

# ASPE's Recent Contributions to Achieving Health and Well-Being Equity

## KEY POINTS

- The Office of the Assistant Secretary for Planning and Evaluation (ASPE) serves as the principal advisor to the Secretary of HHS on policy development, data analysis, program evaluation, and strategic planning.
- To serve this function, ASPE maintains a diverse portfolio of intramural and extramural research and evaluation, conducts economic analysis, and collaboratively leads and coordinates many strategic efforts across the Department – all with equity in mind.
- ASPE develops research products and evidence informed tools on equitable approaches to support HHS in its goal of enhancing health and well-being for all.
- ASPE works to understand policy solutions to drive equity among all populations.

## BUILDING CAPACITY TO LEAD WITH EQUITY

ASPE serves as a facilitator for HHS to advance equity in several ways. ASPE helps resource HHS staff with evidence-informed approaches that identify opportunities to advance equity, build HHS data and research capacity to understand impacts of our policy, and outlines collaborative strategies or recommendations for HHS and our government partners to address the root causes of inequity in partnership with impacted communities. Since 2021, select accomplishments to build equity capacity include:

- **Co-Leadership of the [HHS Health Disparities Council \(HDC\)](#).** In partnership with the Office of the Assistant Secretary for Health and the Office of Minority Health. The HDC shares information across the Department and convenes HHS leaders to develop actionable plans to advance equity.
  - *Impact: An all-HHS approach to advancing equity.*
- **Implemented a first-of-its-kind HHS Equity Technical Assistance Center (ETAC).** ASPE established ETAC to provide Department-wide resources, learning sessions, peer learning opportunities, and tailored technical assistance to empower HHS staff to embed equity into programs, policies and approaches. ASPE has published public-facing resources on topics such as conducting equity assessments and incorporating intersectionality in research.
  - *Impact: Readily available and actionable tools to support advancing equity.*
- **Expanding Data Related to Sickle Cell.** ASPE hosts the [Patient Centered Outcomes Research](#) (PCOR) portfolio for the Department, which expands the collection of socioeconomic, environmental, and other data so that all people making health care decisions have the evidence about the outcomes and effectiveness of health care. Through [PCOR](#), ASPE is working with agency partners to develop a

common set of core data elements related to sickle cell disease, which disproportionately impacts Black people.

- *Impact: Increased availability of actionable data for improving treatment, care, and policy for people living with sickle cell.*
- **Supported Improvements to Race and Ethnicity Data Analysis.** ASPE is supporting the [HHS Data Council](#) in developing guidance on approaches to analyzing self-reported race and ethnicity data. ASPE also developed [methods to impute race and ethnicity](#) for those who did not self-report when selecting their Marketplace plans on [HealthCare.gov](#). The ASPE analysis found significant increases in Black and Hispanic enrollment.
  - *Impact: Improved availability and utility of data for measuring equitable services and outcomes.*
- **Developed the HHS Call to Action to address health related social needs.** ASPE coordinated HHS input into the [U.S. Playbook to Address Social Determinants of Health \(SDOH\)](#) and development of the companion HHS release -- [Call to Action to Address Health-Related Social Needs](#).
  - *Impact: Highlights HHS policies and programs to engage community partnerships across health, social services and technology sectors to address social needs and improve health and well-being.*
- **Resourced HHS's work to prevent and end homelessness.** As part of HHS's homelessness and homelessness prevention response, ASPE is a collaborator in the [Housing and Services Resource Center](#) providing guidance on housing with services for people experiencing homelessness, older adults and individuals with disabilities.
  - *Impact: Highlights resources to connect sectors to help people live stably in the community.*
- **Launched the Children's Interagency Coordination Council (CICC).** The CICC was launched in November 2023 to foster greater coordination and transparency on child poverty across federal agencies. ASPE is [launching the council in partnership](#) with nine other federal agencies.
  - *Impact: Federal coordination of evidence and policy to address child poverty and well-being.*
- **Developed equitable program evaluation tools.** ASPE develops resources that infuse equity principles in the design of program evaluations. One brief includes [principles of equitable communication](#).
  - *Impact: Available tools to ensure program evaluation findings are informed by and reflective of diverse perspectives and areas of expertise.*

## POLICY RESEARCH TO GUIDE HHS EQUITY EFFORTS

ASPE conducts analysis and research that highlights the differential experiences regarding economic conditions, health coverage, and health and well-being for a variety of populations. These analytical reports help the public, HHS agencies and government partners identify whether policies and programs are best serving all populations and offer insight into opportunities to improve. A few examples of ASPE analysis with direct policy and program application to advance equity include:

- **Tracked health insurance coverage changes for specific populations.** Recent analyses show changes in coverage disparities by race and ethnicity after implementing legislative and administration policy changes to gain and maintain health coverage: For example, from Q1 2021 to Q2 2023, [the uninsured rate fell for all groups but more so for Hispanics and Blacks than for Whites and Asians](#), resulting in a slight decline in the coverage gap by race. ASPE also provides annual estimates of the number of U.S.

residents without health insurance and their demographic characteristics, including race, ethnicity, and language.

- *Impact: This data is used by HHS and states for community outreach, education, and enrollment in Medicaid and Marketplace.*
  
- **Identified impacts of Inflation Reduction Act (IRA) policy changes for Medicare beneficiaries.** The Inflation Reduction Act (IRA) is helping people with Medicare afford their medications, including the 2.1 million [Asian](#), 5.8 million [Black](#), and 5.3 million [Latino](#) Part D enrollees. ASPE has published a series of fact sheets making estimates of IRA impacts on enrollee affordability, use of medications, out of pocket spending on drugs, and the disproportionate burden of illness for people who use such drugs.
  - *Impact: Illustrates the projected impacts of key IRA Medicare drug-related provisions on various populations to inform implementation.*
  
- **Pioneered cross-cutting research on equitably engaging people with lived experience.** Building on its own work engaging people with lived experience, ASPE identified innovative strategies that HHS and other federal staff can use to meaningfully engage people with lived experience related to HHS programs to inform federal research, policy, and practice.
  - *Impact: Available methods to support engaged communities in HHS and government federal policy-making and implementation.*
  
- **Identified human service approaches that meet the needs of specific communities.** [Addressing Substance Use and Social Needs of People of Color with Substance Use Disorders](#) identified promising practices such as incorporating the community’s cultural values into organizational structures and treatment models, engaging the community in designing and delivering programs and services and hiring staff that reflect the community; addressing the comprehensive health, social, and economic needs of participants; and including healing-centered approaches in the continuum of care. [Emerging practices for supporting LGBTQI+ young people](#) in human services conducted literature reviews and informant interviews, guided by young adults, to identify key practices at the community, organizational, family, and individual levels.
  - *Impact: Provides practical, community-informed insights for federal agency and local partners into culturally responsive human services.*
  
- **Informing demonstrations to support reentry.** ASPE conducted [research to support access to care and coverage for justice involved individuals and those returning to the community](#), which formed the basis for a first-of-its kind Medicaid section 1115 [demonstration to improve care transitions](#).
  - *Impact: Innovative options that aid those returning to the community from incarceration get their health care needs met.*
  
- **Conducted preliminary research on best practices to reach populations most at risk of COVID-19 with vaccination and testing services.** As part of a multi-year mixed-methods study, ASPE published an [environmental scan which shares emerging lessons about how to ensure that people most at risk of COVID-19 can get testing and vaccination services](#).
  - *Impact: Available evidence on best practices to provide testing and vaccination services to populations most at risk of COVID-19 and related adverse outcomes.*

- **Conducted suitability analysis on area-level deprivation measures for HHS health care programs.** To better understand the options for using area-level and/or administrative data to adjust Medicare payments to providers, ASPE published a [landscape and discussion](#) comparing the existing measures, and their strengths and weaknesses.
  - *Impact: CMS will use select deprivation measures to adjust payments to certain Medicare Advantage plans and Accountable Care Organizations to better match resources to individuals and communities with greater health care needs.*

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## U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

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