

Principles for a Health Equity and Value Agenda

We believe that the United States health care system should continue to evolve to provide higher quality care more efficiently by rewarding value (greater health improvement at a lower cost per patient and overall) and not volume, eliminating health disparities and achieving health equity. These must be urgent, overarching priorities in these health care delivery and payment reform efforts. This requires actively engaging experts and representatives from communities of color and other communities experiencing disparities in health care transformation efforts.

We believe that an accessible, effective, efficient, high-value, and equitable health care system must:

- Be centered on the whole person, in their family and community context and effectively meet the needs and optimize the health and wellbeing of individuals, families, and communities. The potential for good health depends on more than just genetic and clinical factors. While the access to and quality of health care is important, the social, economic and related infrastructure that impact health must be considered in health system transformation discussions.
- Invest in centering, actively engaging, and facilitating the participation of those persons who are most affected by disparities at all levels of the process so that they have real power in transforming the health care system.
- Be designed to be effective for the populations most affected by health disparities, as that will create a better system for all. It must be structured and resourced such that local, state, and national policies support community efforts that value human potential and enable individuals and communities to achieve their goals and thrive.
- Be based on a health care payment system that provides sufficient investments in and incentives for achieving health equity. Although the health care system alone cannot, and should not, solve for all of the social and economic barriers to good health, it must work to minimize their negative impact. Such a system must:
 - 1. include disparities reduction as an explicit measure of success that affects payment;
 - 2. address structural racism and xenophobia; and
 - 3. reduce the negative impact of social determinants of health.
- **Be data driven:** stratify and publicly report all quality measures by comprehensive demographics and social risk factors, measure outcomes to determine what is effective at reducing disparities and improving care, and drive payment and resource allocation.