ADDRESSING SOCIAL DETERMINANTS OF HEALTH

In her State of the State Address and FY 2021 budget proposal, the Governor highlighted the need to address social determinants of health and how these factors impact our residents in rural and urban communities.

BACKGROUND

Social determinants of health are the factors outside of the health system that influence our health. Where we are born, live, learn and work plays a role in our health and risks, including chronic disease and life expectancy.

For example, income often impacts a person’s and family’s ability to access healthy foods and increases the likelihood of obesity and heart disease. A person’s job stability, quality of education, social and community environment, access to health care and neighborhood also influence their overall health. Infant mortality rates and risk factors related to substance use, malnutrition and chronic illness are tied to social determinants of health. Serious health disparities also exist based on income, race, gender, disability status and neighborhood.

Programs to address these aspects of health exist in some communities, but efforts to achieve better health equity vary and often remain siloed. The financial burden of medical expenses on individual families and the strain on our health care system will grow unless we turn the tide.

To build a healthier Michigan for every resident regardless of income, race, neighborhood, and more, we must address some of the common root issues that lead to chronic and preventable conditions.

PROPOSED ACTION

A person’s health and life expectancy should not be determined by their zip code. The governor proposed a plan that will bring organizations together by region to connect health care and social services, so that individuals can have their needs addressed in a coordinated manner, and so systems can be transformed to serve entire communities more effectively.

Half of the investment supports local partnerships, helping ensure that every part of the state can benefit from this coordination. Funding will be used to create and sustain partnerships that will assess local health care needs, identify major gaps in care, and drive efforts to use existing funds to address those needs.
The other half of the investment supports launching shared health and social needs screening and referral tools that make it easy to identify individuals’ needs and connect them with relevant services. All doctors know how to refer a patient to a specialist, but through this program, doctors will now be able to just as easily refer a patient to the food bank or housing assistance. Today, different plans, providers, and regions use different tools, with little effort at state coordination, resulting in needless waste and inefficiency. While the new screening and referral tools will not be mandatory, they will provide an opportunity for shared savings and common infrastructure.

These investments build on the success of our five existing Community Health Innovation Regions (CHIRs), screening over 300,000 Michiganders in the last two years for social needs.

Ways these groups have transformed the lives of individuals and changed community conditions include:

- **Establishing new services**: One region established a Community Living Room program that has diverted unnecessary emergency room use for mental health crisis. Through this program, over 88% of patients were able to be discharged back to their homes, producing cost savings and a healthier community.

- **Educating residents**: Another region helped 275 individuals understand the criminal record expungement process so they could become employed. 74% of the people who attended one of the expungement clinics reported they had been denied employment because of their record, perpetuating the cycle of poverty.

- **Connecting systems**: Across our state, facilities frequently discharge people into homelessness, exacerbating the health conditions of our most vulnerable populations. Regions have been working hard to coordinate discharge policies from hospitals, in-patient treatment centers, and the justice system to ensure residents do not fall between the cracks during these transitions.

- **Changing policies and procedures**: Regions are working to modify intake policies in substance use treatment centers to enable coordination with housing programs, in order to ensure people do not lose their housing while working to recover from addictions.

$11.6 million, including $7.1 million in General Fund dollars.