

Change in shelter eligibility policy tied to more ED visits

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(HealthDay)—A policy change to Massachusetts' shelter eligibility was

tied to increased pediatric emergency department visits for homelessness and substantial health care costs, according to a study published online Oct. 15 in *Pediatrics*.

Amanda M. Stewart, M.D., M.P.H., from Boston Children's Hospital, and colleagues retrospectively evaluated emergency department visits for homelessness at a children's hospital from March 2010 to February 2016 to analyze the frequency and costs of [pediatric emergency department](#) visits for homelessness before and after the 2012 implementation of a [policy](#) changing emergency shelter eligibility for [homeless](#) families.

The researchers found there were 312 emergency department visits for homelessness, 95 percent of which were after the policy was enacted. The visits increased 4.5 times after the policy implementation. Children seen after the policy was enacted were more likely to have no medical complaint (rate ratio, 3.27). During the study period, the number of homeless children in Massachusetts increased 1.4 times, but emergency department visits for homelessness increased 13-fold. Payments averaged \$557 per [emergency](#) department visit and cost more than four times what a night in a shelter would cost.

"Potential health care effects should be considered in future housing policies," the authors write.

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