



Testimony to House Committee on Appropriations – February 28, 2017

Molly Dugan, Director of SASH, Cathedral Square Corporation

Thank you for the opportunity to testify. I appreciate the difficult budget situation our state again faces and the hard choices you must make. I would like to comment on the Governor's recommended budget supporting Support And Services at Home (SASH) initiative, of which Cathedral Square serves as the statewide administrator.

Support And Services at Home (SASH)

The Governor has recommended level funding at \$974,023 to support SASH. This funding is essential to the continuation of this proven and impactful model. SASH is a care coordination program that utilizes the home as the ideal setting for the effective delivery of health and wellness supports for older adults and adults with disabilities. The SASH program, serving over 5,000 Vermonters, is operated out of affordable housing sites across the state – in housing owned by 22 nonprofit housing or public housing authority providers such as RuralEdge in Caledonia and Orleans Counties, Shires Housing and the Bennington Housing Authority, DownStreet 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 Partnerships works with the Windham and Windsor Housing Trust. SASH draws on the expertise of local home health, area agencies on aging, mental health agencies, hospitals and primary care providers to support high need individuals with a very efficient and flexible model of care.

SASH will bring \$3.7 Million in new federal Medicare funds to Vermont this year. These funds provide for wellness nurse and care coordinator positions in housing to support to the highest need individuals in our state- living in affordable housing buildings as well as single family homes in surrounding neighborhoods. SASH saves health care spending by its laser focus on keeping participants in our program well and healthy and being able to respond quickly and in the home if an unexpected health issue happens. We offer chronic disease self-management programs, Tai Chi for arthritis, diabetes prevention classes, walking programs and many, many other offerings at over 140 housing sites in communities all over the state.

SASH has been rigorously evaluated by the federal Agency of Health and Human Services (HHS) and the Department of Housing and Urban Development (HUD). The multi-year evaluation reports have found that SASH is resulting in lower overall Medicare spending and in post-acute Medicare spending. On average, participants in early panels are spending approximately \$1,500 per person per year less than control groups in New York and Vermont.

As you can see in the handout I provided, besides just saving money, SASH is having positive impacts on increased access to care and improved health. This is true results based accountability.



Vermont Housing & Conversation Board

While today's hearing focuses on AHS budget issues, I want to take a moment to talk about the importance of VHCB funding for our work. Cathedral Square owns or manages thirty 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.

Our newest affordable housing community benefiting from VHCB investment is Elm Place in Milton. This 30-unit senior community in Milton will welcome its first residents later next month and will provide much needed affordable housing with SASH services to low income senior residents in the Milton area. This development is a smart growth site in the center of town, with access to public transportation and within walking distance to services including the UVM Medical Center next door. This building will be designed to Passive House standards, which is a super insulated building envelope which greatly reduces energy usage and costs. This will be the first Passive House multi-family building in Vermont.

Our aging demographic only underscores the need for more affordable housing communities like Elm Place in Milton. **We strongly support the Governor's \$35 million housing revenue bond proposal as well as the \$1 million increase to VHCB to help fund it.** This kind of investment creates housing that is affordable, energy efficient and accessible, and it leverages millions of other public and private funds for the benefit of Vermonters.

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

Thank you very much.

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SASH Panel Overview



SASH Partners

RuralEdge

Northeast Vermont AAA

Barton Clinic

Island Pond Health Care

North Country Hospital

Northeast Kingdom Human Services

Orleans Essex VNA And Hospice

Panel Age

One Year

Panel Size

107
Participants

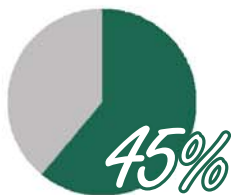
SASH Coordinator

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Wellness Nurse

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Proactive Measures



Participants with hypertension

Services offered: Monthly blood pressures clinics at various locations



Participants suffering from depression

Activities offered: Social gatherings including brain-builder activities like bingo, puzzles, card games, board games, poems and local musical entertainment

Services & Activities

Senior Meals

Walmart Bus Trip

Brain Builders

Blood Pressure Clinics

Line Dancing

Free Hearing Tests

Bone Builders

COPD, Dementia & CHF Counseling at Local Hospital



Community Connections

Barton Chambers Apartments

**Barton Park Street
Trailer Park**
(Owned by Bean's Housing)



We held our first official bus trip from Barton/Glover to Walmart in Littleton, NH. This offered a way for those home-bound to get out and socialize and shop which they otherwise may not have been able to do. This opened a door for us to become connected with RCT to co-partner and offer monthly Walmart trips for this panel. The Walmart day includes Walmart, lunch of their choice, and a trip to the Dollar store. The participants really enjoyed this and look forward to it in the future.

**Building Relationships
and having fun!**

Successes

- ★ Monthly Walmart bus trips for many participants throughout four towns with a stop in each town to accommodate those unable to drive.
- ★ Three participants started attending their local meal site twice a week for socialization and a well-rounded meal.
- ★ Free hearing tests offered in Glover and Barton provided 13 participants with hearing aids (for Medicaid eligible participants) and a package of batteries free of charge every month.
- ★ There have been several referrals made on behalf of participants to obtain Meals on Wheels, Choices for Care, and the Moderate Needs Program through either the Area Agency on Aging or the OEVNA.
- ★ A participant obtained Social Security Disability Insurance due to a partial amputation of his foot caused by diabetes. This participant was also referred to Vermont Center for Independent Living (VCIL) to help with modifications to his house for wheelchair accessibility.

SASH Panel Overview



♥ **Parker House,
Linden Terrace,
Community Panel**

SASH Partners

Rutland Area VNA and Hospice

Southwestern Vermont Council on Aging

Rutland Mental Health

Rutland Regional Medical Center CHT

Panel Age

3 Years

Panel Size

104
Participants

Including
47%

Community Participants

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Carol Keefe, SASH Program Manager

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Patti Kent, SASH Wellness Nurse

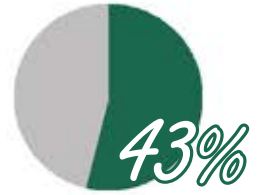
VNA & Hospice of Rutland County
patti.kent@aol.com

Proactive Measures



Participants with hypertension

Activities offered: Bocce, MOVE for Well-Being, Bone Builders, BP CLINICS, SASH Nurse talks



Participants with arthritis

Activities offered: Seated Yoga, Bone Builders, Move For Well-Being, Bocce

Services & Activities

Foot Clinics, Seated yoga, Blood pressure clinics every other wednesday with SASH Nurse, Move for Well Being, Senior Farm Share, State Commodities, BROCC, Marty Irons (Beauchamp and O'Rourke Pharmacy) Med Adherence GTHU, Brown Bag Lunch with SASH Coordinator, Bone Builders, File of Life, Dinner three times a week, Grocery Bus once a week, Castleton Nursing Intern



Accomplishments

SASH Participants
go to programs
at different sites

Growth and success
of the "MOVE for
Well-Being" program



Community Connections

At Home Senior Care

Bayada Home Health & Hospice

Vermont Psychiatric Survivors

The Pines, Genesis, Rutland Health
and Rehabilitation

CHCRR of Rutland

Interage

BROC

Greg Cox Boardman Hill Farms

The Bus

Bridges and Beyond volunteer
program thru RRMC

One to One

Godnick Center

Success Story

Parker House, Linden Terrace & community Panel, Rutland

82 year old female participant called the office stating she thought she was having a stroke. SASH Wellness RN went directly to the participant's apartment. A quick evaluation revealed that she was having a stroke and possible cardiac issues. SASH Wellness RN pushed the participant's life line button and asked EMTs for transport to RRMC for further evaluation. SASH Wellness RN stayed with the participant until the ambulance arrived to keep her calm as she was scared and crying. Participant told SASH Wellness RN that she has had multiple deaths in her family over the holidays and is very emotional about this.

Report from RRMC indicated she had a stroke and mild heart attack and suggested Rehab. At first participant didn't want to go, but her daughters encouraged her. She went to rehab for a short stay. SASH Coordinator continued to check in on patient when she was at the SNF for rehab. They used her transition plan for a smooth return home. When the participant came home she had services follow her, and SASH Wellness RN, SASH Coordinator and Resident Services Coordinator continue to check on her to make sure she was doing okay. She remains independent in her home and continues to do well.

What is SASH

SASH uses a population health approach to improve the health and well-being of Vermonters by creating community-clinical linkages through a network of providers, using the home as the nexus of care coordination. Affordable housing organizations across the state provide for a home-based care coordinator and wellness nurse to work collaboratively with a team of providers to meet the self-identified goals of SASH participants and improve population health.

How it Works

SASH participants become part of a defined community supported to focus on being healthy at home.



SASH participants benefit from a collaboration of community partners working together achieving comprehensive community health.

Who is Served

SASH primarily serves Medicare recipients living in congregate housing and the surrounding community. SASH is available in every Vermont county, currently touching the lives of approximately 5,000 people.

**Average age: 72
Age range: 20 - 101**



“I believe that all seniors deserve to age with respect, dignity, and have access to the social and medical supports to stay healthy and at home. SASH is a leading model to help seniors achieve that goal.”

- Senator Bernie Sanders



SASH Outcomes

Better Care, Healthier People, Smarter Spending

Why SASH?

Health and well-being begin at home. When confronted with changes in our health and well-being, staying home can be extremely challenging. Creating a comprehensive system of support, using home as the platform, provides the solution.

Better Care

The SASH Model provides a comprehensive, home-based system of care management focused on improving population health while reducing costs.

SASH is one of the country's best-known and widely-cited housing and health models.

Participants are better able to avoid the distress and expense of unnecessary hospitalizations and premature moves to a long-term care facility.

"I am pleased, though not at all surprised, to hear that this federally commissioned evaluation of SASH has again found positive outcomes for our seniors, most notably in dollars saved and in improved coordination among our many providers."

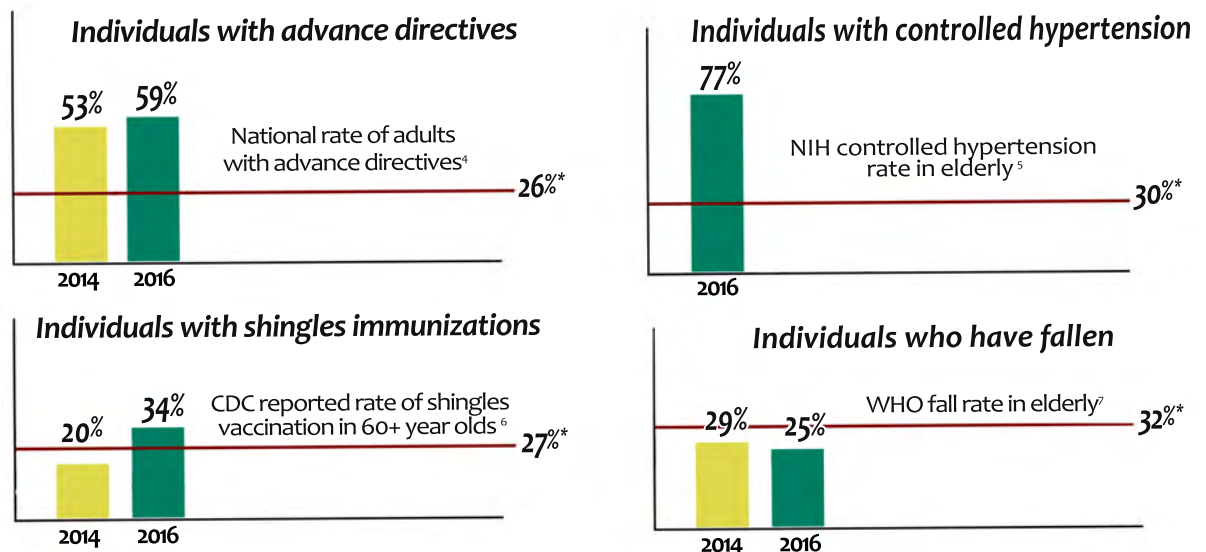
- Senator Patrick Leahy



Healthier People

SASH Participants' results vs national benchmarks

SASH has demonstrated consistent and significant improvements in quality metrics and in many cases exceeds national benchmarks.



Smarter Spending

The SASH Program helps slow the growth of Medicare Expenditures

\$153,175

Potential cost avoidance for SASH participants with newly controlled hypertension through self-monitoring and SASH support.¹

SASH participants experienced a reduction in total average annual expenditure growth by \$1536 per beneficiary per year.²

\$1,574,970

Potential cost avoidance in end-of-life care costs resulting from increase in SASH participants with advance directives.³

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1 - Cost-Benefit Analysis of Home Blood Pressure Monitoring in Hypertension Diagnosis and Treatment: An Insurer Perspective Alejandro Arrieta, John R. Woods, Nan Qiao, Stephen J. Jay
 2 - Support And Services at Home (SASH) Annual Report, 2nd Report, U.S. Department of Health and Human Services Assistant Secretary for Planning and Evaluation Office of Disability, Aging and Long-Term Care Policy
 3 - JAMA. 2011 Oct 5;306(13):1447-53. doi: 10.1001/jama.2011.1410. Regional variation in the association between advance directives and end-of-life Medicare expenditures. Nicholas LH1, Langa KM, Iwashyna TJ, Weir DR.
 4 - [http://www.ajpmonline.org/article/S0749-3797\(13\)00521-7/abstract](http://www.ajpmonline.org/article/S0749-3797(13)00521-7/abstract) 5 - <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4046467>
 6 - <http://www.cdc.gov/mmwr/volumes/65/ss/ss6501a1.htm> 7 - http://www.who.int/ageing/projects/falls_prevention_older_age/en

Reduce prevalence of and morbidity of chronic disease



SASH[®] provides an in-home care coordination and health coaching model that is able to target supports to identified high risk SASH participants through our population health structure. Additionally, more than half of the participants in the hypertension initiative moved into a lower risk category for hypertension; lowering their risk of heart disease and stroke.

70% of SASH participants enrolled in our Hypertension Management Initiative saw a reduction in systolic blood pressure within 3-6 months.

Improve access to primary care

PCP utilization increased

13%
in 2 years.

SASH staff prioritize connecting SASH participants to Primary Care Providers and establishing regular, consistent and appropriate communication between the SASH participant and his or her PCP. PCP utilization increased 13% in 2 years in a cohort of SASH participants measured in the first 2 years of SASH*. The percent of those SASH participants receiving an annual exam increased from 62% to 88% in the same time period indicating increased PCP utilization.

Reduce deaths from suicide and drug overdose



SASH is an active participant in the Zero Suicide Initiative pilot programs underway in Chittenden and Franklin counties and soon to be expanded to Lamoille county. We know that the primary population SASH is currently serving- older adults- have high rates of suicide.

Vermont has seen a **49%** increase in suicides in people over the age of 65 in only three years.

In fact, while **suicide rates** have increased across the age ranges, they are the **highest among those 65 and older**. The rates of suicide death for Vermonters over age 65 steadily increased from 12.6 per 100,000 in 2008 to 25.5 per 100,000 in 2011. We are training our staff to identify and assist participants contemplating suicide and strengthening our relationship with the Designated Mental Health agencies across the state to provide a long term and consistent support structure for our participant at high risk.

* Data collection on this cohort stopped due to data system constraints and cohort changes in 2015. Access to primary care and encouraging appropriate utilization continues to be a top priority measure for SASH. New cohort outcomes will be analyzed when transition to a data management system is complete.