

Innovative Ways State Medicaid Programs Can Address the Health Equity Aspects of Climate Change

Paul Shattuck (presenter), Emily Cross, Courtney Cappalli, Raga Ayyagari, Corrie Haley, Emily Harrison, Molly McGlone, and Vanessa Quince. All authors are employees of Mathematica.

BACKGROUND

- Climate change is the top threat to human health in this century.**
- Climate change strains the health system, harms health, and raises health costs.
 - Health burdens of climate change fall disproportionately on people who are at the heart of CMS programs – climate change is intrinsically an equity issue.
 - The CMS Framework for Health Equity 2022-2032 calls for considering climate change.
- The health care sector contributes nearly 10 percent of U.S. greenhouse gas emissions.**
- Medicaid can use its purchasing power, regulatory authority, and convening to foster decreases in emissions of harmful greenhouse gasses.
- Medicaid has huge untapped potential to serve as a transformative force in climate change adaptation, resilience, and mitigation efforts.**
- Medicaid has a distinguished record of addressing looming health crises creatively and promoting equitable outcomes and access to care while also stewarding precious taxpayer resources.
 - Some state Medicaid agencies have already begun to innovate and experiment in climate change, others are looking for a place to begin.

OBJECTIVES

- **Develop v 1.0 of a state Medicaid playbook of policy and program options** at the intersection of climate change and health equity.
- **Lay the foundation** for further efforts:
 - Developing and pilot testing a strategic action framework to help states navigate climate policymaking within the Medicaid context
 - Developing evidence to help inform emerging CMS responses to climate change

METHODS

- Activities across projects included**
- Landscape scans (more than 120 resources)
 - Key informant interviews (5)
 - Focus groups (3)
 - Analysis of Medicaid regulations
 - Developing policy comparison matrices
 - Design framework to compare and assess solutions and policy approaches

FINDINGS

This summary of findings across projects seeks to help state Medicaid programs learn about their policy options and act on how to use their Medicaid programs to address the equity dimensions of climate change.

Challenges facing state Medicaid programs	Resources Medicaid programs can draw upon	States are implementing or considering the following policy and program options to address climate change challenges	Interviews and landscape scans revealed additional options for states to consider
<ul style="list-style-type: none">• Building support in the face of climate change denialism, science skepticism, and competing priorities• Limited resources for developing and pilot testing new strategies• Defining Medicaid's role on an issue whose solution will require input and action from a broad array of programs and stakeholders• Establishing a common language and set of key concepts to improve capacity for collaboration among key stakeholders	<ul style="list-style-type: none">• Office of Climate Change and Health Equity's Health Sector Resource Hub• Agency for Healthcare Research and Quality's tool• Mathematica's Catalyzing State Medicaid Leadership on Climate Change Mitigation• ClimaWATCH, an interactive tool to boost climate adaptation and resilience• Peer Medicaid agencies	<ul style="list-style-type: none">• Collaborating with community-based groups and other state agencies• Using provisions of Medicaid section 1115 demonstrations to address climate change impacts• Drawing on mechanisms such as value-based payment, "in lieu of" services, and value-added services to encourage services and investments in climate change by health care providers• Developing a state Medicaid climate action response plan to protect health and promote the reduced production of harmful greenhouse gases by the health care sector	<ul style="list-style-type: none">• Using Medicaid claims data to identify the specific impacts of climate-related risks on the health of distinct marginalized populations and communities• Applying a climate lens to develop and amend existing policies and programs can help states act quickly: completely new action is not necessary to start• Adapting policy approaches used to address social determinants of health• Adapting lessons learned from facing other health issues (for example, opioids and serious mental illness)

We identified three primary dimensions of climate and health equity

- Preventing and reducing inequitable risk exposures and health impacts
- Increasing the resilience of disproportionately affected individuals and communities
- Reducing the risk of unwitting increases of inequities from mitigation strategies

FITE Framework for decision making

Mathematica designed a decision-making framework, FITE (F = feasibility; I = impact; T = timeliness; E = equity), for Medicaid agencies and policymakers to use to compare and assess solutions and policy approaches to reducing harm through decarbonization.

CONCLUSIONS

- State Medicaid programs and agencies can act now using already established resources, tools, and relationships.
- State Medicaid agencies seek opportunities to connect with peers across the country to share ideas and innovations.
- Agencies, community members, providers, and administrators need further guidance and education to act in concert.

FUTURE DIRECTIONS

- We are **pursuing a variety of project and thought leadership opportunities** at the intersection of health equity and climate change:
- Develop and test tactics state Medicaid agencies can use to pursue goals related to climate change adaptation, resilience, and mitigation.
 - Derive lessons learned from how CMS has effectively coped with previous emerging health issues to inform development of approaches, whereby CMS can pursue strategic planning, implementation, and continuous improvement efforts to tackle climate change challenges and address the intrinsic equity issues.
 - Review how the field of evidence and interventions related to social determinants evolved to derive lessons learned that can inform and accelerate the evolution of the emerging evidence base and options for intervention on health equity and climate change.
 - Develop state-of-the-art data tools to generate useful insights about the links among climate change risks; social vulnerability and social determinants; and outcomes related to health, health service use, and health care costs.
 - Foster learning and collaboration among state Medicaid agencies.

For more information, contact pshattuck@mathematica-mpr.com