



National Alliance to Impact the Social Determinants of Health (NASDOH)

2022 Year in Review

This report provides a summary of the work of the National Alliance to Impact the Social Determinants of Health (NASDOH) in 2022, which was made possible by the support and engagement of each NASDOH member.

ABOUT NASDOH'S 2022 PRIORITIES

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 a set of [principles](#), which were updated in the Spring of 2021 to reflect the evolving SDOH federal landscape and NASDOH members' interests.

In 2022, NASDOH prioritized activities related to our three core goals (below) while continuing to adapt and evolve our work plan in recognition of the relevance of social needs and SDOH to the ongoing COVID-19 crisis and advancing health equity. NASDOH's work in 2022 revolved around the following goals which we set at the beginning of the year:

Goal 1: Embed addressing social needs as a part of high-quality whole-person care.

Recognizing that SDOH influences non-medical needs and the importance of addressing the social needs as part of an overall approach to health improvement, NASDOH will advance efforts that facilitate social needs being addressed

Goal 2: Advocate for sustained and embedded efforts to address SDOH in the private sector and across government.

Since NASDOH's founding in 2018, the importance of addressing social needs and improving adverse SDOH has been increasingly recognized. There is an opportunity to capitalize on this recognition by framing a focus on the need for sustainable, scalable, and continuous efforts to address SDOH as a core component of advancing equity.

Goal 3: Advance efforts to address upstream drivers of health.

NASDOH's goal is to impact the underlying conditions which drive our health outcomes. Goal 3 focuses on continuing to advance progress on SDOH.

KEY ACTIVITIES IN 2022

Each year, NASDOH defines a work plan that establishes specific goals and deliverables, which align with our priority areas. In 2022, we proactively engaged in federal policy environment related to social needs and SDOH and reacted to federal policy opportunities to advance the Alliance's collective goals.

Additionally, we made progress towards our three strategic goals and advanced work in each of our key workstreams, positioning us well for progress in 2023.

GOAL 1: EMBED ADDRESSING SOCIAL NEEDS AS A PART OF HIGH-QUALITY WHOLE-PERSON CARE

At the beginning of 2022, we set a goal to advance efforts to facilitate social needs being addressed as a part of high-quality, whole-person care. We convened NASDOH members in 2022 to learn from organizations about how they are leveraging current allowances and flexibilities to address social needs, and specifically discuss how NASDOH members are interpreting and implementing regulatory guidance to address social needs and SDOH. Additionally, as an Alliance, we have advocated to CMS in several ways this year:

NASDOH encouraged the CMS Innovation Center (CMMI) to consider how its payment models can be designed to address social needs. We sent CMMI a set of [proposed principles](#) for addressing social needs and SDOH in future CMMI payment models to CMMI Director Dr. Dora Hughes. In the principles, NASDOH notes CMMI's recent strategy refresh focusing on health equity and emphasizes that screening for and referring or providing services to beneficiaries with health-related social needs is a vital component of addressing equity. Therefore, NASDOH asserts that social needs considerations should be incorporated into all future CMMI payment models and offers principles for CMMI to consider.

NASDOH also advocated to CMS to address social needs and SDOH in the Medicaid and CHIP Learning Collaboratives. NASDOH developed a [memo](#) in which we called for the existing Medicaid and CHIP models to be used to address health-related social needs. NASDOH strongly encourages the enhancement of CMS efforts to promote cross-state learning, including the creation of a learning collaborative focused specifically on strategies to address social needs in Medicaid.

Additionally, NASDOH submitted comments to three annual Medicare proposed payment rules specifically encouraging the administration to finalize proposals to embed social drivers of health screening measures and a commitment to health equity measure in Medicare. See Appendix A for a complete list of NASDOH policy deliverables in 2022.

RESPONSES TO MEDICARE ANNUAL PAYMENT RULES

- FY 2023 Medicare Hospital Inpatient Prospective Payment System (IPPS) and Long-Term Care Hospital (LTCH) Prospective Payment System (PPS) Proposed Rule
 - NASDOH [submitted](#) comments specifically in support of additional measures: the Hospital Commitment to Health Equity measure, Screening for Social Drivers of Health measures. NASDOH also responded to two requests for information on reporting of SDOH diagnosis codes and using measurement and stratification tools to address health equity.
- CY 2023 Medicare Hospital Outpatient Prospective Payment System and Ambulatory Surgical Center Payment System Proposed Rule.
 - NASDOH [commented](#) on overarching principles to measure healthcare quality disparities across CMS quality programs and on potential quality measures for health equity in rural and rural emergency settings.
- CY 2023 Medicare Physician Fee Schedule Proposed Rule.
 - NASDOH [commented](#) in support of the addition of two proposed structural measures, Screening for Social Drivers of Health and Screen Positive Rate for Social Drivers of Health in quality payment programs. NASDOH also suggested CMS provide guidance on standardized screening for SDOH for all patients across programs.

GOAL 2: ADVOCATE FOR SUSTAINED AND EMBEDDED EFFORTS TO ADDRESS SDOH IN THE PRIVATE SECTOR AND ACROSS GOVERNMENT

In an effort to underscore the need for sustainable, scalable, and continuous efforts to address SDOH as a core component of advancing equity, NASDOH forged deeper relationships with staff at key Congressional offices, and offered the Alliance's perspective on the importance of addressing SDOH to drive overall health and wellbeing.

In addition, we met with key officials in the Administration to strengthen relationships, discuss activities related to social needs and SDOH, and offer NASDOH's guidance and perspective on matters related to SDOH.

ADMINISTRATION ENGAGEMENT

- Staff at the Office of the Assistant Secretary for Planning and Evaluation (ASPE), including the Associate Deputy Assistant Secretary for Health Policy, the Director of the Division of Health Financing Policy, the Director of the Division of Public Health Services, and the Director for the Division of Health Care Access and Coverage to discuss key questions pertaining to building the evidence base for SDOH interventions as well as opportunities and levers for governmental action to support SDOH interventions.
- Staff at the Centers for Disease Control and Prevention (CDC), including the Director for the National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), the Deputy Director for Public Health Science and Surveillance, and the Deputy Director for the Office of Science, to discuss public health data modernization efforts and ways in which CDC may improve social needs and SDOH data collection, exchange, and service provision.
- The CMS Innovation Center (CMMI) Director Dora Hughes to offer [proposed principles](#) to embed addressing social needs and SDOH in CMMI Payment Models. CMMI released a strategic refresh with broad overlap on the principles that NASDOH proposed.
- Staff from the CMS Center for Medicare and Medicaid Services to offer [comments](#) on addressing social needs in Medicaid and CHIP learning collaboratives.
- Staff from the U.S. Department of Agriculture (USDA) to talk about health care and nutrition programs.
- Sandy Ford, Special Assistant to the President for Public Health and Science in the White House Domestic Policy Council (DPC), and Micky Tripathi, the National Coordinator for Health Information Technology at HHS to discuss the use of new Federal resources to build a data infrastructure that promotes integration and interoperability across health care, public health, and social services.

NASDOH also spoke about SDOH supportive policy developments and opportunities, offering recommendations to a variety of stakeholders through panels, webinars, and direct presentations. Presentations included presentations to the Agency for Healthcare Research and Quality (AHRQ) grantees focused on quality improvements, the National Hypertension Control Initiative, and the Healthcare Anchor Network.

In addition to promoting our policy recommendations to policymakers directly, NASDOH strengthened our tracking of initiatives and activities to address SDOH and social needs across the U.S. Department of Health and Human Services (HHS) and at its member agencies and other departments, including the U.S. Department of Agriculture (USDA) and Housing and Urban Development (HUD). NASDOH's policy activity tracking served as a valuable resource for our members, as well as for a wider audience, in promoting awareness of what is happening across HHS and other departments. NASDOH members were updated on developments twice monthly in the member newsletter, as well as during our monthly Policy Committee and Full Alliance meetings.

We have been grateful to see a multitude of federal policy achievements related to the work that the Alliance has engaged in to advance SDOH on the federal level.

SIGNIFICANT FEDERAL SDOH POLICY ACTIVITY IN 2022

Over the course of 2022, NASDOH was encouraged to see a number of federal policy developments and achievements related to SDOH, the result of strong advocacy and increasing federal prioritization of social needs, social determinants of health, and health equity. Accomplishments included:

- The release of Equity Action Plans from more than 90 federal agencies to advance equity and racial justice across the federal government, including the release of HHS' own action plan and a CMS action plan to advance equity.
- The inclusion of social needs, SDOH, and health equity provisions throughout three Medicare annual payment rules.
- The approval of several new Medicaid section 1115 waivers to states, including to Massachusetts, Oregon, Arizona, and Arizona.
- The release of several SDOH-related reports from federal agencies including the Assistant Secretary for Planning and Evaluation's (ASPE) "Scoping Review Report: Data Elements for Research on the Role of Social Determinants of Health (SDOH) in Coronavirus Disease 2019 Infection and Outcomes in the U.S.," the ASPE "Landscape of Area-Level Deprivation Measures and Other Approaches to Account for Social Risk and Social Determinants of Health in Health Care Payments," and the CMS Office of Minority Health (OMH) "Advancing Rural Maternal Health Equity."
- Increased attention on maternal and child health and their connection to SDOH, including through the release of the White House Blueprint for Addressing the Maternal Health Crisis, launch of the Improving Maternal Health by Reducing Low-Risk Cesarean Delivery (LRCD) Learning Collaborative, and the optional state extension of postpartum Medicaid and CHIP coverage for up to 12 months.
- Launch of the cross-departmental Housing and Services Resource Center (HSRC) between HHS and HUD to provide resources to public housing authorities, housing providers, and health providers.

SIGNIFICANT FEDERAL SDOH POLICY ACTIVITY IN 2022, cont'd

- The convening of a White House Conference on Hunger, Nutrition, and Health, the first of such convenings in 50 years, and the subsequent release of a National Strategy on Hunger, Nutrition, and Health.
- In Congress, increased understanding from both sides of the aisle that SDOH and social needs must be addressed both as a public health measure and in prevention efforts.

GOAL 3: ADVANCE EFFORTS TO ADDRESS UPSTREAM DRIVERS OF HEALTH

Since its inception, one of NASDOH's focuses has been to impact the underlying conditions which drive our health outcomes – not just the social needs. This year, we set a goal to build on the SDOH research principles we put forward in a December 2021 letter to ASPE as a tool to build the evidence base and sustainability of interventions to address SDOH.

This year, we convened NASDOH members and a guest speaker to discuss the current state of SDOH research, the areas that research already sufficiently addresses, and the areas where more research is needed. Over the course of several meetings, NASDOH members helped to develop a set of research principles and calls to action for the Administration, Congress, States, philanthropic organizations, and other stakeholders to take to advance the SDOH evidence base and translate research to policy and action. NASDOH will continue to share its research principles and call to action with federal policymakers into 2023.

Raising the Bar

Since the Spring of 2020, NASDOH has co-led an effort supported by the Robert Wood Johnson Foundation to develop principles and actions for health care organizations to advance equity and improve quality across their roles as providers, employers, community members, and advocates. In the Summer of 2022, NASDOH released [Raising the Bar](#) – an actionable framework for the



entire healthcare sector, from providers, to payers, to the public health community, to embed equity throughout its work and help achieve optimal health for all. Raising the Bar worked with healthcare leaders and those who experience inequities to craft foundational, central principles that can serve as healthcare's gravitational force to continuously center equity work. Essential roles healthcare must play revolve around

these principles, each with corresponding concrete actions that can improve equity. Learn more at rtbhealthcare.org. NASDOH has played a role in widely publicizing the framework among relevant stakeholders and working to encourage health care organizations to adopt the framework.

Appendix A

NASDOH WHITE PAPERS, LETTERS, AND PUBLICATIONS TO THE ADMINISTRATION AND FEDERAL AGENCIES

Capitalizing on the emerging attention toward and prioritization of social needs, SDOH, and health equity from the White House, and federal agencies, NASDOH developed publications and responded to key federal policies. We engaged with the executive branch on these issues:

- [Commenting](#) on CMS' request for information on Improving Medicare Advantage, focusing comments on methods for screening for SDOH, approaches for partnership between community-based organizations (CBOs) and MA plans, and the use of algorithms and analytics to promote care management and coordination.
- [Commenting](#) on SDOH-related provisions in the CMS Proposed Rule on Medicare Advantage and Part D for contract year 2023, focusing comments on SDOH-related provisions, including the proposal to require all SNPs to include one or more standardized questions on the topics of housing stability, food security, and access to transportation as part of their health risk assessments (HRAs);
- [Submitting](#) comments to the White House Office of Science and Technology Policy (OSTP) request for information (RFI) on Strengthening Community Health through Technology. In the letter, NASDOH underscored the importance of qualitative and quantitative data as well as data generated by the community. With examples from members, NASDOH outlined successful models of community health providers using digital health technology, raised barriers faced by organizations in community-based settings; and, reviewed trends in digital health technology use from the pandemic;
- [Submitting](#) comments on the request for information on access to care and coverage in Medicaid and CHIP, focusing on access and eligibility requirements in Medicaid, care coordination and covering social care in Medicaid, and assessment of payment policies through the development of a Medicaid learning collaborative;
- [Commenting](#) on CMS' overarching Request for Information: Make Your Voice Heard on accessing healthcare and related challenges, understanding provider experiences, advancing health equity, and assessing the impact of waivers and flexibilities provided in response to the COVID-19 Public Health Emergency (PHE).
- [Commenting](#) on the Agency for Healthcare Research and Quality (AHRQ) Request for Information on Person-Centered Care Planning for Multiple Chronic Conditions. NASDOH is currently drafting its response, which will highlight Raising the Bar as a resource, specifically its focus on Provide Whole-Person Care to Advance Health Equity.
- Sending a [letter](#) to the White House, HHS, CDC, and ONC requesting guidance on modernizing public health data systems;
- Offering [ideas](#) to the Commonwealth Fund Commission on a National Public Health System. The Commission released a vision for the National Public Health System which included components of several of NASDOH's recommendations.
- Offering [ideas](#) for the 2022 White House Conference on Hunger, Nutrition, and Health based on members' experiences providing services to address people's social needs and SDOH as they relate to hunger, nutrition, and health. The White House released a national strategy on hunger, nutrition, and health which included content related to the comments offered in feedback.

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.

Co-Founders

Dr. Karen DeSalvo
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MEMBERSHIP

STEERING COMMITTEE



GENERAL MEMBERS



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