



■ QIN-QIO
■ HQIC
■ ESRD

NQIC
Network of Quality Improvement and
Innovation Contractors
CENTERS FOR MEDICARE & MEDICAID SERVICES
QUALITY IMPROVEMENT & INNOVATION GROUP



Energy/Utility Insecurity: A Guide to Screening and Connecting Patients to Support Services



Energy or utility insecurity is the inability of households to meet basic energy needs. Energy encompasses electricity, gas, or other power sources for cooling, heating, lighting, and other uses of appliances and devices. The inability to meet these needs is often because of financial hardships or poverty but can also be a result of old, ill functioning or nonexistent equipment, or poor insulation.

Energy insecurity affects the ability of individuals to reside in comfortable environments leading to potentially dangerous conditions where they face either extreme heat or cold or sacrifice other basic needs (e.g., food or medication) to cover the cost of utilities. In addition, individuals may resort to using potentially hazardous alternatives such as space heaters or ovens as their primary source of heat.

According to the U.S. Department of Energy, one in four households report energy insecurity almost every month, some months, or within the last year based on data from July 2021 through May 2023¹. Households that identify as Black, Hispanic, or two or more races experience energy insecurity at disproportionately higher rates compared to households that identify as White or Asian. Renters and households that have lower income with children or older family members are more likely to report energy insecurity.

Impacts of energy insecurity:

- Increases the risk of food insecurity or unfilled medications because of energy and utility needs.
- Increases the risk of heat and cold stress.
- Increases the risk of hazards related to malfunctioning equipment, inappropriate use of heating sources, and lack of lighting.
- Increases risk of inability to use electronic medical equipment (e.g., dialysis or oxygen machines) or take medication that requires refrigeration (e.g., insulin).
- Increases the risk for mental health conditions (e.g., stress and anxiety) resulting from economic hardships and poor living conditions.
- Contributes to poorer health outcomes as well as social and environmental consequences (e.g., mold, asthma, stigma).

Because of climate change, extreme weather conditions are occurring more frequently and impacting those that are most vulnerable. To combat this, it is even more important that healthcare providers play a role in identifying and addressing energy/utility insecurity by screening patients and referring those who need help to appropriate resources.

¹U.S. Department of Energy, "Households of Color Continue to Experience Energy Insecurity at Disproportionately Higher Rates," July 6, 2023 <https://bit.ly/3P6SNOM>

Energy/Utility Insecurity: A Guide to Screening and Connecting Patients to Support Services (continued)

Here are some tips for introducing the topic of health-related social needs such as energy/utility insecurity with patients:

- Be proactive and educate patients before they come for an appointment why you are asking for this information. Let them know that it helps provide better care to all patients. For example, put flyers in the registration area or waiting area.
- Before screening patients, identify local resources where you can refer patients if they screen positive.
- When introducing the topic of any health-related social need to patients, explain the screening/referral process and ask permission to continue.
- Consider patients' cultural beliefs, language needs, and health literacy levels. Refer to the HHS [Think Cultural Health](#) website for strategies on communicating with culturally and linguistically diverse populations.
- Be empathetic and non-judgmental. Strive to make the patient feel understood and respected. Patients are more likely to share personal information and challenges they may be facing in a safe and welcoming environment.
- Refer to the [Take 5 Conversation Starter](#) by the Physicians Foundation for more tips.

The recommendation is that you screen all patients for energy insecurity.

Use screening questions from the

[Accountable Health Communities Health-Related Social Needs Screening Tool](#)

or another validated screening instrument.

1. "Think about the place you live. Do you have problems with any of the following?"
 - Pests such as bugs, ants, or mice
 - Mold
 - Lead paint or pipes
 - Lack of heat
 - Oven or stove not working
 - Smoke detectors missing or not working
 - Water Leaks
 - None of the above
2. "In the past 12 months has the electric, gas, oil, or water company threatened to shut off services in your home?"
 - Yes
 - No
 - Already shut off
3. How hard is it for you to pay for the very basics like food, housing, medical care, and heating? Would you say it is:
 - Very hard?
 - Somewhat hard?
 - Not hard at all?

If a patient screens positive:

- First, ask the patient if they would like help.
- If they say yes, refer them to support services.
- Document and code* the results in the patient's electronic medical record:

ICD-10-CM Diagnosis Code

- Z58.81 Basic services unavailable in physical environment
- Z59.11 Inadequate housing environmental temperature
- Z59.12 Inadequate housing utilities

*Please consult with a coding specialist to ensure proper coding.

Energy/Utility Insecurity: A Guide to Screening and Connecting Patients to Support Services (continued)

Additional Energy Insecurity Screening and Survey Tools

- [Accountable Health Communities Health-Related Social Needs Screening Tool](#)
(Available in ten languages)
- [Health Leads Social Needs Screening Toolkit](#) (Available in two languages)
- [The EveryONE Project](#) (Available in six languages)
- [The PRAPARE Screening Tool](#) (Available in 25 languages)

Resources

Resources to address energy insecurity vary by geographic location. The first two are national resources, and the third provides the ability to search for local programs that offer assistance for your patients.

- **The Low-Income Home Energy Assistance Program (LIHEAP)**
Offers assistance for families that need help with energy costs. Depending on a family's location, they can access services such as crisis assistance, weatherization support, equipment repair and replacement, and disaster assistance.
<https://liheapch.acf.hhs.gov/search-tool>
- **The Weatherization Assistance Program (WAP)**
Offers assistance to households that are eligible for weatherization services.
<https://www.energy.gov/scep/wap/how-apply-weatherization-assistance>
- **Neighborhood Navigator**
Provides localized resources by zip code such as assistance to pay for utilities and maintenance and repairs.
<https://navigator.aafp.org>
- **Social Determinants of Health (SDOH): A Guide for Getting Started**
This resource guide provides national search tools to find local/state SDOH resources.
<https://bit.ly/3QQJDqK>

Contact IPRO for help getting started and connecting with local community-based organizations that provide support services to address health-related social needs.

<https://qi-ipro.tempurl.host/about-us/hqic/hqic-contact>



Energy/Utility Insecurity: A Guide to Screening and Connecting Patients to Support Services (continued)

References

Billioux A, Verlander K, Anthony S, Alley D. “Standardized screening for health-related social needs in clinical settings: The accountable health communities screening tool.” Discussion Paper, *National Academy of Medicine*, Washington, DC. 2017. <https://bit.ly/3qzfQbn>

Cook, J. T., et al. (2008). “A Brief Indicator of Household Energy Security: Associations with Food Security, Child Health, and Child Development in US Infants and Toddlers.” *Pediatrics*, 122(4), 867-875. doi:10.1542/peds.2008-0286 <https://bit.ly/3YL6mX2>

“Energy Insecurity And Health: America’s Hidden Hardship,” *Health Affairs Health Policy Brief*, June 29, 2023. DOI: 10.1377/hpb20230518.472953 <https://bit.ly/3QPQuk5>

Hernández D. “Understanding ‘Energy Insecurity And Why It Matters To Health.’” *Soc Sci Med*. 2016 Oct;167:1-10.doi: 10.1016/j.socscimed.2016.08.029. Epub 2016 Aug 21. PMID: 27592003; PMCID: PMC5114037. <https://bit.ly/45b8Lg5>

Jessel S, Sawyer S, Hernández D. “Energy, Poverty, and Health in Climate Change: A Comprehensive Review of an Emerging Literature.” *Front Public Health*. 2019 Dec 12;7:357. doi: 10.3389/fpubh.2019.00357. PMID: 31921733; PMCID: PMC6920209. <https://bit.ly/3KO1uKY>

Memmott, T., Carley, S., Graff, M. et al. “Sociodemographic disparities in energy insecurity among low-income households before and during the COVID-19 pandemic.” *Nat Energy* 6, 186–193 (2021). <https://bit.ly/3qFWNfo>

U.S. Department of Energy, Households of Color Continue to Experience Energy Insecurity at Disproportionately Higher Rates, July 6, 2023. <https://bit.ly/3P6SN0M>

U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services. Accountable Health Communities Model, May 17, 2023. <https://innovation.cms.gov/initiatives/ahcm>.

This material was prepared by the IPRO HQIC, a Hospital Quality Improvement Contractor, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS.

IPRO-HQIC-Tsk51-23-350 v3a 9/20/2023 vb