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Access to homeless health care providers in a managed care environment
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The managed care model is geared towards prevention and health maintenance, and does not have a strong track record for people with chronic illness and special needs. Some state managed care systems exempt patients with HIV/AIDS, chronic mental illnesses, and developmental disability. The homeless are often overlooked as a special needs population. In New York City, more than 5,000 homeless families and 10,000 children are sheltered; virtually all are Medicaid eligible. This is a medically underserved population with urgent needs for specialty care. Homelessness generally displaces people from their community, undermining access to prior health providers and continuity of care. Diminished access to primary care leads to preventable utilization of more costly alternatives, e.g., emergency departments. Medicaid may not reimburse community-based safety net providers because public payors are making capitated payments to a provider no longer involved with the patient. In New York State, homeless people enrolled in managed care are permitted to disenroll and resume fee-for-service Medicaid. This allows them to use services local to their shelter, and the provider to be compensated. This presentation describes the advocacy campaign of the New York Children's Health Project, together with a coalition of other homeless health providers has taken to ensure that our patients' ability to disenroll is not compromised. Results of targeted disenrollment are presented, noting improvements in patient access to specialty care, ability to navigate the health care system, and the financial viability of the Project.

Learning Objectives: At the conclusion of the session, the participant (learner) in this session will be able to: 1. Recognize the issues surrounding access to health care and subspecialty care by the homeless. 2. Gain an understanding of how managed care programs may limit the accessibility of health care services to the homeless. 3. Develop ideas to implement a Medicaid managed care disenrollment campaign for homeless people in your community.

Keywords: Homeless Health Care, Access to Health Care

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