



March 20, 2020

The Honorable Chuck Grassley
United States Senate
104 Hart Senate Office Building
Washington, DC 20510-4402

The Honorable Ron Wyden
United States Senate
221 Dirksen Senate Office Building
Washington, DC 20510

Re: Solutions to Improve Maternal Health

Dear Chairman Grassley and Ranking Member Wyden:

Aligning for Health is pleased to provide input on priority topics that affect poor maternal health outcomes in the United States and specific, evidence-based solutions to address these factors. We applaud the leadership of the Senate Finance Committee in emphasizing this topic, which is both critical for families and a bellwether for our future health as a nation.

Aligning for Health brings together a broad coalition of members focused on improving health and wellbeing, and an Advisory Board of individuals representing public health, mental health, nutrition, economic development, housing, and many other sectors – all in an effort to create efficient, integrated and coordinated programs to improve health outcomes for Americans. The members of Aligning for Health have, for several years, worked to hone our collective recommendations to support the social and health needs of people in rural and underserved communities. This work has culminated into a single, bipartisan proposal that is low-cost and ready to implement.

Legislation introduced and led by Senators Todd Young and Debbie Stabenow would take important steps toward improving the health of families on Medicaid. The Social Determinants Accelerator Act (S.2986) will empower communities to develop interventions, coordinate resources, and identify barriers to integrated and coordinated approaches to addressing both the health and social needs of families and individuals on Medicaid.

While this legislation is not specific to maternal health, it provides significant flexibility for states and localities to design and tailor approaches and strategies that meet their residents' needs, which, for many, include addressing the underlying challenges impacting the health of mothers using Medicaid. *Please find attached additional materials on the legislation.*

In addition to these overarching materials, our work and legislative effort applies more directly to several of the areas outlined by the request.

1. The coordination and best use of resources across local community partners.
2. Data sharing across a wide range of healthcare and community organizations.

3. Improved health and social service coordination to address non-medical needs that affect the wellbeing of mothers and children at risk for adverse outcomes.

As you know, states are increasingly looking to deploy social determinants of health interventions to manage costs and improve health outcomes within their Medicaid programs. However, one of the greatest challenges to high-impact interventions is the difficulty in navigating and coordinating fragmented and complex programs aimed at addressing healthcare needs, food insecurity, housing instability, workforce supports, and transportation reliability, among others.

These interventions have the potential to contribute to health outcomes more than clinical health care – in fact, one widely cited study found that while 10 percent of health outcomes in the U.S. are due to clinical health care, social and environmental factors are estimated to account for 60 percent of health outcomes.

Aligning for Health members are focused on two key concerns – barriers that impede coordination between health and social service programs, and the lack of comprehensive evidence around interventions focused on the social determinants of health, which limits the replicability or scaling of successful interventions. We believe that solutions to these challenges would be built on the back of information collected and coordinated through the deployment of community Social Determinant Accelerator Plans and supporting federal activity. Additionally, as data is collected on social determinants of health, it is often gathered in silos within health systems, community-based organizations and governmental agencies, which limits each of these entities' ability to act on and address patients' social needs.

If social needs are identified in the healthcare setting, a clinician may not be aware of, or have the ability or resources to address these issues themselves. Collaborative partnerships with community benefit organizations allows care to extend past the four walls of the doctor's office, and health plans are increasingly arming providers and patients with screening and referral tools, however, connecting the health and social service systems is a complex undertaking and will take time, especially in more rural or underserved areas where resources are stretched.

We believe that the Senate Finance Committee would be well served by focusing on developing appropriate ways to share collected information about health and social needs among federal programs, local governments, and community partners providing services and supports to populations with concurrent social and health needs. This work could include catalyzing the development of standardized screening tools that will not only help with the identification of individual social needs, but when aggregated across programs can help assess community-level needs – allowing for the better allocation of resources. Information about social needs could supplement healthcare data to improve care for mothers and children, with appropriate privacy protections.

Additionally, the Committee should incentivize the establishment and use of outcomes measures to assess and evaluate the efficacy of social determinant interventions. We believe that CMS needs to take

a leadership role in the use of social determinant outcomes measures – so that interventions with strong clinical and social outcomes can be proven and supported. Advances in social determinants performance measurement will drive the use of outcome-based payments, creating the necessary incentives to catalyze the broad sharing of data across federal, local, and community actors to better serve individuals.

The Social Determinants Accelerator Act will combine targeted technical assistance with grant funding to accelerate the capacity of states and localities to design Social Determinants Accelerator Plans. Community-led plans will identify and accelerate cross-sector approaches to addressing social determinants, which may be implemented by braiding of federal, state, and local funding to better support non-clinical health factors – such as housing, food assistance, income, employment status, education and transportation. They will also incorporate and support the coordination of community organizations of all kinds to ensure resources are used most effectively.

Thank you for your consideration. We look forward to working with you on this important effort. Please contact Chris Adamec at 202-640-5941 or cadamec@aligningforhealth.org with any questions.

Sincerely,

A handwritten signature in blue ink that reads "Misty Brobac". The signature is written in a cursive, flowing style.

Chair, Aligning for Health



Social Determinants Accelerator Act (S. 2986)

Partnering with States and Localities on Evidence-Based Strategies Addressing Social Determinants of Health

Social determinants of health—such as lack of access to stable housing, transportation and healthy foods—have a significant impact on health. Evidence-based preventive interventions that address social determinants of health hold the potential to improve the health and well-being of Medicaid populations *and* to increase the government’s return on investment in health and social services programs.

Two key steps need to be taken to identify and scale effective preventive interventions that involve both health care and social services providers:

- First, we must build stronger evidence about which non-medical preventive approaches produce better health outcomes. Despite the increasing interest in social determinants of health, a recent [Robert Wood Johnson Foundation supported review](#) found that most evaluations have used weak study designs that produced inconclusive results.
- Second, we must break down the barriers that impede coordination between health and social services programs. Complex bureaucratic rules—whether statutory requirements, regulations, or reporting standards—across dozens of federal programs make it hard for states, localities and Tribes to effectively coordinate these resources, test new approaches and scale those that work.

The Social Determinants Accelerator Program

The Social Determinants Accelerator Act (S. 2986) will implement these steps by enlisting States, localities and Tribes as partners to implement cross-sector strategies that improve the health of Medicaid participants. Specifically, under the Social Determinants Accelerator Act (S. 2986):

- This bill would create an inter-agency technical advisory council on social determinants of health. The Council would include program experts from across the federal government, including the Department of Housing and Urban Development, the Department of Labor and the United States Department of Agriculture, as well as state and local government officials, the private sector and community-based organizations.
- The Secretary of Health and Human Services (HHS), in consultation with the Council, would make available up to \$20 million in grants to state, local and Tribal governments to develop Social Determinants Accelerator Plans. Plans would:
 - Target a group of high-need Medicaid patients, like homeless individuals, older workers with arthritis, nursing home patients, or mothers diagnosed with post-partum depression;
 - Identify the key outcomes to be achieved through improved coordination of health and non-health services and use of evidence-based interventions; and
 - Include a plan for linking data across programs measuring the impact of the new approach on the health of participants and the return-on-investment for taxpayers.
- The Council would provide technical assistance to grantees to help them implement their plans by identifying federal authorities, opportunities and strategies for braiding and blending funds and designing rigorous evaluations. To ensure all jurisdictions can benefit, the Council will broadly disseminate best practices and opportunities for cross-program coordination.



What You Need to Know About the Social Determinants Accelerator Act (S. 2986)

What is the Social Determinants Accelerator Act (S. 2986)?

The Social Determinants Accelerator Act (SDAA) (S. 2986) will catalyze cross-sector, intergovernmental collaborations to strengthen the capacity of all levels of government to use existing resources to improve health and social outcomes for Medicaid populations. The Act will provide state and local officials with additional capacity to address the needs of the whole person by coordinating health and social services programs to address social determinants of health – such as healthy food and nutrition, healthy and stable housing, workforce preparation, high quality education, and reliable transportation.

The Act creates two complementary mechanisms:

- *A federal interagency, intergovernmental “Social Determinants Accelerator Council.”* The Council, overseen by the U.S. Secretary of Health and Human Services (HHS) will include program experts from federal agencies including other components of HHS, Housing and Urban Development, Agriculture, and Labor, as well as from state and local government, the private sector, and community-based organizations. The Council will assist states and localities address social determinants by identifying federal resources, authorities, and strategies for braiding and blending funds and designing rigorous evaluations to learn what practices are most effective.
- *Up to \$20 million in planning grants to state, local, and tribal governments to develop Social Determinants Accelerator Plans.* The Secretary of HHS will make up to 25 grants through a competitive process. Initial applications will identify a high-need Medicaid population to receive integrated services, identify the outcomes to be achieved through cross-sector coordination and use of evidence-based interventions, and include a plan for linking data across programs and evaluating the interventions.

Why do we need this legislation?

The Social Determinants Accelerator Act (S. 2986) addresses several key problems that impede government capacity to improve health and social outcomes of low-income populations.

- *It is no one’s job in the federal government to help states and localities make sense of confusing and conflicting rules issued by separate agencies and programs.* Many administrators of state and local health and social services programs find the greatest challenge to implementing high-impact innovations is the difficulty of wading through the fragmented, complex rules established by separate federal programs and dense government-wide grant and financial reporting requirements. While some pilot programs support innovation on a piecemeal basis, there are no institutionalized mechanisms to assist states and localities coordinate innovations across a range of federal health and social services programs.
 - *SDAA’s solution:* The Social Determinants Accelerator Council, led by the Secretary of Health and Human Services, will be accountable for helping states, localities and tribes navigate existing program requirements and take advantage of existing opportunities to better coordinate across programs.



- While research shows that economic and social conditions have a powerful impact on health and well-being, there is a need for stronger evidence about which preventive non-medical interventions result in improved health and social outcomes that can reduce downstream medical costs for the individuals served. A recent [Robert Wood Johnson Foundation supported review](#) found that most evaluations of promising interventions have used weak study designs that produced inconclusive results.
 - *SDAA's solution:* States and localities that receive Social Determinants Accelerator Grants will develop rigorous evaluation designs and data-linkage strategies to generate strong evidence about the impact of their proposed interventions.

Who is eligible to receive grants?

State, local, or Tribal health or human services agencies are eligible to receive grants. Applicants must demonstrate the support of relevant parties across state, local or tribal jurisdictions. At least 20 percent of the funding will be reserved for grants serving rural populations if there are sufficient eligible applicants.

What Can Social Determinants Accelerator Grants Fund?

Grants to state, local, and tribal governments will be used to develop a Social Determinants Accelerator Plan by: (1) convening and coordinating with relevant government entities and stakeholders; (2) identifying high-need Medicaid subpopulations who will benefit from the plan; (3) engaging qualified researchers to advise on evaluation design; (4) collaborating with the Secretary of HHS on the development of the plan; and (5) preparing a final plan for submission to HHS.

What Must a Social Determinants Accelerator Plan Include?

State, local and tribal governments that receive planning grants will develop a Social Determinants Accelerator Plan that includes: (1) the target population that will benefit from the plan; (2) the interventions or approaches planned and the evidence supporting them; (3) the objectives and outcome goals, including a health outcome and a social outcome; (4) a plan for linking data across programs to enable service coordination and evaluation; (5) the governmental and non-governmental organizations that will participate in implementation; (6) the funding sources to be used; (7) the financial incentives that may be provided, including outcome-focused contracting approaches; (8) the statutory and regulatory authorities, including waiver authorities, that will be leveraged; (9) considerations that will enhance the impact, scalability, or sustainability of the proposed interventions or approaches; (10) a rigorous evaluation plan to measure the impact on outcomes, cost-effectiveness, and return on investment; and (11) precautions for ensuring that vulnerable populations will not be denied access to Medicaid or essential services.

How Will the Council Help States, Localities, and Tribes?

The Social Determinants Accelerator Council will identify federal authorities and opportunities available to states and localities to improve coordination of health and social services programs that may be unknown or underutilized and will make this information publicly available. In addition, it will support effective implementation of the Social Determinants Accelerator Grants by: (1) providing targeted technical assistance to state, local and tribal grant recipients to help them develop models focused on case management of individuals receiving services administered by State or local health and social services agencies, identify statutory and regulatory pathways to implement their plans, and identify funding



sources; and (2) disseminating evaluation guidelines and standards to assist grantees in developing rigorous evaluation plans.

To help ensure that the Council is responsive to state and local needs, the Council will seek state and local feedback on how to improve its technical assistance and include these findings in its annual report to Congress. It will also coordinate its activities with other cross-agency initiatives, such as the Social Impact Partnerships to Pay for Results Act administered by the Department of the Treasury.

What Is the Timeline?

The Council will convene within 60 days of enactment of the Act to develop a schedule and implementation plan. Within six months of enactment, the Secretary of HHS, in consultation with the Council, will award grants to state, local, and tribal applicants selected through a competitive process.

What Does This Mean for You?

The Act will accelerate progress by trailblazing jurisdictions and organizations that are building cross-sector partnerships to address social determinants of health, such as healthy stable housing, healthy food and nutrition, reliable transportation, workforce development and high-quality education. Jurisdictions and organizations that stand to benefit the most from SDAA (S. 2986) by receiving grants are those that begin collaborating now to explore promising cross-sector interventions and approaches that could potentially be financed with existing government resources, whose impact on health and social outcomes can be measured and rigorously evaluated.

All jurisdictions that are developing cross-sector partnerships involving health and social services programs, regardless of whether they apply for or receive a grant, will be able to benefit from the public reports and content created by the Council as well as the knowledge generated by grantees about how to coordinate existing programs to effectively address social determinants.



Aligning for Health

Overview | Winter 2020

Mission Statement

Aligning for Health is made up of stakeholders who recognize that health is connected to more than just access to medical services, and that government programs promoting well-being, especially among low-income Americans, may be able to more effectively address overall health with more integration.

There is a significant body of academic work showing that economic and social conditions have a powerful impact on individual and population health outcomes, as well as medical costs. These non-clinical factors – such as housing, food assistance, income, employment status, education and transportation – have the potential to contribute to health outcomes more than clinical health care. In fact, one widely cited study found that while ten percent of health outcomes in the U.S. are due to clinical health care, social and environmental factors are estimated to account for 60 percent of health outcomes.

Recognizing this link, governors, public health officials and Medicaid directors throughout the country have engaged in efforts to address the ever-increasing cost of health care by integrating more social determinants of health into their approach to Medicaid. While there have been many successes, many states have experienced challenges in embarking on and implementing cross-agency, cross-program coordination. Many who run state programs agree that the greatest challenge to realizing innovative, high-impact approaches to social determinants is the difficulty in wading through the fragmented and complex nature of federal and state funding and administrative requirements.

However, given the complexity of state and federal program administration, many of the barriers raised by state or local officials *may actually be possible*. A thicket of rules - whether statutory requirements, regulations, waiver authorities, or reporting and quality initiatives - have made it extraordinarily difficult for states and/or localities to easily determine true statutory barriers from challenges that can be overcome, in designing innovative approaches.

Through a combination of research, policy development advocacy, coalition building, and thought leadership, *Aligning for Health* seeks to energize stakeholders and policymakers around the need for targeted technical assistance and funding to states and communities to navigate through the thicket and design high-impact, cross-system strategies that achieve better health outcomes for Medicaid beneficiaries, improve program effectiveness, and lower healthcare costs.

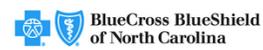
Who We Are

Aligning for Health is a membership association which, with the support of our members and Advisory Board, brings a team of federal and state administration experts to address the issues that challenge the common purpose of our members – the need for efficient, integrated and coordinated programs to improve health outcomes for Americans.

What We Do

Aligning for Health is a collective voice to advance innovative strategies that address the social determinants of health through legislation, regulation, and public awareness. Our members leverage *Aligning for Health* for research, policy development, advocacy, and coalition building – implemented through convenings, public events, and strong ongoing relationships with Congressional and Administration leaders. Our most significant accomplishment to date has been the development and advancement of the **Social Determinants Accelerator Act (SDAA, H.R. 4004, S. 2986)**, which will help states and communities develop evidence-based cross-system interventions that will improve health outcomes by addressing social determinants.

Aligning for Health Members



Advisory Board

- **Nicole Barcliff**, Local Initiatives Support Corporation (LISC)
- **Matthew Chase**, National Association of Counties (NACo)
- **Amy Clary**, National Academy for State Health Policy (NASHP)
- **Theresa Eagleson**, Director of the Illinois Department of Healthcare & Family Services
- **Jason Gromley**, Share Our Strength
- **Jason Helgerson**, Helgerson Solutions Group and Former New York Medicaid Director
- **Roger Low**, America Forward
- **Marcella Maguire**, Corporation for Supportive Housing (CSH)
- **Jerold Mandel**, Tufts University, former Senior Advisor on Food/Nutrition, USDA
- **John McCarthy**, Speire Healthcare Strategies, Former Medicaid Director for Ohio and DC
- **John Rother**, National Coalition on Health Care (NCHC)
- **Andrew Sperling**, National Alliance on Mental Illness (NAMI)
- **Tracy Wareing Evans**, American Public Human Services Association (APHSA)
- **Ginger Zielinskie**, Benefits Data Trust

Leadership

The coalition is led by Krista Drobac who led the Health Division at the National Governors Association, served as a senior advisor at CMS, was the Deputy Director of the Illinois Department of Health & Family Services, and worked in the U.S. Senate. She is joined by Melissa Quick who spent five years at CMS and has worked with Medicaid agencies in Alabama and Massachusetts, and Chris Adamec, who led advocacy for comprehensive care at the Patient-Centered Primary Care Collaborative and convened industry leaders at the Healthcare Leadership Council. The team has deep policy and political experience including, CMS, OMB, state government, and patient groups.

For more information, please contact:
Krista Drobac, kdrobac@aligningforhealth.org

