



Joint Medicaid Oversight Committee

July 13, 2023



CORE FUNDERS



Evidence-informed policy



Data in
context

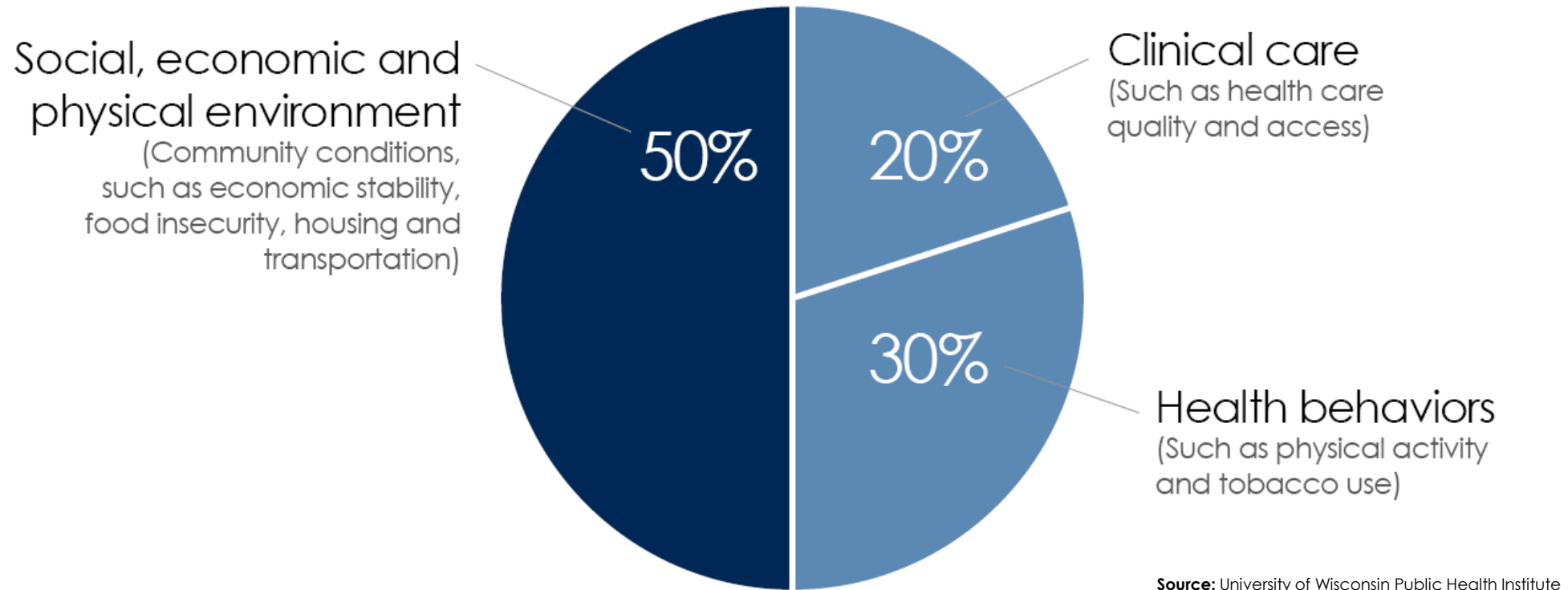


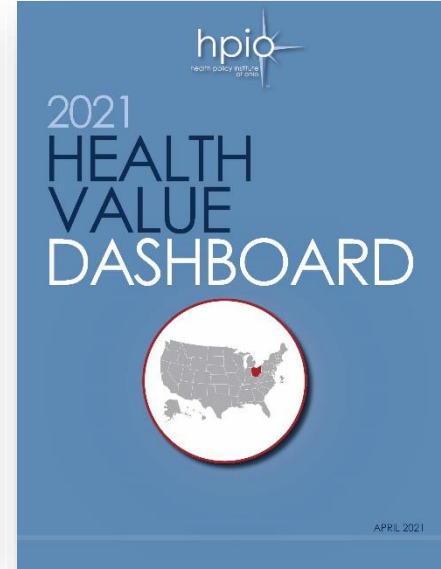
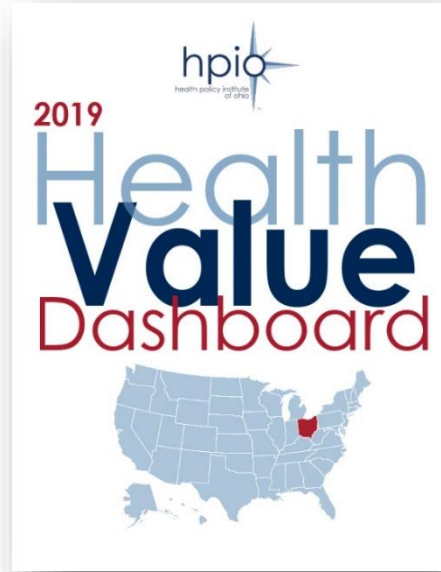
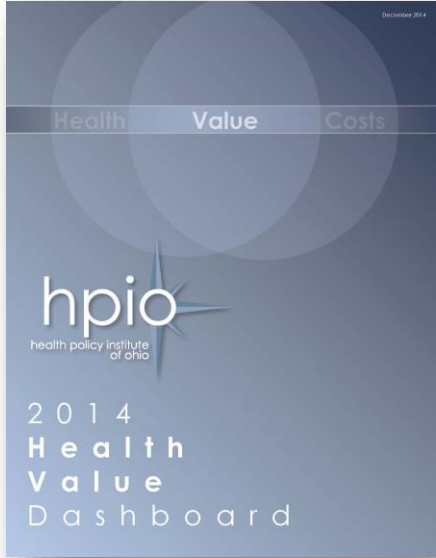
Concise key
findings



Highlight
what works

Modifiable factors that impact health





2014



2023

Contributing factors

- 20 Access to care
- 30 Healthcare system
- 37 Public health and prevention
- 31 Social and economic environment
- 38 Physical environment

Value factors

- 43 Population health
- 40 Healthcare spending

Health value rank

44

Top quartile (best)

Second quartile

Third quartile

Bottom quartile (worst)

Ohio's greatest challenges infant mortality

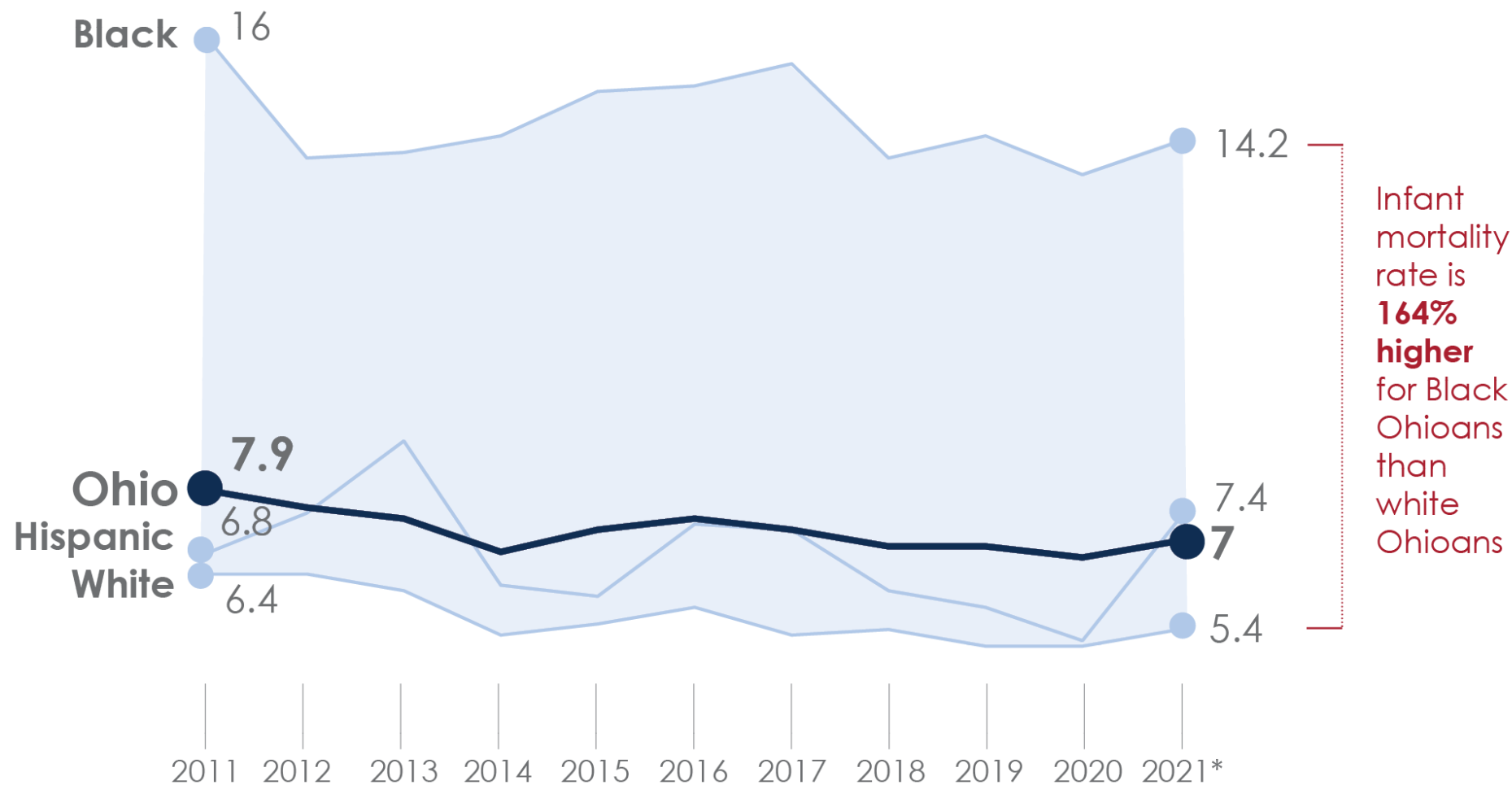


Based on 2020 data

Infant mortality in Ohio

2011-2021*

Number of infant deaths per 1,000 births, by race and ethnicity



*At the time this data was pulled (2.6.2023), the 2021 data year was marked as partial and may be incomplete.
Source: Health Policy Institute of Ohio, "Social Drivers of Infant Mortality: Recommendations for Action and Accountability in Ohio." Data from Ohio Department of Health, Public Health Information Warehouse, Birth Resident and Mortality datasets

A blue silhouette of an iceberg is positioned on the left side of the slide. A horizontal blue line, representing the water surface, cuts across the middle of the iceberg. The portion of the iceberg above the line is small and jagged, while the portion below the line is much larger and more complex in shape, illustrating the concept of hidden or underlying causes.

Infant mortality

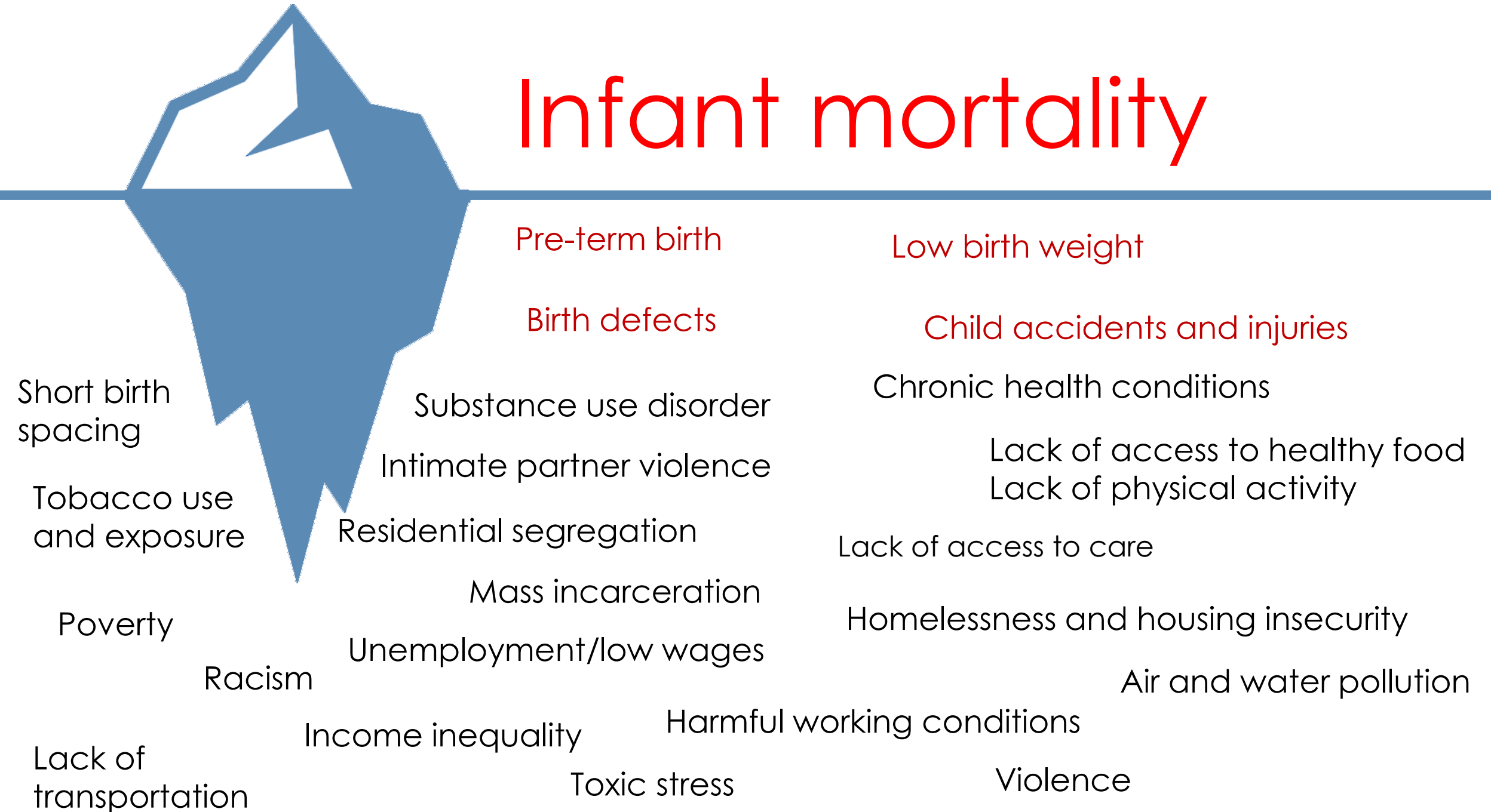
Pre-term birth

Low birth weight

Birth defects

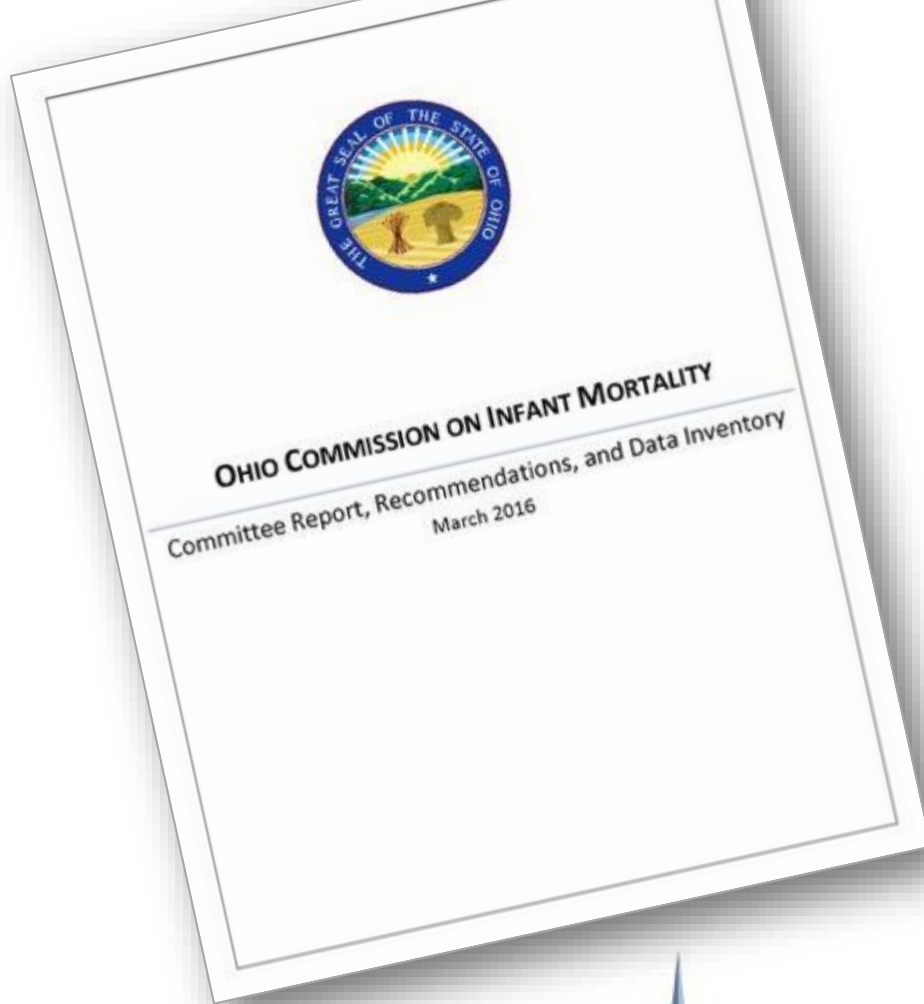
Child accidents and injuries

Infant mortality





The social drivers of infant mortality 5 years later



Senate Bill 332





A new approach to reduce infant mortality and achieve equity

Policy recommendations to improve
housing, transportation, education
and employment



Prepared by the Health Policy Institute of Ohio
for the Ohio Legislative Service Commission

Dec. 1, 2017

From the report

Key findings



- Improvement is possible
- Pregnancy is not the only period of time that matters for infant health
- Access to high quality health care is necessary, but not sufficient
- Racism, discrimination, violence & toxic stress are barriers to improvement



Social Drivers of Infant Mortality

Recommendations for Action and Accountability in Ohio

Why is action needed?

For many years, policymakers and community leaders across Ohio have worked to reduce high rates of infant mortality. Decisionmakers have explored this issue through multiple advisory committees, collaborative efforts, investments, legislation and other policy changes.¹ For example, the Ohio General Assembly passed Senate Bill 322 in 2017, which adopted recommendations from the Ohio Commission on Infant Mortality's 2016 report and required the creation of the 2017 Social Drivers of Infant Mortality (SDOIM) report: *A New Approach to Reduce Infant Mortality and Achieve Equity*.

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Key findings for policymakers

- 1. Changes beyond health care are needed to ensure that every baby thrives.** While healthcare innovations are necessary, improvements to broader community conditions are needed to decrease widening gaps and reinvigorate Ohio's stalled progress on infant mortality.
- 2. Leaders across sectors must work together for meaningful changes.** Public and private partners from the health, housing, transportation, education and employment sectors have many opportunities to change policies and invest in effective solutions to eliminate disparities.
- 3. Progress on past recommendations has been mixed.** Policymakers can build upon the bipartisan cooperation, sustained investment and local collaboration that contributed to action on evidence-based recommendations, and more can be done to engage community members and hold leaders accountable for enacting specific changes to support families.

Building on and prioritizing recommendations to reduce infant mortality



A New Approach to Reduce Infant Mortality and Achieve Equity (2017)
Specific recommendations to improve housing, transportation, education and employment. Developed by the Health Policy Institute of Ohio (HPIO) for the Ohio Legislative Service Commission.



Final Recommendations of the Eliminating Disparities in Infant Mortality Task Force (2022)
General recommendations to improve health care, education, economic stability, neighborhood and built environment and social and community context. Coordinated by the Ohio Department of Health.



This policy brief builds upon these recommendations by prioritizing specific and actionable steps leaders can take to create change in five areas: Housing, transportation, education, employment and racism.



housing



transportation



education



employment



racism

Policy goals and recommendations

Topics



Housing



Transportation



Education



Employment



Eliminating racism

Goals

- ☐ Rental assistance
- ☐ Structural barriers
- ☐ Housing supply

- ☐ Medicaid Non-Emergency Medical Transportation
- ☐ Public transportation

- ☐ Early childhood education and family support programs
- ☐ Career-technical and postsecondary

- ☐ Work supports
- ☐ Leave policies and employment benefits

- ☐ Partner
- ☐ Implement and fund
- ☐ Accountability

Recommendations

10

Recommendations

8

Recommendations

10

Recommendations

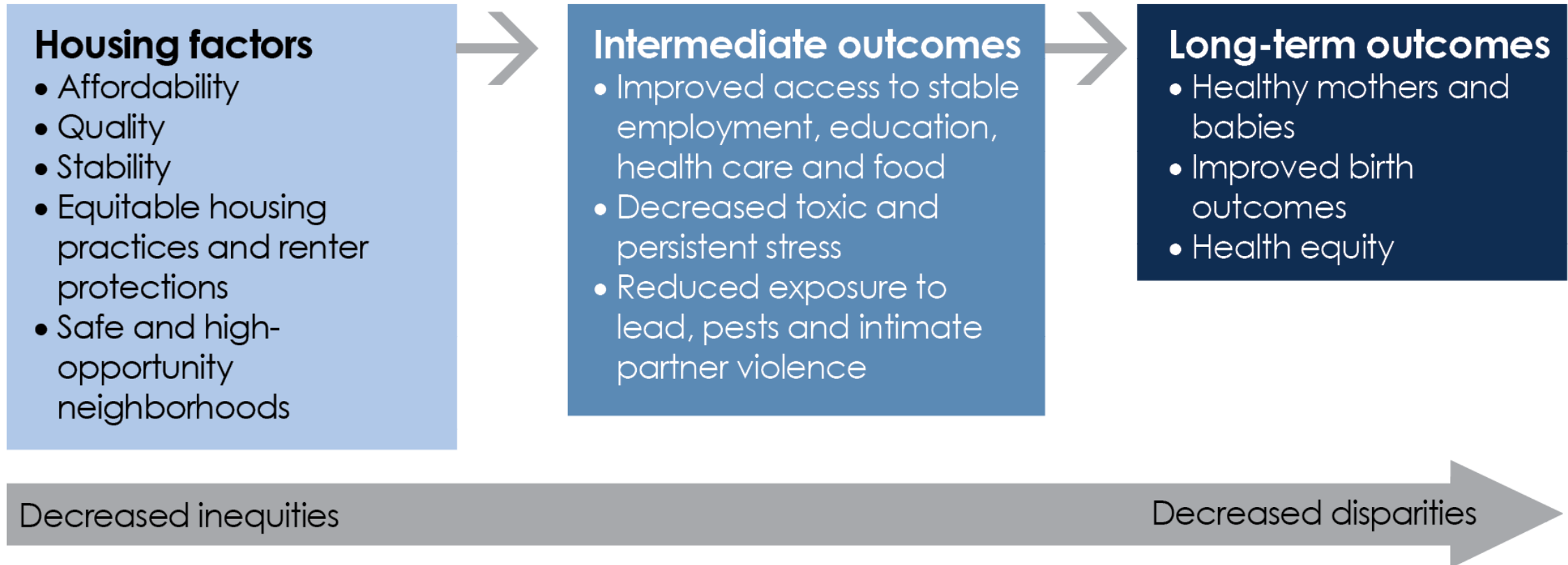
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Recommendations

9

Recommendations

What is the relationship between **housing** and maternal and child health?





Prioritized policy goals: Housing

Goal 1: Increase availability of rental assistance

Goal 2: Reduce structural barriers to affordable housing

Goal 3: Increase affordable housing supply

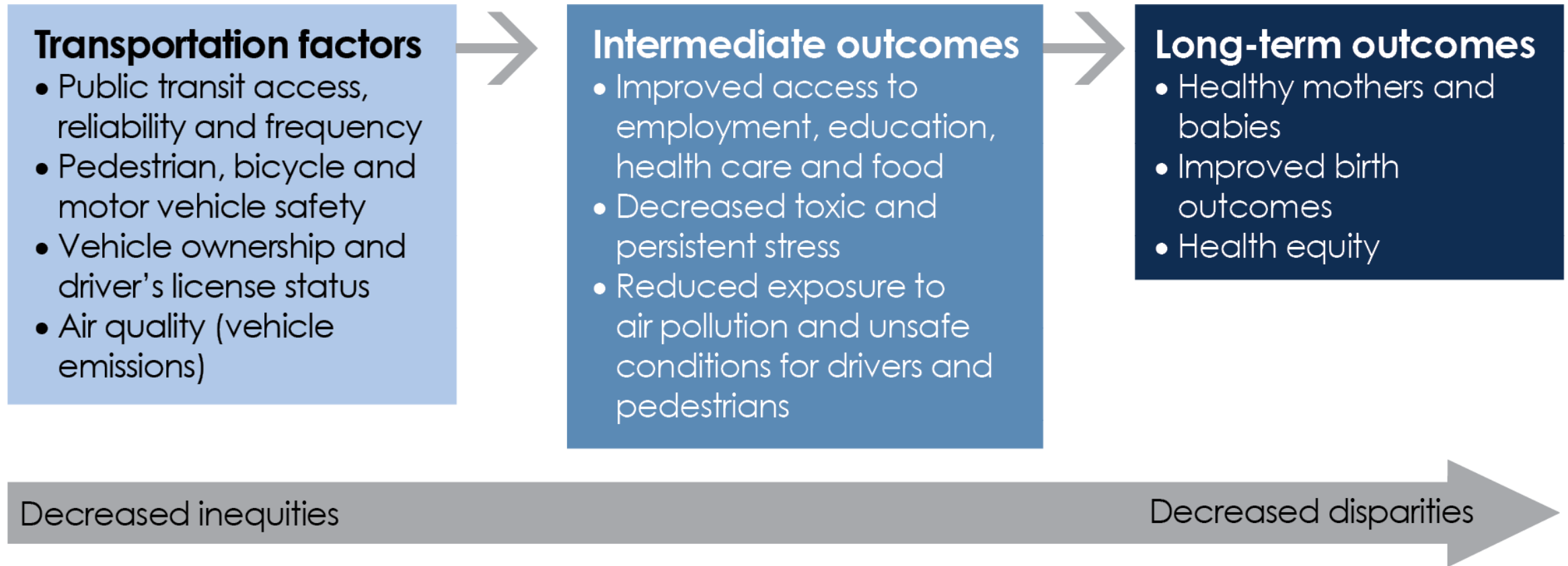
Goal 1: Increase availability of rental assistance

Increase funding for programs that assist pregnant women and families, including those with extremely low incomes, with maintaining their current housing or affording new housing

State recommendations

- 1.1. Rapid re-housing and rental assistance
- 1.2. Financial incentives for prioritizing pregnant women
- 1.3. Medicaid waiver for tenancy support

What is the relationship between **transportation** and maternal and child health?





Prioritized policy goals: Transportation

Goal 4: Improve Medicaid Non-Emergency Medical Transportation

Goal 5: Improve and expand local public transportation

Goal 4: Improve Medicaid Non-Emergency Medical Transportation

Monitor and continuously improve the performance of Non-Emergency Medical Transportation (NEMT) provided through Medicaid managed care plans, prioritizing timely services for pregnant women and parents of young children.

State recommendations

- 4.1. Medicaid oversight
- 4.2. Medicaid transparency
- 4.3. Managed care plan quality improvement

What is the relationship between **education** and maternal and child health?



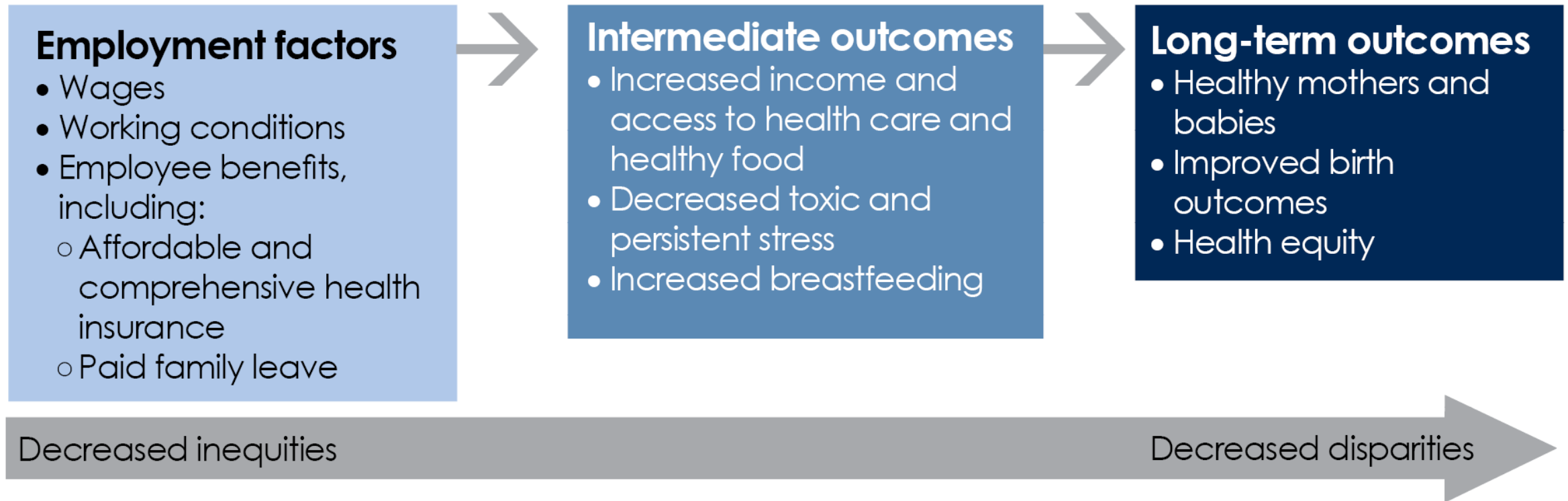


Prioritized policy goals: Education

Goal 6: Strengthen early childhood education and family support programs

Goal 7: Reduce barriers to career-technical education and other postsecondary education programs

What is the relationship between **employment** and maternal and child health?

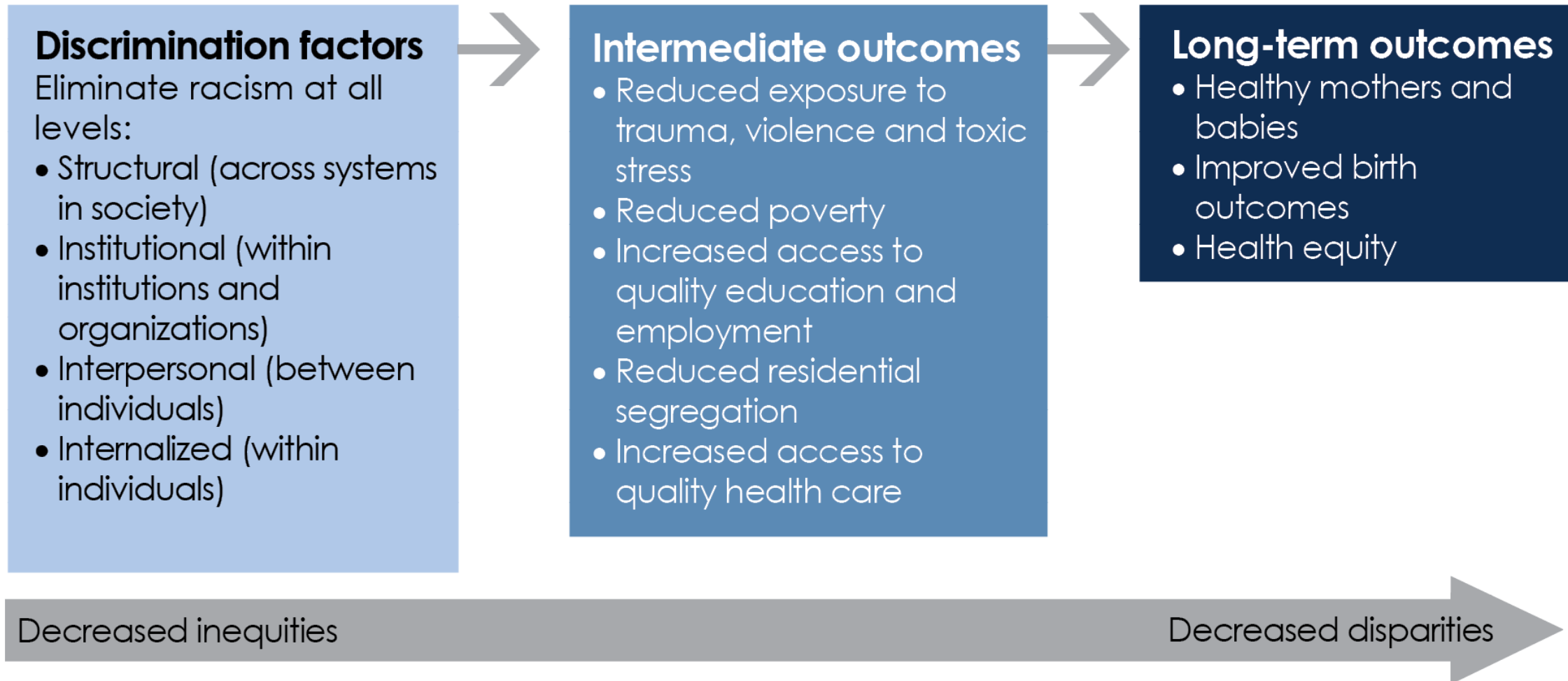


Prioritized policy goals: Employment

Goal 8: Increase access to work supports

Goal 9: Adopt more robust leave policies and employment benefits

What is the relationship between **racism** and maternal and child health?





Prioritized policy goals: Racism

Goal 10: Authentically partner with Black Ohioans and tailor policies and programs to meet their needs

Goal 11: Implement and fund policies and programs that promote justice and fairness

Goal 12: Increase accountability for eliminating disparities in birth outcomes

Topics



Housing



Transportation



Education



Employment



Eliminating racism

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- ☐ Implement and fund
- ☐ Accountability

Action Guides



health policy institute of ohio

April 2023

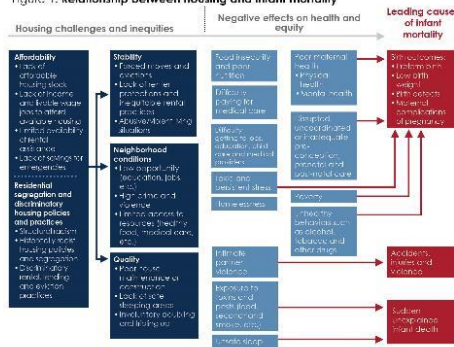
Social drivers of infant mortality HOUSING ACTION GUIDE

Why is action needed?

Safe, stable and affordable housing is vital for good health. There are several ways that housing affects overall health and well-being, including:

- Unsafe, overcrowded and/or poorly maintained housing can lead to maternal and infant health problems through exposure to hazards like lead and mold.
- High housing costs can contribute to financial instability, including increased risk of eviction and homelessness, and toxic stress.
- Residential segregation isolates some communities from needed resources, such as healthcare and employment opportunities, and can create conditions for increased chronic stress, trauma and community violence.

Figure 1. Relationship between housing and infant mortality



Source: HPD "A new approach to research infant mortality and achieve equity: Policy recommendations to improve housing, transportation, education and employment" (2017)

health policy institute of ohio

April 2023

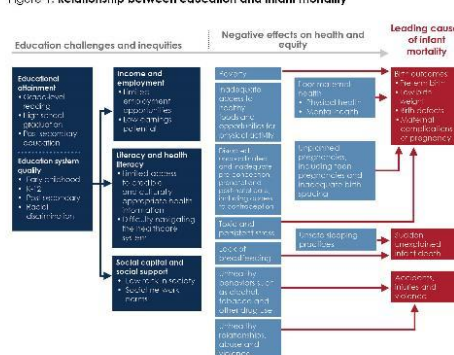
Social drivers of infant mortality EDUCATION ACTION GUIDE

Why is action needed?

Education is vital for good health. Overall, women with higher educational attainment experience lower rates of infant mortality, although the Black-white disparity persists at all education levels. Education affects overall health and well-being in several ways:

- Lacking a sufficient education makes it more difficult to find employment that offers benefits, including paid leave, and pays enough to support healthy choices and basic needs, such as healthy food, medical care and stable housing in a safe neighborhood.
- Education can increase a person's understanding of how to effectively navigate and engage in the healthcare system and make informed decisions about health.
- Stronger social connections and community involvement are more common among people with higher educational attainment and are typically associated with greater levels of social support and other protective health factors.

Figure 1. Relationship between education and infant mortality



Source: HPD "A new approach to research infant mortality and achieve equity: Policy recommendations to improve housing, transportation, education and employment" (2017)

health policy institute of ohio

June 2023

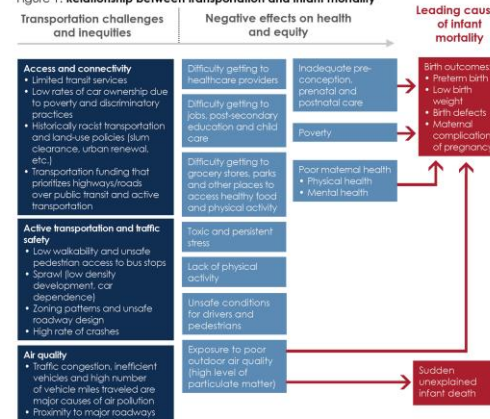
Social drivers of infant mortality TRANSPORTATION ACTION GUIDE

Why is action needed?

Safe, accessible and affordable transportation is vital for health and well-being. Transportation affects health and overall well-being in several ways:

- Transportation impacts access to care, health behavior and health outcomes through the ability to get to health care, jobs, school, child care, social services, grocery stores, parks, libraries and other destinations.
- Walking, biking and public transit are transportation modes that increase physical activity. More walkable communities with parks and playgrounds promote social connectedness. Land use and zoning patterns affect pedestrian safety, motor vehicle crashes and active transportation.
- Vehicle emissions are a major source of air pollution. Air pollution has been linked to several negative health outcomes including asthma, heart disease and lung cancer.

Figure 1. Relationship between transportation and infant mortality



Source: HPD "A new approach to research infant mortality and achieve equity: Policy recommendations to improve housing, transportation, education and employment" (2017)

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June 2023

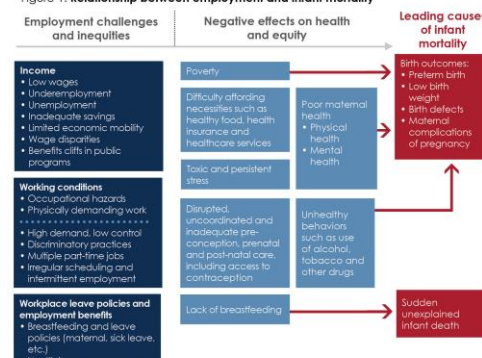
Social drivers of infant mortality EMPLOYMENT ACTION GUIDE

Why is action needed?

Employment that pays a self-sustaining wage and offers health insurance and other benefits can pave the way for good health and positive birth outcomes. Conversely, unemployment during pregnancy is associated with lower birth weight and higher rates of infant mortality. Employment is connected to overall health and well-being in several ways:

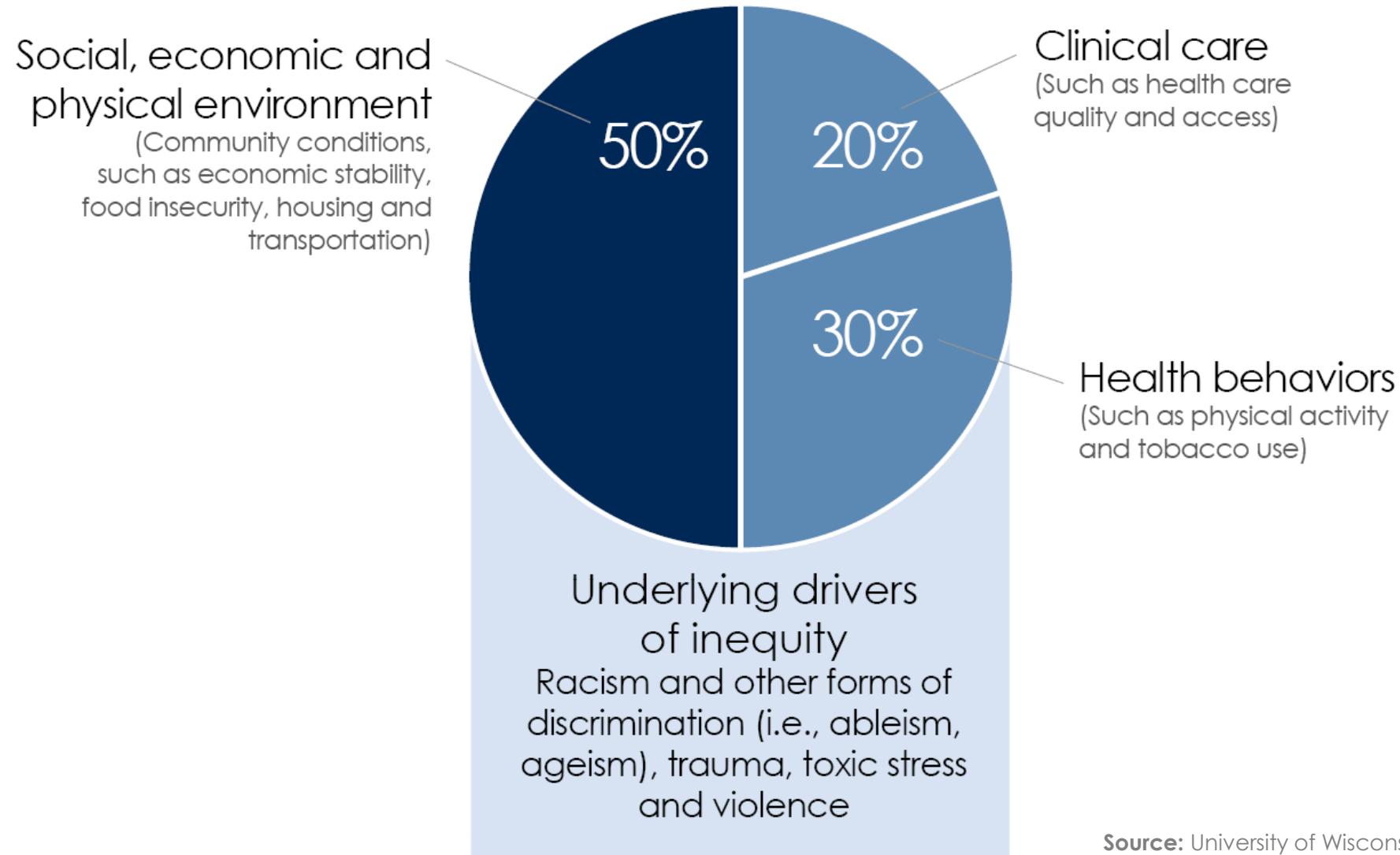
- Income generated from employment enables access to healthy food, safe housing, healthcare services and other resources that promote health. Higher income is also associated with better mental health.
- Working conditions, including the physical environment, the type of work performed, the level of flexibility and control employees have to complete their work, and discrimination in the workplace can cause work-related stress and affect health. Work that is physically strenuous may improve health through increased physical activity but can also put workers at increased risk of illness, injury and/or disability, particularly for people with other medical conditions.
- Workplace policies and employment benefits, including health insurance coverage, paid time off, predictable scheduling and breastfeeding support, can influence the health of employees and their family members.

Figure 1. Relationship between employment and infant mortality



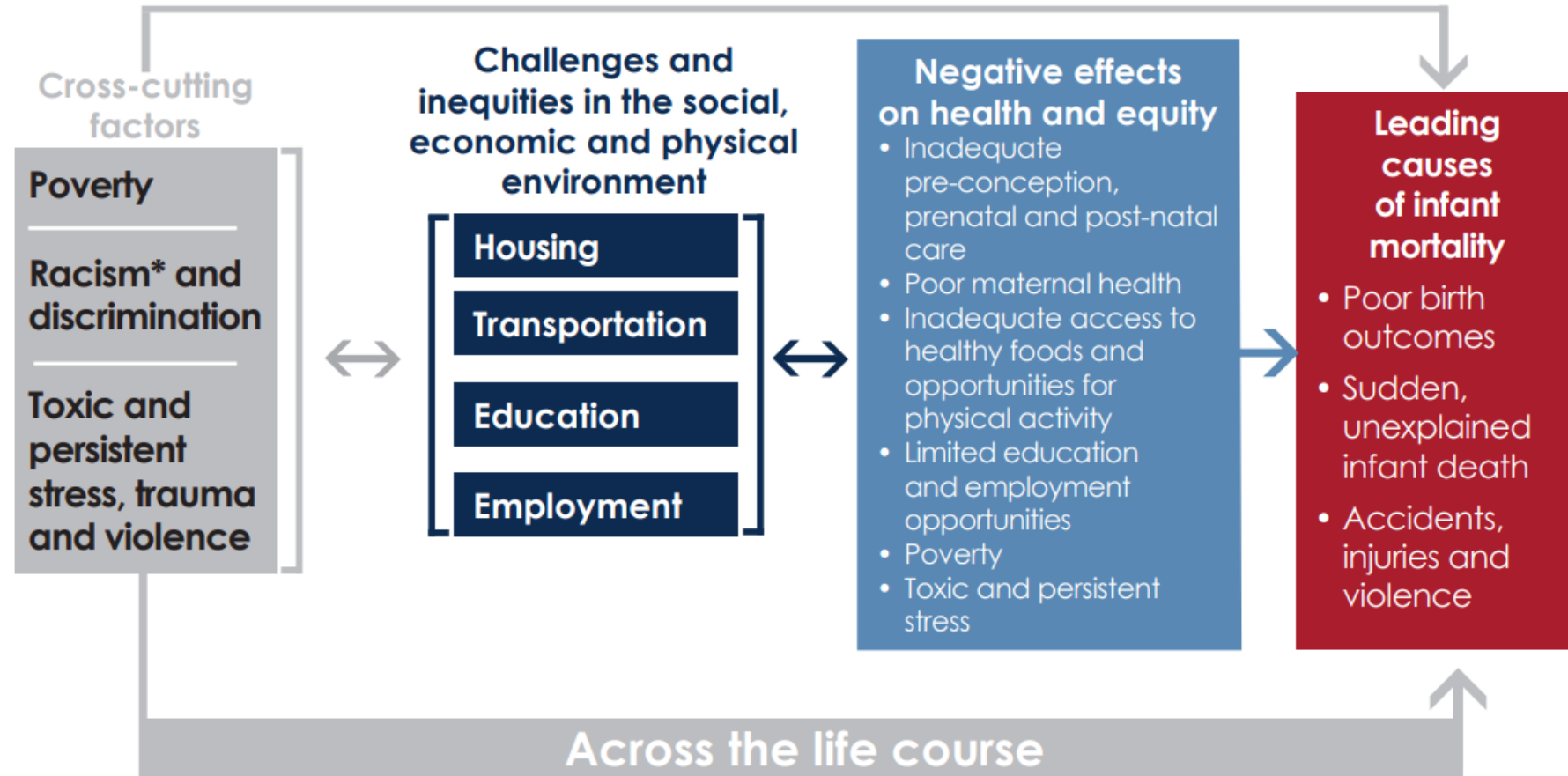
Source: HPD "A new approach to research infant mortality and achieve equity: Policy recommendations to improve housing, transportation, education and employment" (2017)

Modifiable factors that influence health



Source: University of Wisconsin Population Health Institute

Relationships between social drivers of health and infant mortality



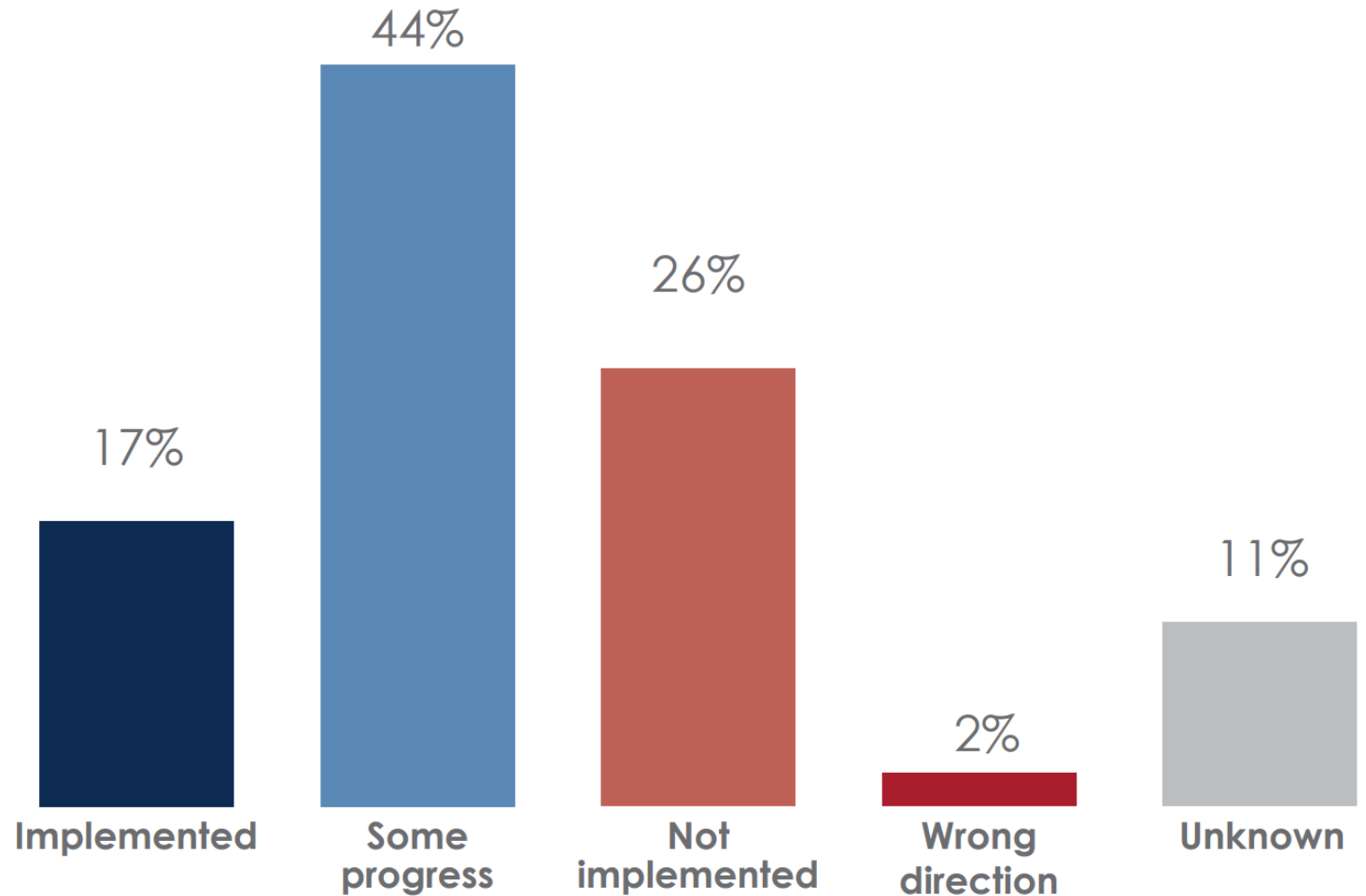
* Structural, institutional, interpersonal and internalized racism

Source: HPIO "A New Approach to Reduce Infant Mortality and Achieve Equity," (2017)



Overall implementation status

Percent of all 2017
recommendations
implemented



Policy goals and recommendations

Topics



Housing



Transportation



Education



Employment



Eliminating racism

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Recommendations

QUESTIONS?



Mission

HPIO is an independent and nonpartisan organization. Our mission is to advance evidence-informed policies that improve health, achieve equity, and lead to sustainable healthcare spending in Ohio.

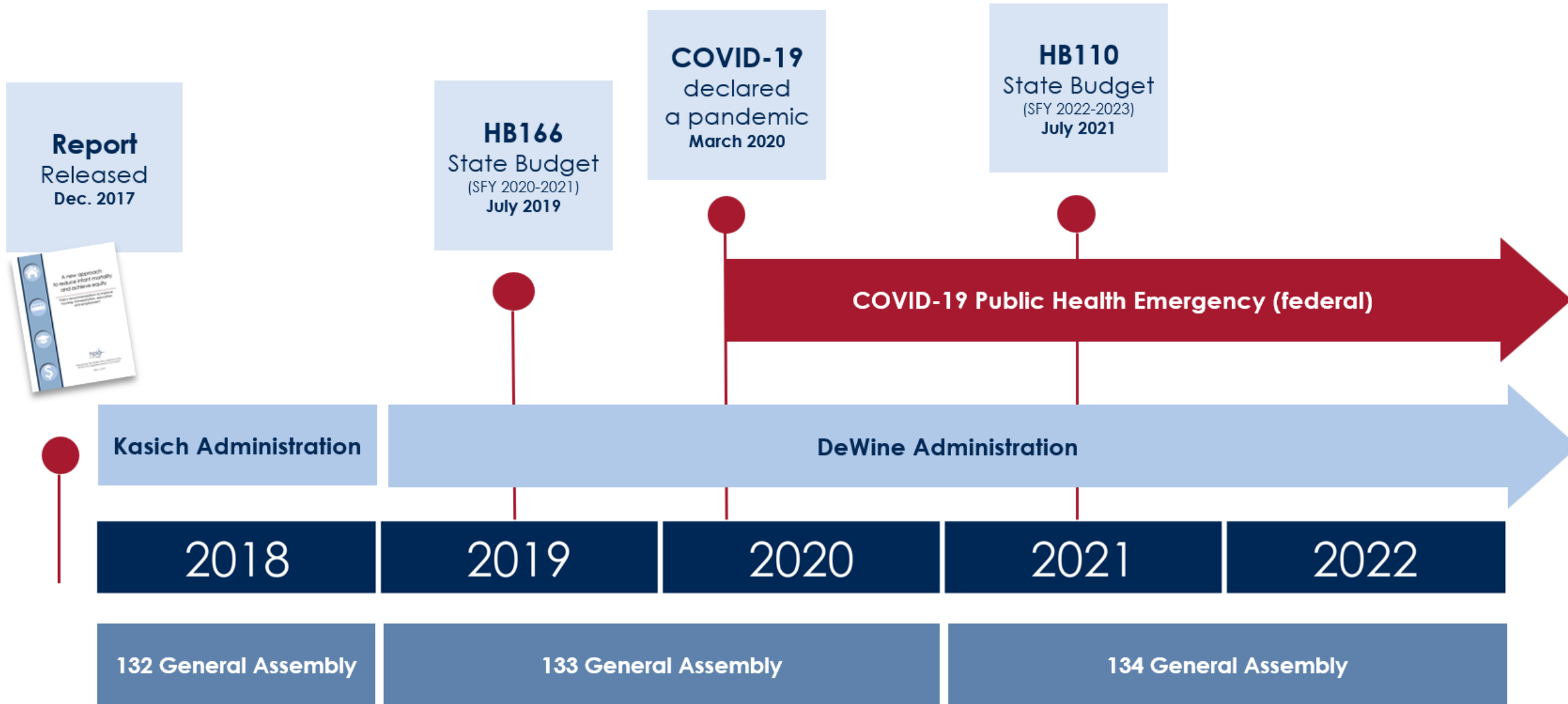
Vision

Ohio is a model of health, well-being and economic vitality



Contacts

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- **Amy Bush Stevens**, Vice President
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Prioritization criteria

- Evidence of effectiveness
- Relevance to infant mortality priority populations
- Potential size of impact on infant mortality rate and disparities
- Opportunities given the current policy landscape
- Political feasibility