

Beyond Hospitals and Shelters:

Strengthening the Collaboration among Health Homes and Housing Providers

MEETING HIGHLIGHTS

On December 2, 2014 the Bronx Health & Housing Consortium held its 4th Annual Bronx-wide meeting to discuss the most recent developments in the health care and service delivery networks of the Bronx. The event was a tremendous success, with a packed room of nearly 100 people representing over 40 health, housing, and social service providers, government agencies, and private sector partners.

The day began with a Health Home Report, including updates from four Bronx health homes; followed by a Housing Report, with presentations from the Supportive Housing Network of New York, Corporation for Supportive Housing (CSH), and Urban Pathways; and Government Report, which included a presentation and Q&A with Greg Allen, the Director of Office of Health Insurance Programs, Division of Financial Planning and Policy at the NYS Department of Health; Jody Rudin, Deputy Commissioner of the NYC Department of Homeless Services; and finally, Consortium Steering Committee member Alison Jordan, Executive Director of Transitional Health Care Coordination at the NYC Department of Health and Mental Hygiene. We closed the day with a presentation by Dr. Kelly Doran, emergency department physician at Bellevue Hospital and expert on emergency medicine and population health, who shared her work to capture data on housing and homelessness issues facing patients visiting the Bellevue ED.

Across the board, these speakers recognized and presented clear evidence of housing as a social determinant of health:

- Kristin Miller from CSH presented evidence from around the country indicating that **housing targeted to high service utilizers decreases total costs**
- Dr. Doran's work at Bellevue Hospital showed the need to screen for homelessness in the Emergency Department, and document and share this information to provide appropriate care. For instance, by using **ICD 9 and ICD 10 codes to indicate homelessness in patients' medical records.**
- Ms. Jordan shared her work on the Bronx Health Home and NYC Jail Pilot, which found that daily, **10% of people in jail are also enrolled in Health Homes.** Pilot programs are showing success and suggest the linkage between Correctional Health Services and Health Homes needs to be strengthened.
- The four Health Homes that participated – Bronx Health Home, NYC Health and Hospitals Corporation Health Home, Bronx Accountable Healthcare Network, and Community Care Management Partners – together have **15,441 enrollees.** Approximately **20% of them, over 3,000, have self-reported as homeless.**

Even with this evidence, efforts to address the urgent need for housing remain inadequate. The New York State Medicaid Redesign Team (MRT) initiative to provide housing units allocated less than 100 units to the Bronx. Published in the [Summer 2014 issue of Behavioral Health News](#), the Consortium's [White Paper](#) reporting on homelessness among Bronx health home members found that **28% of those who self-reported as homeless were families**, yet nearly all the MRT units made available are for single adults.

Furthermore, the complex systems (17 in NYC) for various housing options make identifying and applying for housing an ongoing challenge, not only for those who need the housing but for the case managers and care coordinators tasked with assisting their clients with this process. Many high utilizers do not fit neatly into the current categories for eligibility and are left with limited options.

Despite these challenges, the Consortium and its partners have come together to share best practices and work towards meaningful collaboration. The new Medicaid payment system (DSRIP) that NYS is developing will require more collaboration among health, housing, and a multitude of other service providers. Nearly every DSRIP outcome is tied to Health Home linkages and payments will be increasingly tied to health outcomes. The NYC Department of Homeless Services (DHS) announced that they have access to units for people in Health Homes who are homeless. DHS is also working on sharing information with health and housing providers.

At the close of our meeting, we asked we ask attendees to tell what initiatives we should pursue in the coming year. The results are in and it looks like the Consortium has a busy year ahead!

- **Resource Guides:** looking into the various resource guide options that exist and whether the Consortium can develop a shared resource.
- **Housing Marketplace:** organizing a meet-and-greet event where Health Home care coordinators can make contact with housing providers serving different populations and providing different types of housing
- **Interagency Case Conferencing and Cooperation:** putting together a group where Health Home care coordinators, housing case managers, and other staff can share difficult cases and get input and feedback from the expertise of our Consortium membership
- **Targeting MRT Housing Units:** as new MRT units come on line, identifying the types of people most in need of this housing

For each of these initiatives, the Consortium will be organizing work groups to take the lead. If you are interested in participating on any of these work groups, please [contact us!](#)