



Social Drivers of Health

Minimizing compliance challenges while implementing a data-driven and collaborative approach to improve community health

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MR2



68% of Americans
experienced at least one
unmet social need in 2019

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Slide 2

MR2 [@Ellie Kim] - can you add source for this one? Also if there are any recent articles that provide an updated % due to COVID, that would be helpful!

Marcie Rohleder, 12/15/2020

Impact of Covid-19 on Americans; 2020

- Los Angeles suicide and mental health hotlines have increased 8,000 percent
- proportion of U.S. adults with symptoms of anxiety disorder and/or depressive disorder have quadrupled since before the pandemic, with the burden disproportionately borne by women and people of color
- many individuals find themselves living with a perpetual sense of uncertainty, which is associated with outcomes ranging from negative psychological well-being to elevated blood pressure



Source: <https://www.commonwealthfund.org/blog/2020/long-term-impact-covid-19-mental-health>

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Introductions



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Objectives

- Understand **Social Determinants of Health (SDoH)** & how addressing these factors can **improve health/wellness and reduce medical costs**
- Learn how organizations/communities are working together to **positively impact overall community and population health with collaborative SDoH solutions**
- Recognize **regulatory and compliance challenges** when leveraging **SDoH data** in your strategy

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It takes a village to address SDoH...

Data on the Social Drivers of Health is the future of healthcare



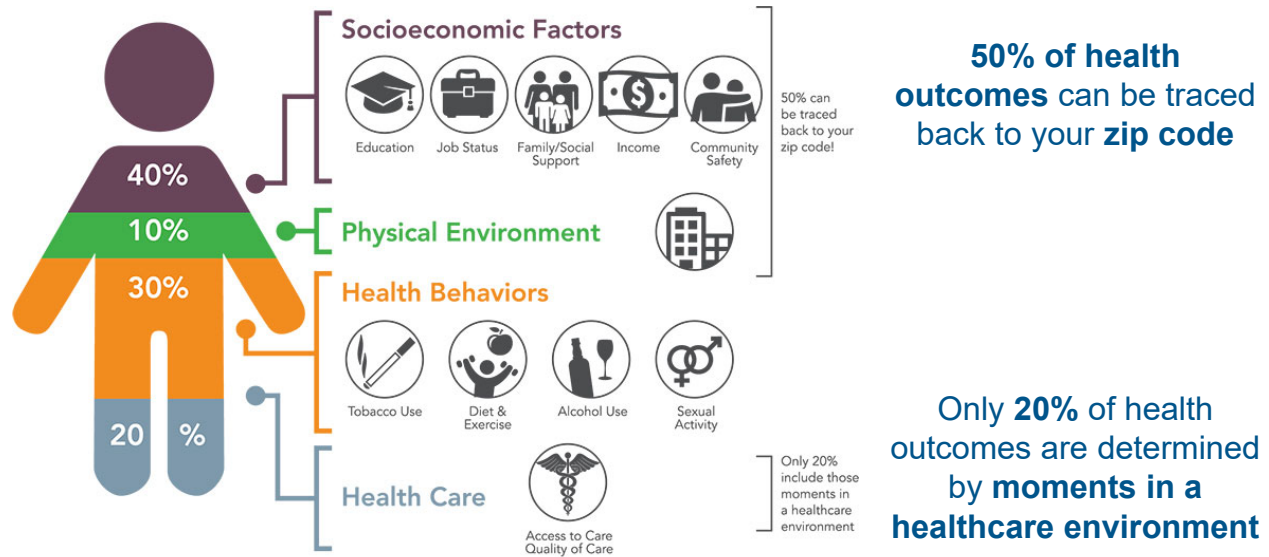
But, with great power comes great responsibility

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What is Social Determinants of Health?

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Source: Institute for Clinical Systems Improvement, Going Beyond Clinical Walls: Solving Complex Problems (October 2014)

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SDoH Industry Frameworks

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Organization	Health and Human Services - Healthy People 2030 ¹	American Hospital Association – Social Determinants of Health ²	Robert Wood Johnson Foundation – Building a Culture of Health ³
Type	Government Agency	Professional Association	Non-Profit
SDoH Focus Areas	Economy Stability	Food	Making Health a Shared Value
	Education Access and Quality	Housing	Fostering Cross-Sector Collaboration
	Health Care Access and Quality	Transportation	Creating Healthier, More Equitable Communities
	Neighborhood and Built Environment	Health Behaviors	Strengthening Integration of Health Services and Systems
	Social and Community Context	Violence	Outcome: Improved Population Health, Well-Being, and Equity Action Area
		Education	
		Social Support	
	Employment		

1. Healthy People 2030, <https://health.gov/healthypeople/objectives-and-data/social-determinants-health>
 2. American Hospital Association, <https://www.aha.org/social-determinants-health/populationcommunity-health/community-partnerships>
 3. Robert Wood Johnson Foundation, <https://www.rwjf.org/en/our-focus-areas/topics/social-determinants-of-health.html>

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Meet Tamara...

Known Characteristics

- 35 Years Old
- Mother of Two
- Diagnosed with Type II Diabetes 5 years ago
- Well-managed through diet, exercise, and blood sugar monitoring
- Adheres to medications
- Regularly completes check-ups



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Here is what Tamara is dealing with...

Unknown Characteristics

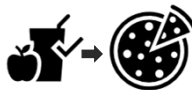


Eviction Concerns
despite freeze

Lost job and health coverage
due to Covid-19



Diet changes
due to tight budget



Relies on **Public Transportation**
to reach her doctor

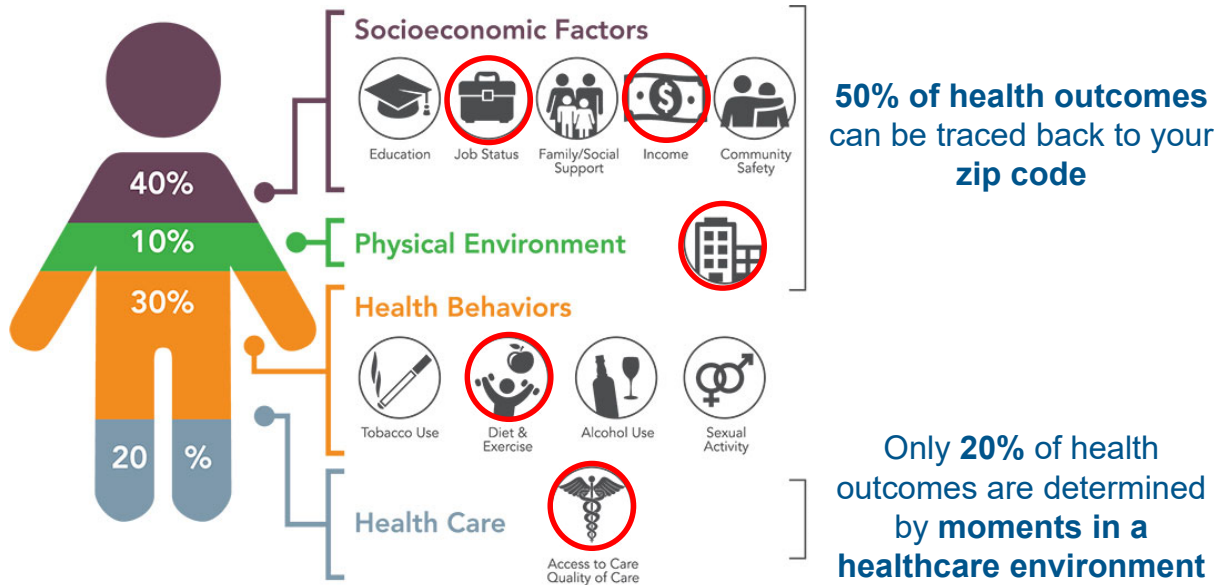


Rationing Insulin
due to refill cost

Recent **Anxiety and Panic Attacks**



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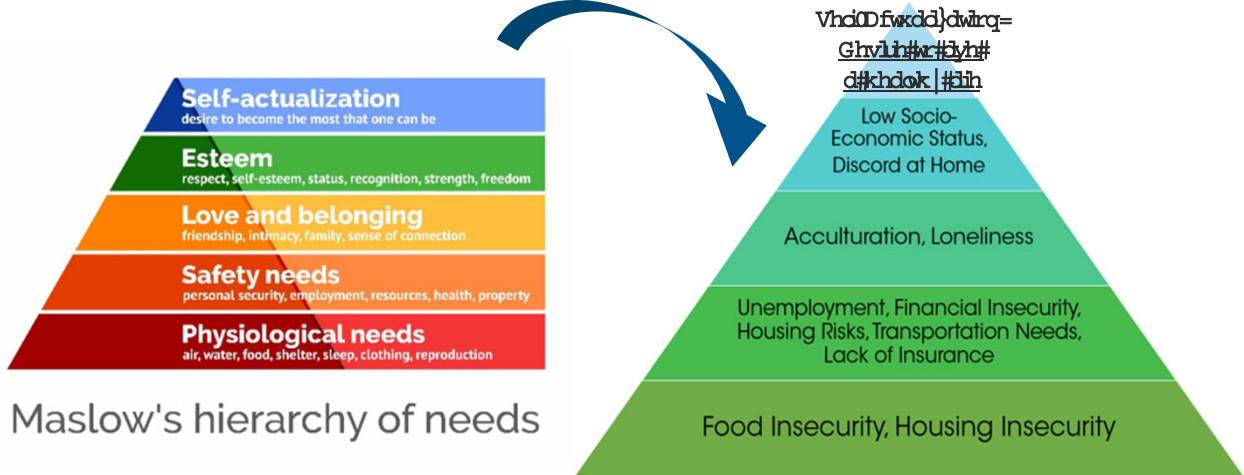


Source: Institute for Clinical Systems Improvement, Going Beyond Clinical Walls: Solving Complex Problems (October 2014)

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SDoH Hierarchy of Needs



Source: Rajan, Amogh. "How SDoH Align with Maslow's Hierarchy of Needs." Carrot Health, 23 December 2019, <https://carrothealth.com/importance-of-sdoh/>.

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Here-to-Serve Medical Center

Rising Healthcare Costs



Evolving Payment Models



Care Delivery Transformation



Rising Consumerism



Regulatory Uncertainty



As the definition of healthcare expands outside of the hospital, SDoH factors will become key to developing tailored strategies for success.

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What is Incentivizing These Investments?

Pre- 1965: Charity Care

High rates of uninsured elderly and minorities

1965: Social Security Act

Medicare Insurance for the elderly

2009: Affordable Care Act

Expansion of Health Insurance to ~ 20 Million people

1. AMA Journal of Ethics - Hospitals' Obligations to Address Social Determinants of Health
 2. Internal Revenue Service. Revised ruling 56-185, 1956-1, CB 202
 3. Internal Revenue Service. Instructions for Schedule H (Form 990)

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Social Determinants Accelerator Act

On December 21, 2020, Congress approved legislation that includes **\$3M in funding to establish a Social Determinants of Health Pilot Program** to create Social Determinants of Health Accelerator Plans.

<https://alignforhealth.org/social-determinants-accelerator-act/>

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Collective Impact

- Describes an intentional way of working together and **sharing information** for the purpose of solving a complex problem
- Believes that the **approach** is more likely to solve complex problems than if a single nonprofit were to **approach** the same problem(s) on its own

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Methodist Healthcare Ministries

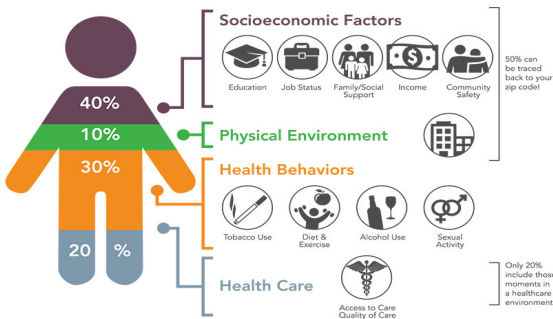
An example of Collective Impact



- Private, faith-based not-for-profit
- Serves 74 counties across South Texas
- Owns half of Methodist Healthcare System
- **Strategic Focus:** *“Advancing Health Equity to create fair and just opportunities for every person to reach their full potential for health and life and contribute to that of others.”*
- Services include direct care, a multitude of community programs, grantmaking and advocacy work
- \$32+M in grants to 100+ organizations in 2020

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SDoH Data Points



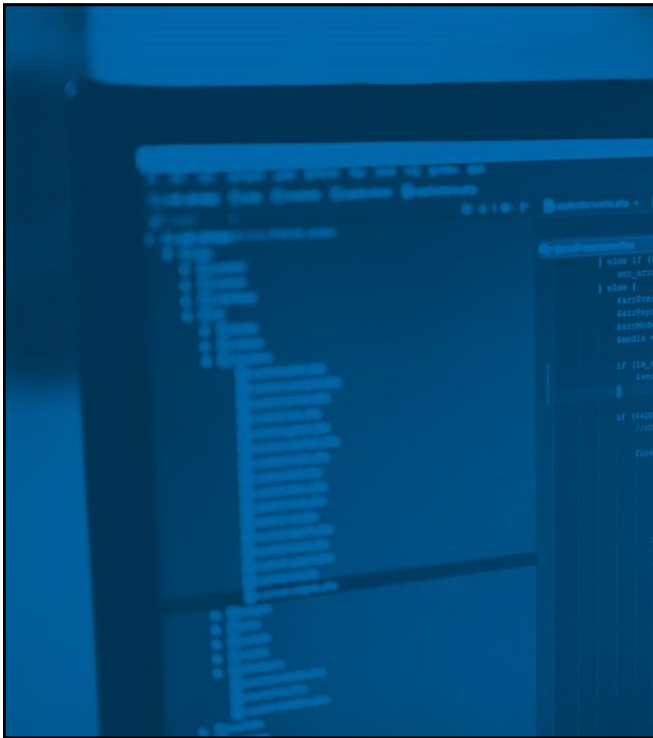
Source: Institute for Clinical Systems Improvement, Going Beyond Clinical Walls: Solving Complex Problems (October 2014)

Where do we get all this data?

- US Census
- Existing Health Data (EMR)
- Center for Disease Control
- Health Screening Tools
- Credit Companies
- Aggregated consumer data companies (e.g. Carrot Health)
- Public Health Records
- Screening tools

Socio-Economic Factors	<ul style="list-style-type: none"> • Marital status • Family size • Income / credit score • Education / Achievement • Ethnicity • Zip Code • Employment Status • Civic Participation • Housing Status <ul style="list-style-type: none"> • Rent / own 	<ul style="list-style-type: none"> • Car Ownership • Food Insecurities • Insurance status <ul style="list-style-type: none"> • Commercial • Medicare • Medicaid • M'care/ M'caid • Uninsured
Physical Environment	<ul style="list-style-type: none"> • Access to healthcare • Urban / Rural / Suburban • Education Level • Income Mix • Safety/Crime • Cultural Mix • Community Centers 	<ul style="list-style-type: none"> • Public transportation • Housing availability • Fresh market/grocers • Cost of living • Fitness Centers • Health Outcomes • Health Behaviors
Health Behaviors	<ul style="list-style-type: none"> • History/ Physical exam • Lifestyle choices • Allergies • Medications • Laboratory Data • Imaging Studies • Mental Health • Chronic Conditions • ED Usage 	<ul style="list-style-type: none"> • Readmissions • No Show visits • Claims data • Medication Reconciliation / Adherence • Revenue cycle / ability to pay
Health Care		

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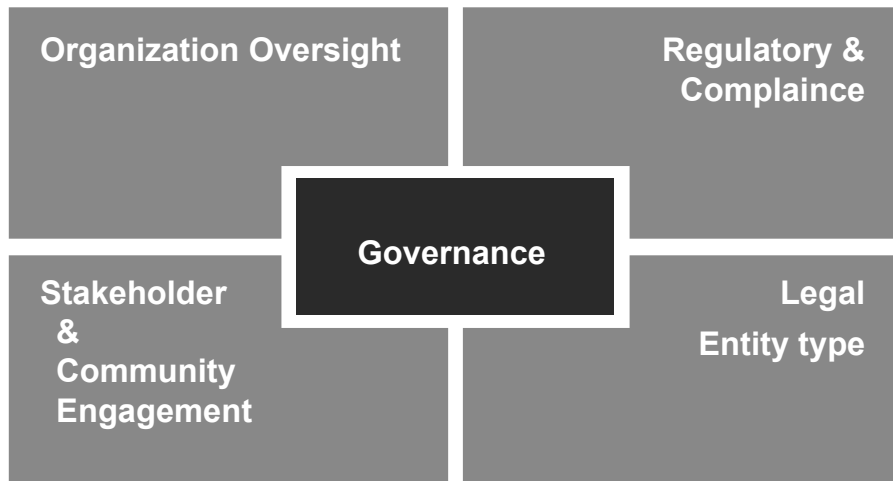


How do you manage all of these data points?

Access to data?

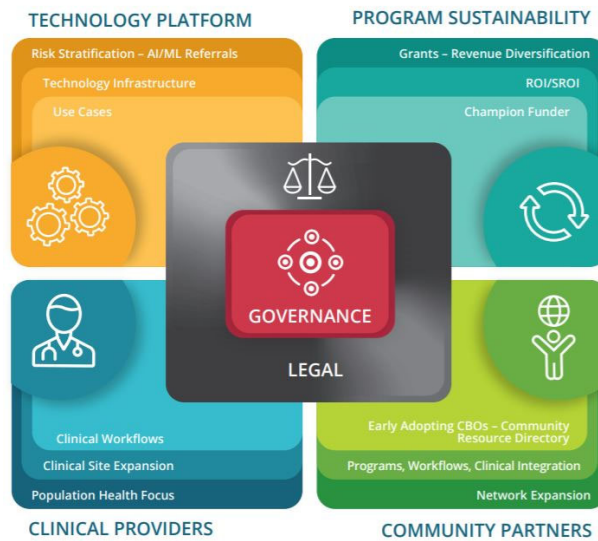
- What
- Who
- Where
- When
- How

Start with a Governance Structure



Cross-Sector Collaboration Model of Care

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Source: Kosel, PhD, Keith, and Steve Miff, PhD. "Building Connected Communities of Care." Parkland Center for Clinical Innovation (PCCI), <https://pccinnovation.org/playbook/>.

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Data Governance

Ethics and Guidelines

Goals:

- Shared trust framework for Data exchange and sharing
- Address privacy and security concerns, consumer expectations, and **potential racial or ethnic bias**
- Identify and deploy **policies** and resources to build the internal capacity necessary for social care organizations and consumers **to interoperate** and interact with each other and the health care system



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Unconscious Bias in Healthcare

In healthcare, **unconscious biases** have negative effects on patient-doctor relationships, patient treatment and outcomes. ¹



Patient Health Screens
Staff holding preconceived notions may allow their biases to direct the conversation, impact their body language, make the patient feel less trusting and thus not share details around their current situation ²



Patient Data Analysis
Algorithms and metrics used to calculate high risk patients to target for additional support
Ex: Using associated costs as a flag often leads to a focus on white people who historically had more access to care and thus have higher healthcare costs ³

1) *How Implicit Bias Harms Patient Care*, Jeff Bendix
2) *Unconscious Bias and Health Disparities: Where Do We Go from Here?*, Irene Blair, PhD
3) *Algorithmic Bias in Health Care: A Path Forward*, Ziad Obermeyer

Coding Compliance

How can providers identify Social Drivers of Health?

A Way to Code: Z-Codes from ICD-10¹

Example Z-Codes:

- **Z56:** Problems related to employment and unemployment
- **Z58:** Problems related to physical environment
- **Z59:** Problems related to housing and economic circumstances
- **Z60:** Problems related to social environment

However, these only paint **about 20%** of the picture!

These Z-Codes may be difficult to implement comprehensively²

- They are limited in what they address
- The reimbursement criteria remains unclear

1) *Identifying Social Determinants of Health, Coding, and HIPAA Compliance*, American Institute of Healthcare Compliance
2) *For the Record, HIPAA Challenges: SDOH Raise Interesting Privacy Questions*, Hants Williams, PhD, RN

Regulation and Compliance - HIPAA

Regulation is the law with which we must comply while **Compliance** is how to follow these rules.

The most all-encompassing health data regulation is **HIPAA**

HIPAA: Health Insurance Portability and Accountability Act ¹		
Aims to permit important use of personal health information while protecting the privacy of the individual	Covered entities such as healthcare providers, health plans, clearing houses and business associates of the covered entities are permitted to use/disclose protected health information without an individual's authorization	This information can be disclosed for the purpose of disclosure to the individual, treatment, payment and healthcare operations, or public interest activities

To comply with **HIPAA**, we must follow the **Security Rule**

HIPAA Security Rule	
Protects a subset of individually identifiable health information created by a covered entity known as protected health information (PHI) from being shared/distributed	Covered entities are required to ensure confidentiality of all electronic PHI, detect and safeguard against anticipated security threats, certify compliance by the workforce

1) Health Insurance Portability and Accountability Act of 1996 (HIPAA), Centers for Disease Control and Prevention

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Regulation and Compliance - SOC 2

To meet HIPAA's requirement of safeguarding PHI against data security threats, organizations often follow **Service Organization Control 2 (SOC 2)** guidelines.

“SOC 2 defines criteria for managing customer data based on **five ‘trust service principles’** – Security, Availability, Processing Integrity, Confidentiality, and Privacy”¹



Though this is not a requirement, organizations should consider **applying for SOC 2 certification** to ensure they have optimal data protection and management procedures in place.

1) SOC 2 Compliance, imperva

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Regulation and Compliance by State

While most states are working on privacy laws, only three states have signed legislature:

California Consumer Privacy Act (CCPA)	Maine's Act to Protect the Privacy of Online Customer Information	Nevada's Senate Bill 220
Provides consumers with the right to the following against most businesses world-wide in all industries. This includes knowing about the personal information a business collects about them, how it is used and shared, Deleting personal information collected by businesses, and opting-out of the sale of their personal information ¹	Prohibits providers of broadband internet services within Maine from using, disclosing, selling or permitting access to customer personal information unless given customer consent ²	Prohibits an "operator of an internet website or online service which collects certain information from consumers" in Nevada from selling certain consumer information without consent ³

Key Takeaways:

- Thoroughly research consumer protection regulations based on where business is occurring
- National guidelines are rapidly evolving and should be revisited frequently, with in depth research/reviews occurring **every quarter**

1) *California Consumer Privacy Act*, Office of the California Attorney General

2) *An Act to Protect the Privacy of Online Customer Information*, 129th Maine Legislature

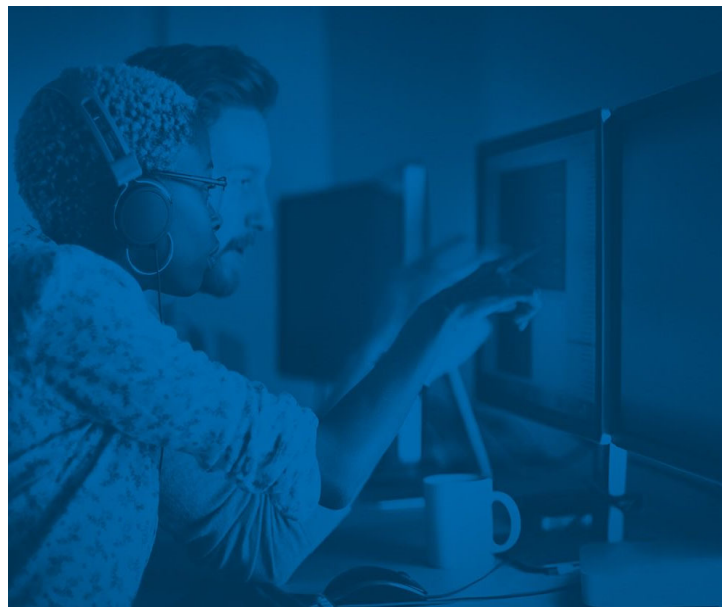
3) *Nevada Senate Bill 220*, 80th Session 2019 State Senators

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Data and Technology will drive the SDoH programs

There are challenges ahead:

- Lack of access to sufficient social services data and digital infrastructure
- Lack of access to sufficient social services data
- Lack of data standards for the social determinants of health (data sharing standards)
- Lack of Interoperability
- Infrastructure challenges



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Leveraging technology to meet a members needs during Covid-19

- 87-year-old woman living alone
- No Transportation
- Shelter in place due to Covid-19
- Risk stratified for frequent trips to ED
- Home health and medication provided in home to keep member safe
- Medications overnighted
- Food prepared and delivered via MOWs



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Call to Action and Recommendations

THINK



Treat all data as though it is Patient Health Information

PLAN



Understand what your state's rules are, especially if you are crossing state lines

ACT



Build a governance structure and establish a cadence for compliance review

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Thank You



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Additional Resources



[What Does Healthy Really Mean?](#)



[Social Determinants of Health Using Consumer Insights to Move from Why to How](#)

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