

SCREENING & REFERRAL FOR FOOD INSECURITY
IN KAISER PERMANENTE COLORADO

PRELIMINARY REPORT #1

**WHO ARE WE
SCREENING FOR
FOOD INSECURITY?**



BACKGROUND:

Social determinants of health, "[the health-related social circumstances in which people live and work](#)," include concerns such as food insecurity, housing instability, and transportation barriers. Health care systems have not traditionally addressed these issues in a systematic way, even though they profoundly affect health and health equity. As part of its mission to improve the health of its members and the communities it serves, Kaiser Permanente is developing programs to screen members for social determinants of health and refer individuals who request assistance to social services in their

communities.

This is the first preliminary report from an ongoing evaluation of screening and referral programs for food insecurity in Kaiser Permanente Colorado (KPCO). Our goal is to disseminate findings rapidly to stakeholders in KP and the broader community. The evaluation is funded by KP National Community Benefit.

PROGRAM DESCRIPTION:

Programs to screen health plan members for social determinants of health should be broad-based, rather than focusing exclusively on a subset of individuals assumed to be at [highest risk](#). Kaiser Permanente Colorado (KPCO) Medicare Advantage members are currently screened for food insecurity and other social determinants of health through the annual Medicare Total Health Assessment (MTHA) questionnaire.

This survey asks members to respond “yes” or “no” to a single question about food insecurity, “Do you always have enough money to buy the food you need?”

Q: What proportion of eligible members have been screened?

KPCO served 130,345 Medicare Advantage members for part or all of the period between January 2012 and December 2015. Of these members, 51,482 (40%) completed one or more MTHA surveys.

Q: Who have we screened?

The Table compares individuals who have completed the MTHA to those who have not:

Variable	Screened (N=51,482)	Unscreened (N=78,863)
Mean age (years)	71.2	71.4
% Female	55.0%	54.9%
Race/Ethnicity (% non-white or unknown)	18.0%	36.1%
Number of chronic conditions	3.0	3.4
No KP outpatient visit	12.6%	22.1%

CONCLUSIONS:

- Most older adults in KPCO have not yet been screened for FI or other social determinants of health. Program-wide efforts to increase MTHA completion are under way.
- Individuals who have been screened are less likely to be members of racial/ethnic minorities, have fewer chronic health conditions, and are more likely to use KP outpatient services than those who have not.

WHAT'S NEXT?

Since minority race or ethnicity, greater illness burden, and low service utilization may be associated with a higher prevalence of food insecurity, the actual rate of food insecurity in KPCO, may be even higher than the MTHA estimate, which will be the topic of our next preliminary report.

Thoughts and Comments?

Please contact John F. Steiner, MD, MPH or the study Research Assistant at kpbewell@kp.org

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