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## **SDOH Enhanced Payment Program Overview**

# SDOH Enhanced Payment Program Overview

## Objective

Enhance quality of care through a PCP-driven Enhanced Payment program with a focus on screening members for needs related to social drivers of health (SDOH)

## Member Attribution

Members assigned to in-network primary care providers. **Each member is eligible for the screening incentive up to twice per year.**

## Targeted Services

This Enhanced Payment Program will focus on the completion of SDOH screenings using evidence-based tools, such as the PRAPARE tool.

## Performance Incentive

\$2.00 for screenings that are **NEGATIVE** for SDOH needs, \$5.00 for screenings that are **POSITIVE** for SDOH needs and provision of referrals to appropriate social services organizations. The higher rate for positive screenings reflects the additional work done to refer patients to appropriate resources.

## Requirements for Payout

Providers must report SDOH screening using the appropriate CPT codes, G-codes, and Z-codes

**Eligible CPT codes:** 96160 (Food Insecurities), 96156 (Housing Instability), or 96161 (Transportation Insecurity)

**Eligible G-codes:** G9920 (Screening Performed and Negative) or G9919 (Screening Performed and Positive and Provision of Recommendations)

**Eligible Z-codes:** All Z-codes between Z55 and Z65

## Payout

All payouts for the SDOH Enhanced Payment Program will be paid out as claims are submitted.

# What are social drivers of health?

- Social drivers of health (SDOH) are the nonmedical factors that influence health outcomes.
- These factors can lead to health disparities within communities and poor health outcomes for individuals who have needs around SDOH.
- The World Health Organization estimates that these factors account for 30-55% of health outcomes.



# Z Code Overview

- Z codes refer to ICD-10-CM categories Z55-Z65 and are used to document SDOH needs in patient records
- Each Z code refers to a different social driver of health
- Collecting and documenting Z code data can improve quality of care, care coordination, and patient experience by:
  - Identifying social risk factors and unmet social needs
  - Informing health care and services, follow-up, and discharge planning
  - Triggering referral to social services agencies
  - Tracking referrals between providers and social service agencies

## Exhibit 1. Recent SDOH Z Code Categories and New Codes

### Z55 – Problems related to education and literacy

- Z55.5 – Less than a high school diploma (Added, Oct. 1, 2021)

- NEW** • Z55.6 – Problems related to health literacy

### Z56 – Problems related to employment and unemployment

### Z57 – Occupational exposure to risk factors

### Z58 – Problems related to physical environment (Added, Oct. 1, 2021)

- Z58.6 – Inadequate drinking-water supply (Added, Oct. 1, 2021)

- NEW** • Z58.8 – Other problems related to physical environment

- NEW** • Z58.81 – Basic services unavailable in physical environment

- NEW** • Z58.89 – Other problems related to physical environment

### Z59 – Problems related to housing and economic circumstances

- Z59.0 – Homelessness (Updated)

- Z59.00 – Homelessness unspecified (Added, Oct. 1, 2021)

- Z59.01 – Sheltered homelessness (Added, Oct. 1, 2021)

- Z59.02 – Unsheltered homelessness (Added, Oct. 1, 2021)

- Z59.1 – Inadequate Housing (Updated)

- NEW** • Z59.10 – Inadequate housing, unspecified

- NEW** • Z59.11 – Inadequate housing environmental temperature

- NEW** • Z59.12 – Inadequate housing utilities

- NEW** • Z59.19 – Other inadequate housing

- Z59.4 – Lack of adequate food (Updated)

- Z59.41 – Food insecurity (Added, Oct. 1, 2021)

- Z59.48 – Other specified lack of adequate food (Added, Oct. 1, 2021)

- Z59.8 – Other problems related to housing and economic circumstances (Updated)

- Z59.81 – Housing instability, housed (Added, Oct. 1, 2021)

- Z59.811 – Housing instability, housed, with risk of homelessness (Added, Oct. 1, 2021)

- Z59.812 – Housing instability, housed, homelessness in past 12 months (Added, Oct. 1, 2021)

- Z59.819 – Housing instability, housed unspecified (Added, Oct. 1, 2021)

- Z59.82 – Transportation insecurity (Added, Oct. 1, 2022)

- Z59.86 – Financial insecurity (Added, Oct. 1, 2022)

- Z59.87 – Material hardship due to limited financial resources, not elsewhere classified (Added, Oct. 1, 2022; Revised, April 1, 2023)

- Z59.89 – Other problems related to housing and economic circumstances (Added, Oct. 1, 2021)

### Z60 – Problems related to social environment

### Z62 – Problems related to upbringing

- Z62.2 – Upbringing away from parents

- NEW** • Z62.23 – Child in custody of non-parental relative (Added, Oct. 1, 2023)

- NEW** • Z62.24 – Child in custody of non-relative guardian (Added, Oct. 1, 2023)

- Z62.8 – Other specified problems related to upbringing (Updated)

- Z62.81 – Personal history of abuse in childhood

- NEW** • Z62.814 – Personal history of child financial abuse

- NEW** • Z62.815 – Personal history of intimate partner abuse in childhood

- Z62.82 – Parent-child conflict

- NEW** • Z62.823 – Parent-step child conflict (Added, Oct. 1, 2023)

- Z62.83 – Non-parental relative or guardian-child conflict (Added Oct. 1, 2023)

- NEW** • Z62.831 – Non-parental relative-child conflict (Added Oct. 1, 2023)

- NEW** • Z62.832 – Non-relative guardian-child conflict (Added Oct. 1, 2023)

- NEW** • Z62.833 – Group home staff-child conflict (Added Oct. 1, 2023)

- Z62.89 – Other specified problems related to upbringing

- NEW** • Z62.892 – Runaway [from current living environment] (Added Oct. 1, 2023)

### Z63 – Other problems related to primary support group, including family circumstances

### Z64 – Problems related to certain psychosocial circumstance

### Z65 – Problems related to other psychosocial circumstances

# CPT Codes and G Codes

- To receive the SDOH screening incentive, in addition to documenting appropriate Z codes in patient files, providers must report G codes and CPT codes, if relevant, when submitting claims.
- Use the appropriate G code to document that a screening was completed and the result of that screening:
  - **G9920**: Screening performed and negative (no SDOH needs identified)
  - **G9919**: Screening performed and positive and provision of recommendations (SDOH needs were identified, and patient was referred to appropriate social services organizations)
- Use the appropriate CPT code to improve alignment with SDOH data elements:
  - **96160**: Food Insecurity
  - **96156**: Housing Instability
  - **96161**: Transportation Insecurity

# SDOH Screening Tools

- Providers can use any nationally recognized SDOH screening tool
- Two commonly used tools are:
  - Protocol for Responding to and Assessing Patient Assets, Risk, and Experiences ([PRAPARE](#))
  - The Accountable Health Communities Health-Related Social Needs Screening Tool ([AHC HRSN](#))
  - Additional screening tools can be found on [AHRQ's website](#).



**PRAPARE®: Protocol for Responding to and Assessing Patient Assets, Risks, and Experiences**  
Paper Version of PRAPARE® for Implementation as of September 2, 2016

<b>Personal Characteristics</b>			<b>8. Are you worried about losing your housing?</b>		
1. Are you Hispanic or Latino?			Yes <input type="checkbox"/> No <input type="checkbox"/> I choose not to answer this question <input type="checkbox"/>		
2. Which race(s) are you? Check all that apply			Yes <input type="checkbox"/> No <input type="checkbox"/> I choose not to answer this question <input type="checkbox"/>		
Asian <input type="checkbox"/>		Native Hawaiian <input type="checkbox"/>		9. What address do you live at?	
Pacific Islander <input type="checkbox"/>		Black/African American <input type="checkbox"/>		Street: _____	
White <input type="checkbox"/>		American Indian/Alaskan Native <input type="checkbox"/>		City, State, Zip code: _____	
Other (please write): _____				<b>Money &amp; Resources</b>	
I choose not to answer this question <input type="checkbox"/>				10. What is the highest level of school that you have finished?	



## AHC HRSN Screening Tool Core Questions

If someone chooses the underlined answers, they might have an unmet health-related social need.

### Living Situation

1. What is your living situation today?<sup>3</sup>
  - 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?<sup>4</sup>

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

High school diploma or GED <input type="checkbox"/>	High <input type="checkbox"/>	I choose not to answer this question <input type="checkbox"/>
current work situation?		
Part-time or temporary work <input type="checkbox"/>	Full-time work <input type="checkbox"/>	employed but not seeking work (ex: ed, disabled, unpaid primary care giver) <input type="checkbox"/>
to answer this question <input type="checkbox"/>		

# The SDOH Screening Process



\*Note: This screening can be conducted verbally by provider staff or by providing the patient with a printed copy of the screening tool to complete.



# How the math works

Measure	Incentive Amount	Number of Screenings	Incentive Payment Earned
Screening performed and negative	\$2.00	25	\$50.00
Screening performed and positive and provision of recommendations	\$5.00	27	\$135.00
<b>Total Incentive Payment</b>			<b>\$185.00</b>

# Frequently Asked Questions

- When will the SDOH Enhanced Payment Program launch?
  - January 1, 2025
- I'm a specialist. Do I qualify for the SDOH Enhanced Payment Program?
  - Not at this time. We are currently only rolling this program out to PCPs.
- Is there a cap on how many times a patient can be screened?
  - Patients may be screened as many times as needed per year, **but only two screenings per patient per year will be eligible for enhanced payment.** Providers will need to review patient records to determine whether a patient has been screened twice already.