



Hyatt Regency Hotel  
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# Conference Summary Report

December 2-5, 2009

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**For post-conference details, visit:**  
[www.msm.edu/Events/Post-Conference\\_Home.htm](http://www.msm.edu/Events/Post-Conference_Home.htm)



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## Letter from President John E. Maupin



The issue of health care reform still looms large on our nation's agenda as Congress continues this important ongoing debate. The Third Annual Conference on Health Disparities: Health Care Reform: *Seizing the Opportunity to Bring Equity and Justice into the U.S. Health System* provided an excellent opportunity for participants from across our nation to debate the many facets of health care reform and its impact upon the health of our citizens. The Morehouse School of Medicine and the Medical University of South Carolina were proud to co-sponsor this ground breaking conference in partnership with the Congressional Tri-Caucus.

This conference brought together health care experts, health care providers and patients, community health advocates, students, government officials and policymakers, researchers and members of Congress. Three days of debate, interaction and sharing of best practices helped to inform the national dialogue. Participants were energized to return to their institutions and communities committed to continue the dialogue, engage others in the debate and institute positive change.

Historic and impactful – that is how many describe the conference. With support from the Congressional Tri-Caucus, our elected officials interacted with hundreds of conference participants and Atlanta University Center students. The Congressional Tri-Caucus is composed of the Congressional Black, Hispanic and Asian and Pacific Islander Caucuses. They are members of Congress representing the populations that suffer the greatest health disparities within our nation. The conference discussed and analyzed the health disparities that exist in our nation today, but more importantly, it showcased the many successful programs and partnerships that are making demonstrable positive changes in the health of individuals and communities. Our two medical schools were established with the purpose of improving the health of our nation through education and service; and the mission of Morehouse School of Medicine speaks directly to providing health care services to the underserved and communities of color.

The following pages provide a synopsis of the conference proceedings with a pictorial essay of participants and events. We trust that it captures the flavor and level of excitement felt by those who attended and inspires readers to continue to address the issue of health care reform in their local communities. For those of us committed to improving the health and well being of our nation, it is impossible to silence this conversation. We hope to see you at the Fourth Annual Conference on Health Disparities, Nov. 10-13, 2010 in Philadelphia, PA.

John E. Maupin, Jr., D.D.S., M.B.A.  
President

Morehouse School of Medicine is dedicated to improving the health and well-being of individuals and communities; increasing the diversity of the health professional and scientific workforce; and addressing primary health care needs through programs in education, research, and service, with emphasis on people of color and the underserved urban and rural populations in Georgia and the nation.



## Letter from President Raymond S. Greenberg



Friends:

It was a pleasure to co-sponsor The Third Annual Conference on Health Disparities: Health Care Reform: *Seizing the Opportunity to Bring Equity and Justice into the U.S. Health System* with Morehouse School of Medicine. It afforded our two medical schools the unique privilege to host this ground breaking conference along with the Congressional Tri-Caucus, representing the Black, Hispanic and Asian and Pacific Islander Caucuses.

Building upon its predecessors, this conference transitioned the national dialogue on health disparities from recognition of conditions and causes to recommendations and directions for public policy and legislative action. During the three-day conference, we learned that innovative and transformational strategies are being successfully applied to eliminate health inequities. We also gained a greater understanding about the social determinants of health disparities, the impact of technology on reducing costs and improving outcomes, the role of community health centers in health care delivery, and the benefits of public/private partnerships in addressing health care issues. The conference was a testament to how far we have come, but it also was a sobering reminder of how far we still have to advance.

We are pleased that you chose to join us at the Third Annual Conference on Health Disparities and look forward to your attendance at the Fourth Annual Conference, November 10-13, 2010 in Philadelphia, Pennsylvania.

Raymond S. Greenberg, M.D., Ph.D.  
President  
Medical University of South Carolina

### About MUSC

Founded in 1824 in Charleston, The Medical University of South Carolina is the oldest medical school in the South. Today, MUSC continues the tradition of excellence in education, research, and patient care. MUSC educates and trains more than 3,000 students and residents, and has nearly 11,000 employees, including approximately 1,500 faculty members. As the largest non-federal employer in Charleston, the university and its affiliates have collective annual budgets in excess of \$1.7 billion. MUSC operates a 750-bed medical center, which includes a nationally recognized Children's Hospital, the Ashley River Tower (cardiovascular, digestive disease, and surgical oncology), and a leading Institute of Psychiatry. For more information on academic information or clinical services, visit [www.musc.edu](http://www.musc.edu). For more information on hospital patient services, visit [www.muschealth.com](http://www.muschealth.com).



## Executive Summary

### A National Dialogue – Conversations, Questions, Answers

It is an important and critical national dialogue. From across the nation, 605 participants from 32 states converged in Atlanta to participate in The Third Annual Conference on Health Disparities – Health Care Reform: *Seizing the Opportunity to Bring Equity and Justice into the U.S. Health System*. The conference was sponsored by the Medical University of South Carolina (MUSC) and Morehouse School of Medicine (MSM) in partnership with the Congressional Tri-Caucus. Building on two previous national conferences, the four-day meeting focused on the current national debate regarding health care reform and its impact upon the nation's population. The days between December 2 and 5 were packed with dialogue, debate, presentations, speakers, panels, workshops, exhibits and networking opportunities.

### Why the Need for a Conference on Health Disparities?

The statistics continue to clearly outline the ongoing and persistent gap in the health care outcomes of various groups with populations of color suffering the most. Communities of color are poorer, sicker and less able to access quality health care. The purpose of the conference was to answer the question, *Why do these disparities continue and what is being done to change the outcomes?* Health care professionals, community leaders, policymakers, corporate representatives, academicians, and patients joined together to ask the difficult questions and lend their expertise to articulating solutions.

Although the reason for the conference is the ongoing health disparities that continue to plague our nation, the meeting focused on programs that work — solutions and best practices. A major emphasis throughout the conference was community health programs that have demonstrated proven results in improving the health and well being of patients, families and communities. Many presenters discussed

the issue of social determinants of health clearly articulating that poverty, racism, classism, place, personal responsibility and cultural incompetency must be adequately and honestly addressed before progress can be made. In addition to health care reform, the emerging issues of health information technology, global warming, and climate change were also discussion topics. The conference did not avoid controversial issues as it challenged the participants and presenters to think and act differently moving forward.

### An Ongoing Commitment

Morehouse School of Medicine and the Medical University of South Carolina have a long history of organizational commitment to address and end health disparities in this country. Programs of education, research, training and service are part of a comprehensive approach to work in partnership with communities and partner networks. The organization that joined the two academic institutions to support the conference was the Congressional Tri-Caucus. This umbrella organization includes the Congressional Black Caucus, Congressional Hispanic Caucus and the Asian and Pacific Islander Caucus all dedicated to the elimination of health care disparities within their organizational missions. Members of Congress divided their time between active voting on health care reform in Congress and active conference participation. This unique conference allowed participants to interact directly with members of Congress and health industry representatives on the hotly debated issue of health care reform. By bringing the ground experience and successful working programs to the conversation, community members and health practitioners challenged policymakers to incorporate innovative ideas into legislative considerations.

It was important that all sectors of society be represented throughout the meeting. The voices of various communities were heard through representatives and the participation of The National Council of LaRaza, The Hispanic Health Coalition of Georgia, Inc., AARP, Asian and Pacific Islander

American Health Forum, Congressional Black Caucus Foundation and The Indian Health Service. Federal and state agencies were active participants with attendance by the 18th U.S. Surgeon General, Dr. Regina Benjamin; Dr. Mary Wakefield, administrator, Health Resources and Services Administration; Dr. John Ruffin, director, National Center on Minority Health and Health Disparities; Dr. Garth Graham, director, Office of Minority Health; Dr. Susan Karol, medical director, Department of Health and Human Services, Indian Health Service; and Dr. Rhonda Medows, commissioner, Georgia Department of Community Health. Academic universities, corporate health care plans, primary health care clinics, foundations and community groups brought their expertise, points of view and research findings to share with the larger audience. Exhibitors provided conference support, nutrition demonstrations and educational services to conference participants. On display was the recently released textbook, "Health Issues in the Black Community," 3rd edition, which highlighted MSM editors Drs. Henrie Treadwell and Ronald Braithwaite.

### Educational Preconference Sessions

Taking place in Atlanta, the home of the Atlanta University Center, a preconference student forum

was held on the campus of Morehouse School of Medicine. Three hundred students joined a panel of Congresspersons via videoconference to address health care reform issues from a student's perspective. OraSure provided HIV/AIDS education and confidential testing opportunities for the AUC student population. Continuing education courses for staff of federally qualified community health centers were offered as a preconference session. A workshop entitled "Diversidades" focused on the specific health issues of the Hispanic patient and cultural competency training for health care providers.

Throughout the following pages you will find more detail and description of the proceedings of the Third Annual Conference on Health Disparities. Photographs and video segments are available on the web at [www.msm.edu](http://www.msm.edu). We welcome your feedback and invite you to mark your calendar for the Fourth Annual Conference on Health Disparities, which will be held in Philadelphia, PA, Nov. 10-13, 2010. We encourage you to take an active role in addressing the health disparity and health reform issues within your local community and organizations. Each of us has an important role to play in improving the health and well being of our nation. We invite you to join us in this ongoing work.

(l to r): The Hon. Mike Honda, The Hon. David Scott, The Hon. Barbara Lee, The Hon. Donna M. Christensen, M.D.



## Youth Summit – Our Future Leaders



### 1st Annual AUC Student Conference on Health Disparities: *A Conversation on the Future of Health*

This year, the Third Annual Conference on Health Disparities co-sponsored by Morehouse School of Medicine (MSM), Medical University of South Carolina (MUSC) and the Congressional Tri-Caucus included a special student town hall forum. The First Annual Atlanta University Center (AUC) Student Conference on Health Disparities was held at MSM's Louis W. Sullivan National Center for Primary Care. The interactive student-led event included a live teleconference with a select panel of U.S. Congresspersons in Washington, DC, including Representative Donna M. Christensen, M.D., (D-VI), Representative Danny K. Davis (7th District-IL), and Representative John Lewis (5th District-GA), as well as a live Atlanta panel of primary care physicians and educators. Ngozi Anachebe, M.D., FAAOG, assistant dean of students (MSM), David Levine, M.D., FAAP, Department of Pediatrics (MSM), Ayanna Buckner, M.D., M.P.H., Department of Community Health and Preventive Medicine (MSM), and Isabella Finkelstein, Ph.D., Department of Biological Sciences (Clark Atlanta University) were all on hand to discuss the student perspective on the future of health and respond to students' questions.

The conference brought together 250 select students from the AUC institutions—Morehouse College, Spelman College, Clark Atlanta University and Morehouse School of Medicine—along with the City of Atlanta Public High School System. The students were granted direct access to members of Congress who were actively engaged in the debates, and the in-house Atlanta panel served as a conduit, lending the experienced insight of primary health care providers and educators. Questions regarding student health insurance and the prospect of universal coverage inevitably arose, along with

concerns for the future of primary care, and provisions to increase the amount of minority physicians and other health care providers.

The conference was planned with an interactive theme in an effort to engage a younger audience with varying educational levels. In addition to receiving invitations through an e-mail campaign, participants were able to pre-register for the conference online and to electronically submit questions for the panelists. One of the highlights of the forum was the interactive live polling. Audience members were able to respond to polls and submit questions during the forum via text messaging. Poll results were featured throughout the teleconference displayed on flat screen panels, and kept students actively involved in the topics being discussed. All conference participants also received satchels filled with literature and statistical information regarding health disparities, as well as, relevant information for each education level. The high school students received college information packets while college student participants received professional school timelines and application packets. Information on post-graduate training opportunities were distributed to public health and medical student participants. An e-mail conversation group will keep the students connected over the coming months as the national debate on health care continues.

The mission of the forum was to provide an interactive, high-tech, and engaging opportunity for students of all educational levels to weigh in on health disparities and the national debate over health care. As future physicians, leaders, and the future recipients of health care, it is imperative that young people feel connected to the issues and that their opinions are heard. This was a unique opportunity to



Atlanta University Center students are pictured with U.S. Congressional leaders.

promote civic responsibility and to instill in young people the understanding that they are entitled and obligated to know about political decisions that may affect their future professions and lives. It was a unique opportunity for students to meet face to face with elected officials and AUC faculty who serve as excellent role models in this leadership development process.

The forum was a highlight and unique component of the national conference as it engaged our emerging leaders in the important dialogue of health

care and allowed the next generation to raise their voices and share their opinions. The session was captured in video recording and will be utilized as a companion learning curriculum tool by the academic institutions. The student forum was endorsed by The Satcher Health Leadership Institute of Morehouse School of Medicine, The Leadership Center of Morehouse College, Spelman College's Center for Leadership and Civic Engagement (LEADS), Clark Atlanta University's Office of the Vice President and The Andrew Young Foundation.

## Policy Leaders Participate

Juggling votes in the halls of Congress in Washington, DC, and participation in the Third Annual Conference on Health Disparities in Atlanta, members of Congress interacted with conference participants in person and through videoconferencing. With real-time Congressional discussion on the topic of health care reform taking place simultaneously on Capitol Hill, conference participants were able to have access to the latest day-by-day developments as they watched their elected officials in action. An important purpose of the conference was to assure that our elected officials were able to hear the voices, opinions, concerns and recommendations of conference participants who represented all segments of society. Morehouse School of Medicine is dedicated to magnifying the voices of both our health care provider community and the populations that they have pledged to serve. This conference accomplished this goal in a remarkable manner.

The Congressional TriCaucus – which includes the Congressional Black Caucus, the Congressional Hispanic Caucus and the Congressional Asian and Pacific Islander Caucus – is committed to health care reform that strengthens all communities and significantly reduces the deleterious health disparities that disproportionately affect people of color across the United States and in the U.S. Territories. Their health care reform work in Congress has been formulated under a set of guiding principles that are important to all racial and ethnic minority communities. These principles include:

- > Ensure universal and comprehensive access to quality health care
- > Ensure that achieving health equity and the elimination of health disparities are integrated objectives throughout the health reform bill
- > Strengthen and coordinate the agencies and office with health jurisdiction
- > Reverse critical health workforce shortages and increase the diversity and cultural competence of health and health care professionals

- > Ensure that community-centric health efforts – particularly those that will expand access to care and improve the health and well being of the communities that are hardest hit by health inequities – are integrated in health reform
- > Prioritize prevention and public health promotion in both clinical and community settings
- > Bolster data collection, expand diversity in clinical trials, and ensure equitable implementation of health information technology

Welcoming conference participants to both the conference, City of Atlanta and State of Georgia, Congressman John Lewis (Fifth District-GA) and Georgia-elected officials hosted the conference opening reception, *Georgia on Our Minds*. The Congressional keynote address was presented by the Honorable James E. Clyburn, House Majority Whip, U.S. Congress (Sixth District-SC) who discussed health care reform and the impact of the stimulus funding package.

Another conference highlight was the Congressional Briefing Panel moderated by WSB News Anchor Monica Pearson. Pearson has won 29 Local and Southern Regional Emmy Awards and is the “2004 Georgia Woman of the Year.” A long time health advocate for women and children, Pearson coordinated the panel of congress members who interacted with conference participants on many interesting, controversial and cutting-edge topics. Congress members included The Honorable Barbara Lee, Chair of the Congressional Black Caucus and U.S. Congress (Ninth District-CA); The Honorable David Scott, U.S. Congress, (Thirteenth District-GA); The Honorable John Lewis, U.S. Congress (Fifth District-GA); The Honorable Donna Christensen, M.D., Co-Chair of the CBC Health and Wellness Taskforce, U.S. Congress Delegate of the U.S. Virgin Islands; and The Honorable Michael Honda, Chair of the Congressional Asian Pacific American Caucus, U.S. Congress (Fifteenth District-CA).



Congresswoman Barbara Lee, Chair of the Congressional Black Caucus



The Hon. James E. Clyburn



Congressman Michael Honda, Chair of the Congressional Asian Pacific American Caucus



The Hon. G.K. Butterfield



18th U.S. Surgeon General Regina Benjamin, M.D., M.B.A.



The Hon. John Lewis

# THANK YOU

## Supporters:



## Co-Supporters:



Commissioner Nancy Boxill



(l to r) Front Row: The Hon. John Lewis, The Hon. Donna M. Christensen, M.D., The Hon. Mike Honda, Sabra C. Slaughter, Ph.D., Back Row: Earlexia Montoya Norwood, M.D., John E. Maupin Jr., D.D.S., M.B.A., David E. Rivers



Ambassador Andrew Young



The 18th U. S. Surgeon General Regina M. Benjamin, M.D., '82, M.B.A., with conference attendees.



WSB-TV News Anchor Monica Pearson



(l to r) Britt Rios Ellis, Ph.D. and Mary Wakefield, Ph.D.



(l to r) Gary McGaha, Ph.D., John H. Eaves, Ph.D.



(l to r) John E. Maupin Jr., D.D.S., M.B.A., Regina Benjamin, M.D., M.B.A., David E. Rivers, Alex B. Cummings



Former Atlanta Mayor Shirley Franklin



(l to r) The Hon. Donna M. Christensen, M.D., Ambassador Andrew Young, Sen. Samuel Sanes



Atlanta University Center students and conference participants with Regina Benjamin, M.D., M.B.A.



Exhibition area



(l to r) John Ruffin, Ph.D., David Satcher, M.D., Ph.D., Regina Benjamin, M.D., M.B.A.



Reed V. Tuckson, M.D., FACP



(l to r) Front Row: John Ruffin, Ph.D., David Satcher, M.D., Ph.D., Raymond S. Greenberg, M.D., Ph.D., Regina Benjamin, M.D., M.B.A., John E. Maupin Jr., D.D.S., M.B.A., The Hon. Donna M. Christensen, M.D., Back Row: Willie Clemons, Ph.D., Virginia Davis Floyd, M.D., M.P.H., Sandra Harris Hooker, Ph.D., Francis Dunston, M.D., M.P.H., Michael Young, Reed V. Tuckson, M.D., FACP, Ingrid Saunders Jones, David E. Rivers, Gary A. McGaha, Ph.D., Valerie Montgomery-Rice, M.D., Rueben Warren, D.D.S., M.P.H., Dr. P.H. M. DIV., Kimberlydawn Wisdom, M.D.



Earlexia Montoya Norwood, M.D.



Exhibition area

# Time May be at Hand for True Health Reform

## Cautious Optimism at Health Disparities Conference in Atlanta

As the health reform debate was taking place in Washington, D.C. and across the country, it was fitting that the Third Annual National Conference on Health Disparities took place in Atlanta, Georgia the birthplace of the Civil Rights Movement. The conference, subtitled “Health Care Reform: Seizing the Opportunity to Bring Equity and Justice into the U.S. Health System,” featured officials from academia, health facilities, government and industry offering cutting edge concepts regarding primary care – including wellness, prevention, and health care delivery – for the 21st century. The conference was a virtual “Who’s Who” of dedicated professionals determined to stem the tide of disparities and lack of health care coverage. Conference co-sponsors were Morehouse School of Medicine (MSM), Medical University of South Carolina and the Congressional Tri-Caucus.

### Youth Town Hall on Health Care Sets Tone for Disparities Conference

The day before the conference began, Rep. Donna Christensen, U.S. Delegate to Congress from the Virgin Islands, Rep. Danny K. Davis of Illinois and Rep. John Lewis of Georgia participated in a youth forum via video conference at the Morehouse School of Medicine’s Louis W. Sullivan National Center for Primary Care (NCPC) auditorium. College and high school aged students asked questions via video conference and text message to the delegates in Washington D.C. about their plans for health care reform. Atlanta panel experts included Isabella Finkelstein, Ph.D., Clark Atlanta University professor of Biology, and Ngozi Anachebe, Pharm.D., M.D., ‘98, MSM assistant dean of Admissions and Student Affairs. “I was impressed by the enthusiasm and breadth of knowledge the students exhibited during the Town Hall,” said Rep. Lewis.

Also prior to the conference, the National Center for Primary Care of MSM hosted three hands-on pre-conference workshops. These workshops were designed for clinicians and health care professionals working in underserved and diverse communities across the country. The workshops focused on three distinct areas: clinical care of the Latino or Hispanic patient, patient-centered primary care health and financial management of a clinical practice.

### By the Numbers

According to statistics compiled by the National Institutes of Health, Centers for Disease Control and Prevention and the Georgia Department of Human Resources Division of Public Health, here is a sample of the health issues and diseases that affect minorities disproportionately:

- Although asthma affects people of all races, African Americans are more likely than whites to be hospitalized for asthma attacks and to die from asthma.

- African Americans are 30% more likely to die of cancer than whites. The incidence of certain cancers is also higher in Asian, Hispanic, and Hawaiian populations than in the white population.
- Heart disease is the leading cause of death for all racial and minority groups.
- The prevalence of type 2 diabetes is 2.6 times higher in Native Americans, 2 times higher in African Americans, 1.9 times higher in Hispanics/Latinos, and 2 times higher in Mexican Americans than in whites.
- The incidence of HIV/AIDS is 24 times higher in African-American females than in white females.
- The infant death rate is twice as high among American Indians, African Americans, and Alaska Natives as among whites.
- Obesity is a factor in the development of many chronic diseases, such as: diabetes, heart disease, stroke, and some types of cancers. African Americans have a high prevalence of obesity in the U.S.

### Not All Gloom and Doom

John Ruffin, Ph.D., director, National Center on Minority Health and Health Disparities (NCMHD), National Institutes of Health (NIH), kicked off the conference by presenting an “Overview of Health Disparities in the U.S.,” including the disproportionate incidences of heart disease, cancer, diabetes, infant



Dr. John Ruffin, featured presenter, provides commentary regarding the “Overview of Health Disparities in the U.S.” presentation.

mortality and HIV/AIDS, incurred by people of color. He noted many of the health disparities facing people of color have shown little improvement over the past 30 years. “The same challenges remain,” said Ruffin. “Lack of insurance, lack of primary care physicians, overdependence on emergency rooms and segregated neighborhoods are still contributing factors.”

However, the mood of the conference was cautiously optimistic. Despite the disparities that have changed little over the past 30 years, and with thousands of people losing their health insurance every week, the U.S. members of Congress were optimistic meaningful health reform would take place in the near future despite the aggressive tactics of the political opposition. As Rep. James E. Clyburn of South Carolina said channeling Martin Luther King Jr. during the Civil Rights struggle of the 1960s, “Opponents will ALWAYS say now is not the right time. But they never say when it would be better.”

Ruffin mentioned the great strides made by MSM in genetic research and in increasing the number of doctors dedicated to reaching the underserved. He also spoke about incentives in place at NCMHD including the “Community-Based Participatory Model,” which offers financial incentives over an 11-year period to bring health care solutions to the underserved.

### A Very Special Guest

The first day’s luncheon speaker was newly confirmed U.S. Surgeon General – and MSM graduate – Regina Benjamin, M.D., M.B.A. Benjamin – the 18th U.S. Surgeon General – was introduced by MSM President Emeritus Louis W. Sullivan, M.D., who is a former Secretary of the U.S. Department of Health and Human Services.

Benjamin, who arrived bearing a greeting from President Barack Obama, spoke about how her “alma mater” helped her find her career goals while under the tutelage of Dr. Sullivan and the 16th U.S. Surgeon General David Satcher, M.D., Ph.D., director, The Satcher Health Leadership Institute and Center of Excellence on Health Disparities; Poussaint-Satcher-Cosby Chair in Mental Health, Morehouse School of Medicine, whom she referred to as a “true servant leader.” “Dr. Satcher showed me by example how to truly care for people.”

Benjamin, who became the first black woman and the first doctor under age 40 elected to the American Medical Association’s board of trustees, and in 2002 became the first black woman to head a state medical society, pledged to take what she learned at MSM, and at the rural, impoverished clinic she founded to the top tier of American medicine. She says among her goals are to combat preventable diseases and increase the number

of primary care physicians. “You could say I am opening a new satellite office in Washington – one with over 300 million Americans as my patients.”

Another highlight of the conference was a panel discussion, “The Role of Community Health Centers in Improving Health Outcomes,” about the growing importance of community health centers to increase health care access and to reduce the burdens currently experienced by hospital emergency rooms. Participants on the panel included Mary Wakefield, Ph.D., administrator, Health Resources and Services Administration, U.S. Department of Health and Human Services, Washington, DC; and George Rust, M.D., M.P.H., director, National for Primary Care (NCPC), Morehouse School of Medicine.

Rust, who described NCPC as the center that “trains the doctors America really needs,” pointed out that almost every day, a baby dies in Georgia who wouldn’t die if there was no black-white gap in infant mortality. “This is also true in Chicago and many other places,” he added.

Rust said health disparities are not inevitable. “They are not a fixed position we have to accept. By ensuring every community has a community health center or other primary care access, ensures that hospital emergency rooms are not the safety net for the safety net.”

Plans are underway for next year’s conference. The hope is at that conference, there will be much progress to report on in health disparities and access—thus finally moving the needle that has been “stuck” for 30 years.



Dr. Raymond S. Greenberg, president, Medical University of South Carolina (MUSC), co-supporter of conference.

## Powerful Points



Dr. Reed Tuckson of UnitedHealth Group Center, gives a keynote address during conference.

On Thursday morning, Reed V. Tuckson, M.D., Executive Vice President and Chief of Medical Affairs, UnitedHealth Group Center in Minnetonka, MN, delivered a powerful, poignant keynote address about the problems of health care and health disparities.

Tuckson began with one underlying question: After all these years – why have we been so unsuccessful in improving the health of people of color? Tuckson, who among other prestigious positions, has been vice

president of professional standards for the American Medical Association (AMA) and served as president of Charles R. Drew University of Medicine and Science in Los Angeles, said there are multiple reasons beyond the fact that “health is hard.” He pointed out that the delivery system is sub-optimal and there has been a lack of targeted, sustained, serious leadership.”

He added an additional factor he said that many downplayed, but is key to successful health care. “We have to acknowledge there is an absence of individual accountability,” said Tuckson. He pointed out that one-third of all health-related deaths are the result of behavior, including smoking, poor diet and a lack of exercise.

Tuckson said a key element for making health care affordable, sustainable and available to all is effective disease prevention. To this end, he said people need better information and guidance about what to do and what works. “But most important,” said Tuckson, “we must challenge ourselves and every program and every stakeholder to get real and be more effective; to move beyond good intentions to meaningful action. We also have to love ourselves, each other, and life just a little more.”

### List of Conference Moderators and Panelists

Robert J. Adams, M.D.	Mark Homonoff, M.D.	John Ruffin, Ph.D.
Michael J. Barber	Sandra Harris-Hooker, Ph.D.	George Rust, M.D., M.P.H., FAAFP, FACPM
Maria Pajil Battle	Barbara Lee Jackson, M.P.H.	David Satcher, M.D., Ph.D.
Regina Benjamin, M.D., M.B.A.	Carolyn M. Jenkins, DrPH	Sabra C. Slaughter, Ph.D.
George Byron Brooks, M.D.	Susan V. Karol, M.D.	Brian D. Smedley, Ph.D.
Gail C. Christopher, Ph.D.	Thomas A. LaVeist, Ph.D.	Steve Suitts
Alexander B. Cummings	John E. Maupin, Jr., D.D.S., M.B.A.	Louis W. Sullivan, M.D.
Victoria M. DeFrancesco Soto, Ph.D.	Earlexia Montoya Norwood, M.D.	Reed V. Tuckson, M.D., FACP
John H. Eaves, Ph.D.	Robert W. Ogilvie, Ph.D.	Mary Wakefield, Ph.D.
Virginia Davis Floyd, M.D., M.P.H.	Monica Pearson	David R. Williams, Ph.D.
Mayor Shirley Franklin	Britt Rios-Ellis, Ph.D.	Kimberlydawn Wisdom, M.D.
Roland J. Gardner	David E. Rivers	Ambassador Andrew Young
Garth N. Graham, M.D., M.P.H.	Marguerite Ro, DrPH	
Raymond S. Greenberg, M.D., Ph.D.	George Rowan, Ph.D.	

## MSM Research

### Lower Cost Alternative to Rural Emergency Room Visits

During the panel discussion entitled, “The Role of Community Health Centers in Improving Health Outcomes,” George Rust, M.D., M.P.H., director of NCPC, discussed a study he recently co-authored that could have a profound impact on improving health access in underserved rural communities while also cutting costs.

The study, which appeared in the 2009 winter edition of *The Journal of Rural Health*, found that Community Health Centers (CHCs) are a sound – and less expensive alternative – for the uninsured, especially in rural communities with no other primary care safety net. Also, by establishing more CHCs, communities could also reduce uninsured emergency department (ED) visits in rural communities.

CHCs are community-owned organizations that provide comprehensive primary care regardless of the ability to pay, using a sliding-scale fee structure subsidized by grants from the Health Resources and Services Administration’s Bureau of Primary Health Care under Section 330 of the U.S. Public Health Service Act. Included in the study were health centers serving migrant workers, the homeless, and public housing communities. Rust believes the study could have a profound impact on increasing access for medical care at less cost, while freeing EDs for urgent medical emergencies.

Rust pointed out that a large proportion of patients visiting EDs have medical problems that could be adequately treated in general primary care practice. ED visits by uninsured patients create a special problem for hospitals and society because the burden of indigent care in a costly ED setting is borne by other patients, payers, and their communities. “In most states, uninsured rates are higher in rural areas than in urban areas, and the financial burden of uninsured ED visits has a direct impact on the financial viability of small rural hospitals,” said Rust.

In the study, researchers compared uninsured ED visit rates between rural counties in Georgia with a CHC clinic site and counties without CHCs.

Also in the study, the researchers analyzed data from 100 percent of ED visits occurring in 117 rural counties in Georgia from 2003 to 2005. The counties were classified as having a CHC presence if a federally funded (Section 330) CHC had a primary care delivery site in that county throughout the study period.

The main outcome measure was uninsured ED visit rates among the uninsured (all-cause ED visits and visits for ambulatory care sensitive conditions). To ensure that the effects were unique to the uninsured population, the researchers conducted similar analyses on insured ED visits.



Dr. George Rust provides key information to conference attendees.

The researchers found that counties without a CHC primary care clinic site had 33 percent higher rates of uninsured all-cause ED visits per 10,000 uninsured population compared with non-CHC counties. Higher ED visit rates remained significantly higher after adjustment for percentage of population below poverty level, percentage of black population, and number of hospitals.

Rust and his researchers concluded that the absence of a CHC is associated with a substantial excess in uninsured ED visits in rural counties, an excess not seen for ED visit rates among the insured. “CHCs have the potential to prevent emergency visits by providing a primary care medical home for best-practice chronic disease care and preventive services,” says Rust. “They are also a more cost-effective and care-appropriate setting for managing acute but primary care-treatable episodes of care.

Rust said further research is needed to directly assess the proportion of uninsured clients from each county receiving care in CHCs and having ED visits for emergent and non-emergent conditions and also quantify the economic benefit attributable to the CHC-associated reduction in uninsured ED visit rates.

Rust’s study was supported in part by grants from the National Institutes of Health National Center for Minority Health and Health Disparities (NIH/NCMHD) and NIH National Center for Research Resources (NIH/NCRR), Atlanta Clinical & Translational Science Institute and the DHHS/Office of Minority Health. Access to data on emergency department visits was provided by the Georgia Hospital Association.

## Appendix In the News



### Surgeon general calls for more minority doctors

*Benjamin: Proportion of minority physicians hasn't changed in a century*

Jenni Girtman / AP

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"There's something wrong with that," said Benjamin, speaking at a conference on health disparities at a hotel in downtown Atlanta.

By contrast, minorities account for about 34 percent of the U.S. population, according to 2008 figures from the U.S. Census Bureau.

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U.S. Surgeon General Dr. Regina Benjamin, left, who is invited on stage by Morehouse School of Medicine President Dr. John Maupin, Jr., right, accepting a proclamation from MSM during the welcome reception of The Third Annual Conference on Health Disparities in Atlanta.

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This photo provided by Morehouse School of Medicine, Wednesday, Dec. 2, 2009, shows U.S. Surgeon General Dr. Regina Benjamin, left, who is invited on stage by Morehouse School of Medicine President Dr. John Maupin, Jr., right, accepting a proclamation from MSM during the welcome reception of The Third Annual Conference on Health Disparities in Atlanta.



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### More minority doctors are needed, new U.S. Surgeon General says

By Associated Press health & medical staff

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### Surgeon general calls for more minorities in medicine

By Craig Schneider  
The Atlanta Journal-Constitution

U.S. Surgeon General Regina Benjamin said Thursday that the nation must reverse the downward trend of minorities attending medical, dental and nursing schools.

"Unless the current trend is reversed, our country will see a growing ethnic and racial disconnect between those who receive care and those who provide that care," Benjamin said during a conference on health disparities in downtown Atlanta.

The 53-year-old graduate of the Morehouse School of Medicine said the recent downward trend in minority admissions follows years of gains in these areas. She cited a study that said minorities make up only 6 percent of U.S. physicians, and she lamented that the percentage was the same in 1910.

"There's something wrong with that," she told an audience of 500 health professionals, educators and advocates at the Hyatt Regency.

Asked whether the need for more minority medical professionals would be a priority of her time as the nation's highest-ranking health profession, the newly appointed Benjamin told The Atlanta Journal-Constitution that she has yet to announce her priorities. But she emphasized that it is an important issue.

President Barack Obama nominated the Alabama physician in July, and she was sworn in Nov. 3.

In one of her first speeches as surgeon general, she told the audience that Obama was committed to eliminating health disparities, improving access to health care and providing care for all Americans.

Benjamin paid homage to the Morehouse School of Medicine and to her mentors there, two of whom shared the dais with her.

She praised Dr. Louis Sullivan, a former U.S. secretary of

## Appendix In the News

health and human services, as someone "who has always been there for me." Sullivan held the Bible when she was sworn in as surgeon general.

Sullivan praised Benjamin for her Bayou La Batre Rural Health Clinic, located in a tiny fishing village on the Alabama's Gulf Coast. She had treated many patients who cannot afford to pay her.

After hurricanes and fires destroyed her clinic, Benjamin rebuilt it using her own credit cards, personal savings and donations.

"She makes house calls, she drives a pickup truck, and she accepts oysters and corn as payment," Sullivan said.

He added, "She is only at the beginning of her career."

Dr. David Satcher, prior to his own appointment as U.S. surgeon general, was Benjamin's teacher between 1980 and 1982.

Satcher, she said, taught her how to be a "servant leader," someone who serves "not for the glory, not for the fame ... They see something needs to be done, and they do it."



### Surgeon General: More Minority Doctors Needed

by Mike Stobbe, Associated Press Medical Writer

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### Surgeon General: More Minority Doctors Needed

*Surgeon general laments small number of minority doctors, says better recruiting needed*

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## SFGate

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By MIKE STOBBE, AP Medical Writer

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## The Seattle Times

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# Save The Date

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## The Fourth Annual Conference on Health Disparities

November 10-13, 2010  
Philadelphia, PA

### For more information, contact:

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### For post-conference details, visit:

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