

December 23, 2020

## By electronic submission

The Honorable Donald Rucker, M.D.

National Coordinator for Health Information Technology
U.S. Department of Health and Human Services
330 C Street SW, 7th Floor

Washington, D.C. 20201

Re: The Gravity Project's Submission To Include Social Determinants of Health (SDOH) in the U.S. Core Data for Interoperability, Version 2, for Better Care and Better Health Nationwide

Dear Dr. Rucker:

AcademyHealth welcomes the opportunity to provide input to the Office of the National Coordinator on behalf of the Gravity Project's recent submission to include social determinants of health in the U.S. core data for interoperability. We are the professional home of more than 3,000 health services researchers, policy experts, and practitioners, and we strongly support the production, dissemination, and use of evidence to inform policy and practice. Our membership is highly engaged with research on racial/ethnic disparities that has helped to shape and produce the evidence base on the role of social determinants in predicting individual and population-based health outcomes as well as the healthcare costs associated with social and economic risks. We are aware of the limitations of the current data infrastructure for health services research and population health analytics and we applaud the work of the Gravity Project to strengthen the research community's capacity for data-sharing and interoperability by introducing standardized data elements for SDOH.

The Gravity Project grew out of recognition by a broad group of stakeholders, including AcademyHealth, that a coordinated strategy for achieving standardized data for SDOH capture in electronic health record (EHR) systems was urgently needed. AcademyHealth's Vice President for Evidence Generation and Translation, Margo Edmunds, PhD, FAMIA, provided strategic advice in early meetings with key stakeholders during the planning stages for the Project and has served as a member of its Strategic Advisory Committee as the Project has evolved.

Since its creation, the Gravity Project has provided critical leadership in convening appropriate stakeholders and coordinating a structured, efficient, and comprehensive approach to:

- Understand the value and use of SDOH data for clinical care and population management;
- Analyze gaps in existing terminology and codes used to represent SDOH-related activities in clinical delivery settings;
- Develop standard terminology, vocabulary, and codes to refer to and implement SDOH concepts in the EHR context.





Experts have long known that social and environmental determinants of health explain most of a person's and population's health status. For the past nine months, the COVID-19 pandemic has highlighted this reality daily across the nation. The Gravity Project's submissions would add critical domains such as food insecurity, housing instability, transportation insecurity, social isolation, and stress to the USCDI, integrated with core clinical activities such as assessments, diagnoses, interventions, and outcomes. Increasing the specificity of data in these domains will not only improve patient care and the care experience for providers and patients but also will greatly improve the quality of data used to track, predict, and eliminate health disparities.

Through AcademyHealth's previous work leading the AHRQ-funded Electronic Data Methods Forum, we became acutely aware of the variability of EHR data in clinical settings and the challenges in aggregating and integrating data in service of large, multi-sector and multi-site data efforts to help address fundamental questions of policy and practice. Standards for reporting SDOH will not only provide the data needed to drive improvements in patient care, but they will enable a clear record and justification for future financing based on careful health services and policy research and analysis.

Thank you for the opportunity to provide these comments for consideration. AcademyHealth looks forward to working with ONC and with our colleagues at Gravity Project and other stakeholders to achieve the national policy goals of HHS as articulated in the Triple Aim.

If you have any questions, please feel free to reach out to Margo Edmunds, PhD.

Sincerely,

Lisa Simpson, MB, BCh, MPH, FAAP President and Chief Executive Officer

Cc: Steven Posnack, Deputy National Coordinator for Health Information Technology Elise Anthony, Executive Director, Office of Policy

