

Overview

Bronson Healthcare is a regional health system serving nine counties in southwest Michigan. Its flagship hospital implemented a Frequent User System Engagement 2.0 (FUSE) pilot program – a collaborative effort targeting frequent users of the emergency department (ED) with chronic unmanaged pain who are also homeless. This population, representing the highest utilizers of multiple community safety net systems, has complex medical and social needs with underlying mental health, behavioral health, and substance abuse issues. These issues coupled with fragmented care significantly impact quality of life.

FUSE 2.0 seeks to create a systems change, whole person approach addressing medical needs concurrent with mental health, substance abuse, social service, and housing needs that contribute to high utilization of ED services, poor health outcomes, and poor life choices. FUSE 2.0 will bridge safety net systems and the medical community, building communication between medical, mental health, housing, and other disciplines that do not traditionally collaborate effectively.

Impact

Initial response to the program has been favorable. FUSE seeks to stabilize a high-risk, high-cost population to improve quality of life, optimize care, align treatment, reduce fragmentation of care and reduce costs across the social, medical, and mental health continuum for frequent users. FUSE will provide two years of housing, primary care, and intensive

community-based support services for 10 homeless frequent users of the ED.

Lessons Learned

Bronson's Community Health department is in the first year of this pilot program and is continuing to collect data and evaluate. The collaboration has learned that developing relationships between disciplines is critical to program success. Integrating mental health, primary care, housing, and support services presents unique challenges within a special needs population; innovative approaches must be developed.

Future Goals

The process for patient selection will be refined to identify highest cost inpatient frequent utilizers. This will allow the pilot to become sustainable through reinvestment of cost savings. It will lead to development of insurance reimbursement opportunities to provide bundled services for frequent users. FUSE 2.0 will add to the growing volume of best practice literature indicating that integrated care addressing social determinants of health is essential to improve outcomes and reduce costs.



This small wooden house was given to Bronson by a FUSE participant in appreciation of the help he received to find stable housing.

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