



## **FOUR-YEAR SASH EVALUATION SHOWS CONTINUED POSITIVE HEALTH OUTCOMES & MEDICARE SAVINGS**

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Improved health, slowed Medicare expenditures and more health-savvy older adults: these are the findings of the latest federally funded, third-party evaluation of older adults living in Vermont affordable-housing communities and enrolled in SASH® (Support and Services at Home), a statewide, collaborative program of care and support that helps people stay healthy and in their home.

The program, developed by the nonprofit housing provider Cathedral Square of South Burlington and available statewide since 2011, uses housing as a platform to link Vermonters with health services and programs in partnership with a vast network of area agencies on aging, home health agencies, providers of mental health and addiction services, primary-care practitioners and community hospitals.

The evaluation examined Medicare claims since the program's start in 2011 through June 2015 and included interviews with SASH participants, staff and stakeholders. Researchers found that participants in SASH groups established before April 2012, which primarily served residents living at congregate, affordable-housing communities, had fewer hospital admissions and saved an estimated \$1,227 per person per year in Medicare expenditures.

While these specific results did not translate into groups created after April 2012, which included higher rates of residents living in surrounding communities vs. only those in affordable-housing properties where SASH staff are based, all participants reported less difficulty managing their medications, higher overall functional status, and greater awareness of the relationship between nutrition and health.

Researchers surmised that differences in outcomes between the earlier and later panels could be attributed to the fact that community-based participants referred to the SASH program were found to have greater health-care needs, higher health-care expenses and "more environmental issues with their homes compared to site-based participants, ranging from inaccessibility to

severe dilapidation.” Of the 4,741 SASH participants as of June 2015, approximately 25 percent were community-based.

“We are grateful to have this latest study, which shows that our initial program design — embedding SASH in affordable-housing communities and providing and connecting services to residents living there — continues to show positive results,” says SASH Director Molly Dugan. “Extending these same results to those SASH groups with higher rates of community-based participants is extremely important to us.”

Dugan adds that a recently completed qualitative analysis by the Vermont Department of Health, based on interviews with a sample of primary-care physicians, SASH participants and staff, shows that all three groups have an overwhelmingly positive opinion of the program and its impact in improving participant health.

Meanwhile, a three-year, \$15 million demonstration inspired by SASH and funded by the U.S. Department of Housing & Urban Development is underway at 40 affordable-housing communities nationwide. SASH staff from Cathedral Square are spending the week of Nov. 13 in Washington, D.C., to provide training in the SASH model to representatives from all 40 sites. In addition, Cathedral Square is working with housing organizations in Rhode Island and several other states to replicate SASH within their borders.

The four-year evaluation was conducted for the U.S. Department of Health & Human Services by RTI International and LeadingAge Center for Applied Research. A [summary of the report](#) and the [full report](#), as well as links to earlier third-party SASH evaluations, are available at <https://aspe.hhs.gov>.