

Health Understanding Education



The Ohio Commission on Minority Health

Quarterly Newsletter

May 2013

John Kasich, Governor

Gregory L. Hall, MD, Chairman

Angela C. Dawson, Executive Director

Governor Kasich Pushes Medicaid Expansion



April is Minority Health Month across the nation and on Thursday, March 28, 2013, the Ohio

Commission on Minority Health hosted the event which initiates a 30-day wellness campaign designed to promote healthy lifestyles.

Ohio Gov. John Kasich shared his views on the importance of Medicaid expansion during the statewide kickoff for Minority Health Month.

Governor Kasich shared that "disparity in access to health care for those in poverty is a problem to all in society".

Governor Kasich introduced biennial budget included the expansion of Medicaid to include Ohio's who earn up to 138 percent of the federal poverty level.

He further argued that this issue should not be one in which we play politics.

The event's keynote speaker, Senator Charleta Tavares shared her support of the Governor's



Medicaid Expansion plan acknowledging that "Medicaid works and it is one of the ways to expand health care and improve health outcomes in the state of Ohio."

Health disparities continues to widen for racial and ethnic minorities in Ohio and across the country and is reflected in the prevalence, morbidity and mortality rates for preventable diseases and conditions such as diabetes, heart disease, cancer and infant mortality. According to the Ohio Department of Health the infant mortality rate for African American infants is more than double that of White Ohioans.

Medicaid expansion would increase health coverage for approximately 275,000 Ohioans and would significantly impact minority health disparities by providing access to health care which is one of the underlying causes of disproportions in health outcomes.

The Patient Protection Affordability Care Act will provide 100 percent the costs to states who choose to expand Medicaid during the first three years and 90 percent of costs in future years resulting in significant projected cost savings.

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Good Health Begins With YOU!®

Health Expo 2013



Health Expo 2013, the official kickoff to Minority Health Month, was held on Thursday, March 28, 2013 on the 3rd floor lobby of the Vern Riffe Center in Columbus. There were over 40 exhibitor tables with everything from health screenings to healthy food samples. The event was attended by over 300 individuals throughout the day



State Senator Charleta Tavarres, State Senator Edna Brown, Director Angela Dawson and State Representative Roland Winburn



Commission Chairman Dr. Greg Hall honors Dr. Olivia Thomas as the outgoing Chairperson for the Commission on Minority Health.



The Ohio Commission on Minority Health founder former Senator Ray Miller tours the Expo.

From the Executive Director Angela C. Dawson



"The success or failure of any government in the final analysis must be measured by the well-being of its citizens. Nothing can be more important to a state than its public health; the state's paramount concern should be the health of its people" - Franklin Delano Roosevelt

Minority Health Month

Each year in Ohio and across the nation the month of April is set aside to focus on minority health issues. Minority Health Month was created in April 1989 as a 30-day high visibility health promotion campaign. The focus was to promote healthy lifestyles, provide crucial information to allow individuals practice disease prevention and gain additional support for the on-going efforts to improve minority health year round. In 2000, this event became a national celebration. In 2013 over 100 events will be hosted by community based agencies and organizations across the state to raise public awareness about the existence of health disparities and solutions to this problem. A calendar of these statewide activities is available on our website at www.mih.ohio.gov.

Life expectancy and overall health have improved in recent years for most Americans, thanks in part to an increased focus on preventive medicine and dynamic new advances in medical technology. However, not all Americans are benefiting equally from these advances. For too many racial and ethnic minorities in the United States good health is elusive since appropriate care is often associated with an individual's economic status, race, and gender.

History of OCMH

Over 25 years ago after attending a United States Health Research and Data Users meeting, former Senator Ray Miller saw the need for a state commission that would devote resources to address minority health disparities in Ohio. He proposed the idea to then Governor Richard F. Celeste who established the Taskforce on Black and Minority Health.

The necessity of a Commission was further documented in the 1986 Report of the Ohio Governor's Task Force on Black and Minority Health. This eighteen month study documented the disparity in health status between minority and majority populations in Ohio were caused by diseases of the heart (especially hypertension), cancers, type 2 diabetes, infant mortality, substance abuse and violence. These six diseases and conditions are preventable. This study further recommended the creation of a commission to address these issues.

In 1987, the Commission was the first effort of its kind in the nation with the creation of a state agency focused on addressing the health disparities of Ohio's racial and ethnic populations. Health disparities are defined as significant differences in the overall rate of disease incidence, prevalence, morbidity, and mortality rates between one population and another.

Health Expo 2013



From the Executive Director
Angela C. Dawson



The Ohio Commission on Minority Health is dedicated to eliminating disparities in minority health through innovative strategies and financial opportunities, public health promotion, legislative action, public policy and systems change.

The Costs of Disparities . . .

Events like Minority Health Month help bring attention to the fact that health disparities are costly. According to the 2011 United States of Diabetes Report, more than 50% of Americans could have diabetes or pre-diabetes by 2020. This will result in a cost of \$3.3 trillion for the federal government in Medicaid, Medicare and other public programs. In Ohio, diabetes cost Ohio \$5.9 billion annually in medical expenditures, reduced state productivity and premature mortality.

One can look across the chronic disease and conditions spectrum and the same health disparity disease pattern holds true for infant mortality, cancer, cardiovascular disease, substance abuse and violence. These disparities also have a negative impact Ohio's Health System Performance.

According to the Kaiser Family Foundation State Health Facts report, Ohio ranks among the lowest in the nation at 42nd in overall Health Outcomes, 42nd in preventing infant mortality, 37th in preventing childhood obesity, 44th in breast cancer deaths and 38th in colorectal cancer deaths.

Poor health outcomes for minorities are impacted by other factors such as substandard quality of care, inadequate access to care and lack of insurance. The Ohio Family Health Surveys the percentage of uninsured for all racial/ethnic categories increased between 2003 and 2010. This significant gap in health care access contributes to the widening gap of health disparities.

Medicaid Expansion

For that reason, the Commission strongly supports the Governor Kasich's effort to expand Medicaid and the resulting impact it will have on reducing minority health disparities. This healthcare access will extend life, reduce health disparities and decrease the cost of uncompensated care.

Ohio has the potential to save lives and dollars by taking steps to achieve the increased coverage and improving the health for more than 275,000 Ohioans. While the expansion will not solve all of our problems, it is a step in the right direction.

We must acknowledge that health disparities are real. Racial and ethnic minorities have shorter life-spans; have more diseases and experience difficulties accessing quality health care when compared to our White counterparts. Given these facts, what have been Ohio's efforts to solve this problem and more importantly, what are we willing to do in 2013 and beyond?

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State Representative Roland Winburn
Theodore Wymyslo, MD, Director, Ohio Department of Health



Department Designees

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