MRT Supportive Housing

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Medicaid Redesign Team

• In New York State, Supportive Housing is part of a larger Medicaid Redesign Team (MRT), which was established in January 2011 by Governor Andrew Cuomo and initiated significant reforms to the state Medicaid program.

• The MRT launched an action plan and a series of innovative solutions designed to better manage care and reward providers that help keep people healthy.

• This approach differed from other states, which have relied on taking away benefits or cutting provider payment rates as ways to reduce Medicaid costs.
Supportive Housing Workgroup Overview

• The MRT included a Supportive Housing Workgroup which, was composed of representatives from more than 20 organizations that discussed barriers to implementing Supportive Housing and identified solutions.

• The MRT workgroup found that increasing the availability of affordable and Supportive Housing for high-need Medicaid beneficiaries who are homeless, unstably housed, or living in institutional settings was a significant opportunity for reducing Medicaid cost growth.

• The workgroup submitted a final report that included proposals for investments in new Supportive Housing capacity, as well as “collaboration/coordination” recommendations that were designed to ensure that various state and local agencies (both governmental and non-profit) are working together to maximize the value of all Supportive Housing programs.
Supportive Housing Workgroup Final Report

• The final recommendations included providing integrated funds for capital, operating expenses, rent subsidies, and services in new Supportive Housing units targeting high-need, high-cost Medicaid recipients.

• Supportive Housing Workgroup final report: http://www.health.ny.gov/health_care/medicaid/redesign/docs/mrtcompanion.pdf
Why Focus on Supportive Housing?

- Medicaid costs can be reduced if the need for additional investment in Supportive Housing is addressed:
  - Individuals who are not sufficiently, safely, and sustainably housed are more likely to suffer chronic medical conditions and episodic issues that easily spiral into more complex and expensive conditions.
  - Treatment of these individuals is difficult because their lives tend to be more chaotic. Routine and follow-up treatment is more difficult to dispense.
  - In addition, there are individuals who live in institutional settings, such as nursing homes, intermediate care facilities, and hospitals, simply because they have nowhere else to go.
  - These issues, combined with risks inherent in being homeless, lead to excessive Emergency Department use and frequent re-hospitalizations; key measures the MRT recommendations seek to significantly reduce.
Implementation of MRT Investments

• MRT uses a 2-year allocation plan for all projects. Funding is approved yearly within the state budget.

• Funding is allocated from the Department of Health (DOH) to the lead project agency. Agencies include:
  • Office of Mental Health (OMH);
  • Home and Community Renewal (HCR);
  • Office for People With Developmental Disabilities (OPWDD);
  • Office of Temporary and Disability Assistance (OTDA); and
  • Office of Alcohol and Substance Abuse Services (OASAS).

• All programs are executed through a competitive procurement process (either through the lead agency or DOH).
MRT Supportive Housing Initiatives Include:

- Capital
- Rent
- Support Services
- Service and Operating
- Tracking and Evaluation
Existing MRT Supportive Housing Initiatives

State Fiscal Year

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<tr>
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<th>Allocation (in millions)</th>
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<tr>
<td>2012-13</td>
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<tr>
<td>2013-14</td>
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Senior Supportive Housing Services (SSHS)

• $4.4 million project;

• Provides supportive services and capital improvement;

• Nine contracts awarded and will serve approximately 1,000 people;

• This pilot is statewide and serves: Manhattan, Bronx, Nassau, Suffolk, Ulster, Westchester, Tompkins, St. Lawrence, and Jefferson counties;

• Capital improvements include: accessibility modifications such as bathroom safety and accessibility modifications, break-away cabinets, as well as acquiring assistive technologies such as in-home safety systems; and

• Services include: in-house behavioral and mental health services, wellness and health workshops, mobile supportive team units, house retention services, language barrier assistance, empowering and educational events, a toll-free number, as well as utilizing residents/volunteers to provide peer support.
Nursing Home to Independent Living (NHIL)

• $8 million project;

• Provides rental subsidy and services to nursing home level of care Medicaid members;

• Two contracts were awarded and will serve approximately 400 people in Nassau, Onondaga, and Suffolk counties;

• In addition to rental subsidies, this projects provides an array of services such as: intensive case management services, in-home interventions, services aimed at establishing independence, wellness, and self-management through positive interactions with peer specialists.
Olmstead Subsidy

• Procurement is currently under development and will be released by the end of 2015;

• DOH will award a two-year contract for a total of $10 million;

• This will be a statewide program that will provide rental subsidies for Medicaid recipients who are enrolled in a Managed Long Term Care (MLTC) or Fully Integrated Duals Advantage (FIDA) Plan, are nursing home level of care, have spent at least 120 consecutive days in a nursing home in the last two years, and can live safely in the community.
Next Steps

- Evaluating these Supportive Housing initiatives is an important next step.
- A $1 million Supportive Housing Evaluation Request For Proposals (RFP) was released and is now closed, to obtain a vendor to evaluate all MRT funded Supportive Housing using programs and pilots.
- In addition, MRT is investing a $1.5 million into a MRT Tracking and Referral System
  - The system will create a centralized tracking and referral database to track MRT housing vacancies and assist with placements;
  - All individual spending will be tracked;
  - Analyze pre and post-Medicaid spending;
  - Partnering with researchers; and
  - Short-term and long-term results.
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Supportive Housing website:  
https://www.health.ny.gov/health_care/medicaid/redesign/supportive_housing_initiatives.htm
QUESTIONS?