This Way Forward

Caring for our Aging Homeless Population

Robyn I. Stone, DrPH Executive Director, Center for Applied Research, LeadingAge July 27, 2016





















Preparing for The Changing Face of Aging in America



Two- thirds of people in human history who have reached the age of 65 are alive right now!



Realities of Aging in Community

- Consistent preference for remaining at home
- Challenges of "aging in place"
 - > Physical barriers
 - Financial barriers
 - Loss of social connectedness and engagement



Homelessness Among the Elderly

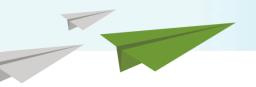
- Current homeless older population
- Increasing potential for homelessness among 65+ population
- Solution is service enriched housing options



Who Are the Older Homeless?

- 50-64 year olds—younger than typical elderly population
- History of homelessness, poverty, drug abuse, mental illness
- More comorbidities, ER and hospital use
- Lower life expectancy (avg. 64 years)





Growth in Older Homeless Population

- 2007-2010 increased from 18.9% to 22.3% of all sheltered individuals
- Average age 53
- Older adults comprise 50% of housing programs for the homeless
- % of total homeless population who are older—almost 50%
- Increase in % cognitively impaired



Potential for Increased Homelessness Among 65+

- Increase in elderly living in substandard housing
- Lack of resources to maintain current housing post-retirement
- High housing cost burden not sustainable with greater live expectancy post 65 years
- Increased risk for housing-related injuries; increased costs to Medicare and Medicaid
- Lack of safe, affordable options (particularly rental)



Solutions to Homelessness Among 54-64 year olds

- Expansion of permanent supportive housing options
- Deep rental subsidies—congregate settings or vouchers
- Significant care management
- Evidence-based wrap-around service models rooted in cognitive behavioral and family system approaches



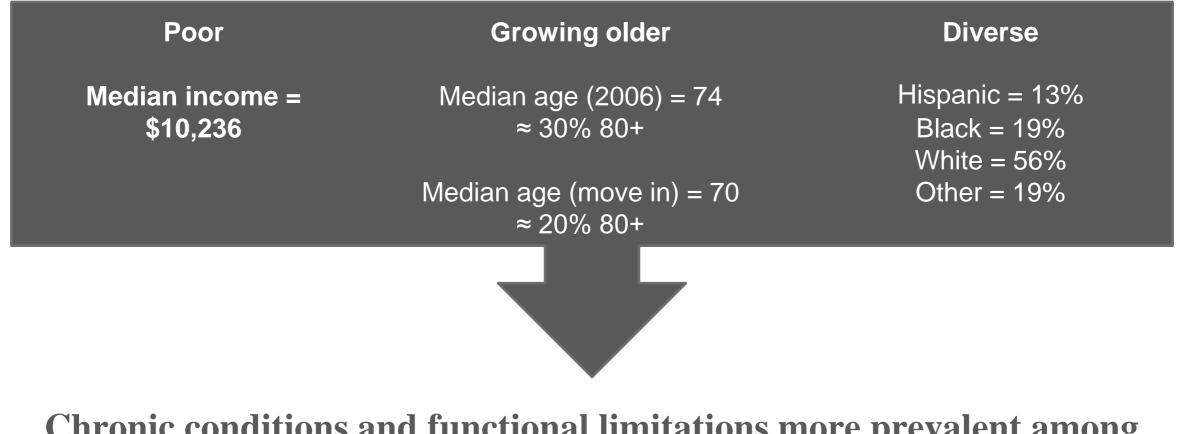
Publicly Subsidized Housing Plus Services for 65+ Population

- Currently housing over 2 million low and modest income older adults
- Typical property with limited or no service coordination
- Aging of residents requires new strategies and partnerships





Seniors in assisted housing are...



Chronic conditions and functional limitations more prevalent among advanced ages, lower incomes, minorities



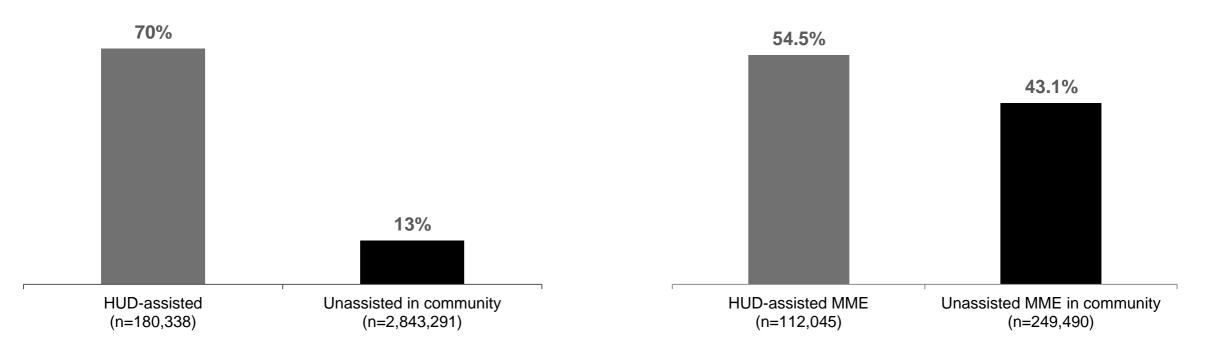
Data is for residents of Section 202 properties, 2006

"A Picture of Housing & Health"

Medicare per member per month (PMPM)	HUD Assisted Medicare Beneficiaries	Unassisted Medicare Beneficiaries	% Difference
	\$1,479	\$937	57.8%

Proportion of Medicare beneficiaries dually enrolled in Medicaid

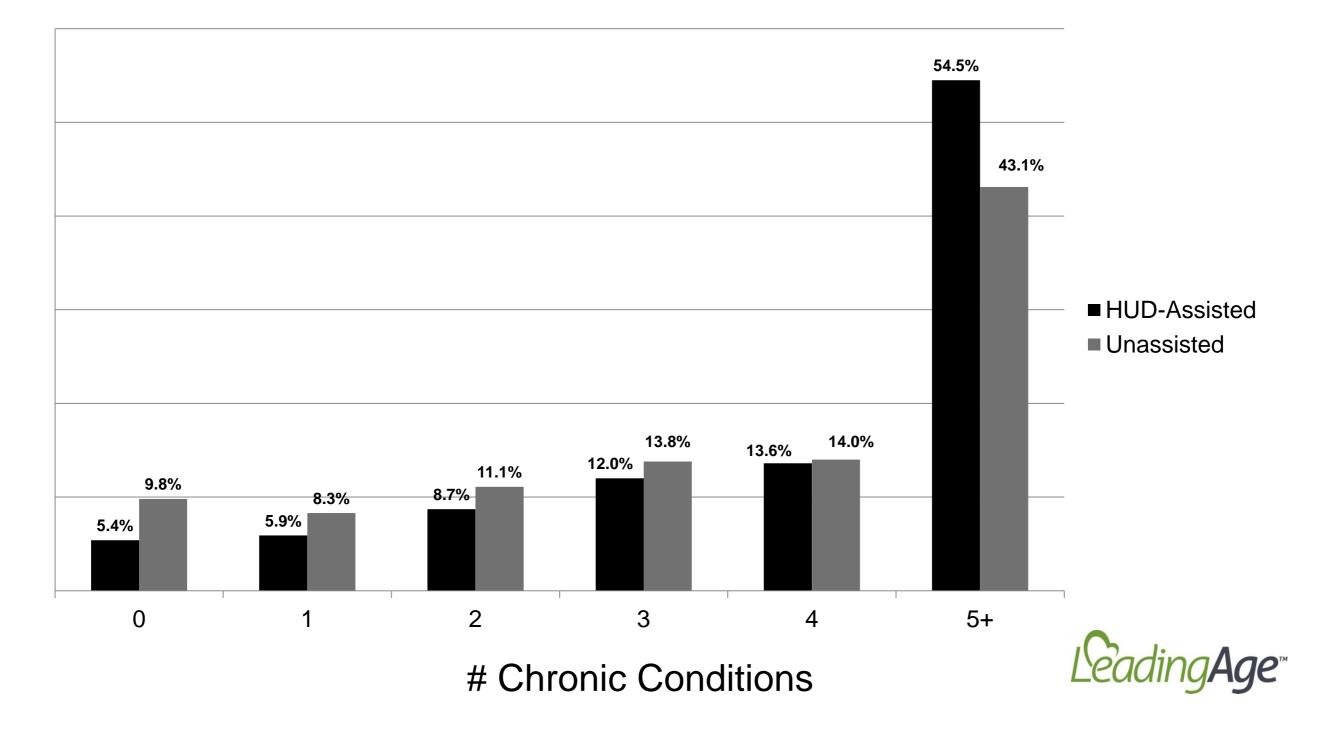
Proportion of Medicare-Medicaid enrollees (MMEs) with 5+ chronic conditions



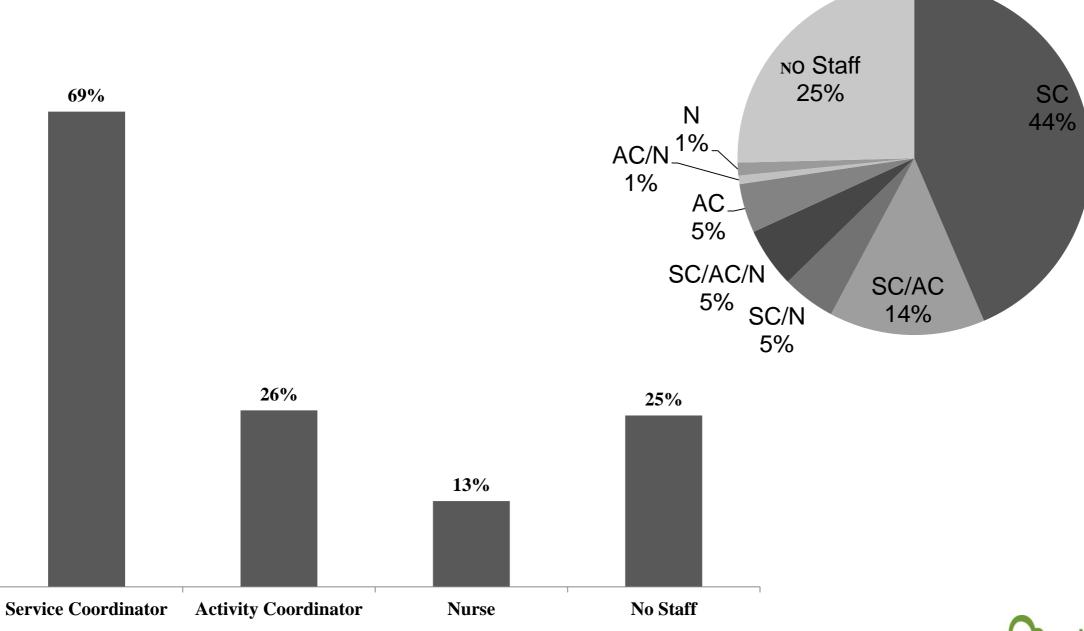
Source: A Picture of Housing & Health, found at http://aspe.hhs.gov/daltcp/reports/2014/HUDpic.pdf

Leading Age"

FFS MMEs 65+ with Chronic Conditions, 2008



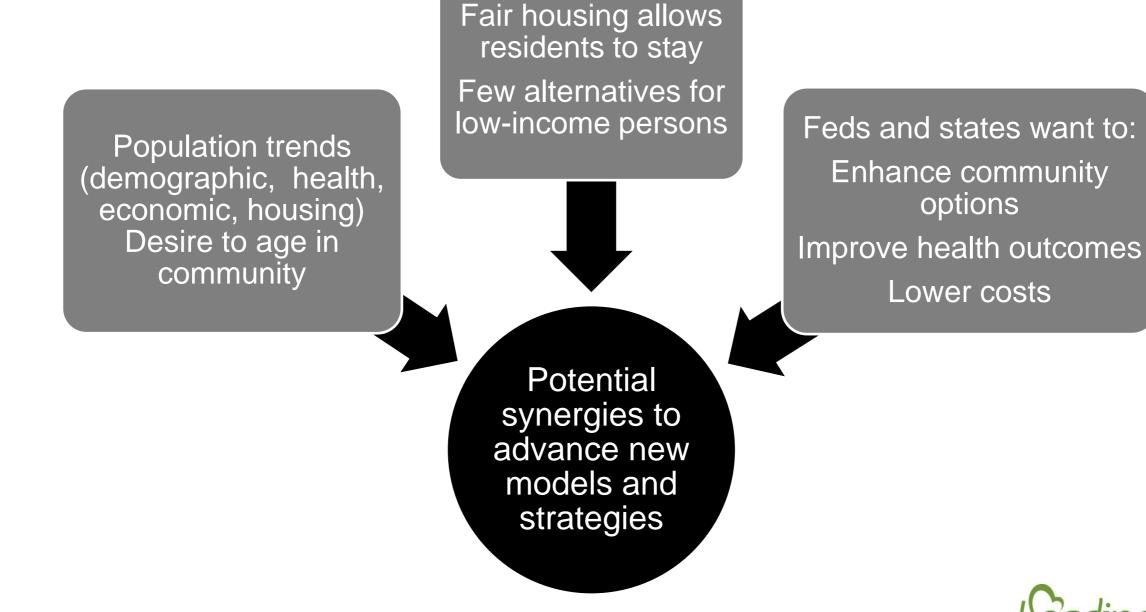
Services Staff in Affordable Senior Housing, 2008







Bringing It All Together





Housing and Healthcare Partnerships Toolkit

- Guide: "Housing & Health Care: Partners in Healthy Aging"
 - > Understanding health care reform and population health management
 - > Benefits of a housing and health partnership
 - > Health care challenges that housing can help address
 - > How housing and health entities can collaborate
 - > Identifying and cultivating a partner
 - > Structuring the partnership

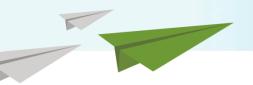


Housing and Healthcare Partnerships Toolkit

- Return on Investment Calculator
- Videos
 - > How housing can help healthcare
 - > Healthcare providers on the value of housing
 - > Why housing should be interested
- Other Resource materials

www.LeadingAge.org/housinghealth





Limits of Current Affordable Options

Extremely limited stock – HUD cutting programs

Few resources for services

Huge waiting lists

ACA chaos difficult to navigate



New \$15 m HUD Senior Housing Plus Services Demonstration

- RCT—40 treatment and 40 control sites
- Site selection and program starts in November
- Requires service coordinator/wellness nurse team partnering with local health care providers
- Standardized assessment, data collection and reporting
- Substantial TA over 4 years and national evaluation





"The more sand has escaped from the hourglass of our life, the clearer we should see through it."

