



Department
of Health

Medicaid
Redesign Team

Housing High-Need/High-Cost Medicaid Recipients: MRT Supportive Housing Update

15th Annual New York State Supportive Housing Conference
New York State Marriott Marquis
1535 Broadway, New York City

Thursday, June 4, 2015

MRT Supportive Housing

- Medicaid Redesign Investment: **\$388 Million**
 - \$75 million in 2012-13
 - \$86 million in 2013-14
 - \$100 million (\$95 million cash) in 2014-15
 - \$127 million in 2015-16
- Funding is targeted to **high-cost Medicaid users (Single ADULTS)**
- MRT Supportive Housing investment targets **capital construction, rental subsidies and supports, and operating dollars.**
- **Outcomes, measures, research and evaluation are key components.**

Targeting High-Need/High-Cost Medicaid Recipients

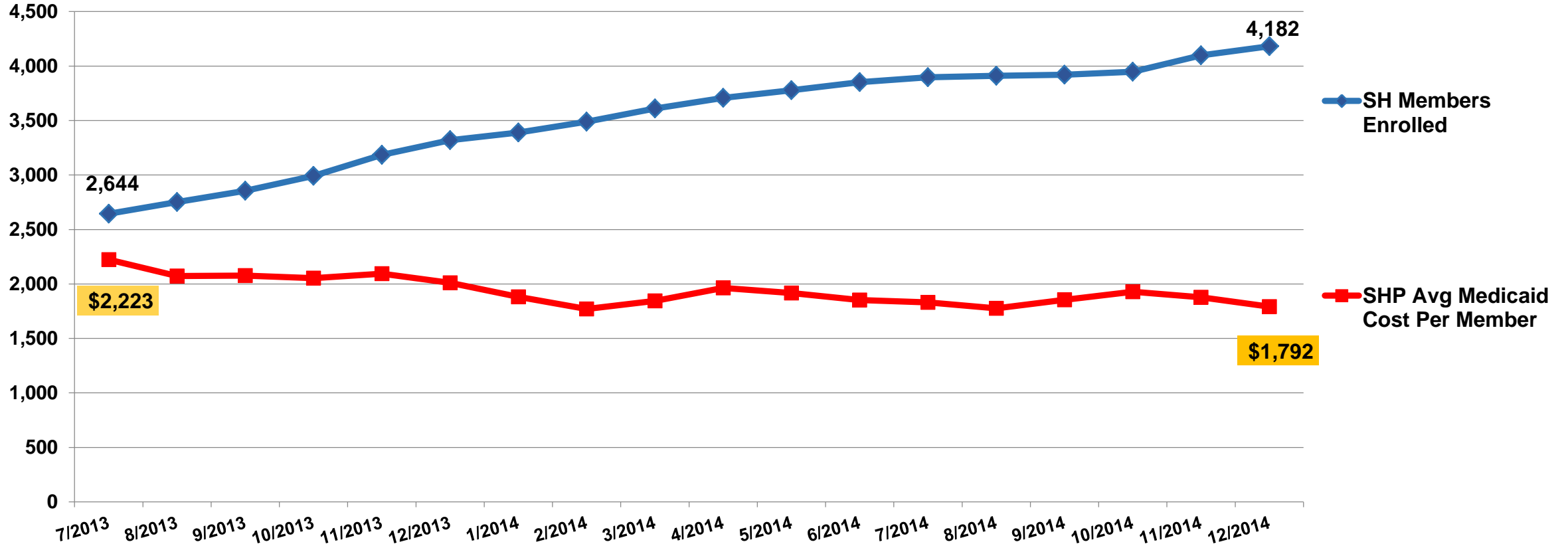
- Target High-Cost Medicaid Users.
- Instead of setting a threshold or a definition of a “high-cost Medicaid user,” the Department linked most MRT SH programs to Health Homes.
 - *While the majority of Medicaid enrollees are relatively healthy and only require access to primary care practitioners to obtain episodic and preventive health care, the Medicaid program also has several population groups who have complex medical, behavioral, and long term care needs that drive a high volume of high cost services including inpatient and long term institutional care*
- **Health Homes Eligible**
 - 2 chronic conditions or a single qualifying condition (HIV or SMI)

Targeting High-Need/High-Cost Medicaid Recipients

- Programs have started at various times over the past 4 years.
- To date, serve over 9,000 high-cost Medicaid Members.
- Early data suggests trends are moving in the right direction.
 - *Process of data cleansing*
 - *Preliminary findings*

MRT Supportive Housing Medicaid Cost Trends

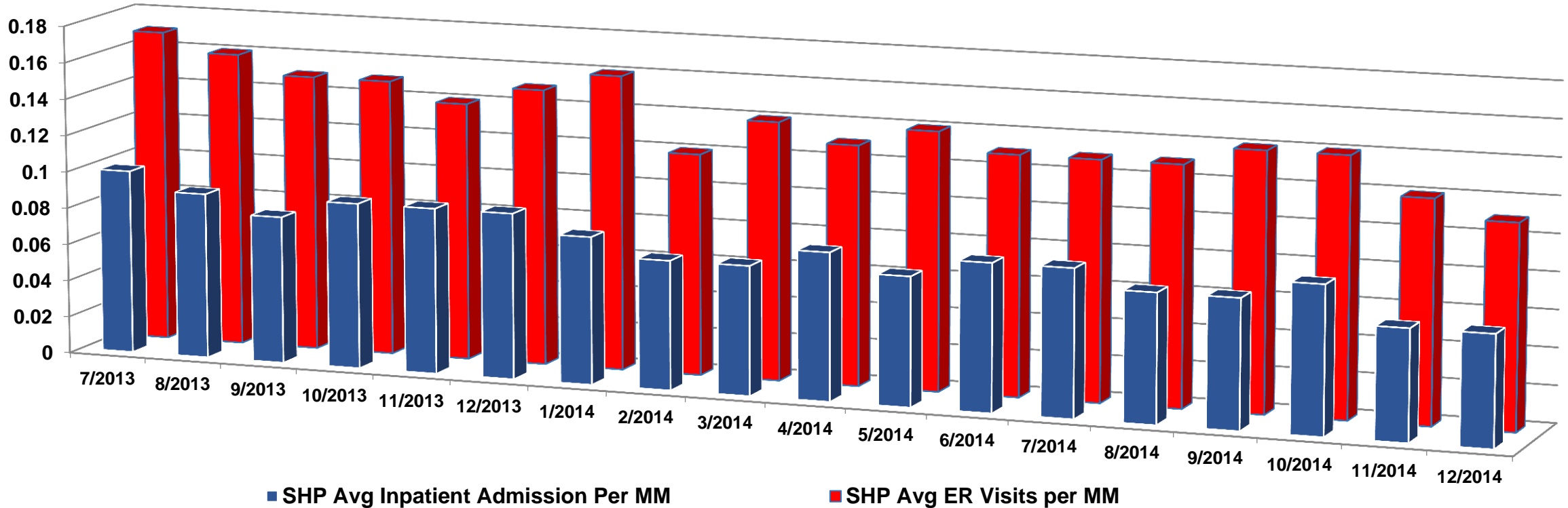
MRT Supportive Housing Average Medicaid Cost Savings Per Member
During Service Dates July 2013 - Dec. 2014



- Summary of the cost savings for all of our MRT Supportive Housing programs over a year and a half
- As enrollment increased, the average cost to the Medicaid program per member continued to decline

MRT Supportive Housing Medicaid Cost Trends

MRT Supportive Housing Medicaid Members Average Inpatient Admissions and Average ER Visits Per Member During Service Dates July 2013 - Dec. 2014



Trends for both ER and Inpatient utilization appear to be decreasing over time for Medicaid members receiving MRT Supportive Housing services.

**Median unavailable for calculation*

Challenges

- Establishing a strict definition of “High Cost” Medicaid User.
- Need to develop criteria Statewide for all MRT Pops.
- The criteria needs to provide enough guidance to providers but **also be flexible enough for consumers.**

Next Steps

- Cleanse data for all agencies.
- Develop Salient bookmarks to assess the savings of each MRT SH program.
- Identify trends with each program and population.
- Build out our Research and Evaluation Platform.
- Potentially change policy decisions (or not) after analyzing data.

**Questions?
Or
Comments**