

Multnomah County Homeless Benefits Recovery Outcomes

Services Provided Between 2/1/10 to 1/31/11

The Homeless Benefits Recovery Program (HBR) provides intensive and coordinated assistance to expediently secure federal benefits for disabled individuals who are homeless or at risk of homelessness. HBR works with individuals to obtain the medical records and additional medical and psychological examinations necessary to submit successful applications for Social Security Disability and Medicaid benefits.

Key Assumptions

1. HBR would achieve better outcomes utilizing trained specialists in the disability application process, rather than relying solely on training existing case managers to coordinate applications for federal disability benefits.
2. HBR would obtain benefits for individuals more quickly than the national average for disability applications.
3. Individuals served would increase their incomes allowing them to pay for their own housing and food expenses.
4. Individuals served would obtain health insurance, Medicaid and/or Medicare, which would cover the cost of services otherwise paid for by County General Funds and free up slots in the Multnomah Treatment Fund.
5. HBR would better align mental health services with chronically homeless mentally ill individuals requiring Permanent Supportive Housing.

During the one year period between February 1st, 2010 and January 31st, 2011, HBR served 114 individuals. During that same period of time, 55 clients exited from the program. Of these, three quarters (76%, N=42) secured federal entitlement

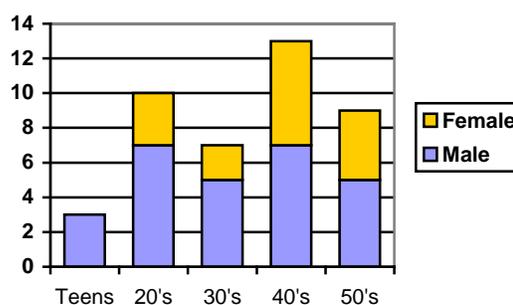
dollars. This report focuses on demographics and outcomes for the successful cases.¹

Reasons that the 13 clients did not secure entitlement dollars through HBR include: unable to differentiate disability from addiction (4), already were accessing assistance from other sources (2), disqualified by HBR for providing misleading information that made it impossible to determine disability (2), incarcerated (1), referred to an attorney (2), withdrew (1), and deceased (1).

Demographics

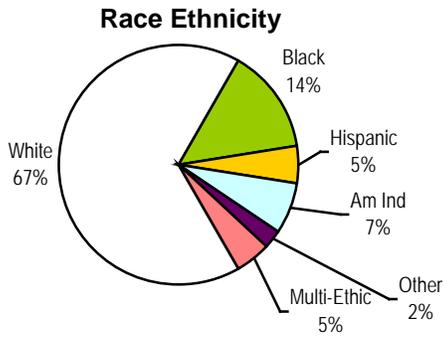
Most of the clients who received benefits were male (64%); 36% were female. Their ages ranged from 15 to 58 years; the average age was 38.6 years. This is considerably lower than the national average of 52² but similar to the average age of severely mentally ill adults within the Multnomah Treatment Fund (37.7 years).

Age and Gender



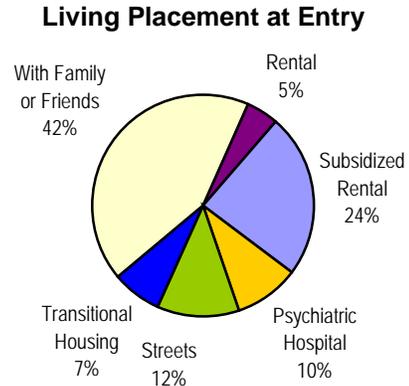
Two thirds of the clients were white (67%); 14% were black, 5% Hispanic, 7% Native American, 5% multi-ethnic, and 2% other.

² Social Security Administration 2009 Annual Report.



Almost all of the clients (93%) who received federal benefits had a mental health disability. The disorders included Major Depressive or Bi-polar (36%), schizophrenia (19%), schizoaffective (14%), non-specific psychotic disorder (7%), post-traumatic stress disorder (7%), other mental health or cognitive disorders (10%).

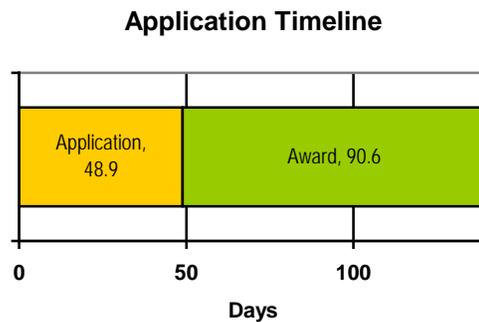
Only 29% of the individuals who received benefits were living in their own apartments at the time of enrollment. Most of those apartments had rental subsidies which is not surprising given the extremely low average income of participants at intake. A significant number of the clients (43%) were living with family members or friends. It is not clear how many of those individuals and their families/friends would have preferred to live independently if they had sufficient income or access to a rental subsidy and services. The final 29% were homeless at intake: 10% were in a psychiatric hospital, 12% were living on the streets and 7% were in transitional housing or an emergency shelter.



Services Provided

Direct service staff spent an average of 9.3 hours per client to secure benefits; services hours range from 1 to 34. In addition, HBR contracted out for psychological evaluations on 29 of the 42 successful clients (69%).

Successful clients were served by HBR for 4.5 months (143.8 days). It took about one and one half months (48.9 days) for HBR staff to make a case and submit an application to Disability Determination Services (DDS) and about 3 months (90.6 days) for DDS to make a final decision. The average amount of time between program entry and final decision was 136.5 days.³



³ Nine clients applied for benefits prior to entering HBR and are not included in the length of time from application to decision.

The average processing time of 4.5 months compares very favorably to the national average ranges from 4.5 months to 2 years.

Outcomes

Three quarters of the clients (76%) qualified for federal disability status: 20 clients secured Social Security Income (SSI), 2 secured Social Security Disability Income (SSDI) and 20 secured both.

At the start of services HBR clients had an average income of \$137 per month. At exit, their incomes averaged \$666 per month, an increase of almost 500%. Disability awards secured by HBR ranged between \$674 and \$2082 per month⁴.

In addition, the 90% of the 30 clients who had no primary health care option at the start of services have ongoing access to health care and medications.

General Fund Dollars Offset by HBR

Only 13% of clients were on Medicaid at the start of services. At exit, 96% of the clients were Medicaid eligible. Because of this the following costs that were paid using general fund dollars will be paid using Medicaid. In the twelve months prior to securing benefits through HBR, clients incurred \$182,891 in costs to the General Fund that will now be covered by Medicaid including:

1. \$55,671 in mental health service claims from Verity.
2. 94 days on emergency holds, the equivalent of \$125,600.
3. 27 instances of mobile outreach with Project Respond; the equivalent of \$1,620

Summary and Conclusions

1. HBR is highly successful at obtaining entitlement benefits for clients. HBR had a 76% success rate compared to a national rate of 10% to 15% for this population of clients who are both mentally ill and cycle in and out of homelessness⁵.
2. HBR obtains benefits for clients averaging 38 years of age which is much lower than the national average of 52 years. Accessing benefits at an earlier age provides critical support and services over more of an individual's lifetime and has the potential to ameliorate many of the more damaging impacts of disability and homelessness. At the same time, the age of the population served speaks to a vulnerability as a result of their disability and homelessness that is of concern.
3. HBR achieves these results extremely quickly. HBR's 4.5 month average for achieving entitlement benefits after submission compares to an average range of 4.5 months to 2 years in national studies.⁶ This translates into an average of 1 to 24 months in which Medicaid funds are available to pay for services that would otherwise been covered by General Funds. In addition, HBR only required an average of 9.3 hours of service delivery in order to achieve benefits which supports the practice of using specialized staff solely dedicated to benefits recovery work.
4. Client income went up by almost 500%. As a result, clients will be able to pay for more of their own food, lodging and other expenses.
5. Obtaining Medicaid allows mental and physical health care and medicine to be paid for by Medicaid instead of County General Fund. In the year prior to entering HBR, clients incurred \$182,891

⁴ One client was designated as disabled but her spouse earned too much money for her to collect benefits at the time of the decision.

⁵ National Organization of Social Security Claimants Representatives Report 4-24-09.

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in mental health expenses and an unknown amount of physical medicine expenses.

Next Steps

1. Develop strategies for serving individuals who have not been accepted into the program or discharged from the program due to alcohol and drug use or other barriers.
2. Integrate HBR with other benefit acquisition programs funded by other jurisdictions to ensure coordination of services and universal access.
3. Explore the potential to expand services to include individuals receiving County General Funded services including those with Developmental Disabilities, Homeless Youth, and individuals with physical disabilities.