



SPONSOR: Sen. Brown & Rep. K. Johnson & Rep. Dorsey Walker  
Sens. Huxtable, Lockman, Mantzavinos, S. McBride,  
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Griffith, Lynn

DELAWARE STATE SENATE  
152nd GENERAL ASSEMBLY

SENATE SUBSTITUTE NO. 1  
FOR  
SENATE BILL NO. 212

AN ACT TO AMEND TITLE 29 OF THE DELAWARE CODE RELATING TO THE BUREAU OF HEALTH EQUITY.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF DELAWARE:

1 Section 1. Amend Subchapter I, Chapter 79, Title 29 of the Delaware Code by making deletions as shown by  
2 strike through and insertions as shown by underline as follows:

3 § 7905B. Bureau of Health Equity.

4 (a) For purposes of this section:

5 (1) “Health disparity” means a preventable difference between 2 or more groups of people in the quality of  
6 health or health care based on all of the following:

7 a. A shared characteristic of the individuals within each group, such as race, ethnicity, or socioeconomic  
8 status.

9 b. The differences between the groups regarding access to health care or burdens, prevalence, or  
10 incidence of disease or violence.

11 (2) “Health equity” means the absence of systematic health disparities or disparities in the major social  
12 determinants of health between groups of people with different levels of underlying social advantage or disadvantage  
13 such as, wealth, power, or prestige.

14 (3) “Social determinants of health” mean conditions in the environments in which people are born, live, learn,  
15 work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

16 (b) The Bureau of Health Equity (BHE) is established within the Division of Public Health (DPH), in the  
17 Department of Health and Social Services and includes all of the following:

18 (1) The Office of Minority Health.

19 (2) The Office of Women’s Health.

20 (c) The purpose of the BHE is to ensure that everyone in Delaware will achieve their full health potential by  
21 promoting conditions that are vital for health and well-being, eliminating health disparities, particularly among all racial  
22 and ethnic minority groups. The BHE works with communities to address social determinants of health, focusing on  
23 prevention, health, and wellness of the broader population instead of treatment focused on individuals.

24 (d) The BHE shall do all of the following:

25 (1) Provide relevant statistical data to assess and identify the health status of groups of people with shared  
26 characteristics.

27 (2) Increase awareness of major health problems and factors that influence health.

28 (3) In collaboration with other DPH programs, identify needs and expand community-based health promotion  
29 and disease prevention outreach efforts, including working with communities to build capacity to meet the health needs  
30 in disease prevention, education, and health promotion.

31 (4) Establish and strengthen networks, coalitions, and partnerships to identify and address health problems,  
32 including identifying and supporting assets within Delaware’s public health system to close the gap of health  
33 disparities.

34 (5) Collaborate with public health partners to develop and promote programs and best practices to achieve  
35 health equity, including all of the following:

36 a. The Primary Care Reform Collaborative of the Delaware Health Care Commission.

37 b. The Office of Value-Based Health Care Delivery in the Department of Insurance.

38 Section 2. Amend § 7905, Title 29 of the Delaware Code by making deletions as shown by strike through and  
39 insertions as shown by underline as follows and redesignating accordingly:

40 § 7905. Office of Women’s Health.

41 (a) The Office of Women’s Health is hereby established within the Division of Public Health, ~~Delaware~~ in the  
42 Department of Health and Social Services.

43 (b) Definitions: For purposes of this section:

44 (1) ~~“Director,” as used in this section,~~ “Department” means the Department of Health and Social Services.

45 (2) “Director” means the Director of the Office of Women’s Health.

46 (2) ~~“Division Director,” as used in this section,~~ (3) “Division Director” means the Director of the Division of  
47 Public Health.

48 (3) ~~“Office,” as used in this section, refers to~~ (4) “Office” means the Office of Women’s Health.

49 (4) ~~“Secretary,” as used in this section, (5) “Secretary” means the Secretary of Health and Social Services. the~~  
50 Department.

51 (c) The Office is established to address women’s health issues across the lifespan for the following purposes:

52 (4) To provide relevant research information and data conducted or compiled by ~~Delaware Health and Social~~  
53 ~~Services and/or the Department~~ or other entities in collaboration with the Department.

54 (d) The structure of the Office of Women’s Health will be determined by ~~Delaware Health and Social Services,~~  
55 ~~including: the Department, including all of the following:~~

56 (1) The Director of the ~~Office; and Office.~~

57 (2) Other ~~employees that are deemed necessary. necessary employees.~~

### SYNOPSIS

Like Senate Bill No. 212, Senate Substitute No. 1 for Senate Bill No. 212 codifies the Bureau of Health Equity (BHE) in the Division of Public Health, which includes the Office of Minority Health and the Office of Women’s Health. The purpose of the BHE is to ensure that everyone in Delaware will achieve their full health potential by eliminating health disparities, particularly among all racial and ethnic minority groups. The BHE works with communities to address social determinants of health, focusing on prevention, health, and wellness in the broader population instead of treatment focused on individuals. Health disparities are preventable differences in the quality of health or health care between 2 or more groups of people based on a shared characteristic of the individuals within each group, such as race, ethnicity, or socioeconomic status and the differences between the groups regarding access to health care or burdens, prevalence, or incidence of disease or violence.

Delaware has been recognized nationally for successfully reducing some health disparities, including being the first state to virtually erase racial disparities in colorectal cancer screening and treatment, by combining individual patient assistance from nurse navigators and care coordinators with community-based outreach efforts that used trusted messengers, including leaders of faith-based communities.

However, 10 years after achieving this success with colorectal cancer screening and treatment, many health disparities remain in Delaware. Codifying the BHE ensures that this critical work continues. In addition, this Act identifies the Primary Care Reform Collaborative and the Office of Value-Based Health Care Delivery as state entities that the BHE should collaborate with because these entities are addressing health disparities through insurance payments to providers.

This Act also makes technical corrections to § 7905 of Title 29.

Senate Substitute No. 1 for Senate Bill No. 212 differs from Senate Bill No. 212 as follows:

- Changes the Delaware Code designation for the BHE to § 7905B to avoid confusion with § 7905A in Chapter 79A of Title 29.
- Revises the definition of “health disparity”.
- Adds that a purpose of the BHE is to promote conditions that are vital to promote health and well-being.
- Removes the requirement that the BHE provide training on cultural competency because this is no longer a function that the BHE has the expertise or staff to provide.

Author: Senator Brown