



Medicaid & Blended Management

**Presented by:
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Housing is Health Care: How Medicaid Financing for Services Can Help End Homelessness Wednesday April 7th

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Director of Health Systems Integration

CSH is a touchstone for new ideas and best practices, a collaborative and pragmatic community partner, and an influential advocate for supportive housing



**TRAINING AND
EDUCATION**



LENDING



POLICY REFORM

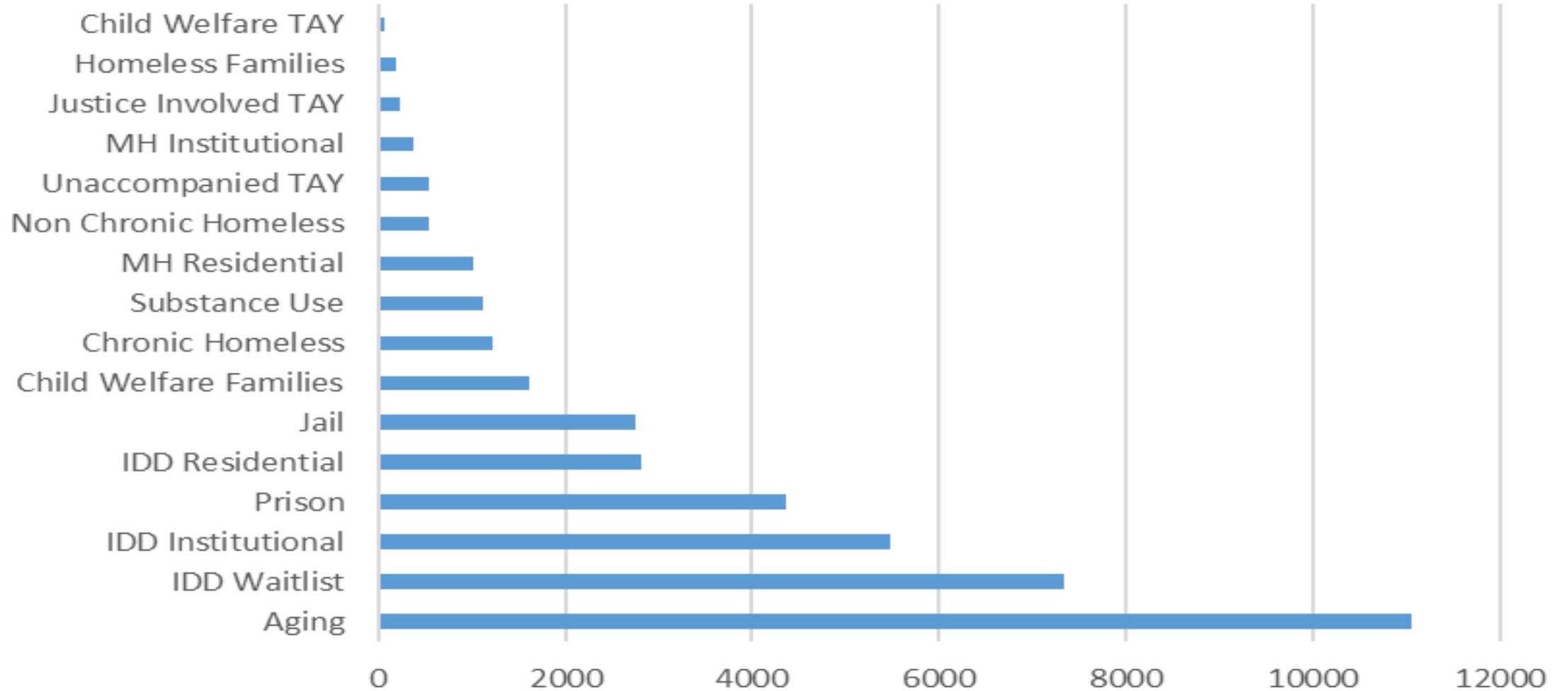


**CONSULTING &
TECHNICAL
ASSISTANCE**

IMPROVING LIVES

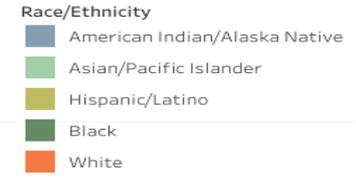
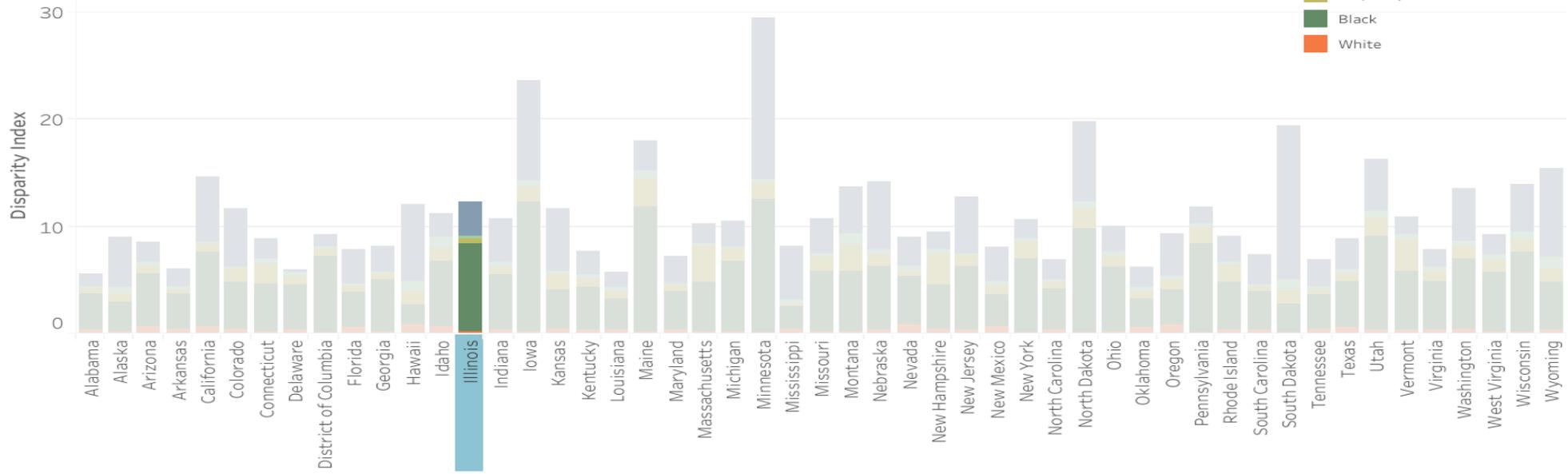


Supportive Housing Need in Illinois



Disparity Indices by Race/Ethnicity

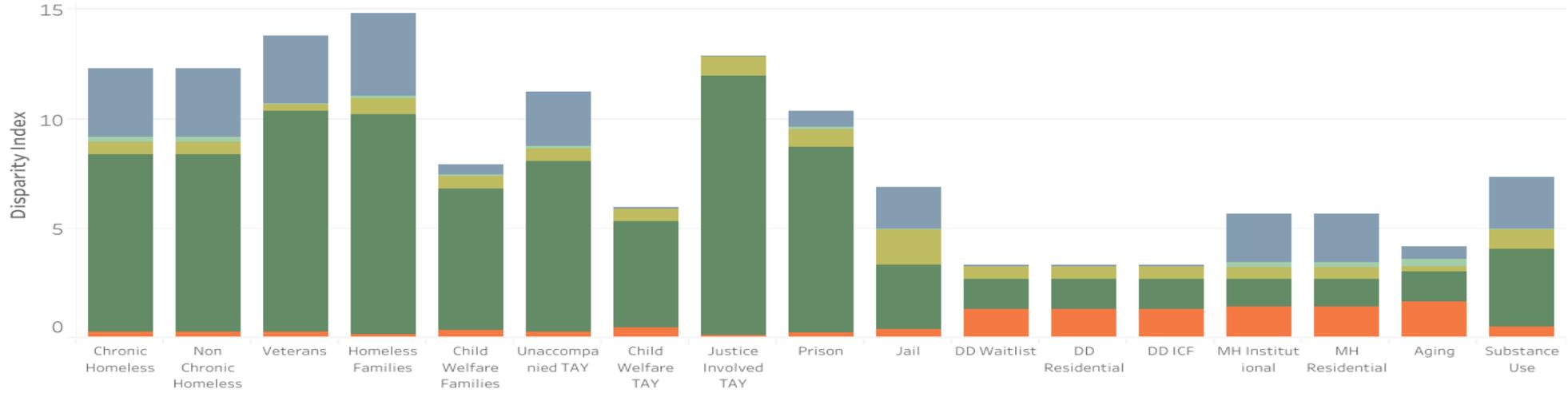
Chronic Homeless



Race/Ethnicity
Multiple values

System
Chronic Homeless

Disparity Indices in Illinois



The Disparity Index

Disparity Indices are calculated by comparing a racial group's rate of representation in a system with all other groups. It measures the likelihood of a group experiencing system involvement compared to all other groups.

Supportive Housing Financing as a Three-Legged Stool

Three Key Budgets that must be financed



Three Parts of the Puzzle for Supportive Housing Providers



Eligibility

Is the person I want to assist Medicaid eligible? Medicaid Enrolled? What is required to get them enrolled?



Benefits

What benefits are they eligible for? What services are offered in my State's Medicaid Plan?



Provider Billing

Is my agency Licensed or Credentialed to provide this service? Is my agency "In Network for the local Managed Care Organization?

CMS Recently updated with a State Health Official Letter 1/7/2021

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-26-12
Baltimore, Maryland 21244-1850



SHO# 21-001
RE: Opportunities in Medicaid and CHIP
to Address Social Determinants of Health
(SDOH)

January 7, 2021

Dear State Health Official:

The purpose of this State Health Official (SHO) letter is to describe opportunities under Medicaid and CHIP to better address social determinants of health (SDOH)¹ and to support states with designing programs, benefits, and services that can more effectively improve population health, reduce disability, and lower overall health care costs in the Medicaid and CHIP programs by addressing SDOH. This letter describes: (1) several overarching principles that CMS expects states to adhere to within their Medicaid and CHIP programs when offering services and supports that address SDOH; (2) services and supports that are commonly covered in Medicaid and CHIP programs to address SDOH; and (3) federal authorities and other opportunities under Medicaid and CHIP that states can use to address SDOH. A table that summarizes the information on key federal authorities for addressing SDOH is also included in an appendix.

- This SHO letter super cedes, the June, 2015 Bulletin
- Great summary of the various policy levers states can use to better address Social Determinants of Health
- Service opportunities are similar



What authorities are states using?

States using an 1115

California

Washington

Maryland

Massachusetts

Rhode Island

Virginia

States w/ an 1115 that is like a 1915(i)

Florida

Hawaii

States Using a 1915(i)

Minnesota and ND
(CMS approved)

CT and IL (CMS
submitted)

New Hampshire

<https://www.csh.org/resources/summary-of-state-action-medicaid-housing-services-2/>

How is my state implementing?

State Implementing

Louisiana

Minnesota

North Dakota

Rhode Island

County or Regional Implementing

California

Maryland

MCO or ACO Implementing

Hawaii

Florida

Massachusetts

Washington

CT and IL (CMS submitted)

Virginia

NV and NH are developing

<https://www.csh.org/resources/summary-of-state-action-medicaid-housing-services-2/>

State Plan Amendments or SPAs

What is a SPA?

States can request of the federal government to add benefits, services or populations served.

CMS

CMS puts out 'guidance' regarding what they are looking for and what requests are likely to be approved.

Budget Impact

SPA proposals commonly go first to the legislature because the state must increase their Medicaid funding, similarly to CMS.

How can you help?

Advocate for SPAs for tenancy support services in your state.

Common process for states in developing a housing support services benefit

Influence your state legislators
HERE!

Define population and/or policy goals

Analysis: How many people, what will this cost?

Submission to the state legislature for budget approval

Waiver written and negotiated with CMS

Common process for states in developing a housing support services benefit

State Trains on Provider Enrollment, Eligibility Determination, PCP development and process

Waiver approved: State begins to implement

Contracts negotiated between services agencies and health care payors

Activities from previous box occur: Expect a learning curve

Services Delivered, Agencies Reimbursed

Aligning Housing Resources to match services

This is likely a 2-3 year process outlined here.

Home and Community Based Services: the Path to Services

Eligibility Determination

- Often done by the state
- Financial, Diagnostic and Functional Limitations all need to meet criteria to proceed
- Eligibility is updated annually

Person Centered Plan Development

- Principles of Conflict Free Case Management
- Service Coordinator like role
- Refer to services providers that are enrolled in each particular service and coordinate between them
- Plan is updated annually

Service Delivery

- Housing or Tenancy Support Services
- Your agency may offer other services OR may regularly partner with agencies that do

After a year or when services needs change, whatever comes first

Populations Served



Pregnant Women and Children



Aged, Blind and Disabled

Other populations including

- Medicaid Expansion
- Foster Youth
- Dual Eligibles- persons with Medicaid and Medicare

Key details in IL's submitted SPA

- Services

- Housing Supports
- Supported Employment programs

- Populations

- 17 and older
- Serious and Persistent Mental Illness or SUD
- One of the following-
 - Be at risk of homelessness upon release from the settings defined in 24 CFR 578.31;
 - Demonstrate a functional impairment, including difficulty with basic activities of daily living (ADLs) that are essential for independence;
 - Be at imminent risk of institutional placement.

What will happen next

- State submitted to CMS 1/25/21
- State and CMS negotiate
- New Approved SPA to be reviewed- what changes have occurred
- The state will
 - Develop on line trainings that cover provider enrollment, individual eligibility process and billing
 - Develop capacity to implement the SPA
 - Contract with the MCOs to implement the benefit
- CSH recommends that the state
 - Align Housing Resources
 - Invest in Provider Capacity Building

What are my next steps

- Who are your residents and what is their health care coverage? What MCOs cover them? If you don't have this data, gather!
- Engage the MCOs that cover your residents and work towards being able to bill them.

- If your agency bills Medicaid somewhere in the agency vs
- If your agency DOES NOT bill Medicaid, gather information and make some decisions.

Administrative Models for Billing

Supportive Housing Agency or Housing Agency Bills for services

- Requires significant up front cost and likely changes in IT, staff, policy and procedures etc.
- Maintains accountability

Housing agency partners with another agency for Service Delivery

- Limited up front changes
- Less clear accountability

Housing Agency submits paperwork to another agency who submits claims

- Some up front changes
- Fee charged for process, decreases revenue for the agency.
- Staff changes still likely.

<https://d155kunxf1aozz.cloudfront.net/wp-content/uploads/2019/11/Medicaid-Administrative-Models.pdf>

Services Budget Tool

CSH Services Budget Tool 2.0_June 2020 [Protected View] - Excel

File Home Insert Page Layout Formulas Data Review View Add-ins ACROBAT Tell me what you want to do... Marcella Maguire Share

PROTECTED VIEW Be careful—files from the Internet can contain viruses. Unless you need to edit, it's safer to stay in Protected View. [Enable Editing](#)

B9 This budget planning tool is intended to provide communities and organizations with a framework for understanding and planning for service costs in supportive housing. There are 5 drivers that will impact program budget planning.

1. Target populations to be served in supportive housing

CSH

About the CSH Services Budget Tool 2.0 (SBT 2.0)

This budget planning tool is intended to provide communities and organizations with a framework for understanding and planning for service costs in supportive housing. There are 5 drivers:

1. Target populations to be served in supportive housing
2. Services Staffing Model (ACT, ICM, TSS, CTI)
3. Housing Model (site-based or scattered site)
4. Start Up Costs
5. Revenue Structure & Reimbursement Restrictions

Introduction and Quick Links Click on any box below to take you to the corresponding weblink

- [User Guide & Tutorials](#)
- [Training on Staffing Models, Approaches and Services Funding](#)
- [References & Resources](#)

1. About the Service BudgetTool 2. Budget Summary Output 3. Basic Input & Assumptions 4. ACT 5. ICM 6. SH Tenancy Su ...

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THANK YOU!

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Twitter- @cella65



stay connected



csh.org

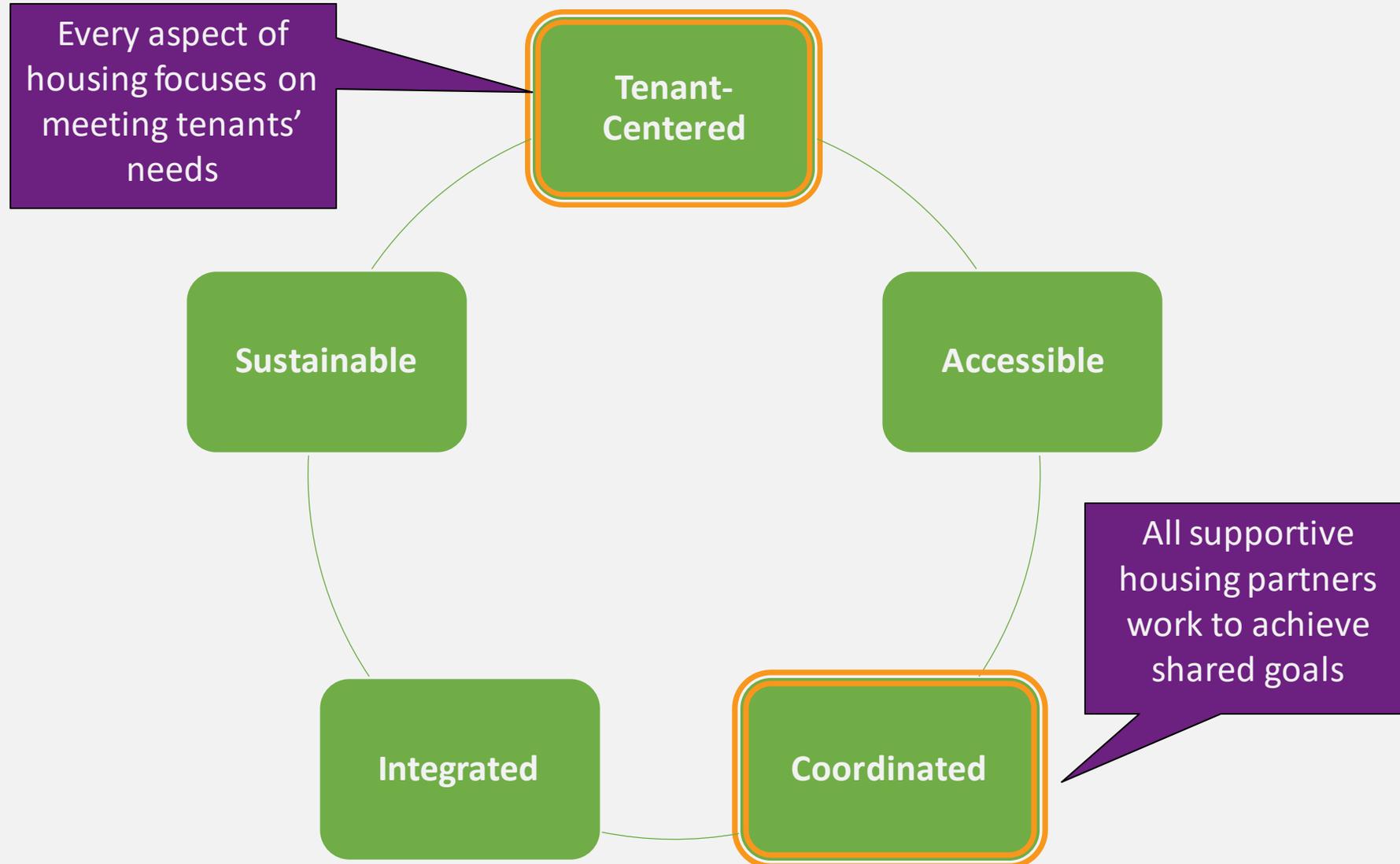


Blended Management

What is Blended Management

- Blended Management= Coordination
- Clinical/Supportive Services Staff & Housing & Property Management
- Tenants & the center and included in coordinated actions

Dimensions of Quality



Defining Roles in Supportive Housing



Tenant Responsibilities

Pay Rent

Abide by the Lease

Communicate with the
Landlord



Property Management Responsibilities

Tenant Selection

Maintenance

Operations

Fair Housing

Fiscal Management



Supportive Services Staff Responsibilities

Service Planning

Coordinating Healthcare

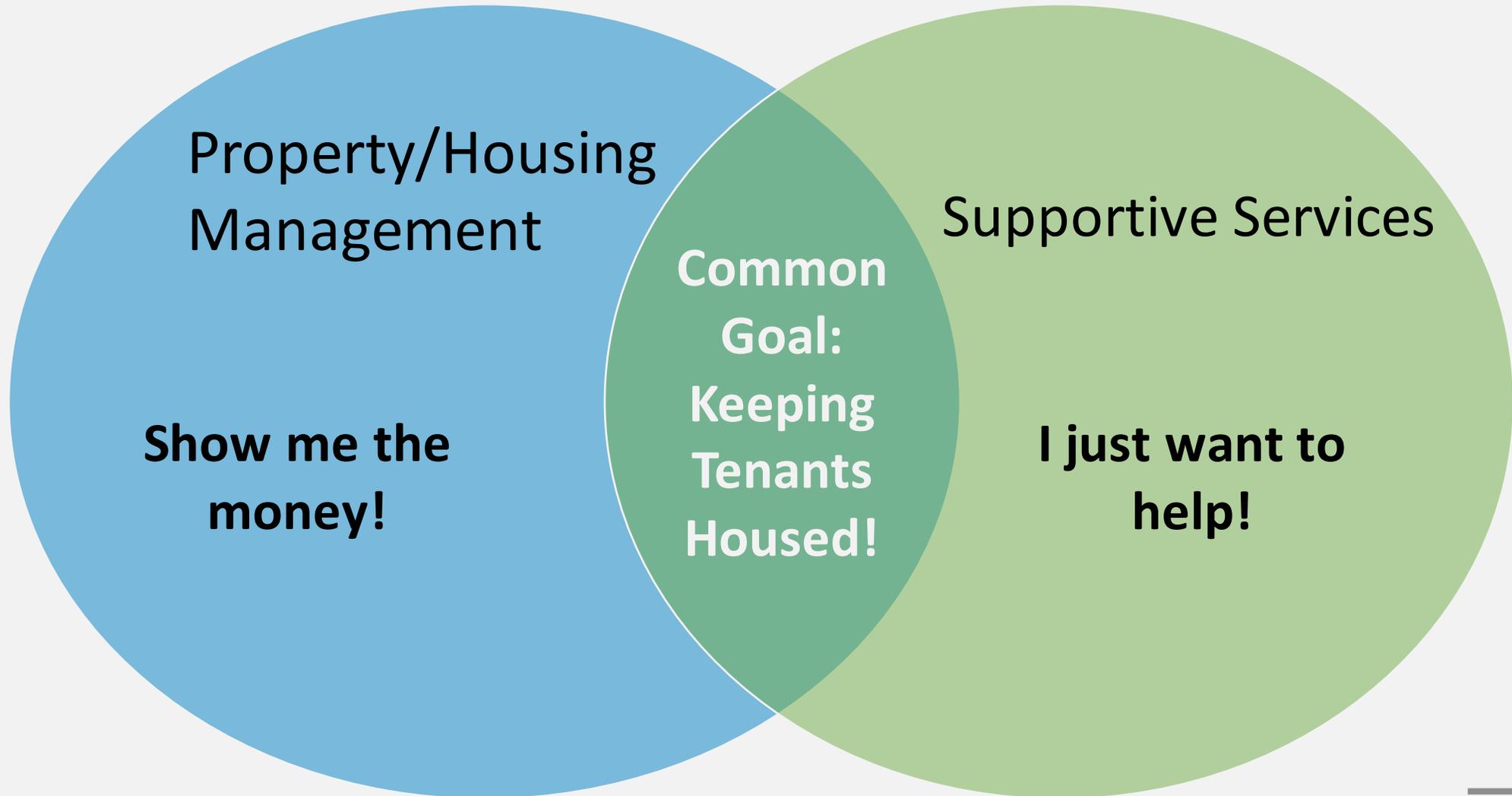
Helping Manage Crisis

Developing Life Skills

Connecting to Community



Recap: Roles



Practical Strategies for Coordination

Clarifying Roles

Cross Train



Write it Down!



Cross Training

- Property management staff can train services staff on their day-to-day operations
- Supportive Services staff can train property management staff on their day-to-day operations.



Separate & Distinct Roles

- Potential conflicts when property/housing management and service providers have same roles.
- Development of expertise.
- Collaborating brings new ideas.
- Creative solutions arise out of healthy tensions and conflict.
- Housing seems more generic and less institutional with distinct roles.
- Clarity for tenant that services are not a condition of tenancy.

Embracing Good Tension



**Respect the different
roles of each partner**

**Understand all roles
are necessary**

**Acknowledge and
use built-in tension
between roles**

Educate Tenants: Lease Agreement

Formalizes the rights and responsibilities of both the landlord and tenant

Legally enforceable

States clear expectations



Key Areas of Clarity & Coordination



Educating and supporting tenants



Soliciting and using tenant input



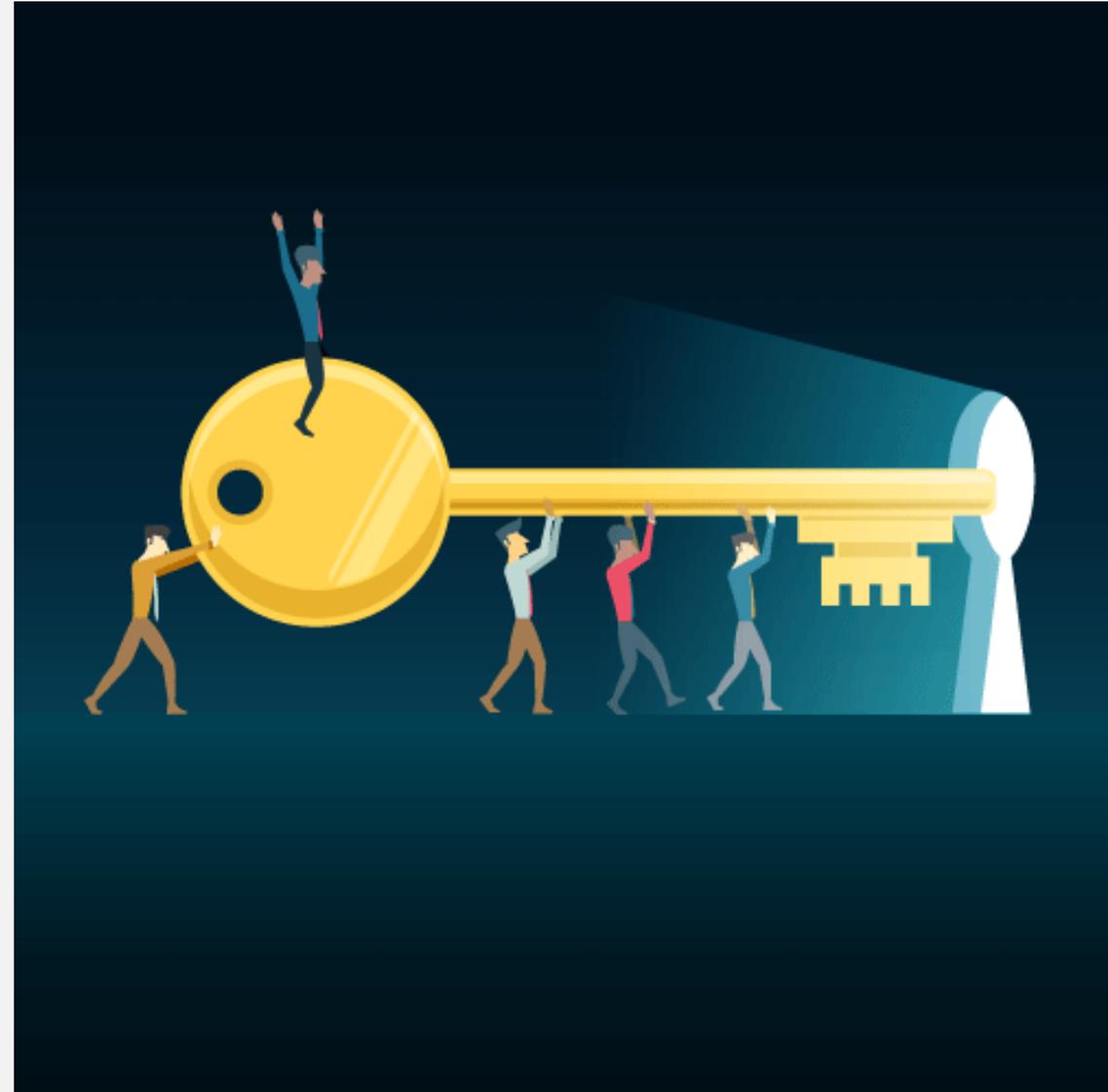
Keeping tenants stably housed



Ensuring the ongoing quality of the physical unit



Tracking outcomes and improving quality



Key Areas of Clarity & Coordination

Unit Location: first point of contact

Presentation of unit to Participant

Application & Lease Signing Procedures

Orientation of Incoming Tenants

Rent Collection

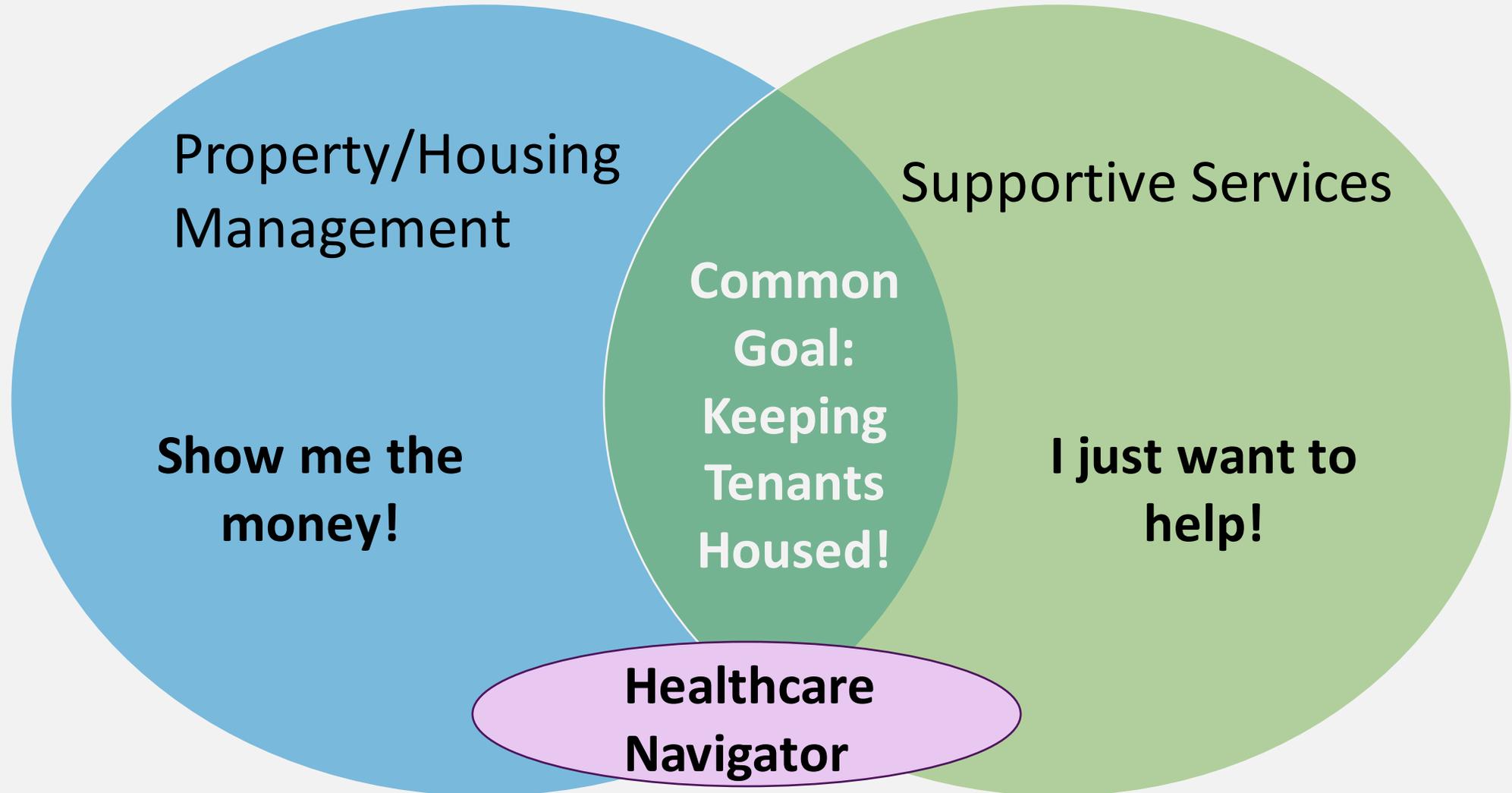
Dealing with Nuisance and Disruptive Behavior

Procedures in Crises

Tenant Grievance Procedure



Roles



Planning Ahead: Release of Information (ROI)



Confidentiality of Protected Health Information



ROI to share information within the same organization is generally not required.



Cannot require tenants to sign ROI or authorization forms.



Tenants may revoke their release or authorization form at any time.

HIPAA: Protected Health Information (PHI)

PHI is individually identifiable information relating to:



Physical Health



Mental Health



Condition



**Provision of
Health Care**



**Payment for
Health Care**

To share PHI, must obtain a signed “Authorization for Disclosure of Protected Health Information”

Ensuring Confidentiality



Clear, consistently enforced written policies and procedures are a must.

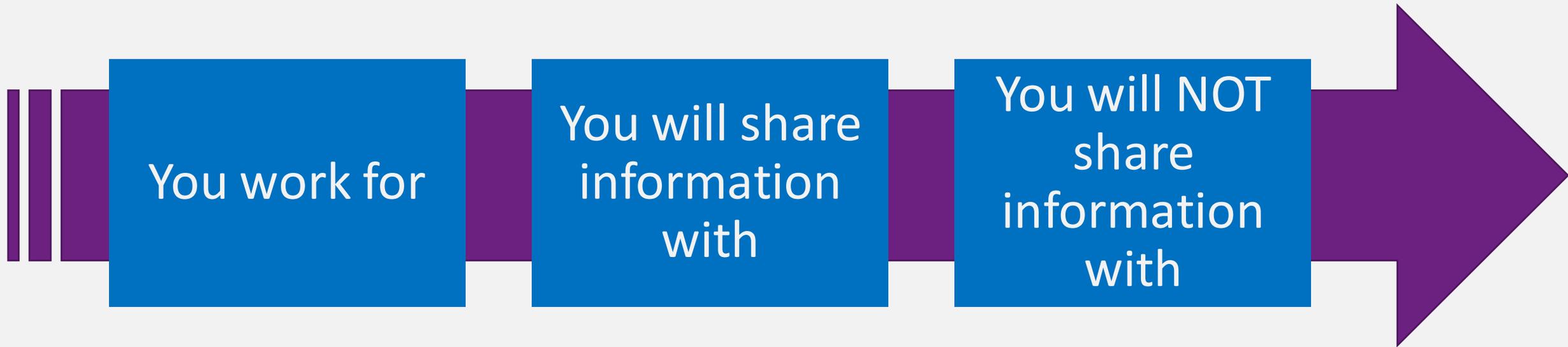
Physical environment: separate offices, closed doors.

Training for staff at orientation and regularly thereafter.

Share the “minimum necessary” to accomplish your purpose.

General Policies for Teams

Clearly Communicate to tenants who:



Information obtained by services staff during screening interviews is confidential

Frequent, Ongoing Communication

- **Formal**

- Established meeting time on regular basis
- Standard agendas
- Appropriate and equal staffing at meetings

- **Informal**

- Understanding of who and when to call each other
- Sometimes you'll be speaking many times a day!



What are formal ways you communicate between roles at your agency? Informal ways?

QUESTION

Conflict Resolution Plans



- There should be an established way that conflict is resolved:
 - Outline a plan for how to resolve conflict.
 - Mediation, as a last result.

The image features five overlapping speech bubbles of different colors: red, orange, blue, light orange, and teal. Each bubble contains a large white question mark. The text "Time for Questions" is centered over the bubbles in a white, bold, sans-serif font with a slight drop shadow.

Time for Questions