

Health Equity and Accountability Act Provisions Passed into Law

For over a decade, the Health Equity and Accountability Act (HEAA) has been introduced each Congress by members of the Congressional Black, Hispanic and Asian and Pacific American Caucuses. HEAA serves as a key marker of how health equity advocates in Congress and in policy organizations would comprehensively address disparities. However, HEAA also has been an important source of legislative proposals that have been passed into law. This memo describes provisions of HEAA that were passed into law as part of the Affordable Care Act, the Children's Health Insurance Program Reauthorization Act and the Health Information Technology for Economic and Clinical Health Act.

Affordable Care Act

Sec. 301 of HEAA 2009 required that entities funded by HHS collect and report detailed race, ethnicity and language data. This was included in Section 4302 of the ACA.

Sec. 401 required the creation of a federal agency plan to eliminate disparities and improve the health of minority populations. This was included in Section 3011 of the ACA and published as part of the National Strategy for Quality Improvement in Health Care.

Sec. 404 elevated the Office of Minority Health to the Office of the Secretary of HHS and instructed it with overseeing the agency's work on disparities. This was accomplished through Section 10334 of the ACA.

Sec 406-408 expanded new individual offices of minority health within HHS. Section 10334 accomplished this, creating OMHs in Centers for Disease Control and Prevention, the Health Resources and Services Administration, the Substance Abuse and Mental Health Services Administration, the Agency for Healthcare Research and Quality, the Food and Drug Administration, and the Centers for Medicare & Medicaid Services

Sec. 413 elevated the National Center for Minority Health and Health Disparities to a National Institute. This was accomplished in Covered in Section 10334 of ACA

Children's Health Insurance Program Reauthorization Act of 2009

Sec. 102 created federal reimbursement for culturally and linguistically appropriate services under Medicare, Medicaid and the State Children's Health Insurance Program. Enhanced reimbursement for language services was included in the Children's Health Insurance Program Reauthorization Act of 2009 in Section 201

Health Information Technology for Economic and Clinical Health (HITECH) Act, part of the American Recovery and Reinvestment Act of 2009

Sec. 307 funded health information technology grants. Various grants to implement health information technology were included in the HITECH Act Section 13301.

Sec. 308 required an HHS study of health information technology in medically underserved communities. Reports on the adoption of health information technology in medically underserved was included in the HITECH Act Section 13101.

Sec. 309 Health information technology in medically underserved communities. Specific attention to the needs for health information technology in medically underserved communities was addressed in the HITECH Act Sections 13101 and 13301.