

District of Columbia Hospital Association

# Improving the Use and Reporting of SDOH Z-Codes Across DC Hospitals

*Improving how hospitals identify and document the social factors that shape patient health.*



# 02 Setting the Scene

The District's Health-Related Social Needs (HRSN) initiative -- supported by the DC Department of Health Care Finance, CRISP DC, DC Hospital Association (DCHA), and District hospitals -- focuses on improving how hospitals identify and document the social factors that shape patient health. Social drivers of health (SDOH) such as housing instability, food insecurity, transportation needs, and interpersonal safety contribute to health inequities in health outcomes across the District.



SDOH Z-codes allow hospitals to document these non-clinical social needs and communicate them in the same way. A key part of this effort is helping hospitals adopt a standardized SDOH screening tool to improve knowledge of each individual's social needs and improve sharing this information with other providers using Z-codes. In 2020, only 4.4% of visits across DCHA-member hospitals included a Z-code. Additionally, hospitals lacked consistent approaches to screening for social needs, only 50% were using a standardized SDOH screening tool in 2023.



## Hospitals Cited Multiple Challenges

These gaps hindered accurate information sharing, prevented consistent identification of social needs, and limited the District's ability to use SDOH data to inform population health strategies.

Limited staff awareness of SDOH Z-codes

Absence of standardized screening workflows

Uncertainty in roles and responsibilities

Operational barriers or EHR limitations

## Action Taken



Hospitals across the District worked collaboratively to strengthen SDOH Z-code documentation and advance the use of standardized screening practices. These collective efforts aimed to better identify patients' social needs, improve care coordination, and support healthier communities.

Through the implementation of a comprehensive multi-level strategy, hospitals were able to:

1. Strengthen Use of Standardized Screening Tools
2. Participate in Annual SDOH Z-Code Education Webinars
3. Collaborate Continuously Through Committees

# 03 Action Taken

## 1. Strengthen Use of Standardized Screening Tools



Hospitals have been actively refining how they assess and document social needs by:

- Reviewing and improving their existing screening workflows
- Moving toward adoption of standardized SDOH screening tools
- Ensuring consistent evaluation of essential needs (housing, food access, transportation, utilities, and safety)
- Engaging staff across departments through targeted, readiness-based education

These shared efforts across hospitals have promoted more uniform screening practices and helped ensure patients' needs are identified more reliably.

## 2. Participate in Annual SDOH Z-Code Education Webinars



Each year, hospitals participate in collaborative educational sessions hosted by DCHA and the Haugen Training and Education Academy. The **webinars** cover:

- How to appropriately collect and document Z-codes
- Overview of standardized SDOH screening tools
- Roles and responsibilities across departments for collection of Z-codes
- CMS updates, including the recent classification of homelessness Z-codes as Complications or Comorbidities

These trainings help hospital IT staff, coders, physicians, nurses, and social workers learn how to effectively collect and document Z-codes and understand current CMS standards to capture patient's needs and inform care plans.

## 3. Collaborate Continuously Through Committees



Hospitals engage in ongoing forums to reinforce SDOH Z-code education and standardized SDOH screening through committees designed to use data-driven quality improvement methods to drive care improvement including:

- Building Healthy Communities Committee
- Coding Subcommittee
- Chief Nursing Officers Committee
- Physician Leaders Committee
- Care Coordination Committee



**Understanding SDOH Z-Codes  
Social Needs Screening Tools**

These committees create space for hospitals to share challenges, align practices, and strengthen coordinated approaches to meeting patient needs.

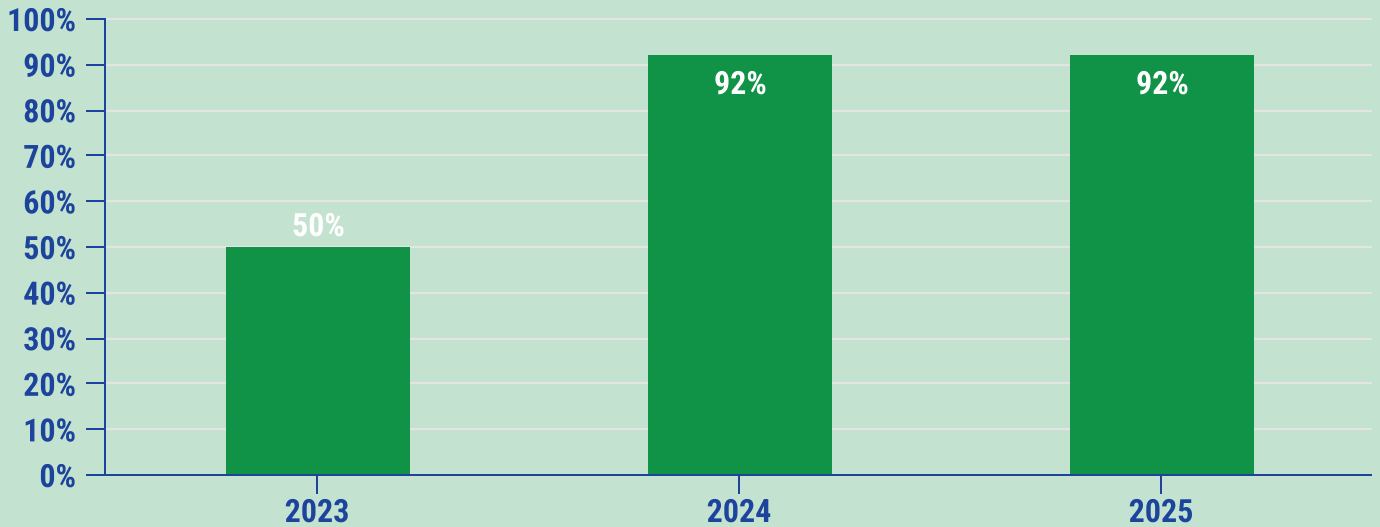


**Overall, through these combined efforts, hospitals have increasingly embedded SDOH screening into routine care, leading to more accurate Z-code assignments and informed interventions to support patients and communities.**

# 04 Results

In 2023, 50% of hospitals reported using a standardized screening tool to collect social drivers for health. By 2025, that number rose to 92%, reflecting significant growth in the adoption of standardized SDOH screening tools across hospitals. This rapid increase demonstrates hospitals' commitment to systematically identify patients' social needs and integrate that information into care planning, assignment of SDOH Z-codes, and supporting coordinated patient care.

## Standardized SDOH Screening Tool Across Hospitals, N=12



As a result of ongoing efforts to raise awareness and support hospitals in Z-code documentation, there has been a notable increase in the capture of social needs during patient visits. In 2020, only 4.4% of visits included at least one Z-code, reflecting limited documentation at the time. By 2024, that number increased by 7.2% with 11.6% of visits that included at least one Z-code. This demonstrates meaningful progress recording social drivers of health.

## Percent of Visits with at Least One Z-Code (2020-2024)



# 05 Why It Matters

Improving SDOH Z-code documentation strengthens hospitals' ability to see the full picture of a patient's health. Collecting accurate SDOH data allows hospitals to:

- Identify community needs and design targeted interventions.
- Improve care coordination by connecting patients to appropriate resources.
- Support equitable care by highlighting disparities that require action.
- Ensure appropriate reimbursement when homelessness-related Z-codes are documented as CCs.
- Enhance data accuracy for citywide planning, ultimately shaping policies and investments that improve population health.

By addressing social needs alongside clinical care, DC hospitals are continually working to build a more responsive, and community-centered health system for all patients.

