EQUITY IN DIABETES CARE
UNITED HEALTHCARE COMMUNITY PLAN OF OHIO

- Culturally Sensitive care will improve member experience
- Cultural Competence of the Provider Network is vital to achieving Equity
- Linguistically Appropriate—language access through the use of interpretation services
- Measure and manage satisfaction

Highly prevalent in Ohio’s diverse Medicaid population
- Good Model for Chronic Disease
- National Data Shows Disparities in access to care and care delivery

Improve HEDIS rates in minority populations
- Reduce Undesirable Outcomes—Less Blindness, Renal Failure, fewer cardiovascular events, amputations

Enhance Care Management and engage hard to reach, vulnerable members
- Improve Access to culturally and linguistically appropriate services

Informed by data from dashboard
- Align with business objectives
- Integrate disparities analysis into development of model of care

Improve Provider Satisfaction by better coordinating care through care management
- Reduce Care Manager Burn-Out by improving access to translation services in the field
- Cultural Sensitivity Coaching to address implicit bias and improve communication skills

Dashboard based on HEDIS Data—most reliable data set at our disposal
- Incorporate Claims Data—to address cost
- REL Data—from claims and eligibility files to get complete picture

Increase PCP Visits and where necessary, outpatient specialist services
- Reduce ED and IP Utilization for ambulatory sensitive conditions
- Avoid Complications related to uncontrolled diabetes

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