

## HPIO releases *Health Value Dashboard* Ohio again ranks near bottom in fourth edition

The Health Policy Institute of Ohio released the fourth edition of its *Health Value Dashboard* last month, with Ohio ranking 47 out of all states and D.C.

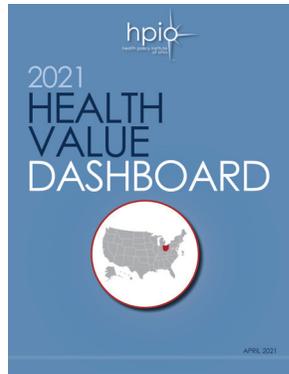
The *Dashboard* is a tool to track Ohio's progress toward health value: a combination of population health and healthcare spending. Ohio ranked 43 for population health and 37 for healthcare spending in the new edition of the *Dashboard*.

"Ohioans live less healthy lives and spend more on health care than people in most other states," according to the *Dashboard*.

Findings from the *Dashboard* were presented April 7 at an online forum hosted by HPIO. The forum highlighted analysis from the *Dashboard* and included presentations from national experts who discussed how Ohio can improve on health value.

Ohio has consistently ranked near the bottom on health value in each edition of the *Dashboard*. Ohio's overall health value ranking was 47 in 2014 and 46 in both 2017 and 2019.

The *Dashboard* lays out nine evidence-informed policies as examples of opportunities where state policymakers and private-sector partners can work together to improve health value. "By adopting evidence-informed policies and working with private-sector partners, policymakers can make Ohio a leader in health value," said HPIO President Amy Rohling McGee.



The *Dashboard* also includes a series of equity profiles, comparing outcomes for Ohioans based on race/ethnicity, disability status, education and income. The profiles highlights that "our systems, policies and beliefs unfairly favor some Ohioans over others" and that "racism and other forms of discrimination drive troubling differences in outcomes across Ohio." For example, if differences in outcomes were eliminated, nearly 60,000 fewer Black children would face food insecurity and more than 238,000 Ohioans with less than a high school diploma would have broadband internet access.

### Interested in a *Dashboard* presentation?

HPIO staff would be happy to present the findings of the *Health Value Dashboard* to your organization. To schedule, contact Alana Clark-Kirk at [aclarkkirk@hpio.net](mailto:aclarkkirk@hpio.net)

### Why does Ohio rank poorly?

47

The *Dashboard* concludes that Ohio's low health value rank is largely a lack of attention and effective action in three areas:

**Children** – Child adversity and trauma have long-term consequences for Ohioans

**Equity** – Ohioans with the worst outcomes face systemic disadvantages

**Prevention** – Ohio's sparse public health workforce leads to missed opportunities for prevention

### Dashboard resources

HPIO has posted a number of resources related to the *Dashboard*, including a one-page snapshot, an executive summary and a recording of the April webinar release. All material is available at:

[www.hpio.net/2021-health-value-dashboard](http://www.hpio.net/2021-health-value-dashboard)

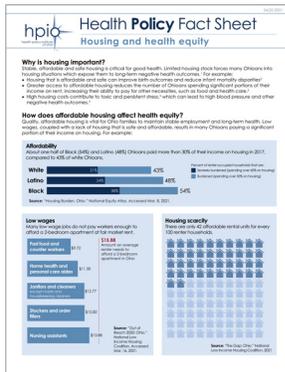


# HPIO releases fact sheets outlining how state policymakers can support health equity

HPIO has released a series of fact sheets that outline how state policymakers can improve health by supporting equity in transit, K-12 student wellness and housing affordability.

The two-page fact sheets are relevant to the state biennial budget to be finalized by the end of June.

The [transit fact sheet](#) explains that, “transportation access is critical for getting to health care, jobs, childcare, grocery stores and other resources. Without a car or reliable public transportation, some Ohioans are cut off from opportunities.”



According to the [K-12 student wellness fact sheet](#), “Research has shown that schools can positively impact academic success and educational attainment through student wellness and health improvement efforts, such as school-based health care, drug and violence prevention and social-emotional learning programs.”

And the [housing fact sheet](#) finds a similar relationship with health equity. “Stable, affordable and safe housing is critical for good health. Limited high-quality housing stock forces many Ohioans into housing situations that expose them to long-term negative health outcomes.”

## New HPIO analysis finds eliminating ACEs could save Ohio \$10 billion a year

First-of-its-kind analysis by HPIO estimates that more than \$10 billion in annual healthcare and related spending could be avoided in Ohio if exposure to adverse childhood experiences, or ACEs, was eliminated.

The analysis is included in the HPIO policy brief, [Adverse Childhood Experiences \(ACEs\): Economic Impact of ACEs in Ohio](#), which also found that economic costs associated with ACEs extend beyond health impacts. ACEs exposure results in economic burdens to individuals, families and society, including impacts on both the public and private sectors. For example, \$319 million in lost wages

could be prevented annually if exposure to ACEs was eliminated.

The brief is the second in three planned briefs as part of HPIO's Ohio ACEs Impact Project. In August 2020, HPIO released the first brief, [Adverse Childhood Experiences \(ACEs\): Health impact of ACEs in Ohio](#).

“The research is clear that ACEs result in both significant health and economic impacts,” the brief states. “The economic burden of ACEs also impacts the state child protection, behavioral health, criminal justice and education systems, as well as private sector businesses.”

## Thank you to our funders

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A list of HPIO project funders is available at: [www.hpio.net/our-funders](http://www.hpio.net/our-funders)

## HPIO set to release latest Ohio Medicaid Basics

HPIO will soon be releasing the ninth edition of its popular Ohio Medicaid Basics brief.

Released to coincide with the state biennial budget, Ohio Medicaid Basics is a foundational summary of the state-federal program. Given the size and scope of the program, it is a significant driver of health policy in the state.

Medicaid Basics has been published by HPIO every two years since 2005.