

# DIVERSITY, EQUITY, AND INCLUSION PLAN

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OFFICE OF THE  
HEALTH INSURANCE COMMISSIONER

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STATE OF RHODE ISLAND

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## BACKGROUND: PURPOSE

The State of Rhode Island Office of the Health Insurance Commissioner (OHIC) was **created in 2004** (State of Rhode Island General Laws § 42-14.5). **OHIC's charge** is to:

- Protect the interest of consumers of commercial health insurance
- Encourage fair treatment of health care providers by commercial health insurers
- Improve the health care system as a whole
- Guard the solvency of commercial health insurers



## BACKGROUND: IMPORTANCE OF THIS WORK

- OHIC's statutory purpose charges the agency with (as noted previously) protecting consumers of commercial health insurance and improving the health care system as a whole. These and other aspects of OHIC's charge encompass three public interest objectives: access, affordability, and quality.
- It is OHIC's belief that taking meaningful steps to incorporate diversity, equity, and inclusion considerations explicitly into its work are strongly supportive of these public interest objectives and an expression of OHIC's values such as respect, justice, and collaboration.
- Work related to diversity will focus on taking steps to have OHIC efforts to improve the health care system carried out in a way that is representative of all members of the community.
- Equity work at OHIC will focus on efforts to ensure that the health care system functions in a manner that is just, regardless of one's race, ethnicity, disability, gender identity, sexual orientation, socioeconomic status, geography or any other social barrier/factor.
- Work related to inclusion will focus on OHIC taking steps to further the creation of circumstances in the health care system that are respectful of the assets and needs of diverse people and groups.
- OHIC will proceed intentionally and systematically and may prioritize different aspects of diversity, equity, and inclusion at different points in time to ensure that the work is successful.

# MISSION

- OHIC will actively consider diversity, equity, and inclusion as it seeks to have a more diverse and representative workplace and engages in work to protect consumers of health insurance, improve the health care system as a whole by **developing, carrying out, and advocating** for policy reforms and regulatory enforcement actions that proactively seek to **improve representation** in health care system decision-making, **eliminate disparities** in health outcomes, and create the conditions under which **the assets and needs of diverse groups are accounted for and valued.**



## VISION

- OHIC envisions a world where the commercial health insurance system is accessible, affordable, and high-quality for **Rhode Islanders of every background** and where **the commercial health insurance system supports the creation of a transformed health care system that results in equitable health outcomes** regardless of race, ethnicity, disability, gender identity, sexual orientation, socioeconomic status, geography, or any other social barrier/factor.

# VALUES

**Respect:** OHIC ensures that all those who interact with the agency or are affected by its decisions are treated with dignity. In its DEI work, this means that OHIC will proactively seek out opportunities to listen to and have its actions informed by the experiences of communities that have been marginalized.

**Justice:** OHIC advances policy reforms and takes regulatory actions that result in greater fairness. In its DEI work, this means that OHIC will explicitly consider how to achieve equity for populations experiencing disadvantage as part of the agency's policy reform efforts and regulatory enforcement actions.

**Collaboration:** OHIC engages a wide array of stakeholders both inside and outside of government in a transparent manner to jointly achieve shared goals. In its DEI work, this means that OHIC will make meaningful efforts on ongoing basis to collaborate with stakeholders representing groups that have been economically/socially marginalized.

# GOALS

- Support the successful implementation of commercial health insurance coverage for doula services in order to improve perinatal and postpartum outcomes and reduce racial disparities in these health outcomes
- Encourage—and evaluate options to require—insurers to pursue the National Committee for Quality Assurance’s (NCQA) Health Equity Accreditation/Health Equity Accreditation Plus that will address how insurers provide culturally and linguistically sensitive services and work to reduce health disparities
- Encourage—and evaluate options to require—insurers to systematically collect, maintain, protect, and report on, at a minimum, member data on race, ethnicity, disability, gender identity, sexual orientation, and preferred language



# ACTIONS

## Doula Services Coverage

- Monitor insurer implementation actions
- Seek doula community feedback on implementation
- Utilize policy and regulatory levers to support doula capacity-building

## NCQA Health Equity Accreditation

- Develop comprehensive understanding of NCQA accreditation
- Engage insurers in dialogue on NCQA accreditation
- Collaborate with HealthSource RI to explore joint action to require NCQA accreditation

## Data Collection

- Review best practices for data collection
- Engage insurers in dialogue on data collection efforts
- Collaborate with the State of Rhode Island Executive Office of Health and Human Services (EOHHS) to explore joint action on insurer data collection

# TIMELINE

## Review Phase

**(January 2022 to April 2022)**

- Monitor insurer implementation actions
- Develop comprehensive understanding of NCQA accreditation
- Review best practices for data collection

## Engagement Phase

**(May 2022 to August 2022)**

- Seek doula community feedback on implementation
- Engage insurers in dialogue on NCQA recognition
- Engage insurers in dialogue on data collection efforts

## Alignment Phase

**(September 2022 to December 2022)**

- Utilize policy and regulatory levers to support doula capacity-building
- Collaborate with HealthSource RI to explore joint action to require NCQA accreditation
- Collaborate with EOHHS to explore joint action on insurer data collection

# EVALUATION

- OHIC will actively monitor its progress against the timeline on the preceding slide to ensure required work is completed in a timely way.
- This plan will be revisited annually and make any necessary updates to ensure it remains effective and informed by changing circumstances.
- OHIC will also look, over the medium-term and long-term, for opportunities to evaluate the substantive impact of its efforts.