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Preliminary Findings on Homeless Service Use and Medicaid Spending in New Jersey

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The project team includes Jose Nova, Derek DeLia, Sujoy Chakravarty, Oliver Lontok, and Margaret Koller of Rutgers Center for State Health Policy and Katelyn Cunningham, Taiisa Kelly, and Richard Brown of Monarch Housing Associates.

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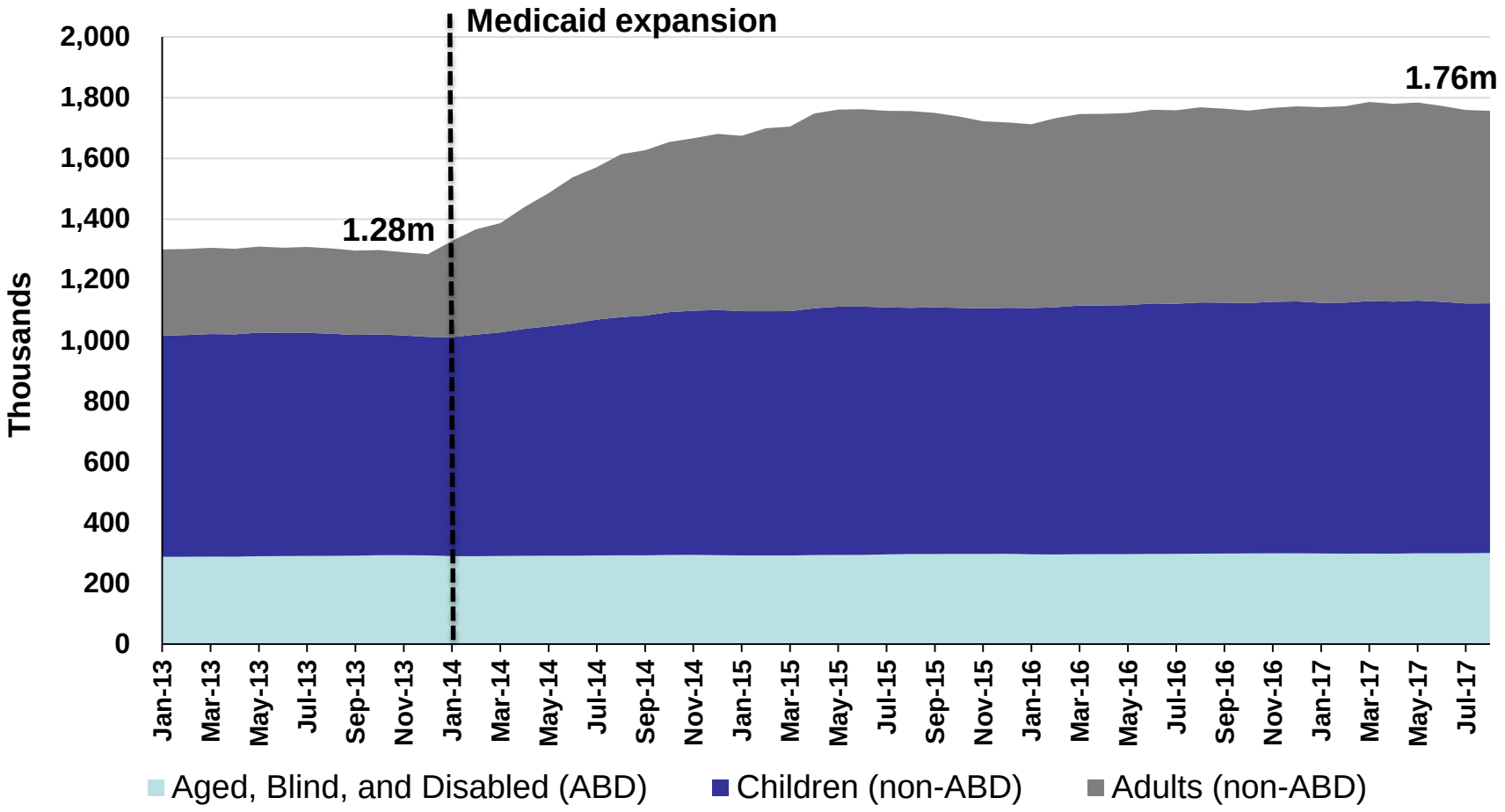
The views expressed in this presentation are exclusively those of project team, and may not reflect those of the project sponsors or the state agencies contributing data.

Outline

- Background on Medicaid
- Project overview
- Selected preliminary findings

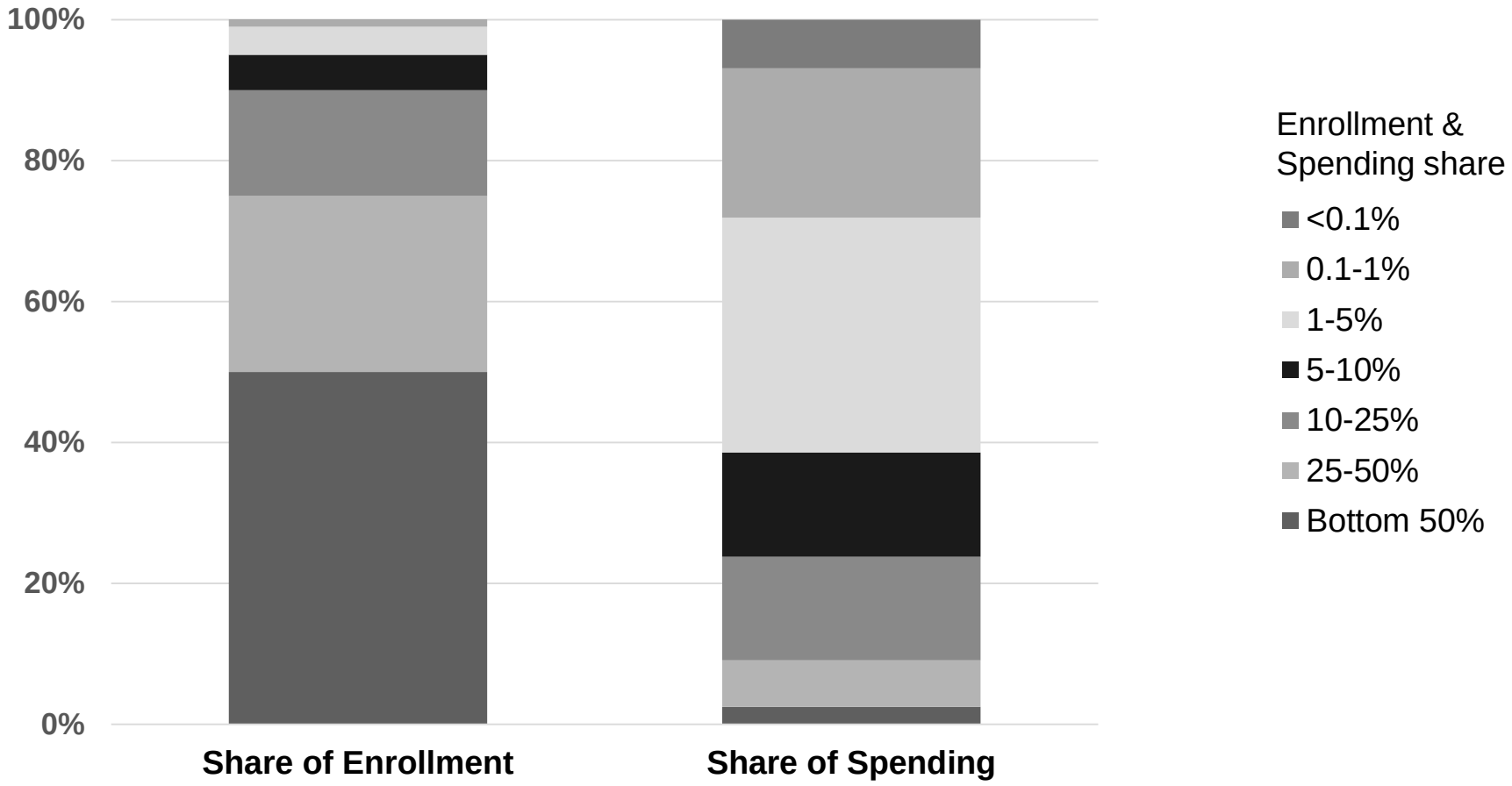
NJ Medicaid Enrollment Jan. 2013-Aug. 2017

By eligibility category



Source: NJ Department of Human Services. http://www.state.nj.us/humanservices/dmahs/news/reports/index.html. Note: Children are under age 21.

Distribution of Total NJ Medicaid Spending by Spending Group, 2013



Source: Rutgers Biomedical and Health Sciences Working Group on Medicaid High Utilizers

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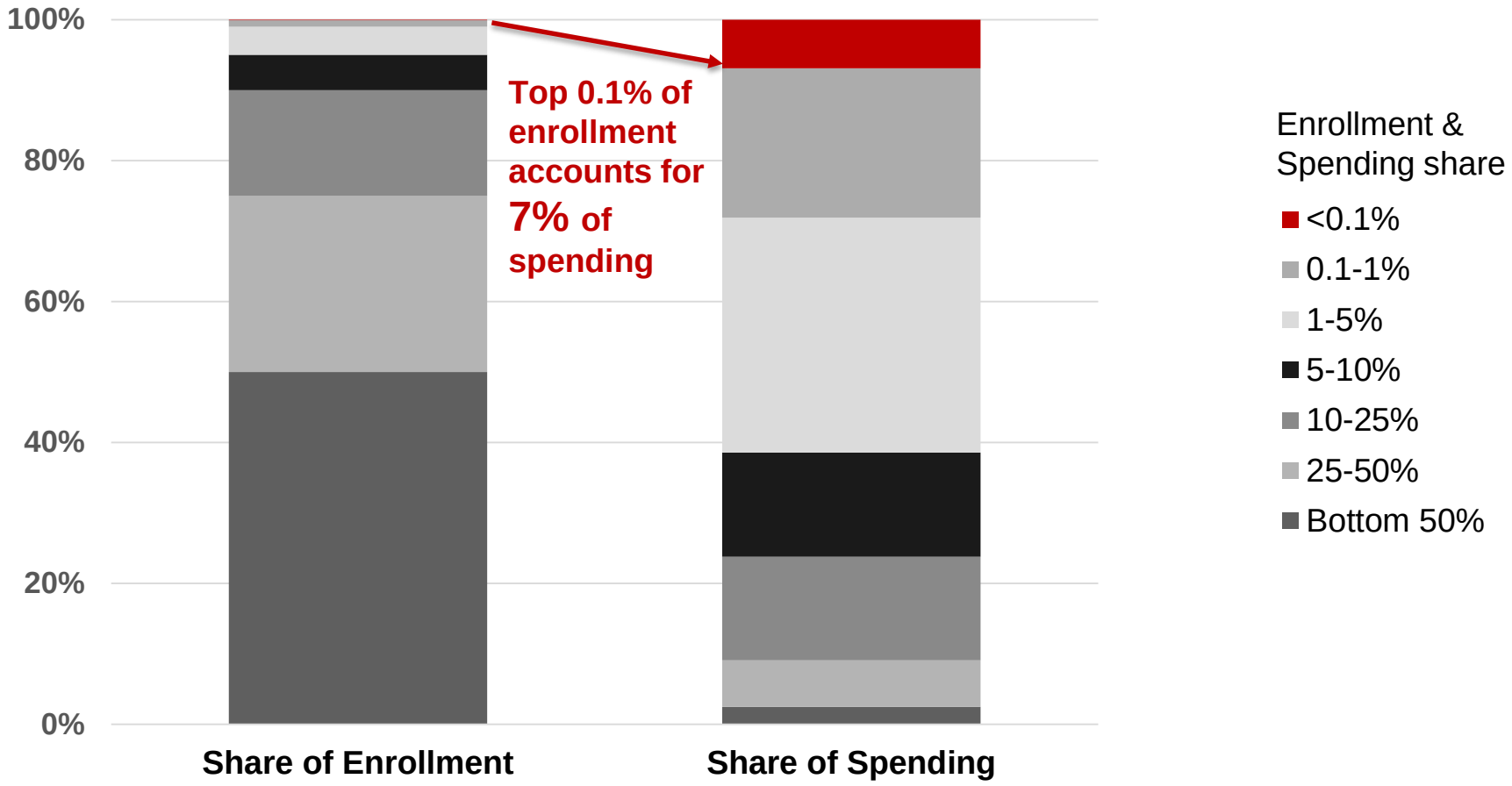

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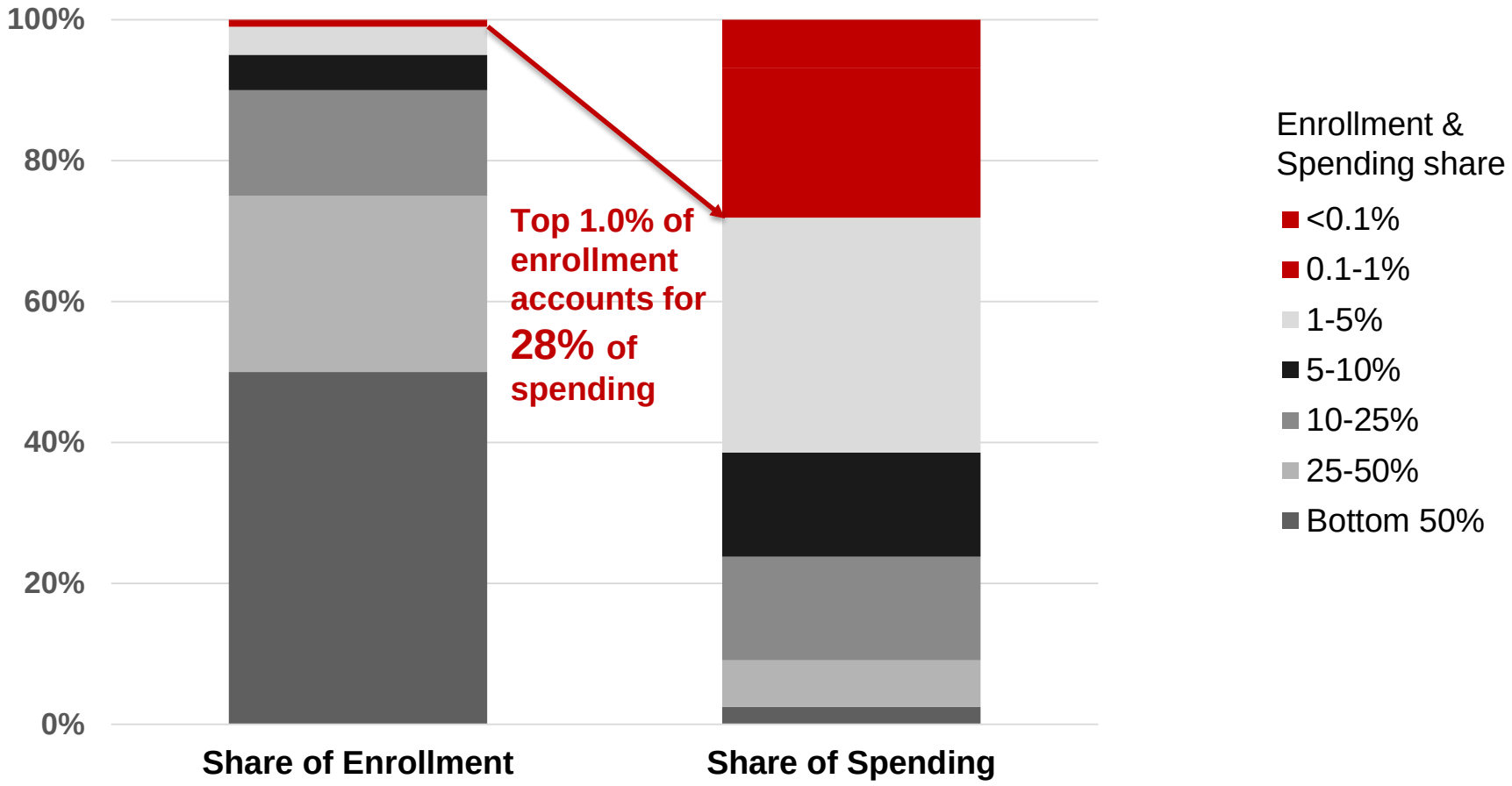

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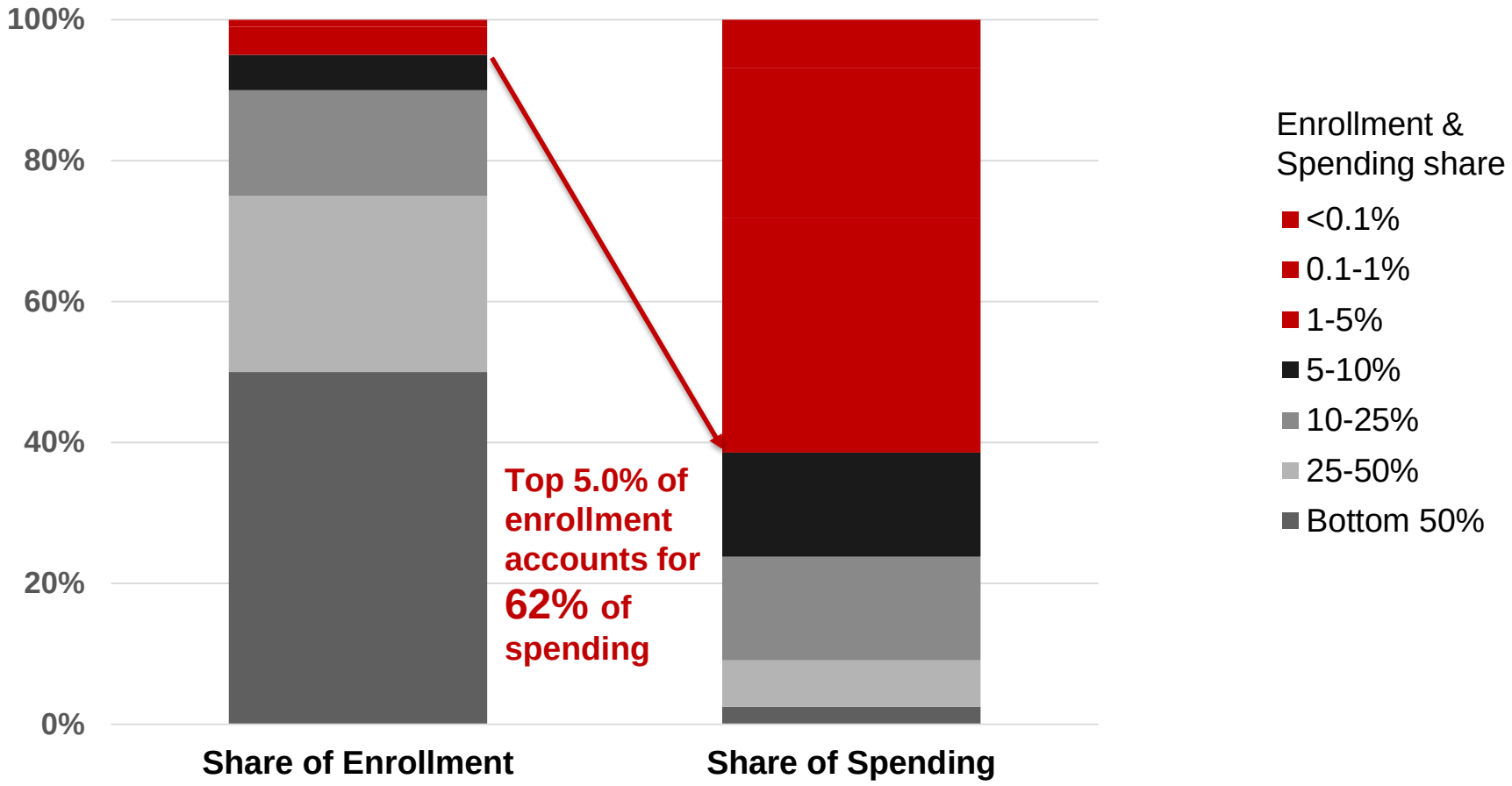

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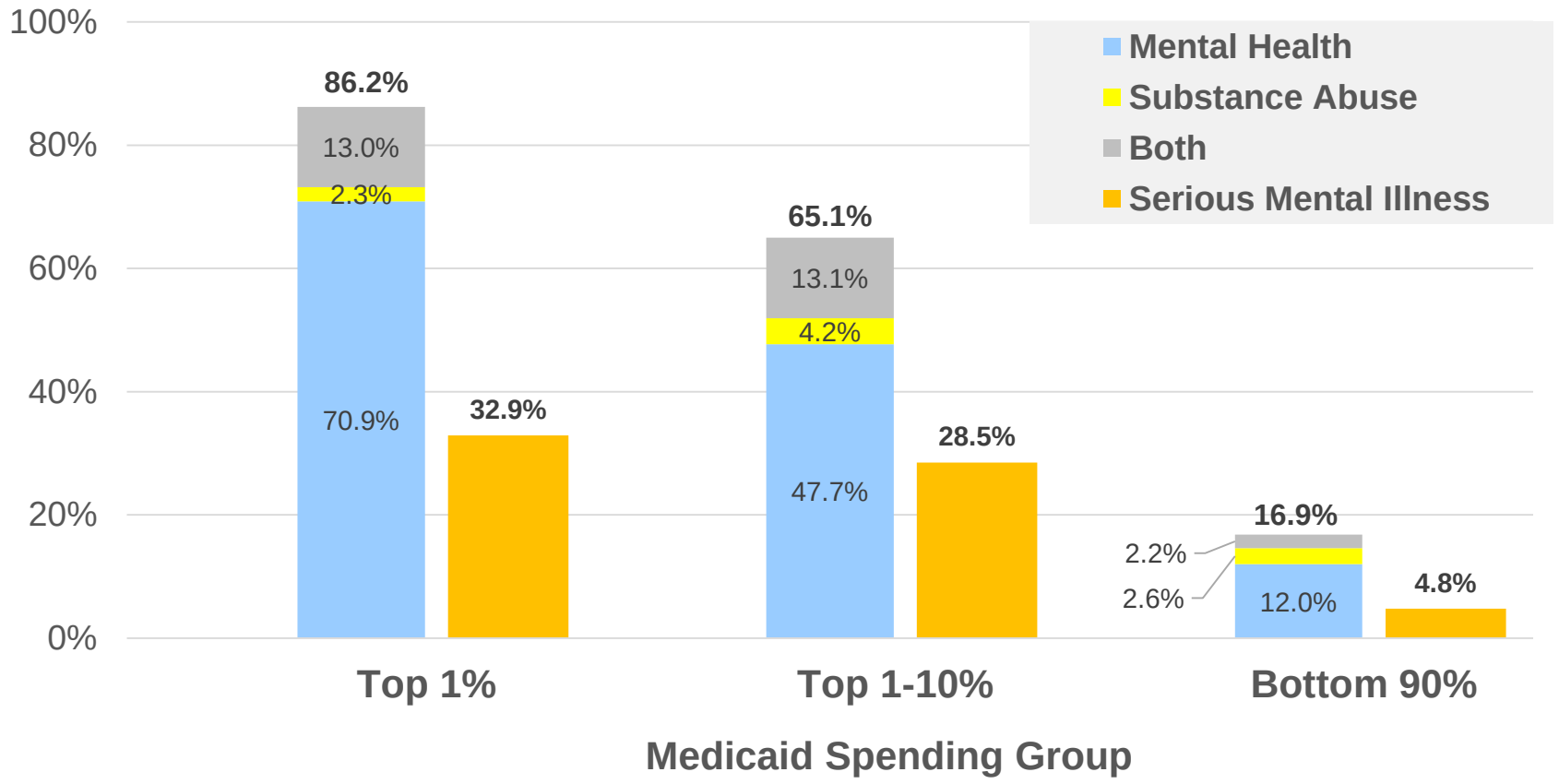
Mental Health and Substance Use Disorder Diagnoses by Spending Group, 2013



Source: Rutgers Biomedical and Health Sciences Working Group on Medicaid High Utilizers
Available at: *www.cshp.rutgers.edu/Downloads/10890.pdf*

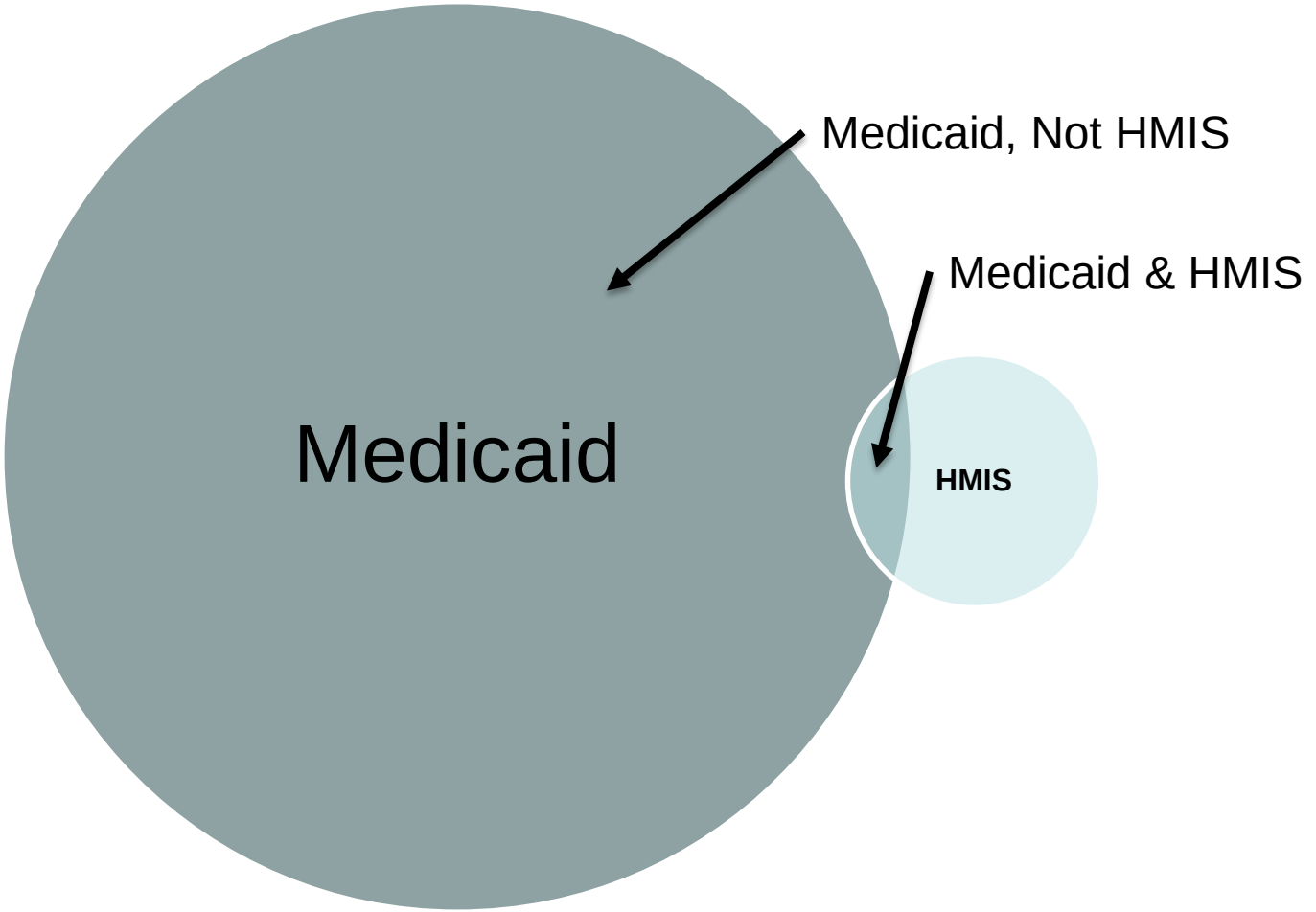
Project Goals

1. Link 2011-16 data from the Homeless Management Information System (HMIS) to the Medicaid Management Information System (MMIS).
2. Identify opportunities to generate Medicaid savings and improve patient outcomes among Medicaid beneficiaries who use homeless services.
3. Estimate the impact on Medicaid spending of permanent supportive housing placement.
4. Engage state officials and other interested stakeholders.

A Few Project Specifics

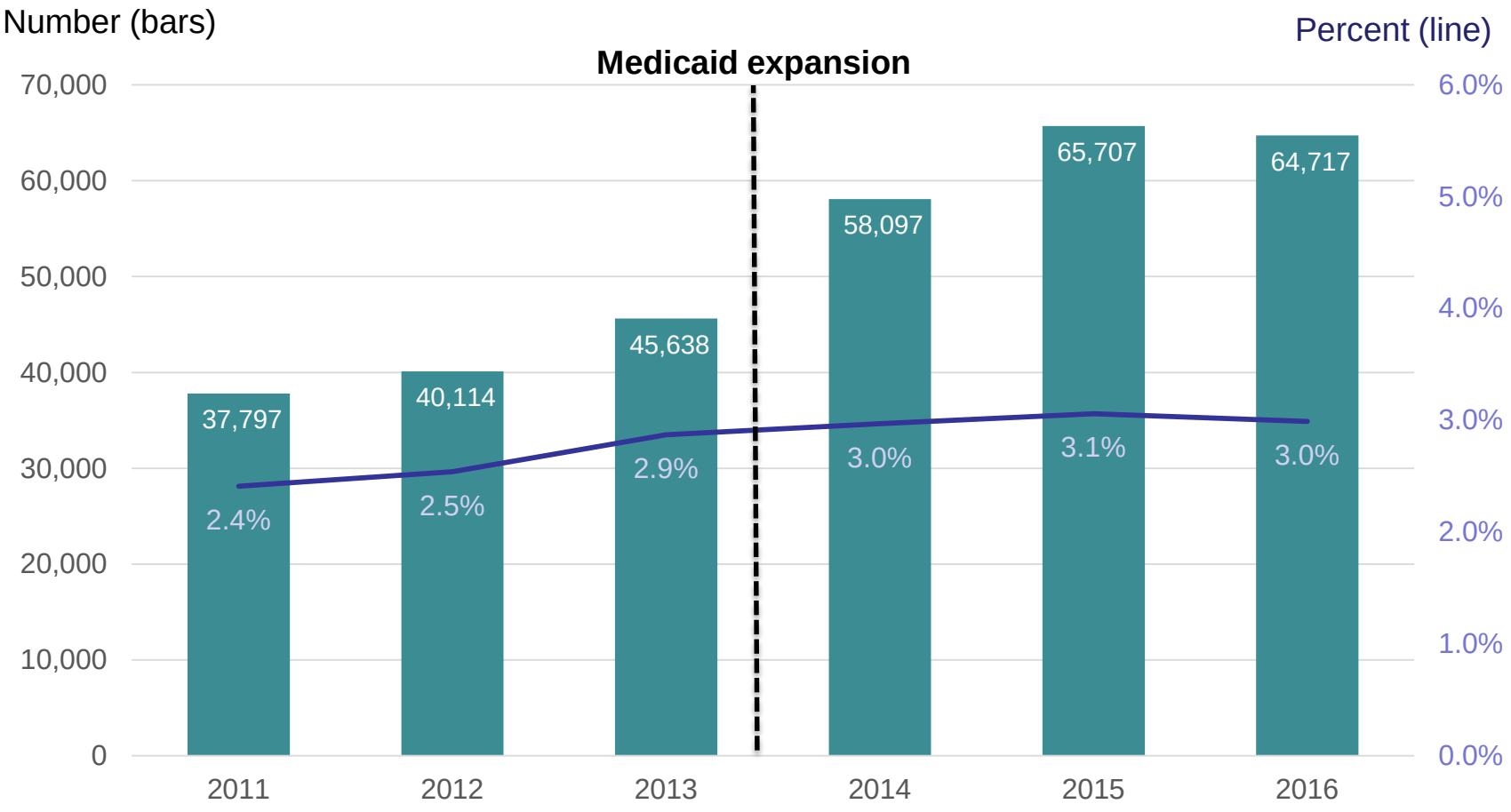
- HMIS data from the NJ Housing and Mortgage Finance Agency
  - Housing services, client characteristics
  - All counties for some services (e.g., emergency shelters) and 19 of 21 counties for other services (e.g., supportive housing).
- MMIS data from NJ Div. of Medical Assistance and Health Services
  - Beneficiary characteristics, service use, spending
  - All NJ Medicaid beneficiaries
- Data for 2011-2016 linked using client/beneficiary IDs under inter-agency Data Sharing Agreement
- De-identified linked data shared with Rutgers for analysis under Data Use Agreements and approval of Rutgers Institutional Review Board

The Study Population & Focus for Today

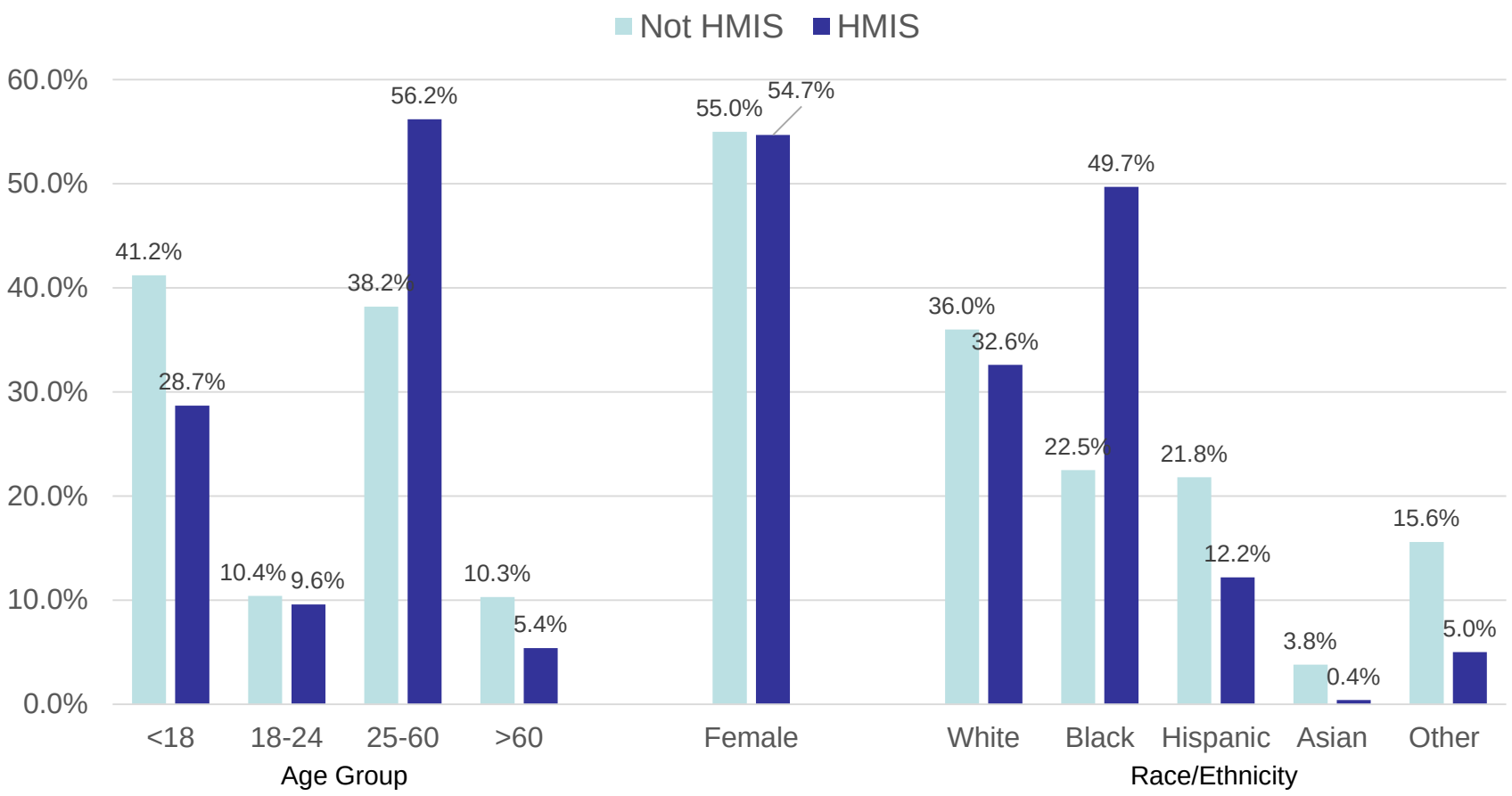


Note: Not to scale

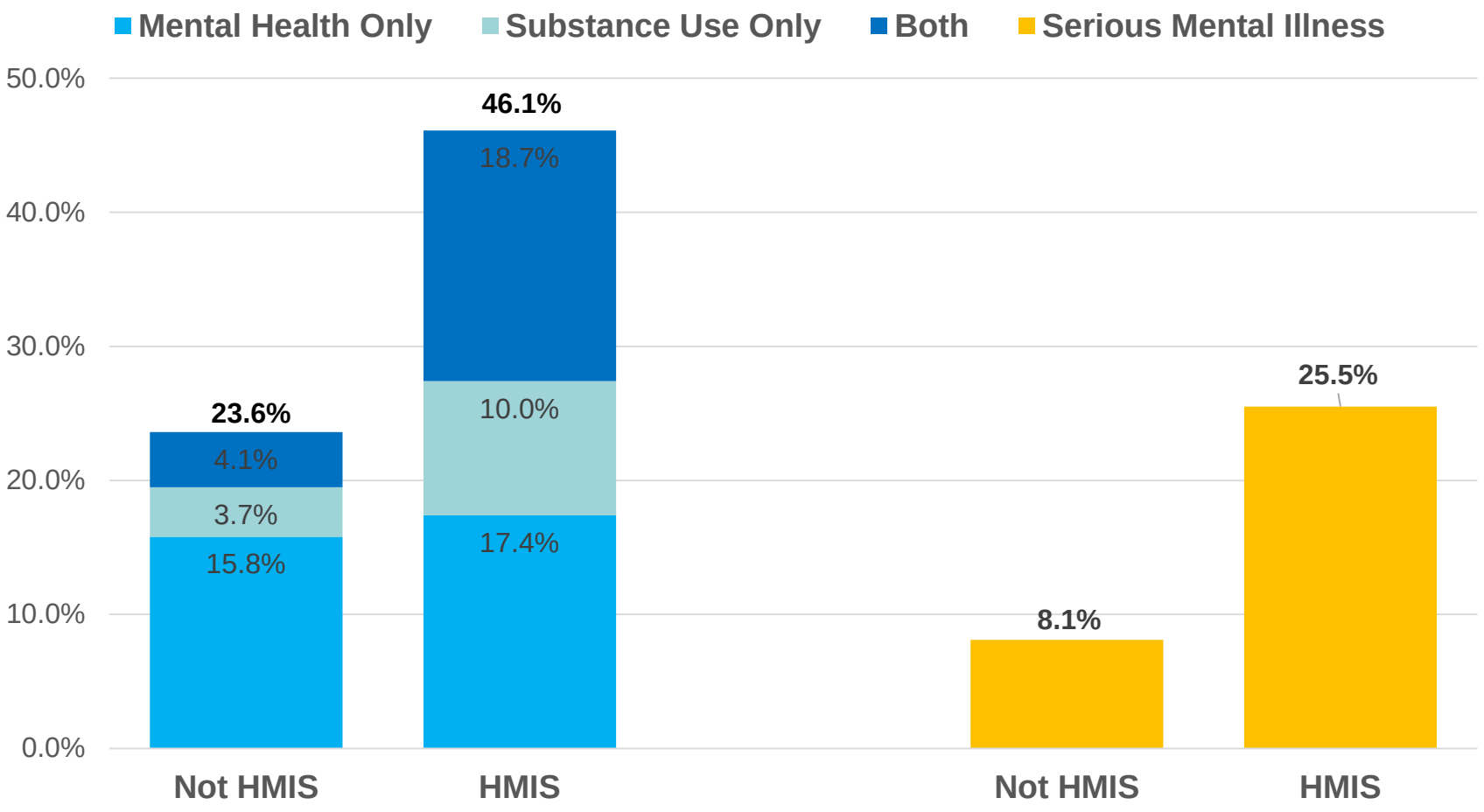
Number and Percent of Medicaid Beneficiaries in HMIS



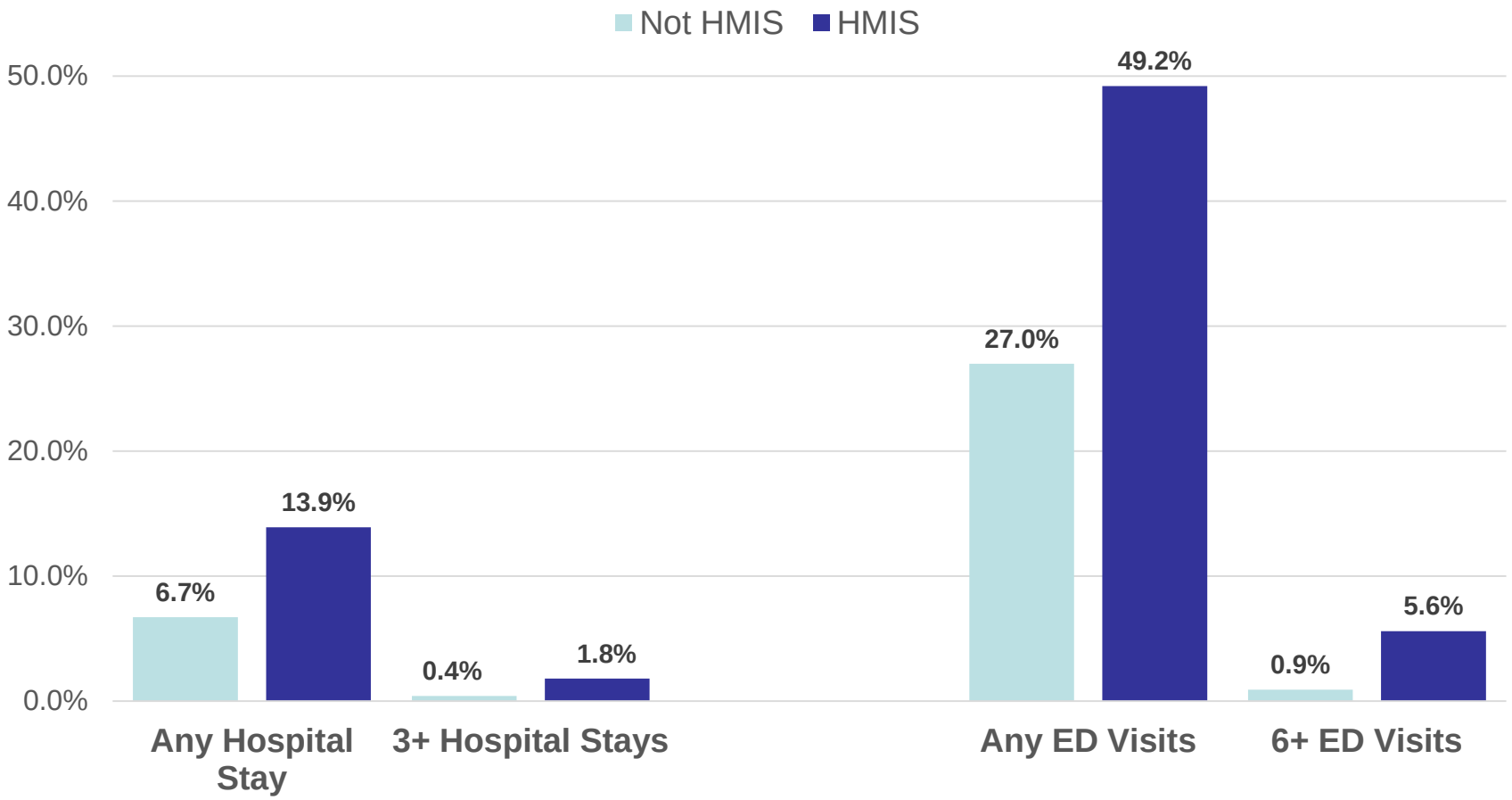
Demographics of Medicaid Beneficiaries by HMIS Status, 2015



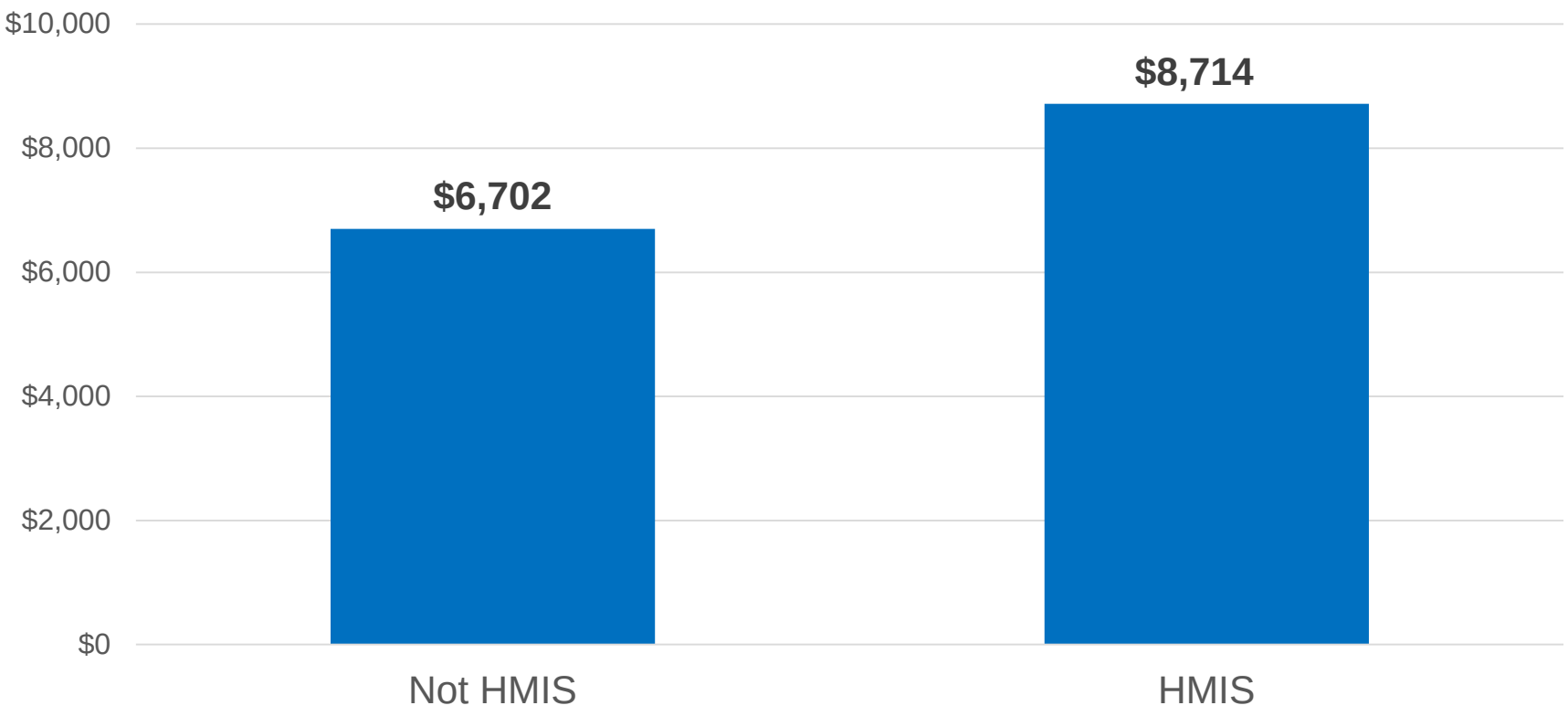
Medicaid Mental Health and Substance Use Disorder Diagnoses by HMIS Status, 2015



Hospital Stays and Treat & Release Emergency Department (ED) Visits of Medicaid Beneficiaries by HMIS Status, 2015

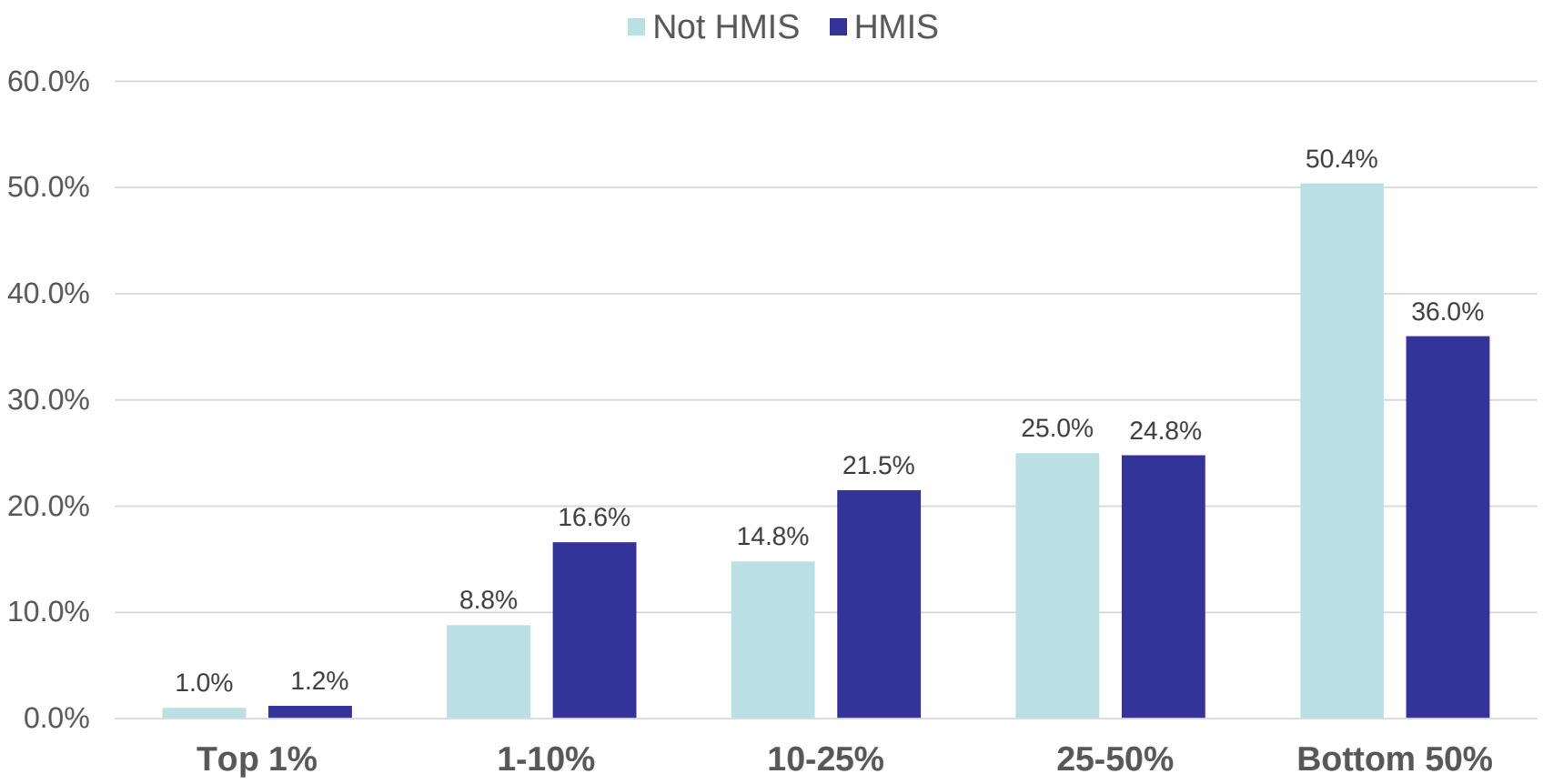


Average Annual Medicaid Spending* by HMIS Status, 2015

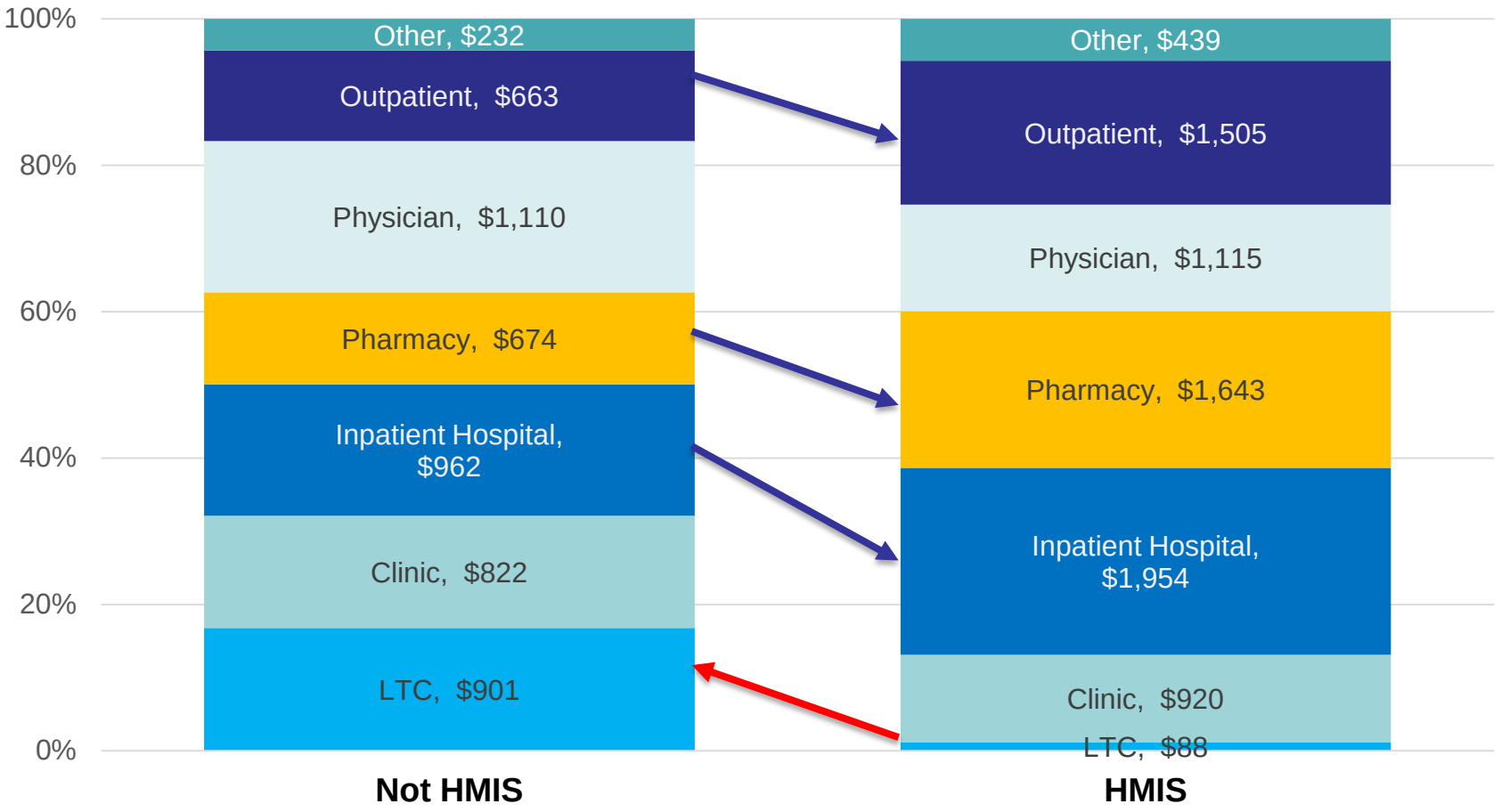


* Adjusted for number of months enrolled or for demographics.

Medicaid Spending Distribution by HMIS Status, 2015



Composition of Medicaid Spending* by HMIS Status, 2015



*Spending *not* adjusted for number of months enrolled.
LTC = long-term care services.

Summary of Preliminary Results So Far

- About 2.5% to 3% of Medicaid beneficiaries appear in HMIS annually, including 38,000-68,000 individuals, there was >25% increase after expansion
- The linked population:
  - More likely to be ages 25-60, less likely to be kids or 60+
  - Much more likely to have substance use, substance use+mental health diagnoses, and Serious Mental Illness
  - Higher users of inpatient and ED care
  - About 30% higher average Medicaid spending & more likely to be in higher spending group
  - Higher hospital and pharmacy spending, lower LTC spending

Stay Tuned,

Much More to Come!