

# Medicare Advantage health equity focus

Decrease members with limited English proficiency reporting food insecurity

## DEI Framework

### 1 Cultural humility, bias and discrimination training

Different is not wrong. We work to recognize data trends representative of member needs and value them.

### 2 Clean data collection and analysis

Engagement data collection from partners and vendors with demographic data of COA is a key component to addressing food insecurity for members.

### 3 Culturally specific communication

We print communications in the languages spoken by members and increase access to interpreters for member support and in the network of grocers.

### 4 Community and member feedback

Alongside our member Advisory Council feedback, COA builds relationships with culturally specific grocery stores to increase locations where the benefits are accepted, and we track how benefits are used.

### 5 Health care provider diversity

We expand our health care providers to a more inclusive wellness lens. Culturally specific grocery stores are another major component of access to foods members outside of the dominant culture enjoy.

### 6 Leadership and accountability

We invest in new full-time employees, including a Health Equity Diversity & Inclusion Specialist and a Member Advisory Council Coordinator who ensures the language needs of members remain a priority.

### 7 Accessible services

Through cluster mapping of languages spoken and geographic location, we target outreach to culturally specific grocers, expanding our network by three stores since DLP started.

## Evaluation

#### Evaluation metrics

- Conduct pre- and post-training surveys to assess changes in provider knowledge, attitudes and self-reported practices regarding cultural competence.
- Gather feedback from providers on the relevance and impact of the training programs.

#### Patient satisfaction scores

- Monitor patient satisfaction scores through surveys focusing on aspects such as respect, communication and cultural sensitivity.
- Utilize metrics from tools like Press Ganey or the CG-CAHPS (Clinician and Group Consumer Assessment of Healthcare Providers and Systems) survey.

#### Health disparity metrics

- Track metrics on health outcomes across different demographic groups to identify any reduction in disparities.
- Use data to measure improvements in adherence to treatment plans, preventive care uptake and chronic disease management.

#### Clinical outcomes

Compare clinical outcomes pre- and post-implementation of training initiatives, focusing on metrics such as readmission rates, ER visits and control of chronic conditions (e.g., HbA1c levels in diabetes).