

# Harness the power of Social Risk Insights



Over **80%** of health outcomes are influenced from **factors other than clinical care**<sup>1</sup>

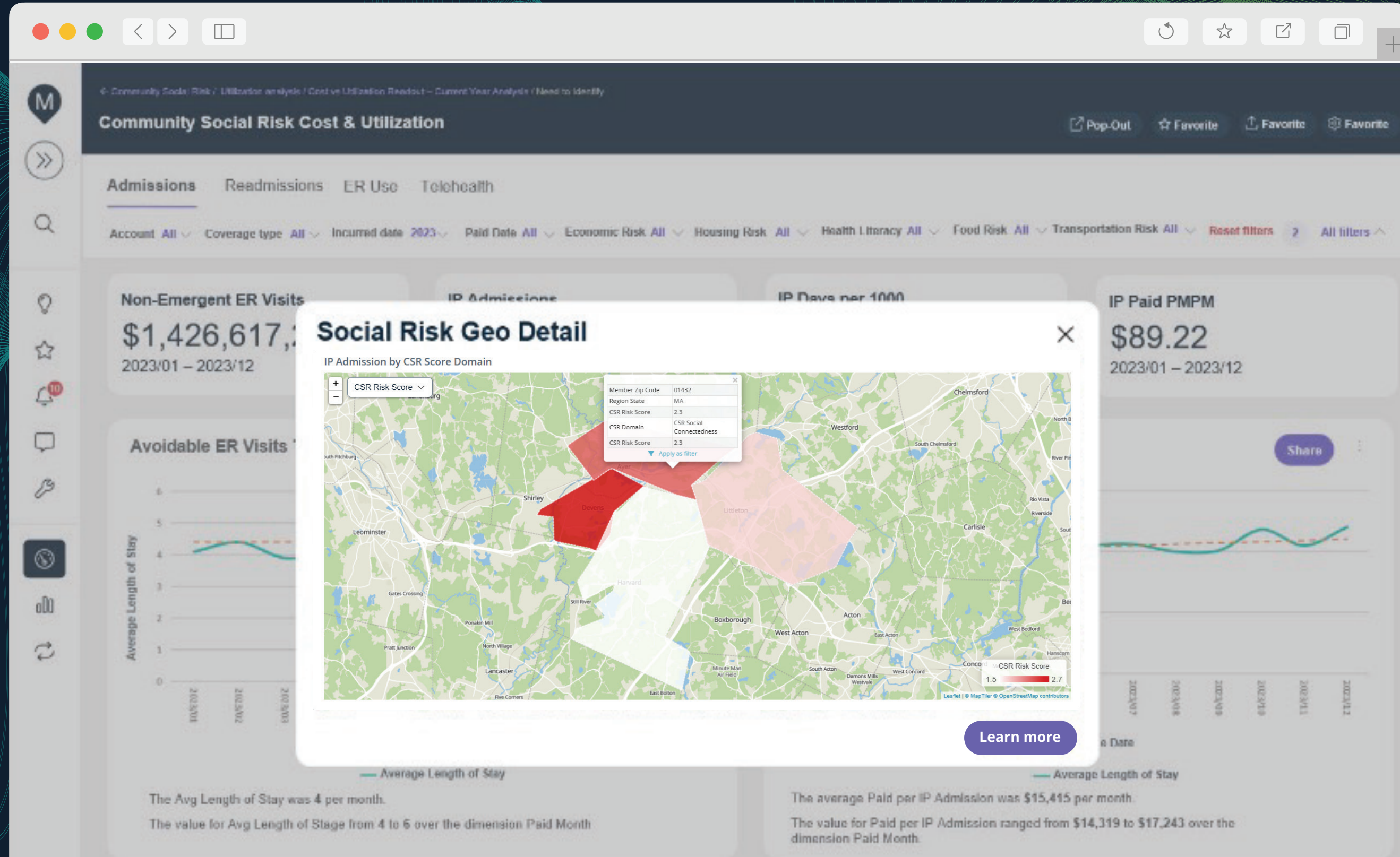


## Social Risk Insights benefits...

- Commercial plans
- Medicaid plans
- Medicare plans
- Providers
- ACOs
- Community orgs

## Social risk can be hard to pinpoint because...

- 1** Collecting good data is costly & challenging
- 2** Integrating various data sets is complex & can require advanced technology
- 3** SDOH data often lacks specificity and precision



## Understanding social risk is foundational to population health initiatives

Blending SDOH data and traditional healthcare data illuminates where and how social risk impacts populations—allowing you to:

- Inform & ignite downstream care management
- Improve community-based organization collaboration & communication
- Track program effectiveness and outcomes
- Establish and manage SDOH/health equity targets and action plans
- Strengthen value-based contracts
- Enhance member engagement & satisfaction
- Optimize resources and manage costs

## Applications of social risk data include...

- 1** **Identifying and stratifying risk:**  
Optimize preventative care and chronic disease strategies to target appropriate care, build effective community health programs, reduce readmissions and minimize costs
- 2** **Assessing performance on key targets:**  
Use geographically relevant benchmarks to engage providers in reducing local health disparities and incentivize actions that drive care equity
- 3** **Deploying enhanced value-based care models:**  
Apply proactive, targeted interventions to flag at-risk members, identify root causes of poor outcomes and allocate resources where they are most needed



Curious about your community's social risk? [Download our ebook to dive deeper.](#)

1: American Journal of Preventative Medicine (Hood, C. M., K. P. Gennuso, G. R. Swain, and B. B. Catlin. 2016. County health rankings: Relationships between determinant factors and health outcomes. American Journal of Preventive Medicine 50(2):129-135.