

December 4, 2020

By electronic submission

The Honorable Donald Rucker, M.D.
National Coordinator for Health Information Technology
U.S. Department of Health and Human Services
330 C Street SW, 7th Floor
Washington, D.C. 20201

Re: The Gravity Project's Submission to Include Social Determinants of Health in the U.S. Core Data for Interoperability (USCDI), Version 2, for Better Care and Better Health Nationwide

Dear National Coordinator Rucker:

This letter is written in support of The Gravity Project's submission to the Office of the National Coordinator to advocate for the inclusion of Social Determinants of Health (SDOH) in the U.S. Core Data for Interoperability. As one of the nation's largest integrated healthcare delivery systems, Highmark Health believes this integration is critical to improve the health and well-being of those we serve.

Public health professionals have long known that social and environmental determinants of health explain most of a person's and population's health status. The health care delivery sector is now understanding that the delivery of traditional health care accounts for only 20% of one's health. The COVID-19 pandemic has highlighted this reality daily across the nation. The Gravity Project's submissions would add critical domains such as food insecurity, housing instability, transportation insecurity, social isolation, and stress to the USCDI, integrated with core clinical activities such as assessments, diagnoses, interventions, and outcomes.

The need for inclusion of SDOH as a new data class in USCDI is a requisite to capturing social risk and supports a focus on and prioritization of use cases with a high impact on the triple aim, the widely accepted policy objective of HHS that refers to improving the experience of care, improving the health of populations, and reducing per capita costs of health care. The fact that SDOH accounts for 80 percent of health status at a population level *and* that there is no consistent method to document and communicate these factors during a health care encounter emphasizes the urgency of a national standard approach across the health care system. The implementation of these standards is necessary to drive reductions in missed appointments, cost savings from preventable health events, culturally competent care, increased care plan compliance, reduced administrative burden, promoting effective investment in community health programs, and leveraging critical data to improve patient outcomes.

Health care's transition from a fee-for-service model to value-based care adds an additional imperative for SDOH, since these elements will become increasingly necessary to establish appropriate and equitable reimbursement of health care service providers and advance reimbursement models for community based organizations. Without standards and code sets, health plans will be challenged to evolve their value based reimbursement programs to include social risk.

Please accept this recommendation on behalf of Highmark, for The Gravity Project's submission to the USCDI. Should you have any questions or need additional insight please don't hesitate to contact me at (412) 721-6800 or via email at Deborah.donovan@highmarkhealth.org.

Sincerely,

Deborah Donovan

Deborah Donovan
VP SDOH Strategy and Operations

cc: Evelyn Gallego, CEO EMI Advisors