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The Task Force Releases Provider Strategies for Advancing Health Equity Through Value-Based Care

WASHINGTON (October 24, 2024) – The [Health Care Transformation Task Force](#) (HCTTF or Task Force) – a group of leading health care payers, providers, purchasers, patient organizations, and value transformation partners – released a resource titled [Provider Strategies for Advancing Health Equity Through Value-Based Care](#). The resource presents case studies describing how Task Force provider members are implementing health equity strategies. This resource was developed as a companion piece to the [Payer Health Equity Strategies](#) paper released earlier this year. These resources build upon the Task Force’s prior health equity work, including the [Raising the Bar](#) framework, the [Health Equity Business Case](#), and the Health Care Payment Learning and Action Network’s (LAN) [theoretical framework](#).

Health and health care are central to each person’s ability to live well and should not be dependent on a person’s socioeconomic status or identity – whether racial, ethnic, linguistic, or based on sexual orientation or gender identity. Addressing disparities in health care access, quality, and outcomes is a moral imperative. It is also a smart business decision – preventing disease and avoiding emergencies saves money.

Health care providers are uniquely positioned to address health disparities in the care they deliver to patients and the way they engage in their communities. In this resource, the Task Force highlights case studies describing how providers are advancing health equity strategies in three domains:

- **Clinical care:** Providers can increase equity by delivering equitable person-centered care that is culturally and linguistically appropriate to all of their patients, while removing barriers to access.
- **Performance measurement & incentives:** Providers can measure disparities in access and outcomes within their patient populations and incentivize clinicians

and administrators to close gaps for critical populations. To do so, providers must obtain data on patient demographics and health-related social needs.

- **Community partnerships:** Providers can partner with community-based organizations (CBOs) to address patients' health-related social needs. Providers can offer financial support to CBOs to address these needs, building capacity and trust in the community.

"Providers are on the front lines of addressing health disparities, and value-based care arrangements offer important incentives to support these efforts," said Theresa Dreyer, Senior Director at the Task Force. "The Task Force is pleased to present eight provider case studies that demonstrate their long-term organizational commitments to advancing health equity."

"At Trinity Health, advancing health equity is a fundamental part of our Mission," said Dan Roth, Executive Vice President, Chief Clinical and Community Division Operations Officer at Trinity Health. "By embedding health equity into our clinical care and operations, we're closing gaps and improving outcomes for groups of people who have limited or no access to resources due to historical community disinvestment and racism. We are working to remove known bias from our clinical algorithms, while also addressing our patients' social needs with support from community health workers and partnerships with community organizations. This helps us address disparities at their root, and value-based care models provide the framework to expand these efforts."

For more information, please visit <https://hcttf.org>

ABOUT HEALTH CARE TRANSFORMATION TASK FORCE

The Health Care Transformation Task Force is a unique collaboration of patients, payers, providers, and purchasers working to lead a sweeping transformation of the health care system. By transitioning to value-based models that support the Triple Aim of better health, better care, and lower costs, the Task Force is committed to accelerating the transformation to value in health care. To learn more, visit WWW.HCTTF.ORG.

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