



# Partnership between Health Plan, Hospitals and Homeless Service Agency to House the Most Vulnerable



**L.A. Care**  
HEALTH PLAN

For a Healthy Life

[www.lacare.org](http://www.lacare.org)

**National Health Care for the Homeless  
Council Conference**

May 17, 2018

8:30am – 10:00am

Presented by:

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# Learning Objectives

**By the end of this workshop, participants will:**

- 1) Understand the basics of how a managed care plan operates and the multiple, complex health and social issues facing the homeless population in Los Angeles County
- 2) Analyze strategies that L.A. Care, Housing for Health, Brilliant Corners and community partners have utilized to better identify homeless individuals and when possible match with permanent supportive housing
- 3) Determine how these strategies and lessons learned could be adapted to other jurisdictions and situations to connect homeless individuals with needed health and supportive services

# Presentation Outline

- L.A. Care Health Plan & Medi-Cal Managed Care 101
  - Basic Definitions and Los Angeles Context
- Homelessness in L.A. County
- Homeless Health Risks and Outcomes
- Homeless Member Health Needs
- Strategies for Health Plans to Address Homelessness
- Overview of Whole Person Care Pilot
- Background on Housing for Health
- L.A. Care's Partnership with Housing for Health & Brilliant Corners



# About L.A. Care Health Plan

- Nation's largest publicly-operated health plan
- Over 2 million members
- Serving low-income residents of L.A. County since 1997
- A leader in safety net support for L.A. County's vulnerable and low-income patients



# Medi-Cal Managed Care 101

## *Basic Definitions and Los Angeles Context*

# What is Medi-Cal?

- California's Medicaid program
- Under the Affordable Care Act, Medi-Cal expanded to serve low-income **adults without dependent children** on January 1, 2014.

## Medi-Cal is NOT

- Covered CA coverage sold on the exchange
- My Health LA – operated by L.A. County Department of Health Services (DHS)

# What is Medi-Cal Managed Care?

**Managed care is:**

*A method of delivering health care through a network of providers contracted with the health plan.*

*Also known as an HMO*

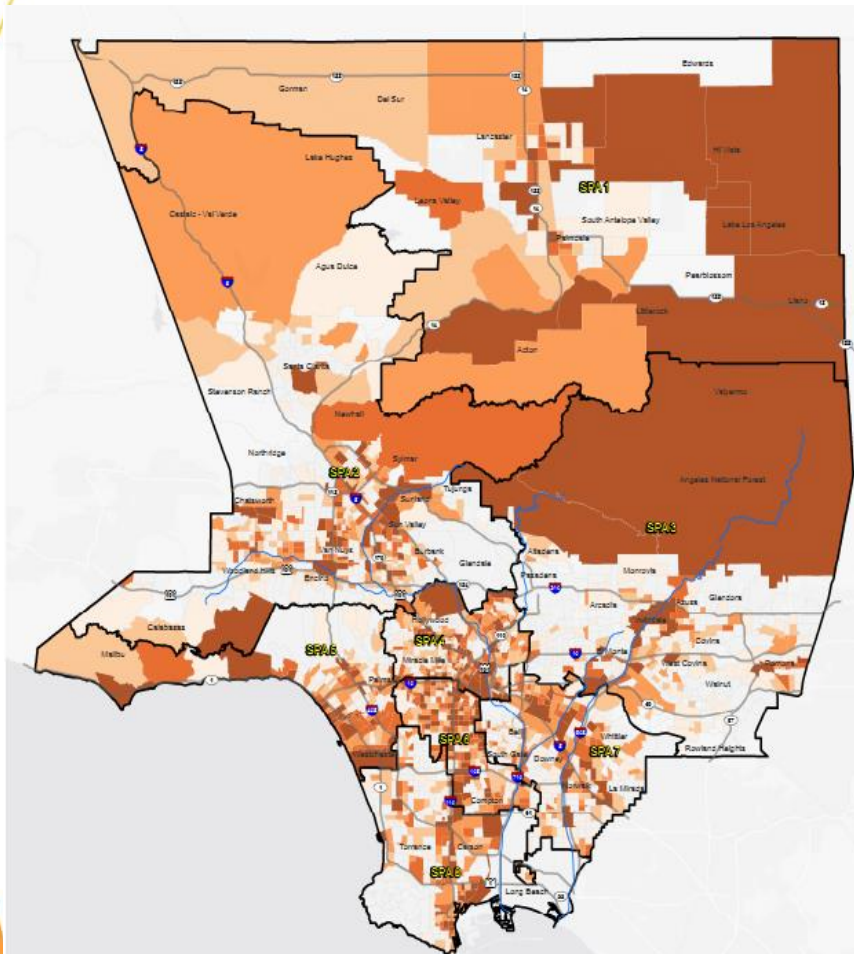
*Health plan ensures timely access to needed care and can assist with resolving problems*

*Goal of managed care is to deliver coordinated care that is timely, high quality and cost-effective*

# Homelessness in L.A. County

## Highlights from L.A. County's 2017 Homeless Count

- 57,794 people are experiencing homelessness in L.A. County based on the 2017 homeless count, **a 23% increase from 2016**
- 74% of overall homeless population is unsheltered in L.A. County, **a 23% increase from 2016**
- **And yet...** County and homeless service agencies were successful in housing 14,000 people in 2016
- Homelessness is rising due to stagnating incomes, high housing costs, and low vacancy rates: **2.7% in L.A. County, compared to 7% nationally**



2017 LAHSA Homeless Count:  
<https://www.lahsa.org/homeless-count/reports>



# Homeless Health Risks and Outcomes

## At risk for...

Delays in treatment

Hospitalizations for preventable conditions

Higher mortality and acute/chronic illness

Untreated physical, MH or substance use conditions

## Results in...

Ongoing instability and lack of housing

Unnecessary ER use and potential difficult discharges

Ongoing and worsening health outcomes, poor access to care



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Photo Credit: Los Angeles Times, February 2017

# Homeless Member Health Needs

*Key Themes from Homeless Consumer Listening Sessions and Homeless Organization Expert Panel:*



Make access to care easy & welcoming



Build trust, communicate, and coordinate



Support the “whole person”



Partner with trusted organizations to outreach and engage



Connect to housing navigation

Based on two listening sessions w/formerly homeless individuals held in November 2015 and a homeless organization expert panel. Both sessions were conducted by the Integrated Behavioral Health Partners (IBHP) in collaboration with Corporation for Supportive Housing & L.A. County Department of Mental Health. The panel was facilitated by IBHP as well. Both sessions and the panel were generously funded by the Blue Shield of CA Foundation and were completed by April 2015.



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# Strategies for Health Plans to Address Homelessness

## *Challenges and Opportunities*

# CMS Informational Bulletin: June 2015

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



## CMCS Informational Bulletin

**DATE:** June 26, 2015  
**FROM:** Vikki Wachino, Director  
Center for Medicaid and CHIP Services  
**SUBJECT:** Coverage of Housing-Related Activities and Services for Individuals with Disabilities

This Informational Bulletin is intended to assist states in designing Medicaid benefits, and to clarify the circumstances under which Medicaid reimburses for certain housing-related activities, with the goal of promoting community integration for individuals with disabilities, older adults needing long term services and supports (LTSS), and those experiencing chronic homelessness<sup>1</sup>. Consistent with statute, CMS does not provide Federal Financial Participation (FFP) for room and board<sup>2</sup> in home and community based services,<sup>3</sup> but can assist states with coverage of certain housing-related activities and services.

This Bulletin underscores CMS' commitment to help states expand home and community-based living opportunities consistent with the Affordable Care Act, the implementation of the Home and Community Based Services (HCBS) settings final rule governing Medicaid's 1915(c) HCBS Waiver program, 1915(i) HCBS State Plan Option, and 1915(k) Community First Choice State Plan Option<sup>4</sup>, as well as the Americans with Disabilities Act and the Supreme Court's decision in *Olmstead v. L.C.*<sup>5</sup>. The information in this Bulletin is based on evidence from studies demonstrating that providing housing-related activities and services facilitates community integration and is cost effective. This Bulletin is also intended to help states design benefit programs that acknowledge the social determinants of health, and contribute to a holistic focus on improvement of individual health and wellness.

### Describing Housing-Related Activities and Services

Most broadly, housing-related activities include a range of flexible services and supports available to individuals with disabilities and older adults needing LTSS, as well as collaborative efforts among key Medicaid and housing agency staffs and stakeholders. In recent years, the

✓ States Can Design Medicaid to Pay for Housing-Related Activities & Services

✓ Housing transition services,

✓ Tenancy support services,

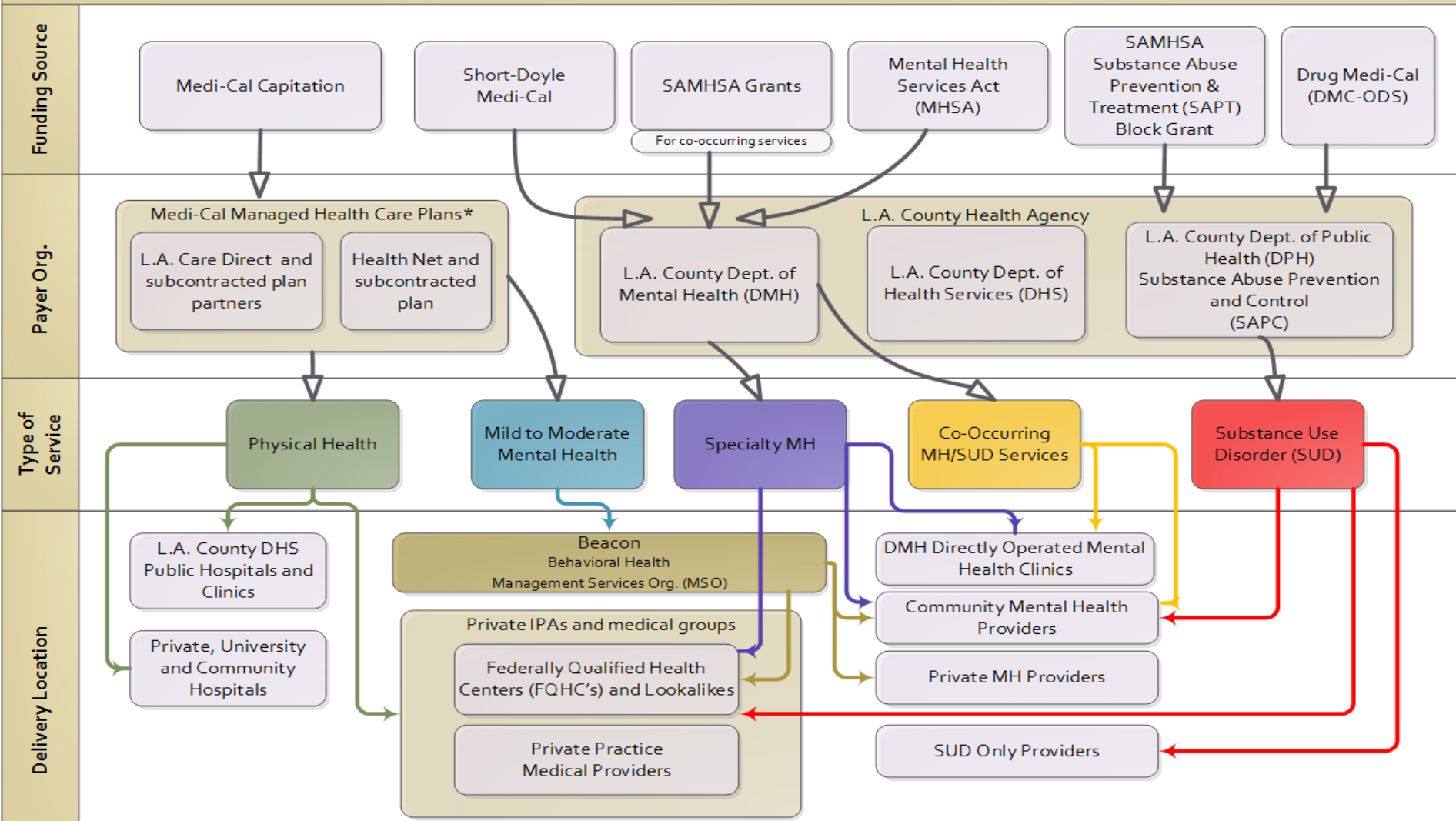
✓ One-time costs of housing.

✗ Medicaid Can't Pay for Long-Term Housing Costs

Full bulletin here: <https://www.medicaid.gov/federal-policy-guidance/downloads/cib-06-26-2015.pdf>

# Navigating the Complexity of Payers & Providers

## Los Angeles County Payer and Provider Relationships for Adult Medi-Cal Physical Health, Mental Health (MH) and Substance Use Disorder (SUD) Services



\*Provider networks vary by Health Plan

# Strategies for Health Plans to Address Homelessness

Invest in addressing social determinants of health to achieve better health outcomes and lower costs.

Fund move-in costs to permanent supportive housing

Partner with CBOs focusing on transportation, healthy food access, etc.

Prioritize outreach strategies that include homeless service providers, hospitals, MCOs, and first responders

Collaborate with hospitals, homeless health providers on common clients

*Not using address to confirm ID if member states they're homeless*

Leverage data and analytics capacity to identify homeless members and target interventions

*Read-only access to HMIS – individual client lookup*

*LAHSA Data Match on confirmed homeless members*

Develop community health worker and peer support outreach within multi-disciplinary teams to serve super-utilizers

WPC-LA partnerships to mobilize field-based staff

Involvement in coalitions working on ER high-utilizers

Expand formal contracting relationships to build network of care with community-based providers and homeless service agencies

Housing for Health Pilot

Capacity Building support to spread TA and scale up

# Strategies for Health Plans to Address Homelessness

Not using address to confirm ID if member states they're homeless

- Trained member services on using name & DOB to confirm ID, rather than address
- Allows member to be helped immediately while on phone, often with case manager

Read-only access to HMIS – individual client lookup

- Allows health plan staff to connect with case managers at other homeless service agencies to coordinate care
- Social Services, MLTSS, Care Management & Behavioral Health departments use HMIS

LAHSA Data Match on confirmed homeless members

- L.A. Care's member database is matched with HMIS to provide historical information on member/client overlap
- This allows for proactive outreach and case management of homeless members

# Overview of the Whole Person Care Pilot

*An example of inter-agency  
collaboration to link vulnerable Medi-Cal  
members with supportive housing and services*



# Whole Person Care (WPC) Pilot



## Background

Part of 1115 Medi-Cal Waiver

Lead Agency: L.A. County DHS

Funded CY 2016-2020

Program Start Dates:  
Mid – Late 2017

## Goals

Build infrastructure & community capacity

Improve care to most vulnerable Medi-Cal members

Address social & behavioral health needs

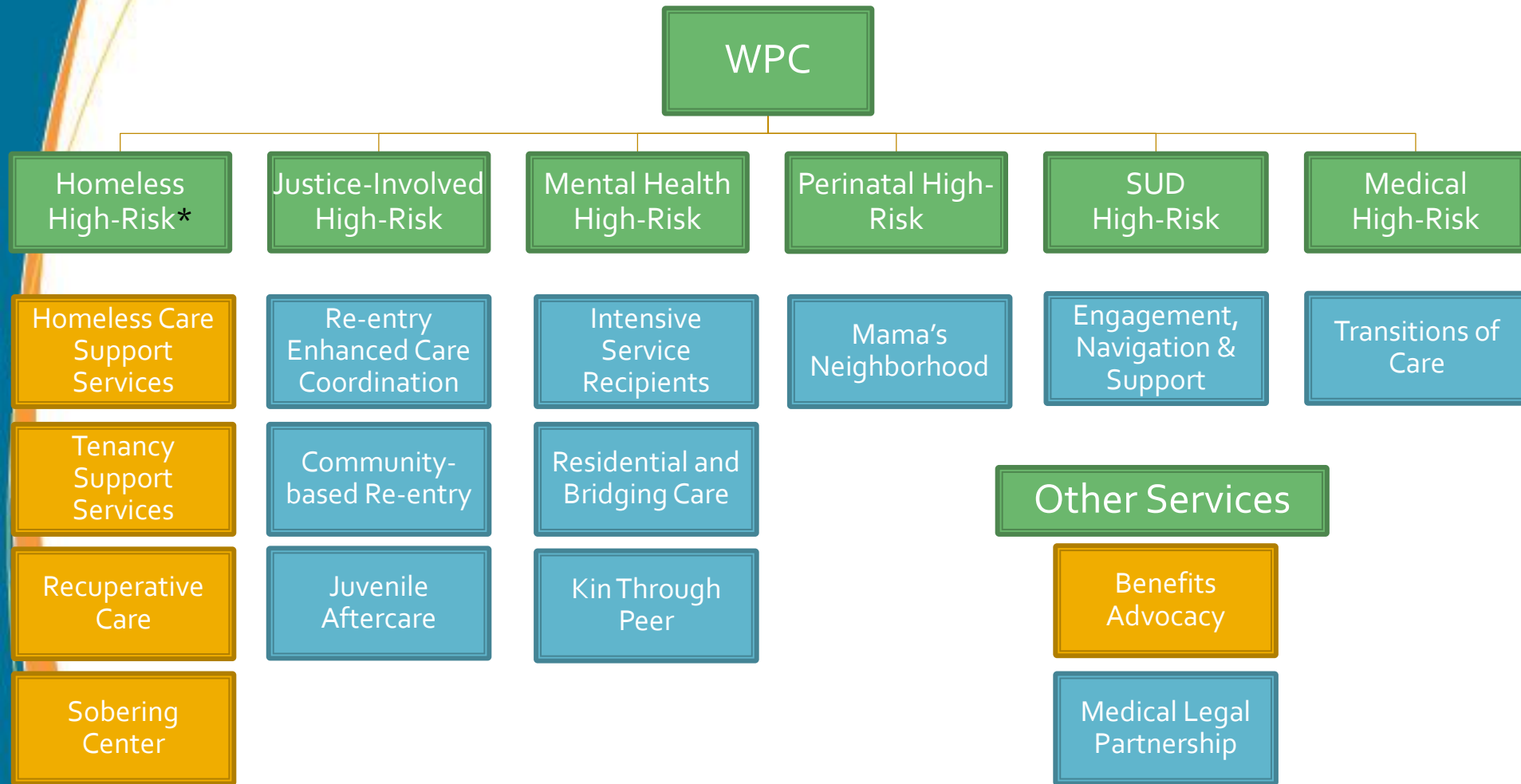
## Impact

\$1.26B over 5 years (50% FFP)

19,000+ clients served to date; 50,000 clients will be served

600 new jobs

# WPC Populations & Programs



\*WPC does not cover housing subsidies



# Housing for Health Partners



[Housing for Health \(HfH\)](#) is a program administered through the Los Angeles County Department of Health Services (LADHS).

Operates WPC homeless high-risk & benefits advocacy programs. Also provides permanent supportive housing, rapid rehousing, and other interventions for homeless people with complex health needs.

Housing for Health contracts with [Intensive Case Management Services \(ICMS\)](#) providers across L.A. County to provide supportive services to high-need homeless individuals.

[Brilliant Corners](#), a nonprofit supportive housing agency, that acts as fiscal intermediary for Housing for Health and helps locate housing opportunities for clients.

Brilliant Corners operates the [Flexible Housing Subsidy Pool](#) to provide a way for the County and other partners to finance rent, move-in support and housing resources.

# Housing for Health Services



## Intensive Care Management Services (ICMS)\*

- Outreach & Engagement
- Relationship-Building
- Needs Assessment & Treatment Planning
- Connection & Accompaniment to Health Services
- Establishment of Identity & Benefits
- Life skills coaching and peer support
- Support to member in achieving self-identified health & wellness goals

## Housing Navigation & Tenancy Support Services

- Housing Needs Assessment
- Facilitation of Housing Application
- Support and Accompaniment for Housing Search
- Lease & Move-In Assistance
- Wellness Checks to Housing Unit
- Identify and address barriers to success in housing

## Rental Subsidy through Flexible Housing Subsidy Pool (FHSP)

- Flexible for use in scatter-site housing with private landlords
- Affordable (max. client contribution = 30% of income)
- Long-term, to provide continued support to high-acuity clients
- Can serve clients who don't meet federal housing criteria

# POPULATION SERVED BY HOUSING FOR HEALTH

- Homeless individuals with physical and/or behavioral health conditions, high utilizers of public services, and other vulnerable populations.

# GOALS

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- 1. Create 10,000 units of housing**
- 2. End homelessness in LA County**
- 3. Reduce inappropriate use of expensive health care resources**
- 4. Improve health outcomes for vulnerable populations**

# INTERIM HOUSING

## **Recuperative Care (~300 Beds)**

- Provides short-term care for homeless clients who are recovering from an acute illness or injury or have a condition that would be exacerbated by living on the street or in shelter
- Program offers temporary housing, medical and mental health monitoring, meals, case management, and transportation

## **Stabilization Housing (~500 Beds)**

- Provides short-term housing and support for homeless clients who are moving into permanent housing soon
- Program offers temporary housing, meals, case management, and transportation

# PERMANENT HOUSING

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## **Permanent Supportive Housing**

- Permanent housing with rental subsidies and on-site/mobile supportive services for homeless clients with complex health and/or behavioral health conditions

## **Rapid Re-Housing**

- Time limited rental assistance and targeted supportive services for clients with low to moderate housing barriers



# COMPONENTS OF HFH PERMANENT HOUSING

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## HFH Permanent Housing includes:

- Rental Subsidies (Flexible Housing Subsidy Pool and Federal subsidies)
- Project based housing or housing navigation for scattered site housing
- Intensive Case Management Services

# INTENSIVE CASE MANAGEMENT SERVICES (ICMS)

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- **Every client** connected to services
- **Individualized service** planning; linkages to health, mental health, and substance use disorder services; benefits establishment
- **Help clients retain** housing and reach health and wellbeing goals
- **Services provided by** on-site staff or mobile teams

# L.A. Care's Partnership with Housing for Health & Brilliant Corners



# Partnership Overview



- L.A. Care awarded \$4 million to Brilliant Corners as part of a \$20 million, five year commitment (contingent upon grantee performance, availability of funds, & board approval).
- L.A. Care's grant provides five-year rental subsidies to house 300 individuals experiencing homelessness via Housing for Health
- Provides pathways to permanent housing for high-need L.A. Care members experiencing homelessness
- Increase resources available to address homelessness in L.A. County by leveraging federal matching opportunities through the Whole Person Care pilot, and County funding (e.g. Measure H)

# Efficacy of Housing First Model

*RAND evaluation of data from 890 Housing for Health clients placed in Permanent Supportive Housing (PSH) over the first 2.5 years of the program*



↓ 68% reduction in emergency room visits

↓ 60% reduction in crisis stabilization services

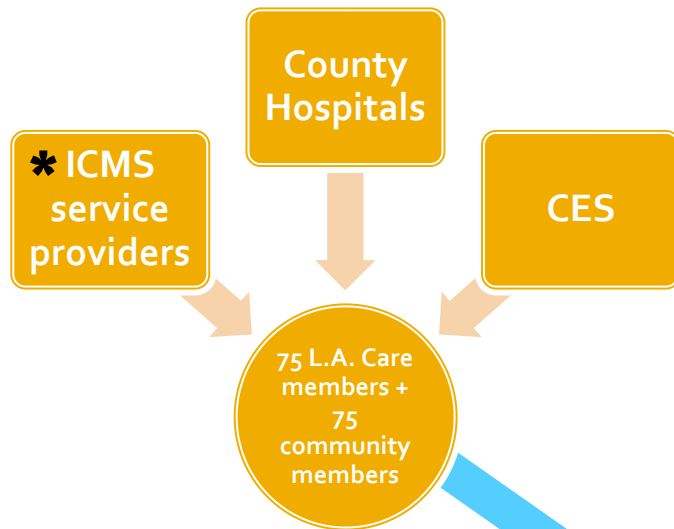
↓ 78% reduction in inpatient services

## 20% net cost savings

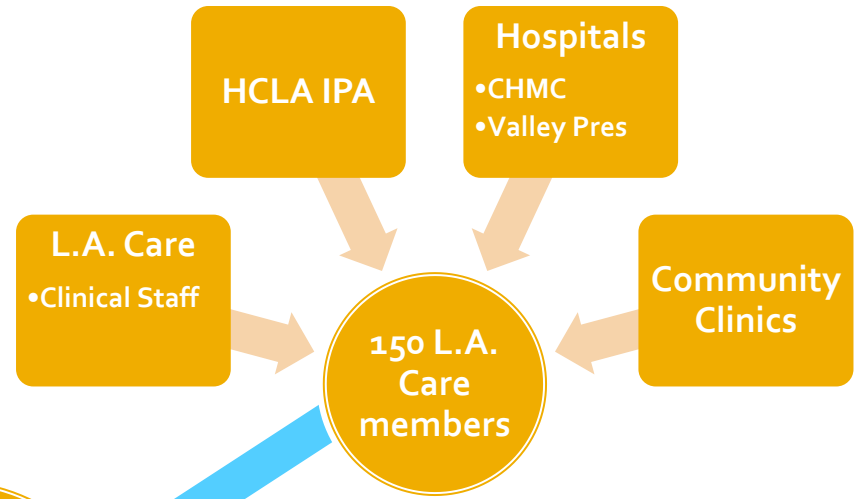
- After receiving PSH, use of public services declined by 60%
- Statistically significant declines in:
  - Health service utilization
  - Crisis stabilization use
  - OP mental health services
  - General Relief

# Identifying & Referring Members

## Existing HfH Infrastructure



## New L.A. Care Partners



300 new clients

\* Intensive Case Management Services providers: over 25 community organizations who offer comprehensive services to high-need homeless individuals.

# Comprehensive strategies for housing individuals

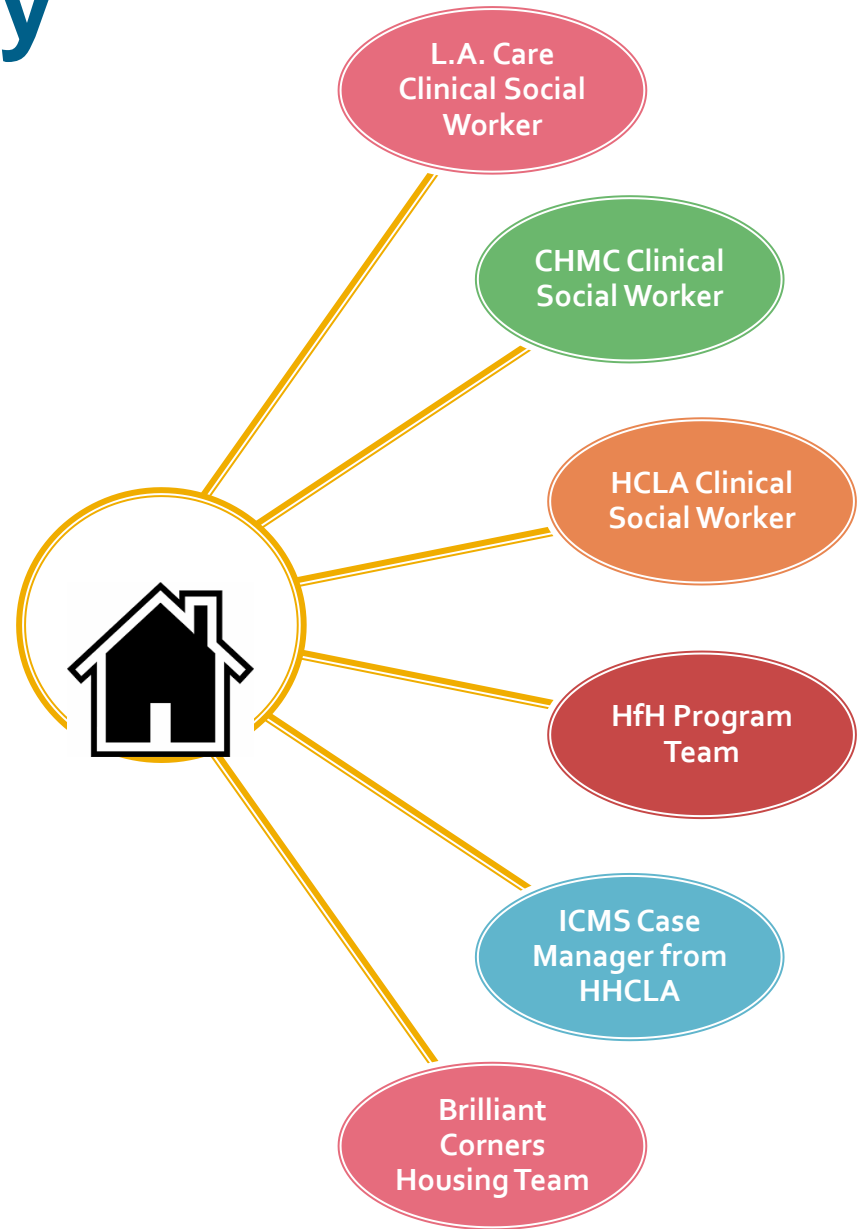
- **Assess market demand**
  - Stay ahead of changes in average rental cost
- **Biweekly Brilliant Corners calls w/ DHS**
  - Discuss logistics of open cases
  - Communication re market
- **Unit holds**
  - If there is a vacant unit, Brilliant Corners can send check to landlord the next day to secure the unit.
  - Landlord stops marketing the unit to other individuals.
- **Housing for Health Case Managers**
  - provide psychosocial, ICMS prior to, during, and after move-in.

# Partnership Challenges

Challenge	Strategies to Address	Lead Agency
Expanding Intensive Case Management staff in competitive market (Measure H, WPC, DMC-ODS, ODR)	<ul style="list-style-type: none"> <li>• Training &amp; recruitment programs for ICMS staff</li> <li>• Technical assistance to help ICMS agencies expand</li> </ul>	Housing for Health
Low vacancy rate in housing market	<ul style="list-style-type: none"> <li>• Landlord recruitment programs, incentives, and support services</li> <li>• Rental flexibility to meet market rates</li> <li>• Unit holds for vacant units</li> </ul>	Brilliant Corners
Building new partnerships & infrastructure	<ul style="list-style-type: none"> <li>• Regular communication &amp; leadership support</li> <li>• Flexible program design to accommodate what works</li> </ul>	L.A. Care & Housing for Health
Identifying & engaging vulnerable, high-acuity population	<ul style="list-style-type: none"> <li>• Strong partnerships across agencies &amp; partners</li> <li>• Providing continuing ICMS support prior to, during, and after move-in.</li> </ul>	L.A. Care & Housing for Health



# Ma' Lissa's Story



# Discussion & Questions

- 1) What strategies discussed today might be transferable to your jurisdiction/situation and what partners (health plan, hospital, clinic, homeless authority, housing provider, or community partners) would you need to connect with?
- 2) What barriers would need to be addressed to initiate a pilot that brings together health and housing resources to serve homeless individuals?
- 3) What is one thing you'll bring back to your organization from today's presentation?

# Additional Resources



## Resource Name

## Website Link

Whole Person Care

<https://dhs.lacounty.gov/wps/portal/dhs/wpc>

Housing for Health

<https://dhs.lacounty.gov/wps/portal/dhs/housingforhealth>

Flexible Housing  
Subsidy Pool

[http://file.lacounty.gov/SDSInter/dhs/218377\\_FHSPo82614\(bl-eeed--screenview\).pdf](http://file.lacounty.gov/SDSInter/dhs/218377_FHSPo82614(bl-eeed--screenview).pdf)

Brilliant Corners

<http://brilliantcorners.org/brilliant-solutions/housing-for-health/>



# Contact Information

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