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> 2021 Session Written Testimony

BILL NO: HB 309

COMMITTEE: Health and Government Operations

POSITION: Support

TITLE: Public Health - Data - Race and Ethnicity Information

Bill Analysis:

HB 309- Public Health- Data- Race and Ethnicity Information will require the Maryland Office of Minority Health and Health Disparities to collaborate with the Maryland Health Care Commission to publish a report card that includes racial and ethnic composition data on individuals who hold a license or certificate issued by a health occupations board, rather than only physicians. This bill requires the Office to respond to requests for health data that includes race and ethnicity information within 30 days of receipt of the request.

Position Rationale:

The Anne Arundel County Department of Health supports HB 309 which will require the Maryland Office of Minority Health and Health Disparities to collaborate with the Maryland Health Care Commission to publish a report card that includes racial and ethnic composition data on individuals who hold a license or certificate issued by a health occupations board, rather than only physicians. This bill requires the Office to respond to requests for health data that includes race and ethnicity information within 30 days of receipt of the request.

In July 2020, the Anne Arundel County Department of Health established the Office of Health Equity and Racial Justice. The purpose of this office is to focus on the social determinants of health, race inequities and justice, and to publish race and ethnicity data for health outcomes in order to understand health

disparities and inequities in the county. The Office of Health Equity and Racial Justice promotes equity in health and healthcare for minority and underserved populations through data, research, educating and training staffing and community members, engaging and partnering with communities, bringing public awareness of health inequities, and advocating for changes in policy, procedures, and practices. The goals of this office are to provide a clear picture of what health equity can look like because we realize the misconceptions about health equity leads to inequity in health. The Department of Health publishes a Report of Community Health Indicators annually which covers a plethora of issues within the county and HB0309 provides a useful tool to enhance the Department of Health's data collection processes.

Data plays a critical role in highlighting disparities and improving minority health outcomes. Research shows that on average, racial and ethnic minorities are more likely than whites to be uninsured and underinsured, and also to have higher rates of illness and death from conditions such as heart disease, stroke, specific cancers, diabetes, HIV/AIDS, asthma, hepatitis B, and overweight and obesity compared with the rest of the US population. We have found these trends in Anne Arundel County. With data recent as of 2018, the Report of Community Health Indicators reported the following:

- Heart disease was the leading cause of death for Black residents (21.3% of residents) followed by cancer, cerebrovascular disease, diabetes, and chronic lower respiratory diseases (such as COPD and asthma)
- The average life expectancy is 79.2 years with black men and women having a 75.2 and 80.3 year life expectancy respectively in comparison to 77 and 81.6 year life expectancy for white men and women respectively
- 19.0% of Hispanic and 4.7% of Black residents were uninsured

According to the Robert Wood Johnson Foundation, research shows that the history of individual and structural racism across generations denies the opportunity to people of color and robs them of their physical and mental health. Disparities include one's life expectancy being shorter than white neighbors that live in close proximity, facing higher risks of cardiovascular diseases, diabetes, obesity, and mental illness. The Robert Wood Johnson Foundation also states that babies born to black women are more than twice as likely to die in the first year of life as babies born to white women.

Research shows that by having improved data collection advances understanding of the importance of cultural and structural racism for racial health inequalities. Research also shows that race, ethnicity, and language data can be used to identify disparities which will increase an organization's motivation and ability to address the disparities.

This bill would play a significant role in how the Anne Arundel County Department of Health creates strategies to address health disparities in order to achieve health health equity for our most vulnerable populations.

Sources:

- 1. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5915332/pdf/nihms933293.pdf
- 2. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4441661/pdf/11606 2015 Article 3245.pdf
- 3. https://www.rwjf.org/en/library/collections/racism-and-health.html
- 4. https://aahealth.org/pdf/aahealthreportcard2020.pdf

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