Social Determinants of Health
(Social Needs Screening)
Implementation Guide

Version 13
March 31, 2025

Document History

Date	Version	Sections Revised	Description	Modifier
7/7/2023	6	All Sections	Update to reflect changes to routing SDOH data to receivers and migration to IHDU.	M. Allen
8/3/2023	6	1,2,3,4	Updated information based on reviews. Updated sections to better reflect proper verbiage, workflows, and spec references.	M. Allen, H. Burseth, J. Davis
8/3/2023	6	All sections	Branding & formatting	E. Mata
8/16/2023	6	Title, Introduction, any reference to SDOH	Updated to reflect focus on healthcare and updated language to reflect the type of data that is being generated within SDOH	M. Allen
9/7/2023	7	Sections 2.2.1 and 2.2.2	Updated legal document language	S. Patel, M. Allen
10/9/2023	8	Section 1.2	Updated "message content" to reflect Use Case Exhibit definitions	M. Allen
7/30/2024	9	All Sections	Reviewed from the perspective of 1st time on-boarders and for any changes to the data exchange solution	M. Allen, K. Traxel
02/12/2025	10	Appendix	Added naming convention, footers, and common errors table	T. Fite

2/27/25	11	All	Editing for general clarity	S. Denhof/K. Lewis
3/11/2025	12	All	Updates to document title, Sections 1.2-3.3, definitions.	T. Fite
3/25/2025	13	Message Content	Removed legal verbiage	T. Fite

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1. Introduction

1.1 Purpose of Data Exchange Solution

This data exchange solution begins documenting the social care process within healthcare with social needs screening data.

This data exchange solution makes it possible to document social needs screening data captured within healthcare settings and share these screenings with the rest of the individual's identified care team members that are part of the MiHIN network.

When participating organizations screen individuals for health-related social needs, this data is submitted to MiHIN and made available to other care team members using MiHIN's Active Care Relationship Services® (ACRS®).

Additionally, this data exchange solution makes it possible for an organization's screening data to be used by payers for Healthcare Effectiveness Data and Information Set (HEDIS) measure compliance.

Screening data is the beginning data set to enable effective solutions that address a person's health-related social needs, but capturing screening data does not represent a solution in and of itself. It is a first step in building a data-sharing pathway between two disparate sectors of care.

By implementing the SDOH (Social Needs Screening) data exchange solution, healthcare providers and payers gain access to social needs screening data distributed through MiHIN. Using a hub-and-spoke model, organizations connect once to MiHIN, which facilitates connections to all other participating organizations across sectors of care.

Additionally, aggregated screening data can support policy and program administrators in better understanding the prevalence of needs in specific communities and assist in measuring the impact of enacted changes.

1.2 Message Content

Message content refers to the Social Needs Screening (SDOH) file format as a CSV (comma separated value) file.

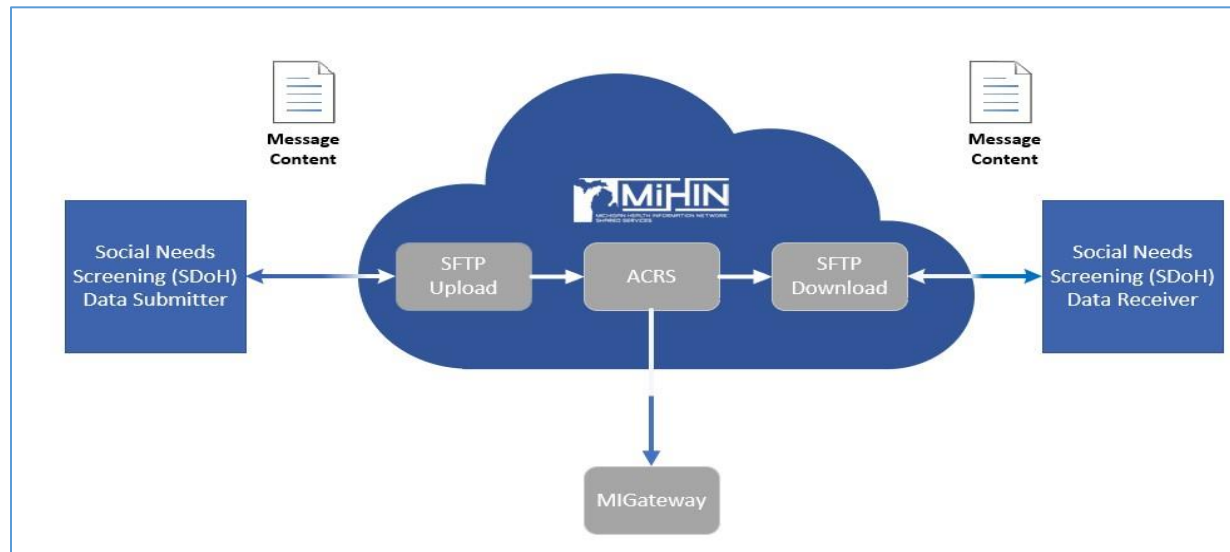## 1.3 Data Flow

1.3.1 Functional Data Flow

Figure 1. Data Flow to Send and Receive SDOH (Social Needs Screening) Data

1. The organization submitting the SDOH (social needs screening) data sends a .CSV file to MiHIN via Secure File Transfer Protocol (SFTP). **Note:** Data submitters may also receive data and vice versa.

2. MiHIN validates the file and triggers an email to the submitter detailing rows with errors.

3. MiHIN stores the data in the HIE SDOH Application Database.

4. MiHIN filters the patient SDOH (social needs screening) data through ACRS and creates a list of ACRS populations that lists the patient.

5. MiHIN sends an SDOH .csv file to organizations with at least one matching patient in their ACRS population.

For more information about this data exchange solution, refer to the documents linked below.

1.3.2 Actors

- **Actor:** Submitting Organization
  - *Role:* Provides SDOH (social needs screening) data, compiles screening data into a.csv file, and submits via a SFTP.
- **Actor:** MiHIN
  - *Role:* Receives and processes the SDOH (social needs screening) data .csv file and ingests the data into the SDOH database. MiHIN then filters patients through ACRS and finds matches within organizations' ACRS patient populations. MiHIN compiles a .csv file of matched patients and routes to an SFTP folder for receiving organization based on OID information.
- **Actor:** Receiving Organization
  - *Role:* Submits ACRS files to MiHIN with their active patient roster(s) and receives SDOH (social needs screening) data based on matches to their ACRS file.

You can contact MiHIN at www.mihin.org/requesthelp for more information.

2. Onboarding

2.1 Prerequisites

Participating organizations will need to complete two onboarding tracks in the following order:

1. Obtain, review, and execute legal agreements, then
2. Establish technical transport and testing.

2.1.1 Universal Legal Prerequisites

The following legal documentation will need to be executed prior to kick-off or any connectivity being established between MiHIN and participating organizations.

- Statement of Work (SOW)
- MiHIN's Exhibit A Agreement (Found on MiHIN's Legal Portal)
- Participant Agreement (Found on MiHIN's Legal Portal)
- Must select the appropriate data exchange solution on MiHIN's Legal Portal in addition to the above agreements.
- To initiate the legal onboarding contact, email help@mihin.org.

2.1.2 Technical Requirements

The following implementation and technical requirements will need to be utilized for the social needs screening data exchange solution to function.

- Active Care Relationship Service (ACRS)
- Health Directory (HD)
- Common Key Service (CKS)

2.2 SDOH (Social Needs Screening) Onboarding Processes
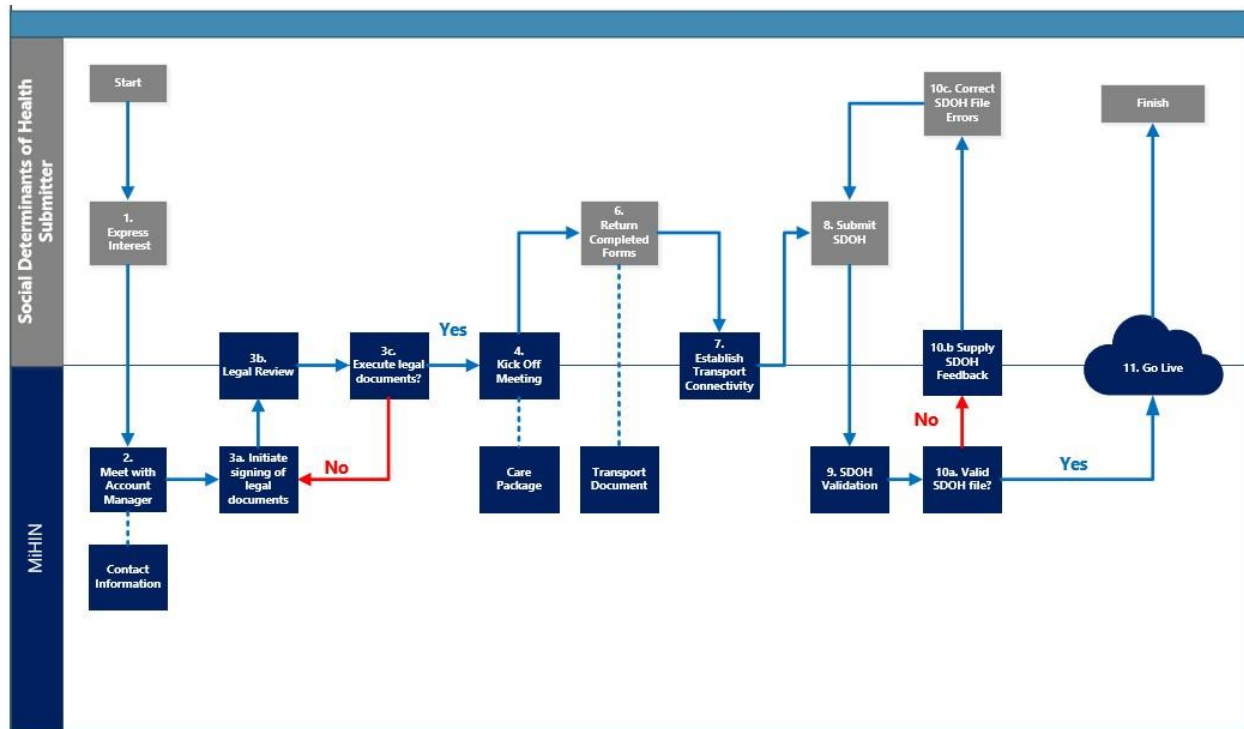### 2.2.1 SDOH (Social Needs Screening) Data Sender Onboarding Process

Figure 2. MiHIN SDOH (Social Needs Screening) Data Submitter Onboarding Workflow

For participating organizations submitting SDOH .csv files, the onboarding steps are as follows:

- Express interest in participating in the data exchange solution
- Meeting with an account manager
  - Exchange contact information
- Initiate the signing of legal documents
- Execute legal documents, including:
  - Participation Agreement
  - Exhibit A – Business Associate Agreement
  - SDOH for Healthcare Product Selection on Legal Portal (Inclusive of
    - ACRS, CKS, HD, and SDOH for Healthcare Data Exchange Solution)
- Onboarding Kick-Off Meeting

- Distribute SDOH Care Package

- Exchange required documents:
    - Transport Document (SFTP Request Form)
    - OID Request Form (if needed)
    - SDOH (Social Needs Screening) Data Spec Sheet
- Establish transport connectivity
- Submit Initial SDOH File
- SDOH File Validation
    - If valid, proceed to Go-Live
    - If invalid, MiHIN provides error feedback and submitter makes corrections and resubmits.
- Go-Live

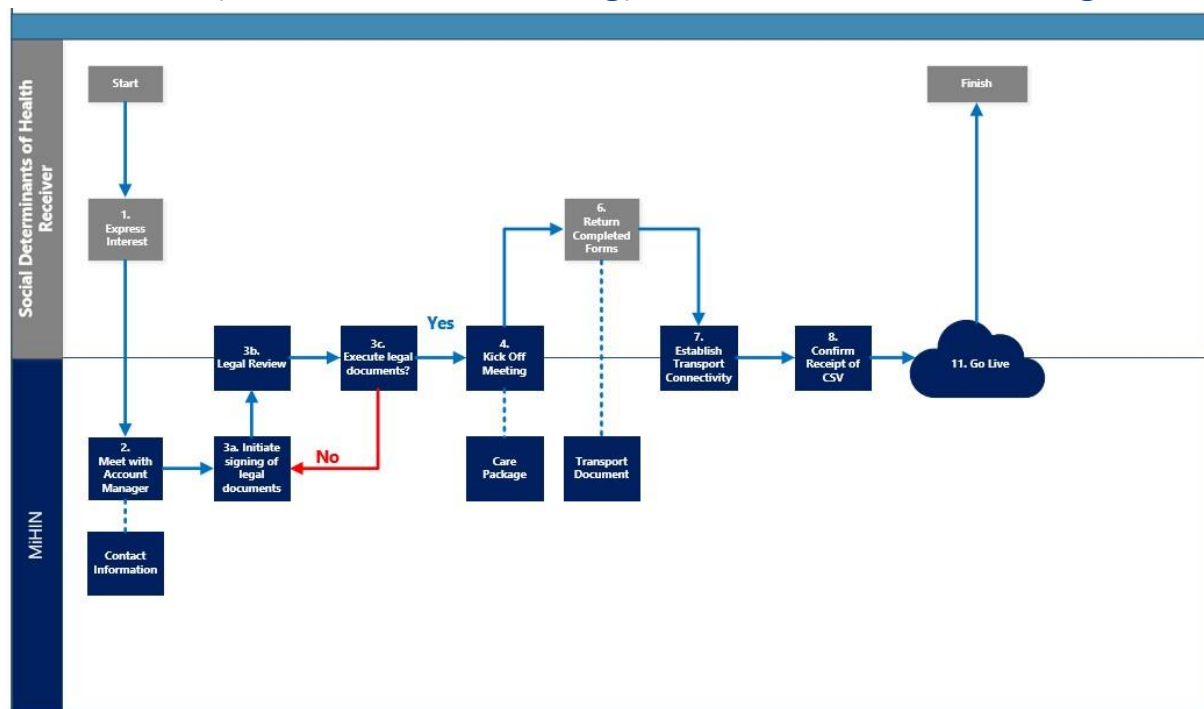## 2.2.2 SDOH (Social Needs Screening) Data Receiver Onboarding Process

Figure 3. MiHIN SDOH (Social Needs Screening) Data Receiver Onboarding Workflow

For participating organizations who will receive social needs screening .csv files, the onboarding steps are as follows:

- Express interest in participating in the data exchange solution
- Meeting with an account manager
    - Exchange contact information
- Initiate the signing of legal documents
- Execute legal documents, including the following:
    - Participation Agreement
    - Exhibit A – Business Associate Agreement
    - SDOH for Healthcare Product Selection on Legal Portal (Inclusive of
        - ACRS, CKS, HD, and SDOH for Healthcare data exchange solutions)
- Onboarding Kick-Off Meeting
- Distribute SDOH Care Package
- Exchange required documents
    - Transport Document (SFTP Request Form)
    - OID Request Form (if needed)
    - Social Needs Screening (SDOH) Data Spec Sheet
- Establish transport connectivity
- Confirm receipt of SDOH ACRS match .csv file
- Go-Live

2.3 Technical Connectivity Process

Organizations should select the connectivity method for message transport and should communicate to www.mihin.org/requesthelp early in the onboarding process. Currently the ONLY transport method MiHIN accepts for this data exchange is the following:

- **SFTP** –MIHIN Hosted Secure File Transfer Protocol

The following steps describe the technical onboarding process. However, MiHIN typically conducts onboarding kickoff meetings with new organizations to go through each of these steps in detail and answer any questions.

1. All connectivity testing— regardless of whether it is for SDOH (Social Needs Screening) data submitter or receiver data flows— are accomplished through the transfer of files via SFTP folder and confirmation of receipt. Unless otherwise requested, all testing communications can be done via email.

    a. In the case of submitters, test or production .csv files are loaded to the SDOH (Social Needs Screening) data submission folder, and MiHIN confirms receipt and pickup of the file.

    b. In the case of receivers, test or production .csv files are uploaded to the organization's SFTP folder, and the organization confirms receipt of those files.

3. Specifications

3.1 Overview

3.1.1 Environments

MIHIN only provides an SFTP production environment.

3.2 General Message Requirements

3.2.1 Message Trigger Events

Sending organizations will deliver message content to MiHIN at least monthly, with the goal of increasing the frequency of submissions.

3.2.2 File Information

For an example of what a properly formatted .csv should look like for this data exchange solution, refer to the Example_v4.0 tab on the file specification found on https://mihin.org/social-determinants-of-health-use-case/.

The following list shows examples of the type of information that will be received by MiHIN.

- Participating Organization Name
- Participating Organization Unique ID (OID)
- Patent First Name
- Patient Last Name
- Patient Date of Birth
- Patient Gender
- Patient Address
- SDOH Screening Date
- SDOH Screening Practice Name
- SDOH Screening Practice Organization - Unique ID (OID)
- SDOH Screening Question Responses
- SDOH Screening Question Tracking Statuses

4. Production Support

	Severity Levels			
	1	**2**	**3**	**4**
Description	*Critical Impact/ System Down:* Business critical software is down or critical interface has failed. The issue is impacting all production systems, causing all participating organizations' or other organizations' ability to function to be unusable.	*Significant Business Impact:* Software component severely restricted. Entire organization is unable to continue business functions, causing all communications and transfer of messages to be halted.	**Partial Failure or Downtime:** Program is useable and less significant features unavailable. The service is online, though it may not working as intended or may not currently working as intended or may not currently be accessible, though other systems are currently available.	**Minimal Business:** A non-critical software component is malfunctioning, causing minimal impact, or a test system is down.
Example	All messages to and from MiHIN are unable to be sent and received, let alone tracked	MiHIN cannot communicate (send or receive) messages between single or multiple participating organizations, but can still successfully communicate with other organizations.	Messages are lost in transit; messages can be received but not sent.	Additional feature requested.
Primary Initiation Method	*Phone:* (517) 336-1430	*Phone:* (517) 336-1430	Web form at http://mihin.org/ requesthelp	Web form at http://mihin.org/ requesthelp
Secondary Initiation Method	Web form at http://mihin.org/ requesthelp	Web form at http://mihin.org/ requesthelp	Email to help@mihin.org	Email to help@mihin.org
Tertiary Initiation Method	Email to help@mihin.org	Email to help@mihin.org	N/A	N/A
Initial Response	Within 2 hours	Within 2 hours	1 business day	1 business day
Resolution Goal	24 hours	24 hours	3 business days	7 business days

A list of common questions regarding the SDOH (Social Needs Screening) data exchange solution can be found at:

https://mihin.org/social-determinants-of-health-use-case/

If you have questions, please contact the MiHIN Help Desk:

- www.mihin.org/requesthelp
- Phone: (884) 454-2443
- Monday – Friday 8:00 AM – 5:00 PM (Eastern)

5. Legal Advisory Language

This reminder applies to all use cases covering the exchange of electronic health information:

The Data Sharing Agreement (DSA) establishes the legal framework under which participating organizations can exchange messages through the MiHIN Platform, and sets forth the following approved reasons for which messages may be exchanged:

a. By health care providers for Treatment, Payment and/or Health Care Operations consistent with the requirements set forth in HIPAA
b. Public health activities and reporting as permitted by HIPAA and other Applicable Laws and Standards
c. To facilitate the implementation of "Meaningful Use" criteria as specified in the American Recovery and Reinvestment Act of 2009 and as permitted by HIPAA d. Uses and disclosures pursuant to an Authorization provided by the individual who is the subject of the Message or such individual's personal representative in accordance with HIPAA
e. By Data Sharing Organizations for any and all purposes, including but not limited to pilot programs and testing, provided that such purposes are consistent with Applicable Laws and Standards
f. For any additional purposes as specified in any data exchange solution, provided that such purposes are consistent with Applicable Laws and Standards

Under the DSA, "**_Applicable Laws and Standards_**" means all applicable federal, state, and local laws, statutes, acts, ordinances, rules, codes, standards, regulations and judicial or administrative decisions promulgated by any governmental or self-regulatory agency, including the State of Michigan, the Michigan Health Information Technology Commission, or the Michigan Health and Hospital Association, as any of the foregoing may be amended, modified, codified, reenacted, promulgated or published, in whole or in part, and in effect from time to time. "Applicable Laws and Standards" includes but is not limited to HIPAA; the federal Confidentiality of Alcohol and Drug Abuse Patient Records statute, section 543 of the Public Health

Service Act, 42 U.S.C. 290dd-2, and its implementing regulation, 42 CFR Part 2; the Michigan Mental Health Code, at MCLA §§ 333.1748 and 333.1748a; and the Michigan Public Health Code, at MCL § 333.5131, 5114a.

It is each participating organization's obligation and responsibility to ensure that it is aware of Applicable Laws and Standards as they pertain to the content of each message sent, and that its delivery of each message complies with the Applicable Laws and Standards. This means, for example, that if a data exchange solution is directed to the exchange of physical health information that may be exchanged without patient authorization under HIPAA, the participating organization must not deliver any message containing health information for which an express patient authorization or consent is required (e.g., mental or behavioral health information).

Disclaimer: The information contained in this implementation guide was current as of the date of the latest revision in the Document History in this guide. However, Medicare and Medicaid policies are subject to change and do so frequently. HL7 versions and formatting are also subject to updates. Therefore, links to any source documents have been provided within this guide for reference. MiHIN applies its best efforts to keep all information in this guide up to date. It is ultimately the responsibility of the participating organization and sending facilities to be knowledgeable of changes outside of MiHIN's control.

6. Appendices

6.1 Appendix A – File Naming Convention

Files should be named using the following format:

<PO name>_sdoh_<YYYYMMDD>_<Version>.csv

Where:

- **<PO name>**: The name or identifier of the participating organization (PO).
- **sdoh**: A fixed identifier indicating that the file pertains to Social Needs Screening.
- **<YYYYMMDD>**: The date the file was generated, in **YYYYMMDD** format (e.g., 20250212 for February 12, 2025).
- **<Version>**: The version number of the file, using a standardized format such as **V1**, **V2**, etc.

Example:

If **HealthOrg** generates a version 1 file on **February 12, 2025**, the file name should be: ***HealthOrg_sdoh_20250212_V1.csv***

6.2 Appendix B- Common Validation Errors

Error in Message	Email Returned to Sender	Result
SDOH messages that are incorrectly formatted and/or missing the following information: 1. PO Name 2. PO OID 3. ORG_Unique_ID 4. First Name 5. Last Name 6. DOB 7. Gender 8. Screen Date 9. Screening Practice Name 10. Screening Practice OID	Subject: SDOH File Submission Summary Message: Thank you for your recent submission of SDOH Files. **We received (number) file(s)** and **the following errors occurred** <u>SDOH File Errors</u> **Message:** "Missing value in required field …" or "Incorrect value format in required field …" **Columns:** *describes the column that had the missing or incorrectly formatted information*	Messages will be failed and not processed

	Rows: *describes the row locations that had the missing or incorrectly formatted information*	
SDOH messages that are blank for the following fields: 1. SSN 2. Address 1 3. Address 2 4. City 5. Zip 6. Hub referral Date 7. CM/CC Service 8. Patient Assisted In MI Bridges	Subject: SDOH File Submission Summary Message: Thank you for your recent submission of SDOH Files. **We received (number) file(s)** and **the following errors occurred** SDOH File Errors **Message:** "Missing value in required field – file processed" **Columns:** *describes the column that had the blank fields* **Rows:** *Describes the row locations that had the blank fields*	Messages will be processed and not failed, but will receive an error notification via email
SDOH messages that are blank for the following fields: 1. Healthcare_Q1 2. Healthcare_Q2 3. Food_Q1 4. Employment_Q1 5. HousingShelter_Q1 6. Utilities_Q1 7. FamilyCare_Q1 8. Transportation_Q1 9. Safety_Q1 10. Stress_Q1 11. Anxiety_Q1 12. Depression_Q1 13. General_Q1 14. General_Q2	Subject: SDOH File Submission Summary Message: Thank you for your recent submission of SDOH Files. **We received (number) file(s)** and **the following errors occurred** SDOH File Errors **Message:** "Missing value in optional field – rows will be stored, and the field value will display as "Not Sent" in the Patient Viewer. **Columns:** *describes the column that had the blank fields* **Rows:** *Describes the row locations that had the blank fields*	Messages will be processed and not failed, but will receive an error notification via email

7. Acronyms and Abbreviations Guide

ACK	HL7 Acknowledgment
ACRS®	Active Care Relationship Service®
CKS	Common Key Service
CMS	Centers for Medicare & Medicaid Services
EHR	Electronic Health Record
HD	Health Directory
HIE	Health Information Exchange
HL7	Health Level Seven
HPD	Health Provider Directory
OID	Object Identifier
PO	Participating Organization
SDOH	Social Needs Screening
SFTP	Secure File Transfer Protocol
TDSO	Trusted Data Sharing Organization

8. Definitions

Active Care Relationship (ACR). (a) For health providers, a patient who has been seen by a provider within the past 24 months, or is considered part of the health provider's active patient population they are responsible for managing, unless notice of termination of that treatment relationship has been provided to MiHIN; (b) for payers, an eligible member of a health plan;(c) an active relationship between a patient and a health provider for the purpose of treatment, payment and/or healthcare operations consistent with the requirements set forth in HIPAA; (d) a relationship with a health provider asserted by a consumer and approved by the health provider; or (e) any person or TDSO authorized to receive message content under an exhibit which specifies that an ACR may be generated by sending or receiving message content under that exhibit. ACR records are stored by MiHIN in the ACRS.

Active Care Relationship Service® (ACRS®). The MiHIN infrastructure service contains records for those TDSOs, their participating organizations participants or any health providers who have an active care relationship with a patient.

Applicable Laws and Standards. In addition to the definition set forth in the Data Sharing Agreement, the federal Confidentiality of Alcohol and Drug Abuse Patient Records statute, section 543 of the Public Health Service Act, 42 U.S.C. 290dd-2, and its implementing regulation, 42 CFR Part 2; the Michigan Mental Health Code, at MCLA §§ 333.1748 and 333.1748a; and the Michigan Public Health Code, at MCL § 333.5131, 5114a.

Common Key Service (CKS). An Infrastructure Service that communicates with a Master Person Index (MPI) to match patients and to assign and retrieve HIN Common Keys that are linked to unique patients.

Conforming Message. A message that is in a standard format that strictly adheres to the implementation guide for its applicable data exchange solution.

Data Exchange Solution. An implementation of a data flow that leverages one or more platform systems to exchange data with stakeholder organizations. A data exchange solution could be receiving data from stakeholders, sending data to stakeholders, or both.

Data Sharing Agreement. Any data sharing organization agreement signed by both MiHIN and a participating organization. Data sharing organization agreements include but are not limited to: Qualified Data Sharing Organization Agreement, Virtual Qualified Data Sharing Organization Agreement, Consumer Qualified Data Sharing Agreement, Sponsored Shared Organization Agreement, State Sponsored Sharing Organization Agreement, Direct Data Sharing Organization Agreement, Simple Data Sharing Organization Agreement, or other data sharing organization agreements developed by MiHIN.

Electronic Address. A string that identifies the transport protocol and end point address for communicating electronically with a recipient. A recipient may be a person, organization or other entity that has designated the electronic address as the point at which it will receive electronic messages. Examples of an electronic address include a secure email address (Direct via secure SMTP) or secure URL (SOAP / XDR / REST / FHIR). Communication with an electronic address may require a digital certificate or participation in a trust bundle.

Electronic Medical Record or Electronic Health Record (EMR/EHR). A digital version of a patient's paper medical chart.

Health Directory. The statewide shared service established by MiHIN that contains contact information on health providers, electronic addresses, end points, and ESI, as a resource for authorized users to obtain contact information and to securely exchange health information.

Health Level 7 (HL7). An interface standard and specifications for clinical and administrative healthcare data developed by the Health Level Seven organization and approved by the American National Standards Institute (ANSI). HL7 provides a method for disparate systems to communicate clinical and administrative information in a normalized format with acknowledgement of receipt

Health Information. Any information, including genetic information, whether oral or recorded in any form or medium, that (a) is created or received by a health provider, public health authority, employer, life insurer, school or university, or healthcare clearinghouse; and (b) relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual.

Health Plan. An individual or group plan that provides or pays the cost of medical care (as "group health plan" and "medical care" are defined in section 2791(a)(2) of the Public Health Service Act, 42 U.S.C. 300gg-91(a)(2)). Health plan further includes those entities defined as a health plan under HIPAA, 45 C.F.R 160.103.

Health Professional means (a) any individual licensed, registered, or certified under applicable Federal or State laws or regulations to provide healthcare services; (b) any person holding a nonclinical position within or associated with an organization that provides or coordinates healthcare or healthcare related services; and (c) people who contribute to gathering, recording, processing, analysis or communication of health information. Examples include, but are not limited to, physicians, physician assistants, nurse practitioners, nurses, medical assistants, home health professionals, administrative assistants, care managers, care coordinators, receptionists and clerks.

Health Provider means facilities/hospitals, health professionals, health plans, caregivers, pharmacists/other qualified professionals, or any other person or organization involved in providing healthcare.

Information Source. Any organization that provides information that is added to a MiHIN infrastructure service.

Message. A mechanism for exchanging message content between the participating organization to MiHIN services, including query and retrieve.

Message Content. Information, as further defined in an Exhibit, which is sent, received, found or used by a participating organization to or from MiHIN services. Message content includes the message content header.

Michigan Health Information Network Shared Services. The health information network (HIN) for the State of Michigan.

MiHIN Infrastructure Service. Certain services that are shared by numerous data exchange solutions. MiHIN infrastructure services include, but are not limited to, Active Care Relationship Service (ACRS), Health Directory, Statewide Consumer Directory (SCD), and MIGateway®.

MiHIN Services. MiHIN infrastructure services, additional services, and functionality provided by MiHIN that allows the participating organizations to send, receive, find, or use information to or from MiHIN as further set forth in an exhibit.

Notice. A message transmission that is not message content and which may include an acknowledgement of receipt or error response, such as an ACK or NACK.

Participation Agreement. Legal agreement which outlines and applies to the message content used in any of MiHIN's data exchange solutions and products.

Patient Data. Any data about a patient or a consumer that is electronically filed in a participating organization or participating organization participant's systems or repositories. The data may contain protected health information (PHI), personal credit information (PCI), and/or personal identifiable information (PII).

Person Record. Any record in a MiHIN infrastructure service that primarily relates to a person.

Pilot Activity. The activities set forth in the applicable exhibit and typically include sharing message content through early trials of a new data exchange solution that is still being defined and is still under development and which may include participating organization feedback to MiHIN to assist in finalizing a data exchange solution and exhibit upon conclusion of the pilot activity.

Promoting Interoperability. Using certified EHR technology to improve quality, safety and efficiency of healthcare, and to reduce health disparities as further contemplated by title XIII of the American Recovery and Reinvestment Act of 2009.

Provider Community. A healthcare provider with an active care relationship with the applicable patient.

Service Interruption. A party is unable to send, receive or find message content for any reason, including the failure of network equipment or software, scheduled or unscheduled maintenance, general Internet outages, and events of force majeure.

Social Determinants of Health (SDOH). The conditions in the environments where people are born, live, learn, work, play, worship, and age affect a wide range of health, functioning, and quality-of-life outcomes and risks. (https://health.gov/healthypeople/priority-areas/social-determinants-health)

Social Needs Screening. A systematic process that gathers information about an individual's social circumstances to identify health inequalities.

Source System. A computer system, such as an electronic health record system, at the participating organization, that sends, receives, finds or uses message content or notices.

Transitions of Care. The movement of a patient from one setting of care (e.g. hospital, ambulatory primary care practice, ambulatory specialty care practice, long-term care, rehabilitation facility) to another setting of care and can include transfers within a healthcare organization.

Trusted Data Sharing Organization (TDSO). An organization that has signed any form of agreement with MiHIN for data sharing.