

Summary of New CMS Rules for Screening SDOHs on Inpatients May/June, 2023

WHEN:

- 2023: Voluntary screening during 2023 with voluntary reporting April 1 – May 15, 2024
- 2024: Required screening starts 1/1/24 with required reporting April 1 – May 15, 2025

WHAT:

- All inpatients of hospitals participating in the IQR reporting system are to be screened for 5 SDOHs (CMS calls HRSNs = health related social needs):
 - food insecurity;
 - transportation;
 - housing;
 - help with utilities;
 - personal safety.

CALCULATIONS:

- **Numerator:** The number of patients admitted to an inpatient hospital stay who are 18 years or older on the date of admission and are screened for all of the five health related social needs (HRSNs).
- **Denominator:** The number of patients who are admitted to a hospital inpatient stay and who are 18 years or older on the date of admission.
- **Denominator Exclusions:** The following patients would be excluded from the denominator:
 - 1) Patients who opt out of screening; and
 - 2) Patients who are themselves unable to complete the screening during their inpatient stay and have no caregiver able to do so on the patient's behalf during their inpatient stay.
- The result of this measure would be calculated as **five separate rates**.

SCREENING TOOL:

CMS does not yet specify the exact verbiage of the questions. Below is the CMS Accountable Health Communities tool ([The AHC Health-Related Social Needs Screening Tool \(cms.gov\)](https://www.cms.gov/ahc)):

Food

Some people have made the following statements about their food situation. Please answer whether the statements were OFTEN, SOMETIMES, or NEVER true for you and your household in the last 12 months.

- *Within the past 12 months, you worried that your food would run out before you got money to buy more.* ○ Often true ○ Sometimes true ○ Never true
- *Within the past 12 months, the food you bought just didn't last and you didn't have money to get more.* ○ Often true ○ Sometimes true ○ Never true

Housing

1. *What is your living situation today?*

- *I have a steady place to live*
- *I have a place to live today, but I am worried about losing it in the future*
- *I do not have a steady place to live (I am temporarily staying with others, in a hotel, in a shelter, living outside on the street, on a beach, in a car, abandoned building, bus or train station, or in a park)*

2. Think about the place you live. Do you have problems with any of the following? CHOOSE ALL THAT APPLY

- Pests such as bugs, ants, or mice
- Mold
- Lead paint or pipes
- Lack of heat
- Oven or stove not working
- Smoke detectors missing or not working
- Water leaks
- None of the above

Transportation

In the past 12 months, has lack of reliable transportation kept you from medical appointments, meetings, work or from getting things needed for daily living? Yes No

Utilities

In the past 12 months has the electric, gas, oil, or water company threatened to shut off services in your home? Yes No Already shut off

Safety

Because violence and abuse happens to a lot of people and affects their health we are asking the following questions (Answers with points: Never 1; Rarely 2; Sometimes 3; Fairly often 4; Frequently 5)

- *How often does anyone, including family and friends, physically hurt you?*
- *How often does anyone, including family and friends, insult or talk down to you?*
- *How often does anyone, including family and friends, threaten you with harm?*
- *How often does anyone, including family and friends, scream or curse at you?*

A score of 11 or more when the numerical values for answers to questions 7-10 are added shows that the person might not be safe.

CMS sites and some recent literature on Inpatient SDOH/HRSN Screening:

- [Accountable Health Communities Model | CMS Innovation Center](#)
- [CMS Framework for Health Equity | CMS](#)
- [SDOHmeasureFAQ \(qualityreportingcenter.com\)](#)
- [Addressing Health-Related Social Needs Via Community Resources: Lessons From Accountable Health Communities \(healthaffairs.org\)](#)
- [Health Care Impacts Of Resource Navigation For Health-Related Social Needs In The Accountable Health Communities Model \(healthaffairs.org\)](#)
- [Health Care Hotspotting — A Randomized, Controlled Trial | NEJM](#)
- [Lessons From Five Years Of The CMS Accountable Health Communities Model | Health Affairs](#)
- <https://jamanetwork.com/journals/jamapediatrics/fullarticle/2803659>
- **CMS Rules:** [Federal Register :: Medicare Program; Proposed Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Policy Changes and Fiscal Year 2024 Rates; Quality Programs and Medicare Promoting Interoperability Program Requirements for Eligible Hospitals and Critical Access Hospitals; Rural Emergency Hospital and Physician-Owned Hospital Requirements; and Provider and Supplier Disclosure of Ownership](#)

Key Partners: Patients - Hospitals – Community-Based Organizations – Research - Advocacy and Policy