

FUSE

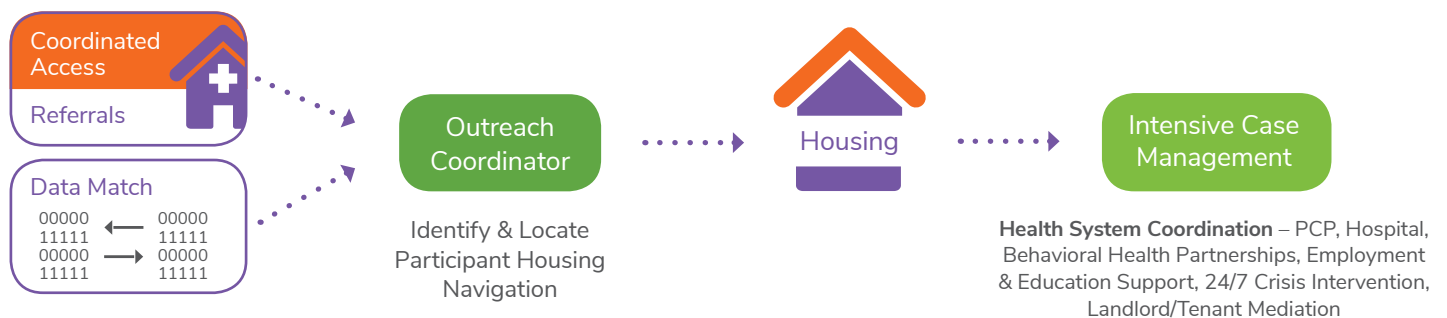
(Frequent Users Systems Engagement)



Study Results Summary

FUSE was a multi-year NYU study to randomly assign people experiencing homelessness to housing to determine if supportive housing reduces costs and improves quality of life. Study locations included the state of Connecticut, Los Angeles, San Francisco and Washtenaw County, Michigan.

The Study Model Permanent Supportive Housing Services Provided to Those Housed



Washtenaw County Study

In total, **150 individuals** were housed



Their average age was **48 years**

89% were still housed after one year



These individuals experienced the following conditions:

- 70%** had chronic health conditions
- 76%** had mental health conditions
- 71%** had substance use disorders
- 49%** were tri-morbid, or had all three co-occurring disorders
- 60%** rated their health as fair/poor at baseline
- 1 in 5** experienced a medical problem every day in the past month at baseline
- 50%** reported difficulty in climbing stairs
- 10 of the 150** individuals died during the study

Directional findings regarding improved quality of life...

	Baseline	One-Year Follow Up
Emergency Room as Main Source of Care	58%	31%
Needed but Could Not Find a Dentist	76%	31%
Frequent Loneliness	49%	34%
Feeling Life Is Unstable	57%	12%
Life is Organized	24%	75%

NYU Findings for Washtenaw County Compared to Other Study



\$6,000
per person

The most expensive quartile of participants reduced their costs by approximately **\$6,000 per person**. While these reductions were not statistically significant, they suggest that:

- The highest of the high cost utilizers may benefit most from the care coordination approach of supportive housing.
- Supportive housing may play a vital role as a care coordination model for individuals with complex health care conditions experiencing homelessness.

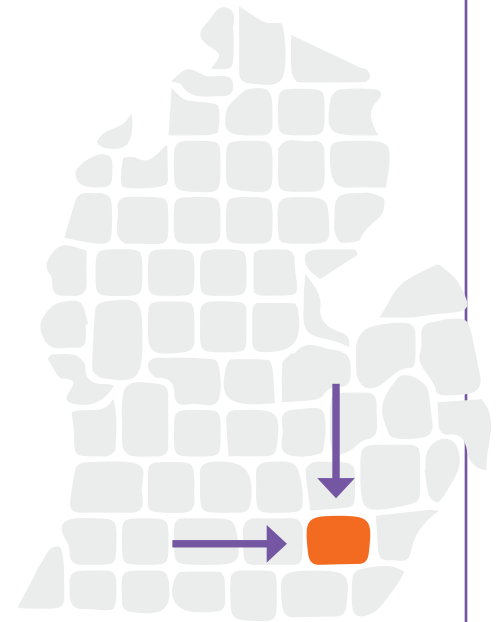


\$4,000
per person

The lowest quartile of participants increased their costs by approximately **\$4,000 per person**. This may have been due to the fact that they gained access to the care they needed.

Washtenaw County-specific Challenges

- The population targeted was less costly at baseline compared to the other sites in the study.
- The population in Washtenaw was smaller than the other sites in the study, resulting in a greater spread in utilization costs.
- Access to care barriers related to mental health and substance use disorder services were noted by NYU, in part due to Medicaid criteria limitations in Michigan.
- Access to housing was more limited than in other study groups, especially during the initial start-up phase of the study. This resulted in a shorter follow up period for research purposes.
- Unlike the other sites in the study, medical staff were not an integrated part of the care team until four years into the demonstration.
- Due to Washtenaw's Zero 2016/Built for Zero campaign, there may have been treatment contamination with the control group. Several people in the control group may have received supportive housing.



Takeaways for Washtenaw County

- Washtenaw County saw directional improvements in use of ER utilization, but outpatient visits increased, indicating that improved access to care was needed.
- Coordinated substance use disorder and mental health treatment may improve care and individuals' ability to access and maintain housing.
- Access to housing options is particularly limited in our community.



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