

Improving Health Outcomes by Integrating Housing and Healthcare, Sponsored by UnitedHealthcare



12:00 pm – 1:30 pm

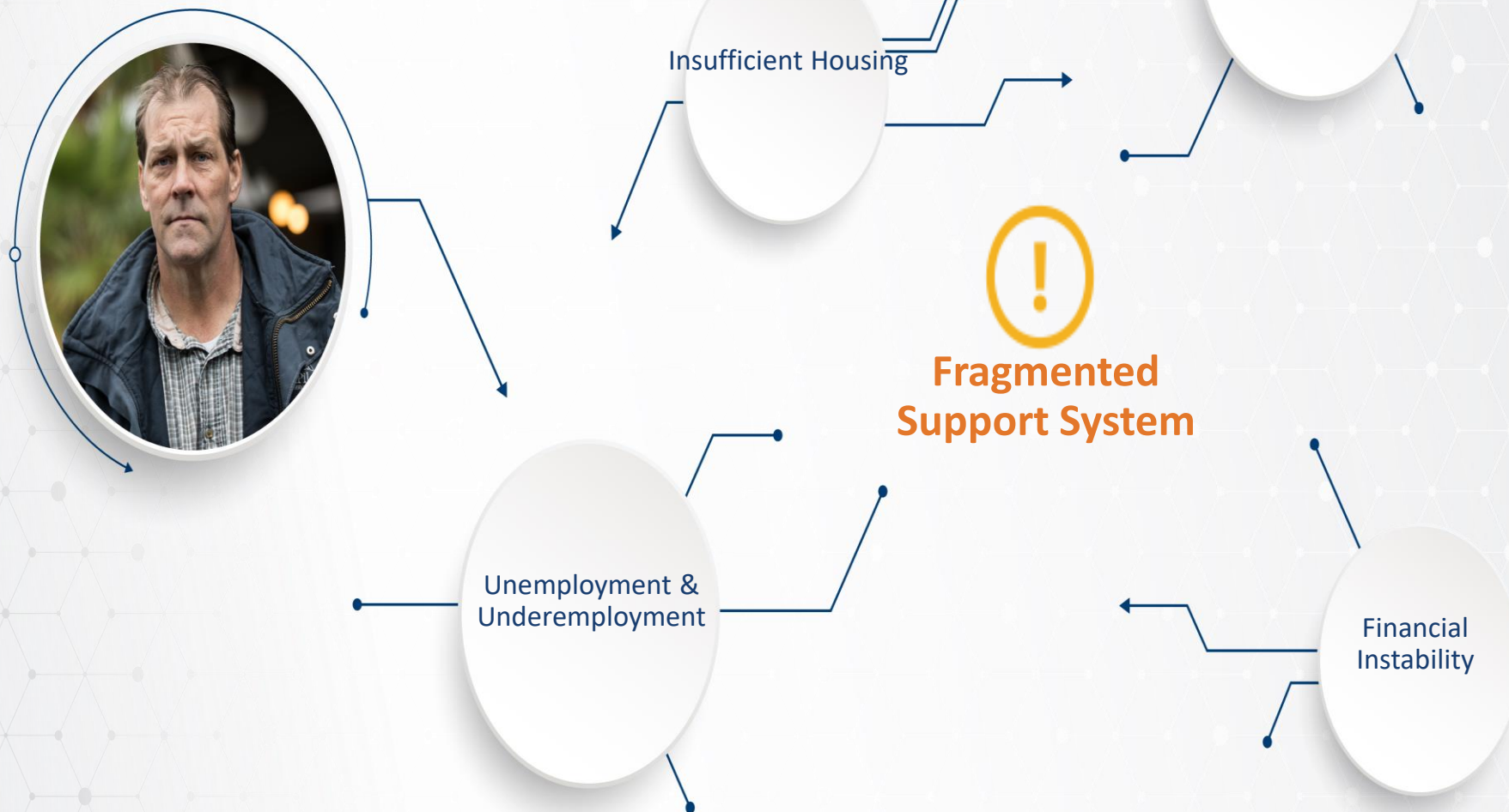
NACo Annual Conference

Davidson County, TN

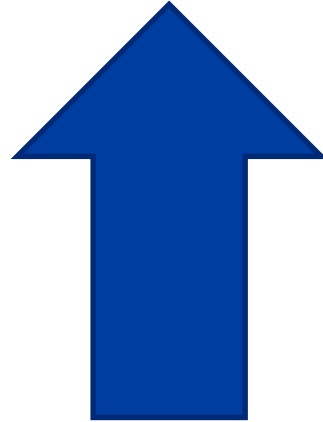
July 13, 2018

Housing is Healthcare: So what can we do to expand housing opportunities for individuals and families that need it.

The Problem



Impacts on Counties



County Jails



County Hospitals



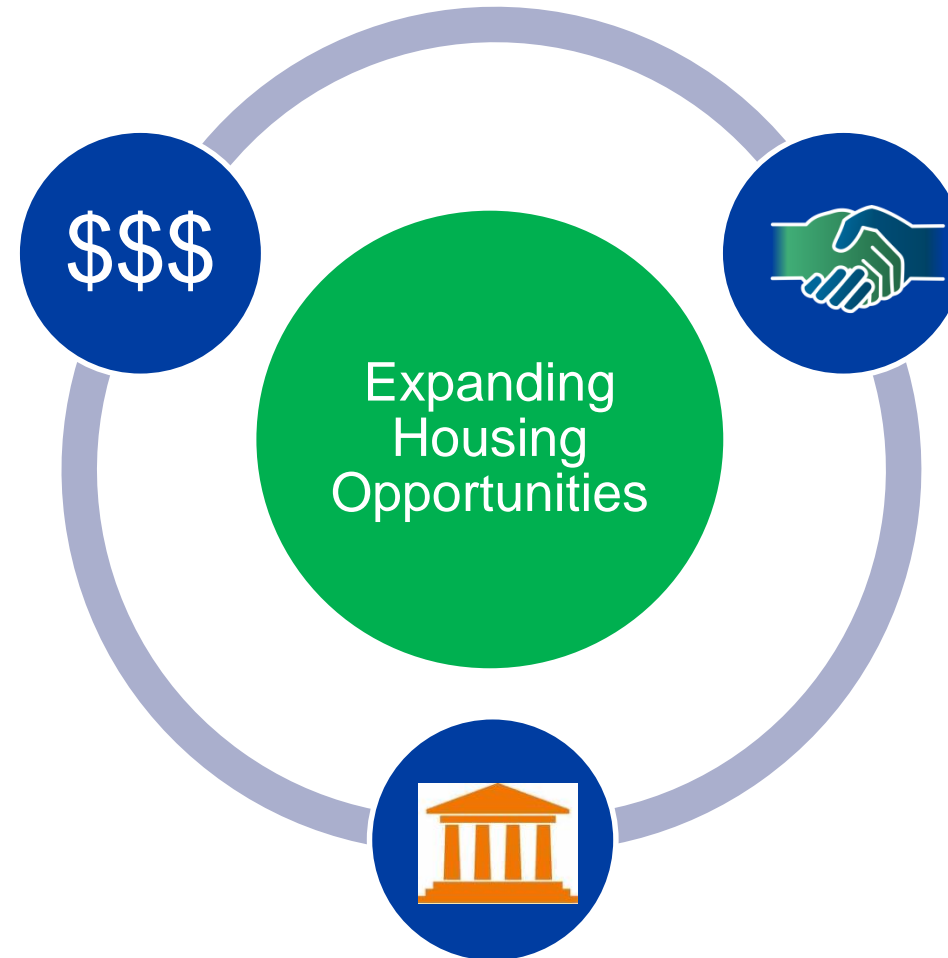
Nursing Homes



Integrating Housing & Healthcare

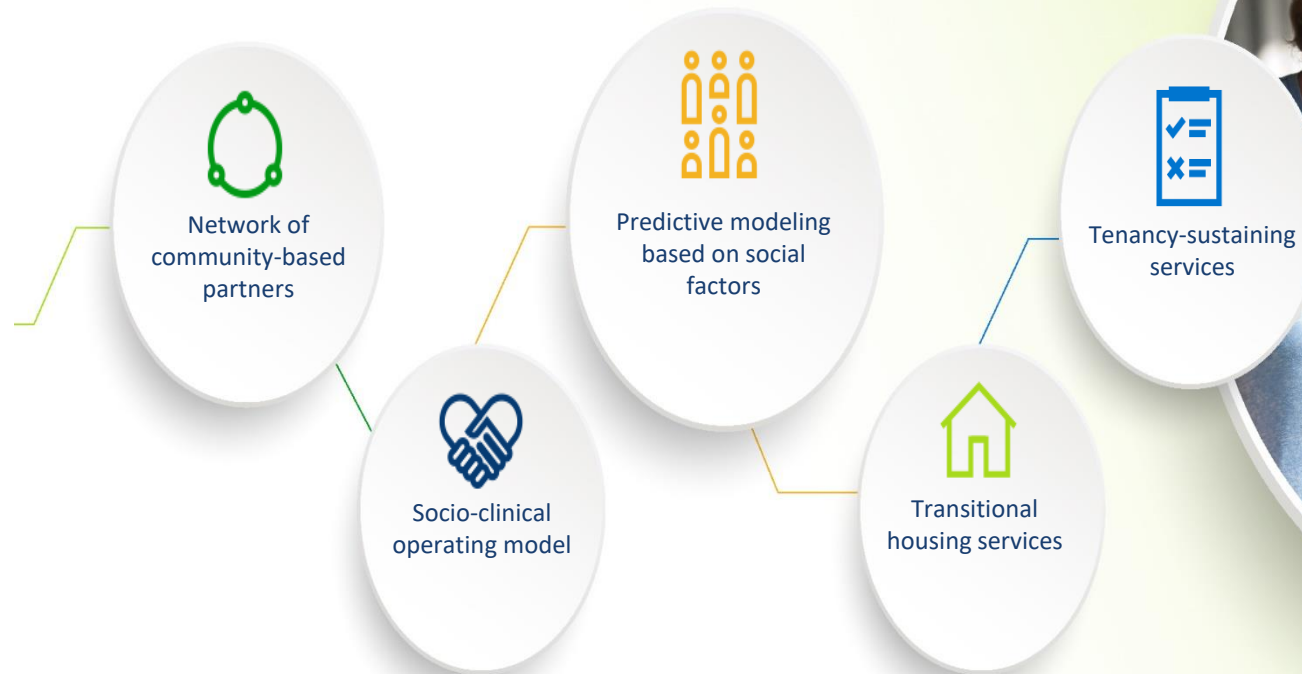
A Multi-Pronged Approach to:

1. Expand Housing Opportunities
2. Improve Health Outcomes
3. Reduce Utilization & Costs



The myConnections solution

Five fundamental strategies



Housing is Healthcare

NACo 2018



July 2018



Montgomery County, MD

AMI \$100,352

Poverty Level: 6.9%

Population: 1 million



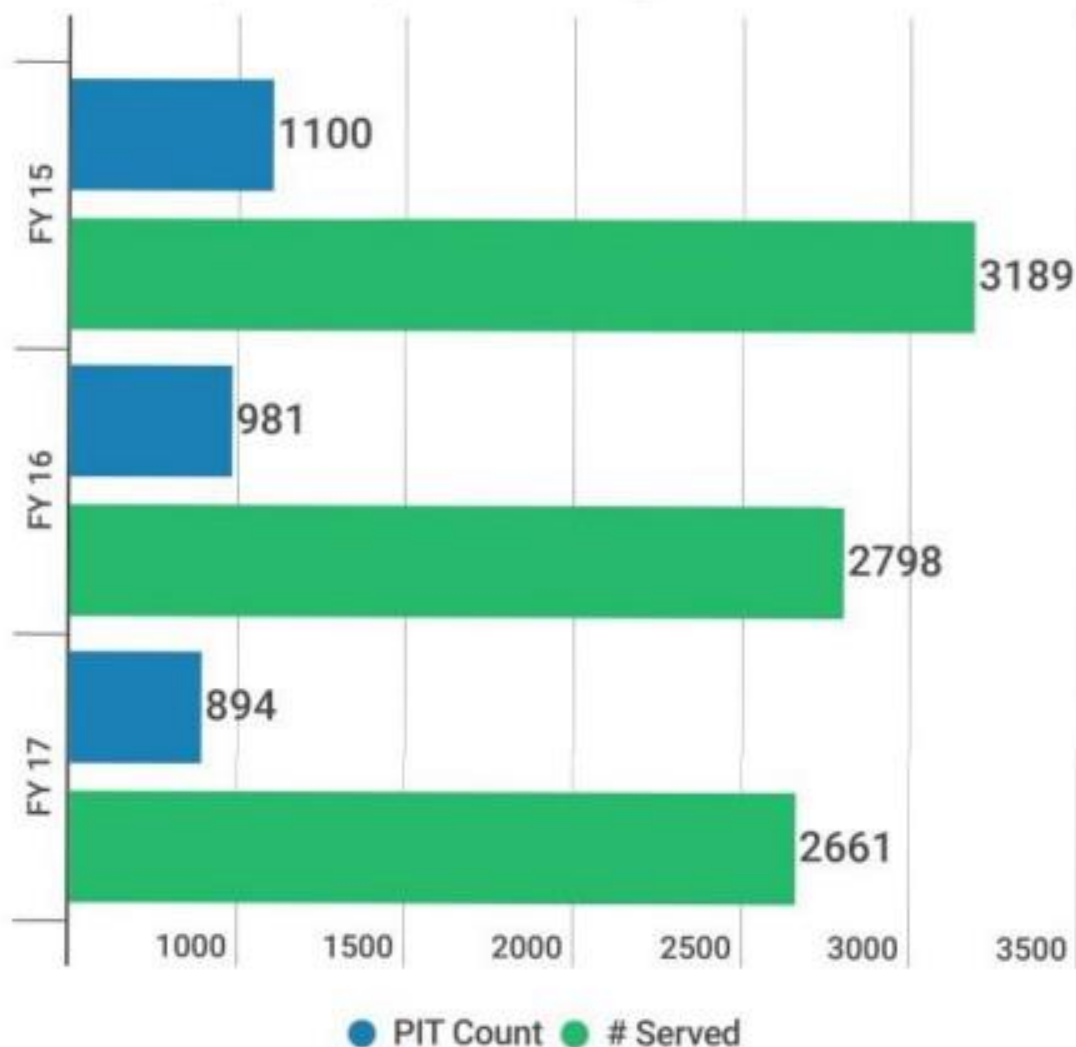
Average Rent (1BDRM):
\$1451

% Housing Burdened (Renters):
49.4

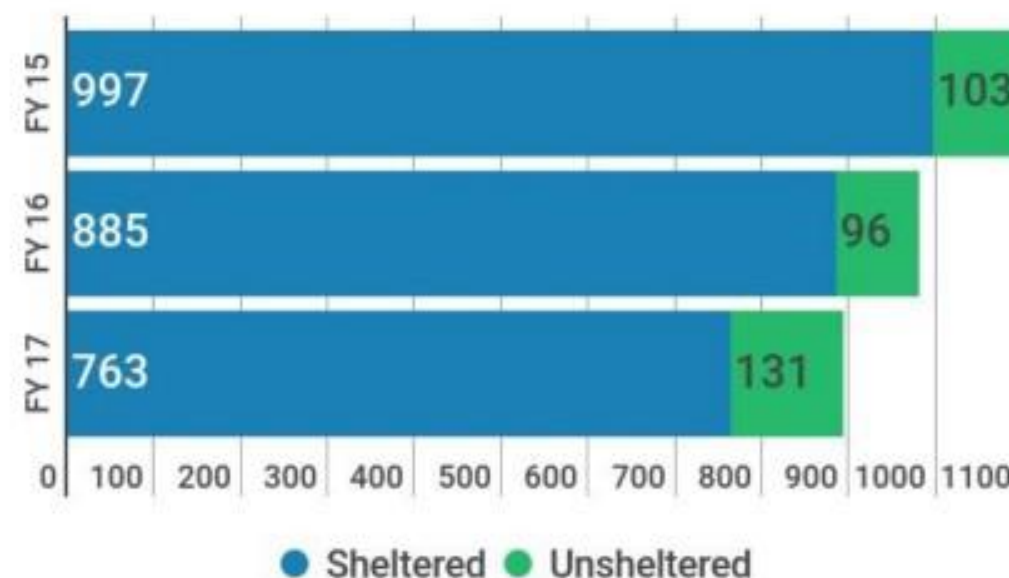


Point in Time Stats

of People Experiencing Homelessness



Sheltered vs. UnSheltered



As of June 2016, 274 People were experiencing chronic homelessness

Initiatives Underway in Montgomery County

- Housing First and Coordinated Entry and Low Barrier Placement
- 100,000 Homes Campaign
- Functional Zero for Veterans
- Inside Not Outside Campaign
- Pay for Success – focused on re-entry populations
- Data Driven Justice Initiative
- Strategic mobilization of the Continuum of Care and the Interagency Commission on Homelessness



Housing is Healthcare

Case Scenario – Homeless diabetic with schizophrenia with multiple ER visits and at least 3 admissions within 4 months



Our Approach to Housing is Healthcare

Healthcare focused strategies:

- Homeless Healthcare Contracts
- Management of our shelter contracts with a Housing First and Low Barrier coordinated entry approach
- Our work with Nexus Montgomery – funding crisis residential beds and medical respite beds in partnership with homeless and healthcare providers
- Added a hospital outreach worker to coordinate hospital discharges for individuals experiencing homelessness upon discharge
- Integrated Health and Human Services continuum
- Medicaid expansion and healthcare for the uninsured homeless
- 1115 Waiver slots
- Using SAMHSA funds to support keeping residents with behavioral health needs housed



Implications for Partnering Sectors

- Public Safety and Corrections
- Hospitals and Healthcare Facilities
- Employment
- Housing
- Social Services



Housing Is Healthcare: A Housing First Approach

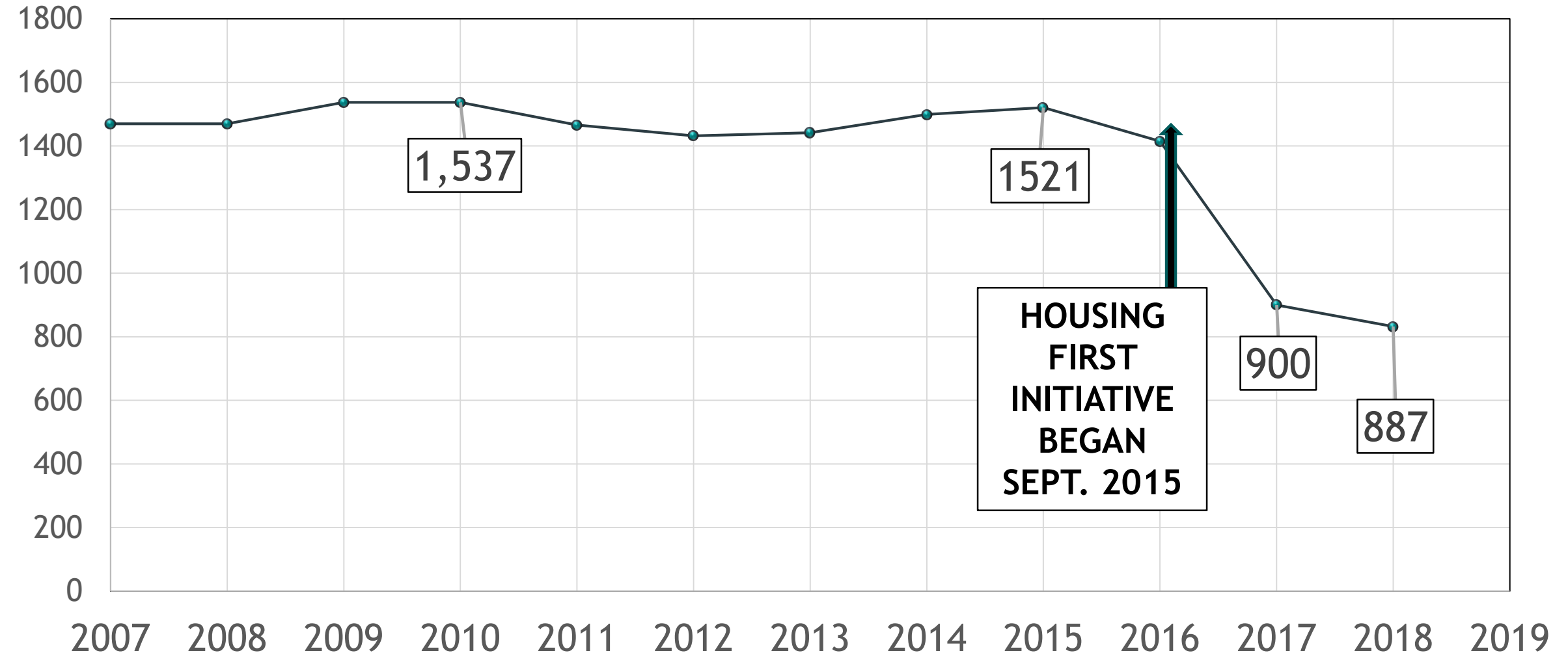


Housing First

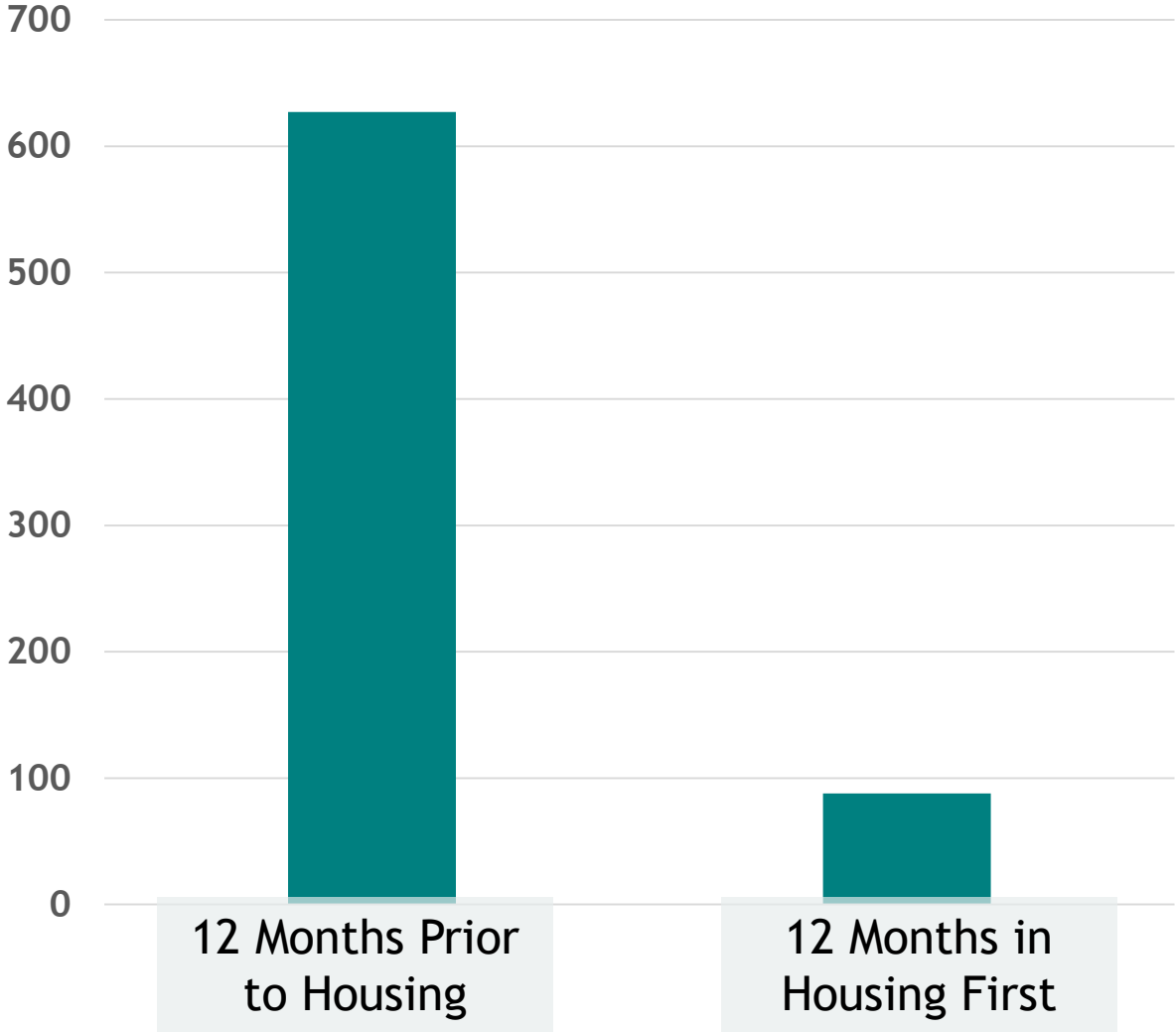
- ▶ Homelessness - a housing problem
- ▶ Housing is right to which all individuals are entitled
- ▶ Provide permanent, independent housing without prerequisites for treatment
- ▶ Offering (*but not insisting on*) other support
- ▶ Remove major obstacles to obtaining and maintaining housing for the chronically homeless population
- ▶ Opportunity to secure housing rather than having to “earn” it
- ▶ Housing Navigation services to ensure very high housing retention rates



Total Homeless Individuals in Milwaukee County



Mental Health Crisis Service Utilization



Top 4 Utilized Programs

- Crisis Mobile
- Detox
- Psychiatric Crisis Services
- Inpatient Services

| | | |
|----------------------------|------------|-------------------|
| 12 Months Prior to Housing | 627 visits | Difference of 539 |
| 12 Months in Housing First | 88 visits | |

| | | |
|----------------------------|-----------|---------------------------|
| 12 Months Prior to Housing | \$860,985 | Difference of (\$714,638) |
| 12 Months in Housing First | \$146,347 | |

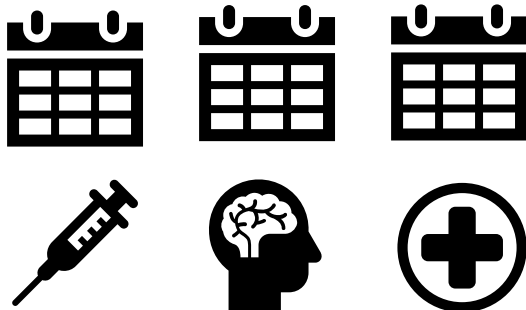
Paul - Recent Case Study

Emergency Room Utilization

Hospital Collaboration

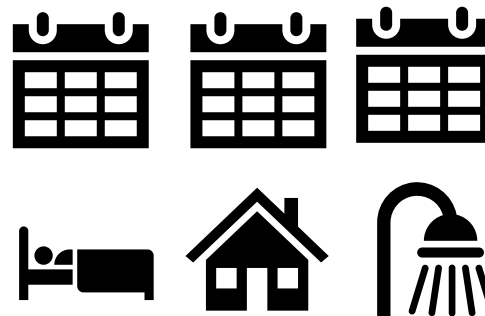
Paul accessed the Emergency Room 105 times in 90 days.

105



During his first 90 days in housing, he accessed Emergency Room once.

1



We connected him with:

- Housing (an apartment)
- Case Management
- Primary Care
- Community Services
- Client Centered Referrals

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