



**BlueCross BlueShield
Association**

An Association of Independent
Blue Cross and Blue Shield Plans

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April 9, 2021

Commissioner David Altmaier, Co-Chair
Director Dean Cameron, Co-Chair
Special Committee on Race and Insurance
National Association of Insurance Commissioners
444 North Capitol Street NW, Suite 700
Washington, D.C. 20001-1512

Submitted electronically to: Kay Noonan (knoonan@naic.org)

Dear Commissioner Altmaier and Director Cameron:

The Blue Cross Blue Shield Association (BCBSA) appreciates the opportunity to provide preliminary comments on the proposed charges for 2021 to the Special (EX) Committee on Race and Insurance (Special Committee) and related charges to other committee groups. BCBSA supports the continued efforts of the Special Committee to advance diversity and inclusion and address racial disparities that disadvantage people of color and historically underrepresented communities.

BCBSA is a national federation of 35 independent, community-based and locally operated Blue Cross and Blue Shield (BCBS) companies (Plans) that collectively provide health care coverage for one in three Americans. For more than 90 years, Blue Cross and Blue Shield companies have offered quality health care coverage in all markets across America – serving those who purchase coverage on their own as well as those who obtain coverage through an employer, Medicare and Medicaid.

BCBSA believes everyone should have access to high-quality health care regardless of race, ethnicity, national origin, sex, gender identity, sexual orientation, religion, education level, age, geography or disability. We understand the need to recognize the impact of long-standing structures of racism and discrimination, underlying bias and social factors on the health and well-being of many Americans. To that end, every BCBS company across the country, including in Puerto Rico, has launched at least one local initiative to address health disparities.

Our Issue Brief, *Addressing Health Disparities and Inequities in Communities of Color*, identifies five essential steps to creating a more equitable health system:

- Use data to uncover the most critical opportunities to drive health equity

- Target interventions to specific conditions that are chronic and plague communities of color
- Improve access to health coverage
- Address social determinants of health
- Increase the number of racially and ethnically diverse clinicians and provide training to all physicians that enables them to deliver culturally appropriate care

Our policy recommendations align with the Special Committee's proposed 2021 charges and efforts to promote improved access to coverage and affordable culturally competent care.

Data

We agree that quality and accurate data is a key element to improving health equity in all communities across the country. Consistent race, ethnicity and language (REL) data collection standards should be implemented across the industry to avoid inaccuracies and inconsistencies. Currently, there are many variances in federal and state laws governing REL data collection in the healthcare sector. REL data sets come from different sources (i.e., provider records, employer records, member-provided information and imputation algorithms) and are collected using varying standards, which has an impact on their accuracy, consistency and completeness. We encourage the Special Committee to keep this in mind when finalizing its charges and recognize that any initial data calls will be challenged by these inconsistencies until standards can be implemented across the industry.

Access to Coverage

Research shows that people of color are more likely to be uninsured. BCBSA recommends [several key actions](#) to reduce inequities in access to coverage, including making permanent the enhancements to the ACA subsidies recently included in the American Recovery Plan Act, continuing to incentivize Medicaid expansion, automatically enrolling individuals in available coverage and removing barriers preventing immigrants from accessing necessary care.

Behavioral Health

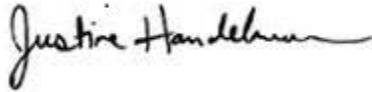
To improve behavioral health care for people of color, there is an urgent need for individuals to have access to high-quality mental health services. To meaningfully address existing barriers to access and quality we must focus on the root causes – the limited availability of providers in communities of color, the critical need to reduce underlying disparities exacerbated by the stigmatization of mental health in underserved communities, and institutional biases meeting patients' needs. These issues are critical to improving the health of people of color and reducing disparities in care. We are committed to ensuring compliance with mental health parity laws, but these laws and regulations focus on parity across types of services rather than across communities and cultural barriers, and alone cannot address the need to address provider shortages and systemic issues that hinder access for communities of color.

COVID-19

To date, BCBS companies have collectively committed more than \$7 billion to fight the COVID-19 pandemic. As part of this commitment, we believe that everyone deserves access to safe, effective COVID-19 vaccines to protect themselves, their families and their communities. That is why we joined America's Health Insurance Plans (AHIP) in a new White House initiative to promote health equity by removing barriers to vaccinations for 2 million Americans most at risk of COVID-19. The [Vaccine Community Connectors](#) pilot initiative aims to enable the vaccination of 2 million seniors age 65+ in America's most at-risk, vulnerable and underserved communities – such as African American and Hispanic communities.

BCBSA and a broad range of other stakeholders have provided input into the development of the workstream reports on race and insurance. We appreciate the NAIC's thoughtful consideration of those previous comments in developing the reports. We look forward to partnering with the Special Committee as it seeks industry input and technical expertise on this important topic. If you have any questions or want additional information, please contact Randi Chapman at randi.chapman@bcbsa.com or 202.826.5156.

Sincerely,

A handwritten signature in black ink that reads "Justice Handelman". The signature is written in a cursive, flowing style.

Senior Vice President
Office of Policy and Representation