

TA TIDBITS

Rapid response to questions from the field

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Social Determinants of Health and Medicaid Managed Care

The TA Tidbit is an online publication of the TA Network highlighting resources developed or provided in response to requests from SAMHSA SOC grantees on various topics.

This edition focuses on social determinants of health and Medicaid managed care:

Healthy People, a 10-year framework developed by the Centers for Disease Control and Prevention for tracking and reporting on the nation's health goals and objectives added social determinants of health (SDoH) to its 2020 target year goals. Healthy People 2020 defines SDoH as "conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks."¹ There are 33 measures organized into five domains:

1. Economic stability;
2. Education;
3. Health and healthcare;
4. Neighborhood and built environment; and
5. Social and community context.¹

Clinicians, policymakers, and state agencies, including Medicaid, are increasingly focused on SDoH because of the powerful influence they exert on health outcomes and overall delivery system costs, such as:

- Children and adolescents with behavioral health disorders are overrepresented in the juvenile justice system.²
- Adverse childhood experiences (ACEs) including abuse, neglect, and household dysfunction "help us to predict behavioral health problems in childhood and adulthood, worsening mental health, adverse health-related behaviors, chronic disease burden, and premature mortality."³
- These effects are likely intergenerational; children of parents reporting more ACEs bear higher burden of behavioral health problems and conditions, including attention-deficit/hyperactivity disorder and emotional disturbance diagnoses.³
- ACEs were associated with poor early childhood mental health and chronic medical conditions, and, among children age 3–5, social development.⁴

Historically, state Medicaid programs have not accounted for SDoH in setting payments for Medicaid managed care plans. However, in April 2016 the Centers for Medicare and Medicaid Services finalized updated regulations for Medicaid managed care operations, including promoting practices beyond traditional clinical care.⁵ Since then, a few states have moved to account for SDoH in payment and performance improvement, and to align

reimbursement with population risk factors:

- Massachusetts includes SDoH in its 1115 waiver, supported by the Delivery System Reform Improvement Program (DSRIP).^{6, 7} The state worked with the University of Massachusetts to include serious mental illness, substance use disorder, age, sex, unstable housing, disability, and “neighborhood stress” based upon residence in a census block group in rate setting for its managed care and accountable care organizations.^{8, 9}
- Similarly, New York is using DSRIP to include SDoH in its Medicaid redesign to “financially reward rather than penalize providers and plans that deliver high value care through emphasizing prevention, coordination, and optimal patient outcomes including interventions that address underlying social determinants of health.”¹⁰ Organizations ready for full risk, or nearly full risk (Level 2) and global capitation (Level 3) will be required to implement at least one SDoH intervention in 2019 such as funding community health workers, providing functional family or multisystemic therapy to reduce involvement with the criminal justice involvement, supporting Nurse Family Partnership programs, Parent-Child Interaction Therapy, provider training on Culturally and Linguistically Appropriate Services, etc.^{11, 12, 13}

See below for additional resources for SDoH.

 **SAMHSA & Federal Resources**

Behavioral Health Equity**Tools for Putting Social Determinants of Health into Action****Healthy People 2020 Tools and Resources**

 **General Resources**

Enabling Sustainable Investment in Social Interventions: A Review of Medicaid Managed Care Rate-Setting Tools**EveryONE Project****Screening Tools and Resources to Advance Health Equity****Expanding the Bounds of Care Delivery: Integrating Mental, Social, and Physical Health****Public Health Field Guide: How to Engage Payers in Addressing the Social Determinants of Health****Integrating Health Care and Social Services: Moving from Concept to Practice****Medicaid and Social Determinants of Health: Adjusting Payment and Measuring Health Outcomes****Beyond Health Care: The Role of Social Determinants in Promoting Health and Health Equity****Why Medicaid Managed Care Is Looking Outside the Traditional Coverage**

Leveraging Medicaid to Address Social Determinants and Improve Child and Population Health

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- ¹² New York Department of Health. (n.d.). The Social Determinants of Health Intervention Menu - Instructions for Use. Retrieved from https://www.health.ny.gov/health_care/medicaid/redesign/dsrip/vbp_library/docs/sdh_intervention_menu.xlsx
- ¹³ U.S. Department of Health and Human Services, Office of Minority Health. (2001). National Standards for Culturally and Linguistically Appropriate Services in Health Care: Final Report (Rep.). Washington, D.C. Retrieved from <https://minorityhealth.hhs.gov/assets/pdf/checked/finalreport.pdf>

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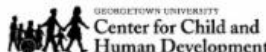
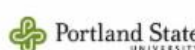


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