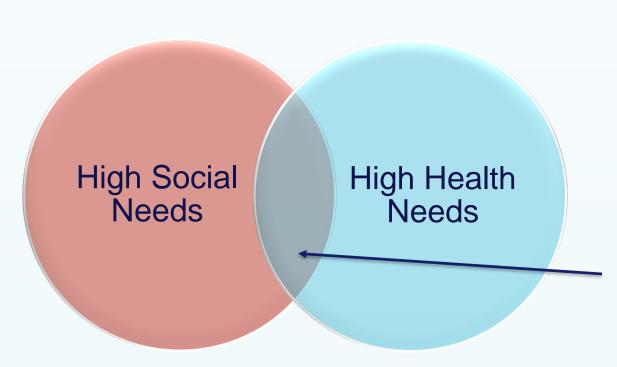
Building Strong Community Voices to Address Social Determinants through Medicaid:

Opportunities and Risks

Why Focus on Medicaid?

- Largest source of health coverage in the U.S., covering over 75 million low-income Americans
- Children account for more than four in ten of all Medicaid enrollees
- Older adults and people with disabilities account for about one in four enrollees



Opportunity to improve health outcomes and reduce cost by addressing social determinants

- Medicaid beneficiaries are low-income by definition and are likely to struggle with basic needs such as food, transportation or shelter
 - About half of Medicaid beneficiaries have an unmet social need¹
- Medicaid programs have flexibility to implement strategies to address social needs

Medicaid Policy Levers to Address SDOH

- Managed care: States are increasingly moving their Medicaid beneficiaries to managed care organizations (MCOs).
 Because MCOs receive a set per member per month payment for these services, addressing SDOH could lower their costs while improving health outcomes.
- Waivers: States can waive certain
 Medicaid program requirements in order to
 expand what qualifies as care, allowing for
 the funding of social needs interventions.
- Demonstration projects: States can receive federal funding to test innovative models of delivery systems, services, and supports that better address SDOH.

Interventions for Addressing Social Determinants Via Medicaid

- Require screening for social needs as part of clinical care delivery
- Embed SDOH into care
- Connect people with needed social services
- Sustainably fund community-based organizations that provide social needs interventions
- Evaluate the effectiveness of SDOH interventions

States Utilizing Medicaid to Address
Social Determinants of Health

Oregon Medicaid: Investing in Community-Based Services



- Starting in 2020, Oregon's CCO 2.0 Pilot Project funds community-based services for Medicaid recipients
- Coordinated care organizations (CCOs) will work with community organizations to provide services like housing assistance or transportation support
- Requires CCOs to invest a portion of their reserves on SDOH and health equity community needs
- Includes community and tribal advisory councils to allow for strong consumer engagement
- Specific focus on housing needs

North Carolina Medicaid: Health Opportunity Pilot Zones



- Starting in late 2020, the state will launch pilots in two to four geographic areas to test evidencebased social needs interventions
- Health plans will collaborate with human services organizations to provide non-medical social services
- In order to participate, participants must have at least one physical or behavioral health risk factor, at least one social risk factor, and live in the geographic zone of a pilot
- Focuses on housing, transportation, food security, toxic stress, and interpersonal violence social determinants

Challenges to Addressing Social Determinants via Medicaid

Threats to Medicaid Broadly

- Attempts to cut and cap the program, such as through block grants and per capita caps
- Reduced access to benefits like nonemergency medical transportation
- Work requirements that cause people to lose coverage

Challenges in bridging health care with social services

- Inadequate/non-existent social services infrastructure
- Over-medicalizing social services
- Distracting from delivering high-quality medical care
- Lack of adequate, sustainable financing for interventions
- Fragmentation of resources

State Partners Addressing Social Needs

Ensuring High-Quality Non-Emergency Transportation in Colorado

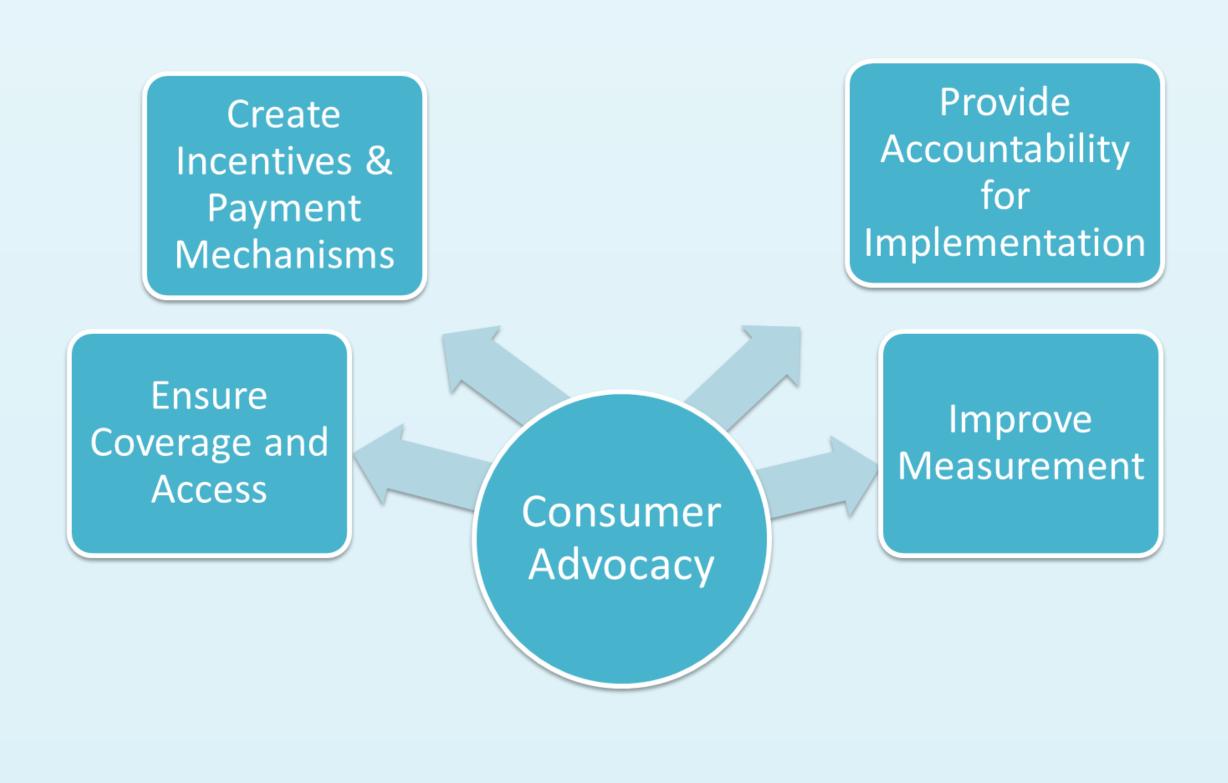
Together Colorado and the Colorado Center for Health Progress are working to ensure all Medicaid recipients qualifying for Non-Emergency Medical Transportation (NEMT) will have access to safe, accessible and timely transportation service to and from their appointments by trained professionals.

To ensure that this system is functioning to meet the needs of the community, they are constituting an independent community advisory board to oversee the program. They are also employing community organizing tactics, including a new digital organizing program, to expand and activate the current base of grassroots community leaders who are affected by this issue.





Building Strong Community Voices to Address Social Determinants



1. Thompson, T., Mcqueen, A., Croston, M., Luke, A., Caito, N., Quinn, K., ... Kreuter, M. W. (2019). Social Needs and Health-Related Outcomes Among Medicaid Beneficiaries. Health Education & Behavior, 46(3), 436–444. doi: 10.1177/1090198118822724

Alleviating Food Insecurity in Alabama

At a moment of transformation in Alabama Medicaid – from a statewide fee-for-service system of primary care to regionally based nonprofit coordinated care with quality incentives – Alabama Arise is working to create a model of collaboration between one of the seven newlyformed regional networks and a major food bank in that region for the purpose of improving Medicaid's effectiveness in addressing food security and nutrition. Alabama Arise is engaging consumers through community meetings. Each Alabama Coordinated Health Network (ACHN) will serve approximately 110,000 Medicaid beneficiaries, primarily children and pregnant mothers.

