

The Health Equity and Accountability Act of 2011

Main Sponsor: Congresswoman Barbara Lee (CAPAC Health Task Force Chair)

Additional Sponsors: Congresswoman Donna Christensen (CBC Health Brain Trust Chair),
Congresswoman Lucille Roybal-Allard (CHC Health and the Environment Task Force Chair)

Staff Contact: Jirair Ratevosian (Jirair.Ratevosian@mail.house.gov) Congresswoman Lee; Britt Weinstock (Britt.Weinstock@mail.house.gov) Congresswoman Christensen; Debbie Jessup (Debbie.Jessup@mail.house.gov) Congresswoman Roybal-Allard

Building on the Advancements of the Affordable Care Act

Over the past five Congressional cycles, the Congressional Tri-Caucus, made up of the Congressional Asian Pacific American Caucus (CAPAC), the Congressional Black Caucus (CBC) and the Congressional Hispanic Caucus (CHC) has introduced the Health Equity and Accountability Act (HEAA), a comprehensive bill to reduce ethnic and racial disparities. The focus of these bills has been to provide federal support, resources and policies to tackle disparities in health status and the health care system at all levels. H.R. 2954 is the updated version of HEAA in the 112th Congress and builds on the foundation for health equity laid by the Affordable Care Act (ACA) and the American Recovery and Reinvestment Act (ARRA), which incorporated the Health Information Technology for Economic and Clinical Health (HITECH) Act.

Scope of the Bill in the 112th Congress

H.R. 2954 is based on H.R. 3090 (from the 111th Congress) adding new titles to effectively work with the health gains in the ACA. The bill is made up of ten titles proposing a wide spectrum of racial and ethnic health disparity elimination initiatives:

1. Title I Data Collection and Reporting— seeks to increase resources for the collection and reporting of health data, and increase its precision and accuracy.
2. Title II Culturally and Linguistically Appropriate Health Care— focuses on ensuring real, on the ground access to high quality care by enhancing language access services and culturally competent care in the health care delivery system.
3. Title III Health Workforce Diversity, Expansion and Training— aims to create a pipeline and new training opportunities for professional and allied health care workers that can effectively serve minority populations.
4. Title IV Improvement of Health Care Services— includes proposals to remove barriers to health care coverage and access and maximize the positive impact of federal investments in health care in minority communities.
5. Title V Improving Health Outcomes for Women, Children and Families— addresses certain health disparities facing women and children, and promotes programs that support healthy family formation.
6. Title VI Mental Health— incorporates strategies to address mental and behavioral health issues affecting minority communities.

7. Title VII Addressing High Impact Minority Diseases — proposes focused approaches to combat a variety of diseases and conditions, including includes Cancer, Diabetes, HIV/AIDS, that have a disparate impact on racial and ethnic minorities.
8. Title VIII Health Information Technology— seeks to ensure that communities of color benefit from the rapid advances in health information technology and new investments in HIT infrastructure that will serve as the foundation for improving quality, effectiveness and efficiency in our future health care system.
9. Title IX Accountability and Evaluation— strengthens HHS oversight in ensuring that programs continue to reduce health disparities.
10. Title X Prevention & Social Determinants of Health— builds upon the ACA’s historic investment in prevention to bolster primary as well as secondary prevention efforts and targets resources to communities striving to overcome negative social determinants.

Why is this bill still needed?

The Affordable Care Act and Department of Health and Human Services initiatives such as the National Partnership for Action to End Health Disparities and the National Stakeholder Strategy for achieving Health Equity, two strategic plans that represent the country’s first coordinated roadmap to reducing health disparities, are historic advances in this country’s effort to create a healthier America. H.R. 2954 is a legislative complement to these efforts by providing the tools necessary to address these health inequities and ensure that health and health care disparities elimination are prioritized. Addressing health disparities will also help curb the increasing cost of health care. In a 2009 report titled The Economic Burden of Health Inequalities in the United States, the overall costs of health disparities were estimated to be \$1.24 trillion over a three-year period.

H.R. 2954 has broad support

We have worked closely with national advocacy, professional and association groups to craft the Health Equity and Accountability Act of 2011. The bill has the support of many organizations representing minority communities and their allies. Additionally, in the last Congress more than 55 members of Congress signed on as original co-sponsors.