Moving Social Determinants of Health into Action & Health Equity

US Core Data for Interoperability Task Force | July 27, 2021
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Topics

• USCDI version 2
• Gravity Project’s 2021-2022 Roadmap
• USCDI version 3
• Observations and Recommendations
USCDI v2: Appreciations

- Thank you! USCDI Task Force for your leadership, hard work, commitment!
- Thank you! ONC, National Coordinator Micky Tripathi, the Health IT Advisory Committee.
- Thank you! Gravity Project 2,000+ Community Members—patient/consumer advocates, clinical and community service providers, health IT vendors, payers, researchers, governments.
Why Addressing SDOH is Important

There is growing awareness that unmet social needs negatively impact health outcomes.

- **Food insecurity** correlates to higher levels of diabetes, hypertension, and heart failure.
- **Housing instability** factors into lower treatment adherence.
- **Transportation barriers** result in missed appointments, delayed care, and lower medication compliance.

Addressing SDOH is a primary approach to achieving health equity and reducing health disparities.

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1. [https://www.cdc.gov/nchhstp/socialdeterminants/faq.html](https://www.cdc.gov/nchhstp/socialdeterminants/faq.html)
USCDI v2: SDOH Data Elements

- Inclusion of SDOH data elements in USCDI propels nationwide, interoperable health information exchange across the health and human services ecosystems
- SDOH data elements—added into existing data classes—become part of the clinical workflow and not treated as distinct:
  - Assessment and Plan of Treatment: SDOH Assessment
  - Problems: SDOH Problems/Health Concerns
  - Procedures: SDOH Interventions
  - Goals: SDOH Goals
- Structure facilitates the ongoing addition of new value sets and new domains (e.g., food deserts) as they are developed through the Gravity standards development process.
USCDI v2: Value-Driven Connections between New Data Elements

• Combination with other USCDI data elements increases benefit

• NEW Data Element: Care Team Members
  • Inclusion of all care team members including family members and community-based providers supports more holistic and person-centered care planning.

• NEW Data Element: Sexual Orientation and Gender Identity
  • Better health care and health equity
  • May further inform and improve care for particular social risk factors including intimate partner violence where there are differences by SO and GI
Gravity Project 2021-2022 Roadmap
Gravity Overview: 2021 Roadmap

**Terminology**
- Inadequate Housing
- Transportation Insecurity
- Financial Insecurity
- Unemployment
- Education
- Veterans
- Social Isolation
- Stress
- Elder Abuse
- Intimate Partner Violence (IPV)
- Material Hardship

**Technical**
- Gravity FHIR IG Ballot
- IG Ballot Reconciliation
- Reference Implementation Development
- Final updates/IG Ready for Publication
- Update User Stories
- Reference Implementation Update
- CMS Connectathon
- HL7 FHIR IG STU Published
- HL7 FHIR IG STU Updates
- SDOH FHIR IG Pilots
- WE ARE HERE

**Pilots**
- LOINC Code Submissions (MAR/OCT)
- SNOMED Code Submissions (MAY/DEC)
- ICD-10 Code Submissions (JUN/DEC)
- Goals/Interventions
SDOH Data Elements & SDOH Clinical Care IG in Action

1. Screen for social risk and define health concern / problem (diagnosis).
2. Establish patient and provider defined goals to address social need.
3. Plan and track related interventions to completion.
4. Measure outcomes.
5. Aggregate data for use and reporting (e.g., population health management, quality reporting, risk adjustment / risk stratification).
6. Record patient consent as needed.

http://build.fhir.org/ig/HL7/fhir-sdoh-clinicalcare/
USCDI v3
Gravity Project Vision: USCDI v3 and Beyond

**FHIR Implementation Guides / Use Cases**
- SDOH Clinical Care IG
- Social Care IG
- SDOH Quality Measurement IG
- Population Health IG
- SDOH Public Health IG
- Social Directory IG
- SDOH Research IG

**Data Elements**
- Assessments
- Problems/Health concerns
- Goals
- Interventions
- Outcomes
- Consent
- Data Aggregation
- Billing
- Health Insurance

**Domains**
- Food insecurity
- Housing instability
- Homelessness
- Inadequate housing
- Transportation insecurity
- Financial insecurity
- Material hardship
- Employment status
- Educational attainment
- Veteran status
- Stress (general)
- Social connection
- Intimate partner violence
- Elder abuse
- Food deserts
- Neighborhood safety
- Health literacy
- Minority and Relationship stress
- Racism/discrimination/bias (beyond mid-2022)

**Code Systems / Value Sets**
- **LOINC**
  - Assessments
  - Goals
  - Outcomes (e.g., quality measures)
- **SNOMED-CT**
  - Problems/Health concerns (clinical)
  - Goals
  - Interventions (clinical)
- **ICD-10-CM**
  - Problems/Health concerns (billing)
- **CPT/HCPCS**
  - Interventions (billing, where available)

*List not exhaustive for 2022 and beyond. Domains are grounded in then Institute of Medicine’s “Capturing Social and Behavioral Domains in Electronic Health Records” (2014).
USCDI v2 & v3: Observations & Recommendations
USCDI v2 Opportunities

- Informs health industry what SDOH data elements should be collected and what standards should be used to represent and exchange this data electronically
- Facilitates SDOH data integration at a national scale to meet growing COVID-19 response
- Provides glide path for standards development for technical capacity into real-world implementation
- Creates framework for providers and payers to scale FHIR APIs into social care and health equity focused initiatives
USCDI v2 Challenges

• Learning curve for social care data integration and use
• Limited use of CEHRT and FHIR based solutions (industry is just ramping up to meet CMS rule requirements)
• Ongoing development and publication of SDOH value sets—Food Insecurity and Housing most complete to-date
• SDOH Clinical Care IG just published by HL7—needs real-world testing, implementation, and iteration beyond FHIR Connectathons
• Proliferation of Community Referral Platforms—not fully integrated into existing health ecosystem or regulated as CEHRT
• Ensuring equitable use of SDOH data for good, not harm, discrimination, or profiling. To this end, the Gravity Project has developed data principles for equitable use
USCDI v3 Recommendations for Task Force

- Consider data elements individually and in combinations. They are building blocks for multiple purposes and use cases.
  - Expanding Care Team Members integrates members helping with SDOH.
  - Linking functional and cognitive status data elements with SDOH data elements will identify and help reduce health disparities in vulnerable populations (e.g., frail adults, elderly, and disabled).

- Consider need for multi-directional electronic information exchange for true interoperability, not just referrals
  - Patients, family caregivers, community-based providers may be primary source of SDOH data, especially outcomes and patient-reported outcomes for value-based care.
  - Assessments initiated by community or social service organizations
USCDI v3 Recommendations for Task Force

• Explore how elements support person-centered and advanced care planning with patients, providers, and other care team members
  • Significant benefit for transitions of care, care coordination, health equity, value-based care, and prevention.

• Consider how elements advance other core use cases beyond clinical care (or upstream and downstream use of data):
  • E.g., COVID-19 and pandemic response, population health, public health, digital quality measurement, risk adjustment.
Questions?
Join the Gravity Project!

Learn More
https://confluence.hl7.org/display/GRAV/Join+the+Gravity+Project

- Public Collaborative meets weekly on Wed
- Workgroup meets bi-weekly on Thursdays’ 4:00 to 5:30 pm ET
- SDOH FHIR IG Workgroup s. 3:00 to 4:00 pm ET

• Give us feedback on the Data Principles:
  https://confluence.hl7.org/display/GRAV/Gravity+Data+Principles

• Submit SDOH domain data elements (especially for Interventions):
  https://confluence.hl7.org/display/GRAV/Data+Element+Submission

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Use Social Media handles to share or tag us to relevant information

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https://www.linkedin.com/company/gravity-project

Help us find new sponsors and partners
Partner with us on development of blogs, manuscripts, dissemination materials
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