**Table One: ASTHO Technical Package of COVID Health Equity Interventions**

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| **Objective** | **Potential Indicators** | **Mechanisms** | **Levels of influence** |
| **Improve collection of race and ethnicity data** | * State public health dashboards
* Completeness of Data reports to CDC
* State and Federal data quality measures and benchmarks
 | * State disease reporting laws and requirements
* Dataset comparisons and matching
* Reporting incentives and penalties
* Provider education
* Race and ethnicity definitions and standards
* Electronic transmission capabilities
 | * State HIEs
* State Medicaid Agency and state employee health plans
* State FQHC associations
* State Medical and Primary Care Associations
* State policy makers
* CDC
* ONC, CMS, OMB, HRSA
* National Public health Associations (CSTE, AIR, AID, APHL)
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| **Increase community health workers in the public health workforce** | * CHW job descriptions, salary ranges, supervision structures in state/local HR system
* State CHW registries (NACHW)
* State and local workforce surveys
* State contracts with CBOs
* CDC grant reports
 | * Retention/Career ladders
* Evidence based practice recommendations
* Workforce reorganization
* New funding lines and resources
* Redirection of existing funding
* Attrition planning
* Third party reimbursement
 | * State HR systems
* State contract policies
* National Public Health Associations (NACHW, APHA)
* CDC
* HHS Office of Minority Health
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| **Expand sick leave and paid family leave to more workers** | * State policies
* Federal policy
* Workforce surveys
 | * ASTHO policy statement on family and sick leave
* Model policies for state and local government
* Employee benefit requirements for state and local contractors
* Tax and other incentives for employers to expand benefits
 | * Federal policy makers
* State policy makers
* Employers
* Employer associations (e.g., state restaurant association)
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