California Advancing and Innovating Medi-Cal (CalAIM) Community Supports Fact Sheet

Background

The Whole Person Care (WPC) pilots and Health Homes Program (HHP) built a foundation for an integrated approach to coordinating medical care, behavioral health and social services to improve beneficiary health outcomes. Consistent with the CalAIM objective of reducing variation and complexity across the delivery system, as well as identifying and managing member risk and need, establishing coverage of a set of Community Supports will make a statewide offering of these critical interventions for Medi-Cal beneficiaries.

The Department of Health Care Services (DHCS) is proposing to implement Community Supports, which are flexible wrap-around services that a Medi-Cal managed care plan will integrate into its population health strategy. These services are provided as a substitute to, or to avoid, other covered services, such as a hospital or skilled nursing facility admission or a discharge delay.

According to federal Medicaid program rules, Community Supports are medically appropriate and cost-effective alternatives to services that can be covered under the State Plan. They are typically delivered by a different provider or in a different setting than traditional State Plan services. Community Supports can only be covered if:

- The state determines that the service is a medically appropriate and cost-effective substitute or setting for the State Plan service;
- The services are optional for the managed care plan to provide;
- The services are optional for members, and they are not required to use the Community Supports; and
- The Community Supports are authorized and identified in the state's Medi-Cal managed care plan (MCP) contracts.

MCPs will develop a network of providers that have the expertise and capacity regarding specific types of services.

DHCS is proposing to include the following 14 distinct services as Community Supports under Medi-Cal managed care. Each service will have defined eligible populations, code sets, potential providers, restrictions and limitations:

- Housing Transition Navigation Services
- Housing Deposits
- Housing Tenancy and Sustaining Services
- Short-Term Post-Hospitalization Housing
- Recuperative Care (Medical Respite)
- Respite Services
- Day Habilitation Programs
- Nursing Facility Transition/Diversion to Assisted Living Facilities, such as Residential Care Facilities for Elderly and Adult Residential Facilities
- Community Transition Services/Nursing Facility Transition to a Home
- Personal Care and Homemaker Services
- Environmental Accessibility Adaptations (Home Modifications)
- Meals/Medically Tailored Meals
- Sobering Centers
- Asthma Remediation

DHCS must use its ability to provide MCPs with financial incentive payments so MCPs work with their providers to invest in the necessary delivery and systems infrastructure, build appropriate care management and Community Supports services capacity, and achieve improvements in quality performance and measurement reporting that can inform future policy decisions.

To maintain continuity of services, CalOptima will offer services currently provided under WPC and HHP during initial implementation. The four proposed Community Supports are Housing Transition Navigation Services, Housing Deposits, Housing Tenancy and Sustaining Services, and Recuperative Care. Each is explained further below.

Housing Transition/Navigation Services

- Housing Transition Navigation Services assist members with obtaining housing and include:
  - » Conducting a tenant screening and housing assessment that identifies the member's preferences and barriers related to successful tenancy
  - » Developing an individualized housing support plan based upon the housing assessment that addresses identified barriers, includes short- and long-term measurable goals for each issue, establishes the member's approach to meeting the goal, and identifies when other providers or services, both reimbursed and not reimbursed by Medi-Cal, may be required to meet the goal
  - » Searching for housing and presenting options
  - » Assisting with:
    - ◦ Securing housing, including the completion of housing applications and securing required documentation
    - ◦ Requests for reasonable accommodation, if necessary
    - ◦ Arranging for and supporting the details of the move
    - ◦ Benefits advocacy, including assistance with obtaining identification and documentation for SSI eligibility and supporting the SSI application process.
  - » Identifying and securing available resources to assist with
    - ◦ Subsidizing rent and matching available rental subsidy resources to members
    - ◦ Covering expenses if included in the housing support plan
  - » Educating and engaging with landlords
  - » Ensuring that the living environment is safe and ready for move-in
  - » Communicating and advocating on behalf of the member with landlords
  - » Establishing procedures and contacts to retain housing, including developing a housing support crisis plan that includes prevention and early intervention services when housing is jeopardized
  - » Identifying, coordinating, securing or funding non-emergency, non-medical transportation to assist members' mobility to ensure reasonable accommodations and access to housing options prior to transition and on move-in day
  - » Identifying and coordinating environmental modifications to install necessary accommodations for accessibility

- The services provided:
  - » Should be based on individualized assessment needs and documented in the individualized housing support plan. Members may require and access only a subset of the services listed above
  - » Should use best practices for members who are experiencing homelessness and who have complex health, disability and/or behavioral health conditions
  - » May involve coordination with other entities to ensure the member has access to supports needed for successful tenancy
  - » <u>Do not include</u> the provision of room and board or payment or rental costs
  - » Should adopt, as a standard, the demonstrated need to ensure seamless service to members experiencing homelessness entering the Housing Transition Navigation Services Community Supports
- For members who will need rental subsidy support to secure permanent housing, the services will require close coordination with local Coordinated Entry Systems (CES), homeless services authorities, public housing authorities, and other operators of local rental subsidies

Eligibility Criteria:[1]
Individuals who:
- Are prioritized for a permanent supportive housing unit or rental subsidy resource through the local homeless CES; or
- Meet the Housing and Urban Development (HUD) definition of homeless; or
- Meet the HUD definition of at risk of homelessness and meet certain other DHCS criteria; or
- Are determined to be at risk of experiencing homelessness and meet other DHCS criteria.

Restrictions and Limitations:
- Housing Transition Navigation services must be identified as reasonable and necessary in the member's individualized housing support plan

Licensing and Allowable Providers:
- Providers must have experience and expertise with providing these unique services in a culturally and linguistically appropriate manner.
- Members who meet the eligibility requirements should also be assessed for ECM and Housing Tenancy and Sustaining Services (if provided in their county)

Housing Deposits

- Housing Deposits assist with identifying, coordinating, securing, or funding one-time services and modifications necessary to enable a person to establish a basic household that does not constitute room and board, such as:
  - » Security deposits required to obtain a lease on an apartment or home
  - » Set-up fees/deposits for utilities or service access and utility arrearages
  - » First month coverage of utilities, including but not limited to telephone gas, electricity, heating and water
  - » First month's and last month's rent as required by a landlord for occupancy
  - » Services necessary for the members' health and safety, such as pest eradication and one-time cleaning prior to occupancy
  - » Goods, such as an air conditioner or heater, and other medically necessary adaptive aids and services, designed to preserve a member's health and safety in the home, such as hospital beds, Hoyer lifts, air filters, specialized cleaning or pest control supplies, etc.
- The services provided should use best practices for members who are experiencing homelessness and have complex health, disability and/or behavioral health conditions, including Housing First, Harm Reduction, Progressive Engagement, Motivational Interviewing and Trauma-Informed Care
- Services do not include the provision of room and board or payment of ongoing rental costs beyond the first and last month's coverage.

Eligibility Criteria:[1]

Members who:
- Received Housing Transition Navigation Services Community Supports; or
- Are prioritized for a permanent supportive housing unit or rental subsidy resource through the local homeless CES; or
- Meet the HUD definition of homeless

Restrictions and Limitations:

- Housing Deposits are allowable Community Supports if they are:
  - » Available once in a member's lifetime
  - » Can only be approved one additional time with documentation regarding what conditions have changed to demonstrate why providing Housing Deposits would be more successful on the second attempt. CalOptima is expected to make a good faith effort to review information available to determine if the member has previously received services
  - » Identified as reasonable and necessary in the member's individualized housing support plan and are available only when the member is unable to meet such expense
  - » Members must also receive Housing Transition Navigation services (at a minimum, the associated tenant screening, housing assessment and individualized housing support plan) in conjunction with this service

Licensing and Allowable Providers:

- Providers must have experience and expertise with providing these unique services in a culturally and linguistically appropriate manner.

Housing Tenancy and Sustaining Services

This service provides tenancy and sustaining services, with a goal of maintaining safe and stable tenancy for members once housing is secured. This includes:

- Providing early identification and intervention for behaviors that may jeopardize housing
- Providing independent living and life skills, including assistance with and training on budgeting, including financial literacy and connection to community resources; education and training on the role, rights and responsibilities of the tenant and landlord
- Coaching on developing and maintaining key relationships with landlords/property managers with a goal of fostering successful tenancy
- Linking with community resources to prevent eviction when housing is or may potentially become jeopardized
- Conducting health and safety visits, including unit habitability inspections
- Coordinating with the landlord and case management provider to address identified issues that could impact housing stability and modify the tenant's housing support and crisis plan on a regular basis
- Assisting with:
  - » Resolving disputes with landlords and/or neighbors to reduce risk of eviction or other adverse action
  - » Benefits advocacy, including assistance related to SSI eligibility and the SSI application process
  - » The annual housing recertification process

The services provided:

- Should be based on individualized assessment needs and documented in the individualized housing support plan
- Should use best practices for members who are experiencing homelessness and who have complex health, disability, and/or behavioral health conditions including Housing First, Harm Reduction, Progressive Engagement, Motivational Interviewing and Trauma-Informed Care
- May involve coordination with other entities to ensure the member has access to supports needed to maintain successful tenancy
- Do not include the provision of room and board or payment of rental costs

Eligibility Criteria:[1]

Members who:
- Received Housing Transition Navigation Services Community Supports; or
- Are prioritized for a permanent supportive housing unit or rental subsidy resource through the local homeless CES; or
- Meet the Housing and Urban Development (HUD) definition of homeless; or
- Are determined to be at risk of experiencing homelessness.
- Members who meet the eligibility requirements for Housing Tenancy and Sustaining Services should also be assessed for Enhanced Care Management (ECM) and may have received Housing Transition Navigation services (if provided in the county)

Restrictions and Limitations:

- Available from the initiation of services through the time when the member's housing support plan determines they are no longer needed
- Available for a single duration in a member's lifetime
- Can be approved one additional time with appropriate documentation regarding conditions that have changed to demonstrate why providing Housing Tenancy and Sustaining Services would be more successful on the second attempt
- Services must be identified as reasonable and necessary in the member's individualized housing support plan and are available only when the member is unable to successfully maintain longer-term housing without such assistance
- Many members will have also received Housing Transition Navigation Services in conjunction with this service, but it is not a prerequisite for eligibility

Licensing and Allowable Providers:

- Providers must have experience and expertise with providing these unique services in a culturally and linguistically appropriate manner
- Providers must have demonstrated or verifiable experience or expertise with providing housing-related services and supports

Recuperative Care

- Recuperative care, or medical respite care, is short-term residential care for members who no longer require hospitalization but still need to heal from an injury or illness (including behavioral health conditions) and whose condition would be exacerbated by an unstable living environment
- At a minimum, the service will include interim housing with a bed and meals and monitoring of the member's ongoing medical or behavioral health condition
- Based on member needs, recuperative care may also include:
  » Limited or short-term assistance with Instrumental Activities of Daily Living and/or Activities of Daily Living
  » Coordination of transportation to post-discharge appointments
  » Connection to any other ongoing services a member may require, including mental health and substance use disorder services
  » Support in accessing benefits and housing
  » Gaining stability with case management relationships and programs
- Recuperative care should not replace or be duplicative of the services provided to members utilizing ECM
- May be utilized in conjunction with other housing Community Supports
- Should utilize best practices for members who are experiencing homelessness and who have complex health, disability, and/or behavioral health conditions including Housing First, Harm Reduction, Progressive Engagement, Motivational Interviewing, and Trauma-Informed Care

Eligibility Criteria:[1]

Members who:
- At risk of hospitalization or are post-hospitalization; and
- Live alone with no informal supports; or
- Face housing insecurity or have housing that would jeopardize their health and safety without modification

Restrictions and Limitations:

- Necessary to achieve or maintain medical stability and prevent hospital admission or readmission
- Not more than 90 days in continuous duration
- Does not include funding for building modification or building rehabilitation

Licensing and Allowable Providers:

- Providers must have experience and expertise with providing these unique services. Licensing and allowable providers include but are not limited to:
  » Interim housing facilities with additional on-site support
  » Shelter beds with additional on-site support
  » Converted homes with additional on-site support
  » County directly operated or contracted recuperative care facilities
- CalOptima must apply minimum standards to ensure adequate experience and acceptable quality of care standards are maintained.

Subject to change as per DHCS guidance