

ADDRESSING NON-MEDICAL DRIVERS OF HEALTH

Provider Guide



INTRODUCTION

Health Equity is central to our purpose at Community First Health Plans. Our organization has been deliberate in learning and aligning all aspects of our operations and our foundation of approach. To hold ourselves accountable, the Health Equity Council reviews stratified data sets, including quality metrics, provider network cultural responsiveness, and Member satisfaction measures, to identify root causes of disparities and prioritize areas for intervention.

This comprehensive structure enables Community First to respond proactively to identify disparities and employ data-driven initiatives to achieve measurable reductions in health inequalities.

Non-Medical Drivers of Health (NMDOH), formerly known as social determinants of health, are conditions in which people live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality of life outcomes and risks. Providers are in a unique position to help identify risks and incorporate NMDOH medical-care decision making. As a provider, understanding your patients' lifestyle and community can help improve patient care, enrich a culture of health equity, and eliminate social barriers to health. The good news is that when you and your team identify and address NMDOH needs, Community First is ready to assist you.

This guide is designed to:

- 1. Share insight into the health impacts of non-medical drivers of health.
- 2. Screen Members for NMDOH and help you connect them to resources.
- 3. Provide resources for Members diagnosed with chronic diseases, advance the health of soon-to-be and new moms and their newborn babies, and map out ways to improve their social well-being.

Here are some key definitions of terms to enhance understanding.

Health Equity is achieved when no one is disadvantaged from achieving their full health potential due to social position or circumstances. Health inequities are reflected in different average lifespans, quality of life, rates of disease, disability, mortality rates, severity of disease, and access to/quality of treatment.

Health Disparities are avoidable. Unfair differences in health status between segments of the population negatively affect groups of people who have experienced greater social and/or economic obstacles due to:

Race	Literacy	Culture	Gender Identity
Ethnicity	Income Level	Age	Disability
Education	Language	Sexual Orientation	Geographic Location



CULTURAL COMPETENCY

Cultural competency is the ability to understand, communicate, and interact with individuals across many cultures. Building better cultural competency includes actions such as:

- Developing a positive attitude towards cultural differences.
- Increasing knowledge of different cultural practices and world views.
- Evolving skills for communication and interaction across cultures.

Cultural competency affects beliefs about the human body and disease. Understanding your patients' cultures is important for delivering health care services to patients and communicating better with their families. Culture affects health care by informing:

- Concepts of health and healing.
- Attitudes towards health care providers and teams.
- How illness and diseases are perceived.

THE HEALTH IMPACTS OF SPECIFIC NMDOH

Addressing NMDOH can help patients live healthier lives. Community First focuses on four specific non-medical drivers of health, although our Members may experience alternative and/or increased barriers.



Education. Low literacy goes beyond the ability to read prescription labels or complete information forms. It encompasses all the skills necessary to gather, understand, and process basic health information and services to make important health decisions.

For individuals, low literacy is associated with decreased use of preventive screening services, decreased compliance with medication and treatment plans, increased use of emergency services, and increased hospitalization.

Community First recognizes that education for our Members is essential. We partner with a local organization that offers avenues to obtaining associate and bachelor degrees. We also offer scholarship opportunities through our Empowering Pathways scholarship program, offering funding and resources needed on the pathway to a new career, financial stability, and a better future.



Food Insecurity. Food insecurity occurs when people have limited or uncertain access to enough food, especially non-processed foods like fresh fruit, vegetables, and lean protein. Food insecurity can lead to Type II diabetes, high blood pressure, heart disease, and obesity. In children, those at risk of hunger are more than likely to be in poor health and struggle in school.

In 2021, 14% of Community First Members living in the Bexar Service Delivery Area (Atascosa, Bexar, Bandera, Comal, Guadalupe, Kendall, Medina, and Wilson Counties) faced food insecurity, with an average of 54% of Members below the SNAP threshold of 165% of the poverty level. In order to address this problem, Community First has established 50 free-standing, mostly outdoor food pantries across its service delivery area in both rural and urban communities to ensure all have access to food without barriers.



Housing Instability. Housing instability refers to when an individual or family does not have stable or adequate living arrangements. This includes the risk of eviction or because one lives in an unsafe or uncomfortable condition. To be physically and mentally healthy, people need a safe and stable place to sleep at night. Health issues associated with housing instability for adults include issues like mental distress, depression, difficulty sleeping, reduced access to care, and postponing necessary medications. Health risks for children include asthma, low weight, developmental delays, and increased risk of lifetime depression. Approximately 33% of all emergency department visits are made by individuals who experience chronic homelessness.

According to Community First's Member referral platforms, needs such as paying for utilities, emergency shelter, and assistance with long-term housing were in the top 10 most requested resources. To assist Members with this tremendous need, Community First has partnered with many community-based organizations that provide education and resources.



Transportation. A lack of transportation can impact an individual's ability to health care access and can lead to poorer management of chronic illnesses. Transportation issues can lead to missed or delayed appointments, failure to fill prescriptions, or skipping a follow-up appointment following an emergency department discharge. It also means an increase in overall health care costs. Community First works with a non-emergency medical transportation (NEMT) vendor to assist Members in attending their annual appointments and getting their medication refills. This service can also provide specialized equipment and additional care for Members who require a stretcher, have a disability, or are recovering from an injury or surgery.

IMPORTANCE OF PROVIDERS ADDRESSING NMDOH

Rising Health Care Costs. In 2019, the total national health care expenditure was \$3.8 trillion, representing about 18% of the economy. In more recent years, social barriers have been a topic of concern as these barriers have an impact on rising health costs. Since 2012, individuals experiencing housing insecurity have used the emergency room three times more than others; this has increased 80% over the last decade. Food insecurity can lead to mental health issues and chronic conditions such as diabetes, among other health issues. Therefore, helping patients remove social obstacles can lead to improved health outcomes.

Patient Longevity. An article in the 2016 Journal of the American Medical Association (JAMA) observed that, in the U.S., the life expectancy of 40-year-old man in the poorest 1% of income distribution was reduced by 15 years compared to males in the richest 1% and for females the variance was 10 years. This fact strengthens the belief that poverty and health outcomes are linked.

Patient Satisfaction. In 2019, a Kaiser Permanente study wrote that Americans overwhelmingly want their providers to ask them about and help address their social needs.



About 92% of patients surveyed want their provider to ask about their access to food and meals.



Around 83% of patients surveyed believe it is appropriate for providers to ask them about affordable housing.



Close to 50% of patients surveyed stated they would go to their doctor if they needed community resources to address a social need.

“Incorporating services that address unmet NMDOH needs within the health care system represents an emerging opportunity to improve population health outcomes to deliver greater value for U.S. health spending.”

-Baker Institute for Public Policy

NMDOH SCREENING & PARTNERSHIPS

Community First screens its Members for NMDOH, especially those at high risk or with chronic conditions, but we cannot do this work alone. Providers and their offices build long and trusting relationships with the patients they care for. This is an ideal opportunity for a care team to screen Members, talk to them about their social needs, and coordinate with Community First to assist in improving Member health.

IDC-10-CM Z Codes

As a provider, you can do this by screening for IDC-10-CM Z Codes and sharing these codes with Community First. Z codes are non-billable codes that can offer insight into population management priorities. According to CMS guidelines, Z codes should only be reported as a secondary diagnosis. Because this information represents social information, rather than medical progress, they may also be based on medical record documentation from clinicians involved in a patient's care who are not the patient's primary care provider.

Once these codes are shared with Community First, internal staff can then follow up with our health plan Members and provide referrals to community-based organizations and/or internal disease management programs.

When trust is established, open communication between a patient and their physician can occur leading to the most effective diagnosis, treatment, and ongoing care.



RESOURCE REFERRAL GUIDE

SOCIAL WELL-BEING

211

Provides community information and referrals to social services for everyday needs and in times of crisis. Calls are free and confidential. Dial 211 from any phone, 24 hours a day, 7 days a week.

Phone: 211 | **Website:** 211.org

Clarity Child Guidance Center

The only nonprofit mental health treatment center for kids ages 3 to 17 in South Texas. Works with families to get much needed treatment regardless of their ability to pay.

Phone: 210-616-0300 | **Website:** ClarityCGC.org

Charlie Health

Provides evidence-based, virtual intensive outpatient programs to set clients and families up for long-term success through a combination of family and individual therapy and support groups.

Phone: 1-866-935-3297 | **Website:** CharlieHealth.com

Family Service

The oldest human service nonprofit in San Antonio with programs designed to address NMDOH through a trauma-informed care lens.

Phone: 210-299-2400 | **Website:** Family-Service.org

The Trevor Project

Offers trained counselor support for LGBTQ youth in crisis who may be feeling suicidal or are in need of a safe, and judgment-free place to talk 24/7.

Phone: 1-866-488-7386 | **Website:** TheTrevorProject.org

FOOD INSECURITY

Community First Food Pantries

Community First Food Pantries help fight against food insecurity by providing access to food and other non-perishable items without barriers in free-standing, mostly outdoor, weatherproof food pantries.

Phone: 210-227-2347 | **Website:** CommunityFirstHealthPlans.com/Food-Pantry

House of Neighborly Service

Provides on-site meals and meal delivery to seniors in the 78207 area code.

Phone: 210-434-2301 | **Website:** HNSToday.org/Food-Security

Meals on Wheels

Provides no-cost or low-cost home-delivered meals to seniors. Focuses on caring for individuals whose diminished mobility makes it hard to shop for food, prepare meals, or socialize with others.

Phone: 210-735-5115 | **Website:** MOWSATX.org

San Antonio Food Bank

Fights hunger in Southwest Texas through food distribution, programs, education, and advocacy.

Phone: 210-431-8326 | **Website:** SAFoodBank.org

DISABILITY

Brighton Center

Provides help at the right time to children of all abilities, ensuring they are equipped with the right resources and tools to succeed.

Phone: 210-826-4492 | **Website:** BrightonSA.org

Exceptional Kids, LLC

Resource guide for the Bexar County service area special needs community.

Phone: 210-867-7202 | **Website:** ExceptionalKidsTexas.com

Project MEND

Improves the quality of life for individuals living with disabilities and illness through the refurbishment, reuse, and distribution of medical equipment and other assistive technology for individuals who cannot afford the items they need or are faced with gaps in their insurance coverage.

Phone: 210-223-6363, ext. 3 | **Website:** ProjectMend.org

SUBSTANCE USE

Rise Recovery

Helps teens, young adults, and families to overcome the effects of drugs and alcohol and partner with the community in education and prevention.

Phone: 210-227-2634 | **Website:** RiseRecovery.org

UTILITIES

SAWS Uplift Program

The SAWS Uplift Program is San Antonio Water System's affordability and assistance program that provides 14 different initiatives to help income-qualified residential customers reduce their water bills and access plumbing repair support.

Phone: 210-233-2273 | **Website:** SAWS Uplift – [Helping Neighbors in Need](#)

CPS Energy REAP/ Utility Assistance

The Residential Energy Assistance Partnership (REAP) is a CPS Energy, City of San Antonio, Bexar County program that provides up to \$480 in annual utility bill assistance to eligible low-income San Antonio and Bexar County residents

Phone: 210-335-3666 | **Website:** [REAP](#)

PROUD TO BE LOCAL, PROUD TO BE YOUR PLAN

Community First is committed to supporting our providers and health care systems by working together to create innovative solutions to address social barriers experienced by our Members and the local community at large.

We are doing this by:

Impacting lives. Over the past 12 months, Community First has invested over \$500,000 in community-based programs and sponsorships that directly impact Members in the areas of food security, access to transportation, educational attainment, and housing stability, including more than \$150,000 in useful giveaways to our Members in the community.

Developing NMDOH courses for continuing medical education (CME) credit. These courses focus on cultural competency and expand upon the content in this guide to provide health care providers with more comprehensive knowledge regarding NMDOH.

