

Connecticut Green & Healthy Homes

Working Together to Advance Connecticut's Health, Energy and Housing Goals

Legislative Briefing
June 6, 2018



Connecticut Office of Early Childhood



Defining Needs and Developing Solutions at the Intersection of Housing, Health and Energy

Connecticut's Housing-related Health and Energy Needs

- Residents spend **\$5.2 billion/year** to heat, cool, light and provide hot water – more than state's budget for health care or education.
- The **average energy burden for low-income Connecticut households is 60% higher than the national average.**
- **Over 430,000 households meet the income eligibility criteria** for Connecticut's residential energy efficiency programs, **25% of these homes are deferred for energy efficiency upgrades due to health and safety hazards.**
- Connecticut had **over 21,700 annual asthma-related hospitalizations**, and over **\$102 million in Medicaid claims related to asthma.**
- **Falls** were involved in over **42,000 hospitalizations** in Connecticut over 5 years.
- Over **2,100 children under the age of six are diagnosed with elevated blood lead levels** in Connecticut.

Connecticut Green & Healthy Homes Vision

Evidence-based, integrated housing, health and energy services that are broadly accessible to Connecticut residents and sustainably supported through leverage public and private investment.

The Burden of Unhealthy and Energy Inefficient Homes

30M families live in unhealthy homes



Homes with environmental hazards are making their residents sick

14.4M missed days of school each year



Asthma is the top reason students miss school

14.2M missed days of work each year



Collateral burden of sick children is missed days of work for parents and caretakers

\$51B+ spent on asthma



\$31B+ spent on slip & fall injuries



\$50.9B+ spent on lead poisoning



Over \$100B in taxpayer funding is spent each year to address the impact of these hazards

Low income families spend 20% of monthly income on energy costs

VS.

3.5% in other households



Strong Evidence Base for Healthy Homes Services in the Literature

2007

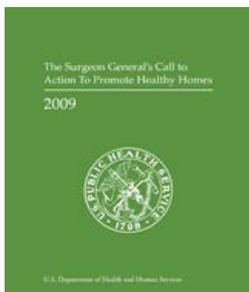


National Institutes
of Health

Patients who have asthma at any level of severity should:

- Reduce, if possible, exposure to allergens to which the patient is sensitized and exposed.
- Know that effective allergen avoidance requires a multifaceted, comprehensive approach; individual steps alone are generally ineffective.

2009



Surgeon General's Call to Action to Promote Healthy Homes

- Describes the steps to protect themselves from disease, disability and injury that may result from home health hazards
- Know that effective allergen avoidance requires a multifaceted, comprehensive approach; individual steps alone are generally ineffective.

2011



...the Task Force recommends the use of home-based, multi-trigger, multicomponent interventions with an environmental focus for children and adolescents with asthma, on the basis of strong evidence of effectiveness in reducing symptom-days, improving quality of life scores or symptom scores, and reducing the number of school days missed.

Evidence-based Interventions Produce Measurable Results

1 Intake and enrollment



2 Initial Home Visit



3 Healthy Homes education and home repairs



4 Evaluation of outcomes



The Business Case for Lead and Healthy Homes

Lead poisoning costs society **\$50.9 billion** annually and yet is **entirely preventable**

Impacts during Childhood



- **535,000** children under 6 with elevated blood lead level
- 700% increase in school drop out rate
- 600% increase risk of juvenile delinquency
- Lower IQ, ADHD, special education



Impacts in Adulthood

- Diminished earnings from lower IQ
- Higher likelihood of incarceration
- Higher social service usage

ROI between \$17-221 per dollar invested in preventive lead remediation

Increased lifetime earnings of \$1,024,000 per child if lead poisoning prevented

Asthma results in **\$50 billion in annual medical costs**, and 40% of costs are tied to environmental triggers in the home



6.8 million children
18.7 million adults
1.58 million hospital days

\$500-\$1,000
cost of ER visit

\$7,500-20,000
cost of hospitalization



\$1
invested in asthma interventions



\$5.30 - \$14
return on investment

Non-Energy Benefits

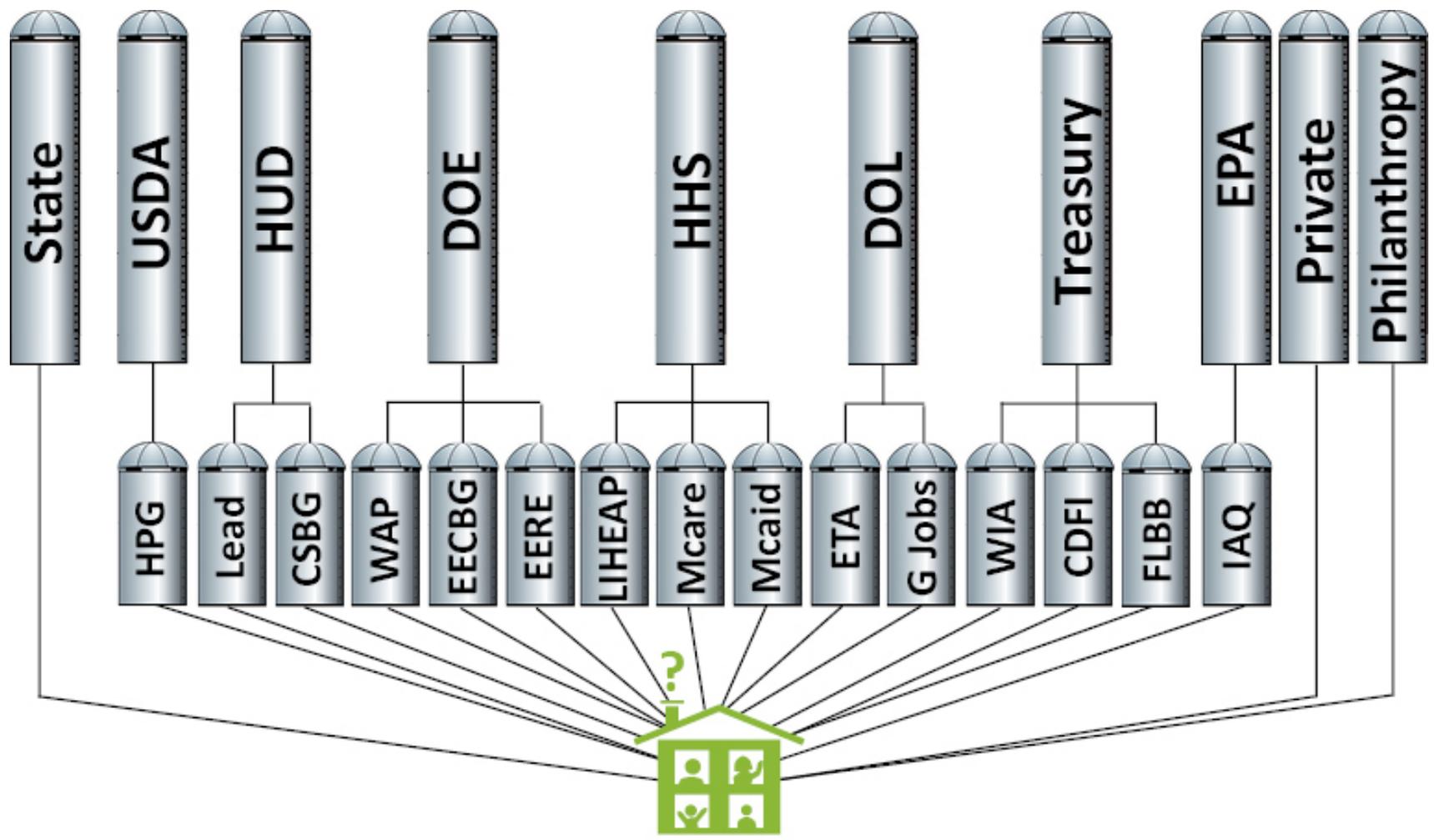
- GHHI research captures the true value of energy-efficiency interventions, by measuring the health, economic and other benefits that accrue at the individual, household, and community level.

Achieving Health and Social Equity through Housing:

Understanding the Impact of Non Energy Benefits in the United States



Challenge for Families Seeking Help



The GHHI Model: "No Wrong Door"

Align
services & funding



Braid
relevant resources



Coordinate
service delivery



Philanthropy



Government



Private-sector



System

- Single intake system
- Comprehensive assessment
- Coordinate services
- Integrated interventions
- Cross-trained workers
- Shared data

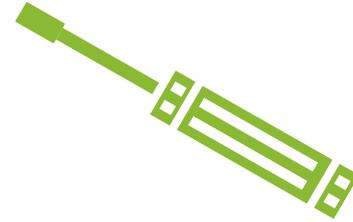
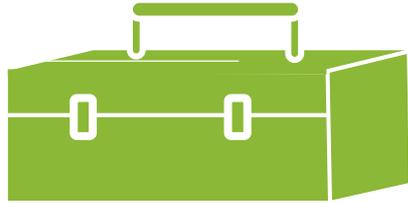


Outcomes

- Lead-hazard reduction
- Asthma-trigger control
- Household injury prevention
- Energy efficiency
- Weatherization
- Housing rehabilitation

Innovations in Health-Related Funding

Developing an innovative healthy homes funding toolbox



**Medicaid and CHIP
waivers and state plan
amendments**

**Hospital
Community
Benefits**

Pay for Success

**MCOs and Value-
based Payments**

**Medicare Advantage
Plans**

Medicaid Funding Models

Pathway	Requirements	States
CHIP Health Service Initiative – State Plan Amendment	<ul style="list-style-type: none"> • Must be within CHIP admin share • States provide portion of funding 	Michigan (lead), Maryland (lead and asthma), Indiana (lead), Ohio (lead)
Medicaid State Plan Amendment	<ul style="list-style-type: none"> • Identifiable existing service codes and credentialed professionals to conduct services • Must be eligible services 	Missouri (asthma)
1115 Waiver for lead services including window replacement	<ul style="list-style-type: none"> • Budget neutral • Available statewide 	Rhode Island (lead)
1115 Waiver (Delivery Service Reform Incentive Payment Program)	<ul style="list-style-type: none"> • Budget neutral • Available statewide 	New York (asthma)
1115 Waiver (health-related services / flexible services e.g. air conditioners)	<ul style="list-style-type: none"> • Managed Care pathway • Services included in Medical-loss ratio but not in the plan's rates 	Oregon (asthma)

Housing, Health and Energy Challenges and Opportunities in Connecticut

Connecticut Green & Healthy Homes: Partners

Connecticut's Strong Partnerships and Capacity in Housing, Health and Energy Sectors



Connecticut Green & Healthy Homes: Opportunity

- Connecticut is a **national leader in residential energy-efficiency services and clean energy financing**.
 - ~20,000 households annually receive efficiency services.
 - \$185 million of residential financing catalyzed in last 5 years.
- The unique **organization of the state's public insurance delivery system** may enable support for healthy housing services with proven health outcomes.
- Robust **public-private leverage models** in place in housing and energy sectors (DOH, CHFA, and CGB).
- State **agencies share a vision** for improving housing quality to advance goals across the housing, health and energy sectors.
 - Significant coordination exists among **health and housing sectors, and judicial branch** to identify and remediate health & safety issues.
 - **Energy and housing** agencies have been coordinating for several years.

Connecticut Green & Healthy Homes: Opportunity

Connecticut Energy Efficiency Fund Home Energy Solutions Program is a strong framework for housing health and safety interventions in low income households, sustainably supported through a mix of public, philanthropic and private capital investment:

- **Health Insurance Outcomes-based payments**
- **Funding medically-necessary housing interventions through CHIP & Medicaid**
- **Hospital Community Benefits Investment**
- **Public/Philanthropic Investment (leveraged to attract private capital)**
- **Federal Funds: Fannie Mae, USDA Rural Development Housing Preservation, Maternal/Child Health Block Grant Funds**

Project Goals:

Over Three Phases

- To provide a **comprehensive analysis** of the economic, technical and operational **feasibility** of a statewide model for housing, health and energy services in Connecticut.
- To identify **sustainable support** via innovative strategies for public, private and philanthropic investment in housing, health and energy services, including outcomes-based Medicaid investment, philanthropic support and leveraged public investment.
- To design models that **leverage and expand Connecticut's existing framework for Utility Rate Payer-Funded Energy Efficiency Services** to implement a comprehensive statewide housing, health and energy services model.

CT Green & Healthy Homes Project

Timeline and Key Milestones

Phase I - \$74,000 funded by CGB

- ✓ Stakeholder Convenings (Fall 2017, Winter 2018)
- ✓ Pre-Feasibility Research (Jun 2017-May 2018)

Phase II - \$220,000 funded by TBD

- Feasibility Research and Full Report (Summer-Fall 2018)
- Pilot Project Design (Fall 2018)

Phase III – \$5 million funded by TBD (estimate)

- Pilot Project Development and up to 3-year Implementation and Evaluation (2019-2022)

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