

CHCF CHIP Summary

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CHIP Title: Mandating Equity: Promoting Health Justice and Avoiding the Minority Tax

Project Description:

After issuing statements on racial justice during Summer 2020, health care institutions' attention towards health justice has decreased substantially. Meanwhile, health equity work is often (1) uncompensated and (2) undertaken by people from under-represented communities. This combination results in a "**minority tax**" on these colleagues, causing ongoing professional and psychological harm.

This project aimed to set an expectation that health equity promotion should be valued similarly to other "normal" professional goals (e.g., clinical productivity, academic involvement, and Division citizenship). During FY2020-2021, "an equity mandate" was implemented in our Division of Primary Care at an academic safety net hospital in Oakland, California. Eligible faculty had 1% of total potential compensation made contingent on specifying and meeting a health equity goal in their non-clinical work. Goals were made through shared decision-making between the Division Chief and faculty members, centering on two questions: "How might your work impact health equity?" and "How might you measure the impact of your work on health equity?"

Key Findings and Lessons Learned:

This project was successfully piloted despite the COVID-19 pandemic. Overall, 8 of 9 (88%) of faculty eligible for variable compensation participated in this health equity pilot. Faculty's chosen projects were broad and included workforce development pipeline programs, substance use disorder treatment access, and creating a health equity curriculum for resident learners.

Lessons learned included:

- Mandating equity can normalize, recognize, sustain, and assign value to diversity, equity, and inclusion work. Even if this work is ongoing, it can recognize and normalize it.
- Creating a shared expectation around health equity work can counterbalance the minority tax
- A simple series of two questions can help team members to identify and measure their work's impacts on health equity
- Competing priorities (e.g., a global pandemic) can impact individuals' and institutions' pacing and benchmarking of equity work
- Equity promotion cannot be an afterthought—it will never be convenient to center on the margins!

Next Steps:

- At Alameda Health System, compensation models are being reviewed. In the future, incentive payment models for physicians in other Divisions and Departments—or across the entire Physician Group—could include equity promotion.
- While this CHIP focused on compensation, equity mandates can be adopted within our organization more broadly. For example, a leader could simply require that new proposals include a discussion or evaluation of impact on health equity.