Social Determinants of Health (SDoH) Defined

Social Determinants of Health are conditions in the places where people live, learn, work, play, and pray that affect a wide range of health and quality-of-life risks and outcomes.

https://www.cdc.gov/socialdeterminants/index.htm

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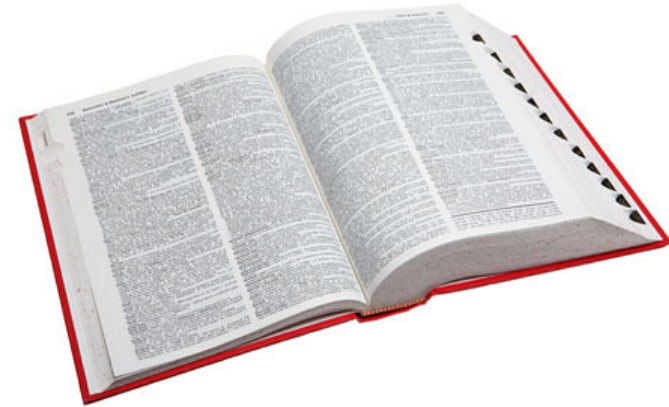
Social Determinants of Health (SDoH)

When addressing a person's health needs, it is important to look at all aspects of health. Traditionally, this has included physical health and behavioral health.

In recent years, however, there is a greater understanding of the importance of also including SDoH as a significant influence on overall health, quality of life, and well-being.

https://www.cdc.gov/socialdeterminants/index.htm

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Healthy People 2030

In August 2020, the Department of Health and Human Services (HHS) released *Healthy People 2030*, which includes national disease prevention and health promotion objectives for the next ten years.

One of *Healthy People 2030*'s 5 primary goals is specifically related to SDoH: "Create social, physical, and economic environments that promote attaining the full potential for health and well-being for all."

As part of this goal, there is an emphasis on "upstream" factors in improving health and well-being and reducing health disparities. There is a workgroup that is solely focused on the role of SDoH as they relate to health and well-being.

Healthy People 2030 | health.gov
www.healthypeople.gov

Social Determinants of Health (SDoH)

The graph on the right gives a general overview of the SDoH areas emphasized in *Healthy People 2030.*

Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. Retrieved 1-12-2021, from https://health.gov/healthypeople/objectives-and-data/social-determinants-health

Social Determinants of Health

Education Access and Quality

Health Care Access and Quality

Neighborhood and Built Environment

Social and Community Context

Economic Stability

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Healthy People 2030

Social and Community Context –
Loneliness: Frequency, Risk Factors, and Impacts On Health

A survey by the American Association of Retired Persons (AARP) Foundation reported in 2018 that 35% of US adults age 45 and older are lonely. Factors in older adulthood that could increase risk for loneliness include living alone, loss of family or friends, chronic illness, and hearing loss. In addition to age, there are other risk factors for loneliness, such as household income, identifying as LGBT, and others.

Loneliness is not only associated with mental health conditions such as depression or anxiety, it is also associated with a range of medical health conditions. According to the National Institutes of Health (NIH), health factors linked with loneliness include higher risk of high blood pressure, heart disease, obesity, weakened immune system, anxiety, depression, cognitive decline, and Alzheimer's disease.

There is significant and growing evidence indicating that addressing loneliness can have a positive impact not only on how a person feels but also on a person's overall health.

National Academies of Sciences, Engineering, and Medicine. 2020. *Social Isolation and Loneliness in Older Adults: Opportunities for the Health Care System*. Washington, DC: The National Academies Press.

https://www.aarp.org/research/topics/life/info-2018/loneliness-social-connections.html?CMP=RDRCT-PRI-HOMFAM-073118
https://www.cdc.gov/aging/publications/features/lonely-older-adults.html

Social Isolation & Loneliness: An Important Distinction

A person who is alone or socially isolated does not necessarily feel the emotional sense of loneliness. People can be physically alone but feel content and not feel lonely at all. "Solitude" is a state of feeling content and peaceful while alone, perhaps a chance to reconnect with ones' self and focus on creativity or personal growth. Social solation is a risk factor for loneliness, but *just because someone is socially isolated does not mean they are lonely.*

Loneliness is a subjective sense of not having the social connections with others that one needs to feel included and accepted. People can feel lonely despite having social contacts. Loneliness is a person's perception and feeling that they are missing that connected feeling with others**.** Someone who is lonely lacks the feeling of "closeness, trust, and the affection of genuine friends, loved ones, and community". *People can feel lonely even when then they are surrounded by others because they do not feel the connections to others that they need.*

A person's need for social connection to prevent loneliness can differ throughout life and can also differ by personality.

Murthy, Vivek Hallegere. *Together: the Healing Power of Human Connection in a Sometimes Lonely World,* Harper Wave, an Imprint of HarperCollinsPublishers, 2020.

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SDoH and Kentucky

Kentucky's expansion of Medicaid in 2014 led to a two-thirds decrease in uninsured citizens. It was an essential step in improving the health of Kentuckians, leading to increases in healthcare utilization for preventative care and management of chronic diseases.

Kentucky, however, continues to see higher rates of many serious diseases when compared to other states. For example, Kentuckians have higher rates of diabetes, cardiovascular deaths, and cancer deaths than many other states.

2020 State Reports   www.countyhealthrankings.org

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SDoH and Kentucky

In addition to poor health outcomes, Kentucky also has high poverty rates, racial inequality, and deep urban/rural divide. Additionally, Kentucky's rates of smoking and air pollution are higher than the national average, while access to exercise opportunities and healthy food are lower than the national average.

Some Kentuckians face more barriers to health than others - including people with low incomes, many of whom live in rural parts of the state including eastern Kentucky. While 17.2% of Kentuckians lived below the poverty line in 2017, the poverty rate in eastern Kentucky was 29.1%. Among other health disparities, the Appalachian portion of Kentucky has notably higher rates of mortality from heart disease, cancer, chronic obstructive pulmonary disease (COPD), stroke and diabetes than the non-Appalachian portion of the state.

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SDoH and Kentucky

Across the state, there are differing outcomes related to health. This map shows the distribution of Kentucky's health outcome ranks across counties. Less color intensity on the map equals better health outcomes in the county summary rankings.
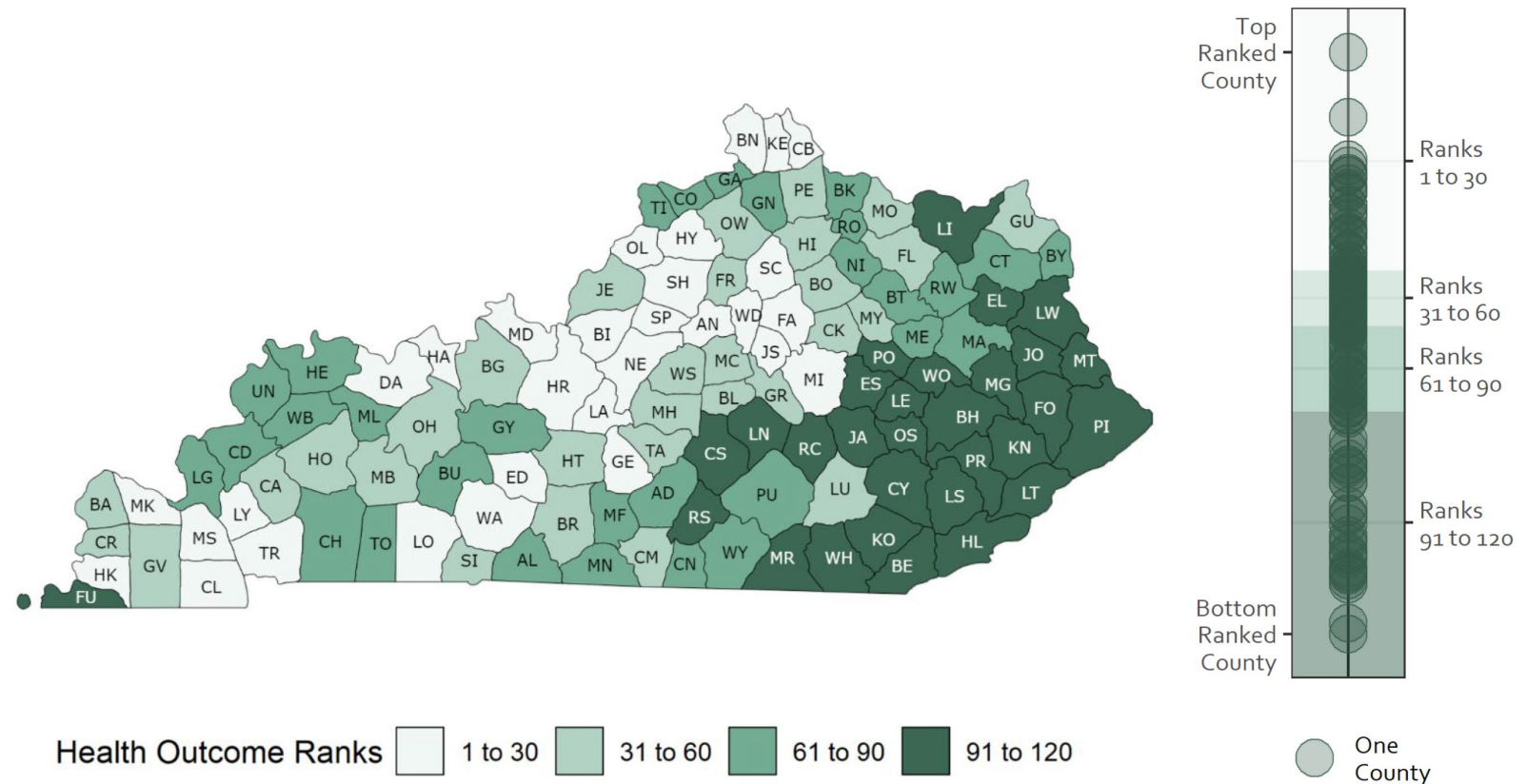

Health Outcome Ranks: 1 to 30 | 31 to 60 | 61 to 90 | 91 to 120

Figure 1. Health outcome ranks displayed using quartiles (map) and underlying health outcome scores (chart)

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SDoH and Kentucky

This map shows the distribution of <u>Kentucky's health factor ranks (consistent with SDoH)</u> across counties. Less color intensity on the map indicates better health factors in the respective summary rankings. Health factors represent the things we can change to improve health for all, like opportunities for quality education, good paying jobs, access to quality clinical care, healthy foods, green spaces, and secure and affordable housing.

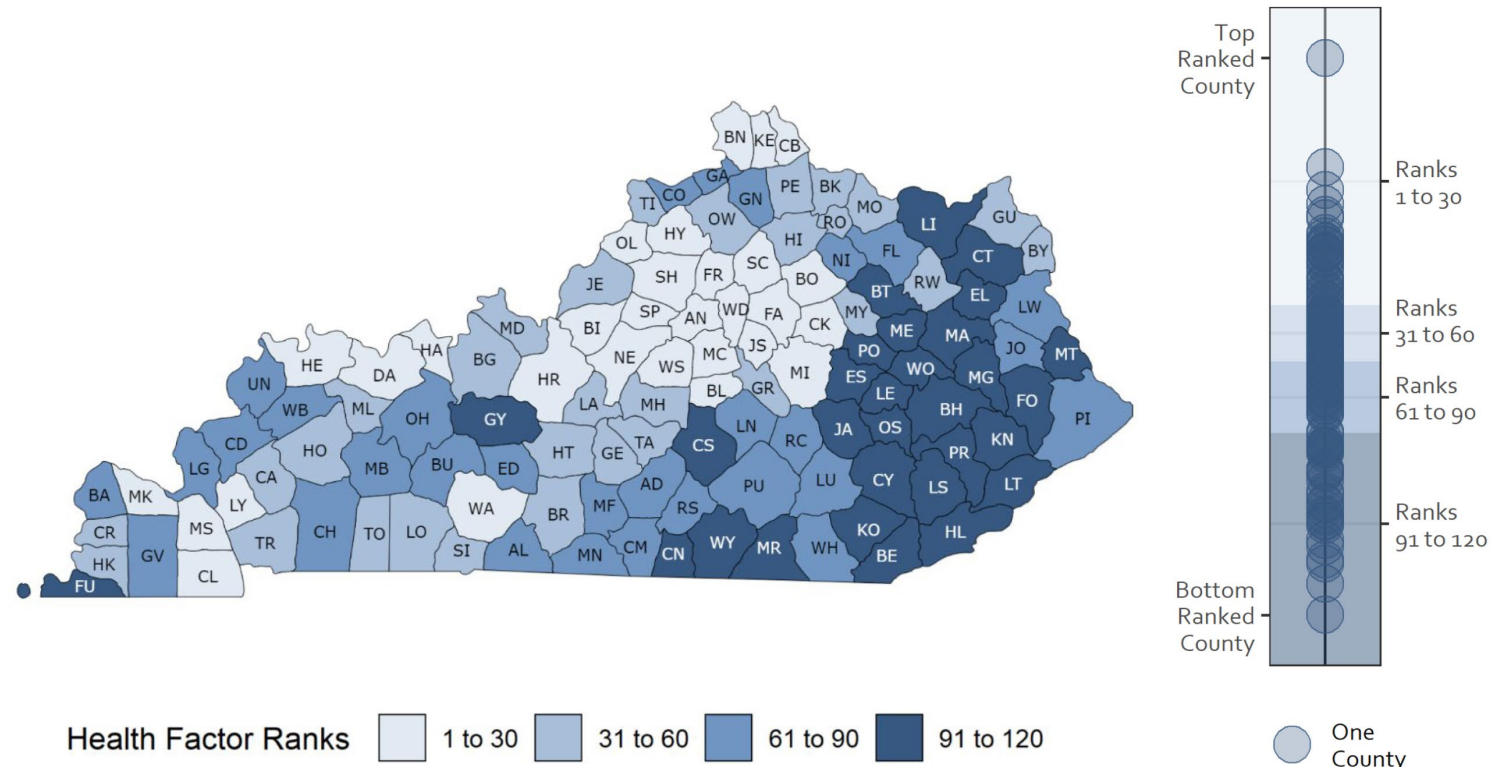Figure 2. Health factor ranks displayed using quartiles (map) and underlying health factor scores (chart)

DMS SDoH Project

The Kentucky Department of Medicaid Services (DMS) recognizes the importance of SDoH and has asked that all MCOs participate in a project focusing on SDoH.

One of the aims of the DMS project is to engage PCPs in SDoH assessment.

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What Can I Do as a Healthcare Provider?

Healthcare providers can help improve the health and well-being of their patients by:

1) Assessing SDoH. Using an SDoH screener is an effective way to assess the SDoH needs of your patients. You may already be using an SDoH screener in your practice or clinic. If you do not have one, there are several ready-made options available and you can choose one that is a good fit for your practice. There are many options, here are just a couple:

The Accountable Health Communities Health-Related Social Needs Screening Tool:
https://innovation.cms.gov/files/worksheets/ahcm-screeningtool.pdf
The Protocol for Responding to and Assessing Patients' Assets, Risks, and Experiences (PRAPARE):
https://www.nachc.org/wp-content/uploads/2020/04/PRAPARE-One-Pager-9-2-16-with-logo-and-trademark.pdf

2) Including the appropriate SDoH Z-Code(s) with your diagnosis. This will greatly impact our ability to identify and assist enrollees who have SDoH needs. See the list of SDoH Z-Codes on the next few slides.

3) Making a referral to Case Management at Passport Health Plan by Molina Healthcare if you discover that a patient has SDoH needs and the patient gives consent for you to contact us. Our CM team will work with your patient on the identified SDoH needs**.**

To make a referral, simply send a brief email to:
CareManagement_KY@passporthealthplan.com

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SDoH Z-Codes

CMS-IDENTIFIED Z-CODES	DESCRIPTION
Z55	**Problems related to education and literacy**
Z55.0	Illiteracy / low-level literacy
Z55.1	Schooling unavailable and unattainable
Z55.2	Failed school examinations
Z55.3	Underachievement in school
Z55.4	Educational maladjustment / discord with teachers or classmates
Z55.8	Other problems related to education and literacy
Z55.9	Problems related to education and literacy, unspecified
Z56	**Problems related to employment and unemployment**
Z56.0	Unemployment, unspecified
Z56.1	Change of job
Z56.2	Threat of job loss
Z56.3	Stressful work schedule
Z56.4	Discord with boss or workmates
Z56.5	Uncongenial work environment
Z56.6	Other physical or mental strain related to work

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SDoH Z-Codes

CMS-IDENTIFIED Z-CODES	DESCRIPTION
Z57	**Occupational exposure to risk factors**
Z57.0	Occupational exposure to noise
Z57.1	Occupational exposure to radiation
Z57.2	Occupational exposure to dust
Z57.3	Occupational exposure to other air contaminants
Z57.4	Occupational exposure to toxic agents in agriculture
Z57.5	Occupational exposure to toxic agents in other industries
Z57.6	Occupational exposure to extreme temperature
Z57.7	Occupational exposure to vibration
Z57.8	Occupational exposure to other risk factors
Z57.9	Occupational exposure to unspecified risk factor

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SDoH Z-Codes

CMS-IDENTIFIED Z-CODES	DESCRIPTION
Z59	**Problems related to housing and economic circumstances**
Z59.0	Homelessness
Z59.1	Inadequate housing
Z59.2	Discord with neighbors, lodgers, or landlord
Z59.3	Problems related to living in residential institution
Z59.4	Lack of adequate food and/or safe drinking water
Z59.5	Extreme poverty
Z59.6	Low income
Z59.7	Insufficient social insurance and/or welfare support
Z59.8	Other problems related to housing and/or economic circumstances
Z59.9	Problem related to housing and/or economic circumstances, unspecified

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SDoH Z-Codes

CMS-IDENTIFIED Z-CODES	DESCRIPTION
Z60	**Problems related to social environment**
Z60.0	Problems of adjustment to life-cycle transitions
Z60.2	Problems related to living alone
Z60.3	Acculturation difficulty
Z60.4	Social exclusion and/or rejection
Z60.5	Target of (perceived) adverse discrimination and/or persecution
Z60.8	Other problems related to social environment
Z60.9	Problem related to social environment, unspecified
Z62	**Problems related to upbringing**
Z62.0	Inadequate parental supervision and/or control
Z62.1	Parental overprotection
Z62.2	Upbringing away from parents
Z62.3	Hostility towards / scapegoating of child
Z62.6	Inappropriate (excessive) parental pressure
Z62.8	Other specified problems related to upbringing
Z62.9	Problem related to upbringing, unspecified

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SDoH Z-Codes

CMS-IDENTIFIED Z-CODES	DESCRIPTION
Z63	**Other problems related to primary support group, including family circumstances**
Z63.0	Problems in relationship with spouse or partner
Z63.1	Problems in relationship with in-laws
Z63.3	Absence of family member
Z63.4	Disappearance / death of family member
Z63.5	Disruption of family by separation or divorce
Z63.6	Dependent relative needing care at home
Z63.7	Other stressful life events affecting family and household
Z63.8	Other specified problems related to primary support group
Z63.9	Problem related to primary support group, unspecified
Z64	**Problems related to certain psychosocial circumstances**
Z64.0	Problems related to unwanted pregnancy
Z64.1	Problems related to multiparity
Z64.4	Discord with counselors

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SDoH Z-Codes

CMS-IDENTIFIED Z-CODES	DESCRIPTION
Z63	**Other problems related to psychosocial circumstances**
Z65.0	Conviction in civil and criminal proceedings without imprisonment
Z65.1	Imprisonment and other incarceration
Z65.2	Problems related to release from prison
Z65.3	Problems related to other legal circumstances
Z65.4	Victim of crime and terrorism
Z65.5	Exposure to disaster, war, and other hostilities
Z65.8	Other specified problems related to psychosocial circumstances
Z65.9	Problem related to unspecified psychosocial circumstances
272.9	**Problem related to lifestyle, unspecified**

Summary of Training

Social Determinants of Health have far-reaching effects on health, quality of life, and well-being. They are complex and often overlapping, and they frequently underscore health disparities in a community. The COVID-19 pandemic has likely had far-reaching effects on SDoH. The best efforts to address enrollees' health needs include addressing social determinants of health.

Healthcare providers can help improve the health and well-being of their patients by assessing SDoH, adding SDoH Z-codes to patients' diagnoses, and making referrals to Case Management when appropriate.

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Thank you.