

Using Medicaid to Finance and Deliver Services in Supportive Housing: Challenges and Opportunities

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TAC

TAC is a national, non-profit firm that provides consulting and technical assistance to federal, state, and local government, providers and other stakeholders on behavioral health and other disabilities, homelessness and affordable housing. Services include:

- Policy development
- Program design and implementation
- Financing
- Outcomes and performance evaluation
- Workforce training

Housing is part of the overall system change strategy. It is a primary intervention and not an add-on.

Housing is a Determinant of Health

- As a *social* determinant of health, residential segregation can have a negative impact on one's health.
- As a *physical* determinant of health, access to safe, decent, affordable housing will impact health, functioning and quality of life.

Healthy People 2020.

<http://www.healthypeople.gov/2020/about/DOHAbout.aspx#socialfactors>

Federal Policy Alignment

- USICH Opening Doors: Federal Strategic Plan to Prevent and End Homelessness
- CMS Informational Bulletin on Housing-related Activities and Services (June 2015)
- SAMHSA Olmstead and Homeless Policy Academies
- Legislative Changes to HUD Section 811 Program (January 2011)
- DOJ Statement on Community Integration (June 2011)
- HUD Olmstead Guidance, including “Olmstead Preference” (June 2013)
- CMS Home and Community Based Services Final Rule (January 2014)

CMS Innovation Accelerator Program – Community Integration and LTSS

30+ states applied for technical assistance

- Track 1: Tenancy Sustaining Services
- Track 2: State Medicaid-Housing Agency Partnerships (8 states; CT)

Goals:

- To increase state adoption of housing-related services within Medicaid benefits for people who need community-based long-term services and supports
- To increase the ability of states to push SH to scale

CMS Informational Bulletin

- “Coverage of Housing-Related Activities and Services for Individuals with Disabilities”
- Published by CMS June 26, 2015
- <https://www.medicaid.gov/federal-policy-guidance/downloads/CIB-06-26-2015.pdf>

Semantics Matter

“Pay for supportive housing”

or

“Pay for services delivered in supportive housing”

Medicaid and Homelessness

- Medicaid is a critical tool to improve the health of vulnerable populations and to more effectively utilize state resources.
- Medicaid cannot solve homelessness alone.
- Know the package of services needed, and the funding sources need to pay for that package.
- States need to make decisions about how/when to implement coverage of services for multiple high need populations.

A Common Intervention to “Competing” Demands

Key Policy Issues

Homelessness
Community Integration
Disabilities
Health Integration
High Utilizers
Affordable Housing
Corrections

Intervention

Supportive
Housing

Don't Be That State

- Utilizing Medicaid for the homeless population is as much about bringing together homeless serving systems as it is improving health.
- Medicaid can be a powerful vehicle in solving homelessness, but it should not do so in a vacuum.
- Adequately meeting people's healthcare needs will save the state money, but Medicaid should not be a money grab for state treasuries.
- Beware of “drive-by case management”

Decision Impacts and Managing Expectations

- Governor and Legislators
- State Agencies
- Managing Care
- Providers
- Housing Developers/Operators
- Service recipients

Design and Implementation

- Targeting one or more populations;
- Understanding the needs of one or more populations;
- Including services that meet the need;
- Preparing providers and developing capacity;
- Including payment mechanisms that are reflective of provider responsibilities and costs and incentivize performance.

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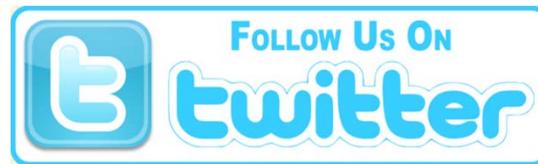
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