INCENTIVIZING, ENFORCING, AND IMPROVING DISABILITY ACCESSIBLE CARE: Current Gaps and Potential Solutions

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Background

Health care organizations are required to provide equitable health care services to persons with disability, yet many remain largely inaccessible.

Study objective: Identify ongoing gaps in our current enforcement systems and explore opportunities to incentivize the provision of equitable and accessible health care.

Study Design

Between May 2019 -January 2021, we conducted 55 key informant qualitative interviews with a variety of stakeholders.

KEY STAKEHOLDER INTERVIEWEES, N=55	
HEALTH CARE ORGANIZATIONS	22
RESEARCHERS	9
ADVOCATES	10
POLICY MAKERS	7
PAYERS	5
PROFESSIONAL SOCIETIES	2

Implications for Policy or Practice

- Few incentives exist to encourage delivery of accessible health care to patients with disability.
- Increased awareness and enforcement of federal laws is needed.
- Create opportunities to promote accessible care through financial incentives, tying accessibility to improved outcomes, and developing systems for increased competition.

Findings: How to increase accessibility in healthcare

Need for increased education and awareness of disability disparities

"I think the challenge is that there's a lot of decision-makers in healthcare, and those decision-makers that are deciding infrastructure in the facility, the medical equipment, the training curriculum. Not all those individuals are aware or competent on disability issues...I think it comes back to that. It's a blend of cost, but also awareness."

- Policy maker

Leadership has to decide that this is important. If you have to have a cultural, you know, you have to have a leader who's saying, "This is important. We need to be doing this," and then they have to put the resources to it to actually make it happen, and then demand accountability. It can't be the flavor of the week. This is a long-term, ongoing, just thing we do. It's not even a thing we do. It has to be who we are. - Health Care Organization

Existing laws are necessary, but not sufficient

I would say the organization views it as a position to fulfill legal requirements 'cause legally, we're required to have a coordinator for non-discrimination purposes. If there wasn't a law, I don't think there would be anybody doing anything about this at this hospital. -Health Care Organization

existing legislation been helpful, but there still needs to be more enforcement and adoption. At the same time, yes, there's probably a need for greater, even further statutory and regulatory encouragement, particularly for states to provide equitable coverage."

- Policy maker

Healthcare is motivated by cost, quality and competition

previous VP, my everything was tied to money, and I had to give reports and white papers on why I had to provide a deaf interpreter."

-Health Care Organization

Accessibility is expensive.

DISABILITY EQUITY COLLABORATIVE

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