



Finding & Housing High Need Medicaid Recipients: Harder Than You'd Think

June 2, 2016

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The Bronx Health & Housing Consortium is a collaborative network of representatives from health, housing, and social service providers, governmental agencies, and the four Health Homes in the Bronx with the shared goal of streamlining client access to health care and quality housing.

Steering Committee

- Health Organizations/Health Homes:
 - Bronx Lebanon Hospital Center/Bronx Health Home
 - Montefiore Medical Center/Bronx Accountable Healthcare Network (BAHN)
 - NYC Health + Hospitals Health Home
 - Community Care Management Partners (CCMP)
 - NYC Correctional Health Services
- Housing and Community-Based Organizations:
 - BronxWorks
 - Concern for Independent Living
 - Geel Community Services
 - Urban Pathways
 - West Side Federation for Senior and Supportive Housing

What We Do

- **Research & Advocacy**
 - Hospital HOPE Count
 - Bronx Health Homes Housing Needs study and white paper
 - Bronx Frequent Users Initiative with CSH
- **Cross-Sector Collaboration**
 - Housing Marketplace Series
 - Interagency Case Conferences
- **Training and Resources**
 - Trainings on housing and common medical issues affecting homeless people
 - Health Home White Pages
 - MRT Supportive Housing Pilot: Toolkit and Lessons Learned

What is MRT Housing?

- New York State Department of Health (NYSDOH) Medicaid Redesign Team (“MRT”) announced the release of over \$26 million for six new pilot projects to test innovative supportive housing models of care.
- This new initiative is included within the State’s overall investment of more than \$388 million over the past three years in supportive housing programs targeted at New York’s high-cost Medicaid members.
- Scattered-Site or Congregate
- Funded through OASAS or OMH

Who is eligible?

- Single adults with active Medicaid
- Health Home eligible/enrolled
- Chronic medical conditions: Diabetes, respiratory disease, heart disease, obesity, asthma, cancer, Hepatitis C, high blood pressure
- High Medicaid use/cost
- Currently housing instability, with no other housing options
- Ability to live independently with supports in place (cook, clean and grocery shop)

Consortium's MRT Workgroup

- Amida Care
- Beacon Health Options
- BronxWorks
- Bronx Accountable Healthcare Network (BAHN)
- Bronx-Lebanon Hospital Center
- Center for Urban Community Services (CUCS)
- Corporation for Supportive Housing (CSH)
- Empire BlueCross BlueShield Amerigroup
- The Fortune Society
- Greater New York Hospital Association (GNYHA)
- Montefiore Medical Center, CMO
- Project Renewal
- Services for the Underserved
- Supportive Housing Network of New York

Why Target?

- There are very few units available in the Bronx—fewer than 40 (20 BronxWorks and <20 Fortune Society)
- Pilot units only require Health Home eligibility so there is an opportunity to target people who don't meet existing SH criteria
- Potential for additional investment in housing for high cost/high need Medicaid recipients but must be able to show cost savings and improved health outcomes
- With demand for housing far outpacing the availability, we must be strategic and intentional in placing people into the most appropriate housing for their needs.

Whom to Target?

- People for whom housing will likely and primarily result in lower Medicaid costs.
- People for whom housing will likely and primarily result in a measurably higher quality of life and improvement in health outcomes, but whose Medicaid costs may not decrease.
- People who are able to live relatively independently, as most initial pilot units are scattered-site

How to Target?

1. Ensure person is enrolled in a Health Home
2. Determine person has a need for housing
3. Obtain Medicaid Utilization Costs
4. Submit forms and utilization data to MRT housing provider
5. Client Interview
6. Consent and Lease forms

How to establish success over time?

- Reduced avoidable hospital utilization
- Reduced health care costs
- Increased engagement in preventative and outpatient care
- Improved health outcomes and quality of life

Challenges

- Identifying suitable and affordable housing units
- Need for staff training
- Medicaid recertification and Managed Care
- Accessing housing history information
- Working with other stakeholders

Lessons Learned

- There are many people who qualify for and need this housing
- We need to expand criteria for supportive housing to include this significant cohort who do not meet current NY/NY criteria
- We can no longer work within a vacuum
- While the challenges are many, there is also great opportunity; we have to take advantage of it

Thank you!

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