

TEMPLATE FOR TRANSFORMATION PROJECT SUGGESTIONS

For projects to be considered for inclusion in the Medicaid Transformation Project List, please provide the information requested in the template. We are looking for summarized information – **2-3 pages maximum per project**. Please email completed templates by **January 15, 2016**, to MedicaidTransformation@hca.wa.gov with the subject **Medicaid Waiver Project**. Thank you for your interest and support.

Contact Information	<p><i>Ryan Oelrich</i> <i>Executive Director</i> <i>Priority Spokane</i> <i>509.499.0536</i> PrioritySpokane@outlook.com</p> <p><i>Which organizations were involved in developing this project suggestion?</i> Priority Spokane & it's Steering Committee Members (for complete list of Steering Members visit www.PrioritySpokane.org)</p>
Project Title	Addressing Health by Stabilizing Homeless Students and Their Families
Rationale for the Project	
<p>Priority Spokane (PS) and 150 community members selected mental health as a top issue during its last community needs assessment. After hearing from professionals working in this area and reviewing extensive data, PS chose to focus on our County's low income families with children in K-8th grade who are homeless or at-risk of being homeless. The stress and trauma these families go through has long-term effects on their health, education, and future quality of life. There has been a 59% increase in the number of homeless students in K-12 in Spokane County in only five years, or an increase of about 200 students per year. There are currently 2,896 homeless K-12 students in Spokane County with an estimated 100% receiving Medicaid. Living as a doubled up family is a high predictor of moving into an emergency shelter. Only 38% of homeless students have seen a doctor within 12 months; less than half have seen a dentist during that same time. In addition, 22.4% of homeless students attempt suicide and end up in the emergency room. There is great evidence to show that unless we intervene these students will go on to face significant problems of physical and behavioral health, violence and poverty.</p>	
Project Description	
<p><i>Which Medicaid Transformation Goalsⁱ are supported by this project/intervention? Check box(es)</i></p> <p>X Reduce avoidable use of intensive services X Improve population health, focused on prevention <input type="checkbox"/> Accelerate transition to value-based payment X Ensure Medicaid per-capita growth is below national trends</p> <p><i>Which Transformation Project Domain(s) are involved? Check box(es)</i></p> <p>X Health Systems Capacity Building X Care Delivery Redesign X Population Health Improvement – prevention activities</p> <p><i>Describe:</i></p> <ul style="list-style-type: none"> • <i>Region(s) and sub-population(s) impacted by the project. Include a description of the target population (e.g.,</i> 	

persons discharged from local jail facilities with serious mental illness and or substance use disorders).

- *Relationship to Washington’s Medicaid Transformation goals.*
- *Project goals, interventions and outcomes expected during the waiver period, including relationship to improving health equity /reducing health disparities.*
- *Links to complementary transformation initiatives - those funded through other local, state or federal authorities (such as the health home program and Early Adopter/Behavioral Health Organization regional purchasing) and/or Medicaid Transformation initiatives # 2 and 3.*
- *Potential partners, systems, and organizations (e.g., health and social service providers, ACH participants) needed to be engaged to achieve the results of the proposed project.*

Priority Spokane seeks assistance to fund strategies that will provide strategic case management to stabilize this population and assist them in accessing support services. This population is identified as homeless students and their families in K-8th. Research conducted on our behalf by Eastern Washington University (EWU) on homeless prevention and stabilization for these students and their families reports cost savings of \$2 for every \$1 invested.

First, PS aims to prevent homelessness by 1. Identifying homeless students, doubled up families, and those teetering on the brink of homelessness. EWU researchers have identified predictive factors that will assist us in finding the most at-risk families. Data sharing between the schools and community based organizations (CBOs) will be developed. Critically, in partnership with school districts, these CBOs will connect students and their families to resources, such as rental assistance, tenant and landlord mediation, legal support, health insurance, transportation to a healthcare or counseling appointment, mentoring, tutoring, and other identified services. 2. We also envision connecting to current mental health services in the schools. 3. Finally, a modest pool of dollars will be created to help families get over a rough spot, averaging \$1,000 per family, when needed. Partners will include Educational Service District 101, Spokane Housing Authority, Priority Spokane’s 25 Steering Committee Members (see complete list at www.PrioritySpokane.org), and Better Health Together.

Links to Similar Transformation Initiatives:

BHT has community health workers that navigate between the chronically homeless and the housing and social services.

Core Investment Components
<p>Priority Spokane will work with partners to improve the health of homeless students and their families in Spokane County. We will:</p> <ul style="list-style-type: none"> • Identify gatekeepers (HEART liaison, school counselor, teachers, peers) to identify homeless students • Provide a high-need school(s) with a full time community health worker to support homeless families (\$65,000/community health worker) One CHW will have a case load of approximately 50 families. • Provide a targeted flexible funding pool for community health workers to utilize in the support of homeless families (\$10,000/Community Health Worker) • Identify students/families at-risk or doubled up • Stabilize families by connecting with partner agencies including wrap around services, such as mental and medical care, housing, employment agencies • Promote system changes – school system working with other support systems • Focus on prevention, realizing some strategies must stabilize those who are already in bad situations <p>Implementation is expected to take 2-3 months with a total cost per case worker of approximately \$75,000. Our research estimates a savings of \$2 for every \$1 spent on prevention. Additional savings are also expected in school transportation costs by stabilizing homeless families. Spokane Public Schools currently spend over \$800,000 transporting these students.</p>
Project Metrics
<p>Potential Performance Measures & Indicators Improved mental health and substance use (students reporting 2 or more of 5- depression, suicide thoughts, aloneness, alcohol use, or illegal drug use behaviors)</p> <ol style="list-style-type: none"> 1. Saw a doctor within last 12 months for a checkup 2. Saw a dentist within last 12 months for a checkup 3. Improved home environment (students experiencing 2 or more of 5- food insecurity, homelessness, gang involvement, physical fight, and/or physical abuse by an adult) 4. Maintained stable housing for 2 school years

¹Transformation goals as stated in Washington’s Medicaid Transformation waiver, <http://www.hca.wa.gov/hw/Documents/waiverappl.pdf>:

- Reduce avoidable use of intensive services and settings such as acute care hospitals, nursing facilities, psychiatric hospitals, traditional LTSS and jails.
- Improve population health, with a focus on prevention and management of diabetes, cardiovascular disease, pediatric obesity, smoking, mental illness, substance use disorders and oral health; that is coordinated and whole-person centered.
- Accelerate the transition to value-based payment, while ensuring that access to specialty and community services outside the Indian Health system are maintained for Washington’s tribal members.
- Ensure that Medicaid per-capita cost growth is two percentage points below national trends.