The version of California Assembly Bill (AB) 85 analyzed by CHBRP would require coverage and reimbursement of social determinants of health (SDOH) screening and would require insurers to provide "primary care providers with adequate access to community health workers...and inform primary care providers of how to access these community health workers." CHBRP assumes AB 85 would allow for reimbursement of one SDOH screening per year as part of typical preventive and wellness care visits.

**Background Context**
SDOH are nonmedical underlying structural factors that influence health status and health outcomes.

**Insurance Subject to the Mandate**
AB 85 would require coverage and reimbursement of SDOH screening for 24,853,000 California enrollees (64% of all Californians):
- ✔ Medi-Cal
- ✔ CDI and DMHC Regulated (Commercial & CalPERS)
- ❌ Federally Regulated

**Medical Effectiveness**
- Limited evidence that SDOH screening in a clinical setting increase referrals to community health workers/navigators/social services.
- Inconclusive evidence that SDOH screening in a clinical setting is associated with changes in health care utilization.

**Benefit Coverage and Cost Impacts**
Approximately 60% of commercial and CalPERS enrollees and 100% of Medi-Cal beneficiaries have coverage for SDOH screening at baseline. Postmandate, 100% of enrollees would have coverage for SDOH screening.

**Public Health Impacts**
The public health impact of AB 85 on improved health (or socioeconomic) status and outcomes is unknown. CHBRP estimates that an additional 211,000 commercially insured enrollees would receive SDOH screening in a clinical setting; and of those, 25,000 are likely to screen positive for ≥ 1 social need.

AB 85 would increase total net annual expenditures by $9,926,000 or 0.01% for enrollees with state-regulated insurance.