Social Determinants of Health: Social Needs Screening & Referral

Link to OHA Technical Specifications

Who: All patients assigned to the CCO who are continuously enrolled for at least 180 days in the year.

Why: In recent years, recognition has grown of the profound impact social factors like income, environmental conditions and racism have on a person's health. The goal of the Social Needs Screening and Referral measure is that CCO members have their social needs acknowledged and addressed in an equitable and trauma-informed way.

What:

This measure seeks to assess CCOs' action plans to ensure social needs screenings and referrals are implemented in an equitable and trauma-informed manner. This measures the percentage of CCO members screened and, as appropriate, referred for services for three domains: (1) housing insecurity, (2) food insecurity, and (3) transportation needs.

The measure will report on 3 rates. In 2026, all three rates are report-only. Starting in 2027, rates 1 and 3 will be benchmarked.

- Rate 1: The percentage of members from the OHA sample who were screened for each domain (housing, food, transportation) using an OHA approved screening tool
- Rate 2: Of the sample population screened, the percentage of members who screened positive for any of the three domains
- Rate 3: Of the members who screened positive, for each identified need, at least one referral was made. Please note that these are referrals, **not** closed loop referrals

How:

The CCO will report the percentage of screened CCO members through hybrid measure reporting. The data for this component will be pulled using a variety of sources, such as:

- **MMIS/DSSURS** – OHA's repository of claims where codes represent identified social needs.
- **EHR** – we can work with your organization to build this reporting capacity.
- **Community Information Exchanges (CIE)** – CareOregon is supporting the utilization of the UniteUs platform.

2026 Changes: Component 1 is retiring starting in 2026. The measure will just include what was known in previous years as component 2. This is the member-level reporting sample. For the foreseeable future, this metric will be a sample-reporting metric as opposed to moving to full population. For more details, please refer to the OHA technical specifications at SDoH Technical Specs, page 14.

Note on approved OHA screeners: A list of OHA approved screeners may be found here on the OHA website. OHA expects new tools to be added and will be reviewing new SDoH screening tools, annually. Please reach out to your Innovation Specialist or Quality Improvement analyst to discuss any screening tools that your clinic would like to submit to OHA for an exemption.

Performance Measure Set: ☒CCO Incentive ☐Medicare Star Rating
Quality Measurement Type: ☐Structure ☒Process ☐Outcome ☐Patient Experience
Data Types: ☒Claims ☒Chart Documentation ☒eCQM ☐Other
State Benchmark: Reporting Only with 90% completeness threshold