



The Intersection of Homelessness and Medicaid ***Preliminary Analysis and Research Plans for New Jersey***

Center for State Health Policy
Institute for Health, Health Care Policy, and Aging Research

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Project Team

RUTGERS

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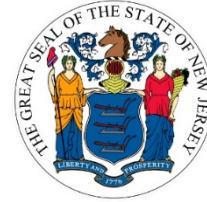
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Acknowledgement

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Katelyn Cunningham of the Hudson County Division of Housing and Community Development (formerly of Monarch Housing Associates) contributed to the project in its early stages. Paul Rossi of Foothold Technologies played a central role in preparing study data.

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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

- New Jersey Homeless Support Services Project Overview
- Preliminary findings
- Discussion

Research Questions

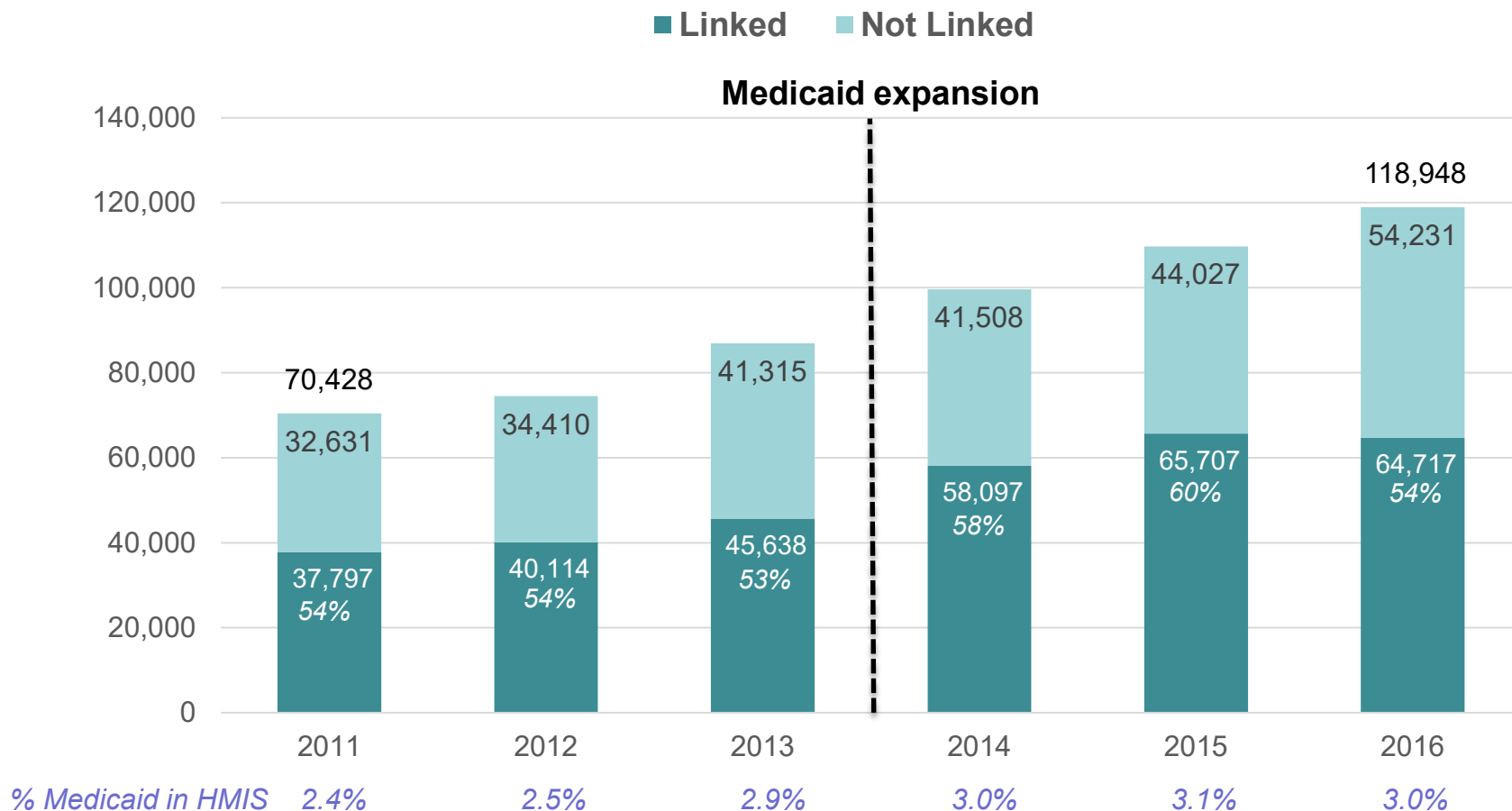
1. **What are the size, characteristics, and *potentially* reducible Medicaid spending of the Medicaid-enrolled homeless population that may be eligible for permanent supportive housing (PSH) services?**
2. **How much has PSH saved Medicaid in recent years?**

Project Data

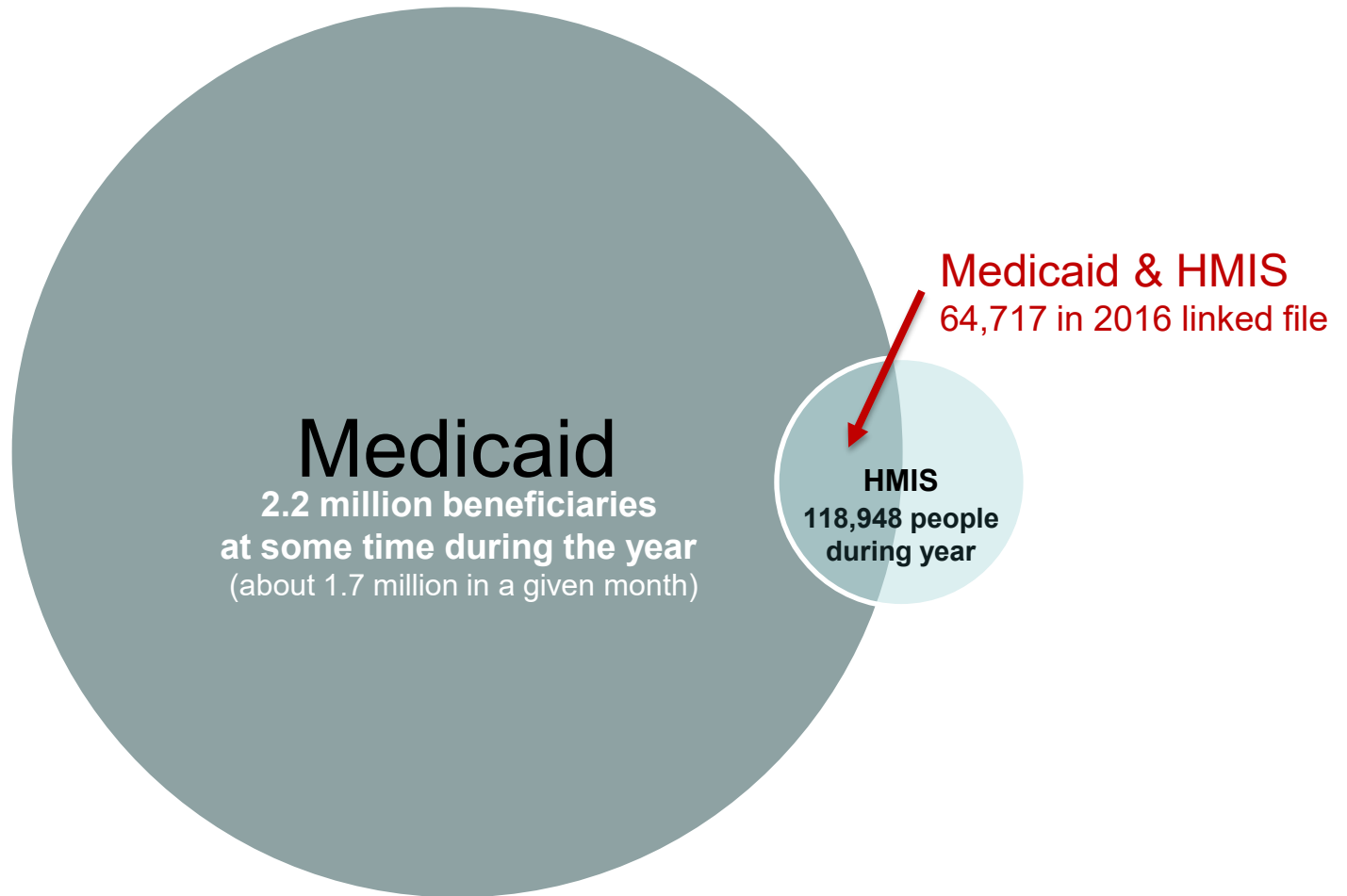
- **Homeless Management Information System (HMIS)**
 - NJ Housing and Mortgage Finance Agency
 - Encounter-level data for homeless services and client characteristics
 - All NJ counties for some services (e.g., emergency shelter) and 19 of 21 counties for other services (e.g., supportive housing)
- **Medicaid Management Information System (MMIS)**
 - NJ Div. of Medical Assistance and Health Services
 - Enrollment and encounter data for covered services, spending, and characteristics of all NJ Medicaid beneficiaries
- **Data for 2011-16 linked by trusted third party using client/beneficiary identifiers**
 - Trillium™ matching software (using SSN, DOB, gender, names, etc.)
 - Research team received linked, de-identified data only

Number of Persons in HMIS Linked and Not Linked to MMIS

Note: Individuals may appear in more than one year



The Study Population, 2016



Note: Graphic not to scale

For Today: Describe “Homeless” & “PSH” Populations

- Last HMIS encounter recorded in 2016, for preliminary analysis only
 - Will incorporate 3 year HMIS history & other information
- HMIS “Type of Residence” prior to encounter and “Project Type” at the encounter
- Exclude persons receiving Medicaid Long-Term Services & Supports
 - Nursing facility
 - Facility for persons with developmental disabilities
 - Home and Community Based Services

Preliminary Classification of “Homeless”

At last HMIS Encounter in 2016

	HMIS "Type of Residence" (prior to encounter)						Total
	Homeless	Permanent Housing	Temporary or Other Housing	Institutional Situation	Don't Know or Refused	Missing	
HMIS "Project Type" (this encounter)							
Coordinated Assessment	705	-	132	-	-	-	861
Day Shelter	59	-	89	23	-	18	190
Emergency Shelter	3,109	67	6,790	1,205	23	161	11,355
Homelessness Prevention	177	24	2,958	37	-	69	3,271
Other	-	-	20	-	-	-	22
PH - Housing Only	-	-	14	20	-	-	50
PH - Housing with Services	-	-	15	21	-	-	47
PH - Permanent Supportive Housing	2,005	85	1,072	172	17	55	3,406
PH - Rapid Re-Housing	1,509	-	920	25	-	67	2,532
Safe Haven	19	-	-	-	-	-	27
Services Only Program	3,588	477	33,145	513	600	941	39,264
Street Outreach	383	-	206	21	14	201	828
Transitional Housing	599	-	998	470	-	36	2,109
Total	12,171	684	46,366	2,517	661	1,563	63,962
Frequency Missing = 5							

NOTE: dash (-) indicates suppressed for confidentiality.

Preliminary Classification of “PSH”

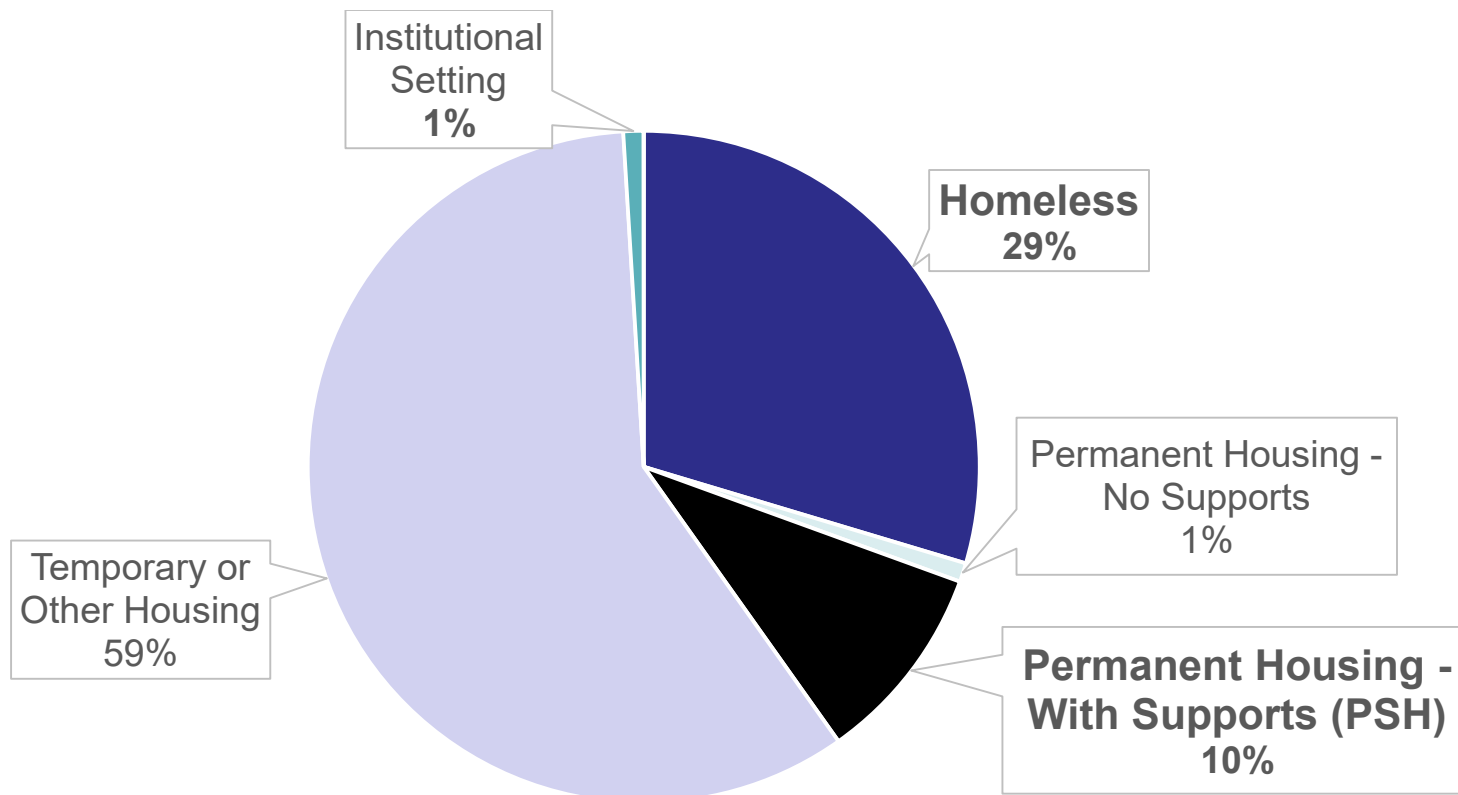
At last HMIS Encounter in 2016

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Preliminary Classification

At last HMIS Encounter in 2016



62,097 Linked Records*

Demographics of Homeless & PSH Populations 2016 HMIS-MMIS Linked Data, Column Percent Distributions

	All	Homeless	PSH
Age			
<18	29.7	21.0	28.7
18-29	18.5	22.9	16.9
30-49	30.3	34.0	25.7
50-64	19.0	20.7	25.7
65+	2.5	2.2	3.0
Male	45.4	56.1	47.1
Race/Ethnicity			
Black/AA	51.2	49.3	59.6
White	30.8	35.6	27.3
Hispanic	12.9	10.4	8.5
Asian	0.4	0.4	*
Other	4.5	4.1	*

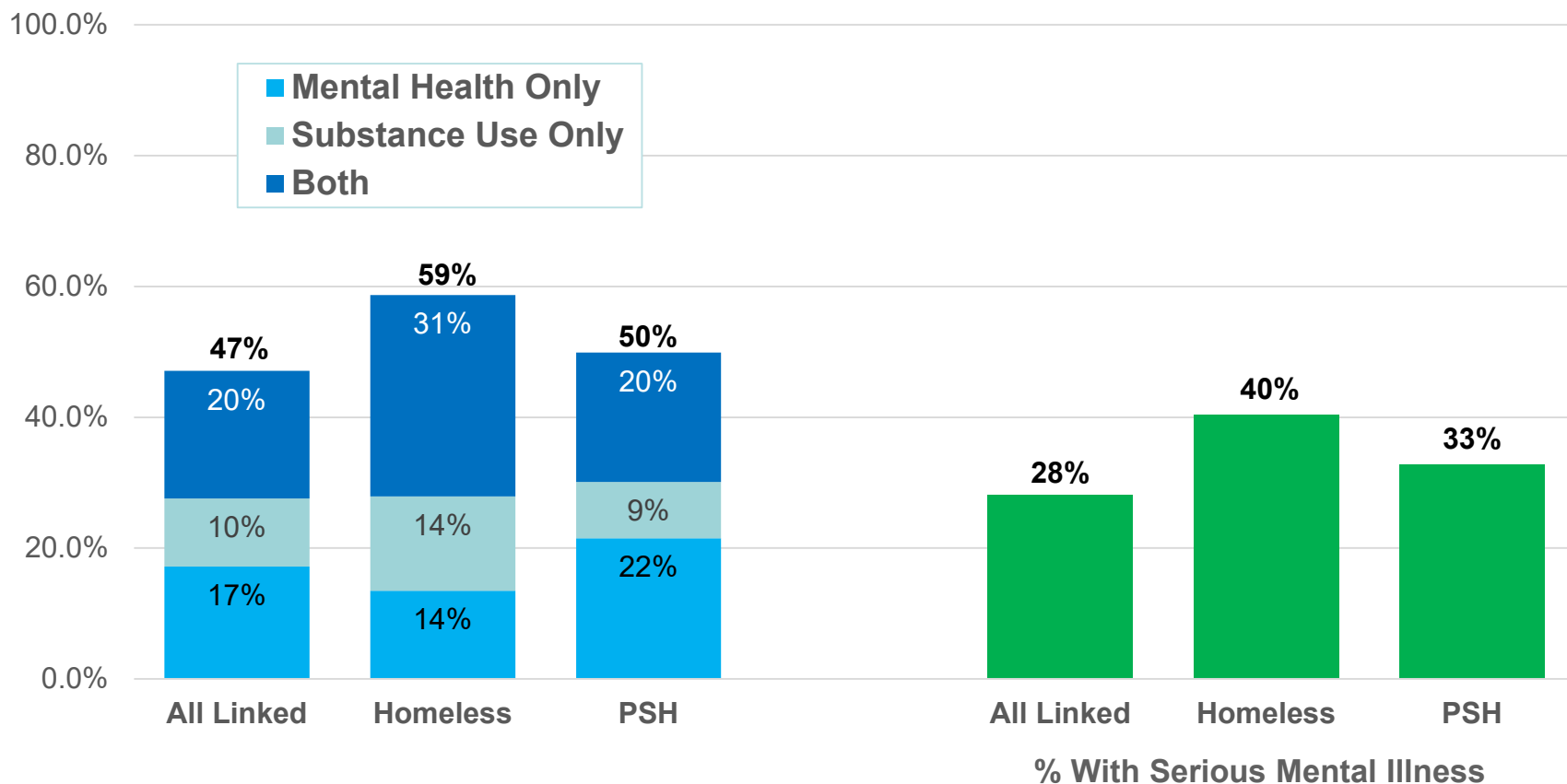
*Data not shown due to small numbers

Program Characteristics of Homeless & PSH Populations 2016 HMIS-MMIS Linked Data, Column Percent Distributions

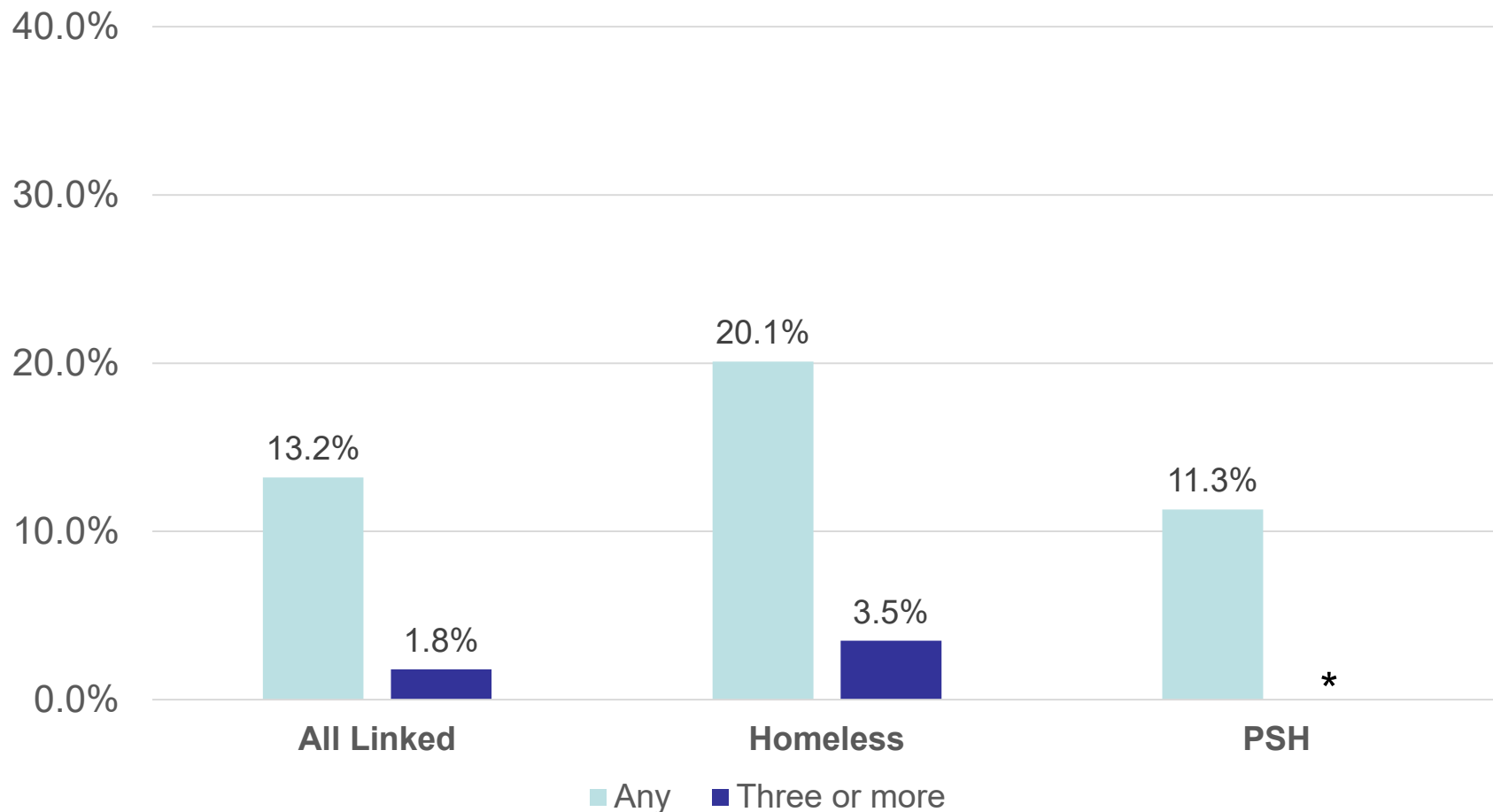
	All	Homeless	PSH
<i>Medicaid Eligibility Category</i>			
Aged-Blind-Disabled (ABD)	18.3	15.5	29.1
NJ FamilyCare (children & adults)	52.7	38.9	46.9
Children's Serv./Other	1.3	1.4	2.0
Expansion*	27.7	44.2	22.0
HMIS - Family	57.4	38.1	53.8
HMIS – Chronic Homeless	2.8	4.4	14.6

*Includes pre-expansion “general assistance” population.

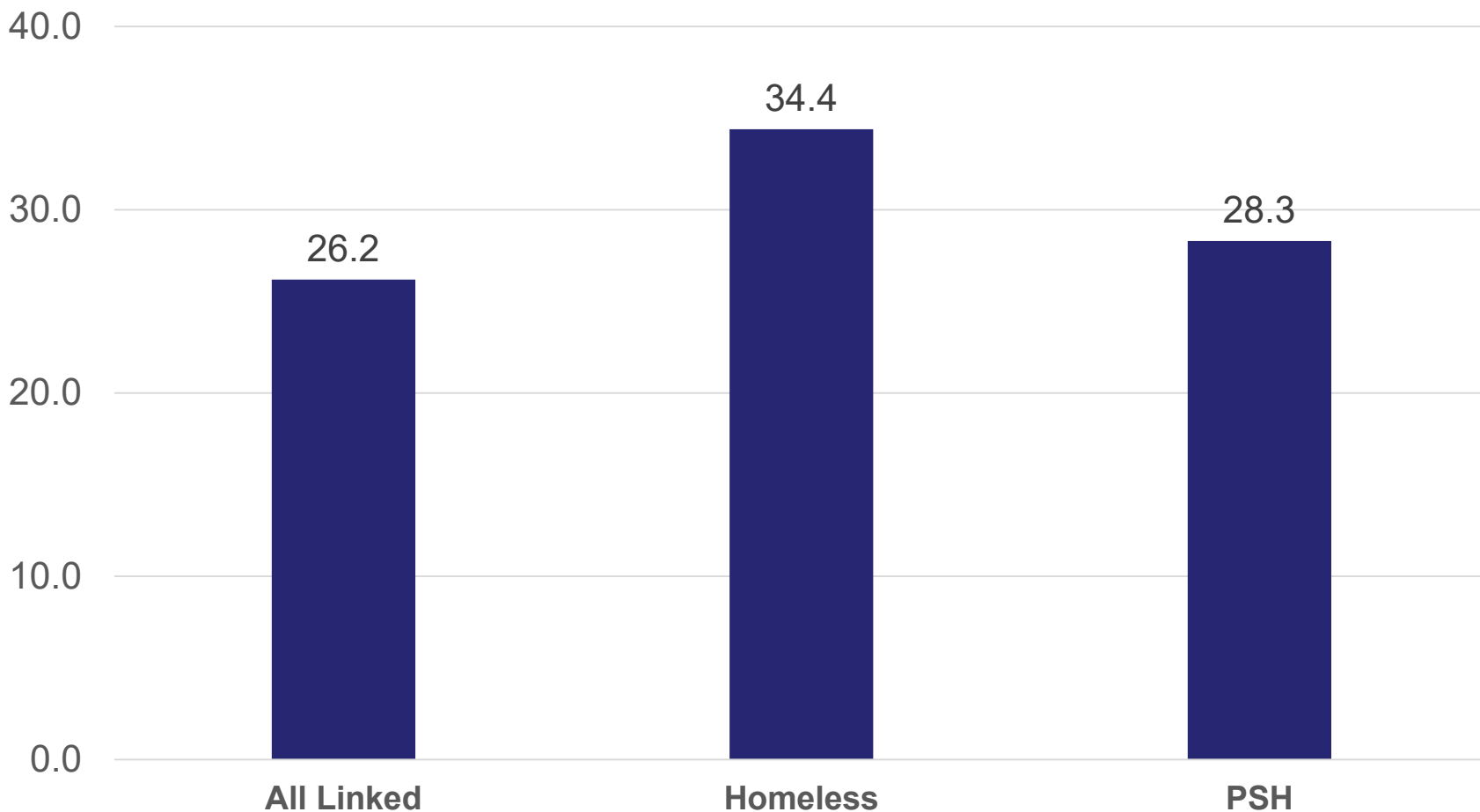
Medicaid Behavioral Health Diagnoses by HMIS Status, 2016



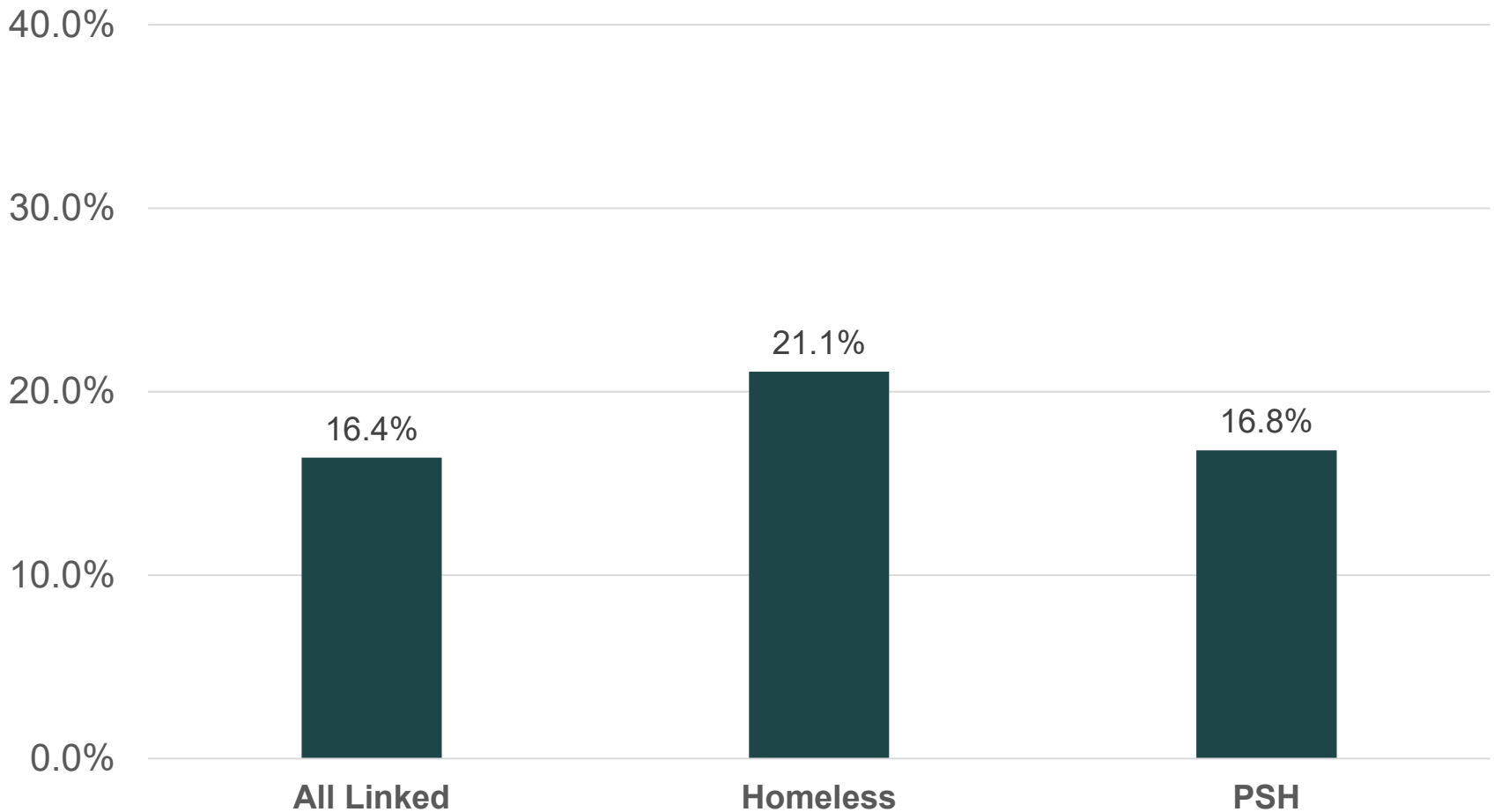
Inpatient (IP) Stays by HMIS Status, 2016



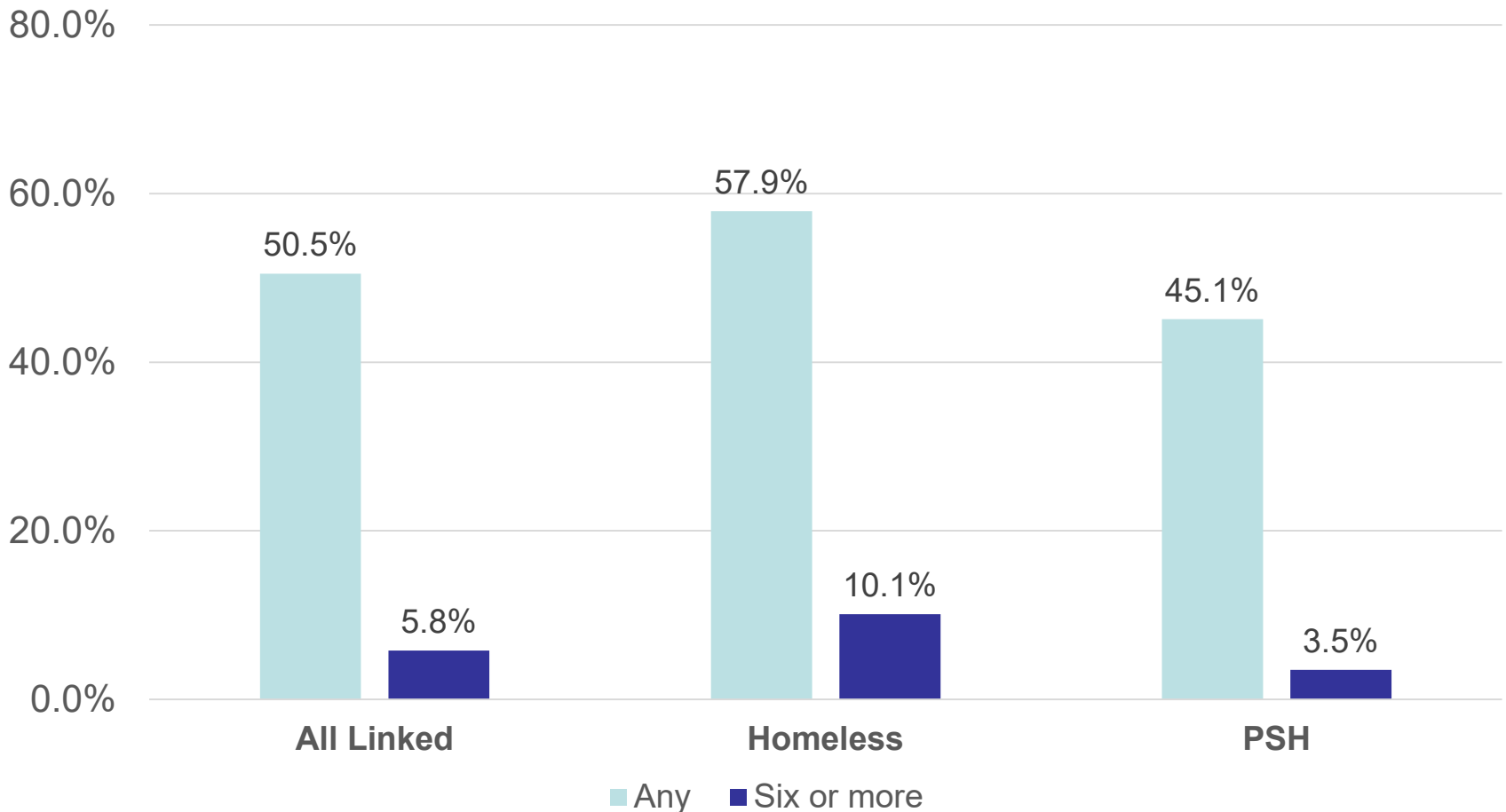
Ambulatory Care Sensitive IP Admission Rate* per 1,000 Adults by HMIS Status, 2016



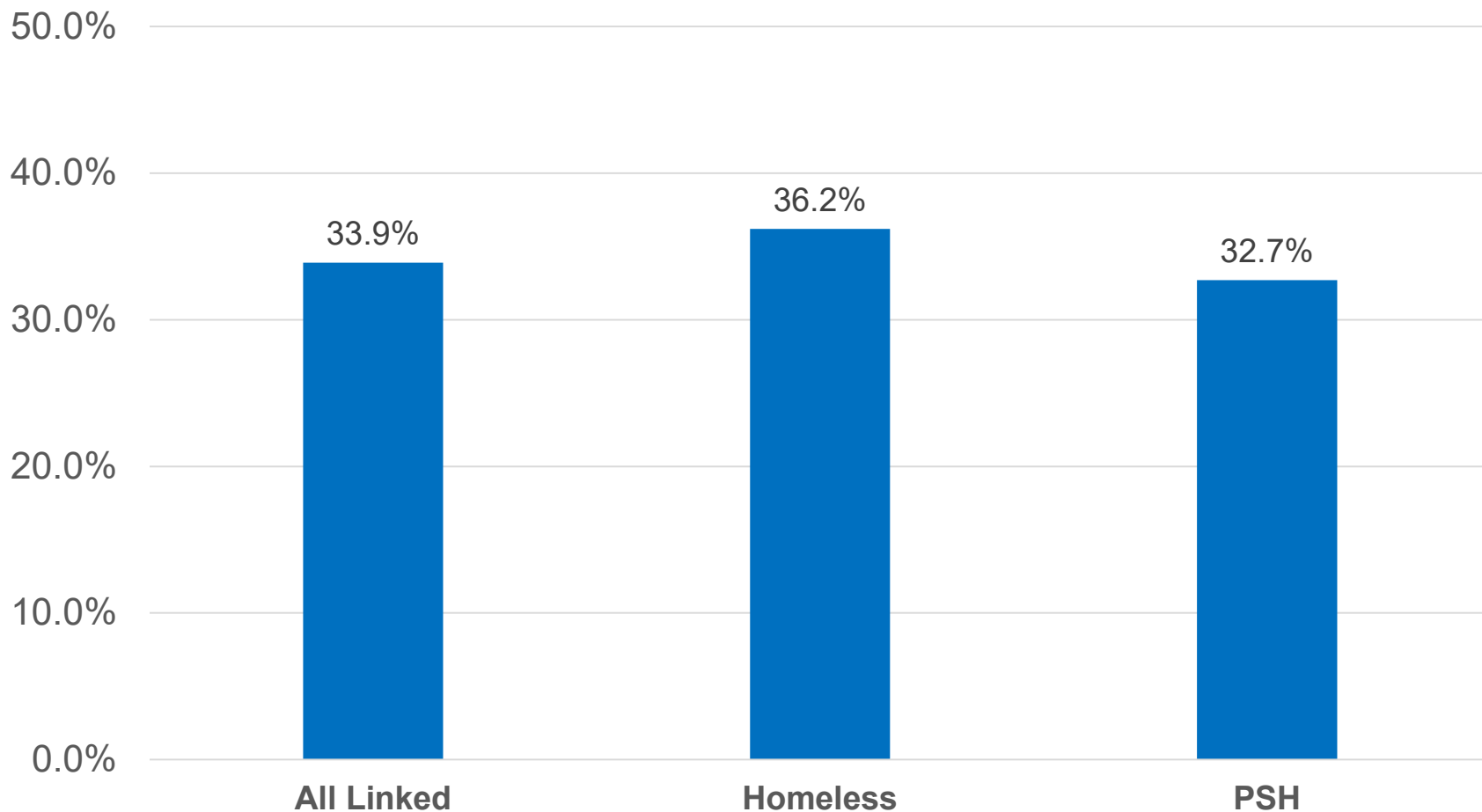
30-Day Hospital Readmission Rate by HMIS Status, 2016



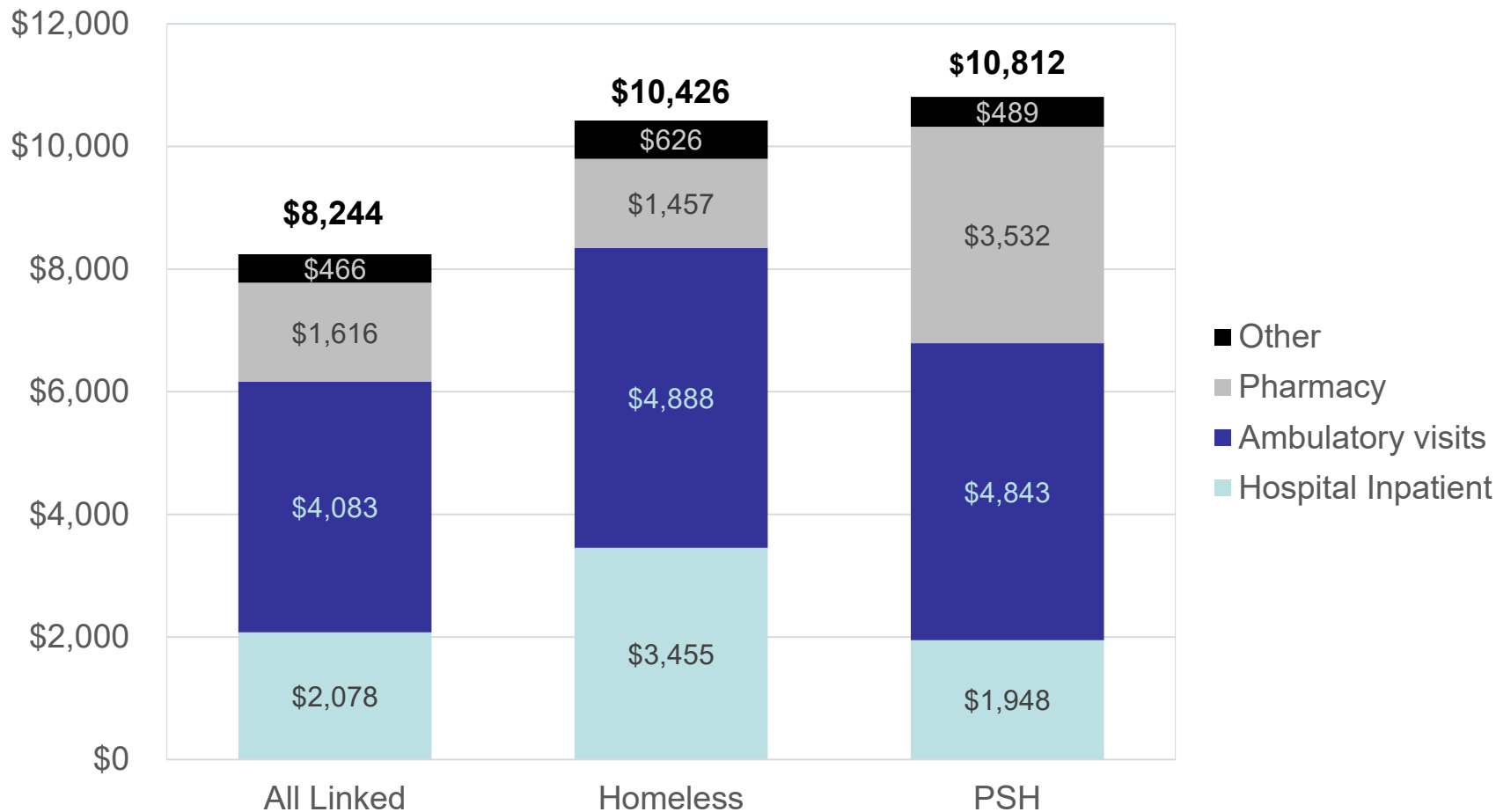
Treat-and-Release Emergency Department (ED) Visits by HMIS Status, 2016



No Primary Care Visit by HMIS Status, 2016



Distribution of Annual Medicaid Spending* by Service and HMIS Status, 2016



Preliminary Observations

- HMIS-Medicaid linked population has very high rates of mental health and substance use disorders, especially high among the homeless
- High rates of ED and potentially avoidable IP use, especially among the homeless
- Homeless and PSH populations both have high average spending, but homeless have more hospital costs and PSH spend more on Rx

Additional Analysis Plans: Research Question #1

What are the size, characteristics, and *potentially* reducible Medicaid spending of the Medicaid-enrolled homeless population that is potentially eligible for permanent supportive housing (PSH) services?

- Simulate eligibility for Medicaid-funded homeless support services
 - Based on HUD chronic homelessness definition using three year HMIS history and Medicaid diagnostic data
 - Plus “at risk of homelessness” groups not meeting HUD definition
- Estimate potential Medicaid savings from PSH placement
 - Apply assumptions based on published PSH literature
 - Compare spending for homeless to matched non-homeless Medicaid beneficiaries

Additional Analysis Plans: Research Question #2

How much has PSH saved Medicaid in recent years?

- Econometric “difference-in-differences” analysis
- Selected case studies

Thank You

Further questions or comments?

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