

Background

On April 4, 2022, the Partnership to Align Social Care held a virtual event, *The Future State of Community-Technology Collaboration to Address Social Determinants of Health for Healthcare Organizations*. More than fifty leaders from government, health plans, health systems, community-based organizations (CBOs), and social care referral technology platforms discussed their shared interest in expanding the availability of social care services through integration with healthcare. The goal of the convening was to define the elements of a “future state” for the organized delivery of social care services, including care coordination, as part of a whole-person approach to health. Special attention was devoted to the ways in which CBOs and others who represent the community, including those who receive services, must be involved in the design and governance of new social care delivery systems.

As a first step toward achieving this goal, participants discussed and coalesced around promoting the following core principles that should guide the design, governance, and operation of new social care delivery systems.

Social Care Core Principles

- 1. Social conditions significantly affect health and wellbeing, at the individual and population levels, and contribute to health inequity in the US.**
 - All people experience social conditions, including, but not limited to, income, employment, education, food security, housing, transportation, safety and social support.
 - These social conditions, or social determinants/drivers of health (SDOH), can significantly affect an individual’s health and utilization of healthcare services.
 - Unequal social drivers of health contribute to health disparities among populations.
- 2. CBOs provide important social care services that improve health and quality of life, and advance health equity.**
 - Social care services include engagement of individuals and caregivers, assessment of social needs, social care coordination, and delivery of services and supports.
 - Social care services are essential to address social drivers of health, achieve population health goals in value-based care, and improve health equity.
 - CBOs have the experience and expertise of providing social care services in their local communities—they are leaders in the practice arena.
- 3. The integration of social care and healthcare is best managed through a multi-stakeholder health and social care ecosystem (HSC Ecosystem).**
 - CBOs have strong community ties that foster trusting relationships and provide deep knowledge of their community’s strengths, needs, and preferences.
 - The delivery of social care services in connection with healthcare requires new systems to organize the relationships and activities of healthcare payers, healthcare providers, CBOs, and community members.
 - Throughout the country, various stakeholders are creating new systems and structures to facilitate delivery of social care services to individuals identified by the healthcare system. These efforts often occur without including all stakeholders in the planning process.
 - An HSC Ecosystem involves the deliberate design and operation of community-level structures, including the creation of a common set of standards, workflows, technology tools, and payment structures to facilitate the organized delivery of healthcare and social care by multiple organizations within a community.
 - Trust is an essential attribute of any ecosystem and must be cultivated through intentional activities and structures that enable the meaningful participation of all stakeholders.

- An HSC Ecosystem should provide for the involvement of all stakeholders in the design and governance of new structures as early as possible and on an ongoing basis as the structures grow, evolve, and improve.
- 4. CBOs and other community representatives must serve a central role in the design and governance of the local HSC Ecosystem.**
- The HSC Ecosystem must be accountable to the local community being served.
 - Communities vary in how they currently structure social care delivery as well as in their culture, priorities and goals.
 - The design and governance of a local HSC Ecosystem should reflect local culture, priorities, and goals, which is best accomplished by intentionally incorporating a robust Voice of the Community.
 - A diverse body of stakeholders that includes leaders of local CBOs, faith-based organizations, government, and other community institutions (formal and informal) as well individuals receiving social care services best represents the vital Voice of the Community. These representatives should reflect the racial and ethnic makeup of the community and be trusted by community members.
- 5. An HSC Ecosystem requires CBOs to have adequate operational infrastructure to be contracted partners to healthcare organizations.**
- CBOs must have adequate operational infrastructure to partner and contract with health plans/systems. The infrastructure must enable CBOs to function as a business partner to healthcare; develop, negotiate, and operationalize contracts; delineate roles between healthcare and social care organizations; engage in bidirectional data sharing; report activities; receive payment; and engage in quality improvement.
- CBO networks, led by a community hub, are an efficient model to provide operational infrastructure for multiple CBOs, including smaller CBOs, and coordinate their delivery of social care services.
 - A CBO network should have a formal structure (e.g., a community hub) and be locally governed.
 - Public and private investment is necessary to launch and maintain CBO networks/community hubs capable of contracting with multiple healthcare organizations.
- 6. The HSC Ecosystem should fairly compensate CBOs for social care services through blending and braiding of existing funding and new healthcare payment models, consistent with regulations.**
- Current funding of social care services is inadequate to meet community needs.
 - Up-front investment and ongoing payment are needed to establish and sustain a high functioning operational infrastructure.
 - New healthcare payment models are required to ensure an adequate supply of social care services and qualify appropriate services under the Medical Loss Ratio (MLR).
 - All stakeholders should actively assess opportunities for blending and braiding financial resources to ensure long-term sustainability of the HSC Ecosystem.