SUPPORT AND SERVICES AT HOME (SASH) EVALUATION:

SASH EVALUATION FINDINGS, 2010-2016

Office of the Assistant Secretary for Planning and Evaluation

The Assistant Secretary for Planning and Evaluation (ASPE) advises the Secretary of the U.S. Department of Health and Human Services (HHS) on policy development in health, disability, human services, data, and science; and provides advice and analysis on economic policy. ASPE leads special initiatives; coordinates the Department's evaluation, research, and demonstration activities; and manages cross-Department planning activities such as strategic planning, legislative planning, and review of regulations. Integral to this role, ASPE conducts research and evaluation studies; develops policy analyses; and estimates the cost and benefits of policy alternatives under consideration by the Department or Congress.

Office of Disability, Aging and Long-Term Care Policy

The Office of Disability, Aging and Long-Term Care Policy (DALTCP), within ASPE, is responsible for the development, coordination, analysis, research, and evaluation of HHS policies and programs. Specifically, DALTCP addresses policies and programs that support the independence, health, and long-term care of people of all ages with disabilities; that promote the health and wellbeing of older adults; and, that prevent, treat, and support recovery from mental and substance use disorders.

This report was prepared under contract #HHSP23337006T between HHS's ASPE/DALTCP and RTI International. For additional information about this subject, you can visit the DALTCP home page at https://aspe.hhs.gov/office-disability-aging-and-long-term-care-policy-daltcp or contact the ASPE Project Officer, Emily Rosenoff, at HHS/ASPE/DALTCP, Room 424E, H.H. Humphrey Building, 200 Independence Avenue, S.W., Washington, D.C. 20201. Her e-mail address is: Emily.Rosenoff@hhs.gov.

The opinions and views expressed in this report are those of the authors. They do not reflect the views of the Department of Health and Human Services, the contractor or any other funding organization. This report was completed and submitted on October 2018.

Support And Services at Home (SASH) Evaluation:

SASH Evaluation Findings, 2010-2016

Prepared for

Emily Rosenoff

Office of the Assistant Secretary for Planning and Evaluation
Department of Health and Human Services
200 Independence Ave., SW
Washington, DC 20201

Prepared by

Amy Kandilov Vincent Keyes Noëlle Siegfried Kevin Smith Patrick Edwards Jenna Brophy Aubrey Collins Martijn Van Hasselt*

RTI International 3040 East Cornwallis Road Research Triangle Park, NC 27709 *Formerly with RTI International

Alisha Sanders Robyn Stone

LeadingAge Center for Applied Research 2519 Connecticut Avenue, NW Washington, DC 20008

RTI Project Number 0215288.001.000



TABLE OF CONTENTS

ACRONYMS			
1.	. OVERVIEW		
	1.1. Introduction	1	
	1.2. Health Needs among Low-Income Households Receiving Housing		
	Assistance	1	
2.	. SUPPORT AND SERVICES AT HOME PROGRAM	3	
	2.1. Design and Development of the SASH Program		
	2.2. SASH-Housing Sites and SASH Participants: Who Enrolled in the		
	SASH Program?	4	
3.	. FINDINGS	8	
	3.1. Medicare Expenditures		
	3.2. Medicaid Expenditures	13	
	3.3. Managing Multiple Medications		
	3.4. Perspectives on Property Management at SASH-Housing Sites		
4	. SUMMARY	19	
	4.1. Lessons for Replication		
	4.2. Conclusions		
	FFFFNOFO	00	
ΚĿ	EFERENCES	23	

LIST OF FIGURES AND TABLES

FIGURE 1.	Total SASH Participants and SASH Participants Included in the Quantitative Analysis	6
FIGURE 2.	Panel Characteristics of Site-Based SASH Participants in the Analysis Sample	9
FIGURE 3.	Percentage of Respondents Who Had Difficulty Performing Medication-Related Tasks	16
TABLE 1.	Characteristics of Housing Properties Hosting the SASH Program	5
TABLE 2.	Average Baseline Demographic Characteristics and Health Status for Site-based and Community Participants in the SASH Program	7
TABLE 3.	DID Estimates for 8 Categories of Medicare Expenditures, Comparing SASH Program Participants to Non-SASH Comparison Beneficiaries	11
TABLE 4.	DID Estimates for 3 Categories of Medicaid Expenditures, Comparing Dually-Eligible SASH Program Participants to Dually-Eligible Non-SASH Comparison Beneficiaries	14

ACRONYMS

The following acronyms are mentioned in this report.

BMQ	Brief Medication Questionnaire
CHT	Community Health Team
CSC	Cathedral Square Corporation
DID	Difference-In-Differences
DRHO	Designated Regional Housing Organization
ER	Emergency Room
FFS	Fee-For-Service
HCBS	Home and Community-Based Services
HCC	Hierarchical Condition Category
HHS	U.S. Department of Health and Human Services
HUD	U.S. Department of Housing and Urban Development
LIHTC	Low Income Housing Tax Credit
PBPM	Per-Beneficiary Per-Month
PIC	Public and Indian housing information Center
RTI	Research Triangle Institute
0.1011	
SASH	Support And Services at Home
TD 4 00	T
TRACS	Tenant Rental Assistance Certification System
\	VP-2C - Al A 2-C
VNA	Visiting Nurse Association