



National Summit on Health Equity
November 9 & 10, 2015
Sheraton Westport Plaza
191 Westport Plaza, St. Louis, MO 63146

Monday, November 9

5:30pm-7:30pm **Welcome Reception**

Tuesday, November 10

8:00am **Breakfast/Registration**

8:30am **ACS CAN Welcome**

8:35am **Opening Speaker**

9:00am **The Health Equity Landscape**

This panel will provide an overview of the following key issues in health equity:

- *Access to Care, Prevention, and the Implementation of the Affordable Care Act*
The Affordable Care Act implementation has paved the way for many to receive needed access to health care. However, with the Supreme Court's decision to strike down the Medicaid expansion mandate, many states have chosen not to expand Medicaid. This has left many who would have been covered lacking insurance. Additionally, we face a large population of people who are using insurance for the first time who are having trouble navigating the health care system.
- *Survivorship/Palliative Care/Transition of Care*
The dynamics of lack of coordinated transitions of care, coupled with the cost and economics of cancer care continue to perpetuate a low survivorship for a population that already has a significantly lower survivorship. Studies have also shown that palliative care has the potential to benefit patients with serious illness and potentially reduce health care costs.
- *Technology and Innovation*
Advancement in the knowledge and understanding of researchers and the community as a whole will depend on the engagement of diverse populations early in technology development. This includes clinical trial development and expansion of health information access. This has become evident as more and more Americans are turning to electronic and online sources for health information, rather than to their medical providers. It will

be important to harness these emerging resources to ensure that patients not only have access to this information, but are also able participate in the production of it.

10:10am

Breakout Session 1

Sessions:

- *Bridging the Digital Divide and Improving Health Literacy*
Amidst current delivery system and payment reforms that better reward quality over volume of services provided, recent advances in information and communication technologies (ICT) are being leveraged by public and private payers to achieve the triple aim of health care: improving the experience of care, improving the health of populations, and reducing the cost of health care. In short, these technologies offer significant opportunities to address existing gaps in America's health care system, such as the lack of access to care for rural and/or low-income populations. However, despite the promise of eHealth in addressing this gap, many Americans are unable to get or do not know how to use these new tools due to economic and/or technological barriers. In addition, many current eHealth tools are not personalized, culturally appropriate, or available in additional languages relevant to the end user. This panel will highlight current efforts being made to narrow the digital divide by improving health literacy as well as identify key issues moving forward as continued eHealth technological innovations are introduced in America's health care eco-system.
- *Clinical Trials Enrollment*
Twenty years after Congress mandated that research funded by the National Institutes of Health include women and racial/ethnic minorities, female representation has increased, but still remains underrepresented. Additionally, less than five percent of trial participants are non-white, and less than two percent of clinical cancer research studies focus on non-white ethnic or racial groups. Clinical trials are considered essential for the discovery and development of better drugs and treatment methodologies for cancer, and participation in trials has been shown to lower cancer mortality in patients with some types of tumors. As the demography of the world continues to evolve, it is imperative that trials ensure diversity and inclusivity in not only participation, but development. This session will explore what policies can be implemented so this can be realized.
- *Access to Care, Prevention, and the Affordable Care Act*
The lack of Medicaid expansion in all 50 states has created a conundrum in the health care continuum. A recently released study in the American Journal of Preventative Medicine that compared screenings in expansion versus non-expansion states concluded that, as women in non-expansion states remain uninsured and others gain coverage, existing disparities in cancer screening by race and socioeconomic status are likely to widen. This session will provide a review of the current gaps in cancer prevention and screening services as well as the challenges that we face as a large population of people who are using insurance for the first time who are having trouble navigating the health care system.
- *Tobacco Use and Health Disparities*
Even with overall decreases in the use of tobacco, targeted populations by the tobacco industry, such as communities of color, those of low socioeconomic status, and the Lesbian, Gay, Bisexual, and Transgender community, still have significant rates of tobacco usage. This session will provide a deeper look into the disparities related to the marketing and usage of tobacco products in these populations and what policy interventions can begin to turn the tide.

- *Survivorship-Transitions and Economics*
Research has shown that inequities exist in cancer survivorship. Transition and economics are important for all patients, but play an even more significant role for those of low socioeconomic status and those who live in geographically challenged areas. This session will discuss these challenges, specifically the impact that cost has on access, decision making, utilization, and treatment and evaluate potential policy solutions to improve the transition to survivorship.

11:30am **Lunch with Keynote Speaker**

12:40pm **Breakout Session 2**
(Repeat of Previous Breakout Session)

1:50pm **The Action Institute**

2:50pm **Closing Remarks**

Speakers:

- Dr. JudyAnn Bigby, Mathematica Policy Research
- Kelly Brittain, PhD, RN, Michigan State University College of Nursing
- Dr. Ralph Caraballo, MPH, Centers for Disease Control and Prevention Office on Smoking & Health
- Dr. Luther Clark, Merck & Co., Inc.
- Mike Colombo, KMOV St. Louis
- Meghan Danahey, KMOV St. Louis
- Dr. Gary Doolittle, University of Kansas Medical Center
- Dr. Lannis Hall, MPH, Siteman Cancer Center and Washington University School of Medicine
- Sharon Hanlon, MSN, Bristol-Myers Squibb
- Rosie Henson, MSSW, MPH, American Cancer Society, Inc.
- Dr. Luckson Mathieu, Food and Drug Administration
- McCrae Parker, ZeroDivide
- Peggy Payne, Cigna
- Dr. Alonzo Plough, MPH, Robert Wood Johnson Foundation
- Catherine Saucedo, University of California, San Francisco Smoking Cessation Leadership Center
- Dr. Scout, LGBT HealthLink at CenterLink
- Tina Shropshire, Truman Medical Center Hospital Hill
- Dr. Brian Smedley, National Collaborative for Health Equity
- Dr. Cardinale Smith, Mount Sinai Hospital
- Dr. Michael Trujillo, MPH, ABQ Health Partners
- Dr. Reginald Tucker-Seeley, Dana-Farber Cancer Institute and Harvard T.H. Chan School of Public Health