is ConsejoSano?**

**ConsejoSano = Culturally relevant health engagement for Hispanics**

ConsejoSano is the leading Hispanic health platform that helps Spanish speaking employees increase their health by offering culturally and linguistically relevant health services.

We help companies effectively engage and communicate with their Hispanic employees, while helping them navigate the U.S. health system and change behaviors to lower costs.

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**Trusted Telehealth Services for Spanish Speakers**

- General Medical Advice 24/7
- Emotional Support & Stress
- Diabetes, Weight Loss and Nutrition
- Navigate U.S. Health System
Q & A
QUESTIONS

Please type your questions in the Q&A section of the toolbar and we will do our best to answer as many questions as we have time for.

To submit a question while in full screen mode, use the Q&A button, on the floating panel, on the top of your screen.

FEEDBACK

Please take the time to fill out the feedback form at the end of this webcast so we can continue to improve. The feedback form will pop-up in a new window when the session ends.
MAKE TOMORROW TODAY