Preliminary Findings on Homeless Service Use and Medicaid Spending in New Jersey

2017 Governor's Conference on Housing and Economic Development

October 5, 2017
UPDATED October 16, 2017
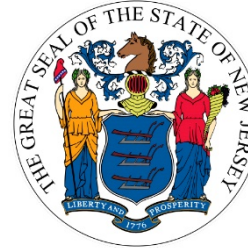Atlantic City, NJ

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Acknowledgement

The views expressed in this presentation are exclusively those of project team, and may not reflect those of the project sponsors or the state agencies contributing data.

Outline

- Background on Medicaid
- Project overview
- Selected preliminary findings

NJ Medicaid Enrollment Jan. 2013-Aug. 2017
By eligibility category

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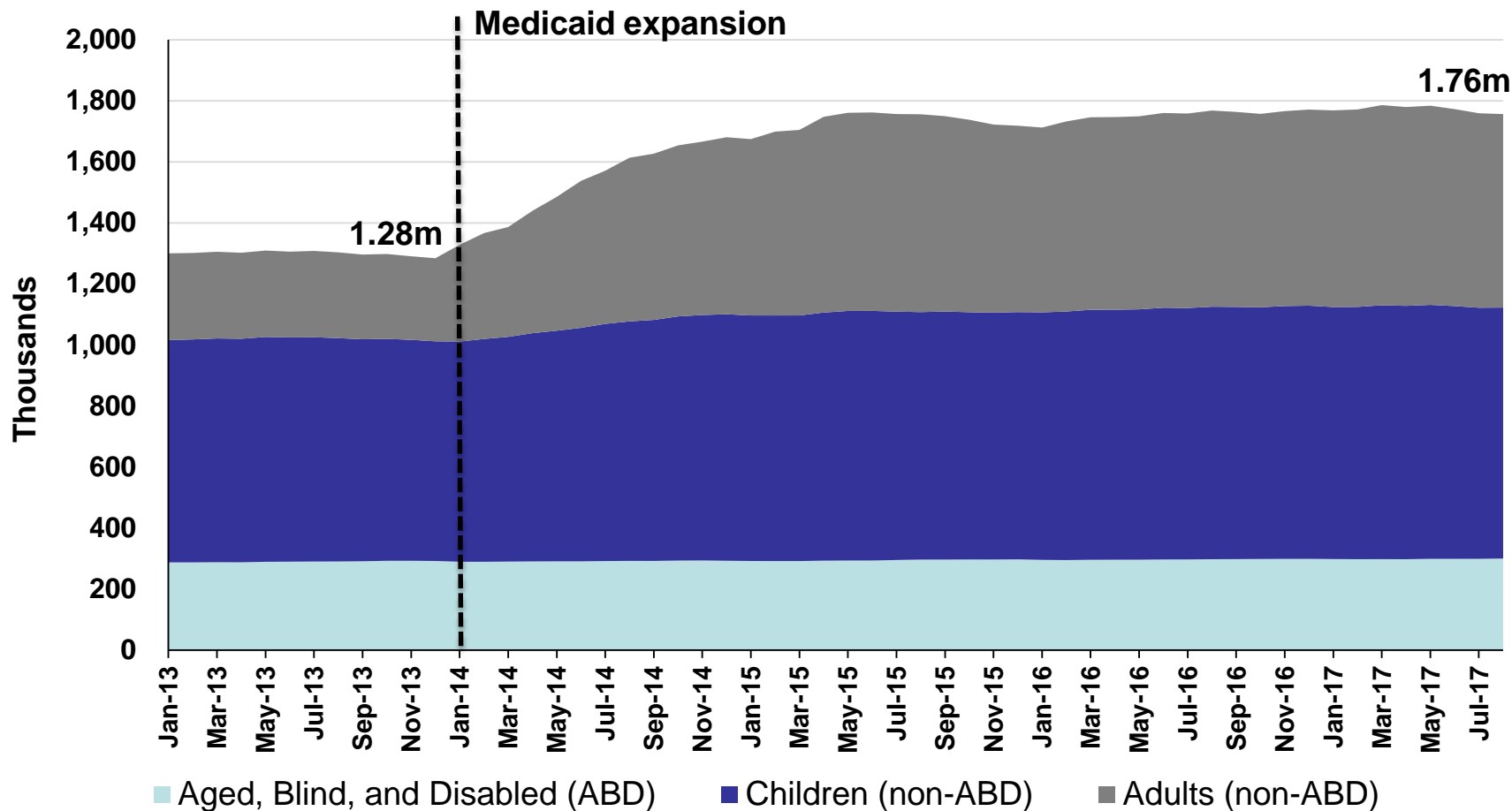
Source: NJ Department of Human Services.
http://www.state.nj.us/humanservices/dmahs/news/reports/index.html. Note: Children are under age 21.

Distribution of Total NJ Medicaid Spending by Spending Group, 2013

Source: Rutgers Biomedical and Health Sciences Working Group on Medicaid High Utilizers

Distribution of Total NJ Medicaid Spending by Spending Group, 2013

Top 0.1% of enrollment accounts for 7% of spending

Enrollment & Spending share
- <0.1%
- 0.1-1%
- 1-5%
- 5-10%
- 10-25%
- 25-50%
- Bottom 50%

Share of Enrollment

Share of Spending

Source: Rutgers Biomedical and Health Sciences Working Group on Medicaid High Utilizers

Distribution of Total NJ Medicaid Spending by Spending Group, 2013

Top 1.0% of enrollment accounts for 28% of spending

Enrollment & Spending share

- ■ <0.1%
- ■ 0.1-1%
- ■ 1-5%
- ■ 5-10%
- ■ 10-25%
- ■ 25-50%
- ■ Bottom 50%
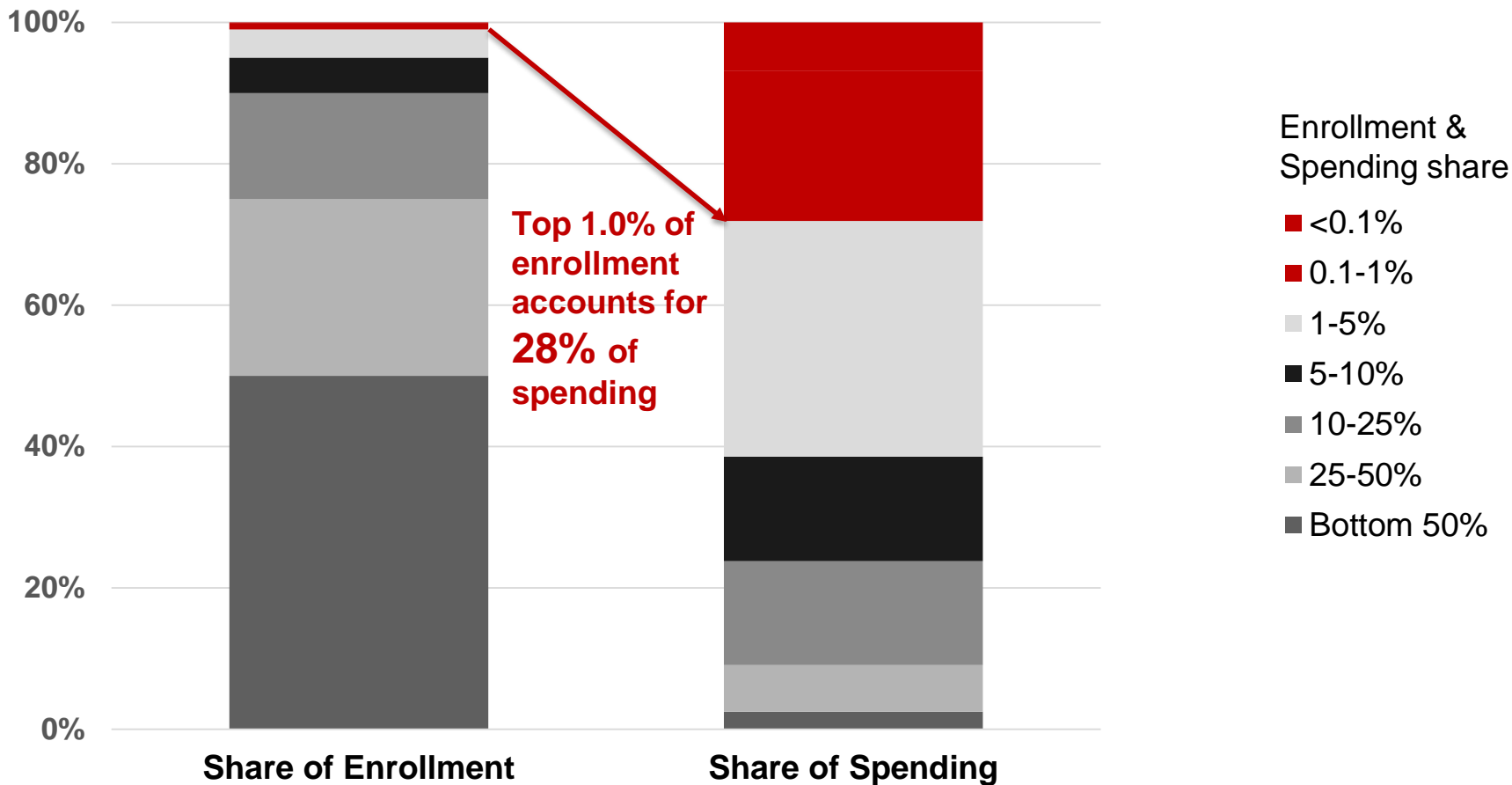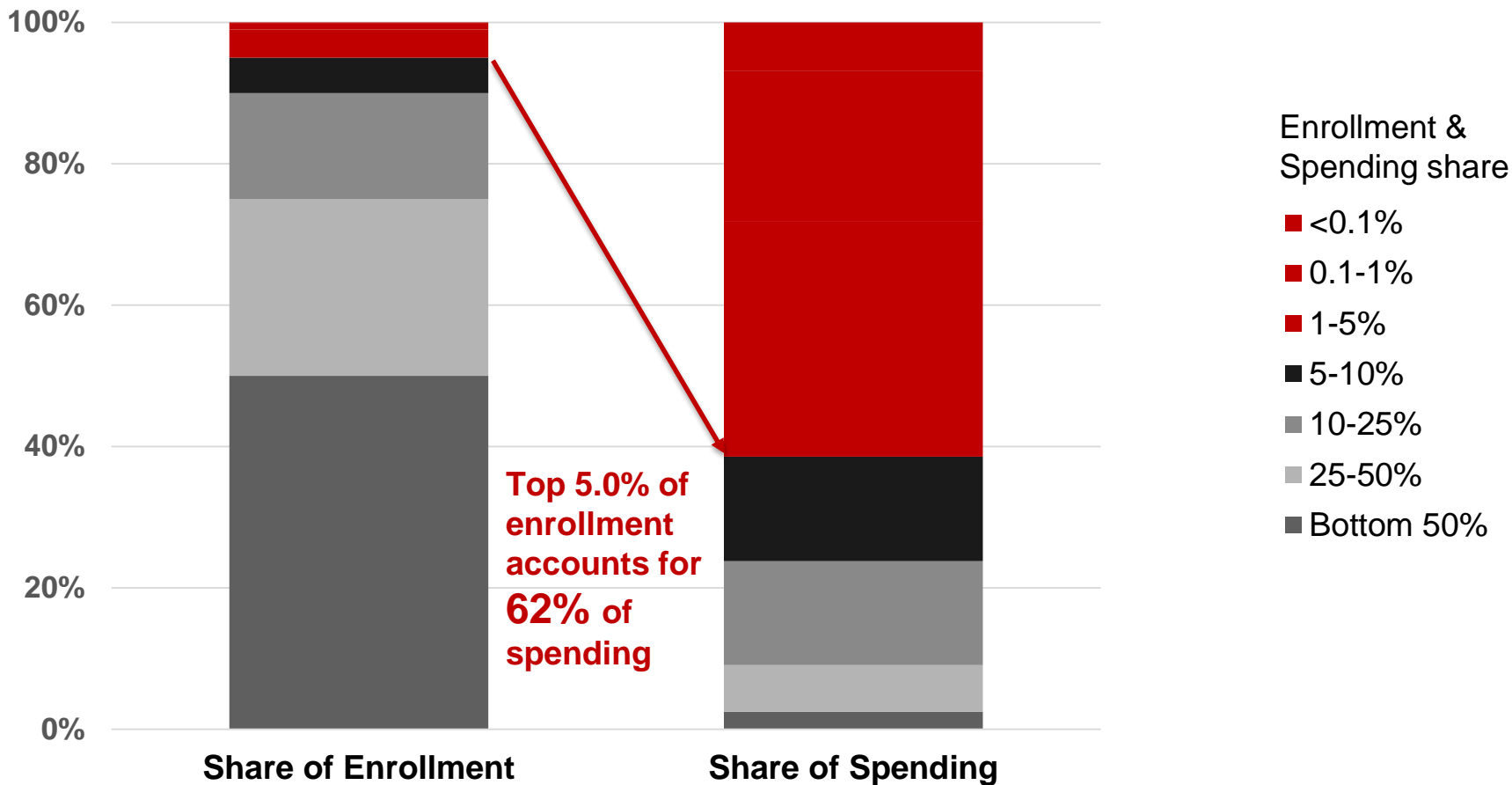
Share of Enrollment

Share of Spending

Source: Rutgers Biomedical and Health Sciences Working Group on Medicaid High Utilizers

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Distribution of Total NJ Medicaid Spending by Spending Group, 2013

Top 5.0% of enrollment accounts for 62% of spending

Enrollment & Spending share
- <0.1%
- 0.1-1%
- 1-5%
- 5-10%
- 10-25%
- 25-50%
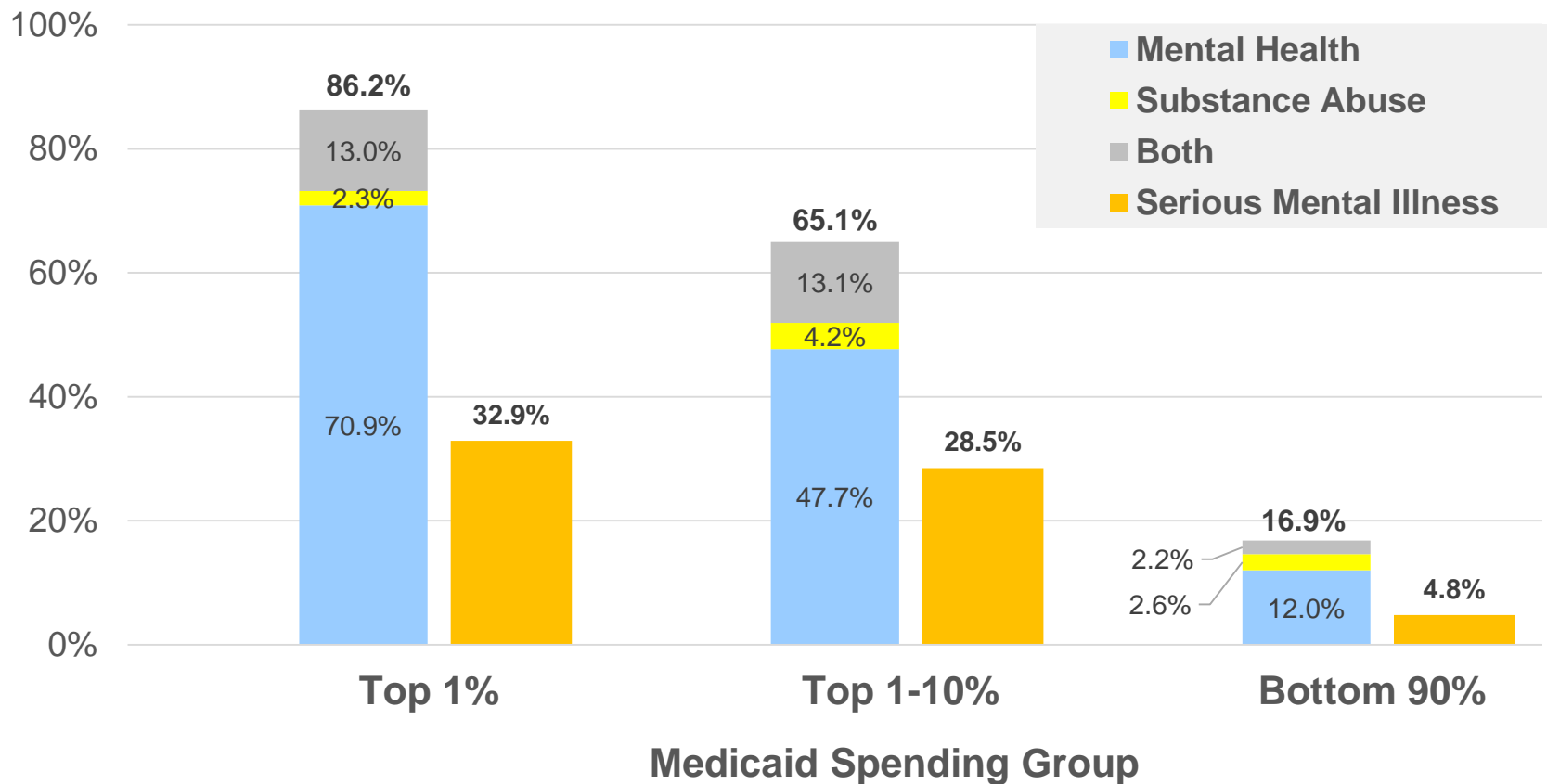- Bottom 50%

Share of Enrollment

Share of Spending

Source: Rutgers Biomedical and Health Sciences Working Group on Medicaid High Utilizers

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Mental Health and Substance Use Disorder Diagnoses by Spending Group, 2013

Project Goals

1. Link 2011-16 data from the Homeless Management Information System (HMIS) to the Medicaid Management Information System (MMIS).

2. Identify opportunities to generate Medicaid savings and improve patient outcomes among Medicaid beneficiaries who use homeless services.

3. Estimate the impact on Medicaid spending of permanent supportive housing placement.

4. Engage state officials and other interested stakeholders.
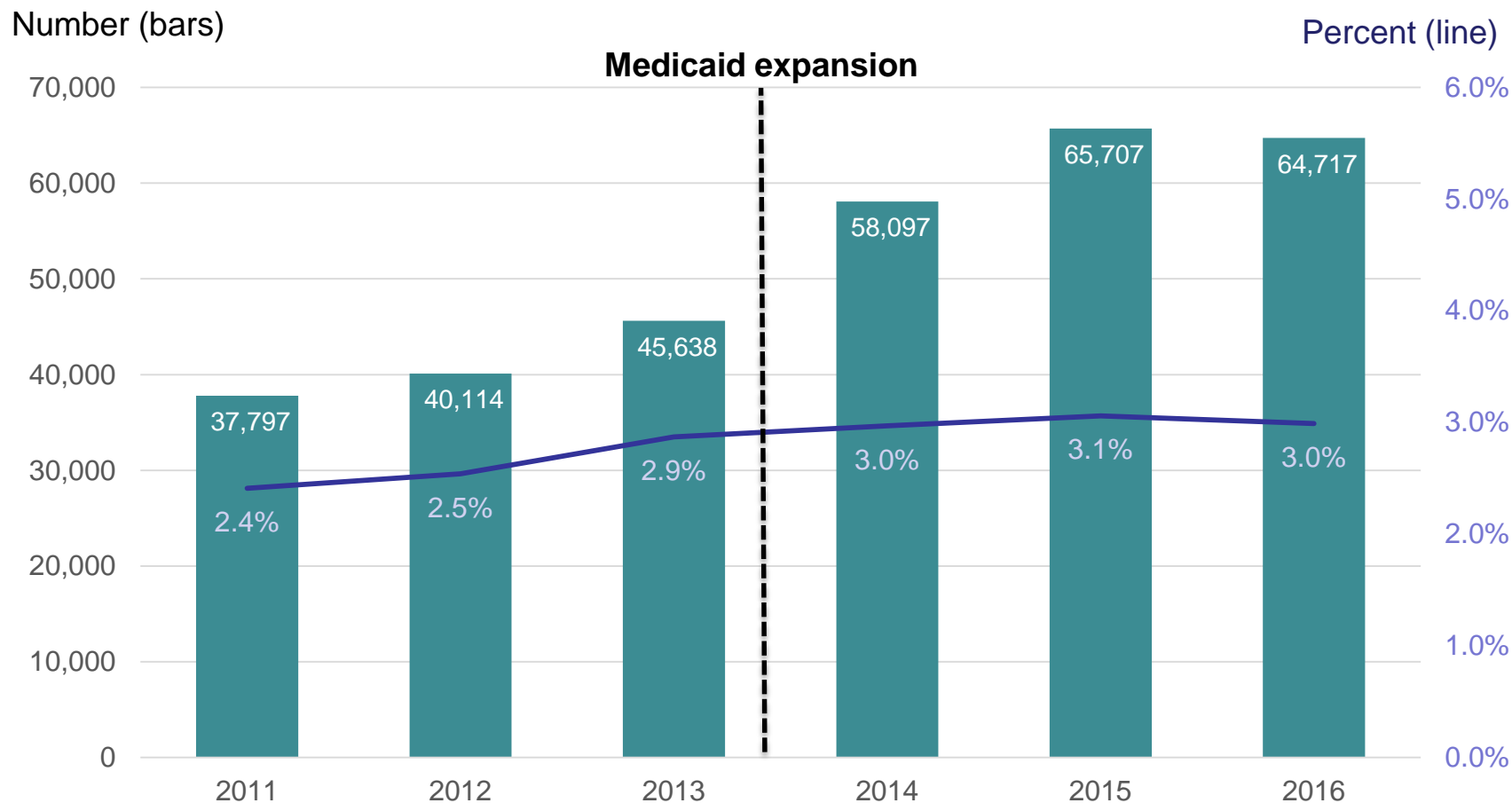
A Few Project Specifics

- HMIS data from the NJ Housing and Mortgage Finance Agency
  - Housing services, client characteristics
  - All counties for some services (e.g., emergency shelters) and 19 of 21 counties for other services (e.g., supportive housing).
- MMIS data from NJ Div. of Medical Assistance and Health Services
  - Beneficiary characteristics, service use, spending
  - All NJ Medicaid beneficiaries
- Data for 2011-2016 linked using client/beneficiary IDs under inter-agency Data Sharing Agreement
- De-identified linked data shared with Rutgers for analysis under Data Use Agreements and approval of Rutgers Institutional Review Board
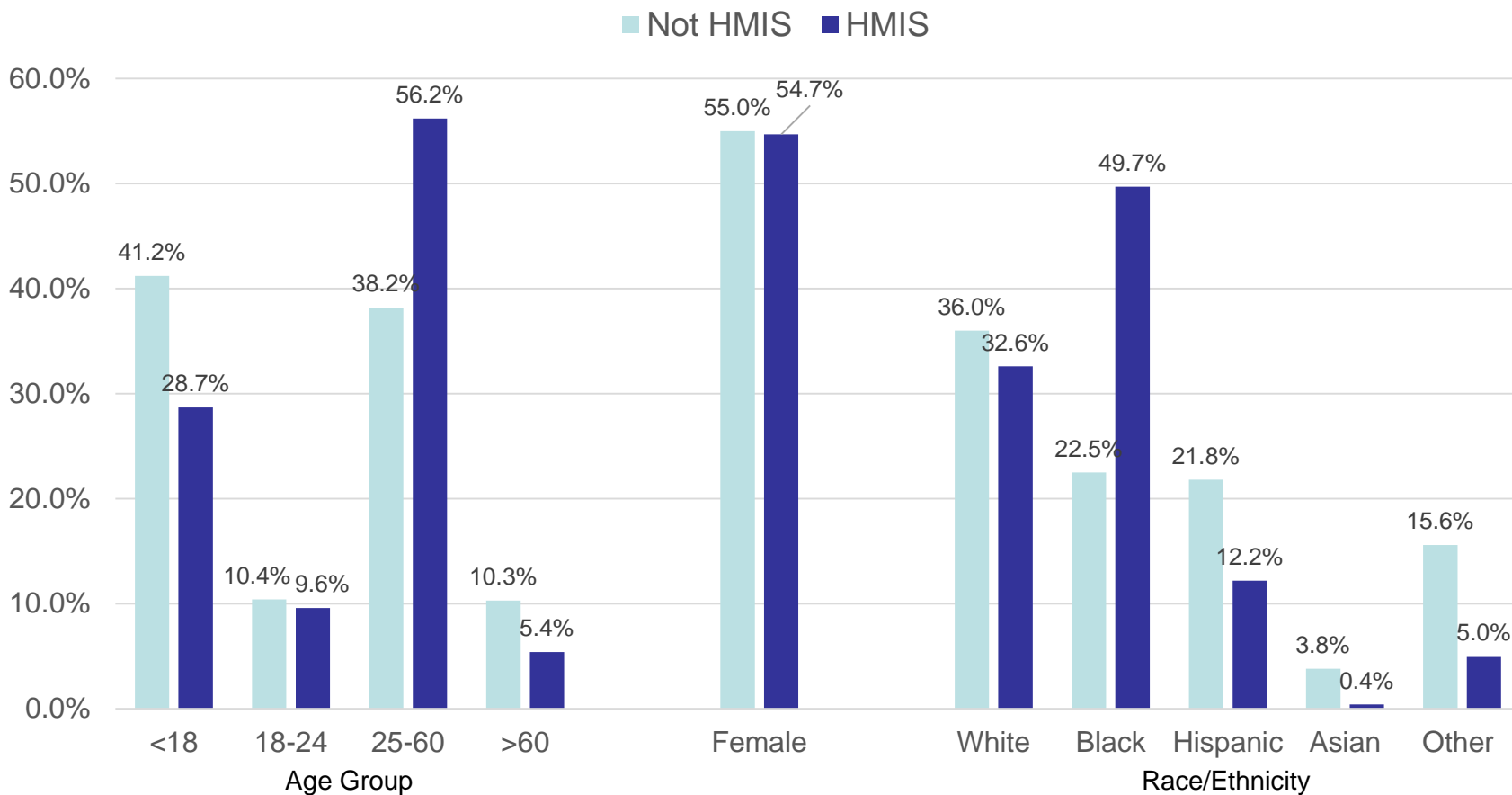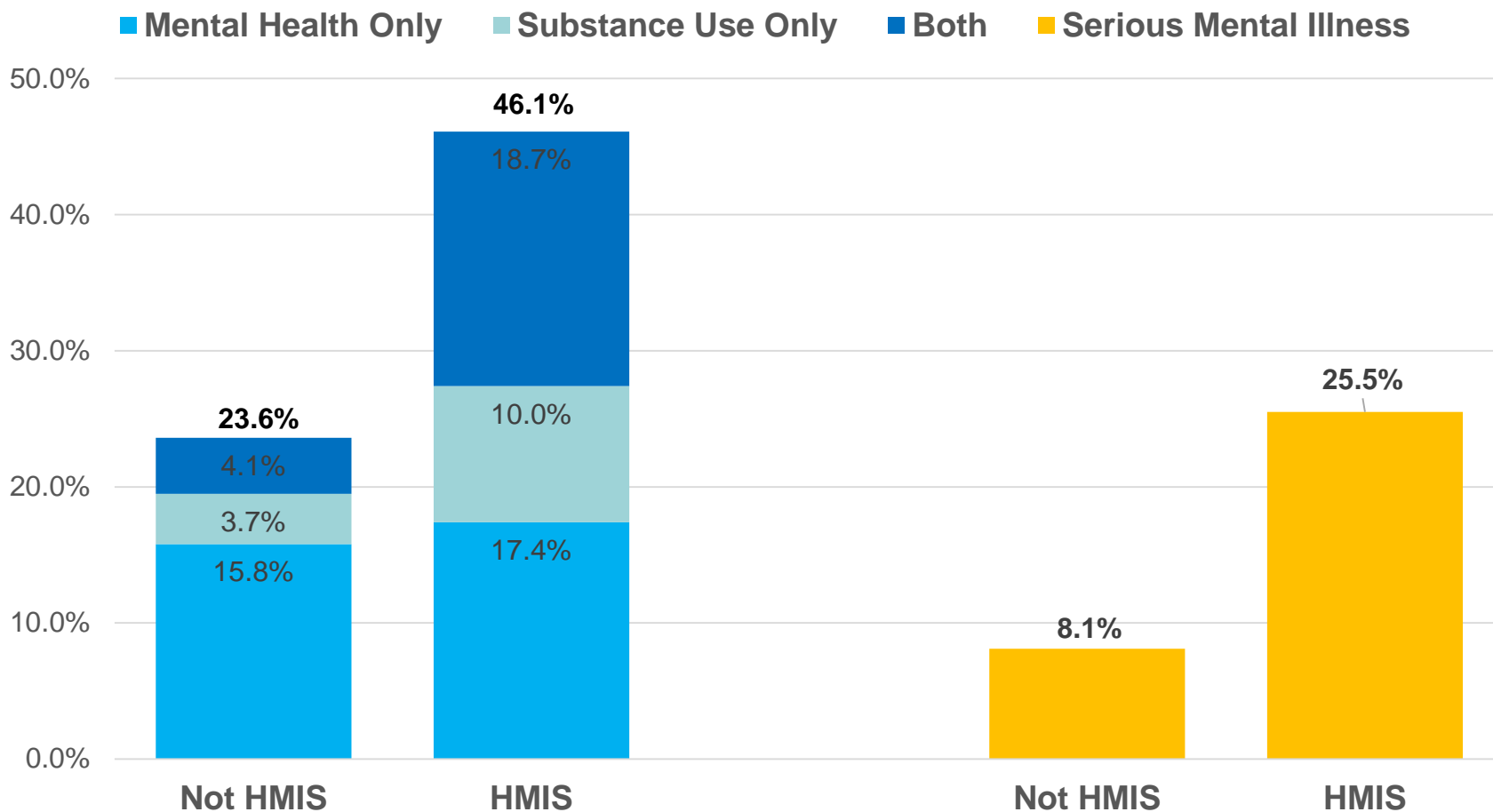
The Study Population & Focus for Today

Medicaid, Not HMIS

Medicaid & HMIS
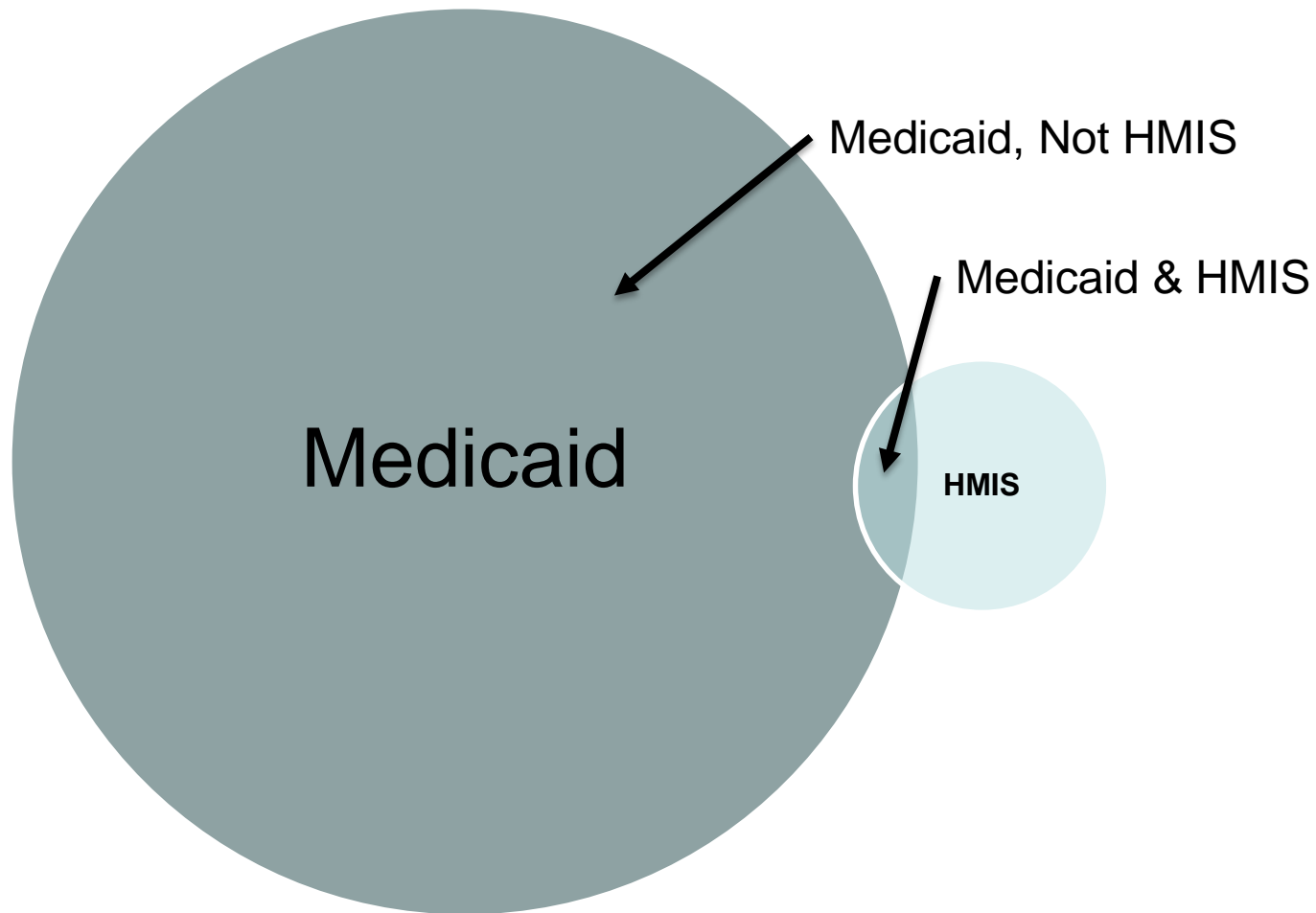
Medicaid

HMIS

Note: Not to scale

Number and Percent of Medicaid Beneficiaries in HMIS

Demographics of Medicaid Beneficiaries by HMIS Status, 2015

Bar chart legend: ■ Not HMIS ■ HMIS

Age Group:
- <18: Not HMIS 41.2%, HMIS 28.7%
- 18-24: Not HMIS 10.4%, HMIS 9.6%
- 25-60: Not HMIS 38.2%, HMIS 56.2%
- >60: Not HMIS 10.3%, HMIS 5.4%

Female: Not HMIS 55.0%, HMIS 54.7%

Race/Ethnicity:
- White: Not HMIS 36.0%, HMIS 32.6%
- Black: Not HMIS 22.5%, HMIS 49.7%
- Hispanic: Not HMIS 21.8%, HMIS 12.2%
- Asian: Not HMIS 3.8%, HMIS 0.4%
- Other: Not HMIS 15.6%, HMIS 5.0%

Medicaid Mental Health and Substance Use Disorder Diagnoses by HMIS Status, 2015

Legend: ■ Mental Health Only ■ Substance Use Only ■ Both ■ Serious Mental Illness

Not HMIS: 23.6% (Both 4.1%, Substance Use Only 3.7%, Mental Health Only 15.8%)
HMIS: 46.1% (Both 18.7%, Substance Use Only 10.0%, Mental Health Only 17.4%)

Serious Mental Illness — Not HMIS: 8.1%
Serious Mental Illness — HMIS: 25.5%

Hospital Stays and Treat & Release Emergency Department (ED) Visits of Medicaid Beneficiaries by HMIS Status, 2015
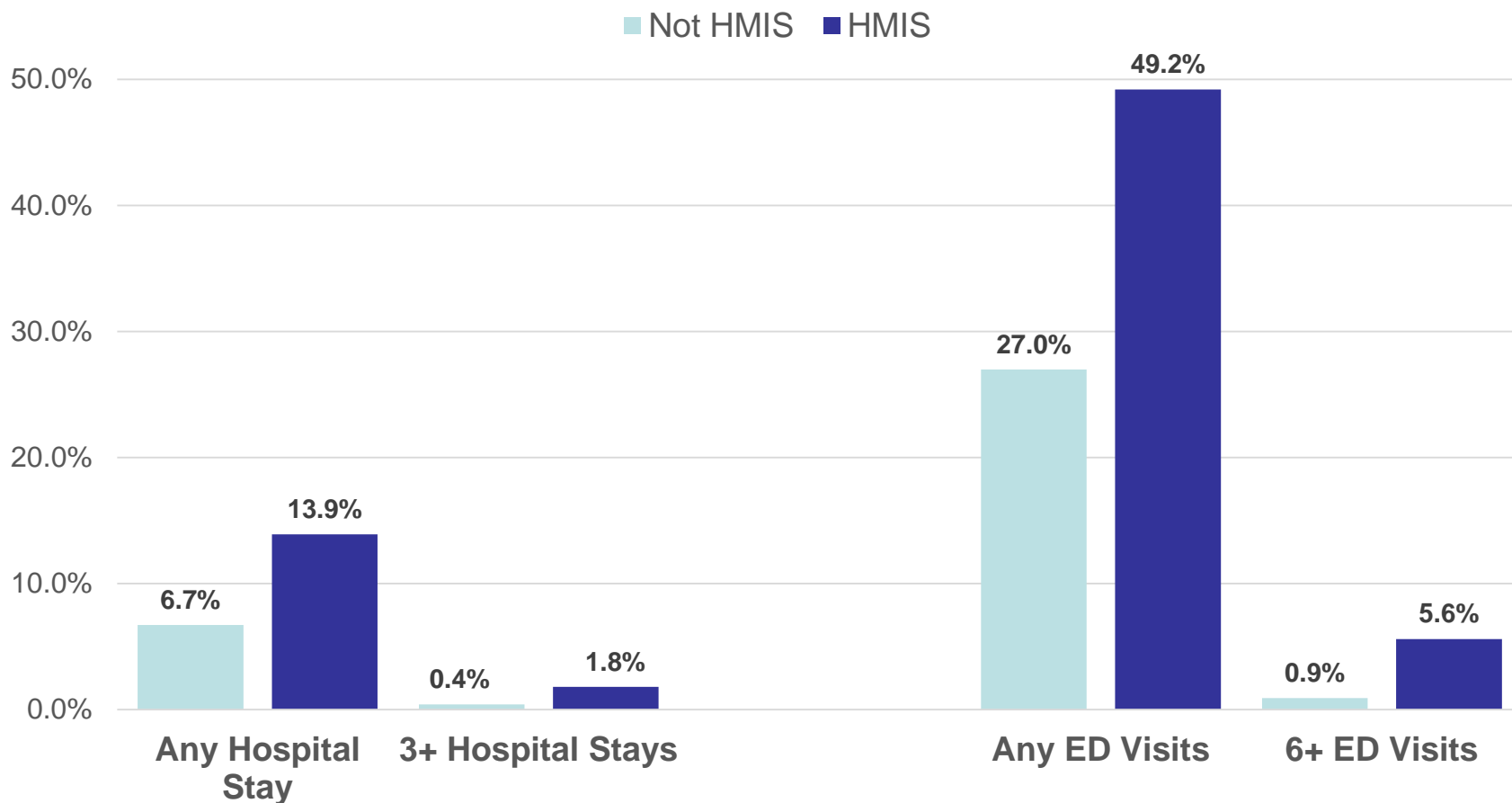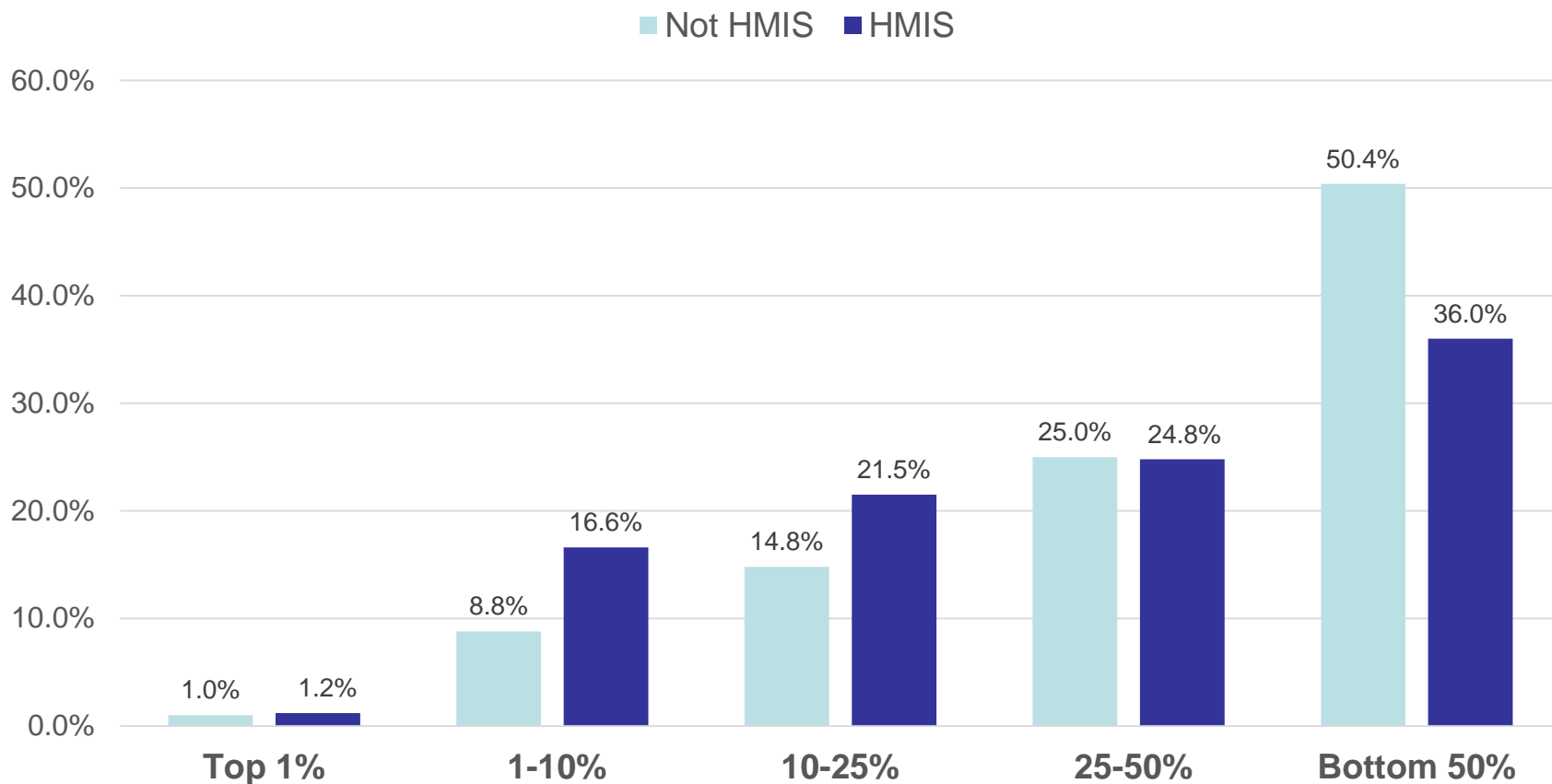
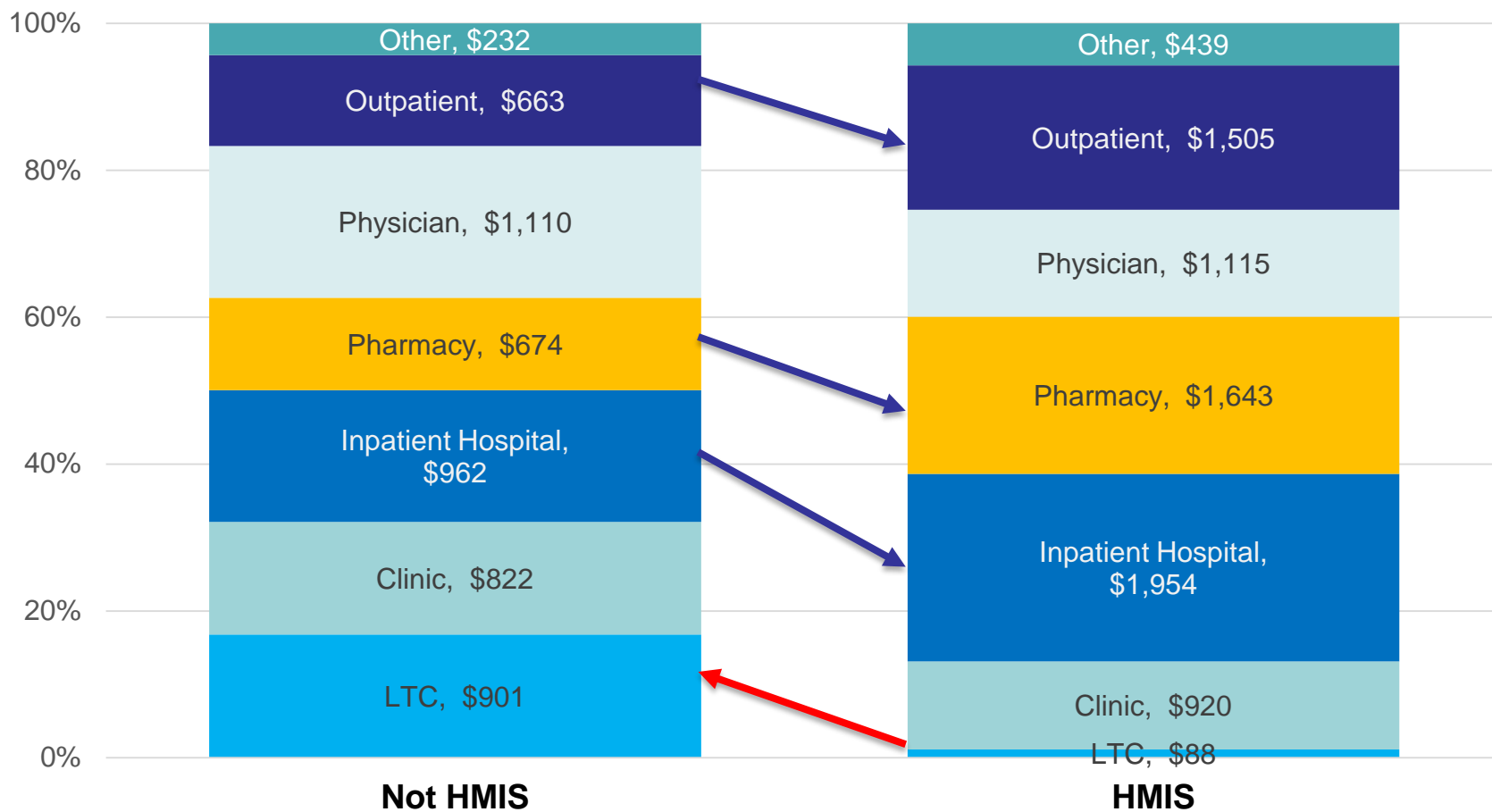Average Annual Medicaid Spending* by HMIS Status, 2015
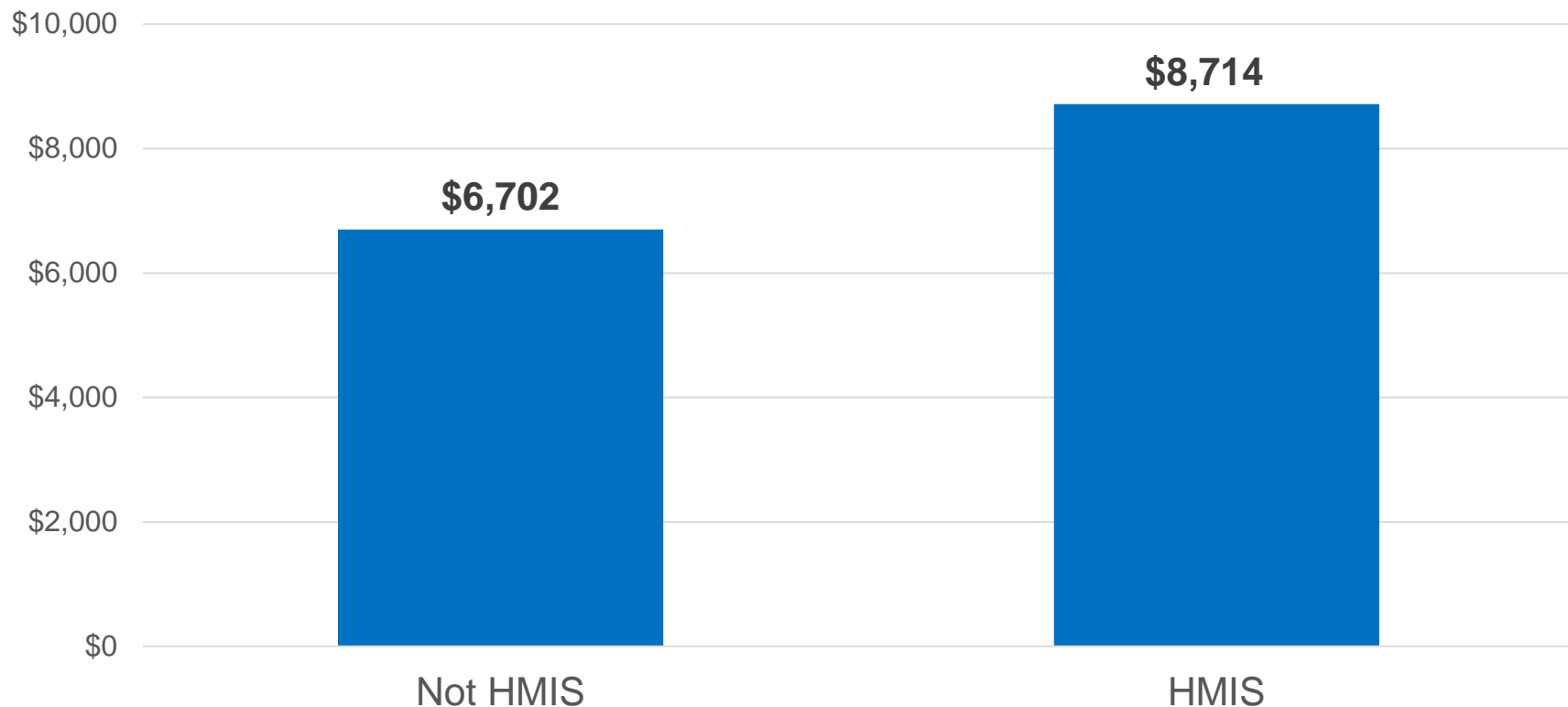
* Adjusted for number of months enrolled or for demographics.

Medicaid Spending Distribution by HMIS Status, 2015

Composition of Medicaid Spending* by HMIS Status, 2015

*Spending *not* adjusted for number of months enrolled.
LTC = long-term care services.

Summary of Preliminary Results So Far

- About 2.5% to 3% of Medicaid beneficiaries appear in HMIS annually, including 38,000-68,000 individuals, there was >25% increase after expansion

- The linked population:
  - More likely to be ages 25-60, less likely to be kids or 60+
  - Much more likely to have substance use, substance use+mental health diagnoses, and Serious Mental Illness
  - Higher users of inpatient and ED care
  - About 30% higher average Medicaid spending & more likely to be in higher spending group
  - Higher hospital and pharmacy spending, lower LTC spending

Stay Tuned,
Much More to Come!