What can the health care sector do about patients’ social conditions?

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Associate Professor, Department of Family Medicine, UCSF

SIRENetwork.ucsf.edu
Enthusiasm around social and medical care integration is growing fast.
SDH on the health care innovation curve

★ Peak of Inflated Expectations

Plateau of Productivity

Slope of Enlightenment

Trough of Disillusionment

Time
INTEGRATING SOCIAL CARE INTO THE DELIVERY OF HEALTH CARE

MOVING UPSTREAM TO IMPROVE THE NATION’S HEALTH
NASEM Committee

**Patient-focused strategies**
- **Awareness**
  - Identify social risk factors
- **Adjustment**
  - Accommodate care to social risk
- **Assistance**
  - Intervene on social risk factors

**Community-focused strategies**
- **Alignment**
  - Align existing resources
- **Advocacy**
  - Develop new resources
NASEM Committee

Patient-focused strategies

- Awareness
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# Systematic data collection

## Social & economic risk screening tool

<table>
<thead>
<tr>
<th></th>
<th>Recommended Social and Behavioral Domains and Measures for Electronic Health Records</th>
<th>PRAPARE: Protocol for Responding to and Assessing Patient Assets, Risks, and Experiences</th>
<th>CMS Accountable Health Communities Screening Tool</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total # of questions</strong></td>
<td>24</td>
<td>21</td>
<td>10</td>
</tr>
<tr>
<td>Housing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clothing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Utilities (phone, gas, electric)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medicine/health care</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child care</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transportation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neighborhood safety</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interpersonal violence/safety</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical Activity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social connections/isolation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stress</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Social risk screening tools comparison table: [https://sirenetwork.ucsf.edu/tools-resources/screening-tools](https://sirenetwork.ucsf.edu/tools-resources/screening-tools)
Patient/caregiver acceptability of screening

Prevalence of screening depends on how/who is asked

<table>
<thead>
<tr>
<th></th>
<th>Any social risk (eg. food, housing, utilities, transportation)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient surveys</td>
<td>22%</td>
</tr>
<tr>
<td>Admin leaders</td>
<td>92%</td>
</tr>
</tbody>
</table>

Technology can facilitate awareness activities

Social Risk Screening incorporated into History/Intake

Care Team members track and update Social Determinants in History questionnaires

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Payment can facilitate awareness activities
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Adjustment strategies

Adjust care to social context, e.g.:
- Access
- Diagnostics
- Treatment

Awareness of social factors → Intervention to lessen impact of social risk on medical care adherence → Improved health and wellbeing
**Adjustment strategies: Diabetes case**

<table>
<thead>
<tr>
<th>Clinical decisions influenced by social risk data</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target level of blood sugar control</td>
<td>Increase goal HgA1c to avoid hypoglycemia risk in patient w/ limited food or fridge access</td>
</tr>
<tr>
<td>Medication management</td>
<td>Change type of insulin to reduce medication cost; change to higher dose with pill splitter</td>
</tr>
<tr>
<td>Making recommendations</td>
<td>Change physical activity recommendations based on safety</td>
</tr>
<tr>
<td>Making referrals</td>
<td>Schedule to same day appointments or telehealth visit to improve transportation access</td>
</tr>
</tbody>
</table>

Table adapted from Senteio, et al. JAMIA 2019
Technology can facilitate adjustment activities

<table>
<thead>
<tr>
<th>Drug</th>
<th>Out-of-pocket price range for Medicare Part D enrollees</th>
<th>Low price</th>
<th>Average price</th>
<th>High price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Warfarin</td>
<td>$0 - $3</td>
<td>$0</td>
<td>$3</td>
<td>$3</td>
</tr>
<tr>
<td>Dabigatran</td>
<td>$22 - $436</td>
<td>$22</td>
<td>$109</td>
<td>$436</td>
</tr>
<tr>
<td>Apixaban</td>
<td>$22 - $448</td>
<td>$22</td>
<td>$112</td>
<td>$448</td>
</tr>
<tr>
<td>Rivaroxaban</td>
<td>$23 - $452</td>
<td>$23</td>
<td>$113</td>
<td>$452</td>
</tr>
</tbody>
</table>

*Low price* represents a 5% coinsurance payment in the catastrophic coverage phase of benefit.

*Average price* represents a 25% coinsurance payment in the initial and coverage gap phases of benefit.

*High price* represents the drug list price paid fully under a deductible or paying without insurance.

Example of an Alternative Design for Monthly Out-of-pocket Cost Information for Medicare Part D Covered Medications
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Assistance strategies

Change social context, e.g.:
- Food
- Jobs
- Housing

Awareness of social factors \rightarrow \text{Intervention to improve social conditions} \rightarrow \text{Improved health and wellbeing}
Technology can facilitate assistance strategies

Offerings
- Resource and referral data
- Data exchange
- Community-based network
- Predictive analytics
Social care practices, ethics, and equity

<table>
<thead>
<tr>
<th>Social care practice example</th>
<th>Related medical ethics questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Screening for food security at every clinic visit (Awareness)</td>
<td>Could screening exacerbate perceived or actual discrimination?</td>
</tr>
<tr>
<td>Changing medications based on affordability (Adjustment)</td>
<td>Are all treatments equally efficacious? Are families aware of benefits and drawbacks of different treatment options and giving opportunity to elect less expensive medications?</td>
</tr>
</tbody>
</table>
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Example: Food security

<table>
<thead>
<tr>
<th>Awareness</th>
<th>Adjustment (Social Risk-Informed Care)</th>
<th>Assistance (Social Risk-Targeted Care)</th>
<th>Alignment and Investment</th>
<th>Advocacy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ask patients about food security</td>
<td>Adjust insulin doses to avoid hypoglycemia when food benefits get low</td>
<td>Connect patients with food assistance programs</td>
<td>Co-locate food programs on health care campuses; source locally grown food for cafeteria; share data about food security w/ CBO</td>
<td>Advocate for larger food benefit packages</td>
</tr>
</tbody>
</table>
Social Interventions Research & Evaluation Network

SIREN’s mission is to improve health and health equity by catalyzing and disseminating high quality research that advances health care sector strategies to improve social conditions.

Catalyzing high quality research
Collecting & disseminating research
Consulting on research & analytics

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