



# Introduction to Washington's New Supportive Housing Services Medicaid Benefit

*Washington Low Income Housing Alliance*

The Source for  
Housing Solutions



# Our Mission

Advancing housing solutions that:



Improve lives of  
vulnerable  
people



Maximize public  
resources



Build strong,  
healthy  
communities

# Purpose of this webinar

## Focus: Supportive Housing Services Benefit

Who will be  
eligible?  
What service  
are covered?

How is  
this going  
to work?



# What we will cover

## The basics

Quality  
Supportive  
Housing

Medicaid  
and  
Supportive  
Housing  
Services

## Waiver Implementation

Eligible  
Beneficiaries

Eligible  
Services

Implementation  
Avenues

# Poll!





# How we got here





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# SUPPORTIVE HOUSING

# Poll!





# Quality Supportive Housing

**Supportive Housing pairs affordable housing with voluntary services to help the most vulnerable people live with autonomy, dignity, and stability.**



# Quality Supportive Housing

Targets the most vulnerable people.

Is affordable.

Requires only standard lease obligations.

Engages tenants in voluntary services.

Coordinates among partners.

Is integrated into the community.

# Supportive Housing is not:



- ❑ Treatment
- ❑ Transitional or time limited
- ❑ Licensed community care

# Supportive Housing Certification

## Quality Certification



Bud Clark Commons  
Portland Oregon  
Certified Silver

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MEDICAID

# Poll!







Health  
Insurance

# Medicaid & Supportive Housing Services

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

<sup>1</sup> CMS and SAMHSA are working on providing additional guidance to clarify the circumstances under which Medicaid reimburses for certain housing-related activities and services for persons experiencing chronic homelessness.

<sup>2</sup> Room and board also includes capital funds used for new construction or rehabilitation of housing.

<sup>3</sup> There are two exceptions that are described in the paragraph on 1915(c) waivers on page 5.

<sup>4</sup> Final Rule - CMS 2249-F - 1915(i) State Plan Home and Community-Based Services, 5-Year Period for Waivers, Provider Payment Reassignment, Setting Requirements for Community First Choice, and CMS 2296-F 1915(c) Home and Community-Based Services Waivers, published January 10, 2014, available at <http://www.medicare.gov/HCBS>

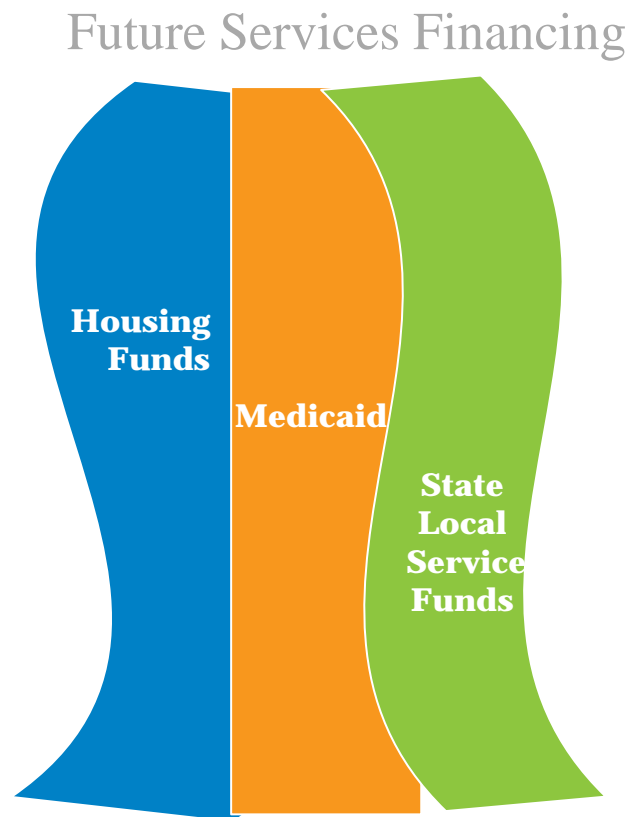
<sup>5</sup> Americans with Disabilities Act and as interpreted in the U.S. Supreme Court's 1999 decision in *Olmstead v. L.C.* (*Olmstead*). For details: Statement of the Department of Justice on Enforcement of the Integration Mandate of Title II of the Americans with Disabilities Act and *Olmstead v. L.C.* [http://www.ada.gov/Olmstead/olka\\_Olmstead.htm](http://www.ada.gov/Olmstead/olka_Olmstead.htm)

*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.*

# The goal: Leverage and Expand

- Supportive housing improves health outcomes and reduces costs.
- Adding a sustainable source of funding for people who need these services long-term will allow us to more strategically leverage other resources that are needed to take supportive housing to scale.

*Note: Medicaid cannot supplant existing fund sources.*



# The 1115 Waiver

- A contract between the state and the federal government
- 5 year demonstration
- NOT A GRANT
- Allows for more flexible use of Medicaid \$
  - Federal investments in innovations that will result in cost savings by the end of the demonstration
- Must be budget neutral



Shared with permission from Washington State  
Health Care Authority

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## ELIGIBLE SERVICES

# Eligible Services

- **Housing transition services that provide direct support to help individuals obtain housing, including:**
  - Housing assessment and development of a plan to address barriers.
  - Assistance with applications, community resources, and outreach to landlords.
- **Housing tenancy sustaining services that help individuals maintain their housing, including:**
  - Education, training, coaching, resolving disputes, and advocacy.
- **Activities that help providers identify and secure housing resources.**





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## ELIGIBLE BENEFICIARIES

# Eligible Beneficiaries



The benefit will pay for medically-necessary services for the following subpopulations:

- People experiencing chronic homelessness
- Individuals with frequent or lengthy institutional contacts
- Individuals with frequent or lengthy adult residential care stays
- Individuals with frequent turnover of in-home caregivers
- Those at highest risk for expensive care and negative outcomes

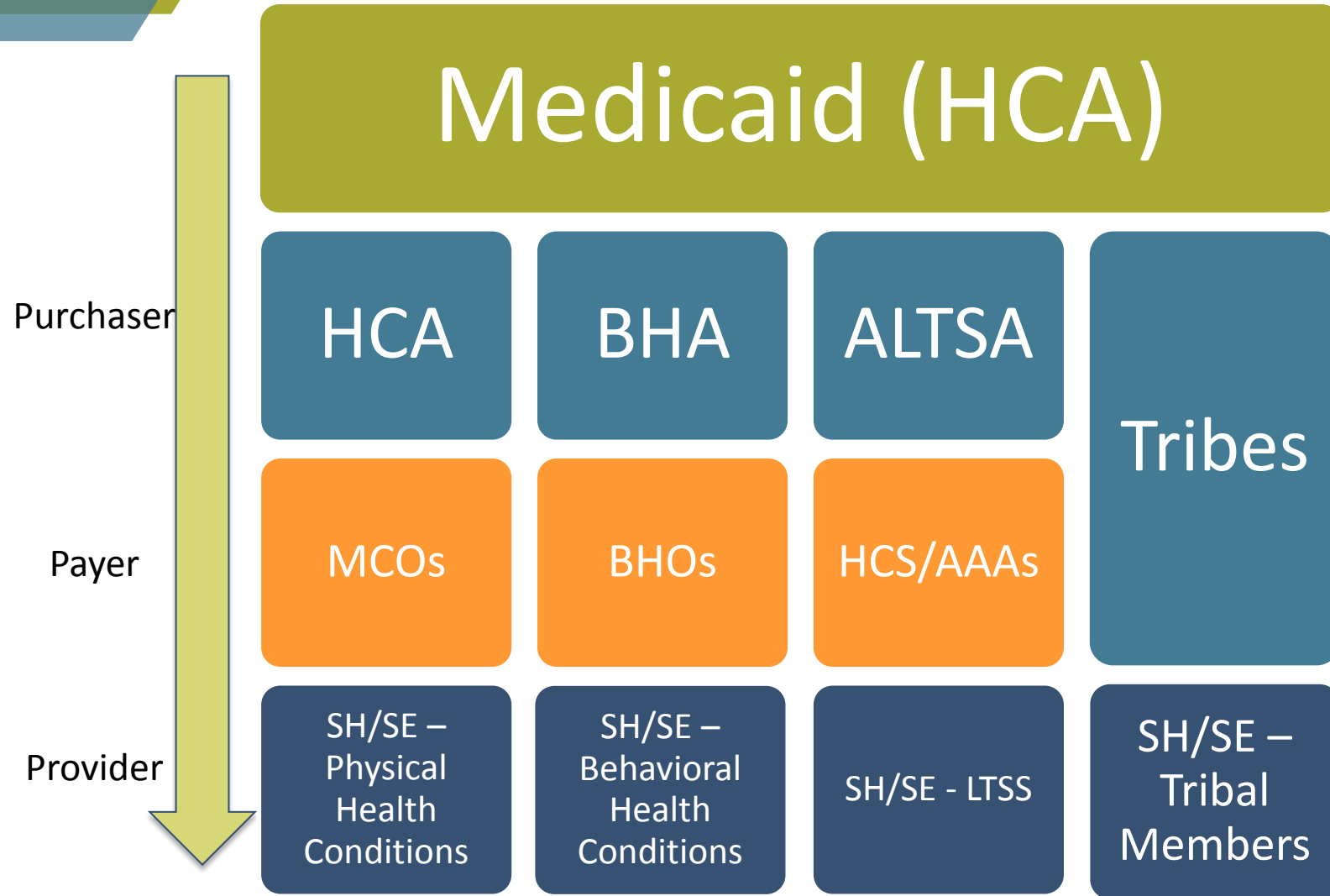
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## AVENUES OF IMPLEMENTATION

# Poll!



## Initiative 3: Medicaid Funds Flow



# Managed Primary Care



The diagram illustrates the layers of Managed Primary Care. On the left, a vertical green arrow points downwards, with labels 'Purchaser', 'Payer', and 'Provider' positioned next to it. To the right of the arrow are four stacked horizontal bars of different colors, each containing text. From top to bottom, the bars are: olive green with 'Medicaid (HCA)', blue with 'HCA', orange with 'MCOs', and dark blue with 'SH/SE – Physical Health Conditions'. In the top left corner, there are three overlapping arrow shapes pointing right, colored olive green, blue, and grey.

Medicaid (HCA)

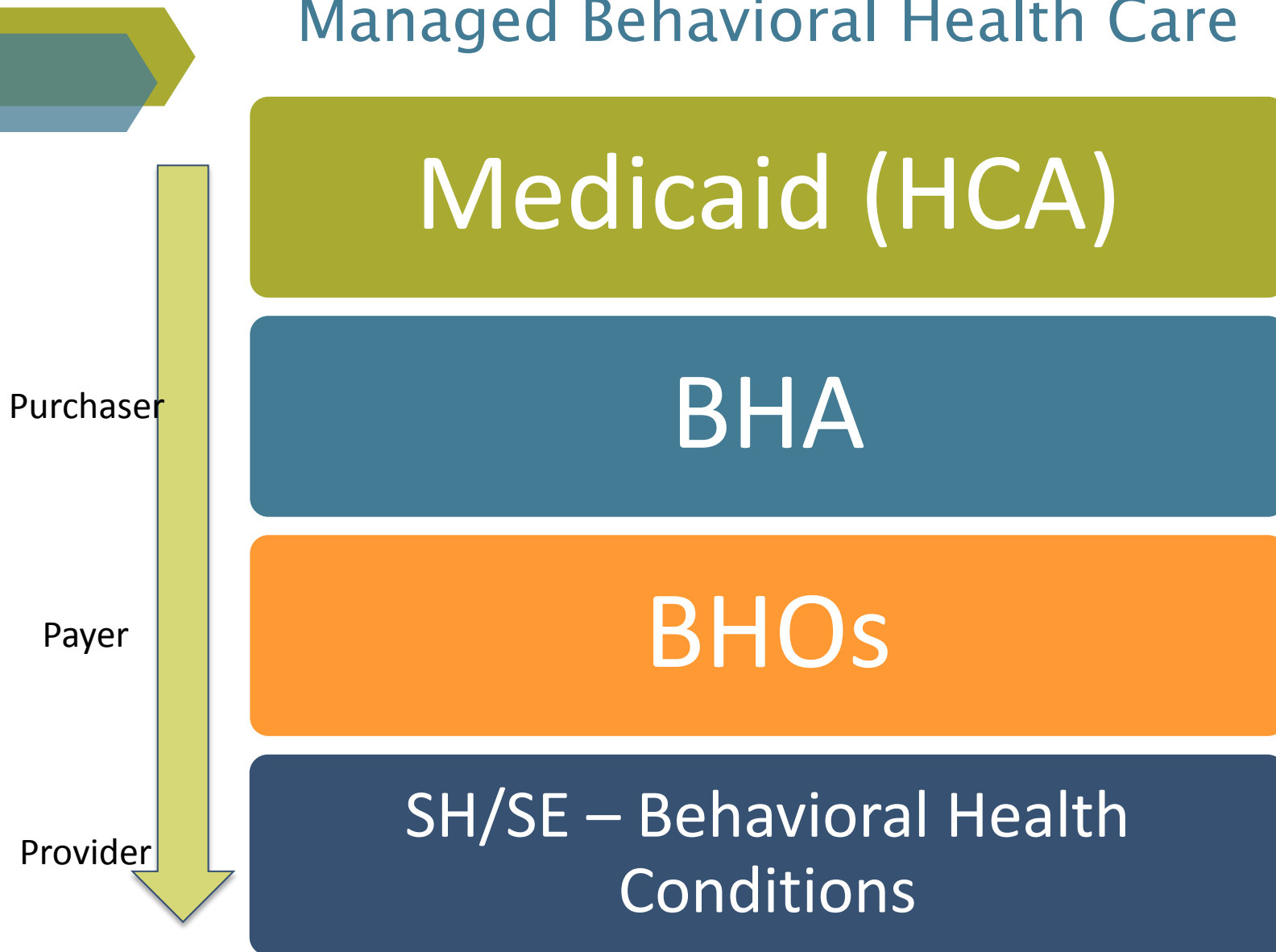
HCA

MCOs

SH/SE – Physical Health Conditions



# Managed Behavioral Health Care



# Aging & Long Term Services & Supports



The diagram illustrates the flow of funding for Aging & Long Term Services & Supports. On the left, a vertical yellow arrow points downwards, with labels 'Purchaser', 'Payer', and 'Provider' positioned next to it. To the right of the arrow are four stacked horizontal bars, each representing a different funding source or program. From top to bottom, the bars are: a green bar labeled 'Medicaid (HCA)', a blue bar labeled 'AL TSA', an orange bar labeled 'HCS/AAAs', and a dark blue bar labeled 'SH/SE - LTSS'.

Medicaid (HCA)

AL TSA

HCS/AAAs

SH/SE - LTSS

# More Information & Next Steps

- Webinar series
- Medicaid Academy for SH service providers (focus on MCO and BHO implementation)
- ALISA provider meetings
- Resources on WLIHA's website



**Thank you!**

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# Poll!

