

# **Social Determinants of Health: Screening Tools Update**

### Covering: HEDIS Social Needs Survey (SNS-E) Oregon Quality Incentive Metric (QIM) SDOH Metric D-SNP Health Risk Assessment Questionnaire

Currently, the HEDIS SNS-E, Oregon QIM SDOH Metric, and D-SNP Health Risk Assessment Questionnaire all require that specific tools be used to screen for three SDoH: food, housing, and transportation.

To help providers choose from among the many screening tools available, and to assist with any Electronic Health Record (EHR) builds, we've identified four common tools (below) approved by the National Committee for Quality Assurance (NCQA) and the Centers for Medicare & Medicaid Services (CMS) that include questions covering all three required domains. We've also provided additional information on each tool in this document, along with a list of other approved tools.

## Common screening tools with required questions for Oregon Medicaid SDoH Metric QIM, HEDIS SNS-E, and D-SNP Health Risk Assessment Questionnaire

Adult Screening Tools <sup>2</sup>	Food Insecurity	Housing Insecurity	Transportation
American Academy of Family Physicians (AAFP)	✓	✓	✓
Accountable Health Communities (AHC) <sup>3</sup>	✓	<b>~</b>	✓
Health Leads	<b>~</b>	<b>~</b>	<ul> <li></li> </ul>
Protocol for Responding to and Assessing Patients' Assets, Risks, and Experiences (PRAPARE) <sup>3</sup>	<b>~</b>	✓	~

<sup>1</sup> Health plans typically conduct the screening for D-SNP.

<sup>2</sup>Adult screening tools may be used in pediatric populations.

<sup>3</sup> Tool is available in Connect Oregon.

Continued >

Social Determinants of Health (SDoH), such as food, housing, and transportation insecurity, significantly affect health outcomes. Screening for them and providing referrals or assistance to address positive findings is becoming standard healthcare practice.

Reflecting this, metric stewards, including the NCOA and state Medicaid agencies, now have metrics designed to help address SDoH. Additionally, SDoH screening is required by CMS for vulnerable populations who qualify for Medicare Dual Special Needs Programs (D-SNP<sup>1</sup>).



## **Common screening tools: SDoH questions**

Approved		•			
Screening Tools	Food Insecurity	Housing Insecurity <sup>1</sup>	Transportation		
American Academy of Family Physicians (AAFP)	<ul> <li>Within the past 12 months, you worried that your food would run out before you got money to buy more.</li> <li>Often true</li> <li>Sometimes true</li> <li>Never true</li> <li>Within the past 12 months, the food you bought just didn't last and you didn't have money to get more.</li> <li>Often true</li> <li>Sometimes true</li> <li>Sometimes true</li> <li>Never true</li> </ul>	<ul> <li>What is your housing situation today?</li> <li>I do not have housing (I am staying with others, in a hotel, in a shelter, living outside on the street, on a beach, in a car, abandoned building, bus or train station, or in a park)</li> <li>I have housing today, but I am worried about losing housing in the future</li> <li>I have housing</li> </ul>	In the past 12 months, has lack of transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living? (Check all that apply) Yes, it has kept me from medical appointments or getting medications Yes, it has kept me from non-medical meetings, appointments, work, or getting things that I need No		
Accountable Health Communities (AHC)	<ul> <li>Within the past 12 months, you worried that your food would run out before you got money to buy more.</li> <li>Often true</li> <li>Sometimes true</li> <li>Never true</li> <li>Within the past 12 months, the food you bought just didn't last and you didn't have money to get more.</li> <li>Often true</li> <li>Sometimes true</li> <li>Never true</li> </ul>	<ul> <li>What is your living situation today?<sup>2</sup></li> <li>I have a steady place to live</li> <li>I have a place to live today, but I am worried about losing it in the future</li> <li>I do not have a steady place to live (I am temporarily staying with others, in a hotel, in a shelter, living outside on the street, on a beach, in a car, abandoned building, bus or train station, or in a park)</li> </ul>	In the past 12 months, has lack of reliable transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living? Yes No		
Health Leads	In the last 12 months? did you ever eat less than you felt you should because there wasn't enough money for food? Y/N	Are you worried that in the next 2 months, you may not have stable housing? Y/N	In the last 12 months, have you ever had to go without health care because you didn't have a way to get there? Y/N		
Protocol for Responding to and Assessing Patients' Assets, Risks, and Experiences (PRAPARE)	In the past year, have you or any family members you live with been unable to get any of the following when it was really needed? Check all that apply. Food Clothing Utilities Child Care Medicine or Any Health Care (Medical, Dental, Mental Health, Vision) Phone Other (please write) I choose not to answer this question	<ul> <li>What is your housing situation today?</li> <li>I have housing</li> <li>I do not have housing (staying with others, in a hotel, in a shelter, living outside on the street, on a beach, in a car, or in a park)</li> <li>I choose not to answer this question</li> </ul>	<ul> <li>Has lack of transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living? Check all that apply.</li> <li>Yes, it has kept me from my medical appointments</li> <li>Or</li> <li>Yes, it has getting kept me from non-medical meetings, appointments, work, or from getting things that I need</li> <li>No</li> <li>I choose not to answer this question</li> </ul>		

<sup>1</sup> Housing Inadequacy not included. <sup>2</sup>Time frames can be altered as needed.

## **Other approved tools**

#### **HEDIS SNS-E Metric (listed by question)**

#### **Food Insecurity Instruments**

- Hunger Vital Sign<sup>1</sup> (HVS)
- Safe Environment for Every Kid • (SEEK)®
- US Adult/Child/Household Food Security Surveys (multiple surveys)
- We Care (BMC Thrive)
- WellRx Questionnaire

#### Housing Instability and Homelessness Instruments

- Children's Health Watch Housing Stability Vital Signs<sup>™</sup>
- We Care (BMC Thrive) ٠
- WellRx Questionnaire

#### Transportation Insecurity Instruments

- CMS OASIS (various tools)
- Comprehensive Universal ٠ Behavior Screen (CUBS)
- Inpatient Rehabilitation Facility Patient Assessment Instrument (IRF-PAI)
- PROMIS
- WellRx Ouestionnaire

### Codes by common tool for screening, positive finding, and intervention

#### **Screening and Positive Finding Codes**

	Food Insecurity LOINC Codes		Housing Instability/ Homelessness LOINC Codes <sup>1</sup>		Transportation LOINC Codes	
Common Approved Screening Tools	Screening	Positive Finding	Screening	Positive Finding	Screening	Positive Finding
American Academy of Family Physicians (AAFP)	88122-7 88123-5	LA28397-0 LA6729-3	99550-6 71802-3 (short)	LA31994-9 LA31995-6 <sup>2</sup>	99594-4	
Accountable Health Communities (AHC)			71802-3		93030-5	LA33-63
Health Leads	95251-5	LA33-6	99550-6	LA33-6	99553-0	
Protocol for Responding to and Assessing Patients' Assets, Risks, and Experiences (PRAPARE)	93031-3 L	LA30125-1	93033-9	LA33-6	93030-5	LA30133-5 LA30134-3
			71802-3	LA30190-5		

#### **Intervention Codes**

SDoH Intervention (Procedure) Codes	CPT Codes	Select SNOMED Codes				
Food Insecurity	96156 96160 96161 97802 97803 97804	1759002 61310001 103699006 308440001	385767005 710824005 710925007 711069006	713109004 1002223009 1002224003 1002225002	1004109000 1004110005 1148446004 1162436000 1230338004	
Housing Insecurity/Homelessness <sup>3</sup>	96156 96160 96161	308440001 710824005 711069006	1148446004 1148447008 1148812007	1148814008 1148817001 1148818006	1156869006 1162436000 1162437009 1230338004	
Transportation	96156 96160 96161	308440001 710824005 711069006	1148446004 1162436000 1230338004			

<sup>1</sup> Housing Inadequacy not included.

<sup>2</sup> AAFP Short Form Only — Long Form Positive Finding Code LA33-6.
 <sup>3</sup> AAFP Long Form Only — Short Form Positive Finding Codes LA33093-8, LA30134-3.

### Resources

## Common screening tools with required questions for Oregon Medicaid SDoH Metric QIM, HEDIS SNS-E, and D-SNP Health Risk Assessment Questionnaire

American Academy of Family Physicians (AAFP) AAFP.org/dam/AAFP/documents/patient\_care/everyone\_project/hops19-physician-form-sdoh.pdf

Accountable Health Communities (AHC) Innovation.cms.gov/files/worksheets/ahcm-screeningtool.pdf

Health Leads HealthLeadsUSA.org/resources/the-health-leads-screening-toolkit

Protocol for Responding to and Assessing Patients' Assets, Risks, and Experiences (PRAPARE) <u>Prapare.org/the-prapare-screening-tool</u>

#### **Other approved tools**

Hunger Vital Sign ChildrensHealthWatch.org/public-policy/hunger-vital-sign

Safe Environment for Every Kid (SEEK) SEEKWellbeing.org

US Adult/Child/Household Food Security Surveys ERS.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/survey-tools

We Care (BMC Thrive) SireNetwork.ucsf.edu/sites/default/files/2021-02/BMC-THRIVE.pdf

WellRx Questionnaire SireNetwork.ucsf.edu/tools-resources/resources/wellrx-toolkit

Housing Stability Vital Sign ZeroToThree.org/resources/3199-promoting-caregiver-and-child-health-through-housingstability-screening-in-clinical-settings

Comprehensive Universal Behavior Screen (CUBS) MDLogix.com/for-healthcare-providers

Inpatient Rehabilitation Facility Patient Assessment Instrument (IRF-PAI) CMS.gov/medicare/quality/inpatient-rehabilitation-facility/irf-pai-and-irf-qrp-manual

PROMIS HealthMeasures.net/explore-measurement-systems/promis

OHA-approved Social Needs Screening Tools Oregon.gov/oha/HPA/dsi-tc/Pages/Social-Needs-Screening-Tools.aspx

