



NASDOH

NATIONAL ALLIANCE TO IMPACT THE
SOCIAL DETERMINANTS OF HEALTH

Year in Review 2020

This report provides a summary of the work of the National Alliance to impact the Social Determinants of Health (NASDOH) in 2020, which was made possible by the support and engagement from each NASDOH member.

2020 Priorities Overview

NASDOH was established in January 2018 to systematically and pragmatically build a common understanding of the importance of addressing social determinants of health (SDOH) as part of an overall approach to improve the health and economic vitality of families and communities. The work of NASDOH is guided by the following principles:

1. By addressing the broad and interconnected array of factors that influence health we can effectively help all people and communities to become and stay healthy, achieve well-being, and thrive economically.
2. Strategies that address SDOH should be developed with people and communities and reflect their values, perspectives, and preferences.
3. Meaningfully impacting health and well-being requires multi-sectoral partnerships across the private and public sectors.
4. The private sector, including employers and businesses, has an integral role to play through private-sector action, policy work, engaging in public-private partnerships, and civic leadership.
5. Public health departments and human and social services sectors are essential partners in efforts to address SDOH and will need significant financial and human capital investments.
6. Efforts to address the social determinants of health should build upon existing gains in the health care system including ensuring access to affordable, quality care.
7. Successfully transforming to a value-based health care system requires care and payment models that address SDOH.
8. Digital strategies should be leveraged to transform and improve health and well-being including promoting bidirectional information flow with appropriate attention to privacy, proper use, and data security as a priority in data collection, sharing, and use.
9. Measuring the impact of SDOH interventions should balance the goals and interests of sectors and affected people and communities.
10. The substantial body of successful evidence-based approaches to better integrate SDOH approaches into the health system can inform immediate action; however, there is a continuing need to experiment and build the evidence base, and for policies that encourage the development of additional evidence.

In 2020, NASDOH continued to prioritize activities related to our core work streams while necessarily

adapting and evolving our work plan in recognition of the impact and relevance of social needs and social determinants of health to the COVID-19 public health emergency. NASDOH's work this year focused on:

- I. Underscoring the value proposition for the U.S. to prioritize SDOH as a value that transcends partisanship and promotes inclusion of a broad set of stakeholders and partners.
- II. Highlighting the opportunity cost of inaction on SDOH playing out on the national stage during the COVID-19 public health emergency. As part of this work, we began to articulate the importance of addressing SDOH in a broader framework to achieve health equity.
- III. Laying the foundation for NASDOH's efforts in 2021 by developing a set of policy recommendations for the next presidential administration to chart SDOH as a new national priority and coordinate efforts across government departments and agencies to improve social and economic conditions in our communities.

I. KEY ACTIVITIES IN 2020:

Annually, NASDOH defines a workplan that establishes our specific goals and deliverables which align with our priority areas. In 2020, NASDOH made progress in each of our key workstreams, positioning us well for progress in 2021.

Following and Updating Members on Federal SDOH Activity

NASDOH continued its efforts to track initiatives and activities to address SDOH and social need at the US Department of Health and Human Services (HHS) and at its member agencies; significant updates were published on the [NASDOH website](#). The HHS activity tracker is a valuable resource for our members as well as a wider audience in promoting awareness of what is happening across HHS.

This year, we expanded our efforts to track legislative developments. Internally, we are following bills introduced in Congress which are relevant to SDOH. We also started to track SDOH activity in other departments, including the US Department of Agriculture (USDA) and Housing and Urban Development (HUD). NASDOH members were updated on developments monthly in the member newsletter, as well as during our policy committee and full alliance meetings. As NASDOH looks to expand advocacy and policy agenda beyond HHS in 2021, we will increase our efforts and consider broader dissemination.



Encouraging Federal Flexibility to Address Social Need And SDOH

NASDOH responded to the contract year (CY) 2021 and 2022 Medicare Advantage (MA) and Part D proposed rule. In our comment letter, NASDOH supported CMS' efforts to codify Special Supplemental Benefits for the Chronically Ill (SSBCI) policies on "not primarily health related" benefits previously outlined,

to expand its list of eligible chronic conditions for SSBCI benefits, and to provide flexibility around the calculation of the medical loss ratio (MLR). CMS' final rule codified the flexibilities NASDOH supported.

NASDOH published [Opportunities to Advance SDOH Efforts Through Pooled Funding](#), an issue brief calling on HHS and other federal departments to support collaborative SDOH investment and leverage existing authorities to expand allowances for pooling of public and non-public sources of funding. We outlined 5 recommendations that have the potential to improve community conditions and help Americans stay healthy, achieve well-being, and thrive economically in the long term.



[Engaging with HHS and Congressional Staff to Provide Insights and Recommendations](#)

In winter 2020, NASDOH met with Deputy Assistant Secretary for Planning & Evaluation (ASPE) Arne Owens, and other members of ASPE leadership to discuss SDOH and the importance of efforts to address SDOH in a value-based environment. NASDOH members joined the meeting to discuss their organizations' efforts, discuss promising practices and areas of concern. We also discussed opportunities to include SDOH in ASPE's evaluations.

NASDOH met with CMS staff to discuss developments and provide technical assistance. We encouraged CMS to continue to provide more clarity to states and managed care organizations (MCOs) advancing payment and care models to address social drivers of health, and consider waivers and flexibilities extended during the COVID-19 public health emergency. CMS staff shared their appreciation for NASDOH's 2019 recommendation to provide written guidance for states interested in addressing SDOH in their Medicaid programs.

NASDOH staff met with congressional staff, including key committees and personal office staff, on an ad hoc basis to discuss SDOH. Quarterly, we sent our congressional eNewsletter to health staff to build awareness about NASDOH's and our member's efforts, provide educational resources, and highlight key SDOH activity on the hill, in the administration, at the state level, and in the private sector.

[Advancing Data & Technology Innovation and Promoting SDOH Data Sharing](#)

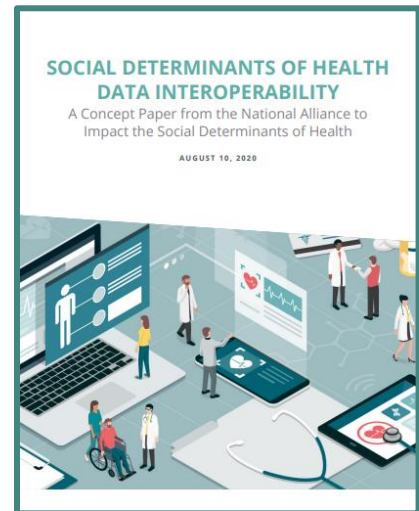
NASDOH launched our Data and Technology Committee in 2020. The Committee met to define NASDOH's data and technology focus and met with Jacob Reider from the Alliance for Better Health to learn about his experience in linking social and medical care records in New York.

In July 2020, NASDOH published its [Social Determinants of Health Data Interoperability Concept Paper](#), outlining key opportunities to enable an interoperable data ecosystem where social needs information is

shared seamlessly, privately, securely, and with consent to address individuals' needs effectively and impact SDOH upstream. The paper was developed with support of the CARIN Alliance.

NASDOH promoted data and technology innovation to support SDOH and social need interventions:

- NASDOH joined a panel at a daylong conference co-hosted by the Workgroup for Electronic Data Interchange (WEDI) and eHealth Initiative (eHI) on [“Working with Government to Advance Social Determinants of Health.”](#) NASDOH called for government support to use data to support better collaboration and efficiency; engage the community and help monitor and track improvements in health outcomes; reduce inefficiencies; encourage integrated health care, improve care coordination, quality, safety, and efficiency; and reduce health disparities in targeted populations.
- NASDOH presented our SDOH interoperability paper at the [CIE Summit](#), which brings together key 2-1-1, social, health, non-profit, research data, philanthropy, education, technology, and government thought leaders from across the nation to engage in workshops and interactive discussions about bridging health and social service sectors to build strong and thriving communities.
- NASDOH also participated in the [Center for Open Data Enterprise’s and HHS’ Roundtable on Using SDOH Data to Fight COVID-19 and Support Recovery Efforts](#). The event brought together nearly 75 policymakers, physicians, researchers, and participants from civil society and healthcare organizations to help HHS and its partners identify immediate actions they can take to better leverage SDOH data to mitigate COVID-19, especially in vulnerable communities, and support healthcare resilience during and after the pandemic.



[Promoting Shared Learning among our Members](#)

NASDOH members met bimonthly in 2020 to discuss federal policy updates, Alliance progress toward our workplan, and share promising practice for addressing SDOH used in member organizations.

- In January, Dr. Laura Gottlieb of SIREN presented recent study findings from the evaluation of the Camden Coalition’s efforts to reduce spending and improve health care quality among patients with high use of health care services. Invited guest, Dr. Kirsten Bibbins-Domingo of UCSF presented on the National Academy of Medicine’s Fall 2019 report which identified and assessed current and emerging approaches and recommends ways to expand and optimize social care in the health care setting. Dr. Bibbins-Domingo chaired the report, and Dr. Laura Gottlieb and Dr. Karen DeSalvo served on the report consensus committee.
- In March, Governor Leavitt hosted our second Alliance retreat to discuss key NASDOH objectives and strategy, including NASDOH’s role beyond 2020, opportunities for NASDOH to advance the cross-sector value of SDOH investments and how NASDOH can increase community capacity to

build multi-sectoral alliances, foster collaboration across stakeholders, and implement effective community-based interventions.

- In May, NASDOH members discussed work their organizations were engaged in as they responded to the COVID-19 pandemic, the social needs they were addressing, and the challenges that they continued to see as their work extended.
- In July, members met to discuss the compendium to help communities build multi-sectoral alliances and gather ideas from members to help steer the development of a proper structure to present this guidance adequately.
- In September, Governor Leavitt reviewed what NASDOH members can expect for the upcoming election, and the process of transitioning to a new administration or preparing for a second term of the Trump administration. We also discussed the Raising the Bar project and progress to date.
- In December, new NASDOH members from the Camden Coalition met to discuss the results of their randomized controlled trial and share insights that were transforming how they provide complex care and address social needs for complex patients. We discussed the election results, expectations for 2021 and NASDOH's policy recommendations for the incoming Biden Administration.

We established a biweekly member newsletter which highlighted NASDOH members' SDOH news and initiatives, federal policy updates, and resources and events.

Framing for Action

NASDOH developed a compendium which articulates why multi-sectoral partnerships are essential to address adverse SDOH, provides a framework to guide establishment of multi-sectoral alliances, and highlights a curated set of resources, with a focus on guidance and best practices for structure and process, to support community capacity to build multisectoral alliances. The compendium will be released on our website and we will solicit public comment in January of 2021.

NASDOH presented at the Population Health Alliance's annual conference about the implications of the election on SDOH policy issues. Additionally, NASDOH shared our work with the multisectoral alliances that participate in the Network for Regional Healthcare Improvement.

NASDOH 2020 Issue Briefs and Commentaries

NASDOH released several publications throughout this year, including a series of issue brief related to SDOH issues exacerbated amid the COVID-19 pandemic.

- [NASDOH Commentary: SDOH Issues In COVID-19](#) (June 2020)
- [Social Determinants of Health Data Interoperability Concept Paper](#) (August 2020)
- [Public Health's Unique Role in Addressing Both Social Needs and Social Determinants of Health](#) (September 2020)
- [Policy Recommendations for the Biden Administration](#) (November 2020)
- [Waivers and Program Flexibilities: Lessons From COVID-19](#) (December 2020)
- [Opportunities to Advance SDOH Efforts Through Pooled Funding](#) (December 2020)

Advancing NASDOH's External Brand

To advance the NASDOH brand, we updated our website to improve the user experience, we began a logo design process, and sought to expand our influence by establishing a [LinkedIn](#) presence. We will further this goal in 2021.

Launching the Raising the Bar Project

NASDOH was awarded a [Robert Wood Johnson Foundation Grant](#) to develop principles defining the health care sector's role in achieving optimal well-being for those who face the greatest barriers to health. In 2020,



NASDOH established process to foster discussion among advocates and leaders and began development of principles that ensure people, communities, and their priorities are at the center of health care. Ultimately, we seek to clarify the importance of health care as a player across the health spectrum and ensure that the principles are achievable and actionable. This work is adjunct to NASDOH's customary workplan and is in concert with key partners including several NASDOH members. It will continue through 2022.

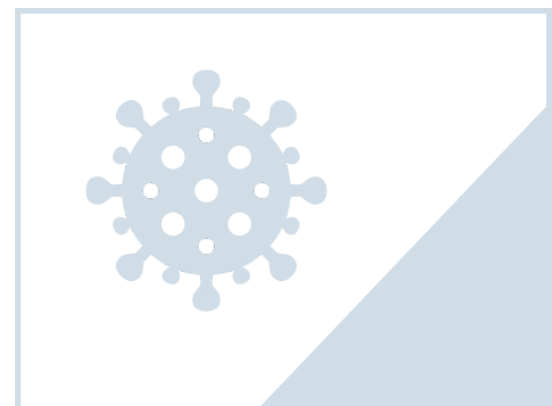
II. NASDOH Response to COVID-19

COVID-19 shone a bright light on the gap between what we already knew about SDOH and what we still need to accomplish to address adverse social and economic conditions. NASDOH evolved our workplan to be responsive to key issues emerging in the pandemic.

In addition to tracking HHS SDOH activity, NASDOH began [following and sharing](#) federal flexibilities or funding sources for SDOH-related programs amid the COVID-19 public health emergency on our website. We focused on flexibilities which related to social needs specifically and called attention to action at HHS, USDA, and HUD. We also began including COVID-19 SDOH-related news and policy updates in the NASDOH members newsletter.

During our May member meeting, we focused on how member organizations are responding to COVID-19 and underlying SDOH on the ground. Members were invited to share their challenges and strategies.

Over the summer, we hosted a second COVID-19 Roundtable with NASDOH members. At the members request, we focused discussion on how providers roles are changing because of COVID-19, and members shared observations and perspectives from their own work. This included



deploying new strategies to reach patients, innovative ways to address social needs and partner with social service providers, and how the changing roles of providers during the pandemic may influence how providers should be compensated going forward.

Finally, NASDOH released a series of commentaries and issue briefs highlighting SDOH-related issues during COVID-19, and highlighted opportunities for policy action.

- **NASDOH COMMENTARY: SDOH ISSUES IN COVID-19:** In our first COVID-19 commentary, NASDOH addressed key SDOH-related issues that have been exacerbated during COVID-19, including systemic inequity that makes communities of color most vulnerable to poor health outcomes and which must be addressed. We issued a call to action to address social need to mitigate the impact of COVID-19 and make a broader set of reforms to ensure more equitable access to care and services, make long-term and sustained investments to address health equity, and mitigate the negative impact that results from the disconnect between clinical outcomes and SDOH. We discussed several areas where the nation should learn from the COVID-19 experience and address the root causes of disparities to improve health and reduce the impact of future public health crises and emergencies.
- **PUBLIC HEALTH'S UNIQUE ROLE IN ADDRESSING BOTH SOCIAL NEEDS AND SOCIAL DETERMINANTS OF HEALTH:** NASDOH's second issue brief explored how the public health sector is uniquely positioned to assist at the intersection of public health and both social needs and social determinants of health (SDOH) during the current public health emergency and moving forward.
- **WAIVERS AND PROGRAM FLEXIBILITIES: LESSONS FROM COVID-19:** NASDOH's third issue brief highlighted the importance of federal health and social programs flexibilities amid the COVID-19 pandemic to meet social need. We summarized key reasons to retain and expand certain waivers and program flexibilities implemented during the public health emergency and provided a set of recommendations to optimize use of waivers and program flexibilities.

III. PREPARING FOR 2021

Beginning in the summer of 2020, the NASDOH Policy Committee and Steering Committee focused on developing a federal policy and advocacy agenda for 2021 and beyond. We sought to develop a set of recommendations which could be shared with both the legislative and administrative branches of government, outlining policies to better align and integrate available SDOH resources, advance value-based health care, and support federal, state, and local action to address SDOH in a sustainable manner. NASDOH developed 8 policy recommendations on SDOH to the next administration:

1. Make SDOH a New National Priority
2. Use Program Funding and Integration to Sharpen SDOH Focus Across the Executive Branch
3. Enhance Prioritization and Coordination of SDOH Efforts within the Department of Health and Human Services
4. Improve Regulatory Assessment of SDOH Policy Changes

5. Use Health Care Financing Mechanisms to Support SDOH Activity
6. Revitalize Public Health, a Key Partner to Address SDOH
7. Modernize Data Infrastructure to Support SDOH Data Sharing
8. Support Research & Development to Address SDOH

Prior to the 2020 election, NASDOH informally disseminated our eight policy recommendations to HHS representatives in the Trump administration and shared with representatives associated with the Biden/Harris campaign.

Once the election results were announced, NASDOH published our letter to the Biden Administration Transition team and shared it widely, including with Agency Review Teams. The letter highlights the importance of addressing SDOH to advance health equity and help address key racial, ethnic, gender, and geographic disparities in health outcomes. We called for the Biden Administration to make SDOH a new national priority and set for a bold leadership agenda on SDOH. Our [eight policy recommendations](#) to the Biden Agenda were supported by specific actions the new administration could take related to each.



One of NASDOH key priorities for 2021 is to advocate for federal action on SDOH and a federal policy environment that facilitates state and local action to address SDOH. These recommendations will guide our policy and advocacy efforts. We look forward to working with the incoming Biden administration and new Congress on these efforts.



ABOUT US

The National Alliance to impact the Social Determinants of Health (NASDOH) is a group of stakeholders working to systematically and pragmatically build a common understanding of the importance of addressing social needs as part of an overall approach to health improvement and economic vitality of families and communities. The Alliance brings together health care, public health and social services expertise, local community experience, community-convening competence, business and financial insight, technology innovation, data and analytics competencies, and policy and advocacy acumen to assess and address current regulatory frameworks, funding environments and opportunities, and practical challenges to implementing and sustaining social determinants of health efforts.

We seek to make a material improvement in the health of individuals and communities and, through multi-sector partnerships within the national system of health, to advance holistic, value-based, person-centered health care that can successfully impact the social determinants of health. To learn more, visit us at NASDOH.org.

MEMBERSHIP

Co-Conveners

Dr. Karen DeSalvo
Governor Michael O. Leavitt

Steering Committee

Aetna	Kaiser Permanente
Anthem	National Partnership for Women and Families
Cigna	RWJ Barnabas Health
Funder's Forum, George Washington University	Trust for America's Health
Intermountain Healthcare	

General Members

AltaMed Health Services	Episcopal Health Foundation
American Heart Association	Horizon Blue Cross Blue Shield of New Jersey
AmeriHealth Caritas, D.C.	March of Dimes
Build Healthy Places	Michigan Health Improvement Alliance
Camden Coalition for Healthcare Providers	National Association of Area Agencies on Aging
Centene	New York Presbyterian
Center for Community Investment	ReThink Health
de Beaumont Foundation	7wire Ventures

Strategic Partners

BlueCross BlueShield Venture Partners/Sandbox Ventures
Social Interventions Research and Evaluation Network