



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

## 2023 Year in Review

*This report provides a summary of the work of the National Alliance to Impact the Social Determinants of Health (NASDOH) in 2023, which was made possible by the support and engagement of all our NASDOH members.*

## EXECUTIVE SUMMARY

### NASDOH'S 2023 PRIORITIES

NASDOH was established 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 2023, The Alliance placed a strategic emphasis on key activities aligned with our three core goals for the year (below) while continuing to adapt and evolve our work plan in recognition of the significant policy updates to advance social needs screening and address SDOH:

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

Recognizing that SDOH influence non-medical needs and the importance of addressing 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.

## MAJOR DEVELOPMENTS IN 2023:

### NASDOH'S FIVE-YEAR ANNIVERSARY

Founded in 2018 by Governor Mike Leavitt and Dr. Karen DeSalvo, this year, NASDOH celebrated its fifth anniversary of working together to tackle SDOH and health-related social needs as a pivotal element in the transformation toward value-based care. In celebration of this milestone, in May 2023, NASDOH released an [issue brief outlining the progress made in the federal policy landscape to address social needs and SDOH over the last five years](#). This document not only highlights key policy changes and trends over the past five years to address SDOH, but also articulates a forward-looking vision for the evolving federal SDOH policy landscape in the years to come. NASDOH also held a policy forum, which included panelists from Congressional offices, the Department of Health and Human Services (HHS), the Centers for Medicare & Medicaid Services (CMS), and the private sector, to discuss the existing policy landscape, opportunities for improving SDOH services, and NASDOH's role in advancing this critical work.

## WHITE HOUSE SDOH ACTION PLAN

In November 2023, the White House and HHS released a series of important SDOH related policy documents:

### U.S. Playbook to Address Social Determinants of Health

- This is a first-of-its-kind comprehensive strategy for addressing SDOH across federal agencies and sectors. The Playbook outlines strategic actions addressing SDOH and health-related social needs (HRSNs) at both community and federal levels grouped into three pillars:
  - Pillar 1: Expand Data Gathering and Sharing
  - Pillar 2: Support Flexible Funding for Social Needs
  - Pillar 3: Support Backbone Organizations

### Medicaid and Children’s Health Insurance Program (CHIP) Health-Related Social Needs (HRSN) Framework

- CMS’ framework provides guidance for more states, beyond the current seven with approved waivers, to structure programs using existing Medicaid and CHIP authorities to address housing and nutritional insecurity for enrollees.

### HHS’s Call to Action to Address Health Related Social Needs

- This call to action from HHS encourages cross-sector partnerships and outlines actions for various sectors: health care, social services, public and environmental health, government, and health information technology.

NASDOH has long advocated to make addressing SDOH a new national priority, including in our [2020 recommendations to the incoming Biden Administration](#). The Alliance is pleased to see many of our prior recommendations included in these documents, such as a focus on [supporting backbone organizations](#), a focus on [collecting and sharing SDOH data](#), Medicare coverage of SDOH services provided by [community health workers](#), and [additional guidance](#) on HRSN services that can be covered under Medicaid and CHIP. NASDOH looks forward to working with the Administration and within the Alliance on implementing these important recommendations.

## KEY ACTIVITIES IN 2023

Each year, NASDOH defines a work plan that establishes specific goals and deliverables, which align with our priority areas. In 2023, we proactively engaged with policymakers to influence the development and implementation of federal policies related to social needs and SDOH and responded 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 continued progress in 2024.

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

At the beginning of 2023, we set a goal to advance efforts to facilitate social needs being addressed as a part of high-quality, whole-person care. Throughout 2023, NASDOH convened to learn from members, outside organizations, and other entities about their work to address social needs in Medicaid, Medicare, and private insurance, and worked with the federal government to improve clarity and allowances to support addressing social needs.

Specifically, NASDOH submitted several letters to CMS related to the use of “in lieu of” services (ILOS), which are “medically appropriate, cost-effective alternatives to approved state plan services.”<sup>1</sup> Early in 2023, NASDOH sent a letter, thanking the agency for providing additional guidance to state Medicaid directors on addressing unmet HRSNs through the use of a service or setting provided to an enrollee ILOS covered under the state plan. And in June 2023, NASDOH submitted comments on the CMS Managed Care and Payment Proposed Rule, encouraging CMS to avoid placing restrictions or administrative burdens on the pathway that would discourage the use of ILOS to address SDOH. In this same comment letter, NASDOH requested CMS conduct a learning collaborative to provide clarity about how to appropriately count investments in infrastructure to coordinate social care in the numerator of the Medical Loss Ratio (MLR).

NASDOH also recognizes that quality measures are an important tool for advancing the use of social needs screenings and connecting people to services that support improved health outcomes. NASDOH submitted comments to CMS on proposed rules to include quality measures related to social needs screening and connections to social service providers. In an effort to improve the development and implementation of SDOH-related quality measures, NASDOH conducted a series of individual meetings with various stakeholders throughout September and October to gain broader perspectives on the requirements for SDOH screening across federal health care programs. Following this outreach, NASDOH held a multi-sector stakeholder convening in December 2023 to discuss consensus principles for advancing implementation of SDOH-related quality measures. This work will continue into 2024 as the Alliance continues to work with

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<sup>1</sup> <https://www.macpac.gov/publication/in-lieu-of-services-and-value-added-benefits-implications-for-managed-care-rate-setting/>

the broader community of stakeholders interested in using quality measures to advance social needs screening and intervention.

## **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 in key Congressional offices and offered the Alliance’s perspective on the importance of addressing SDOH to drive overall health and wellbeing. NASDOH hosted an in-person convening in May 2023 – with representatives from the Administration, Congress, private sector, and NASDOH – to examine the past, present, and future state of federal SDOH policy, with a particular lens on health care’s role in addressing SDOH. At this event, HHS staff and bipartisan congressional staff were also able to hear from NASDOH members on SDOH priorities and opportunities to advance shared goals.

NASDOH also hosted guest speakers during monthly alliance meetings to learn more about how the private sector is making place-based investments and developing funding arrangements and mechanisms to address SDOH. During one of NASDOH’s regular monthly alliance meetings, a guest speaker from the Rhode Island Department of Health’s [Health Equity Zone Initiative](#) – which uses braided funding to support place-based, community-led solutions to address SDOH – presented on the Initiative, how it got started, some of the challenges they faced, and accomplishments so far. NASDOH has been working with the Initiative to provide recommendations on ways they can create more sustainable funding. The White House SDOH Playbook lists the Rhode Island Department of Health’s [Health Equity Zones: A Toolkit for Building Healthy and Resilient Communities](#) as a resource for backbone organizations, and recommends that organizations combine funds by “braiding” (combining funds from multiple sources for multiple activities working to support a common goal) or “blending” (combining funds to finance a single activity without program-specific identities). In another monthly NASDOH alliance meeting, NASDOH member, Google Health, presented on the company’s recent health equity-related efforts as one example of private sector engagement in addressing equity and SDOH.

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 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, including additional opportunities for NASDOH members to engage in addressing SDOH. 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.

### **GOAL 3: ADVANCE EFFORTS TO ADDRESS UPSTREAM DRIVERS OF HEALTH**

In early 2023, NASDOH released proposed principles for SDOH research and a call to action. The principles are meant as a guide to create a strong evidence base that is rigorously evaluated so that SDOH innovations can be scaled more widely, and the most effective innovations can be prioritized. The principles are accompanied by a call to action with recommended steps stakeholders can take to advance SDOH research. The stakeholders NASDOH highlights include the Federal government, philanthropic organizations, states, and other health care stakeholders, underscoring that each have an important role to play in funding, studying, and disseminating research that will drive implementation of policy change. The principles were widely shared with relevant federal agencies and stakeholders and led to several conversations with Biden Administration officials on supporting SDOH research.

Following this outreach, leaders from the National Institutes of Health (NIH) attended a NASDOH alliance meeting to present on the [NIH ComPASS](#) (Community Partnerships to Advance Science for Society) program, which is a program that develops, shares, and evaluates community-led health equity structural interventions that leverage partnerships across multiple sectors to reduce health disparities.

NASDOH also included the 2023 research principles in its response to the NIH's Request for Information on Food is Medicine Research Opportunities.<sup>2</sup>

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<sup>2</sup> [https://grants.nih.gov/grants/guide/notice-files/NOT-OD-23-107.html#:~:text=This%20Request%20for%20Information%20\(RFI,diet%2Drelated%20diseases%20and%20disparities.](https://grants.nih.gov/grants/guide/notice-files/NOT-OD-23-107.html#:~:text=This%20Request%20for%20Information%20(RFI,diet%2Drelated%20diseases%20and%20disparities.)

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

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 also engaged with Congress on a number of issues:

### Administration:

- [Comment letter](#) on CMS' Calendar Year (CY) 2024 Physician Fee Schedule Proposed Rule;
- [Response](#) to the NIH's RFI on food is medicine research opportunities;
- [Comment letter](#) on the CMS Managed Care and Payment Proposed Rule;
- [Comment letter](#) on the CMS Medicaid Access Proposed Rule;
- [Comment letter](#) on CMS FY 2024 Inpatient Prospective Payment Systems for Acute Care
- [Comment letter](#) on CMS' Calendar Year 2024 Policy and Technical Changes to the Medicare; Advantage (MA) and Medicare Prescription Drug Benefit Programs Proposed Rule;
- [Letter](#) to CMS thanking the Agency for providing additional guidance to state Medicaid directors on addressing unmet HRSNs through the use of a service or setting provided to an enrollee ILOS covered under the state plan.

### Congress:

- [Response](#) to the House Ways and Means RFI on improving access to health care in rural and underserved areas;
- [Letter](#) of support of the reintroduced Black Maternal Health Omnibus Act;
- [Response](#) to the Senate Health, Education, Labor, and Pensions (HELP) Committee RFI on the health care workforce;
- [Response](#) to the Senate HELP Committee RFI on Pandemic and All Hazards Preparedness Act (PAHPA) reauthorization;
- [Response](#) to the House Energy and Commerce Committee RFI on PAHPA reauthorization;

## SIGNIFICANT FEDERAL SDOH POLICY ACTIVITY IN 2023

Over the course of 2023, 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 several SDOH-related reports from federal agencies including the White House’s 54-page “U.S. Playbook to Address Social Determinants of Health” that outlines an initial set of actions that federal agencies are undertaking to support health by addressing SDOH and HRSN. In correspondence to the Playbook, CMS/HHS also released a “Call to Action” and “Medicaid/CHIP HRSN Framework.”
- CMS’ release of a State Medicaid Director Letter on how states can use “in lieu of” services (ILOS) authority, including to address social drivers of health.
- The approval of several new Medicaid section 1115 waivers to states, including to Washington and New Jersey.
- CMS’ hosting of a “Health Equity Conference,” with panelists and participants from across government agencies and the public and private sectors. During the two-day conference, participants gained insights and a better understanding of research, best practices, and initiatives that are reducing disparities in CMS programs and increasing equity for underserved communities.
- CMS released a framework describing coverage of health-related social needs (HRSN) under Medicaid and CHIP. The document provides guidance for how HRSN are to be covered under Medicaid and CHIP, as well as the importance of covering these services. It further clarifies the differences between SDOH and HRSN for coverage determination.
- This year several bills were introduced to address maternal mortality, including legislation from Rep. Raphael Warnock’s (D-GA), the Kira Johnson Act, that is focused on addressing health disparities among Black pregnant and postpartum individuals and other underserved populations. Rep Kathy Manning (D-NC) also introduced the Advancing Maternal Health Equity Under Medicaid Act to provide a higher Federal matching rate for increased expenditures under Medicaid for maternal health care services.



## 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](http://NASDOH.org).

### Co-Founders

Dr. Karen DeSalvo  
Governor Michael O. Leavitt

#### STEERING COMMITTEE



#### GENERAL MEMBERS



#### STRATEGIC PARTNERS

