

Leadership Team

Amie Shei President & CEO, The Health Foundation of Central Massachusetts

Elsie Taveras Chief Community Health Equity Officer, Mass General Brigham

Filaine Deronnette VP-at-Large, 1199SEIU United Healthcare Workers East, and Executive VP, Massachusetts AFL-CIO

Jeffrey Sánchez Principal, Sánchez Strategies LLC

Juan Fernando Lopera Chief Diversity, Equity, & Inclusion Officer, Beth Israel Lahey Health

Manny Lopes Interim CEO, Fenway Health

Michael Curry President & CEO, Massachusetts League of Community Health Centers

Nancy E. Norman Medical Director of Integration, Massachusetts Behavioral Health Partnership

Rosa Colon-Kolacko President and Founder, Global Equity Learning Health Policy Commission 2024 Health Care Cost Growth Benchmark Comments March 15, 2024

The Health Equity Compact is pleased to submit testimony for the Health Policy Commission (HPC) Health Care Cost Growth Benchmark Hearing. As a group of over 80 leaders of color who aim to advance health equity together in Massachusetts, we commend HPC's efforts to analyze and address the impact of rising health care costs, which are acutely felt by communities of color of Massachusetts. Compact members are high-level executives and experts from a diverse set of health, business, labor, and philanthropic organizations, including hospitals, health centers, payers, academic institutions, life sciences, and public health. Our collective experiences and insights into the health care needs of Massachusetts residents, especially those in underserved and marginalized communities, uniquely positions us to offer valuable perspectives on the effects of rising health care costs in Massachusetts.

Our state is home to world-class health care institutions and the highest insured rate in the country, resulting in our recent ranking by the Commonwealth Fund as the nation's #1 health system. Despite the impressive performance overall, Massachusetts is not immune to the insidious ways that racism has resulted in disparate health outcomes for marginalized populations. Black individuals are almost 2x more likely to die during or within one year of childbirth compared to White individuals, and Roxbury residents have a life expectancy that is 23 years shorter than that of Back Bay residents. There are opportunities to address these inequities in a variety of domains—government, data, workforce and health care delivery—and the impact of policy change in any one domain will be magnified by concurrently addressing multiple domains, as the Compact's omnibus bill, An Act to Advance Health Equity, (H.1250 / S.799) seeks to do.

Addressing the high costs of health care is an important component of advancing health equity. The Compact was pleased to see HPC call attention to the inextricable nature of affordability and health disparities at its 2023 Cost Trends Hearing. The Community Voices panel featuring stories from leaders in marginalized communities underscored the human toll of cost-prohibitive premiums and out-of-pocket costs – from individuals delaying care until absolutely necessary, ultimately leading to costlier last-minute care and poorer health outcomes, to parents having to make the difficult choice between paying premiums for their child's health insurance or paying rent. Even with health insurance, Black and Hispanic people struggle to find a provider that accepts their insurance type at a higher rate than White people, ³ leading many to forgo necessary medical care. Compact member Sheila Och shared the experience of a patient who stated that that she was lucky to receive care for her depression at Lowell Community Health Center, but that access to such lifechanging care "shouldn't be about luck." In a state known for pioneering health reform, we have an opportunity and responsibility to lead the nation once more. By intentionally crafting policies that confront the challenging choices that residents of color are disproportionately faced with as a result of high health care costs, we can ensure that health equity, not luck, shapes the health outcomes for all Massachusetts residents.

¹ U.S. Healthcare Rankings by State 2023 | Commonwealth Fund

² https://www.wbur.org/news/2023/05/11/boston-life-expectancy-gap-back-bay-roxbury

³ https://www.bluecrossmafoundation.org/sites/g/files/csphws2101/files/2021-12/Health_Equity_Primer_Dec%202021_final_0.pdf



The 2024 *Performance of the Massachusetts Health Care System* report from Center for Health Information and Analysis (CHIA) quantifies the unequal burden of rising health care costs: while 28.1% of White residents experienced unmet health care needs in their family due to cost, that percentage was 37% for Black residents and over 45% for Hispanic residents. As Compact cofounder Juan Fernando Lopera stated at the Cost Trends Hearing, "there is no equity in averages," and the Compact commends CHIA and HPC for stratifying affordability findings by race and ethnicity. This stratification allows for identification of the disparate impact of rising health care costs on marginalized populations, which should inform the development of solutions moving forward. The ability to perform such analyses underscores the value of collecting standardized health equity data, a shared priority of the Compact, CHIA, and HPC.

We strongly recommend that a racial health equity lens is utilized in the development of policies to address the Commonwealth's urgent health care affordability crisis, including collecting data to measure outcomes by demographics. By supporting the needs of those most impacted, this "health equity in all policies" approach will influence systems-level change that will benefit the Massachusetts health care system so all residents have an equal opportunity to achieve their greatest level of health.

Amie Shei Elie Pen Hand Dant 183. Menne Jones Well al Cenny Karmany MD, MPH Row M. Colonx

Sincerely,

The Health Equity Compact