Changing What Counts as Healthcare

Widely-recognized research tells us that up to 70% of health outcomes are attributable to social and environmental factors, while only 10% reflect direct medical care. At the same time, every day, clinicians across the U.S. treat patients who struggle to access food, shelter and other basic resource needs. Healthcare providers know that these unmet needs directly impact the health of their patients, and that addressing these factors has tremendous potential to improve outcomes, reduce costs and increase efficiencies. But they haven’t traditionally had the time, training or tools – or the support of the sector at large – to address these underlying, unspoken barriers to good health.

Clinicians want to do right by their patients. Healthcare providers are becoming incentivized to change their care delivery models. Payers are closely examining the impact of social needs interventions. The time to change what counts as healthcare is now.
Today, the sector is poised to embrace a new definition of healthcare – one that enables healthcare delivery organizations to address issues like hunger and homelessness alongside clinical care:

- Financial incentives are shifting from fee-for-service to value-based care, enabling providers to be paid not only to provide medical services, but to ensure ongoing positive health outcomes – making the realities of patients’ lives outside of the clinic or hospital walls harder to ignore.
- Pilot programs like the Centers for Medicare and Medicaid (CMS) Accountable Health Communities, and Comprehensive Primary Care Plus, are funding and studying the impact of social needs interventions in medical settings;
- Federal community benefit mandates are requiring hospitals to invest in a range of programs for health promotion.

Our Vision

Health Leads envisions a healthcare system that addresses all patients’ basic resource needs as a standard part of quality care. Founded in 1996, we have worked with leading healthcare organizations to address patients’ unmet social needs by connecting them to the community-based resources they need to be healthy – from food to transportation to healthcare benefits.

We’re fiercely committed to driving the sector by demonstrating the rationale and confirming the responsibility of the healthcare system to address patients’ social needs. To that end, we’re focused on three core areas to both set the standards for and accelerate the adoption of this work in the sector:

- **Tools** – Share our 20 years of knowledge, technology and insights to accelerate learning and enable broad adoption of best practices to a wide range healthcare delivery organizations and settings;
- **Leadership** – Organize, galvanize and align key healthcare leaders around shared goals and standards to overcome barriers to creating an ecosystem where addressing social needs is the new normal;

- **Data and Incentives** – Partner with leading health systems to measure and build the evidence base case, and support key policy initiatives, in support of addressing patient social needs as a standard part of quality care.

Today, Health Leads works with 13 health systems across the U.S. to pioneer a range of social needs strategies. And, more than 200 provider organizations have accessed Health Leads technology, training and expertise to build and scale their own social needs interventions.

Join Health Leads and this group of health system leaders in our mission to make addressing unmet social needs a standard part of quality healthcare.

Email [info@healthleadsusa.org](mailto:info@healthleadsusa.org) and visit [www.healthleadsusa.org](http://www.healthleadsusa.org)