

Health Home – Criminal Justice Pilots

Current Pilots:

HHUNY Western, Lakeshore/Horizon
HHUNY Finger Lakes, Huther Doyle
Bronx Lebanon
Bronx Accountable Healthcare Network
Brooklyn Health Home
Community Healthcare Network
Coordinated Behavioral Care (Project Partnership)



Common Themes:

Each site is working with criminal justice partners to identify and engage formerly incarcerated patients.

- Sites are communicating with the criminal justice Health Home system through a mix of informal and formal partnerships.
- Sites in NYC are working with Transitional Health Services at Rikers.
- Multiple sites are working with Division of Parole to identify candidates.
- Some sites are working with drug and mental health courts.

- One site has their County Sheriff and County DA serving on the board of the lead CJHH agency, creating buy-in and collaboration.
- Two sites noted leveraging relationships that already existed between the community-based agencies in their network and the criminal justice system.
- One site has a coordinator on site to ensure connectivity.

Critical Issues:

For those leaving the criminal justice system, early connectivity to the Health Home as a source of support to access medical, behavioral health, and social services is critical. The persons eligible for Health Home services are those with complex medical and behavioral health issues. However, to manage often complex regimens to ensure medical and behavioral health stability, the social determinants of health including housing, safety, and food have to be addressed. A hungry and cold person sleeping on the streets is more concerned with food, warmth and shelter than taking life stabilizing medications. Once the social determinants of health are stabilized, accessing health care services and medications often can become a barrier due to lack of insurance coverage for care. Accessing Medicaid coverage itself can be an insurmountable barrier to these fragile persons. Unfortunately, since Health Homes are a Medicaid service, it is difficult for the Health Homes to actively intervene during these critical transitions when Medicaid coverage is not active. Access to the currently requested funding will allow the Health Homes working with the criminal justice system to put services in place at the beginning of the criminal justice to community transition, to monitor the outcome of these services in reducing recidivism (including a cost-benefit analysis) and to develop sustainable programs when this funding period ends.