

Policy Brief:

Documenting the “Invisible Population” with Z-Codes: A Step Forward in Reducing Homelessness

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Executive Summary:

Identifying and mandating the collection of data on the Social Determinants of Health (SDoH), such as homelessness, housing instability, and housing status, by using IDC-10 Z-Codes, can greatly improve the quality of life, reduce and prevent future homelessness, and show the increased need for supportive services for “invisible populations” such as adults with severe mental illness (SMI) living with aging parents and caregivers (Coppa et al., 2022).

With the pending adoption of a county-wide, community health Electronic Health Record (EHR) system in San Mateo County, Z-Codes, added by the Center for Medicare and Medicaid Services (CMS) in 2015, are already embedded and ready for use within the ICD-10 diagnostic data tracking system used in EHR systems for billing and coding (Hendricks-Sturup et al., 2024).

Being able to more accurately track current homelessness and collect data on the unstably housed, such as the “invisible populations”, San Mateo County will be able to better plan and develop specialized services and allocate funds with documented and data-driven information.

Background and Significance:

- According to the most recent Point-in-Time Count conducted in January 2024, there are over 186,000 homeless persons in the state of California—that is 8% higher than the number in 2022 (La, 2024).
- In San Mateo County, homelessness increased by 18% from 2022 to 2024 with a total of 2,130 homeless and sheltered persons (San Mateo County Human Services Agency, 2024).
- Invisible Populations, such as adults with severe mental illness living with aging parents and caregivers, are at an extremely high risk for homelessness due to the instability of their housing situation which is dependent on the health and financial stability of their caregiver (Kaufman et al., 2010; Lefley, 1987).
- According to a study in progress by the University of San Francisco (Moser, 2024), Invisible Populations are not being documented in the County of San Mateo.
- Z-Codes, used to document the SDoH, can be used to document and produce tangible data on housing, housing instability, homelessness and mental health conditions through county-wide EHR systems (Rollings et al., 2022).

Position Statement:

The County of San Mateo should mandate the use of Z-Codes, especially housing status, at every community health and mental health patient encounter in order to more accurately track and collect data on the risk for homelessness and housing instability (“Invisible Populations”) to prepare and plan community needs accordingly.

- By mandating just one SDoH, such as housing, this will help simplify the process for the care team and make it less tedious thereby removing a major barrier of documentation.
- Z-codes already exist, yet are underutilized, but contain a wealth of information on the social determinants that affect mental health conditions, especially housing status.
- Documenting housing can help reduce unnecessary medical costs and help reduce homelessness (Young, 2023).
- Z-Codes will eventually be required by the CMS, by all Medical/Medicare providers, in CalAIMS assessments for documenting community mental health services (CalMHSA, 2024).
- By 2026, “all new mental health plans and reports from county and state will be based on community input and data” (MentalHealth.Ca.Gov, 2024).
- Documenting Z-Codes in EHR systems can generate tangible data that can be used for planning and allocating funds for community and state-funded projects.
- By making documenting the Z-codes for housing mandatory for community mental health, the County of San Mateo will be able to better prepare, with solid data, for future needs and resources and be able to identify the most vulnerable and “invisible populations” in their county.

References

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Survey Link and QR Code:

https://usfca.qualtrics.com/jfe/form/SV_1AeMZRucXSWIsnQ



Additional Resources:

- **Z-Codes related to Housing:**

(Z59): Problems related to housing and economic circumstances

- Z59.0: Homelessness
- Z59.1: Inadequate Housing
- Z59.2: Discord with neighbors, lodgers and landlord
- Z59.3: Problems related to living in a residential institution
- Z59.4: Lack of adequate food and safe drinking water
- Z59.5: Extreme poverty
- Z59.6: Low Income
- Z59.7: Insufficient social insurance and welfare support
- Z59.8: Other problems related to housing and economic circumstances
 - **Z59.811: Housing instability, Housed with risk for homelessness**
 - **Suggested Sub Specifier (for Invisible Population): Housing Instability, Housed with risk for homelessness; dependent adult with disability living with aging caregiver**
- Z59.9: Problem related to housing and economic circumstances, unspecified

Additional Links:

Link to all Housing and Economic Z-Codes:

- <https://www.icd10data.com/ICD10CM/Codes/Z00-Z99/Z55-Z65/Z59->

California Mental Health Services Authority: Cal AIM Documentation Guides:

- <https://www.calmhsa.org/calaim-documentation-guide/>

Center for Medicare and Medicaid Services:

- <https://www.cms.gov/files/document/z-codes-data-highlight.pdf>

Improving the Collection of SDoH with ICD-10 Z-Codes Infographic:

- <https://www.cms.gov/files/document/cms-2023-omh-z-code-resource.pdf>

Using Z-Codes Infographic:

- <https://www.cms.gov/files/document/zcodes-infographic.pdf>

UCSF Housing Screening Tools:

- <https://sirenetwork.ucsf.edu/housing-insecurity-instability-homelessness-questions>

Documenting Homelessness and Housing:

- <https://nhchc.org/wp-content/uploads/2019/08/ask-code-documenting-homelessness-throughout-the-healthcare-system.pdf>