

Food Security Data Necessities: The Basics

Presented by Dr Sarah DeSilvey

Agenda

- Why is data documentation important?
- What is Gravity Project?
- What types of health/social care data are there?
- What kinds of claims data are there?
- Why is documenting in claims so important?
- What are the opportunities for food security experts, such as you!, to be language makers?
- Who are your allies in this space?

Why is data documentation important?

- In an ever increasingly data oriented world, data documentation is way to make things **visible**
- In the world of addressing inequities, making social concerns, and social labor visible is a matter of social justice
- Of course *there are risks of being visible!*

- But at heart, addressing the risk of invisibility by clearly telling the story of people's concerns and the labor and actions of the community that aims to helps them is key to care, research, resource allocation, and equitable structural solutions

The Gravity Project



- Launched in 2019, Gravity Project is a national consensus initiative that has the charter to develop the data and data standards to address the social determinants of health
- Mission: Advance and promote equitable health and social care by leading the development and validation of consensus-driven interoperability standards on social determinants of health.



The Gravity Project



- **Develop data standards** to represent and exchange patient level social risk data documented across four clinical activities:
 - Screening/Assessment
 - Diagnosis,
 - Patient-Centered Goal setting, and
 - Treatment/Interventions.
- **Test and validate** standardized social risk data for use in patient care, care coordination between health and human services sectors, population health management, public health, value-based payment, and clinical research.



Core Healthcare Data Types (green means claims \$)

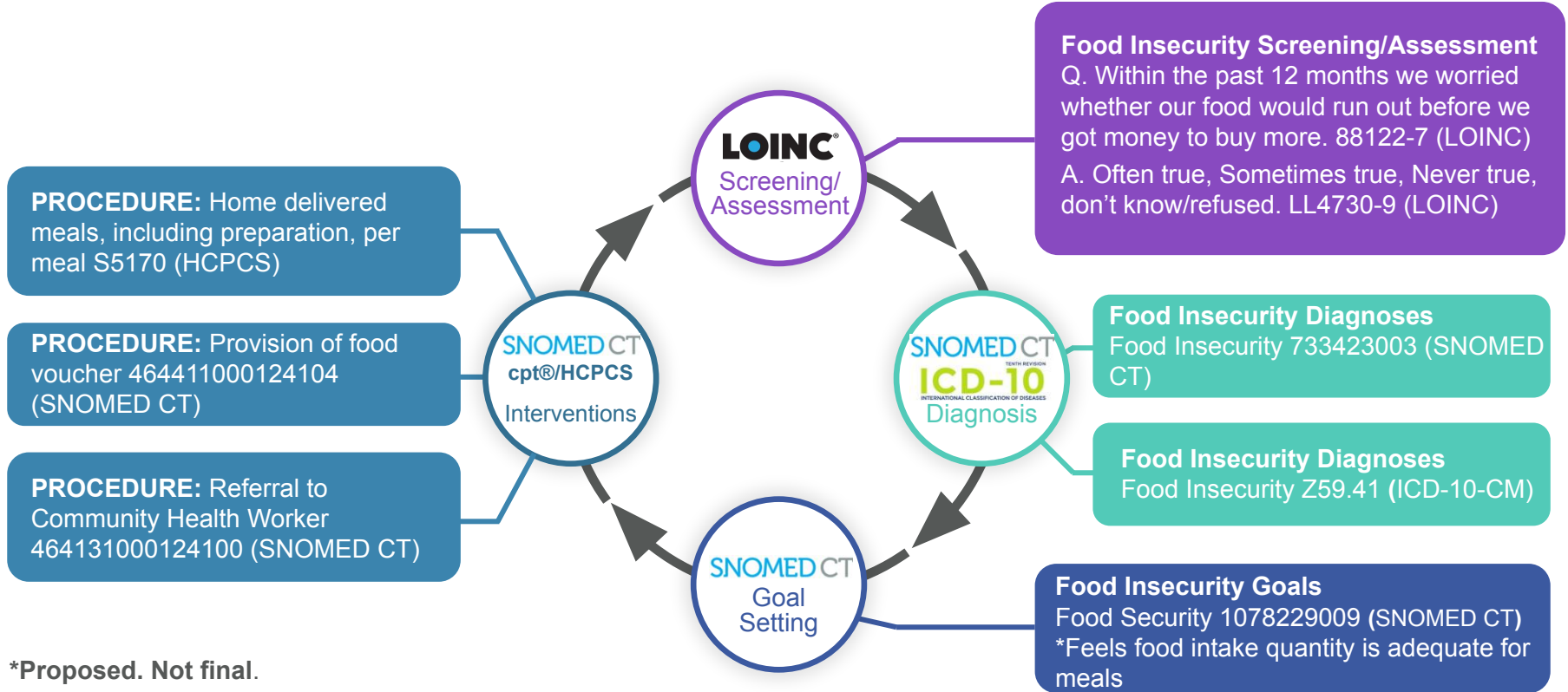
- LOINC®-
 - Questions and Their Answers: Labs > results, Screening Instruments (Hunger Vital Sign™)
- **ICD-10-CM**
 - The US extension of the WHO “International Statistical Classification of Diseases and Related Health Problems” (ICD). CM = “Clinical Modification.” A US focused adaptation to address further diagnostic granularity.
- **SNOMED CT**
 - An international terminology. Defines common terms *for basically everything*: Medical, Family, and Social History; Patient and Provider Goals; Problems and their Interventions, (And Assets/Protective Factors Too!)
- **CPT® (aka Level I HCPCS)**
 - American Medical Association- a uniform language for coding “medical” services and procedures
- **HCPCS Level II**
 - Center for Medicare and Medicaid Services- a standardized coding system that is used primarily to identify products, supplies, and services not included in the CPT codes

Core Social Care Data Types

- 211 LA Taxonomy
 - The North American standard for indexing human services resources
 - *In Gravity Project work key terms from the healthcare interventions set map to 211 LA terms*

How do we tell
people's stories in
healthcare data?

Example: Gravity Food Insecurity Terminology



*Proposed. Not final.

The Story...

A patient with a permanent disability newly living in supported housing presents to the care setting. **They are screened for food insecurity using the Hunger Vital Sign™. The screening was positive.** Under further discussion **the patient identified food insecurity as a concern they wanted to address;** it was just too hard getting by on social security alone. A care plan was crafted and the patient stated that just **“having enough food” would be good enough goal as they often go hungry.** The team member **referred the patient to a community health worker** to help with coordination, and **presented the patient with a food voucher.** In coordination it was determined **the person was eligible for home delivered meals based on housing and first deliveries arrived the following week.**

Why is “claims data” so significant?

- **Claim-** A request for payment for services and benefits received
- **Claims Data-** Also known as administrative data, is information collected on millions of clinicians’ appointments, bills, insurance, and other patient-provider communications directly from notes made by the health care provider, and happens at the time patient sees the clinician.
- *The electronic **claim** (ebill) travels seamless between clinicians, payers (both public and private) and those who offer services in clinical and community settings to assist patients, in order to facilitate reimbursement*
- The flow also enables use for research and population health analysis

A Pause to Define Terms

- *“those who offer services in clinical and **community settings**”*
 - A nurse practitioner
 - A nutritionist
 - A social worker, etc

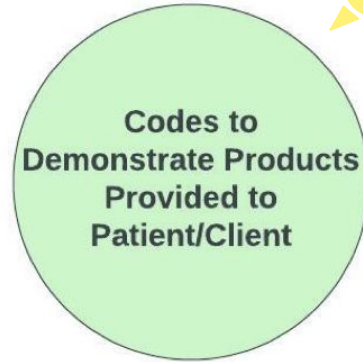
AND

 - A home delivered meal preparer
 - A food bank
 - The farmers market
 - A medically tailored meals service
 - A vegetable prescription service
 - A farmer?, etc
- **Service Provider?**

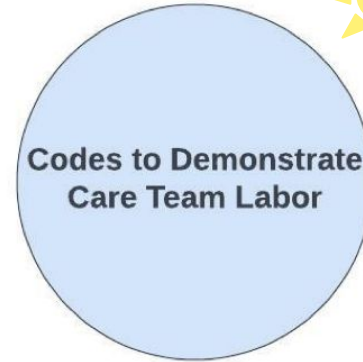
Opportunities in cpt[®] and HCPCS



**HCPC and CPT
Category II Codes-
Travel in Claims**



**HCPC and CPT
Codes- Travel in
Claims**



**HCPC and CPT
Codes- Travel in
Claims**

Codes to Demonstrate Products and Services

- What we have:
 - Data to Demonstrate Products and Services
 - S5170 (HCPCS)- Home delivered meals, including preparation; per meal
 - Data to Demonstrate Care Team Labor
 - 96160 (cpt®) - “Administration of patient-focused health risk assessment instrument (e.g., health hazard appraisal) with scoring and documentation, per standardized instrument,” *(caution with using cpt® in non-clinical settings unless with payer arrangement and license)*
- What we **do not** have:
 - Data to Demonstrate Products and Services
 - Medically Tailored Meals; Vegetable Rx; Grocery Bags/Boxes; Farmers Market Vouchers, +
 - Data to Demonstrate Care Team Labor
 - Coordination, Interpretation, +



The stories we are not able to consistently tell...

- Of the critical labor of community health workers and community based organizations
- Of the community programs that provide farm to clinic food supports
- Of the nutritious food boxes linked to improved diabetes management
- Of Medically Tailored Meals and their effect on health and readmission rates
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Considerations When Crafting Terms

- Cpt[®] requires licensing so HCPCS (CMS) is more accessible for community partners
- They must be clearly defined
- If there are different units and values, that must be determined
- The need should align with national multi-stakeholder initiatives

Your Allies!

- The Gravity Project! 
 - Me - sarah.desilvey@med.uvm.edu and  @sarcandes
 - Us- <https://thegravityproject.net/>

- The Partnership to Align Social Care Billing and Coding Workgroup

- And more ... 

Questions & Answers
