





Making conversation

Value of an equity-based health improvement strategy

Welcome to the first installment of "Making Conversation!" My name is John Elliott and I am a business leader within UnitedHealthcare National Accounts focused on creating innovative solutions for groups of employers. My team is known as Collaborative Ventures Group and our largest, and longest tenured relationship is with Health Action Council, a national business leader regarding the nexus of business and health.

Collaborative Ventures Group and Health Action Council are working together on a new information series designed to start meaningful conversation with self-funded employers to help mitigate the health risk of their employees and their families. Our "Making Conversation" series will be a monthly publication where we share some of the insights from our aggregated analytics of 80 employers representing more than 320,000 members. Our goal with this series is to foster meaningful dialogue to help support your health improvement and cost management strategies.

What is an equity-based health improvement strategy?





For me, this graphic from the Robert Wood Johnson Foundation really clarifies the concept of equality versus equity. From a quality-of-life perspective, we want as many people as possible to experience the thrill and health benefits of a bike ride. To achieve this goal, we need to recognize the individual circumstances and the physical needs of those that want to enjoy a bicycle ride are very different. A single make and model of bicycle will not get us to our goal.

As we apply this bicycle analogy to your health improvement strategy, my suspicion is that many employers take an equality-based approach rather than an equity-based approach. The simple explanation is that employers do not have the data infrastructure to understand the differences within their employee populations. Social Determinants of Health information and aggregated analytics help to provide the opportunity for developing a data-driven health improvement strategy tailored to relevant populations. By providing the correct bicycle to the right individuals, you may be able to help employees achieve their health goals, be more productive and lower organizational costs.

Looking at diabetes through an equity-based perspective

Our data and analytics show that diabetes is a condition where the prevalence, cost and outcomes for certain populations are impacted by social conditions. Here are some key results from the UnitedHealthcare and Health Action Council 2021 white paper¹ that shows the variation that exists for those living with diabetes.



Geography

Health Action Council's highest rates of diabetes are in areas known for high diabetes prevalence. Do your employees live and work in these diabetic hot spots?



Income Disparity

Income Disparity: Those making less than \$100,000 per year have a 47% higher rate of diabetes on average than those that make more than \$100,000 per year.¹ Are diabetics concentrated in a certain job type in your organization?



Ethnic Disparity

Health Action Council's diabetes rates are 43% higher for Asian populations than the average.¹ How does the ethnic composition of your workforce influence your approach to managing diabetes costs?

Continuing the Conversation

Together, UnitedHealthcare and Health Action Council have been studying the impact of community outcomes and social determinants for the past six years and have developed an assessment tool to help self-funded employers. We welcome the opportunity to continue this conversation with your organization and help assess what social opportunities may be present in your population and discuss options to help increase health equity. We are also interested to learn the strategies you have deployed and are considering to create a more equity-based approach to health improvement and risk mitigation. If you want to continue this conversation, please feel free to contact me or Kevin Gregory to schedule time.

¹ dlife.com/diabetes-rankings-in-the-united-states/



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