



November 27, 2019

The Honorable Richard Neal
Chairman
Committee on Ways and Means
U.S. House of Representatives
1102 Longworth House Office Building
Washington, DC 20515

The Honorable Kevin Brady
Ranking Member
Committee on Ways and Means
U.S. House of Representatives
1139 Longworth House Office Building
Washington, DC 20515-6348

Re: Rural and Underserved Communities Health Task Force Request for Information

Dear Chairman Neal, Ranking Member Brady, and leaders of the Task Force:

Aligning for Health is pleased to provide input on priority topics that affect the health status of people in rural and underserved communities. We applaud the leadership of Task Force co-chairs Reps. Danny Davis (D-IL), Terri Sewell (D-AL), Brad Wenstrup (R-OH), and Jodey Arrington (R-TX) in bringing for this important effort to the forefront.

Aligning for Health is a coalition that 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. 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.

The **Social Determinants Accelerator Act (H.R. 4004)** will empower communities to develop interventions, coordinate resources, and identify barriers to integrated and coordinated approaches to addressing the social determinants. Please find attached additional materials on the legislation.

- [One-Pager](#)
- [FAQ](#)
- [Section-by-Section](#)
- [Bill Text](#)

The Social Determinants Accelerator Act (SDAA) will combine targeted technical assistance with grant funding that will provide states and localities with the capacity and expertise to design Social Determinants Accelerator Plans. Accelerator 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. The legislation stipulates that up to 20 percent of assistance will focus on planning for rural communities. 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.

In addition to these overarching materials, our work and legislative effort applies more directly to several of the questions issued by the task force.

1. What are the main health care-related factors that influence patient outcomes in rural and/or urban underserved areas? Are there additional, systems or factors outside of the health care industry that influence health outcomes within these communities?

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. .

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.

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.

The Social Determinants Accelerator Plans created by H.R. 4004 would task local governments and community organizations with developing plans to address this coordination, and the data-sharing capability needed both implement and evaluate what works, with the aim of helping all communities to best address the needs of their communities.

2. What successful models show a demonstrable, positive impact on health outcomes within rural or underserved communities, for example initiatives that address: a) social determinants of health (particularly transportation, housing instability, food insecurity); b) multiple chronic conditions; c) broadband access; or d) the use of telehealth/telemedicine/telemonitoring?

This question alludes to another longstanding challenge in the development of interventions that help rural and underserved communities. There have been many successful initiatives created by states and localities without the resources to scale interventions regionally or without the platform to share best practices. The Social Determinants Accelerator Act would facilitate the communication of these successful models and best practices to communities across the nation – allowing what works to flourish and replicate.

9. There are known, longstanding issues with the availability and integrity of data related to rural and urban community health. What data definitions or data elements are needed to help researchers better

identify the causes of health disparities in rural and underserved areas, but are unavailable or lack uniformity?

We believe that the Ways and Means 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 in specific circumstances, 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.

We believe that all these developments would be built on the back of information collected and coordinated through the deployment of community Social Determinant Accelerator Plans and supporting federal activity.

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 "Krista Brobac". The signature is fluid and cursive, with the first name "Krista" and last name "Brobac" clearly legible.

Chair, Aligning for Health



Social Determinants Accelerator Act

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 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:

- The Secretary of Health and Human Services would convene 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 Centers for Medicare and Medicaid Services (CMS), in consultation with the Council, would make available up to \$25 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

What is the Social Determinants Accelerator Act?

The Social Determinants Accelerator Act (SDAA) 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) in coordination with the Administrator of the Centers for Medicare and Medicaid Services (CMS), 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 \$25 million in planning grants to state, local, and tribal governments to develop Social Determinants Accelerator Plans.* The CMS Administrator 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 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 CMS Administrator on the development of the plan; and (5) preparing a final plan for submission to CMS.

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) an 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 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 strong 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 CMS Administrator 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 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.



Social Determinants Accelerator Act

SECTION BY SECTION

SECTION 1 – SHORT TITLE

- The Social Determinants Accelerator Act of 2019

SECTION 2 – FINDINGS; PURPOSE

- **Findings** – There is a significant body of evidence showing that economic and social conditions have a powerful impact on individual and population health outcomes and wellbeing, as well as medical costs. However, state, local and tribal governments face challenges in coordinating benefits and services delivered through Medicaid and other social service programs due to complex rules and administration.
- **Purpose** - To assist state, local and tribal governments in improving health and social outcomes for individuals and the return on investment for health and social services programs by: (1) establishing effective technical assistance to overcome barriers to coordinating services across sectors; and (2) creating a pipeline of state and locally designed, cross-sector strategies that will generate rigorous evidence about their impact.

SECTION 3 – SOCIAL DETERMINANTS ACCELERATOR COUNCIL

- **Establishment** - Instructs the Secretary of Health and Human Services (HHS), in coordination with the Administrator of the Centers for Medicare and Medicaid Services (CMS), to establish an interagency, intergovernmental technical advisory council, known as the Social Determinants Accelerator Interagency Council (the Council).
- **Membership** - The Council will include designees from federal agencies and up to six state, local and tribal health and human service agencies, public housing authorities, state and local government budget offices, state Medicaid agencies, or national consumer advocacy organizations.
- **Duties** - The Council will be responsible for (1) making recommendations to the HHS Secretary and the CMS Administrator regarding the criteria for making awards; (2) identifying federal authorities and opportunities to improve coordination of funding and administration of federal programs; (3) providing targeted technical assistance to states developing Social Determinants Accelerator Plans; (4) providing an annual report to Congress; (5) developing and disseminating evaluation guidelines and standards that may be used to assess planned interventions and approaches; (6) seeking feedback on how to improve the Council's technical assistance; and (7) coordinating with other relevant cross-agency initiatives.

SECTION 4 – SOCIAL DETERMINANTS ACCELERATOR GRANTS TO STATES OR LOCAL GOVERNMENTS

- **Grants to State, Local, and Tribal Governments** – Up to twenty-five grants to state, local or tribal governments to develop Social Determinants Accelerator Plans will be awarded within six months of enactment.
- **Applications for Grants** – Applications must include information related to the target population that would benefit from the Social Determinants Accelerator Plan, the objective or goals, the proposed interventions, and key stakeholders that will participate in developing the plan, among other details as determined by the Secretary.



- **Use of Grants** – Grants may be used to convene and coordinate with relevant government entities and stakeholders, to collaborate with the Council on developing a Social Determinants Accelerator Plan, and to prepare and submit a final Plan to the Council.
- **Social Determinants Accelerator Plans** – Social Determinants Accelerator Plans developed by state, local, and tribal governments must include information on the target population that would benefit, the proposed interventions or approaches and the intended objectives and outcome goals, a plan for accessing and linking data to enable coordinated benefits and services, the stakeholders involved in the planning process, and a proposed evaluation plan, among other information.

SECTION 5 – FUNDING

- **Funding** - Authorizes \$25 million in funding, of which up to \$5 million may be used to fund the Council's activities.
- **Rural Set-Aside** - Sets aside up to 20 percent of the funding – with limited exceptions – to award grants to develop plans that will primarily serve rural populations.