

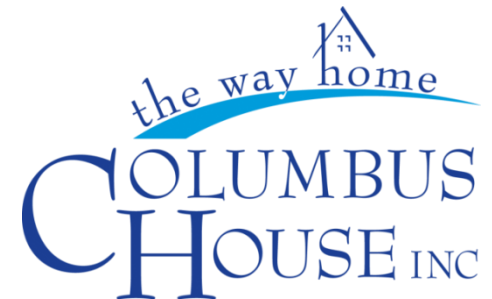
Medical Respite Care: Reducing Readmissions, LOS, and ED Visits of People Experiencing Homelessness

Yale
NewHaven
Health

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From “Revolving Door” to Recuperation

Medical Respite fills the vacuum of post-hospital care for people experiencing homelessness,

by providing benefit to:

- **Patients:** who now have a clean and caring place to recover after discharge
- **Medicaid:** through reduced spending
- **The hospital:** by reducing length of stay, re-visits, and re-admissions



Medical Respite at Columbus House

- Opened on October 7, 2013
- 12 individual rooms
- 24/7 staffing/supervision
- 3 meals daily
- **Case management** focusing on housing
- **Patient navigation** to help coordinating care
- **Visiting nursing service** includes medication management
- **Transportation** to appointments





The Story Behind the Success

Our Community

Population of New Haven (2016):

- Approximately 130,000 people
- **3.6%** of Connecticut's 3,576,452 residents

New Haven's Homeless population:

- Average of 667 people (during past 6 years)
- **16.0%** of Connecticut's 3,903 homeless individuals during 2016

Homelessness and YNHH

We knew that many homeless individuals were coming to YNHH with complex medical and social needs, and *suspected* they were receiving a disproportionate amount of Medicaid and hospital resources:

- A higher level of care for more days, with
- More readmissions, and
- Many more Emergency Department revisits

But how bad was it?

Here's What the Research Found...

- Kelly Doran, MD – RWJ Scholar – 2012
Studied 113 homeless individuals over 30 days
 - **70.3%** returned to the ED during that time
 - **50.8%** were readmitted to inpatient care
 - **3.0%** were readmitted for Observation

75% of these readmissions occurred **within 2 weeks**

Only 18.7% of Adult Medicaid patients were readmitted during this time

It Was Time to Advocate for Change

- A Task Force was formed with YNHH, Columbus House, and community partners
- Senator Toni Harp championed the bill
- Included in the state budget since 2013



Who Are the Patients?



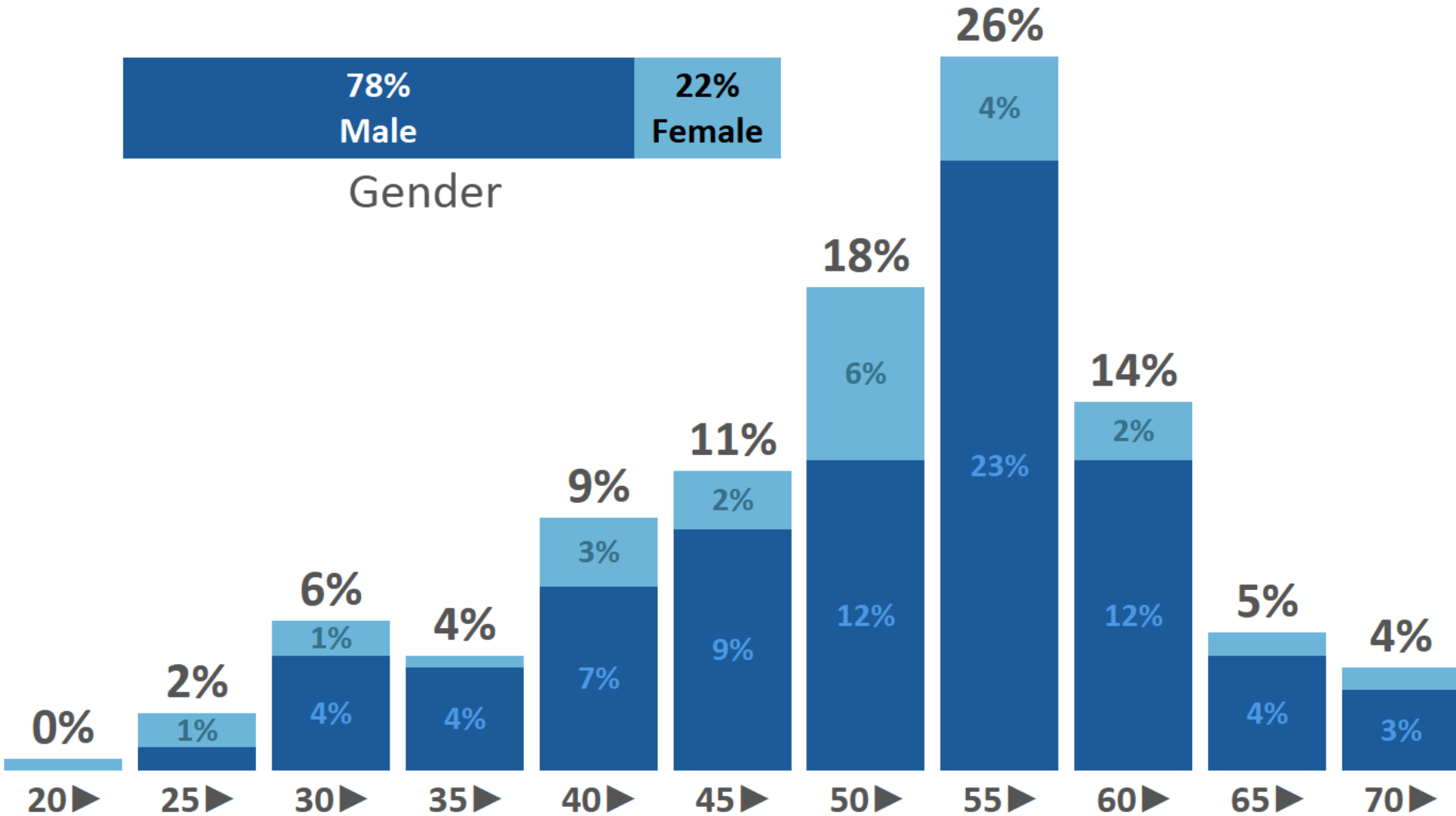
Patients Assessed for Respite Care

Fiscal Year	Homeless Admissions	Unique Patients (by MR#)	Respite Applicants	Respite Patients
2014	803	427	104	53
2015	693	406	100	64
2016	731	461	98	89
Three-Year Total	2249	1353	302	206

Age & Gender

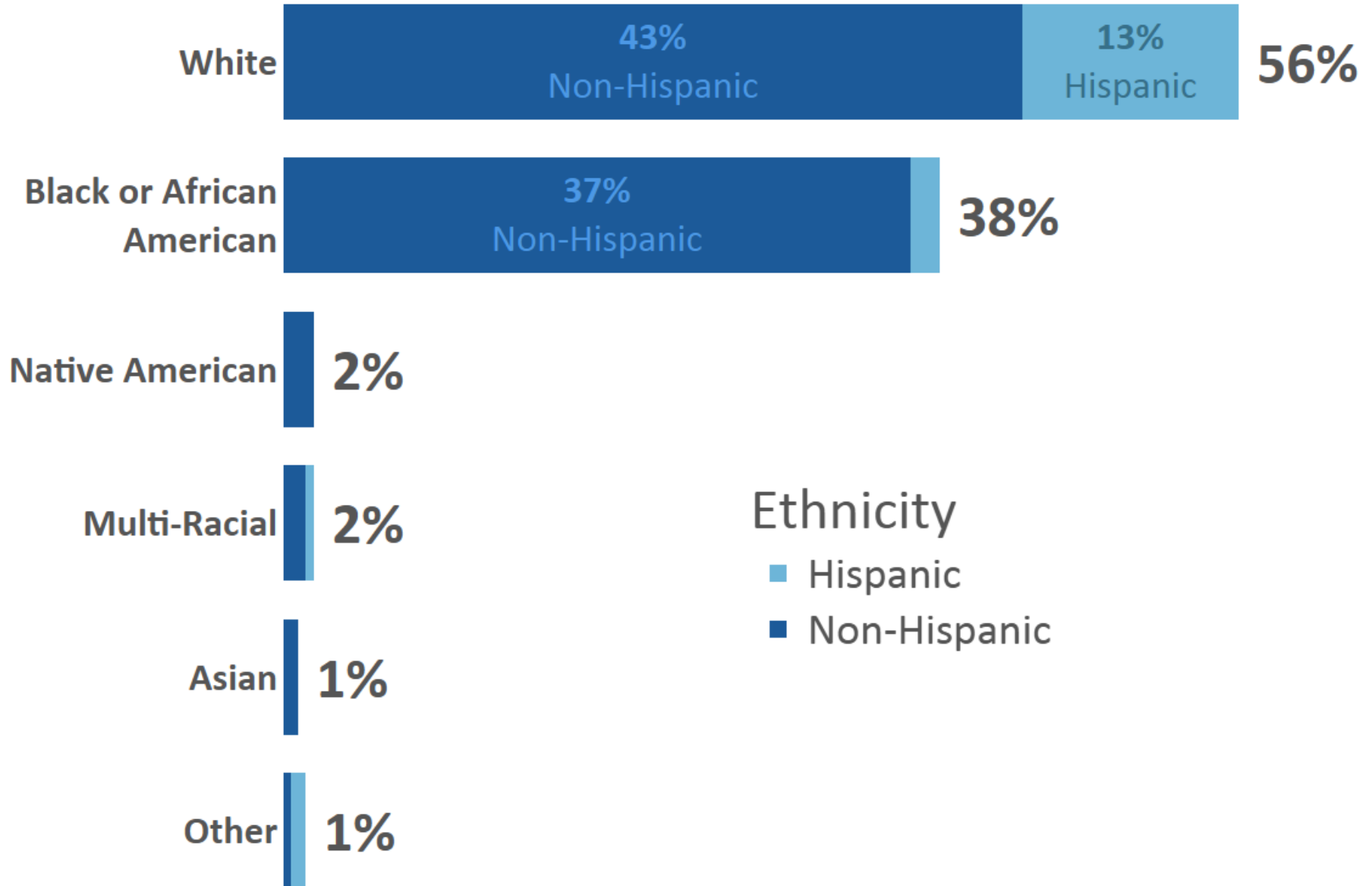


Gender

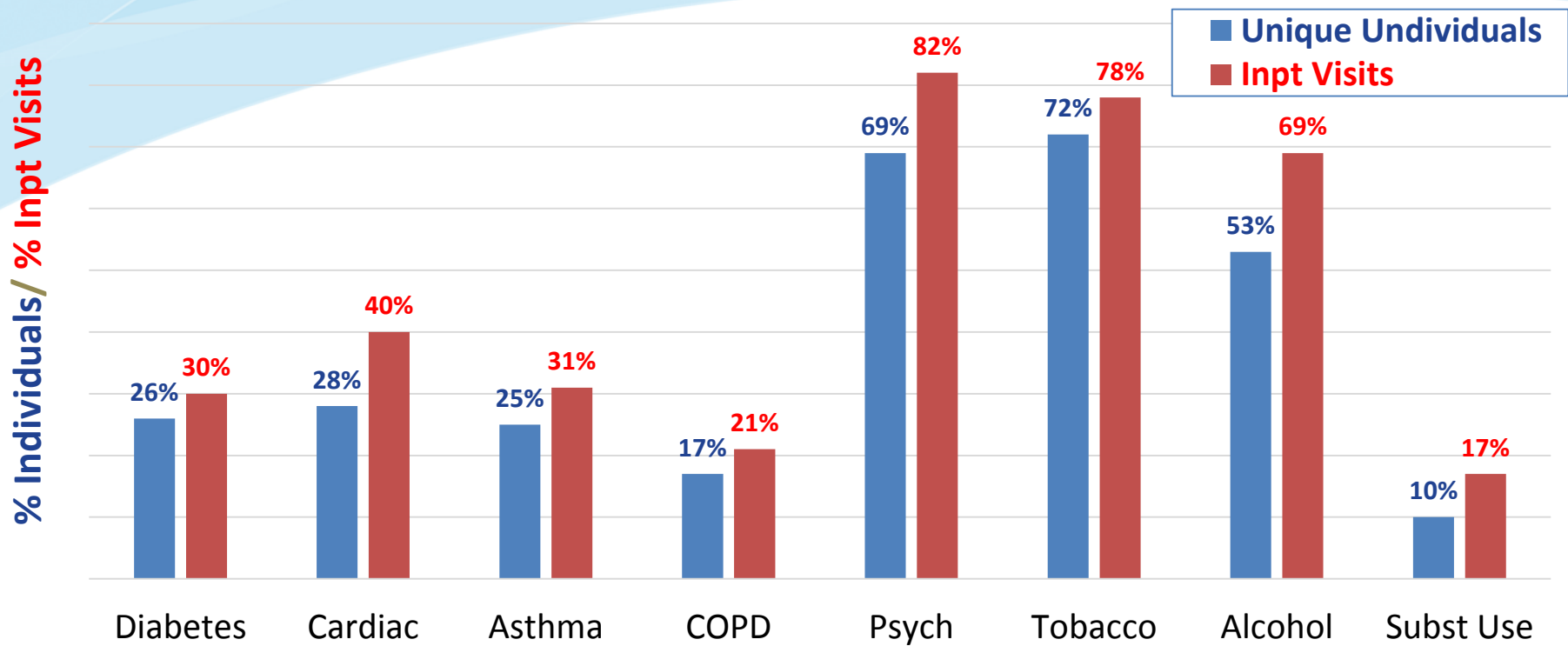


Age

Race & Ethnicity



Chronic Illness Among Homeless



- **99%** of N=461 individuals identified as homeless during 1+ YNHH visit in 2016 have **CMS AHRQ-Defined Chronic Conditions**.
- These 461 individuals were associated with 1,168 FY 2016 inpatient visits.
- Individuals with **Diabetes** represented **26%** of total individuals, but were responsible for **30%** of total inpatient visits.



How Does Medical Respite Work?

YNHH Workflow

- Identifying and Interviewing patients
- Social Work, Case Managers, and Columbus House staff collaborate on a plan
 - Determine eligibility
 - Transmitting the application
 - Arrange for homecare services
 - Arrange for medication management
 - Verify insurance benefits
 - Coordinating transition from YNHH to Medical Respite
 - Review cases at weekly care team meetings

Columbus House Services

- Patient Navigation
 - Connect patients to primary care
 - Create medical service plan
- Case Management
 - Create housing service plan
 - Benefit applications
 - SSI, Food Stamps, SAGA,
 - Refer to employment specialist
 - Refer to behavioral health services
- Transportation to appointments

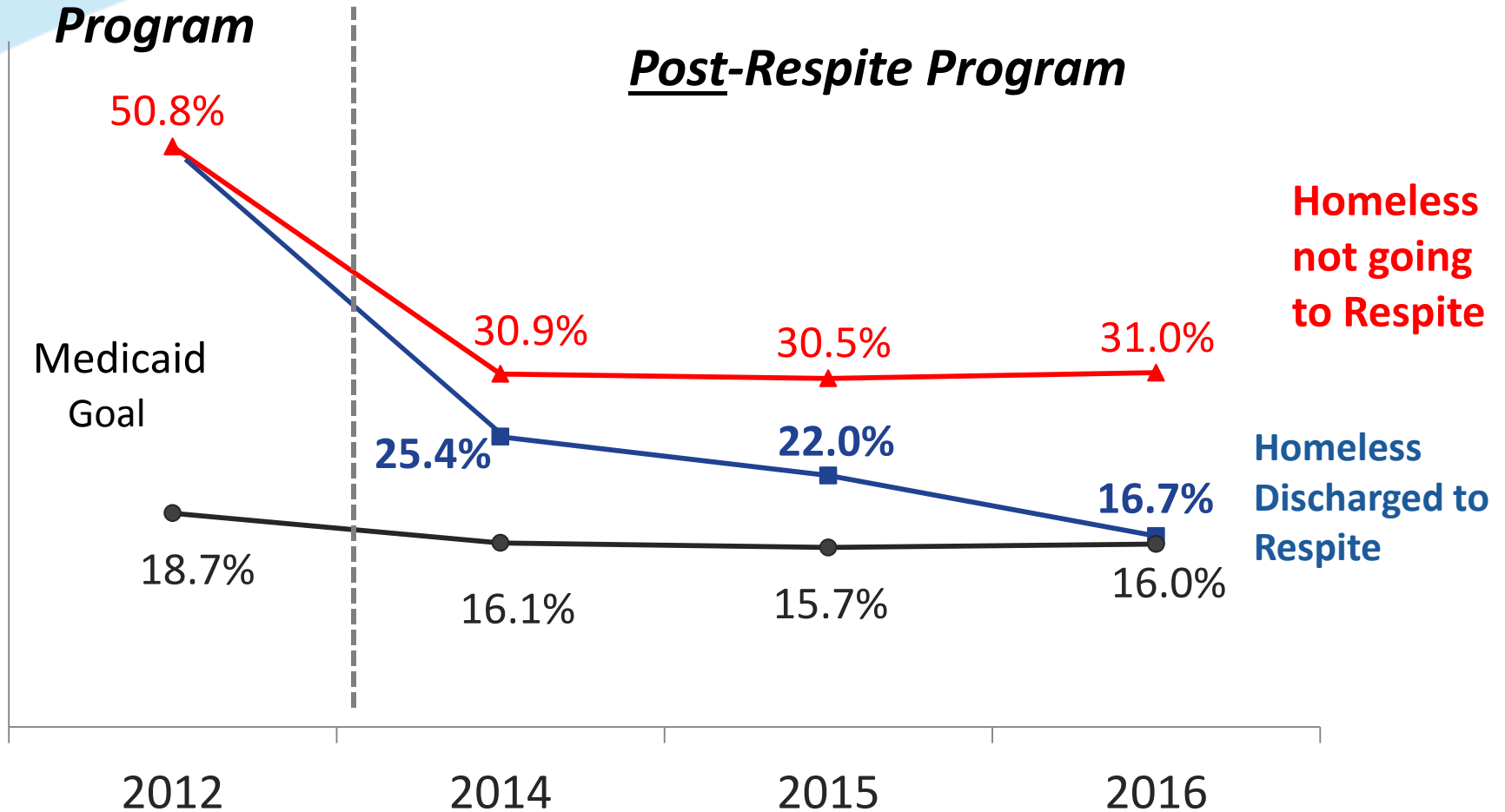


What Are the Results?

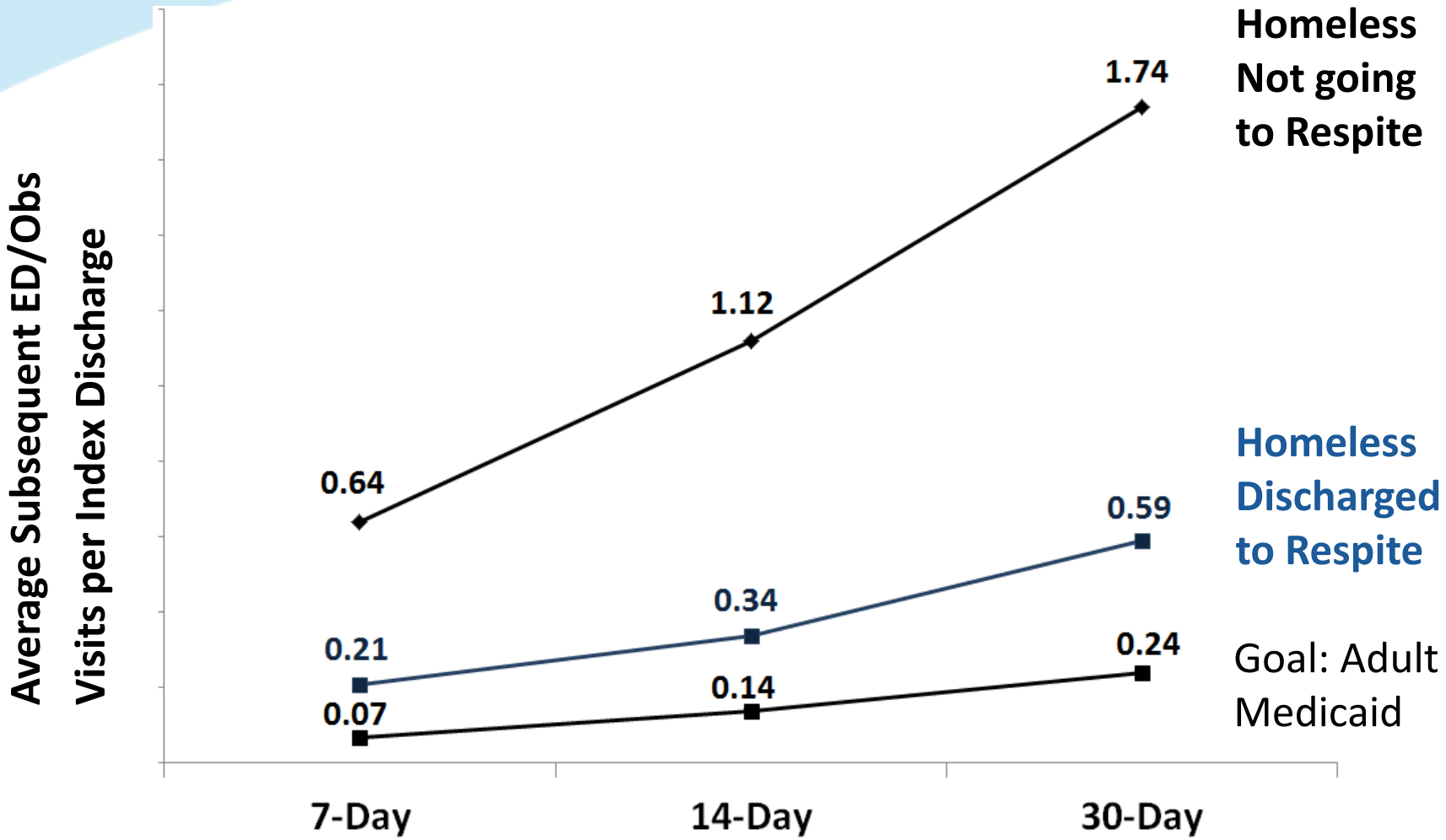
Inpatient 30-Day Readmission Rates

**Pre-Respite
Program**

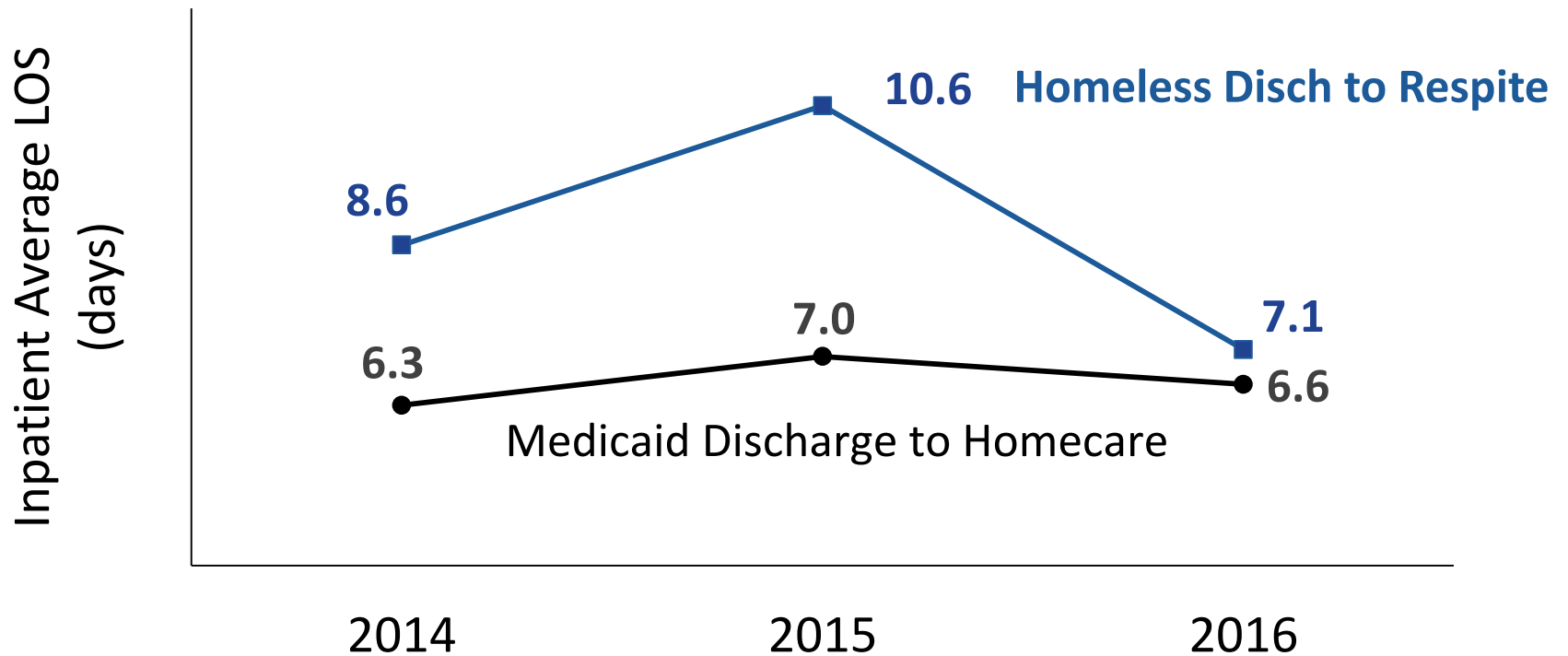
Post-Respite Program



2016 Reduced ED/Observation Re-Visits



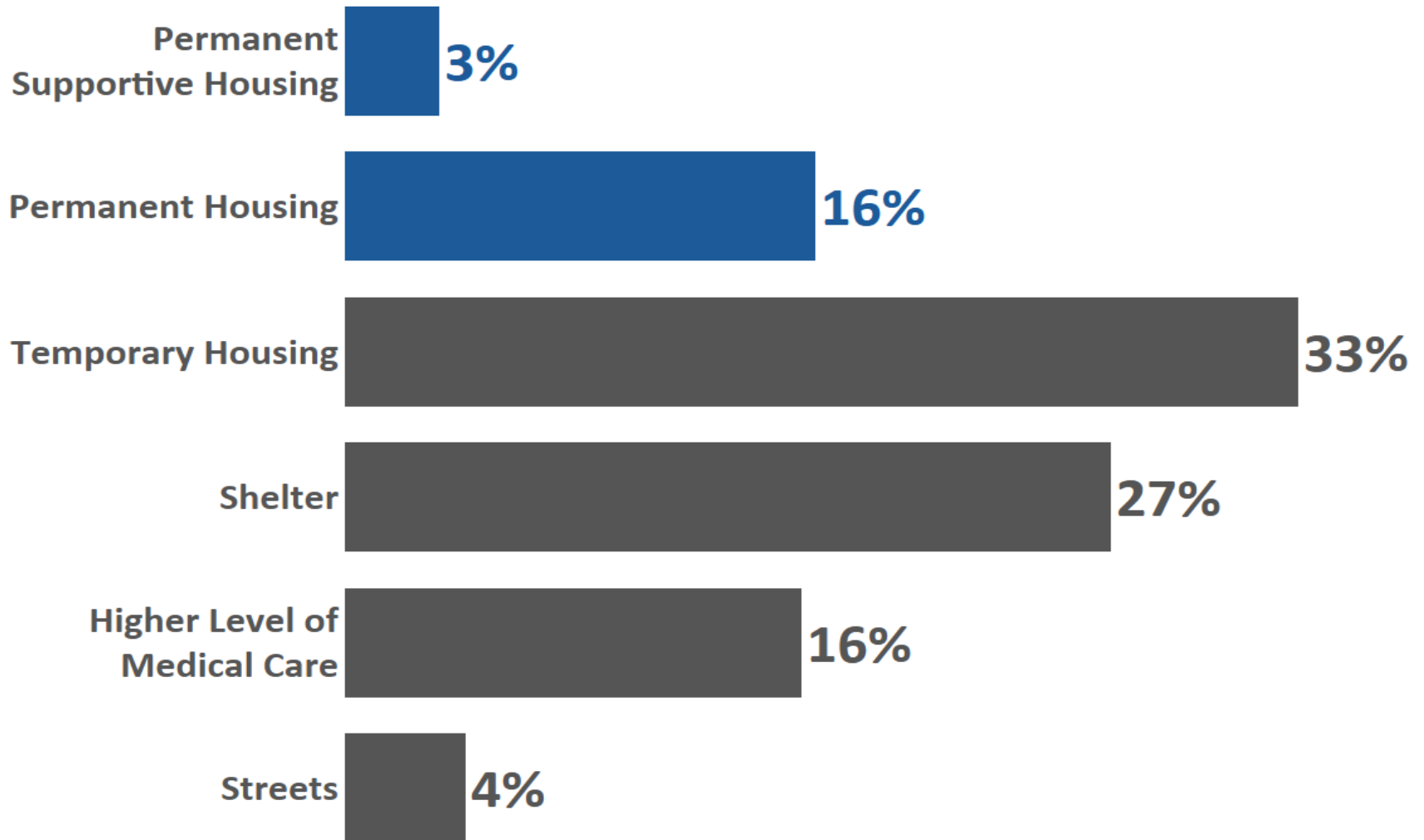
Reduced Hospital Length of Stay



Conservatively Medical Respite saves Medicaid **\$12,000*** per patient

*We estimate that on average each Medical Respite patient that completes at least two weeks in the program **saves Medicaid between \$12,000 and \$25,000** across all Medicaid claims in the year following Respite.

The Secret to Success... Housing



Reasons for Success

- Housing *is* Health Care
- Increased collaboration
- Increased commitment to staffing and resources
- Improved care
- YNHH as CAN intake site
- Faster, more efficient processes
- Intensive case management
- Innovation & taking risks

Next Steps

- Nursing on site at Columbus House
- Visiting physicians
- Securing resources
- Increasing consistency of care
- Expanding eligibility
- Continuous improvement

Thank You!

- Columbus House, Inc.
- Continuum Home Health, Inc.
- Cornell Scott Hill Health Center
- CT Department of Housing
- CT Department of Social Services
- National Health Care for the Homeless Council
- New England Home Care
- Partnership for Strong Communities
- Visiting Nurses of South Central Connecticut
- Yale New Haven Hospital
- Our New Haven Legislative Delegation

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