



Social Determinants of Health for Medicaid Provider

Social determinants of health

Social determinants of health (SDOH) are critical non-medical factors influencing health outcomes and access to healthcare services and are especially present among Medicaid populations. For Medicaid providers, a thorough understanding of these determinants is essential.

5 domains of SDOH

Economic stability

Income, employment status and financial security play a vital role in health outcomes. Lack of financial means and resources has an enormous impact on a patient's ability to participate in the improvement of their health and wellness. Medicaid patients often face income fluctuations that may affect their eligibility for coverage, leading to gaps in care. Common practical challenges stemming from financial difficulties include unreliable transportation to medical appointments, inadequate access to nutritious dietary options or even to sufficient food for basic survival, and insufficient funds to afford essential maintenance medications and supplements. Medicaid providers should recognize the impact of poverty and unstable employment on patients' ability to access healthcare.

Education access and quality

Education is a critical determinant influencing health literacy and healthcare navigation. Inequities in education, particularly in underserved communities, can perpetuate health disparities by limiting access to vital health information.

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PathWays patients with limited educational opportunities may face challenges in comprehending medical instructions or health information, which can affect their ability to follow treatment plans. Lack of education can also hinder patients' awareness of preventive services and available community resources.

For a demographic predominantly comprised of older adults, limited digital health literacy could potentially further limit the capacity to effectively utilize the comprehensive tools available for monitoring and tracking health and well-being. Healthcare providers should remain cognizant of the educational barriers encountered by their patients and integrate these considerations into their care planning.

Healthcare access and quality

Access to healthcare services, including availability of providers and insurance coverage, directly affects patient outcomes. For example, Medicaid patients may face long wait times for appointments or limited access to specialists, disrupting their care continuity.

Bias within clinical settings may lead to lower quality care for Medicaid patients, affecting their overall health outcomes and potentially deterring patients from seeking care or adhering to treatment, which further exacerbates health disparities.

Neighborhood and built environment

The safety, availability of resources and overall environment of a neighborhood can affect health behaviors and access to care. Urban planning decisions that neglect the needs of low-income communities can create environments that are detrimental to health, reinforcing existing disparities. For example, food insecurity in low-income neighborhoods results in limited access to nutritious foods, which can contribute to chronic health conditions.

The physical environment where individuals live can also significantly influence health outcomes. Medicaid patients living in substandard housing may face health risks, such as exposure to mold or pests, impacting their overall well-being. Having difficulty affording a stable place to live or living in inadequate conditions can negatively impact a patient's health and their ability to attend appointments or follow treatment plans. Medicaid providers should consider how these environmental factors may influence their patients' health.

Social and community context

Social support, community engagement and the presence of discrimination can affect mental and physical health. Discriminatory practices and policies can alienate certain communities, limiting their access to necessary social and healthcare resources.

Social isolation is a common concern among older individuals, and it may have an adverse impact on mental health as well as diminish patients' motivation to pursue necessary care. In addition, lack of access to community organizations that provide health services or support can hinder patients' ability to maintain their health. Providers should also be mindful of how bias within clinical settings can impact patient-provider relationships and health outcomes.

Health impacts

SDOH plays a crucial role in shaping the health outcomes of Medicaid beneficiaries, often contributing to poorer health and higher medical expenses. SDOH can lead to higher rates of adverse events, hospitalizations and emergency department visits, ultimately driving up healthcare costs for Medicaid programs.

As a primary insurer for individuals with low incomes, Medicaid is distinctly equipped to address these social factors. Consequently, many states are placing greater emphasis on incorporating SDOH into their Medicaid programs to improve health equity and outcomes.

Incorporating SDOH in your practice

Addressing SDOH is crucial for providing effective and equitable care to Medicaid patients.

- **Understanding the impact:** Recognize that your Medicaid patients may face significant barriers to health beyond their medical conditions. Factors like poverty, food insecurity or lack of safe housing can directly affect their ability to follow treatment plans and achieve optimal health. For instance, someone without financial stability might struggle to afford medications or preventive care appointments.
- **Integrating SDOH into practice:** Consider incorporating SDOH screening into your practice to identify patients' unmet needs. This could involve using standardized tools or incorporating relevant questions during the rooming process.
- **Addressing potential bias:** Being mindful of and actively addressing potential biases that may affect care for Medicaid patients is a key responsibility of providers. Research indicates that factors such as a patient's insurance status may sometimes lead to disparities in care. By recognizing and mitigating these biases, you can ensure that all patients receive the equitable care they deserve.
- **Partnering for solutions:** Connect patients with relevant community resources that can address their specific SDOH needs. This could include housing assistance, food banks, or transportation programs. Collaborating with community-based organizations can expand your ability to provide holistic support and improve patient outcomes.

By focusing on SDOH and actively working to overcome barriers, including potential internal biases, Medicaid providers can significantly impact the well-being of their patients and contribute to a more equitable healthcare system.

Resources for Medicaid providers

- **Kaiser Family Foundation:** Provides detailed information on Medicaid authorities and options to address social determinants of health in managed care.
- **Centers for Medicare & Medicaid Services:** Offers resources and guidance on addressing social drivers of health and health-related social needs, including information on specific initiatives and examples of care that address these needs.
- **Modern Medicaid Alliance:** Highlights examples of Medicaid managed care organizations addressing SDOH.

Further reading

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