UNTAPPED AREAS OF OPPORTUNITY FOR EMPLOYERS

SOCIAL DETERMINANTS AFFECTING EMPLOYMENT
Over the past decade, health experts recognized that only 10-20% of a person’s health is determined by what happens in the hospital or doctor’s office. This leaves 80-90% to other variables, most of which are based on a person’s social circumstance.

Despite decades of employer investment in physical and financial wellness benefits for employees, costs for these programs continue to rise without clear evidence employees are getting healthier or saving more for their future. Costs for programs like these have been on the rise since the 1960s and are projected to continue unless employers embrace a dramatic change in approach.

Employers have an opportunity to shift from a reactionary cost containment to a proactive approach by looking at cost drivers typically ignored in the work force: social determinants of health (SDoH).
SOCIAL DETERMINANTS OF HEALTH: DEFINITION AND POPULATION FOCUS

There is a longstanding recognition that social factors play an important role in a person’s health and well-being with publications dating back to the 1800s.

However, it wasn’t until 2005 that the World Health Organization (WHO) created the Commission on Social Determinants of Health to support countries addressing social factors leading to ill health and health inequities.

The commission defined social determinants of health (SDoH) as:

“The conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies and political systems.”

The World Health Organization

Employers who consider SDoH when designing benefits programs that address a diverse population’s health needs can comprehensively and effectively address the value of their workforces’ human capital, including knowledge, skills, abilities, motivation, and creativity.

Consideration of health impact tied to where a person lives, works, plays and grows old will continue to be a key area of focus in healthcare disruption over the next few years. Much attention has been focused on healthcare providers and hospital systems identifying and tracking social barriers affecting health outcomes. This approach has limitations in effectiveness. To truly have impact, it will take a broader team approach to improve the health and wellbeing of communities, lower health care costs and improve health outcomes - and the employer has an opportunity to take a central role.
In the last few years there is growing recognition that SDoH play a strong role in the workforce. The inextricable connection between employee health and work is more evident today than at any other time in history. The connectivity is multiplied with the transition from structured employer operated workspaces to virtual environments. This relationship moves beyond the ties to occupational hazards and into the space of employee health and wellness initiatives, community philanthropy and volunteerism.

Today, employees of employers engaging in improving SDoH activities will experience improved health and lower health care costs but also live in more cohesive and healthier communities.

In a 2017 study published by a commercial insurer, health outcomes and excessive health plan spending could be grouped into four primary areas for lower-wage workers (LWW):

1. Higher incidence of preventable disease
2. Late stage recognition and treatment of disease
3. Limited ability to navigate the health system and comply with self-care regimens
4. Treatment in more expensive and less effective settings (LWW had twice the number of visits to the ER than higher wage workers.)

Of greatest importance in this study is the realization that wage alone was not the reason for worse outcomes and higher health care costs, instead there was a strong association with the community the employee worked/lived.
HOW SOCIAL DETERMINANTS AFFECT EMPLOYMENT

Communities are the source of today and tomorrow’s employees and for businesses to thrive, they need a healthy society. Historically, employers have not been viewed as creating solutions to fundamentally improve societies. Additionally, there has been little connection to social determinants of health impacting healthcare costs in the workforce. Logic leads us to conclude if an employee does not have access to transportation, stable and affordable housing, safe community, childcare and access to healthy food choices, their health and thus productivity will suffer. When health suffers, healthcare costs rise for employers.\(^7\) When productivity suffers, employer’s profitability is impacted.\(^8\) Multiple community studies now support this assertion.

A recent multi-state collaborative spearheaded by the United Way looks at populations living above poverty level yet struggling to make ends meet. “United for ALICE” built a standardized methodology assessing communities across states with the goal of identifying financial hardships this population faces and creating collaborative solutions.\(^9\) ALICE is an acronym for Asset Limited, Income Constrained, Employed.

National health spending growth is projected to reach nearly $6.0 trillion by 2027. Personal health care prices are projected to grow by 2.7 on average annually between 2020-27.\(^6\)

ALICE households face challenges addressing basic needs such as housing, food, transportation, childcare and access to technology. Many who fall into the ALICE threshold consist of men and women or all ages, races and ethnicities living in urban, suburban and rural parts of the state. These are not populations defined as impoverished, but they are struggling to make ends meet.

When unexpected financial stressors hit, ALICE households face difficult decisions between paying for rent, filling a prescription, fixing a car or going to work. Each short-term decision has the potential of creating a devastating long-term impact.
It is not the role of the employer to eradicate poverty, or all the social ailments faced by employees. The question at hand is what role might an employer take to improve the lives serving the company? Does the employer understand the basic challenges employees are facing and how to connect the employee to local resources to address these needs?

Research from the National Association of Community Health Centers using the PRAPARE tool: Protocol for Responding to and Assessing Patients’ Assets, Risks and Experiences, supports the critical need to understand social issues and build support networks to address these concerns. This tool has been piloted nationwide with federally qualified health clinics (FQHC) integrating with a variety of electronic health records. When social determinant data is collected in a consistent manner, teams can better address the needs and facilitate links to community resources. The clinics embracing this tool serve the most vulnerable in our society. There is little appreciation for the opportunity within the employer space to use vetted tools like PRAPARE to address needs within their employee base and support health care providers in total population health. Now more than ever we have an opportunity to dig deeper into the role employers may be able to play to affect change.
Productivity isn’t everything, but in the long run it is almost everything. A country’s ability to improve its standard of living over time depends almost entirely on its ability to raise output per worker.  

Paul Krugman

This cycle between productivity and people suggests higher levels of productivity allow society to reinvest in human capital and smart investments result in higher labor productivity. Unfortunately, productivity in most developed economies has been anemic and wages haven’t grown as much as expected. All of this raises a chicken-or-egg question: Are we suffering from low productivity because we have underinvested in human capital? Or are we unable to invest in human capital because structural factors are permanently reducing productivity? The evidence suggests the former: We could improve our productivity if we invest in human capital—by increased wages and investments in the social needs and support of our employees. Creating inspiring jobs and engaging working environments requires holistically addressing the factors that drive employee inspiration, which is outlined in Bain & Company’s pyramid of employee needs below.

THE PYRAMID OF EMPLOYEE NEEDS

Get meaning and inspiration from their company’s mission

Are inspired by the leaders in their company

Are part of an extraordinary team

Have autonomy to do their jobs

Learn and grow every day

Make a difference and have an impact

Have a safe work environment

Have the tools, training, and resources to do their jobs well

Can get their jobs done efficiently, without excess bureaucracy

Are valued and rewarded fairly
What can employers do to affect changes in employee health, wellbeing, productivity and outcomes?

“Nationally, there's awareness that we need to tackle social determinants of health, but the best strategy to do that has not been uniformly identified. It's not always clear whether the best thing to do is tackle food insecurity, whether you tackle housing, whether you tackle transportation, or whether you look at issues around education and job security.” The most important action an employer can take is recognizing their role in building healthier communities and finding partners to affect lasting change.

Health Action Council has identified some best practices that are being implemented.

- ADDRESSING FOOD SECURITY
- CREATING AFFORDABLE HOUSING
- PROVIDING TRANSPORTATION TO INCREASE ACCESS
The Blue Cross Blue Shield Institute (BCBS Institute) is partnering with Health Care Service Corporation (HCSC) and foodQ to connect more patients with nutritious food. Patient populations across the country live in food deserts in which it is difficult to obtain food either due to geographic or financial barriers. Food insecurity can lead to chronic disease, most prominently diabetes. Using foodQ services, BCBS Institute and HCSC deliver nutritious meals to families living in food deserts. Individuals can check their eligibility for the program by entering their zip code onto a foodQ website. Once verified, participants can enter their payment information, select their meal needs, and select the date on which the meals will be delivered.

Hospitals across the country are introducing food clinics or pharmacies with the idea ‘food is medicine’. Under this model patients receive a food prescription from their primary care provider, covering a specific number of visits to the clinic per month. Patients can then select two-to-three-days of healthy food at no cost.

Grocers are piloting programs where providers can write a ‘food prescription’ that patients can have filled at a local store under the guidance of a health professional.
Kaiser Permanente created affordable housing options for patients in the Bay Area. Kaiser engaged regional partners, including Enterprise Community Partners (Enterprise) and East Bay Asian Local Development Corporation (EBALDC) to create sustainable and affordable housing options for underserved individuals in the Bay Area. Homelessness is a dangerous health condition, not only a social condition, because of the extreme conditions of living on the street, especially for those suffering with chronic health conditions. Kaiser Permanente and Enterprise invested in a 41-unit housing complex to keep it affordable. EBALDC is managing the building and making necessary updates. Additionally, Kaiser and Enterprise each promised matching $50 million in donations to create a national loan fund for affordable housing in Kaiser’s care areas, including eight states and Washington DC.

Across the country, school districts and universities are offering housing assistance programs. Many are entering into community-based collaborations of government, schools, charities and financial institutions to build affordable housing options, make partial rent payments or provide housing stipends.

Some employers are buying or building affordable housing units to be offered to their employees and the community at large.
Payers and providers alike are partnering with rideshare companies and non-emergency medical transportation (NEMT) providers to connect patients with their providers. These ride providers are also working to make a more workable healthcare interface themselves.

Blue Cross Blue Shield Association used zip code data to identify patients living in transportation deserts. They partner with Lyft. “The work we’re doing with BCBSA is critical to our goal of reducing the transportation health care gap by 50 percent in the next two years—and a key part of our mission to improve people's lives with the world's best transportation.”

And although it has not publicly released such information, similar trends have likely emerged with rideshare competitor Uber, which has its own healthcare offshoot, Uber Health.

Employers across the country are investing in shuttles, public transportation passes, and transportation reimbursements to remove the stress of how to get to work.
1 IDENTIFY EMPLOYEE NEEDS

Ask questions and collect data on what your employees need. Using social determinant of health assessment tools to screen and identify the needs of your employees will offer you insight on where to start.

SOCIAL DETERMINANTS OF HEALTH ASSESSMENT TOOLS

Many of the sites participating in Transforming Complex Care adapted existing or created new assessment tools to better capture patients’ social needs and barriers to care. Examples of these screening tools are available to download below:

- Social Determinants Screening Tool (AccessHealth Spartanburg)
- Self-Sufficiency Outcomes Matrix (OneCare Vermont)
- PRAPARE Tool (Redwood Community Health Coalition)
- Community Paramedicine Pilot Health Assessment (ThedaCare)
- Social Needs Assessment (Virginia Commonwealth University Health System)

2 IDENTIFY PARTNERS

Once you have data about employee key needs and gaps in the communities where these employees live and work, employers can bring in key strategic partners to address the gaps.

Improving individual and population health requires partnerships to engage other sectors (e.g., education, justice and employment) in creating healthier environments. Successful community partnerships have resulted in:

- Low-cost daycare and early childhood education opportunities
- Work-site farmers markets
- Mentor programs for high school students and internships for college students
- Healthy food options at the worksite
FOUR STEPS TO BUILDING HEALTHIER COMMUNITIES AND EMPLOYEES

3. **LINK EMPLOYEES TO RESOURCES**
   
   Once you have identified employee needs and engagement you need to connect them with community resources within and beyond the health system. This is an opportunity to partner with social connector agencies such as UniteUs or integrate into programs spearheaded by local health organizations.

4. **TRACK DATA**
   
   Structured data capture will be critical to understanding population challenges, creating focused interventions, and tracking improvement over time. Ideally the same methodology should be used outside the healthcare system as is used inside.

   **“Personalizing interventions to provide the right behavior change technique for the right person at the right time is important”**

   Nicole Brainard
   PhD MPH Behavioral Scientist,
   Johnson & Johnson Health and Wellness Solution

   **CONTINUALLY CONNECT EMPLOYEES TO RESOURCES**

   https://www.azahcccs.gov/PlansProviders/Downloads/FFSProviderManual/Exhibit_4-1SocialDeterminantsHealthICD-10List.pdf
Health Action Council also collaborates with key stakeholders—health plans, physicians, hospitals, and the pharmaceutical industry—to improve the quality and efficiency of healthcare in the community.

SUMMARY
In the last few years there is growing recognition that SDoH play a strong role in the workforce. The inextricable connection between employee health and work is more evident today than at any other time in history.

Employers can take these four steps to improve employee’s health and lower health care costs but also live in more cohesive and healthier communities.

FOUR STEPS YOU CAN TAKE

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<tr>
<td>Capture data around employee needs</td>
<td>Create community partnerships</td>
<td>Connect employees to resources</td>
<td>Calculate impact and continue to reassess</td>
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Health Action Council looks forward to working with you on community improvement efforts and encourages you to implement creative and appropriate solutions for your organization and sharing the results of your efforts.

SOURCES
2. How social determinants of health affect your employee benefit program. Employers and their employees can benefit from programs and tactics tailored to address social determinants of health that affect employees. By Bruce Sherman | November 15, 2018 https://www.businessdevelop.com/2018/11/16/how-social-determinants-of-health-affect-your-emploi/ REFER TO TEXT TO BE DETERMINED%20OF%20ABILITY%20TO%20MODERATION%20AND%20CREATIVITY.
12. Ibid. The Case for Investing More in People
13. Top Strategies to Address the Social Determinants of Health: Healthcare experts are turning to housing security, food access, and transportation interventions to address social determinants of health. By Sara Health, February 28, 2019
14. Ibid. Top Strategies to Address the Social Determinants of Health

Health Action Council is a not-for-profit 501(c)(6) organization representing mid and large-size employers that works to improve human and economic health through thought leadership, innovative services, and collaboration. It provides value to its members by facilitating projects that improve the quality and moderate the cost of healthcare purchased by its members for their employees, dependents, and retirees.

Health Action Council also collaborates with key stakeholders—health plans, physicians, hospitals, and the pharmaceutical industry—to improve the quality and efficiency of healthcare in the community.

LET’S KEEP THE CONVERSATION GOING
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