A key issue facing the American healthcare system is the impact of social needs, social risks, and social determinants of health (SDoH) in healthcare. Each of these “social” terms brings a slightly different focus to forces that can impact communities and their members. For employers, understanding these impacts within the context of a population health strategy can foster a broader approach to closing gaps in care and ensuring access to services across racially, culturally and ethnically diverse employee populations.

To learn what employers need to begin their journey to more effectively addressing social needs, social risks, and social determinants, the Centers for Disease Control and Prevention’s (CDC) Office of the Associate Director for Policy and Strategy, the National Network of Public Health Institutes (NNPHI), and the National Alliance of Healthcare Purchaser Coalitions (National Alliance) began a collaboration in late 2020 to engage employers and regional business coalitions through the project, “Leading by Example and Moving Upstream Together.” The goal was to identify options for developing a process model to enhance employee and community well-being.

This Action Brief is a summary of the project; the full project report is found here.

**Defining Health Disparities**
Health disparities are preventable differences in mortality, life expectancy, burden of disease, mental health, prevalence of the uninsured/underinsured, and lack of access to care among socially disadvantaged racial, ethnic, and other groups and communities. Learn more from the CDC resources provided on the next page.
1. **Gather organizational and community-based data to identify and address how SDoH and social needs drive health disparities among employees, their families, and communities:**

   **a.** Examine claims data to identify disparities by condition prevalence, quality of care, and utilization benchmarks at local, state and national levels.

   **b.** Compare the social needs of employees and their covered family members with community-level information about housing, income, education and other indicators to determine the top barriers to achieving optimal health and well-being.

   **c.** Identify quality, cost, experience and equity benchmarks and set performance targets.

2. **Ensure that social needs are systematically addressed through benefits design in ways that remove barriers and address gaps:**

   **a.** Engage a diverse set of partners and key advisors, including employees at all levels of the organization, to ensure inclusive benefits plan design that removes barriers to care.

   **b.** Create a health equity vision and mission for the workforce that is integrated into your health and well-being strategy and your organization's broader diversity, equity and inclusion strategy.

   **c.** Engage in community efforts to address health inequities and SDoH that align with your organization's vision.

3. **Collaborate with health plans, other vendors, and community partners to work toward shared health equity goals:**

   **a.** Engage health plans, other vendors, and community partners in your equity strategy with performance and cultural competency metrics (EAP, PBM, data warehouse, direct contracts, point solutions).

   **b.** Add contract language that provides transparent access to population health data, including race and ethnicity data.

   **c.** Reward partners that deliver value and equity improvements.

4. **Engage and support employees in ways that foster health equity:**

   **a.** Help employees understand that all patients deserve personalized, respectful care that meets their unique needs.

   **b.** Seek input from employees from diverse racial, cultural and ethnic groups to help create culturally tailored messages.

   **c.** Provide culturally and linguistically appropriate educational communications about total person health and ways to prevent/manage illness and chronic conditions.

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Employers are increasingly recognizing that as part of efforts to address population health, they must include a more holistic approach that begins to address factors affecting the workforce outside of workplace hours—that is, their employees’ social needs, social risk factors, and social determinants of health.

The National Alliance is expanding its efforts to ensure health, equity and value for all healthcare stakeholders by building public partnerships with organizations such as the CDC and NNHPI, so employers can leverage key strategies that support people where they live, work and play. The insights and lessons from “Leading by Example and Moving Upstream Together” have built a strong foundation from which to consistently address social needs and social risks. Building thriving workplaces where people are motivated, engaged, healthy and productive is possible through strategic planning and continuous improvement.
RESOURCES

- CDC Resources
  - National Center for Chronic Disease Prevention and Health Promotion
  - Social Determinants of Health: Know what Affects Health
  - Achieving Health Equity by Addressing the Social Determinants of Health
  - Racial and Ethnic Approaches to Community Health Program (REACH)
  - Health Impact in 5 Years (HI-5)
  - 6|18 Initiative: Accelerating Evidence into Action
- A New CSR Frontier: Business and Population Health
- Build Healthy Places Network
- Chief Executives for Corporate Purpose
- Community Commons
- Good Health Is Good Business
- HWHC: Healthy Workplaces Healthy Communities
- National Academies of Sciences, Engineering, Medicine: Community-based Solutions to Promote Health Equity in the US

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