



DATA
FOR BETTER
HEALTH[®]

HEALTH DATA PROFESSIONAL RESOURCE GUIDE

DATA FOR BETTER HEALTH[®]

Better health and improved health outcomes are impacted by factors beyond the care a person receives from their clinician. Those factors, such as food insecurity, housing status, and transportation needs, are referred to as social determinants of health (SDOH), which significantly affect quality of life, health, and healthcare outcomes.

When SDOH data is appropriately collected, used, and securely shared, the entire healthcare team can gain insight into various elements that make up a person's medical and non-medical story, allowing them to collaborate on improving an individual's overall health and wellbeing.





ABOUT THE RESOURCE GUIDE

Data for Better Health® was launched to increase awareness of how collecting, using, and sharing SDOH data can improve individual and community health and healthcare outcomes. Through this effort, tools, resources, and education will be developed for healthcare professionals, policymakers, and the public that supports a better understanding of the importance of SDOH data and how it can be used to improve peoples' health and quality of life.

This resource guide is representative of a number of organizations that have come together to provide links to websites, tools, and data that can assist health data professionals in collecting, sharing, and using SDOH data. The resource guide is for informational and educational purposes only. It is not an exhaustive list and will be regularly updated.



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The Gravity Project



I am a health data professional and I'd like to learn how to **collect SDOH data.**



Guides & Resources:

[**AHIMA Articles: Journal of AHIMA**](#)

This website provides monthly articles involving strategies for improving the collection, sharing and use of SDOH data to improve health outcomes.

[**AHIMA Social Determinants of Health: Identifying Documentation Gaps in Workflow**](#)

2025

This resource provides guidance on a team-centered approach to the collection of SDOH data.

[**AHA ICD-10-CM Coding for Social Determinants of Health**](#)

2022

This resource guide focuses on improving the collection and utilization of SDOH Z codes.

[**Gravity Project Resource for the Documentation of Social Risks Related to the Accountable Health Communities \(AHC\) Health-Related Social Needs \(HRSN\) Screening Tool**](#)

This resource provides Gravity Project's suggested ICD-10-CM and SNOMED CT® codes for the AHC HRSN Screening Tool.

[**Gravity Project Resource: Confluence Portal**](#)

This site highlights the workstreams of the Gravity Project to develop consensus-driven standards on SDOH.

[**CMS Infographic: Improving the Collection of Social Determinants of Health \(SDOH\) Data with ICD-10-CM Z Codes**](#)

This infographic describes what Z codes are, why they should be collected, opportunities associated with using them and recent SDOH Z code categories and new codes.



Issue Briefs & Reports:

[AHIMA Data for Better Health Issue Brief](#)

2024

This issue brief shares early lessons learned from the launching of its Data for Better Health initiative.

Webinars & Workshops:

[AHIMA Webinar: Screening for Social Drivers of Health: Lessons from the Field](#)

2024

This webinar features Inova Health System as they share successful strategies working with their data analytics team to improve the collection, sharing, and analysis of SDOH data.

[AHA Virtual Workshop: Investing in the Power of Teams to Address Social Needs](#)

2021

This virtual workshop highlights the power of robust, interdisciplinary teams to address social needs.

[AMA Webinar: CPT Evaluation and Management \(E/M\) Guidelines: Implications for Patient Social Risk Data and Health Equity](#)

2022

This webinar is a CPT training module that describes the 2021 E/M office or other outpatient services coding guidelines, how these guidelines can help practices represent the time or complexity of medical decision-making associated with patient social risk and identifies opportunities for social risk data documentation, including its associated benefits and risks. The webinar also describes ways clinicians and care teams can use social risk data to improve quality of care and support population health management and community-level approaches to advance health equity.



**I am a health data
professional and I'd like to
learn how to **use** SDOH data.**



Guides & Resources:

[CMS Infographic: Using Z Codes: SDOH Data Journey Map](#)

This infographic describes the journey that SDOH data takes from the individual through the health system to data reporting as ICD-10-CM Z codes. It discusses data collection, documentation, coding, and reporting. It also contains resources to help implement programs to collect and report SDOH data in a manner that can lead to better health outcomes for individuals.



**I am a health data
professional and I'd like to
learn how to **share** SDOH data.**



Issue Briefs & Reports:

[Civitas Networks for Health/ The Gravity Project Social Care Co-Design Final Report](#)

This report explores insights from social care providers regarding Gravity data standards needed to collect, share, and use SDOH data as well as the subtleties between social care providers and Gravity relevant roles, requirements, and opportunities.

Guides & Resources:

[ASTP Social Determinants of Health Information Exchange Toolkit: Foundational Elements for Communities](#)

The toolkit aims to support communities working towards achieving health equity through SDOH information exchange and use of interoperable, standardized data to represent SDOH.