

Health Through Housing

Initial Data Analysis of HMIS and Medicaid Matched
Population



Health Through Housing Initiative: *What did we hope to accomplish?*

- Identify homeless Medicaid population with high ED utilization and inpatient costs and pilot a housing intervention and supportive services.
- Determine if the homeless population was a more expensive population.
- Use current healthcare data to inform prioritization of housing resources.
- Sharing data across housing and healthcare sectors reduces service redundancy and improves care coordination
- Improve the local homeless response system so those needing housing can get assistance
- Build the capacity of housing providers

Michigan Data Integration

Integrating HMIS data into MDHHS data warehouse for matching against Medicaid Master Person Index (MPI)

Algorithm matched first name, last name, date of birth and full social security number

Analyzing the matched data set to investigate characteristics of the population

Breakout of HMIS and Medicaid Populations

HMIS Members Identified in Fiscal Year 2018: 75,924

HMIS Members With a Medicaid ID Match: 43,939
(57.9%)

HMIS Members Enrolled in Medicaid in FY 2018:
35,800 (81.5%)

Members in Permanent Supportive Housing (PSH): 2,644
(7.4%)

Members listed as Homeless: 33,156 (92.6%)

Quality Measurement for HMIS Members

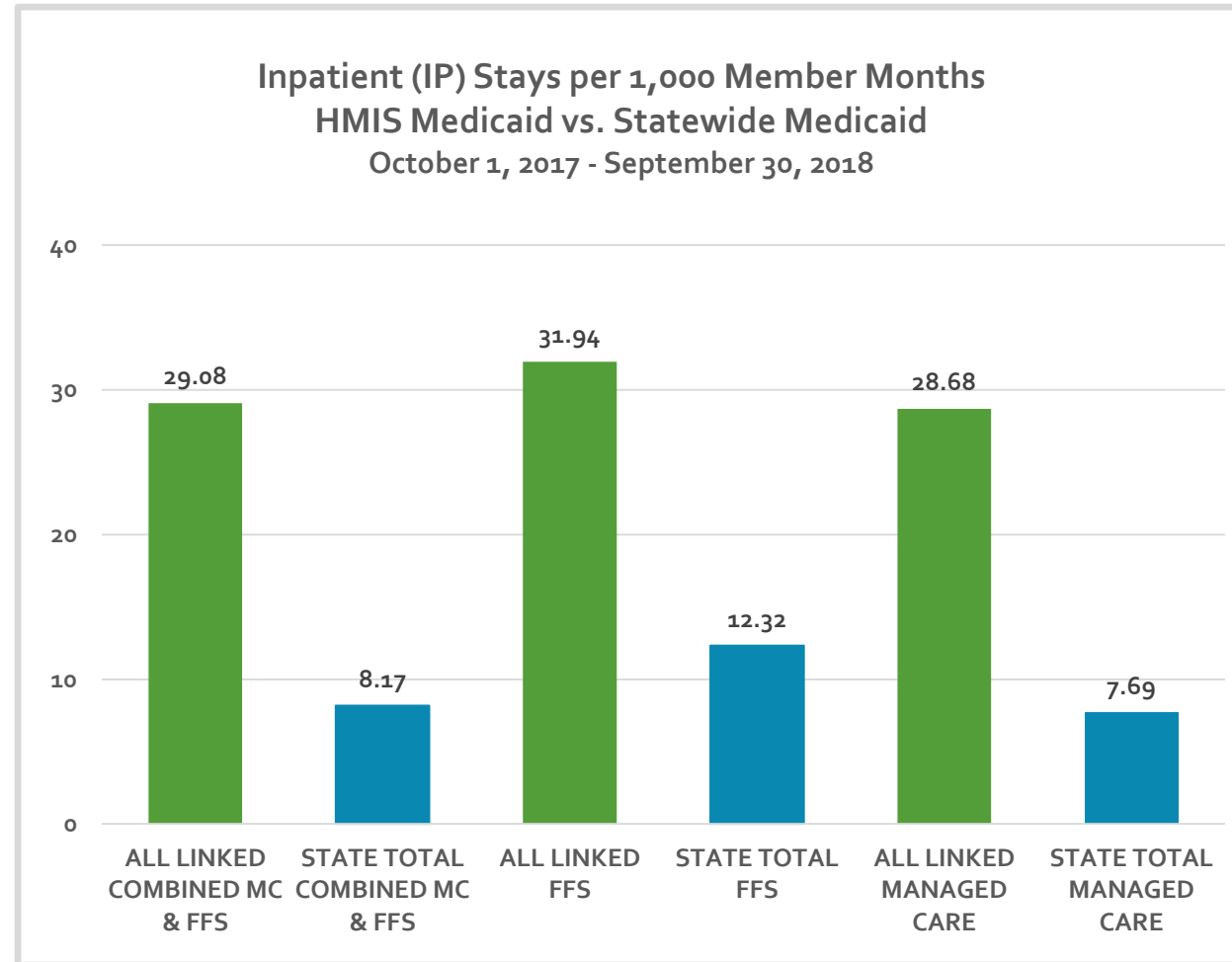
Measurement Period: 10/1/2017 – 9/30/2018

Population Definitions

- **Homeless** – HUD Category 1 Homeless
 - Any HMIS member that had one day of homelessness in Fiscal Year 2018
- **PSH** – Permanent Support Housing
 - Any HMIS member with a most recent service point enrollment of Permanent Supportive Housing in Fiscal Year 2018
- **All Linked** – Active with Medicaid FY2018
 - Any HMIS member enrolled in Medicaid with either one day of Homeless status or PSH status in Fiscal Year 2018
- **State Total**
 - The total state Medicaid population. This is used as a control group against the HMIS Medicaid recipients.

Inpatient Utilization (IU) Measure

- **Measure Description:** Rate of inpatient stays per 1,000 member months.
- **Exclusions:** Newborn care. Medicare/Medicaid Dual Eligibles

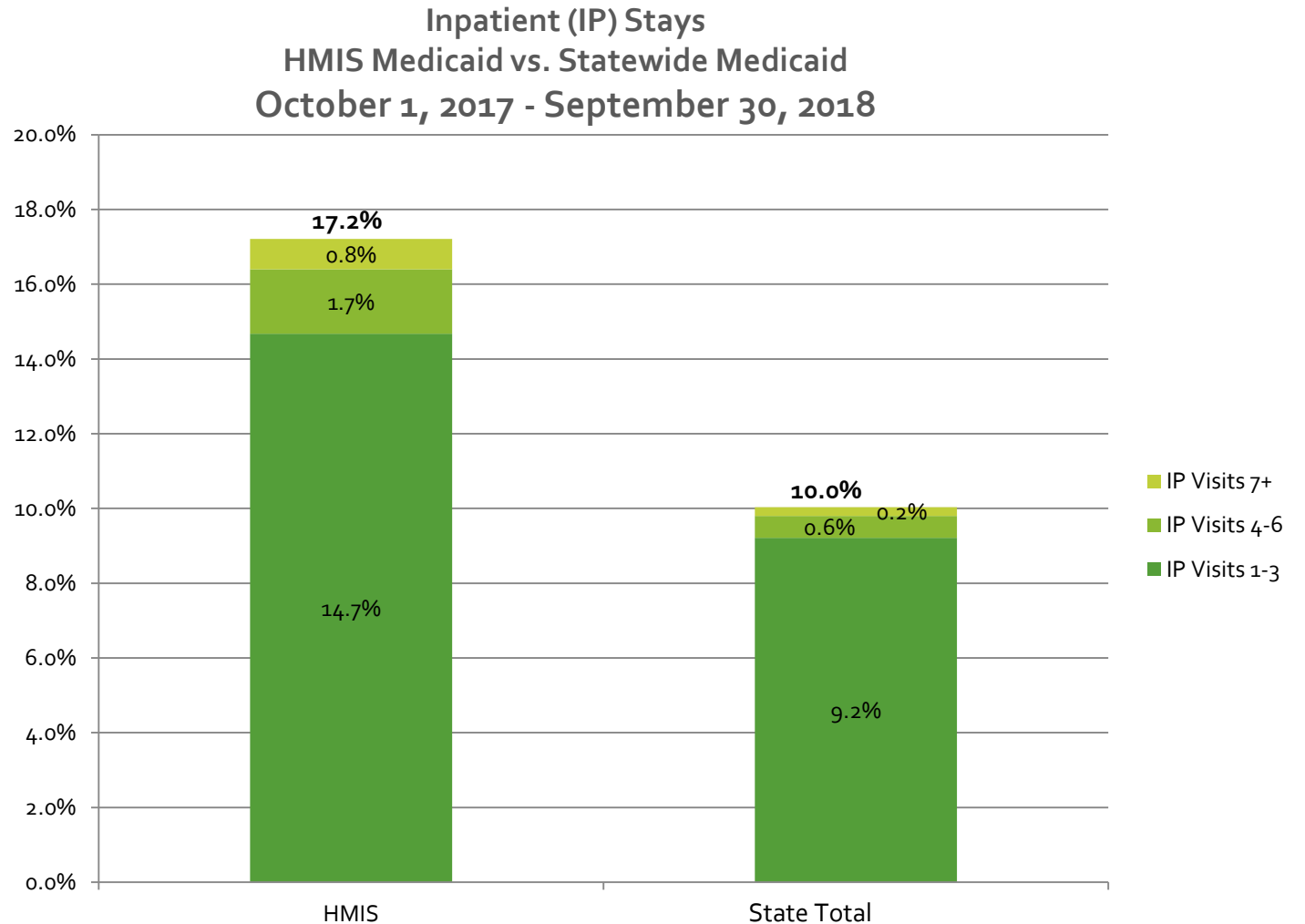


Inpatient Utilization

Measure Description: The percentage of individuals who had at least one inpatient stay during the last 12 months.

****Exclusions:** Medicare/Medicaid Dual Eligibles

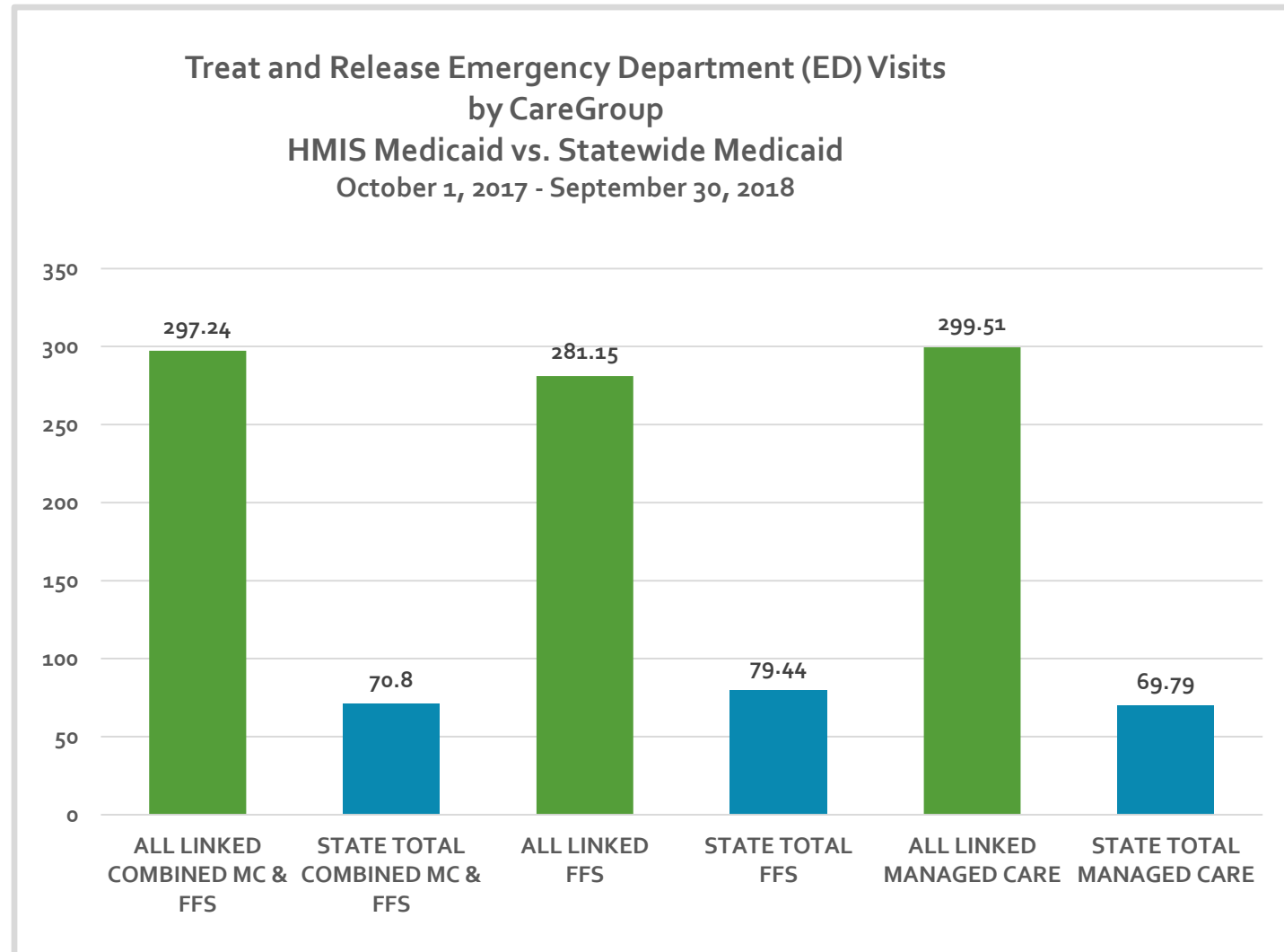
- 292 individuals in the HMIS population had 7 or more inpatient stays



Treat and Release ED Visits (AMB) Measure

Measure Description: Rate of total Emergency Department (ED) Visits per 1,000 member months.

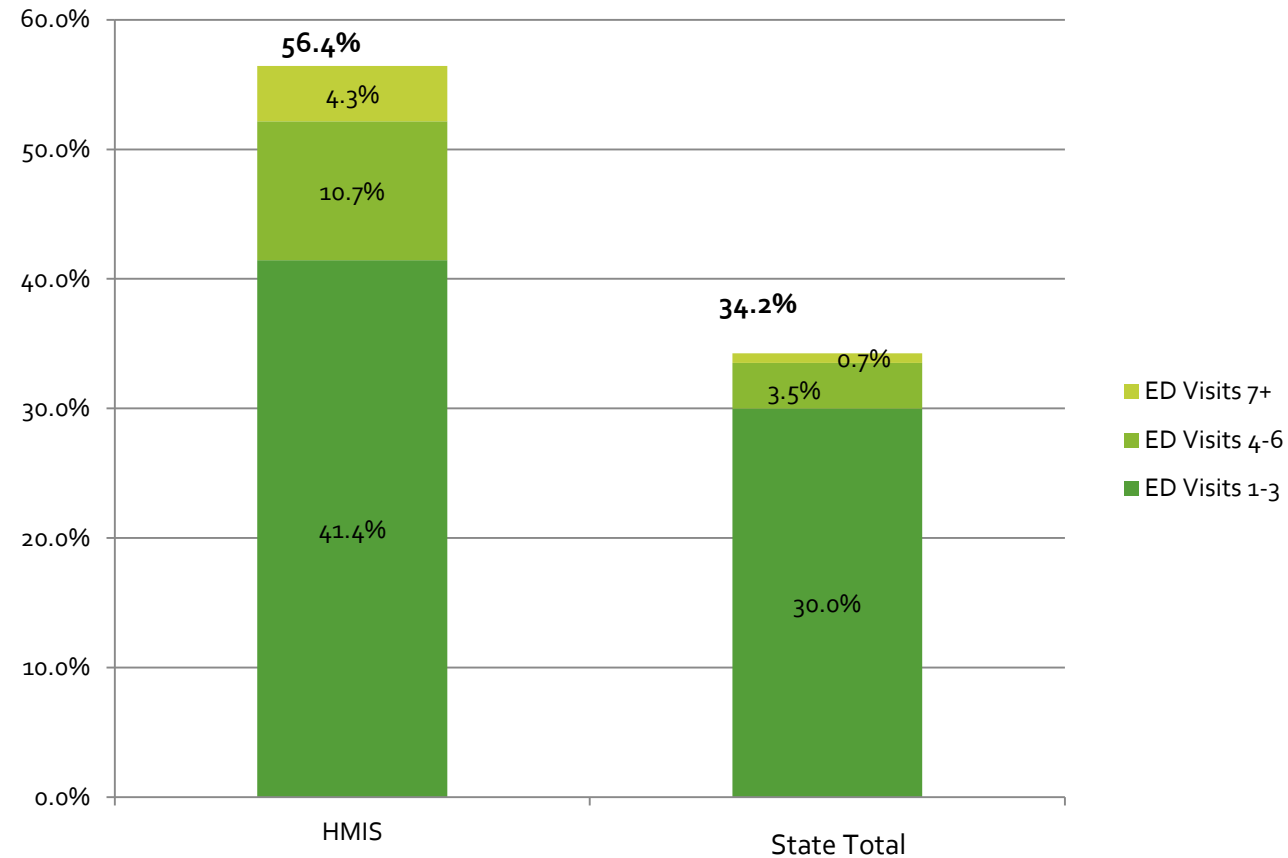
Exclusions: ED visits resulting in an inpatient admission. Multiple ED visits on the same day are only counted once. Medicare/Medicaid Dual Eligibles



Emergency Department Utilization

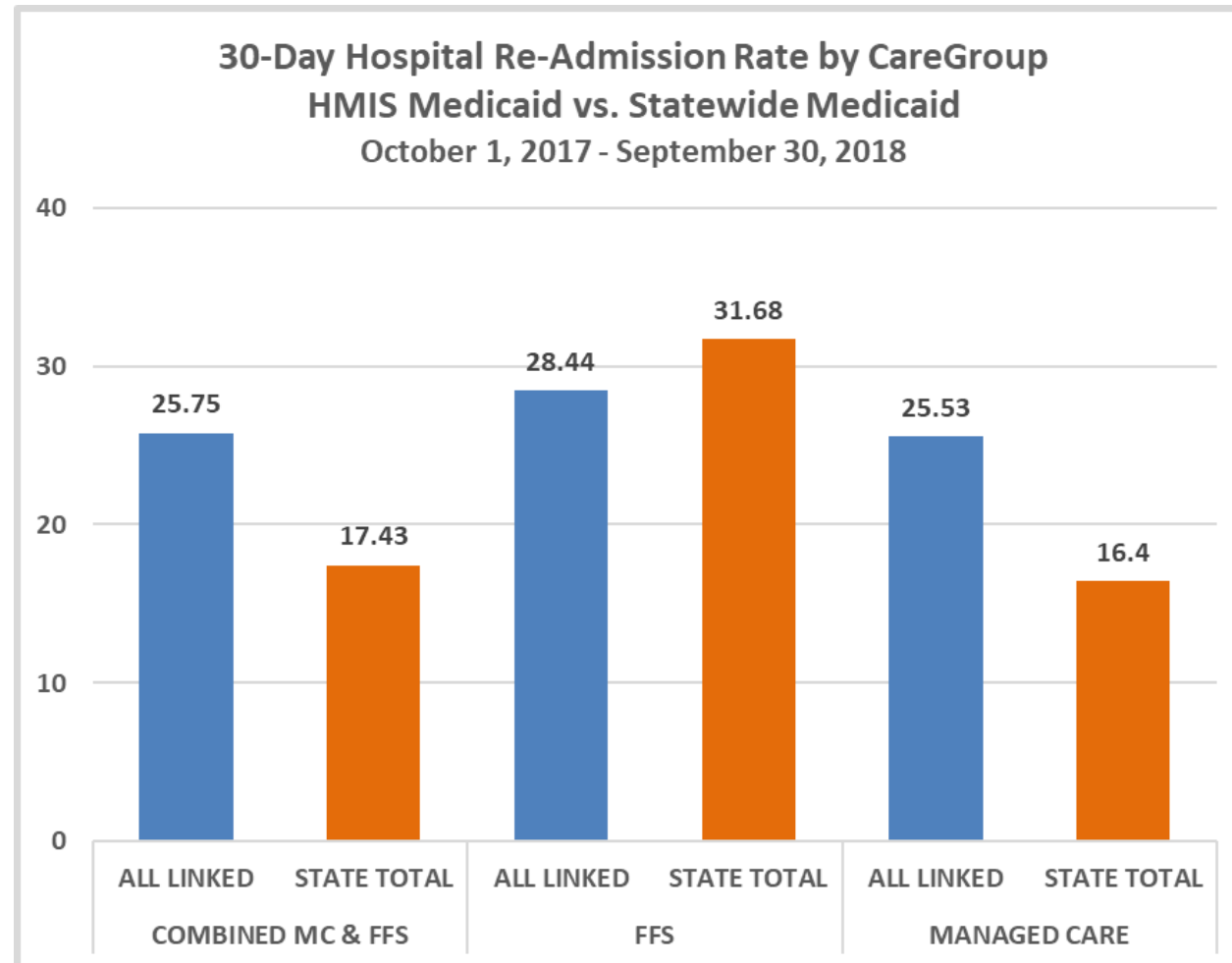
- **Measure Description:** The percentage of individuals who had at least one emergency department visit during the last 12 months.
- **Exclusions:** Medicare/Medicaid Dual Eligibles
- 1,530 individuals in the HMIS population had 7 or more emergency room visits

Emergency Department Visits
HMIS Medicaid vs. Statewide Medicaid
October 1, 2017 - September 30, 2018



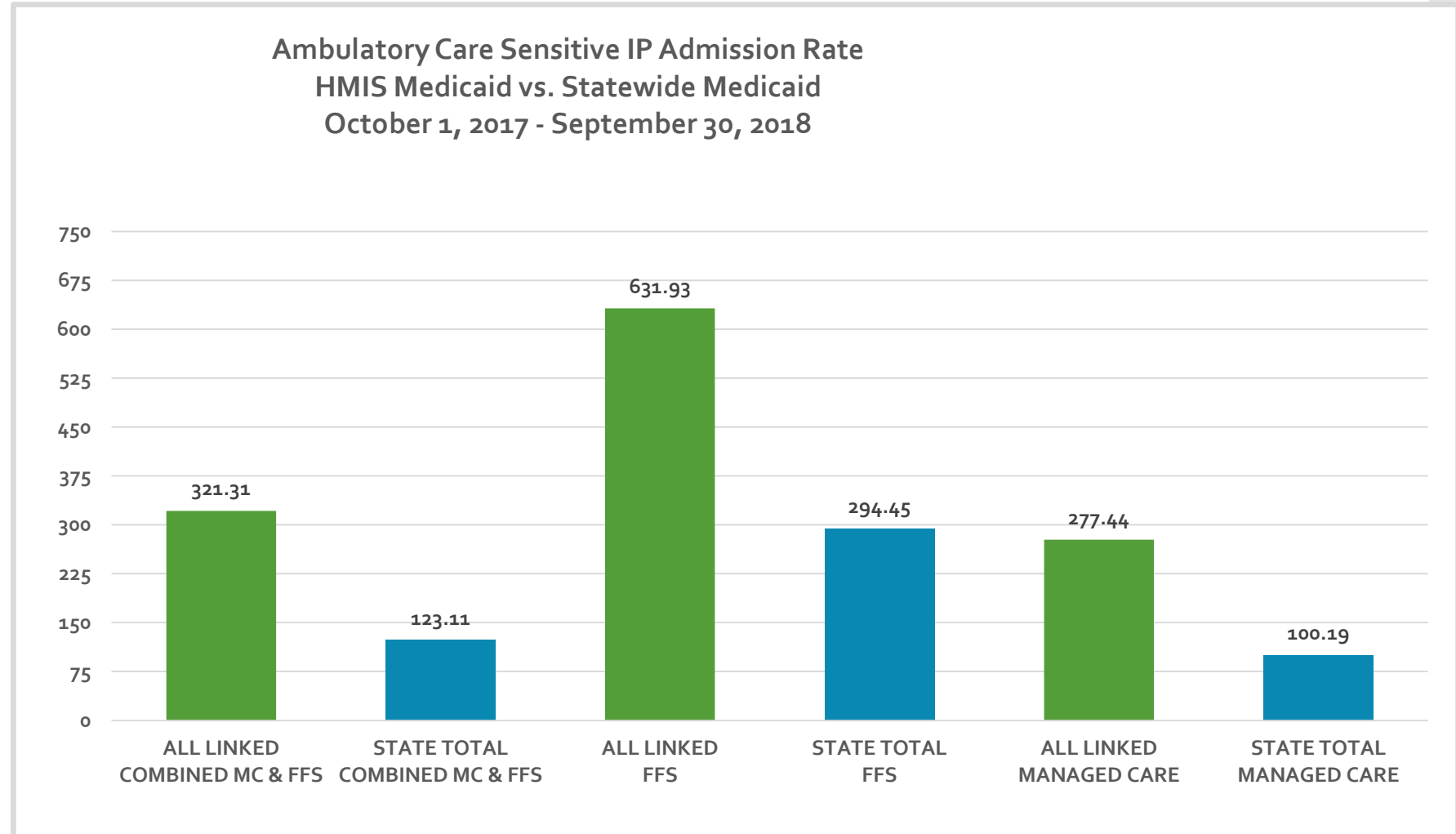
Plan All-Cause Readmission (PCR) Measure

- **Measure Description:** The number of acute inpatient stays for adults that were followed by an unplanned acute readmission within 30 days of discharge.
- **Exclusions:** Inpatient stays where the cause for discharge was death; obstetric inpatient stays, and inpatient stays where the admission and discharge dates are on the same day. Medicare/Medicaid Dual Eligibles



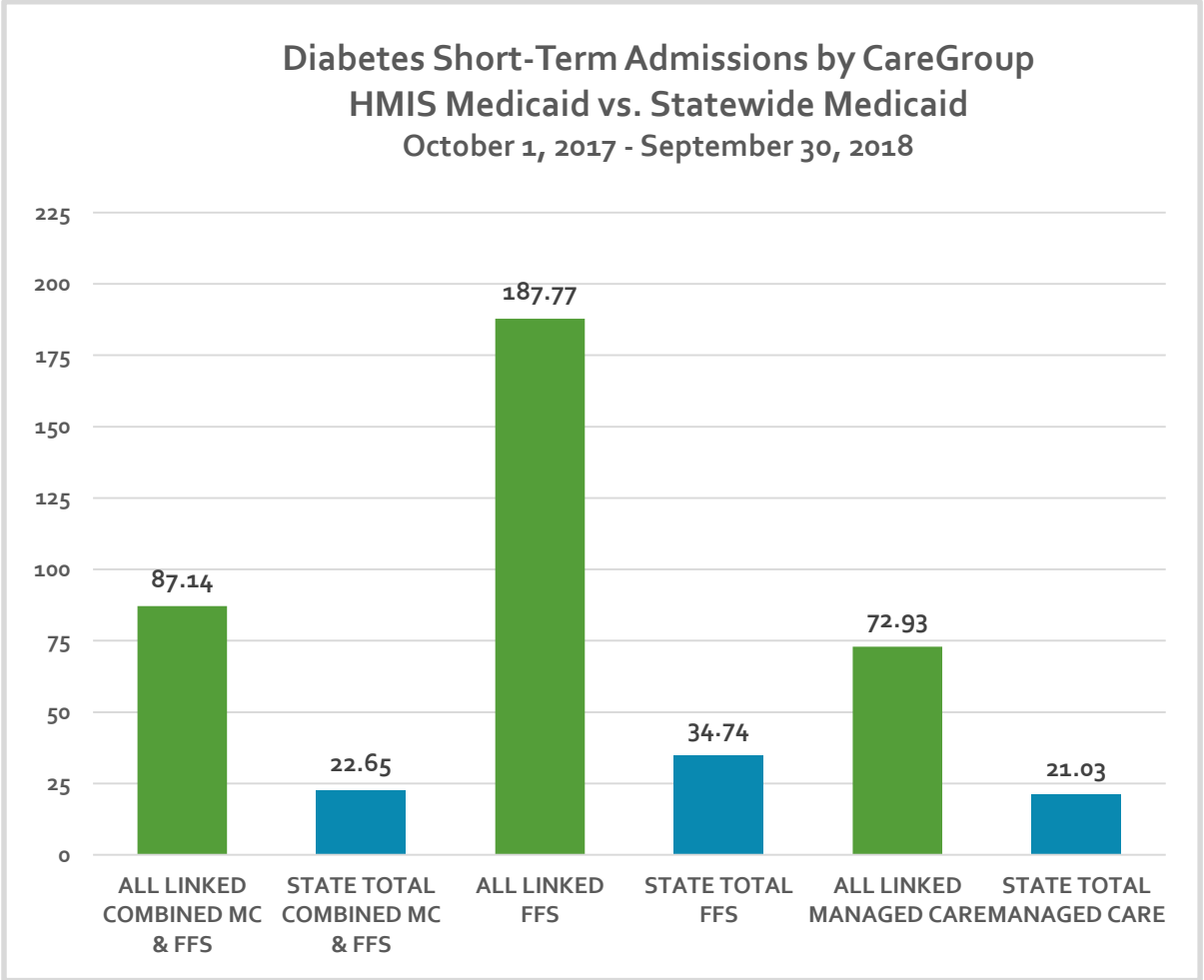
Prevention Quality Indicator (PQI) Measure

- **Measure Description:** Number of inpatient hospital admissions for ambulatory care sensitive chronic conditions per 100,000 enrollee months. This measure includes adult hospital admissions for diabetes, COPD, asthma, hypertension, and heart failure.
- **Exclusions:** Certain hospital transfers, obstetric admissions and specific co-morbidities for each chronic condition. Medicare/Medicaid Dual Eligibles



- # PQI MEASURE: Diabetes Short-term Admissions

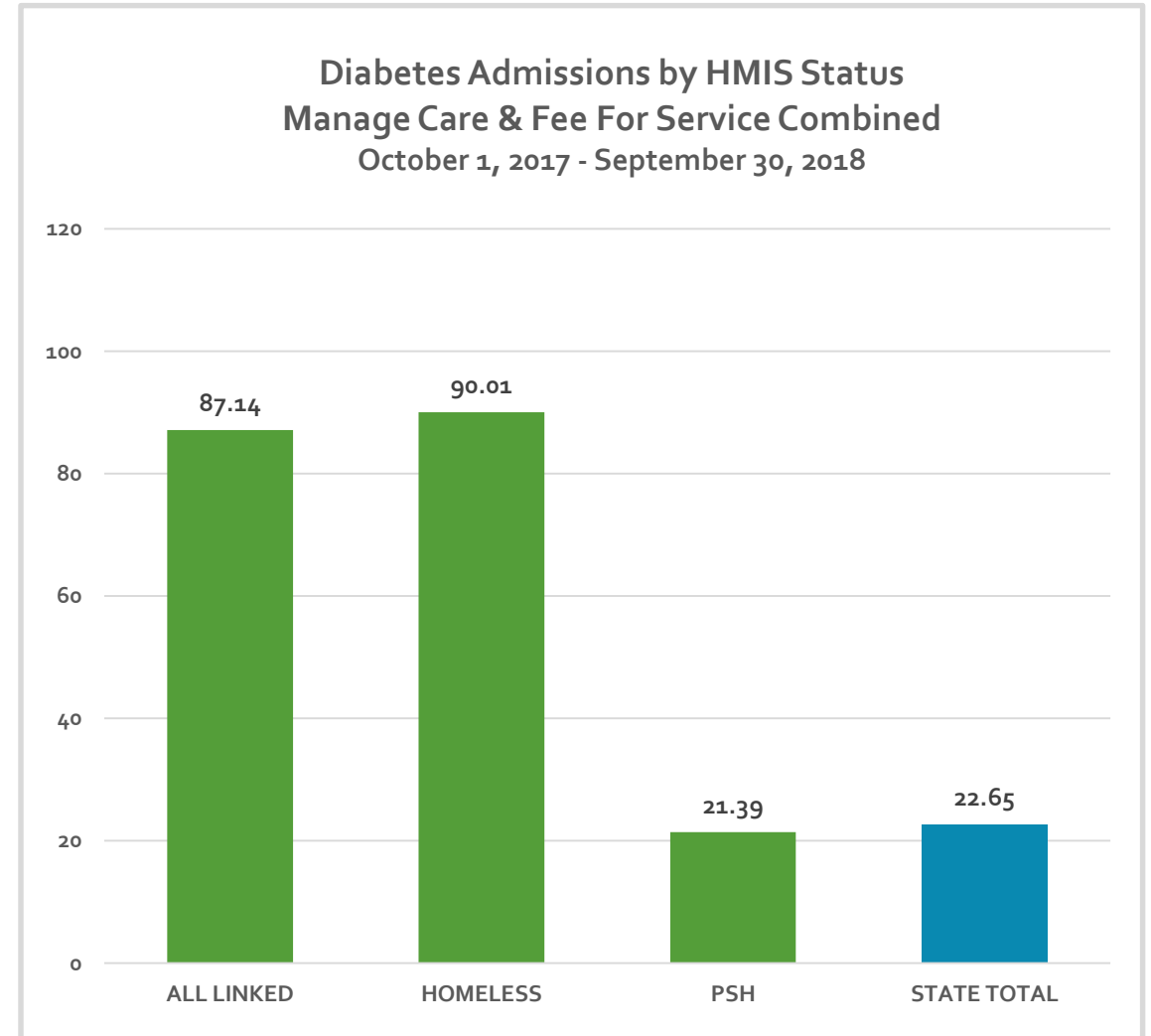
- Measure Description:** Number of inpatient hospital admissions for diabetes short-term complications (ketoacidosis, hyperosmolarity, or coma) per 100,000 enrollee months for beneficiaries age 18 and older.
- Exclusions:** Certain hospital transfers and obstetric admissions. Medicare/Medicaid Dual Eligibles



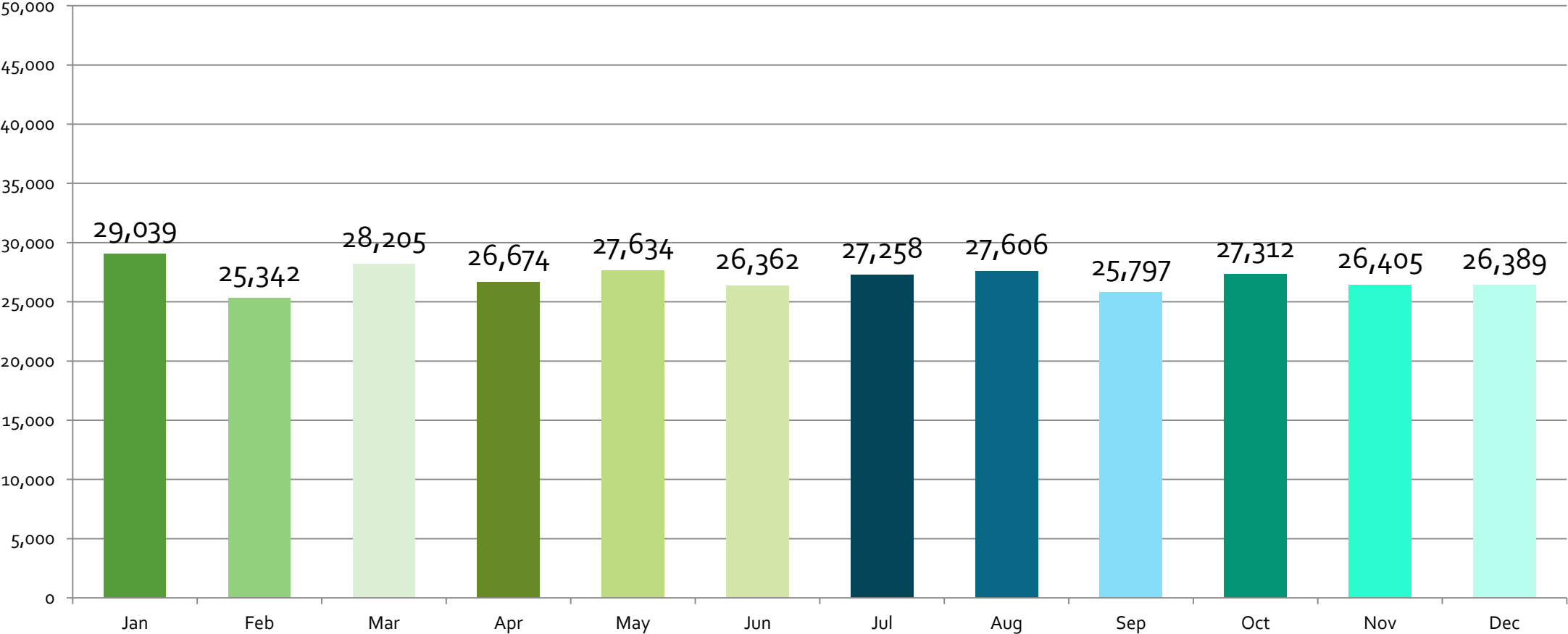
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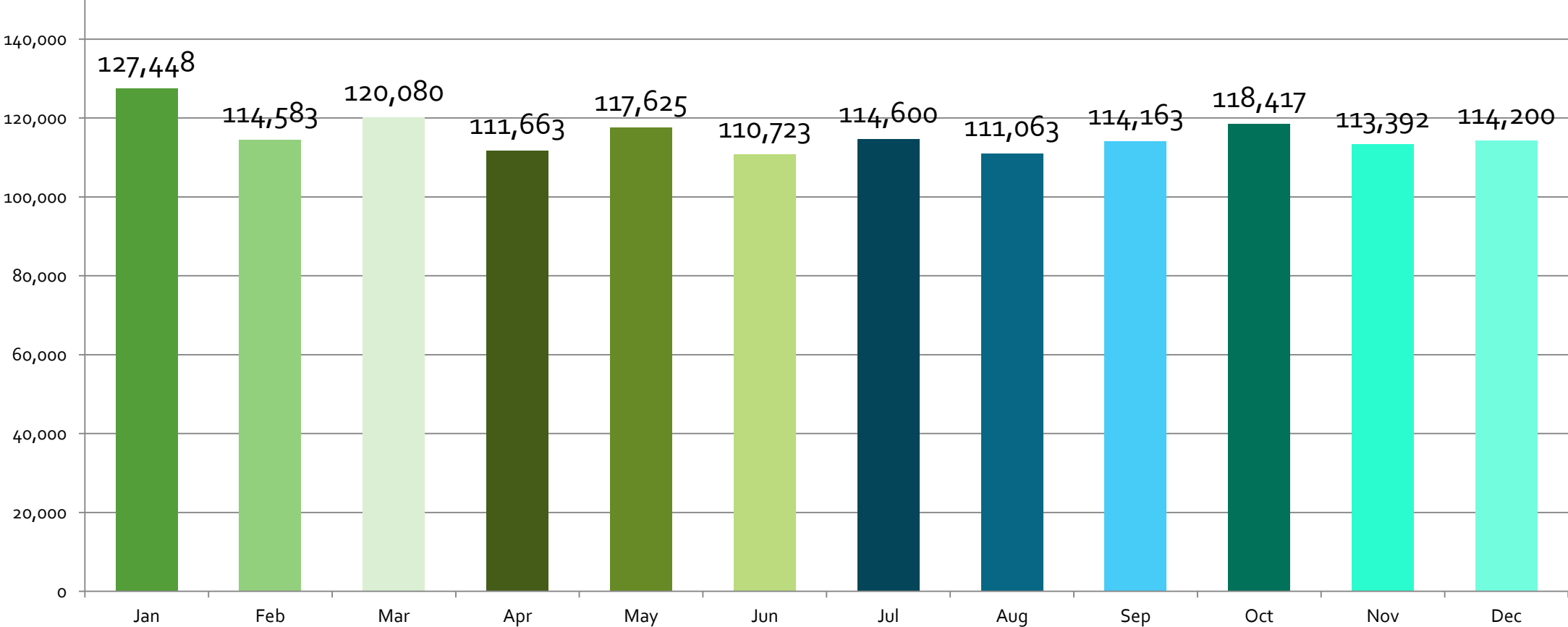
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Inpatient Utilization by Month



Emergency Department Utilization by Month



Discussion