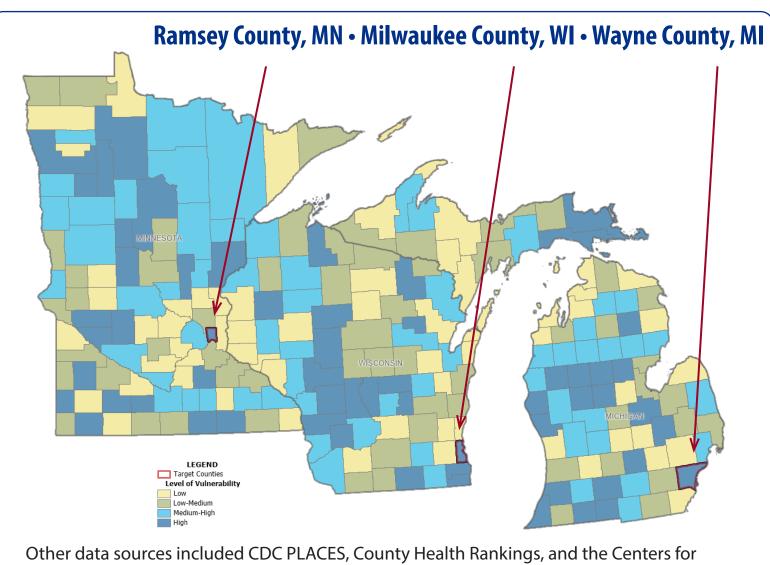
SUPERIOR HEALTH QUALITY ALLIANCE PRESENTS: Community Health Disparities Reduction Partnership (CHDRP) Initiative

BACKGROUND

Superior Health Quality Alliance (Superior Health) launched the Community Health Disparities Reduction Partnership (CHDRP) Initiative in May 2023 to invest in projects in Wayne County (Michigan), Ramsey County (Minnesota) and Milwaukee County (Wisconsin). Grant funds support one project in each



Medicare & Medicaid Services (CMS) Mapping Medicare Disparities Tool. Recognizing that the needs and compositions of each state differ substantially, county comparisons were made within each state but not between the states (e.g., counties in Minnesota were compared with other counties in Minnesota, not with counties from Michigan and Wisconsin.).

county that promotes health equity and improves care for residents, including Medicare beneficiaries.

These counties were selected based on a review of county-level data on health outcomes, social drivers of health and race- and ethnicity-based health disparities (county-level Social Vulnerability Index data are shown). After accounting for these data, population density and potential impact of the funding, all three counties demonstrated substantial opportunities for reducing health outcome disparities.

Three county projects

- Wayne County, Michigan: Southeastern Michigan Health Association (SEMHA) & The Hannan Center – Senior Community Health Worker Pipeline Project
- Ramsey County, Minnesota: Interfaith Action of Greater Saint Paul's Department of Indian Work (DIW) – American Indian Family Education Diabetes Series (FEDS)
- Milwaukee County, Wisconsin: Wisconsin Institute for Healthy Aging (WIHA) – Living Well with Chronic Conditions in Milwaukee's **Baptist Faith Communities**



For additional information on these three projects, scan the QR code.

For More Information visit Superior Health at superiorhealthqa.org Email info@superiorhealthqa.org



GOALS

Superior Health and CHDRP Initiative partners work together to understand community needs; reduce disparities by engaging community partners and residents with lived experience in co-designing solutions and interventions; partner with health care personnel, patients, residents, family advocates and community allies on strategies that promote personcentered care; and address health disparities in the Medicare population in each county to improve the quality of services provided to all individuals.

Goals of specific county projects include:

- Wayne County, Michigan: Provide more support and resources for seniors to age in place by training senior AmeriCorps members as community health workers (CHWs).
- Ramsey County, Minnesota: Provide chronic disease management support and advance health equity in the target population.
- Milwaukee County, Wisconsin: Increase participation in the evidence-based Living Well with Chronic Conditions (LWCC) program in the target population.

ENGAGING THE AUDIENCE

CHDRP projects are unique because they are co-designed by trusted partners and community members who reflect the populations the interventions are serving. Respecting that CHDRP partners are experts in their community's experiences and needs, Superior Health takes a collaborative and tailored approach to supporting project teams.

OFFERINGS

Dedicated analytic and state-based **Quality Improvement Advisor (QIA) staff** provide technical assistance during and outside of monthly check-in calls. QIAs share resources and learning opportunities (events, toolkits, online courses, etc.) relevant to partners' projects, and collaboration platforms are provided for CHDRP partners to discuss challenges and spread best practices regionally (Superior Health Connect and Tri-State Quarterly Networking Calls).

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MEASURING SUCCESS

These projects reach populations that have traditionally been left out of the design and implementation process of wellness and health promotion programs.

Tailoring outreach through trusted ambassadors in the faith-based community has improved engagement in Healthy Living with Chronic Conditions programming.

Leveraging the knowledge and guidance of trusted ambassadors with lived experiences of social determinants of health and health disparities to identify the root causes of why older adult Black, Indigenous, and People of Color (BIPOC) may hesitate to participate in health and wellness interventions.

Projects are being implemented, and the CHDRP Initiative continues through September 2024. This poster shares the approach to creating and launching this initiative in hopes that it is replicated in other communities.

CHALLENGES ARE BEING ADDRESSED

Death rates are 48% higher for older adults (aged 60-74) in several Wayne County communities compared to the same age group living elsewhere in Michigan. Many excess deaths were due to conditions that can be controlled by improved access to primary healthcare, medical care and support services.¹

Certain chronic conditions are more prevalent in Milwaukee County, Wisconsin than in other areas of the state. Older adults, specifically the African American/Black population, are disproportionately affected by chronic disease.²

This material was prepared by the Superior Health Quality Alliance, a Quality Innovation Network-Quality Improvement Organization under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. 12SOW-MI/MN/WI-CC-24-05 010524

In Minnesota, American Indians have the highest rate of diabetes (19.3%). By comparison, only 10.1% of non-Hispanic white adults have diabetes.³

Dving Before Their Time III – 19-Year (1999 – 2017) Comparative Analysis of Excess Mortality In Detroit (PSA 1-A). Detroit Area Agency on Agin 2. Health Compass Milwaukee, Age-Adiusted Death Rate Due to Diabetes, https://www.healthcompassmilwaukee.org/indicators/index/view?ir catorId—10.0&localeId—3140&localeChartIdvs—1 Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Healt

BRFSS Prevalence & Trends Data [online], 2015, [accessed Jan 09, 2024], URL: https://www.cdc.gov/brfss/brfssprevalence/