Optimizing Aging

November 18, 2014
Social Circumstances and Health

- PMPM costs for Medicaid FFS were 32% higher for HUD-assisted (HA)
- Of the HA Medicare beneficiaries, 68% were dually eligible
- 55% of HA had 5+ chronic conditions
- Medicare costs 16% for HA due to higher usage
SASH at 118 Locations Statewide

SASH Panels by County

Chittenden
- Burlington Community
  - Cathedral Square Senior Living, Burlington
  - Champlain Apt/South Square, No Champlain St, Burlington
  - Decker Towers, St. Paul Street, Burlington
  - Grand Way Commons, So Burlington
  - Heinberg, Heinberg Road, Burlington
  - Holy Cross, Colchester
  - Jeri Hill, Jericho
  - Kelly's field - Hinesburg
  - McCauley Square, Mansfield Ave, Burlington
  - Meadowlily, Milton
  - Old North End Community
  - Richmond Terrace, Richmond
  - Ruggles House, Mansfield Ave, Burlington
  - Trierer, North Ave, Burlington
  - Town Meadow, Comstock, Essex Junction
  - Whitcomb Woods/Terrace, West St., Essex Jct.
  - Whitney Hill, Williston
  - Williston Community
  - Winookski Housing Authority (Courtyard)
  - Wright House, Shelburne

Addison
- Middlebury Commons
  - Shoreham/Orwell
  - Vergennes

Franklin
- Fourwinds - St. Albans
- Meadowlily, St. Albans, Swanton
- Swanton School

Orleans
- Barton/Orleans
- Newport/Derby

Essex
- Island Pond
- Passumpsic/Darling, Concord

Lamoille
- Morrisville Jeffersonville

Caledonia
- Passumpsic/Darling, Lyndonville
- St. Johnsbury Community

Washington
- Evergreen/Mad River, Waitsfield
- Montpelier
- North Barre Manor, Barre
- Northfield
- Tilden House/Jefferson Apts, Barre
- Washington/Avery/Quarry Hill, Barre

Orange
- Orange East/Groton
- Randolph

Windsor
- Huber/Maples, Springfield
- Upper Valley, Hartford
- Whitcomb Building, Springfield
- Windsor Village, Windsor

Windham
- Melrose Terrace, Brattleboro Community

Bennington
- Brookside/Community, Bennington
- Cora B Whitney, Bennington
- Deerfield Valley, Bennington
- Northshire, Manchester
- Walloomsac Apts, Bennington
U.S. is moving from a centralized to a decentralized LTSS delivery system

- The solution:
  - Target existing sites with high needs;
  - Build a strong infrastructure;
  - Use that platform to reach community dwellers.
The Tri-State Region’s Senior Housing Hubs

New Hampshire - 271

Maine - 183

Vermont - 120
Building the system’s infrastructure
SASH Keeps “Katie” in the Driver’s Seat
Behavior Drives Health

• 2020 Health Goals
  – Reduce % of Adults who smoke
  – Reduce % of adults who are obese
  – Reduce % of adults who have no physical activity
One Team Supporting One Panel of 100 Participants
Core Elements of Care Management
CMS and NCQA

• Person Centered and Directed
• Access to Options Counseling
• Actively involved PCP
• Provider Network with LTSS Expertise
• Integration between medical and LTSS
• Standardized Assessment Tool
• Individualized Care Plan
• Care Coordination and Care Management
• Interdisciplinary Team
• Care Transitions
• Technology for Shared Information
RTI Evaluation Results

• For Vermonters receiving care from a medical home, supplemented by SASH services provided by experienced, well-established panels, the growth in annual total Medicare expenditures was $1,756 - $2,197 lower than the growth in expenditures among Medicare fee-for-service beneficiaries in the two comparison groups.
“The major SASH program implementation success has been the linkages the program has created among different community organizations.”

Research Triangle International (RTI)
Percent of SASH Participants with HTN Diagnosis and Controlled BP *

<table>
<thead>
<tr>
<th>Participation Timeframe</th>
<th>Participants with HTN diagnosis and uncontrolled BP</th>
<th>Participants with HTN diagnosis and controlled BP</th>
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</thead>
<tbody>
<tr>
<td>October 2012</td>
<td>19%</td>
<td>81%</td>
</tr>
<tr>
<td>October 2013</td>
<td>38%</td>
<td>62%</td>
</tr>
<tr>
<td>August 2014</td>
<td>46%</td>
<td>54%</td>
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*National Quality Forum NQF Measure 18: Percentage of patients 18 through 85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (<140/90 mmHg) during the measurement period.*
Sheer Volume of Need Demands
A System that......

- Uses all assets
- Is replicable and scalable
- Integrates primary care, acute care and LTSS
- Is payer agnostic
THANK YOU!

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HEALTHY HOMES       CARING COMMUNITIES       POSITIVE AGING