# SENATE SPECIAL COMMITTEE ON AGING: THE COVID-19 PANDEMIC AND SENIORS: A LOOK AT RACIAL HEALTH DISPARITIES

#### **EXECUTIVE SUMMARY**

The Senate Special Committee on Aging <u>convened</u> a hearing on Tuesday, July 21, 2020, to discuss the COVID-19 pandemic and its effect on seniors. In particular, the hearing focused on the prevalent racial health disparities that are affecting seniors in minority communities. Witnesses representing multiple health institutions spoke about the social determinants of health and the steps needed to address racial health disparities. Many members of the Special Committee focused their remarks and questioning on the need for better data and the improvement and expansion of telehealth services in order to better address the problems these communities are facing.

# **OPENING STATEMENTS**

In her opening statement, Chairwoman Susan Collins (R-ME) spoke about the disproportionate toll COVID-19 has had on Black and Latino seniors, as well as seniors from other racial and ethnic minority communities. She also spoke about the toll this pandemic has had on communities of color in her home state of Maine, which currently faces the worst racial disparity in COVID-19 cases in the country. She emphasized that while Black Americans comprise less than two percent of Maine's population, they have accounted for 23 percent of all cases, many of which have occurred in nursing homes and congregate care settings. She also acknowledged the fact that Black and Latino Americans are more likely to be employed in a service profession that cannot be done remotely, including long-term care workers in nursing homes. Lastly, she spoke about the distrust many minority communities feel in the health care system and the need for Congress to work with health care systems to resolve that mistrust.

Ranking Member Bob Casey (D-PA) emphasized the structural inequalities of racism that have plagued Americans of color since the nation's inception. He spoke about several of these inequalities including lack of affordable housing, food insecurity, the education gap, and unemployment rates for Black Americans. Sen. Casey also outlined what he believed was necessary to respond to the ongoing COVID-19 pandemic, such as a national testing strategy, additional funding for personal protective equipment (PPE), specific plans to keep nursing home residents and workers safe, expansion of long-term care services, and pandemic premium pay for the heroes on the front lines who are helping to care for our aging Americans, as well as guaranteeing quality affordable health care for all.

#### WITNESS TESTIMONY

**Dr. Dominic H. Mack**, Professor of Family Medicine and Director of the National Center for Primary Care at the Morehouse School of Medicine, <u>testified</u> about the disproportionate rates at which Black Americans in the United States are suffering and dying from COVID-19. He stated that while these results are alarming, they are not surprising. In order to address the impact of COVID-19 on racial and ethnic minorities, rural communities, and other vulnerable populations, the Morehouse School of Medicine – through a partnership with the HHS Office of Minority Health – will establish the National COVID-19 Resiliency Network, he shared. The network will do several things, including identifying and engaging vulnerable communities, nurturing existing and develop new partnerships, and partnering with vulnerable communities and national, state, and local government organizations.

Dr. Hack also outlined multiple steps that he believes Congress must take in order to address the lack of meaningful health infrastructure in medically underserved communities, such as providing funding for the improvement and development of health care infrastructure in medically underserved communities, specifically focused on building new hospitals and investing additional funds to the National Institute of Health's National Institute on Minority Health and Disparities program.

**Dr. Mercedes Carnethon**, Professor of Epidemiology and Vice Chair of the Department of Preventative Medicine at Northwestern University, <u>testified</u> about the rates of infection in nursing homes, noting that Black and Latino residents often have double the rate of COVID-19 infections than their predominately non-Hispanic white counterparts. She emphasized the need to not prioritize the economy over people without offering strategies to mitigate the impact of COVID-19 on minority aging adults.

**Eugene A. Woods**, President and Chief Executive Officer of Atrium Health, <u>testified</u> on several policy recommendations that he believes will allow health care providers to better address the ongoing pandemic. Those recommendations include Congressional support of the Medicare Advanced Payment loan forgiveness as part of the next relief package, providing visibility into where testing supplies are being deployed, permanent coverage for telemedicine services, and reinvesting in our national health infrastructure.

**Rodney B. Jones, Sr.**, Chief Executive Officer for East Liberty Health Center, <u>testified</u> about the social determinants of health and the responsibility of health centers such as his to provide for underinsured and underserved communities. He spoke about our healthcare system's vulnerabilities and how COVID-19 has exposed our inability to respond effectively to a pandemic. Lastly, he spoke about Medicaid expansion and the good it has done for working Pennsylvanians, students and Pennsylvanians not yet eligible for Medicare. He noted expansion has allowed for more Pennsylvanians to access treatment for a substance use disorder and aided in identifying potentially life-threatening illnesses and treating them without fear of financial ruin.



#### MEMBER DISCUSSION

#### Rebuilding Trust in Minority Communities

Multiple senators spoke about the need to rebuild trust in the health care system with communities of color. Chairwoman Collins asked Dr. Carnethon how we go about recruiting community partners who do not have an established relationship with public health agencies so that they may help agencies better their target testing and follow up services. Dr. Carnethon said we must be able to reach communities in their language and their cultural norms in order to build that necessary bridge with community leaders.

Senator Richard Blumenthal (D-CT) and Senator Tim Scott (R-SC) asked the panel for advice on how to address the lack of trust that must be overcome if vaccines are to be effective when they become available. Dr. Carnethon spoke to the history of mistrust in the health care system and how building trust involves spending significant time with the community and making sure we are explaining the "why" as well as the "how" of what health care providers are doing in the communities. She emphasized that we must put ourselves in the shoes of the community members to see what those barriers to health are in order to engage the community in preventative health behaviors such as accepting vaccines.

# Implicit Bias in the Health Care System

Senator **Jacky Rosen** (**D-NV**) inquired about the best way to train our medical students and medical professionals to recognize their own implicit biases. Dr. Mack suggested that implicit bias training be a part of medical school curriculums which may also mean further trainings for professors to acknowledge their own biases. Dr. Carnethon stated that experimental learning is a great way to cement the lessons that are out there. Students must be able to hear directly from patients and community leaders on their experiences with the health care system in order to understand how to use better language and address barriers that the communities face.

# Medicaid Expansion

Ranking Member Casey spoke about the effects the Affordable Care Act (ACA) has had on communities of color including a historic reduction in health disparities. With the current pandemic leading to the loss of over five million jobs and with that the loss of health insurance, Ranking Member Casey asked the panel to explain the role that Medicaid and the ACA has had in ensuring people including older adults have the care they need. Mr. Jones stated that Medicaid is crucial, especially during these unprecedented times. He continued by saying he does not believe that states should be allowed to cut Medicaid when it is most needed, and if they are allowed to cut Medicaid the implications will be a significant cost in terms of human life and financial cost.

**Senator Doug Jones (D-AL)**, also spoke about the need for Medicaid expansion and asked the panel how Medicaid expansion would help their patients. Mr. Woods stated that one out of every five Americans suffers from behavioral issues. Medicaid expansion would provide additional funding for behavioral health and would allow for further funding to reinvest in communities.

# Data and Metrics

**Senator Richard Burr** (**R-NC**), asked the panel about the key metrics that provided early warning signs of the disproportionate impact on minority communities especially in Charlotte. Mr. Woods stated that by



Atrium Health having the capacity to collect their own data, they were able to narrow the impact to six main locations and with that information, and the help of the faith community and community leaders, were able to go out to the most problematic areas. Senator Burr also asked what metrics would be most useful for researchers to study the impact of the outbreak in nursing homes, in an effort to get a better idea of which nursing homes are most vulnerable. Dr. Carnethon answered by stating that we currently know that nursing homes with high Black and Latino residents have high death rates, so if all nursing homes were to follow the same safety procedures and had the same access to PPE, we would not see the same disparities and where we did see disparities, it would be a snapshot of what is happening in the community.

**Senator Elizabeth Warren (D-MA)** asked Mr. Jones if the data allowed East Liberty Health Center to reduce racial inequity in their COVID-19 response, to which Mr. Jones answered yes. East Liberty Health was able to work with churches and communities to get into the communities and perform their own testing.

# *Telehealth*

**Senator Josh Hawley (R-MO)**, spoke about the gaps in technology access when expanding telehealth and asked how community health centers have addressed those gaps. Mr. Jones stated that at East Liberty Health Center nurses are sent out into the community to be the eyes and ears of the health center, they make home visits and use laptops to communicate with the health center. He also stressed the need for community ambassadors that could also get into the homes of the community to be the eyes and ears of the health center.

