CAC Member's Role in Addressing the Social Determinants of Health

The social determinants of health

Research shows that a person's health is affected by many things. This includes our genetics, our own behaviors, the medical care we get, as well as social and environmental influences. Studies suggest that our health behaviors (for example, smoking, diet, and exercise) and social and environmental influences have the largest impact on health outcomes. These social and environmental influences are commonly known as the social determinants of health. Here are some examples of social determinants of health:

| Economic Stability | Neighborhood and Physical Environment | Education | Food | Community and Social Context |
|-----------------------|---|------------------|-------------------|---------------------------------|
| Employment | Housing | Literacy | Hunger | Support systems |
| Income | Transportation | Early childhood | Access to healthy | Community |
| Expenses | Safety | education | food options | engagement |
| Debt | Parks | Higher education | | Discrimination |
| Medical bills | Playgrounds | | | |
| | Accessibility | | | |

A greater focus on the social determinants of health

Over time, OHA has changed policies to support, encourage and allow more CCO focus on SDOH. Some changes include:

- Spending more on the social determinants of health, health equity and health disparities in communities
- Aligning community health assessment and community health improvement plans for more improved health outcomes
- Strengthening meaningful engagement of Tribes, diverse Oregon Health Plan (OHP) members and community advisory councils (CACs)

How CAC members can address the social determinants of health

With additional focus on the social determinants of health, OHA created two requirements for how CCOs must involve their CACs in addressing SDOH.

- CCOs must have a role for their CACs in CCO health-related services community benefit initiative spending decisions.
- CCOs must have a role for their CACs in Supporting Health for all through Reinvestment (SHARE) Initiative spending decisions.

Continue onto the next page to learn more about each of these programs.



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Health-related services (HRS) are supplemental to OHP covered benefits and an option for CCOs to improve member and community health. There are two types of HRS:

1) Community benefit initiatives (CBI) are community-level investments that must include OHP members, but also can benefit the larger community. CCOs must have a method to promote alignment between HRS CBI spending and the health priorities in the CCO's community health improvement plan (CHP). Examples include accessible park improvements for low-income neighborhoods, active transportation improvements (like bicycling and safe routes to schools), and community food access through a farmer's market.

<u>2) Flexible services</u> are services or items for CCO members. Examples include rental assistance, food boxes and produce prescriptions like Veggie Rx, air conditioners or air filters, and athletic shoes or clothing to support physical activity.

The SHARE Initiative was created in 2018. It is a legislative requirement that CCOs spend a portion of their profits or extra revenue on social determinants of health and equity. SHARE Initiative investments support community-level efforts that can include OHP members and the larger community. Spending must:

1) Fall within the following areas and include spending toward a statewide housing priority:



Neighborhood and built environment



Social and community health



Education



Economic stability

- 2) Connect to community priorities in the CCO's CHP
- 3) Go to community partners working on social determinants of health and equity efforts

Here are some examples of how CACs have played a role in these two programs:

- CAC developed scoring criteria or a scorecard to evaluate project submissions
- CAC offered suggestions for organizations to fund
- CAC developed communication strategies to notify the community about funding opportunities
- CAC reviewed project submissions from organizations and provided feedback to the CCO
- CAC reviewed progress reports from funded projects

These spending programs connect to CCO CHPs, which are based on the CCO's community health assessment (CHA). CAC's have an important role in guiding the CCO's CHA and CHP.

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