

Summary of Substantive Changes for Health Equity and Accountability Act (HEAA) of 2018

Sec. 3 Findings

- Reordering of findings section and related re-numbering.
- Adds new reference to AHRQ report on continuing presence of health disparities.
- Adds new reference to ASPBE, National Academies and National Quality Forum report of impact of disparities and adjustment in payment delivery reform.

Title I – Data Collection and Reporting

- Updated language on electronic data for patient records systems to align with standards developed by the Office of the National Coordinator for Health Information Technology as part of the Meaningful Use program
- Included counties and municipalities as levels of government for which data should be disaggregated
- Included other HHS officials in addition to the Secretary as designated executors of key provisions
- Re-designated language about technical assistance as a new separate section that makes grants available to help eligible entities improve data collection
- Incorporated section about oversampling AA and NHPI populations into the first section of the title and expanded the provision to address the need for more granular data about populations experiencing health disparities related to race, ethnicity, primary language, sexual orientation, disability status, gender identity, and socioeconomic status
- Updated and streamlined language around creating a repository of health disparity data to clarify that the data should be housed in a centralized electronic repository that is available to the public (an example of such a repository is www.healthdata.gov)
- Removed redundant provisions that were passed as part of other legislation

Title II – CLAS

- Change name of title to include health and health care.
- Adds reference to Americans with Disabilities Act to explicitly note that language access includes access for persons with disabilities.
- Most changes are to make it consistent with existing laws and rules regarding definitions, including Section 1557 regulations on translation, interpretation which many HEAA CWG groups have weighed in on.
- Reinforces language about access to quality interpreters
- Added Sex and Gender Minorities to the title.
- Added appropriations.
- Added community health worker language.

Title III – Workforce

- Added in Veterans health admin since they have GME funding.

- Added data collection and tracking of where racial/ethnic minorities practice to support diverse workforce.
- Hispanic serving health professional schools as a regional approach. This was already in the bill and just added language to support.
- Added STEM grant program criteria that includes mentoring under represented pre-health professional students and giving financial assistance.
- Added community navigation, peer support and patient navigation in scholarships Sec. 306(c).
- Added reference to AAMC Health care utilization equity model which predicts a physician shortage of 96,000.
- Added new reference to importance of immigrant health workers.

Title IV – Improvement to Healthcare Services

- The name of the title was changed to “Improving Healthcare Access and Quality”
- The title was reordered as below:
 - Subtitle A: Expansion of Coverage
 - Subtitle B: Expansion of Access
 - Subtitle C: Advancing Health Equity through Payment and Delivery Reform (NEW)
 - Subtitle D: Health Empowerment Zones
- Subtitle A: Expansion of Coverage
 - All existing sections were maintained and renumbered to reflect new organization of the title.
 - Sec. 411: Add “shared decision making.”
 - Sec. 413 Study of the uninsured: add oral health coverage and clarified annual enrollment period and legislative changes to PPACA; clarify use of reporting cannot be used for immigration enforcement
 - Sect 417: Removing Medicare barrier to healthcare: Maintain standard as lawfully present.
 - Added new sections, clarifying that HEAA ends the Medicaid bar for Compact of Free Associations citizens, requiring Medicaid be suspended rather than terminated for juveniles and removing the Medicaid cap for territories.
- Subtitle B: Expansion of Access
 - Added Protecting Sensitive Locations Act as new Sec. 410
 - Sec. 431 REACH grants: Add oral health
 - Sec. 437: Community Health Centers: Add interpretation and translation
 - Sec. 440 Sense of Congress: Clarifies sense of congress as CHIP MOE
 - New Sec. Protection of Offices of Minority Health
 - Sec. 447: Interpretations: Codifies Section 1557 standard for qualified interpreter.
 - Sec. 450: Section 450, page 278 –Added dental hygienists to the GAO study

- Subtitle C: Advancing Health Equity through Payment and Delivery Reform (Sinsi and Amina)
 - Creates new Subtitle C focused on payment, quality and delivery reform efforts and intersection with health equity.
 - Sense of Congress with addition of social determinants of health language.
 - MACRA related issues
 - Provision supporting safety-net providers

Title V – Improving Health Outcomes for Women, Children and Families

- Abortion: No new language about abortion coverage and services. Instead, members of the Title V committee will work towards Hill education efforts to include such language in a future Congress.
- Multiple additions to language and edits to existing language to make Title V more LGBTQ inclusive. EX) Replace “women” with “persons” after numerous references to “pregnant.”
- Makes edits to existing title names and text references to avoid patronizing women.
- Added Youth Access to Sexual Health Services Act which provides grants to increase access to repro services (include. LGBTQ and immigrant youth).
- Added Real Education for Healthy Youth Act: Gives criteria for federal funding for comprehensive sex Ed and make sure does not stigmatize LGBTQ youth. Eliminates abstinence only until marriage programs.
- Adding Prevent Maternal Death Act to replace Sec. 505 in Title V which would create state review committees and funding for maternal mortality disparities.
- Updating 2014 Quality Family Planning Guidelines to include health disparities and dissemination.
- Adds the EQUIP Act, which establishes a program promoting pregnancy intention screenings

Title VI – Mental Health

- Medicare payments for certain mental health counselors
- Grant program via SAMSHA that was in 21st Century Cures Act is recommended to be deleted since already authorized and funded and more of an approps issue.
- Broaden language to include agencies such as PCORI
- Adds the Mental Health in Schools Act, which provides grants to school districts for mental health care.
- Adds language and findings on mental health stigma, particularly in Asian and Pacific Islander Communities.

Title VII – Minority Diseases

- Adding Sickle Cell (HR 2410) and TB after connecting w/ stakeholder groups.
- Updating scientific data and research
- Clarifies coverage of tobacco cessation in Medicaid and private coverage.
- Adds the “Mental Health in Schools Act”
- Adds findings related to mental health stigma
- Adds requirement SAMSHA to address mental health stigma in Asian American, Native Hawaiian and Pacific Islander populations.

Title VIII – Health Information Technology

- Technical edits to update language of electronic health records to Certified Electronic Health Record technology, as used in ONC standards.

Title IX – Accountability

- Added a finding related to aligning data collection with healthy people 2020 goals and pursuit of justice.
- Reminder about the suggested defunding of the REACH program (suggestion to strengthen language pending the outcome of FY18 funding after Dec 8th deadline)

Title X – Social Determinants of Health

- Specific language/statistics on how lead poisoning disproportionately affects communities of color, along with an action plan
- Expansion on the definition of the term “community health worker”
- Updated statistics on the relationship between education and tobacco use
- Replacing acronym LGBTQ with LGBTQIA to include intersex and asexual individuals
- Shift from research on relationship between built environment and health outcomes to implementation of research findings
- Emphasis on increasing access to medical facilities.
- Repeals the Dickey amendment, allowing for and providing funding for, the CDC the conduct research into the impact of gun violence.