DATA for BETTER HEALTH™

ISSUE BRIEF

Better health and improved health equity are impacted by factors beyond the care a person receives from their provider. Those factors, including food insecurity, housing status, and transportation needs, are often referred to as the social determinants of health (SDOH) and significantly affect quality of life, health, and healthcare outcomes.

When SDOH data is appropriately collected, used, and securely shared, the entire healthcare team can gain insight into various elements that make up a person's medical and non-medical story, allowing them to collaborate on improving an individual's overall health and wellbeing.

AHIMA® launched Data for Better Health™ to increase awareness of how collecting, using, and sharing SDOH data can improve individual and community health and healthcare outcomes. Through this effort, AHIMA will provide tools, resources, and education to health information (HI) professionals, thought leaders, policymakers, and the public that supports a better understanding of the importance of SDOH data and how it can be used to improve peoples' health and quality of life.

HI Professionals and SDOH Data

HI professionals work at the intersection of healthcare, technology, and business. They ensure that sensitive health stories remain accurate, accessible, protected, and complete – at all times.

When it comes to SDOH data, HI professionals play a pivotal role and should be involved in all phases of collecting, sharing, and using SDOH data. Some examples of the roles HI professionals play include:

- Developing efficient, standardized, and evidence-based ways to collect SDOH data.
- Ensuring the accuracy, privacy, confidentiality, and security of SDOH data.

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- Identifying ways to use SDOH data to improve health and healthcare outcomes – for example, building alerts for providers in the clinical workflow when a screening indicates a social need or opportunities to send educational materials through a patient portal.

- Analyzing SDOH data at the patient and population level.

- Tracking services extended to patients to monitor regulatory compliance.

- Evaluating and documenting metrics related to SDOH data.

- Capturing SDOH data using ICD-10-CM Z Codes from clinician documentation to support such activities as care coordination and referrals, claims processing, risk adjustment, and quality measurement.

> "I believe in my heart, that health information professionals are the absolute key to success in addressing social determinants of health."
>
> **Maria Caban Alizondo**, PhD, RHIT, FAHIMA, Director, Health Information Management, UCLA Health, AHIMA president/chair-elect.

Early Lessons Learned

As AHIMA progresses with its Data for Better Health work, it has gained insights from healthcare leaders nationwide. Here are some key lessons learned:

There is no one standardized way to take on SDOH data. There are a variety of ways to collect, use, and share SDOH data. While approaches differed, what is consistent is the organizational commitment to using the resources and data available to support patients and communities.

Resources are needed on the ground to be effective. Leaders at all levels need to dedicate resources (e.g. funding, time, and people) to these efforts. Guidance and strategy at the organization level, facilitation of dialogue among teams, and embracing a culture that supports learning are key to success.

Partnership – both internal and external – is critical. No one person, department, or organization, can or should do this alone. Successful

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partnerships involve joint goal setting, transparency, sharing of resources and ideas, and a combined effort to help others understand how this work impacts patients.

Trust is a driving force. Trust is mission critical between leaders, partners, and most importantly, between patients and the care teams collecting SDOH data. Building trust involves understanding what causes distrust or mistrust, educating patients about why these questions are being asked, and sharing how the data will be used. Care teams must also be comfortable with the time it may take to build trust and accept if patients do not want to provide SDOH information.

This is hard work. Collecting, using, and sharing SDOH data to improve health and healthcare outcomes will require significant learning and change management. AHIMA is ready to lead this change at the national level as our members take action within their own organizations.

"This work is not simple. It's not like sticking a vein and getting a live test result, it's an interview and it's difficult, sometimes sensitive. In addition, SDOH data is tricky to interpret, it often changes over time, and it's hard to do something about it."

Charles Callahan, DO
VP of Population Health, University of Maryland Medical Center

AHIMA Resources

AHIMA has released a number of educational resources including Data Break webinars, articles in the Journal of AHIMA, and an SDOH Data Advocacy Agenda. Visit www.dataforbetterhealth.com to access these and other shareable resources.

www.dataforbetterhealth.com   **www.ahima.org**

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