

## **Testimony to Senate Appropriations – April 7, 2015**

### **Nancy Rockett Eldridge, CEO, Cathedral Square Corporation**

Thank you for the opportunity to testify. I appreciate the very difficult budget situation our state faces and the hard choices you must make. I would like to comment on the Governor's recommended budget supporting the Vermont Housing & Conservation Board and the Blueprint for Health and its SASH – Support And Services at Home initiative.

#### **Vermont Housing & Conversation Board**

Cathedral Square owns or manages twenty-one affordable housing communities made possible in part with VHCB funding. This includes assisted living for Medicaid beneficiaries that may otherwise be in a nursing home at twice the cost to Medicaid. It includes South Burlington Community Housing, a collaboration with the State of Vermont and the VNA of Chittenden and Grand Isle Counties, providing housing to young adults that require at least 4 hours per day of personal care. These Vermonters would be in a nursing home without this independent housing option.

Recently CSC completed a renovation of Richmond Terrace utilizing VHCB funds. The energy improvements included solar panels and other energy efficiency upgrades that are expected to reduce utility costs and consumption of energy by 17%. In this way VHCB funding is reducing the carbon footprint – AND providing affordable housing to those that might otherwise be in a residential setting much more costly to the state.

Our last two affordable housing communities were Thayer House in Burlington and Wright House in Shelburne. Both are intergenerational neighborhoods with specific attention to mitigating the impact of storm water run-off on our lakes and waterways. At Thayer we built a Rain Garden, where the old DMV parking lot used to exist. At Wright House we included a green roof, absorbing some of the rain water, and a rain collection tank in the garage – saving rain for use to water resident gardens.

VHCB has leveraged millions of dollars in federal funds and tax credits. Our most recent project cost \$9.3M where VHCB funding leveraged \$6.5M in equity through the 9% tax credits plus a USDA Rural Development capital grant with rent subsidies.

The Governor has called for level funding of VHCB at \$12.15 M in General Fund and \$2.8M in capital funds for each of the next two years. This investment reduces institutional costs that Medicaid would otherwise cover at twice the cost, it contributes to Vermont's environmental protections, and it leverages millions of federal funds for the benefit of Vermonters.

#### **Blueprint for Health and Support And Services at Home (SASH)**

The Governor has recommended the first increase in Blueprint funding for the first time since its inception. The additional funds would support medical homes and Community Health Teams. In addition, the Governor has recommended level funding at \$1,026,155 to support SASH. SASH is an extender to the Blueprint for Health. SASH is embedded in affordable housing across the state – in

housing owned by 21 public housing authorities or nonprofit housing providers such as RuralEdge in Caledonia and Orleans Counties, Shires Housing and the Bennington Housing Authority, DownStreets and the Montpelier and Barre Housing Authorities, Cathedral Square working with Champlain Housing Trust and the Burlington and Winooski Housing Authorities, Lamoille Housing Partnership, and in Windsor County the Brattleboro Housing Authority working with the Windham and Windsor Housing Trust. SASH is a team model of care that draws on the expertise of home health, area agencies on aging, mental health agencies, hospitals and other providers to support high need individuals with a very efficient and flexible model of care.

SASH will bring \$3.78 Million in new federal Medicare funds to Vermont this year. These do not require a state match. These are funds that provide care management and wellness nurse support to the highest need individuals in our state. According to a national study conducted by the Lewin Group in 2014, residents of HUD assisted housing are more likely to have 5 or more chronic conditions and therefore are more likely to incur more costs in Medicaid and Medicare.

SASH was evaluated by the federal Agency of Health and Human Services and the Department of Housing and Urban Development. The rigorous study concluded that SASH is resulting in lower overall Medicare spending and in post-acute Medicare spending. By the second year of program participation, on average participants were spending approximately \$1,800 - \$2,200 less than control groups in New York and Vermont. This is important for the three Medicare Accountable Care Organizations in this state that must achieve savings.

As you can see from the charts below, SASH is also having positive impacts on increased access to care and improved health. This data comes from the state's Central Clinical Registry where all SASH data is entered and aggregated.

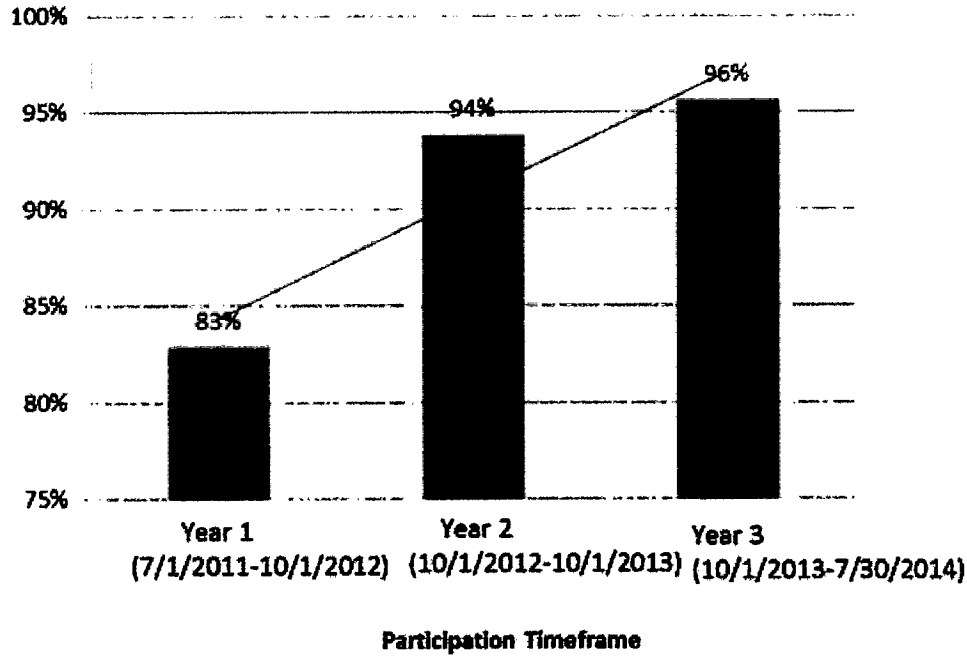
We are doing a lot that is right in Vermont. Thank you for considering level funding of VHCB and SASH, programs that are having a real impact on Vermonters.

Thank you very much.

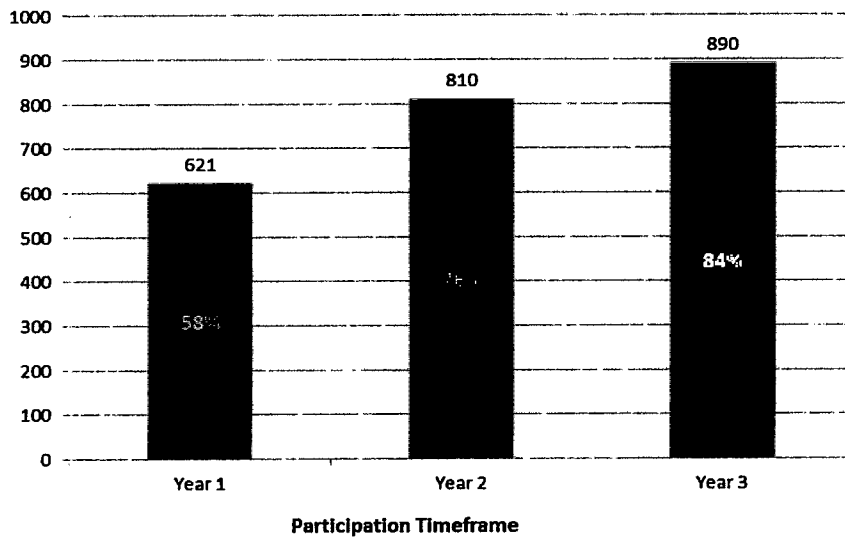
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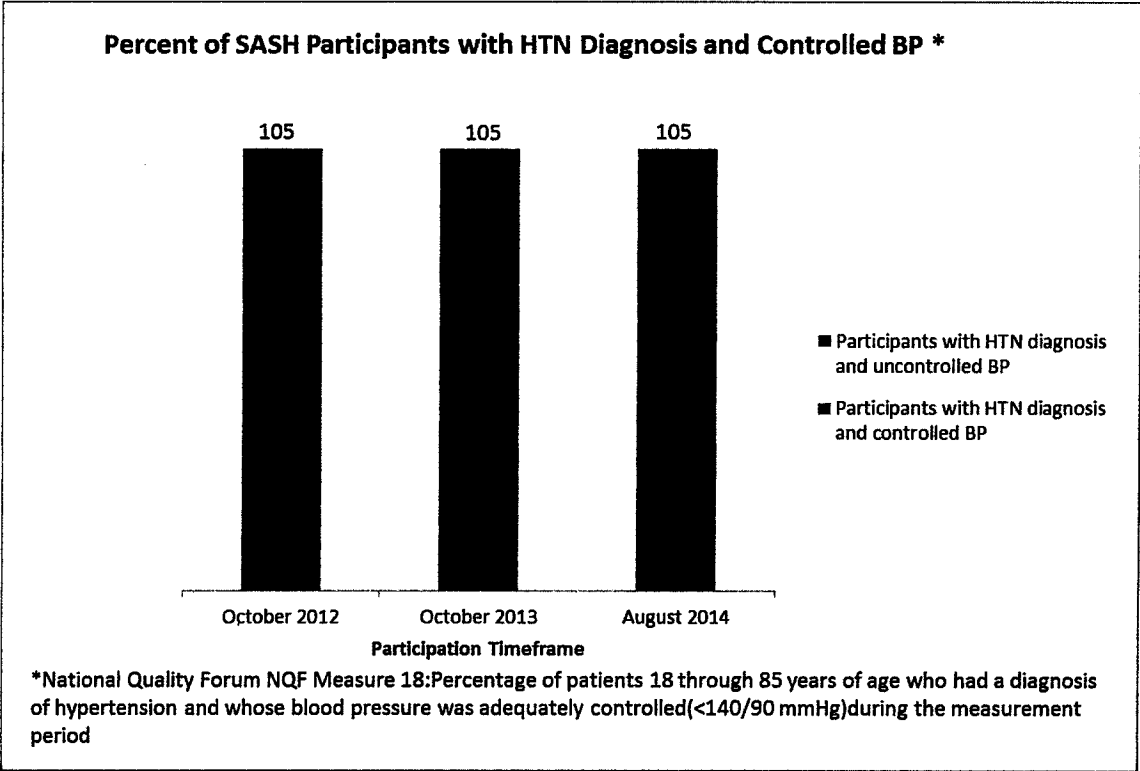
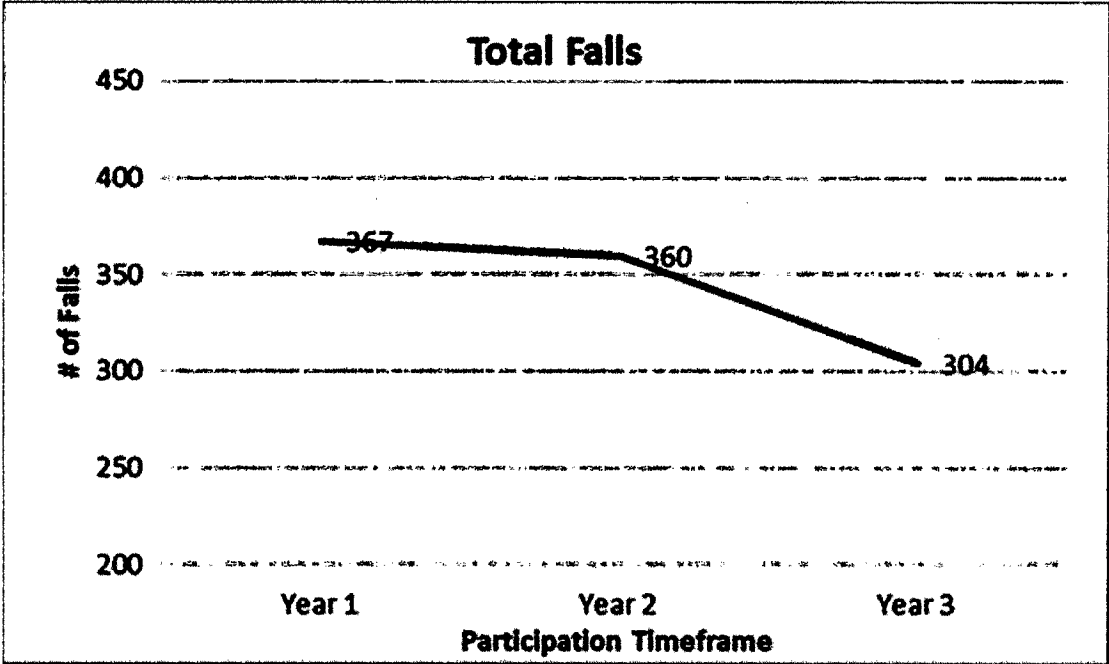
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### Number of SASH Participants w/Primary Care Provider



### Number of SASH Participants with Reported Flu Vaccinations





#### **A Statewide Training Network**

Cathedral Square Corporation (CSC) in conjunction with the Vermont Blueprint for Health has provided specialty training in evidence-based self-management programs to enable SASH staff to become qualified leaders in the following areas: the Stanford model of Chronic Disease Self-Management (delivered in Vermont as "Healthy Living Workshops"); both individual and group Tobacco Cessation Counseling; Tai Chi for Arthritis certified group leaders; Wellness Recovery Action Planning (WRAP) and Motivational Interviewing techniques.

#### **Scalability, Replicability and Sustainability**

SASH was designed to be scalable across rural and urban areas, and to be replicable in any state. By the end of the three year Medicare demonstration SASH will be replicated at over 188 housing sites statewide. In July 2018 SASH received approval from OMB and CMS to expand to 5,400 participants. It is a replicable model for any state because it relies on federally funded housing, Medicare and Medicaid.

#### **Funding**

SASH is funded under the CMS Medicare Multi-Payer Advanced Primary Care Practices demonstration at \$700 per person per year. Additionally, SASH has received annual grants from the Vermont Department of Disabilities, Aging and Independent Living (Medicaid and General Fund), the Department of Vermont Health Access (Health Information Technology grant), the Vermont Health Foundation/Fletcher Allen Health Care and contributions from Cathedral Square. Several foundations have supported SASH including the MacArthur Foundation, Enterprise Community Partners, Vermont Housing and Conservation Board, Peoples United Bank Foundation, Champlain Investment Partners, Housing Assistance Council, United Way of Chittenden County, Vermont Community Foundation and UVM Center on Aging. The Vermont Legislature funded the design of SASH over a two year period.

#### **New Jobs**

SASH has created 77 (FTE) new jobs in Vermont over the three year demonstration period. These positions will help extend the resources of physicians and nurses, and the benefits of hospital visits long after the patient has returned home.

#### **About Cathedral Square Corporation**

Cathedral Square Corporation is a statewide nonprofit organization under contract with the Department of Vermont Health Access (DVHA) to administer SASH statewide as a part of the Blueprint for Health. CSC operates 24 affordable communities including a Medicaid funded assisted living residence, shared housing, supportive housing for younger adults with mental health and mobility challenges, and a multi-generational campus for teenage parents, elders and college students with children.

#### **For more information contact**

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Cathedral Square Corporation is an Equal Opportunity Employer and Housing Provider.



**SASH**  
SUPPORT & SERVICES  
— at HOME —  
a caring partnership

A partnership of housing, health care and social services working together to keep Vermonters healthy and at home longer.





### Housing as a Platform

SASH brings care management and preventive services right to where those with the highest needs live: non-profit housing and homes in our non-profit jurisdiction. Because SASH is a population based system, we can offer a service and support system to individuals regardless of payer.

SASH has expanded from one pilot site in 2010 to 148 sites across Vermont, including most local public housing authorities and non-profit housing organizations.

By utilizing the existing infrastructure of subsidized housing, we reach the health care system's target population; the poorest and frailest. We have a ready-made network of mission driven staff who are skilled at collecting data.

### Care Management

SASH is built on the premise that three elements are essential to achieving better health, better care and lower costs:

- Transitional Planning
- Chronic Care Self-Management
- Care Coordination

### SASH Supportive and Services

After an individual decides to participate in SASH, we conduct a complete functional assessment, cognitive screen, depression scale, nutritional assessment, and falls assessment.

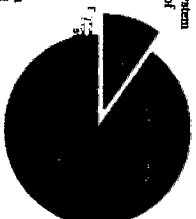
SASH provides daily check-ins, medication management, communication with family and transportation assistance. SASH is a safety net for the healthy and a support team for those in crisis.

### Electronic Health Information

SASH Wellness Nurses enter health assessment data and program notes directly into the state's Central Clinical Registry. This information includes medications, allergies, vital signs, validated screens on various daily functions as well as the goals of each participant. With consent, individual data, as well as aggregated population data tracking, is exchanged between physicians, the Blueprint's Community Health Teams, SASH Team members and people vital to the success of each person's health outcomes.

### The Determinants of Health

80% of the determinants of health are shaped at home while the health care system represents only 10% of the contributors to premature death.



Behaviors, social circumstances, environmental exposure and how individuals deal with a genetic predisposition to health issues are all determinants that occur at home.

### Formal Affiliations

Over 65 organizations have entered into SASH Memorandum of Understanding (MOU) including:

- Visiting Nurse Associations
- Area Agencies on Aging
- Community mental health agencies
- Hospitals
- Public Housing Authorities
- Nonprofit housing providers
- Foodbanks
- Medical schools and other health education programs

Each MOU covers a specific geographic region and ensures continuity of staffing, coordination of services, timely communication, non-duplication and efficient use of all existing assets.

### SASH and Public Health

The Vermont Department of Health has contracted with SASH to implement the Centers for Disease Control's Community Transformation Grant. The CDC recognizes the important role housing can play in increasing smoke free environments and reducing high blood pressure and high cholesterol thru home based exercise and nutrition programs.

Subsidized housing is home to an often difficult population to reach: the uninsured, children in need of vaccinations, and pre-pregnant teens. Housing is a ready-made network to roll out public health initiatives.

### A Statewide Network

SASH is managed by Colchester Square Corporation state-wide; however, it is implemented by six Designated Regional Housing Organizations (DRHOs) that collectively cover the state. In addition to Colchrdal Square the DRHOs include two Public Housing Authorities (PHAs) and three Community Housing Development Organizations (CHDOs).

