

118TH CONGRESS
2D SESSION

S. 3847

To authorize the Director of the Centers for Disease Control and Prevention to carry out a Social Determinants of Health Program, and for other purposes.

IN THE SENATE OF THE UNITED STATES

FEBRUARY 29, 2024

Ms. SMITH (for herself, Mr. MURPHY, Mr. WHITEHOUSE, Ms. BALDWIN, Mr. BLUMENTHAL, Mr. WELCH, Ms. KLOBUCHAR, and Mr. BROWN) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To authorize the Director of the Centers for Disease Control and Prevention to carry out a Social Determinants of Health Program, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Improving Social De-
5 terminants of Health Act of 2024”.

6 **SEC. 2. SOCIAL DETERMINANTS OF HEALTH PROGRAM.**

7 (a) PROGRAM.—To the extent and in the amounts
8 made available in advance in appropriations Acts, the Di-

1 rector of the Centers for Disease Control and Prevention
2 (in this Act referred to as the “Director”) shall carry out
3 a program, to be known as the Social Determinants of
4 Health Program (in this Act referred to as the “Pro-
5 gram”), to achieve the following goals:

6 (1) Improve health outcomes and reduce health
7 inequities by coordinating social determinants of
8 health activities across the Centers for Disease Con-
9 trol and Prevention.

10 (2) Improve the capacity of public health agen-
11 cies and community organizations to address social
12 determinants of health in communities.

13 (b) ACTIVITIES.—To achieve the goals listed in sub-
14 section (a), the Director shall carry out activities including
15 the following:

16 (1) Coordinating across the Centers for Disease
17 Control and Prevention to ensure that relevant pro-
18 grams consider and incorporate social determinants
19 of health in grant awards and other activities.

20 (2) Awarding grants under section 3 to State,
21 local, territorial, and Tribal health agencies and or-
22 ganizations, and to other eligible entities, to address
23 social determinants of health in target communities.

1 (3) Awarding grants under section 4 to non-
2 profit organizations and public or other nonprofit in-
3 stitutions of higher education—

4 (A) to conduct research on best practices
5 to improve social determinants of health;

6 (B) to provide technical assistance, train-
7 ing, and evaluation assistance to grantees under
8 section 3; and

9 (C) to disseminate best practices to grant-
10 ees under section 3.

11 (4) Coordinating, supporting, and aligning ac-
12 tivities of the Centers for Disease Control and Pre-
13 vention related to social determinants of health with
14 activities of other Federal agencies related to social
15 determinants of health, including such activities of
16 agencies in the Department of Health and Human
17 Services such as the Centers for Medicare & Med-
18 icaid Services.

19 (5) Collecting and analyzing data related to the
20 social determinants of health.

21 **SEC. 3. GRANTS TO ADDRESS SOCIAL DETERMINANTS OF**
22 **HEALTH.**

23 (a) IN GENERAL.—The Director, as part of the Pro-
24 gram, shall award grants to eligible entities to address so-
25 cial determinants of health in their communities.

1 (b) ELIGIBILITY.—To be eligible to apply for a grant
2 under this section, an entity shall be—

3 (1) a State, local, territorial, or Tribal health
4 agency or organization;

5 (2) a qualified nongovernmental entity, as de-
6 fined by the Director; or

7 (3) a consortium of entities that includes a
8 State, local, territorial, or Tribal health agency or
9 organization.

10 (c) USE OF FUNDS.—

11 (1) IN GENERAL.—A grant under this section
12 shall be used to address social determinants of
13 health in a target community by designing, imple-
14 menting, and evaluating innovative, evidence-based,
15 cross-sector strategies.

16 (2) TARGET COMMUNITY.—For purposes of this
17 section, a target community shall be a State, county,
18 city, or other municipality.

19 (d) PRIORITY.—In awarding grants under this sec-
20 tion, the Director shall prioritize applicants proposing to
21 serve target communities with significant unmet health
22 and social needs, as defined by the Director.

23 (e) APPLICATION.—To seek a grant under this sec-
24 tion, an eligible entity shall—

1 (1) submit an application at such time, in such
2 manner, and containing such information as the Di-
3 rector may require;

4 (2) propose a set of activities to address social
5 determinants of health through evidence-based,
6 cross-sector strategies, which activities may in-
7 clude—

8 (A) collecting quantifiable data from health
9 care, social services, and other entities regard-
10 ing the most significant gaps in health-pro-
11 moting social, economic, and environmental
12 needs;

13 (B) identifying evidence-based approaches
14 to meeting the nonmedical, social needs of pop-
15 ulations identified by data collection described
16 in subparagraph (A), such as unstable housing
17 or food insecurity;

18 (C) developing scalable methods to meet
19 patients' social needs identified in clinical set-
20 tings or other sites;

21 (D) convening entities such as local and
22 State governmental and nongovernmental orga-
23 nizations, health systems, payors, and commu-
24 nity-based organizations to review, plan, and
25 implement community-wide interventions and

1 strategies to advance health-promoting social
2 conditions;

3 (E) monitoring and evaluating the impact
4 of activities funded through the grant on the
5 health and well-being of the residents of the
6 target community and on the cost of health
7 care; and

8 (F) such other activities as may be speci-
9 fied by the Director;

10 (3) demonstrate how the eligible entity will col-
11 laborate with—

12 (A) health systems;

13 (B) payors, including, as appropriate, med-
14 icaid managed care organizations (as defined in
15 section 1903(m)(1)(A) of the Social Security
16 Act (42 U.S.C. 1396b(m)(1)(A))), Medicare
17 Advantage plans under part C of title XVIII of
18 such Act (42 U.S.C. 1395w-21 et seq.), and
19 health insurance issuers and group health plans
20 (as such terms are defined in section 2791 of
21 the Public Health Service Act (42 U.S.C.
22 300gg-91));

23 (C) other relevant stakeholders and initia-
24 tives in areas of need, such as the Accountable
25 Health Communities Model of the Centers for

1 Medicare & Medicaid Services, health homes
2 under the Medicaid program under title XIX of
3 the Social Security Act (42 U.S.C. 1396 et
4 seq.), community-based organizations, and
5 human services organizations;

6 (D) other non-health care sector organiza-
7 tions, including organizations focusing on trans-
8 portation, housing, or food access; and

9 (E) local employers; and

10 (4) identify key health inequities in the target
11 community and demonstrate how the proposed ef-
12 forts of the eligible entity would address such inequi-
13 ties.

14 (f) MONITORING AND EVALUATION.—As a condition
15 of receipt of a grant under this section, a grantee shall
16 agree to submit an annual report to the Director describ-
17 ing the activities carried out through the grant and the
18 outcomes of such activities.

19 (g) INDEPENDENT NATIONAL EVALUATION.—

20 (1) IN GENERAL.—Not later than 5 years after
21 the first grants are awarded under this section, the
22 Director shall provide for the commencement of an
23 independent national evaluation of the program
24 under this section.

1 (2) REPORT TO CONGRESS.—Not later than 60
2 days after receiving the results of such independent
3 national evaluation, the Director shall report such
4 results to the Congress.

5 **SEC. 4. RESEARCH AND TRAINING.**

6 The Director, as part of the Program—

7 (1) shall award grants to nonprofit organiza-
8 tions and public or other nonprofit institutions of
9 higher education—

10 (A) to conduct research on best practices
11 to improve social determinants of health;

12 (B) to provide technical assistance, train-
13 ing, and evaluation assistance to grantees under
14 section 3; and

15 (C) to disseminate best practices to grant-
16 ees under section 3; and

17 (2) may require a grantee under paragraph (1)
18 to provide technical assistance and capacity building
19 to entities that are eligible entities under section 3
20 but not receiving funds through such section.

21 **SEC. 5. FUNDING.**

22 (a) IN GENERAL.—There is authorized to be appro-
23 priated to carry out this Act, \$100,000,000 for each of
24 fiscal years 2025 through 2029.

1 (b) ALLOCATION.—Of the amount made available to
2 carry out this Act for a fiscal year, not less than 75 per-
3 cent shall be used for grants under sections 3 and 4.

○