

**MEDICAID TRANSFORMATION WAIVER PROJECT:
SUPPORTING UNSTABLY HOUSED YOUTH**

Contact Information	<p>Leslie R. Walker, MD, Chief, Division of Adolescent Medicine, Seattle Children’s Hospital and the University of Washington Department of Pediatrics leslie.walker@seattlechildrens.org, 206-987-4414</p> <p><i>Which organizations were involved in developing this project suggestion?</i> Seattle Children’s Hospital; University of Washington Department of Pediatrics; Atlantic Street Center; Teen Feed; and Seattle Goodwill.</p>
Project Title	Supporting Unstably Housed Youth: The South Seattle Project
Rationale for the Project	
<p>Problem Statement: On any given night, between 700-1,000 King County teenagers and young adults are sleeping on the street or “couch-surfing” because of physical, sexual, or substance abuse, or other crises at home. In King County, south Seattle youth represent a large percentage of the people experiencing homeless and housing instability. A high percentage of them are younger than the average homeless adolescent, are immigrants, and are youth of color. Youth who are street-involved and unstably housed have less access to healthcare than do their peers who live at home. Without intervention, unstably-housed youth experience sexual victimization; prostitution; physical abuse; physical illness; suicide; substance abuse; gang involvement; and chronic homelessness that often result in the need for intensive medical services or in incarceration.</p> <p>Supporting Research:</p> <ul style="list-style-type: none"> • The <i>Comprehensive Plan to Reduce Youth and Young Adult Homelessness in King County by 2020</i> reports that 67-86% of homeless youth identify one or more chronic health conditions and 32-45% report mental health concerns. • Unstably housed youth and young adults are at very high risk for a variety of health-related conditions such as unplanned pregnancy, HIV acquisition, sexually transmitted infections, substance dependence, untreated behavioral health conditions, and progression of treatable chronic illness. They are also at higher risk for not being able to adhere to needed medical treatments, inappropriate use of emergency room services, delayed immunizations, trauma, and accidents. (Rew, 2008). • In a 2005 Oregon study, unstably housed youth stated they are more likely to utilize comprehensive supports that are accessible without having to travel long distances. The study also indicated that after food and shelter, youth reported needing services such as healthcare and case management. (Cahn, 2009) <p>Relationship to Federal Objectives: The South Seattle Project will reduce avoidable uses of intensive services, such as hospital emergency department visits, by providing healthcare that prevents the onset of health problems and reduces the likelihood that chronic conditions will become acute. The project will improve population health by taking a comprehensive approach to meeting the needs of homeless youth. Many homeless youth are covered by or eligible for Medicaid and this project will be of particular benefit to them.</p> <p>Though this project is specific to south Seattle, it can be replicated in other communities. While specific partner organizations will be different in every community, other agencies that do similar work can collaborate to provide a comprehensive array of services to help homeless teens avoid hospitalization and incarceration and develop the skills necessary to support ongoing health. While Seattle Children’s Hospital is seeking funding for this project in south Seattle, other partnerships to serve other communities are also being explored. Seattle Children’s partners with the King County Healthcare for the Homeless Network (HCHN) that helps make connections. HCHN supports this application and will be a resource for implementation.</p>	
Project Description	

Which Medicaid Transformation Goals¹ are supported by this project/intervention? Check box(es)

- X Reduce avoidable use of intensive services
- X Improve population health, focused on prevention
- Accelerate transition to value-based payment
- Ensure Medicaid per-capita growth is below national trends

Which Transformation Project Domain(s) are involved? Check box(es)

- X Health Systems Capacity Building
- Care Delivery Redesign
- X Population Health Improvement – prevention activities

Region and Sub-Population: The region served includes the neighborhoods in central and south Seattle. Within that region this project will serve any person 10 – 26 years of age who is unstably housed or homeless.

Project Goals: The South Seattle Project will provide homeless youth with comprehensive supports needed to maintain health. Through a partnership between Seattle Children’s Hospital Division of Adolescent Medicine, Atlantic Street Center, Teen Feed, and Seattle Goodwill, a “No Barriers Evening Program” will be offered two nights a week, serving people between ages 10 – 26. Services include care for medical needs and referral to nearby providers for longer-term care; support for applying for health insurance and other benefits; meal service; case management; health education on topics such as nutrition, sexual education and substance abuse prevention; teen parenting support group; online media resources to help youth stay connected; and access to hygiene services. Outreach and case management services will be provided by young adult employees and include activities to reconnect youth with their families and other suitable housing arrangements, when possible. The project will help youth develop skills to gain and maintain health insurance and obtain regular, ongoing healthcare services.

The project will be housed at the Atlantic Street Center facility in south Seattle’s Rainier Beach neighborhood, an area with high adolescent and young adult traffic because of its close proximity to three schools with high poverty rates. The center has multiple spaces that can be used for a variety of services including meals, a walk-in medical clinic, and counseling. This collaboration will be administered through the Division of Adolescent Medicine.

Partners: Seattle Children’s Division of Adolescent Medicine has provided free, confidential, walk-in medical and mental healthcare to vulnerable youth in Central Seattle since 1973. Pro bono medical services are provided by physicians and trainees in adolescent medicine. Project partners are:

- **Atlantic Street Center (ASC)** is a community-based non-profit that serves individuals at every stage of life and keeps youth engaged in their quest to build healthy and productive lives. The ASC Youth Development Program includes a drop-in teen center, teen parenting groups, support groups, mental health counseling, and case management.
- **Teen Feed** partners with the community to meet basic needs, build strong relationships, and ally with homeless youth. Teen Feed provides homeless youth with four integrated programs: a meal program; case management; street outreach; and assistance with enrollment in health insurance.
- **Seattle Goodwill** helps youth prepare for employment through workshops at community-based organizations; programs supporting high school graduation and college/job readiness; and trainings for jobs with Seattle Parks and Recreation and in the aerospace/advanced manufacturing industry.

This comprehensive, coordinated approach not only provides needed medical care to meet current health needs, it provides other services to maintain health now and in the future. Doing so reduces the need for current and future intensive medical care.

Core Investment Components

Development of Washington State Medicaid Transformation Projects List – December 2015

Partner organizations have been planning the South Seattle Project for over a year and are ready to implement it once funding is secured. The infrastructure is in place and the four organizations have already agreed to partner. The project will serve 20 to 35 adolescents and young adults each week, for about 1,800 encounters per year.

The South Seattle Project
Expenses Year 1

STAFFING	FTE	HOURLY RATE	WAGE	BENEFITS, TAXES	TOTAL
Program Coordinator	0.5	\$20	\$20,800	\$2,080	\$22,880
Youth Case Management	1.0	\$16	\$33,280	\$3,328	\$36,558
Nurse Practitioner	0.3	\$74	\$45,995	\$12,879	\$58,874
Childcare Provider	0.1	\$15	\$3,120	\$312	\$3,432
Digital Media Intern	0.25	\$15	\$7,800	\$780	\$8,580
Van Driver	0.1	\$15	\$3,120	\$312	\$3,432
				TOTAL PERSONNEL	\$133,756

OTHER EXPENSES

Technology	\$2,000
Transportation	\$4,000
Operating Expenses	\$46,998
Administration @ 10%	\$31,500
Medical Supplies, Equip.	\$150,000

TOTAL OTHER \$234,498

PROJECT TOTAL \$368,254

Project Metrics

The project will monitor several key outcome measures related to health, housing, substance abuse, violence, sexual exploitation, independent living skills, family, social responsibility, and outreach. In line with Medicaid Transformation performance metrics, health-related outcomes include:

- 100% of youth and young adults will have access to a health care provider on site
- 100% will get substance abuse prevention education messages and 100% will be offered screening and referral to the proper level of care
- 100% of those with identified health needs such as diabetes will agree upon goals to address those health needs and develop a health action plan
- 100% who access health care will be assessed and referred to specialty and dental services as needed
- 100% will receive developmentally appropriate healthy living and prevention messages
- 50% of those who are uninsured will be successfully assisted to become insured

Other non-medical outcomes will also be monitored.