Supportive Housing for High-Need Medicaid Users in New York State

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*See final slide for full listing of Research Team
Background

• Medicaid Redesign Team in NYS
  – Established by Gov. Cuomo in 2011
  – Tasked with developing a multiyear reform plan
  – Control health care costs through improving health of program participants
• 5% of consumers are responsible for 50% of health care costs
  – Multiple chronic medical conditions
  – Behavioral health problems
  – Environmental risk factors
Supportive Housing

• Affordable housing paired with supportive services

• Focus on homeless or unstably housed
  – Incl. some nursing home diversion, home modification, eviction prevention

• For more information:
NYS Agencies Sponsoring MRT Supportive Housing Programs

• New York State Department of Health
  – Office of Health Insurance Programs*
  – AIDS Institute
• Office of Mental Health
• Office of Alcohol and Substance Abuse Services
• Office for Persons With Developmental Disabilities
• Office for Temporary and Disability Services
• Homes and Community Renewal
Fast Facts:

- Programs are generally capital projects, rental subsidies, or services-only
- 20,000 persons served to date
- 65% in NYC, 3% Long Island, rest throughout upstate NY
- 20 programs
- >120 providers
Evaluation

- NYSDOH contracted with UAlbany
- Comprehensive evaluation includes study of:
  - Implementation
  - Targeting
  - Outcomes
  - Cost
  - Access
Comorbidities in MRT-SH

• Serious health conditions are prevalent
  – 66% have severe mental illness
  – 46% have a substance use disorder
  – 53% have some other chronic medical condition (exclusive of HIV)

• Most clients have multiple conditions
  – 20% have all 3 types of conditions
  – 36% have 2 of these
  – 28% are enrolled in AIDS Institute programs, usually with at least one other condition

• Only 12% have none of these conditions
Pre-Period Utilization

• Inpatient
  – 44% had at least 1 inpatient stay
  – Average 10.1 inpatient days

• Emergency department
  – 60% had at least 1 ED visit
  – Average 3.1 ED visits
Post-Period utilization

• Inpatient
  – 36% had at least 1 inpatient stay (18% reduction)
  – Average 6.1 inpatient days (40% reduction)

• ED
  – 53% had at least 1 ED visit (12% reduction)
  – Average visits 2.3 (26% reduction)
Changes in costs

• Total Medicaid spending for 2,071 clients analyzed was $82,807,18
  – Average $39,984 per client

• Total cost savings = $6,130 per person (a 15% reduction)
Some promising programs

- **OPWDD:**
  - average savings = $49,177 pp
- **East 99th Street (a capital project):**
  - average savings = $11,841 pp
- **OASAS:**
  - average savings = $10,866 pp
- **OMH Rental Subsidies – Brooklyn**
  - average savings = $9,794 pp
Looking forward: MRT-SH Evaluation

- Adding second post-period year
- Factoring in program costs
- Adding a comparison group using propensity score matching
- Looking at dosage effects
Research Team

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For more information:

https://www.health.ny.gov/health_care/medicaid/redesign/supportive_housing_initiatives.htm