

# CMS expands Medicare Advantage coverage for social determinants of health

## Chart pack

# Figure 1 – CMS’s new interpretation of supplemental benefits provides better coverage for social determinants of health

## Previously...

The benefit must meet all three components. It:

1. must not be covered by original Medicare
2. must be primarily health related
3. must incur a direct medical cost

The benefit’s primary purpose cannot be daily maintenance.

## Now...

The benefit must meet one of the following. It:

1. must diagnose, prevent, or treat an illness or injury
2. compensate for physical impairments
3. ameliorate the impact of injuries or conditions
4. reduce emergency and healthcare utilization

The benefit must be reasonable and rationally encompassed by the standard and not have a primary purpose outside of it.

Source: PwC Health Research Institute analysis

[pwc.com/hri](https://www.pwc.com/hri)

## Figure 2 – Direct medical spending associated with social determinants of health for people over age 65 in 2016

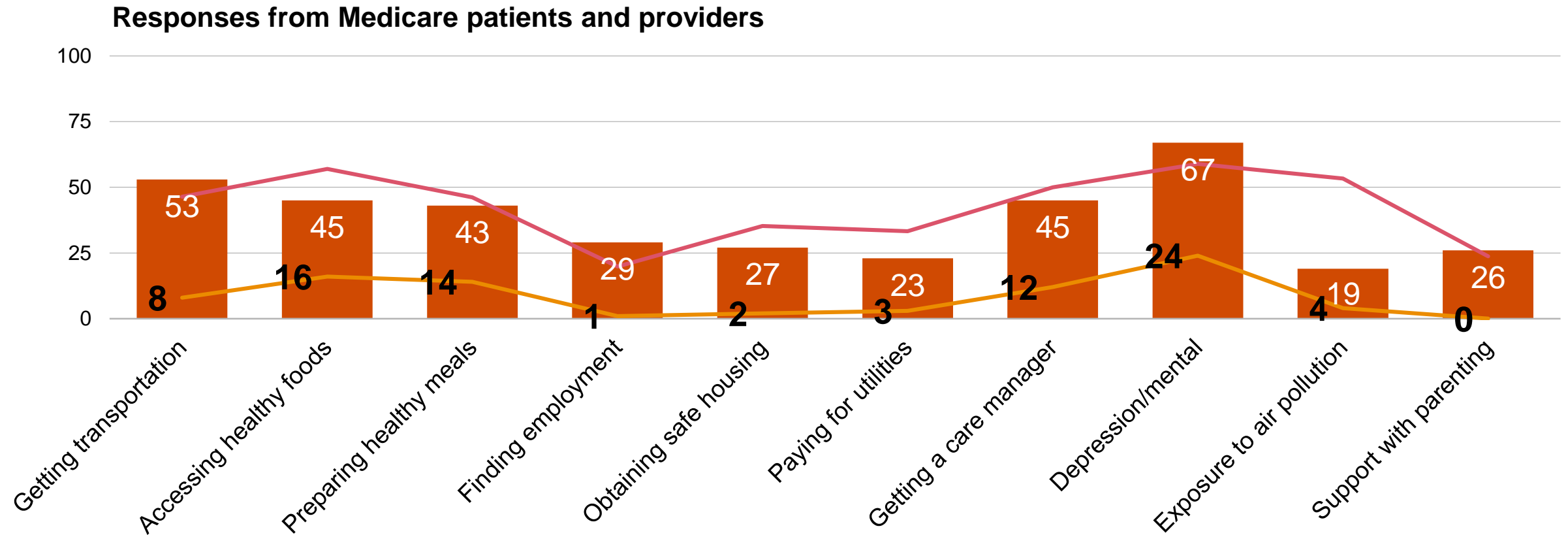
Social determinant	Associated spending*
Transportation	\$17,780,915
Food stamps	\$82,373,205,456
Poor or near poor poverty level	\$98,107,908,207
Fair or poor mental health	\$105,150,748,622
Patients with restricted low fat food diet	\$267,815,560,816
All Americans over age 65	\$582,052,417,044
Total US direct spending on health	\$1,617,531,007,315

*\*Spending data are not mutually exclusive*

*Source: PwC Health Research Institute analysis of Medical Expenditure Panel Survey data for 2016*

*[pwc.com/hri](http://pwc.com/hri)*

# Figure 3 – Providers are more likely than patients to say they've discussed addressing social determinants of health



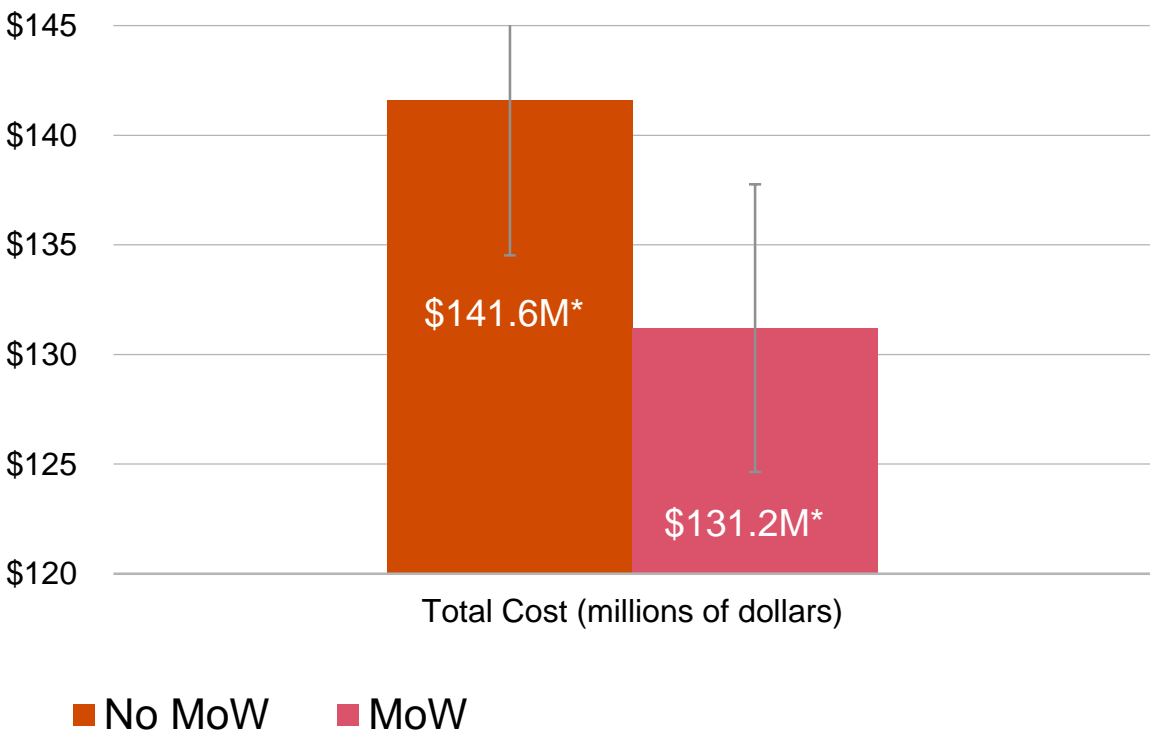
Source: HRI 2018 clinician survey, HRI 2018 Behind the numbers consumer survey

[pwc.com/hri](https://pwc.com/hri)

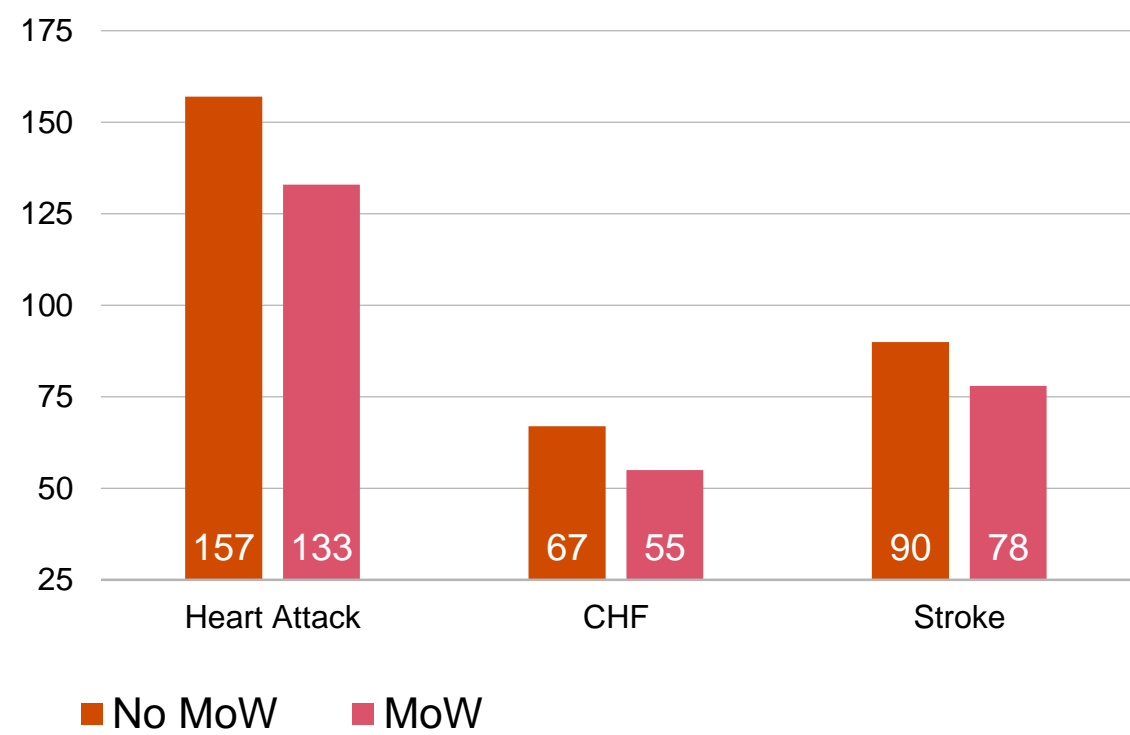
- Percent of providers that say they have discussed the SDOH
- Percent of patients that think it is very or somewhat important to discuss the SDOH
- Percent of patients who said their provider has discussed the SDOH

# Figure 4 – VNA Texas’ Meals on Wheels (MoW) program reduces healthcare costs in Dallas

Total cost per year for Dallas MoW population (N=4700)



Number of hospitalizations per year for Dallas MoW population



*\*Bars denote potential range of variation in total cost*  
*Source: PwC Bodylogical® analysis of VNA Texas’ Meals on Wheels program*  
*[pwc.com/hri](https://www.pwc.com/hri)*

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