

Mount Sinai St. Luke's seeks to document nonmedical problems that impact patient health

As providers in New York confront the impact of homelessness, food insecurity and other social issues on their patients' health, one of their biggest challenges is assessing and documenting their patients' nonmedical needs.

A pilot program launched in the fall at Mount Sinai St. Luke's aims to screen for such social determinants of health.

"The innovation is not that social determinants of health exist," said Dr. Theresa Soriano, senior vice president of care transitions and population health at Mount Sinai St. Luke's. Rather, she said, it's to systematize "how we collect a broader set of social determinants that we can then quantify and use to characterize a population in a meaningful way."

Collecting more comprehensive data will eventually make it easier to get reimbursement from payers or funding from other sources to address patients' needs, Soriano added.

Mount Sinai's questionnaire, administered by social workers and social work interns at the hospital, asks patients about issues as diverse as housing, safety, transportation and legal problems. So far, more than half the respondents have screened positive for at least one social problem.

Mount Sinai is developing an app for patients who would rather not fill out the questionnaire face-to-face or don't have a chance to do it in the hospital.

Mount Sinai's staff worried that the screenings would uncover more issues than the hospital could handle, Soriano said. Of those who screened positive, however, 74% were dealing with only one or two issues.

Mount Sinai does a full social work assessment to prioritize which needs are urgent and to see what help patients are already getting and how they can best be served outside the hospital setting, Soriano said.

Many of the issues that arise, including homelessness and food insecurity, are linked to identifiers known as Z codes in medical records. Others, however, have no clear match, such as a patient feeling unsafe. Some have multiple Z codes associated with them, so the goal is to get providers to standardize the way they are used, Soriano said.

Mount Sinai isn't the only health system looking to tackle the challenges of collecting data on social determinants. NYC Health + Hospitals, for instance, is testing similar screening tools for the adult ambulatory population at Bellevue, parents of pediatric patients at Gouverneur and patients with chronic diseases at Lincoln. Staff to carry out the assessments and referrals is limited, however.

"This is typically within the job description of social-work teams and community health workers," said Kalpana Bhandarkar, the lead on social determinants in the Office of Population Health at NYC Health + Hospitals. "But often at safety-net hospitals, like ours, we're constrained in those areas. Some of the work done by people in these positions is not necessarily billable, and it's hard to sustain a revenue stream to support them."

The state Health Department, which created the Bureau of Social Determinants of Health in December, is seeking to expand such initiatives. The Health Department plans to launch a request for innovation May 1 in order to identify new strategies providers are using to address the social determinants of health for Medicaid members.