

## Overview of New York State's Health Equity Impact Assessments (HEIA)

Starting in June 2023, New York State requires Health Equity Impact Assessments (HEIA) as part of the Certificate Of Need (CON) approval process for hospitals and other facilities covered by Article 28 of New York State's health law.

### Why HEIA?

Severe racial disparities continue to exist in healthcare. For example, maternal mortality rates in the United States are sharply different between blacks and whites. For black women, the rate was 69.9 per 100,000 live births during 2021, compared to 26.6 for white women. This disparity, like other disparities, is persistent, with data showing it has existed for at least a century.

Other disparities exist based on sex, gender, disability, income, living in rural areas, and stigmatized health conditions. While many disparities originate in long-term historical inequities across the United States, there are often specific, local experiences that create systemic barriers to good health.

Disparities are rooted in a broad array of social conditions and experiences that affect individual health. Singular policy and resource changes such as broadening insurance access are, by themselves, not likely to and have not significantly altered disparities.

The purpose of the Health Equity Impact Assessment is to push health equity concerns into the planning for facilities. It builds on approaches developed in Australia, New Zealand, and Canada and adopted in different forms in the United States. The approach taken in New York State is closest to the process adopted by the Ministry of Health of Ontario, Canada.

### How does an HEIA work?

The key word in HEIA is "impact": the assessment is tied to a change that a facility is planning. Unlike a needs assessment, it is not a broad consideration of the range or severity of disparities. Instead, it is a look at a specific plan of the facility in the context of its underserved communities.

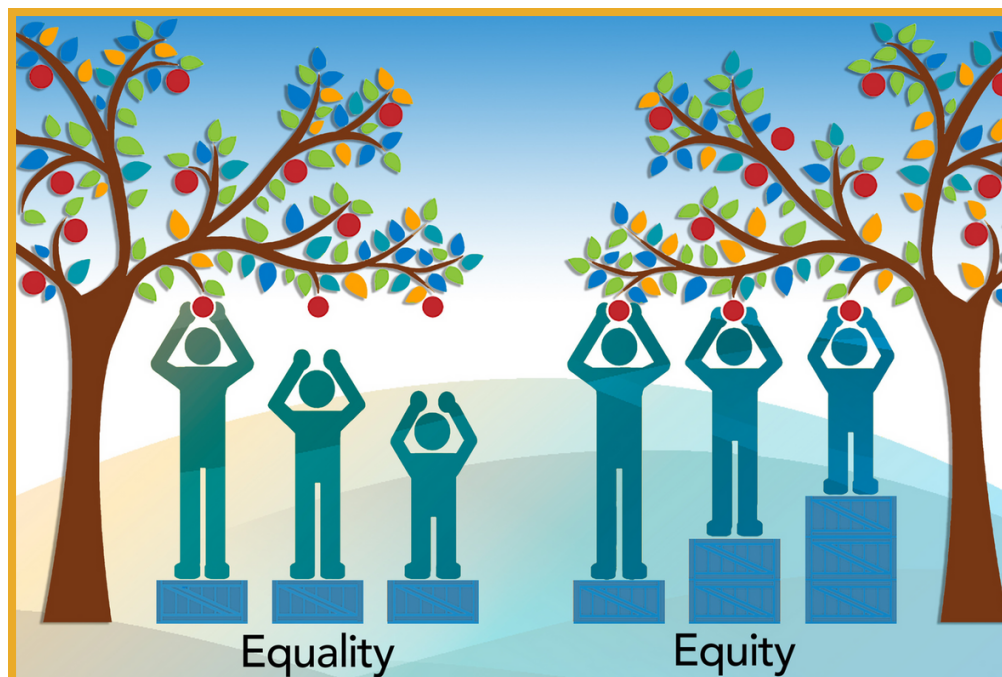
The process involves both a quantitative analysis and meaningful engagement with the underserved communities that the project impacts. Communities and persons affected by the barriers which create disparities will have key insights that are essential to improvement. Their participation in healthcare services planning is essential to developing equity.

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Creating an HEIA depends on three integrated services adapted to the scope of the Certificate Of Need project. These are:

A quantitative analysis of the service area's demographics and the utilization of the project's services. These include utilizing multiple data sources, geographic information systems, and statistical analysis. An extensive and meaningful engagement with the affected communities and other stakeholders, employing multiple techniques such as interviews, community forums, focus groups, and surveys. These occur in the context of local community culture and the history of systemic barriers, building on relationships with active social organizations.

Developing proposed modifications and adaptations to the project that creatively address the communities' concerns, insights, and strengths, informed by a knowledge of local health system capabilities, opportunities, and funding sources, leveraging the knowledge and experience of the facility's staff.



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