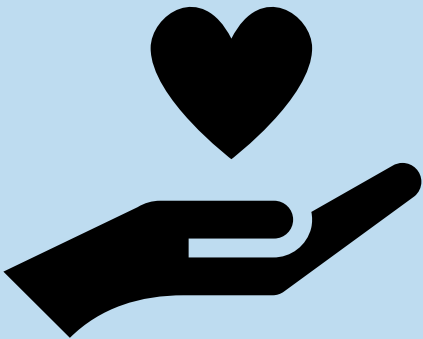


Washington state Foundational Community Supports

Oregon 2022 Health-Related Services Convening: Addressing
Oregon's Housing Crisis

September 21, 2022



Agenda

Overview of FCS Supportive Housing & Supported Employment services

- History
- Evidence-based practices
- Eligibility & Referrals
- Summary of Services
- Amerigroup's role as third-party administrator (TPA)
 - Provider network

FCS TAP

- Allowable expenditures
- Braiding rental subsidy resources

Discussion

- Lessons learned
- Successes
- Impact

Q&A

What is FCS?

Supportive housing and supported employment services under 1115 Medicaid Transformation Project waiver (MTP)

Launched Jan 2018, 26,000+ individuals enrolled, 170+ providers

MTP is a 5-year renewable waiver

FCS addresses social determinants of health by removing barriers to stable housing and employment, promoting self-sufficiency, and recovery

How FCS came to be

- ▶ Legislative direction to improve outcomes & implement EBPs
- ▶ National support through 2 separate policy academies which led to strategic plans
- ▶ [Chronic Homeless Medicaid Benefit White Paper](#)
- ▶ Integrated managed care – move to a ‘whole person care’ approach
- ▶ Demonstration grants and provisos
- ▶ PORCH, BRIDGES, HARPS, BEST, TANF-SE pilot
- ▶ Research reports – <https://www.dshs.wa.gov/ffa/rda/research-reports/dshs-integrated-client-databases>
- ▶ Champions in Leadership Roles
- ▶ Statewide component

Implementing Evidence-Based Practices

Individual Placement and Support (IPS)

8 Principles

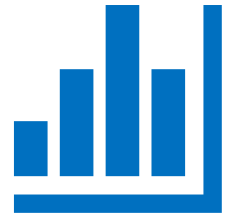
- Preferences
- Integrated with Treatment
- Systematic job development
- Long-term support
- Benefits planning
- Competitive employment
- Zero Exclusion – Employment First!
- Rapid job search

Permanent Supportive Housing (PSH)

7 Principles

- Choice in housing
- Safe and affordable
- Integrated in the community
- Separation of housing and services
- Flexible, voluntary services
- Access to housing – Housing First!
- Full rights of Tenancy

Enrollment Data



Enrollees

- ▶ 2,557 of people enrolled in SE
- ▶ 5,559 of people enrolled in SH
- ▶ 1,584 of people enrolled in both
- ▶ Total 9,700
- ▶ Numbers have flipped: why?
 - ▶ COVID and other factors

Why housing AND employment?

- ▶ Per statistics, up to 70% of individuals with SMI want to work, but providers/case managers often carry biases that reinforce barriers to employment
- ▶ Some people want housing first and some people want employment first
- ▶ Must offer full menu of choice - essential to highlight for group
- ▶ Employment is a part of recovery, and significantly improves quality of life
- ▶ Being able to pay for housing costs increases housing options!!



Eligibility criteria

FCS benefits are reserved for people with the greatest need. To qualify, an individual must:

1

Be enrolled in Apple Health

2

Be at least 18 years old (SH) or 16 years old (SE)

3

Meet the requirements for complex needs.

You have a **medical necessity** related to mental health, substance use disorder (SUD), activities of daily living, or complex physical health need(s) that prevents you from functioning successfully or living independently.

You meet specific **risk factors** that prevent you from finding or keeping a job or a safe home.

Eligibility criteria (cont.)

Supportive Housing risk factors <i>One or more</i>	Supported Employment risk factors <i>One or more</i>
<ul style="list-style-type: none">✓ Chronic homelessness✓ Frequent or lengthy stays in an institutional setting (e.g. skilled nursing, inpatient hospital, psychiatric institution, prison or jail)✓ Frequent stays in residential care settings✓ Frequent turnover of in-home caregivers✓ Predictive Risk Intelligence System (PRISM)¹ score of 1.5 or above	<ul style="list-style-type: none">✓ Housing & Essential Needs (HEN) and Aged Blind or Disabled (ABD) enrollees✓ Difficulty obtaining or maintaining employment due to age, physical or mental impairment, or traumatic brain injury✓ SUD with a history of multiple treatments✓ Serious Mental Illness (SMI) or co-occurring mental and substance use disorders

1. PRISM measures how much you use medical, social service, behavioral health and long-term care services.

No Wrong Door

- ▶ Anyone can refer a potential enrollee to the FCS program:
 - ▶ Self referral
 - ▶ Family member
 - ▶ Provider
 - ▶ Aging and Long-term Support Administration (AL TSA)
 - ▶ Division of Behavioral Health & Recover (DBHR)
- ▶ Quick Reference Guide helps evaluate who is eligible for SH and SE services
- ▶ All referrals are sent to Amerigroup TPA for authorization and enrollment

FCS Housing Support Services



▶ Pre-tenancy supports

- ▶ Conducting assessments
- ▶ Care coordination
- ▶ Development of community supports
- ▶ Treatment planning Advocacy
- ▶ Landlord liaison
- ▶ Financial skill building
- ▶ Benefits support

▶ Tenancy Sustaining Services

- ▶ Coordination of Care
- ▶ Employment and/or Vocational Support
- ▶ Informal Community Support development
- ▶ Development of Independent Living Skills
- ▶ Advocacy
- ▶ Treatment Planning
- ▶ Increasing ADL's
- ▶ Retention
- ▶ Benefits Management

FCS Employment Support Services

▶ Pre-employment Supports

- ▶ Job related Discovery or assessment
- ▶ Identify potential barriers in order to produce solutions prior to job start
- ▶ Person-centered employment planning
- ▶ Individualized job development and placement
- ▶ Job carving/Customized Employment
- ▶ Benefits Education and Counseling
- ▶ Transportation
 - Only in conjunction with an authorized service
- ▶ Build Rapport
- ▶ Supported Education
- ▶ Collaborate with the support team during planning – identify those people in the job seeker's life that will provide support initially and over time; document responsibilities of each, including the job seeker

▶ Employment Sustaining Services

- ▶ Career Advancement
- ▶ Negotiation with employers
 - Job Accommodations
 - Assistive Technology
- ▶ Job Analysis
- ▶ Job Coaching
- ▶ Benefits Education and Planning
- ▶ Transportation
 - Only in conjunction with an approved service
- ▶ Asset Development
- ▶ Follow – along Supports

Fidelity: What is it? Does it matter?

- ▶ Evidence-Based Practices lead to increased outcomes and job satisfaction
- ▶ Outcomes are standardized
- ▶ Successes of employment/IPS fidelity – Oregon Washington IPS trainers network and collaborate to improve outcomes



Amerigroup: the third-party administrator



Amerigroup is contracted with the HCA as the Third-Party Administrator (TPA) of FCS and provides administrative oversight of:

- Provider Network
- Service Authorizations
- Claims payment and encounter tracking/reporting
- Measuring outcomes and quality improvement
- Sustainability Planning

Provider Network

Services Provided	Contracted providers	Service locations
SH	19	45
SE	36	75
Both services	116	345
Total	171	465



Preliminary employment outcomes

- ▶ Increase in overall employment rate for target populations
- ▶ Increase in hours worked and wages earned
- ▶ Decrease in arrest rates
- ▶ No decreases in emergency department (ED) or inpatient (IP) service utilization

Research and Data Analysis, DSHS (2021). (rep.). [*The Foundational Community Supports Program: Preliminary Evaluation Findings.*](#)

Housing outcomes



- ▶ Positive impacts on transitions out of homelessness
- ▶ More people placed in housing projects funded by Dept. of Commerce
- ▶ Higher rates of in-home care services
- ▶ No significant decreases in ED or IP utilization

Research and Data Analysis, DSHS (2021). (rep.). [*The Foundational Community Supports Program: Preliminary Evaluation Findings.*](#)

Upcoming initiatives

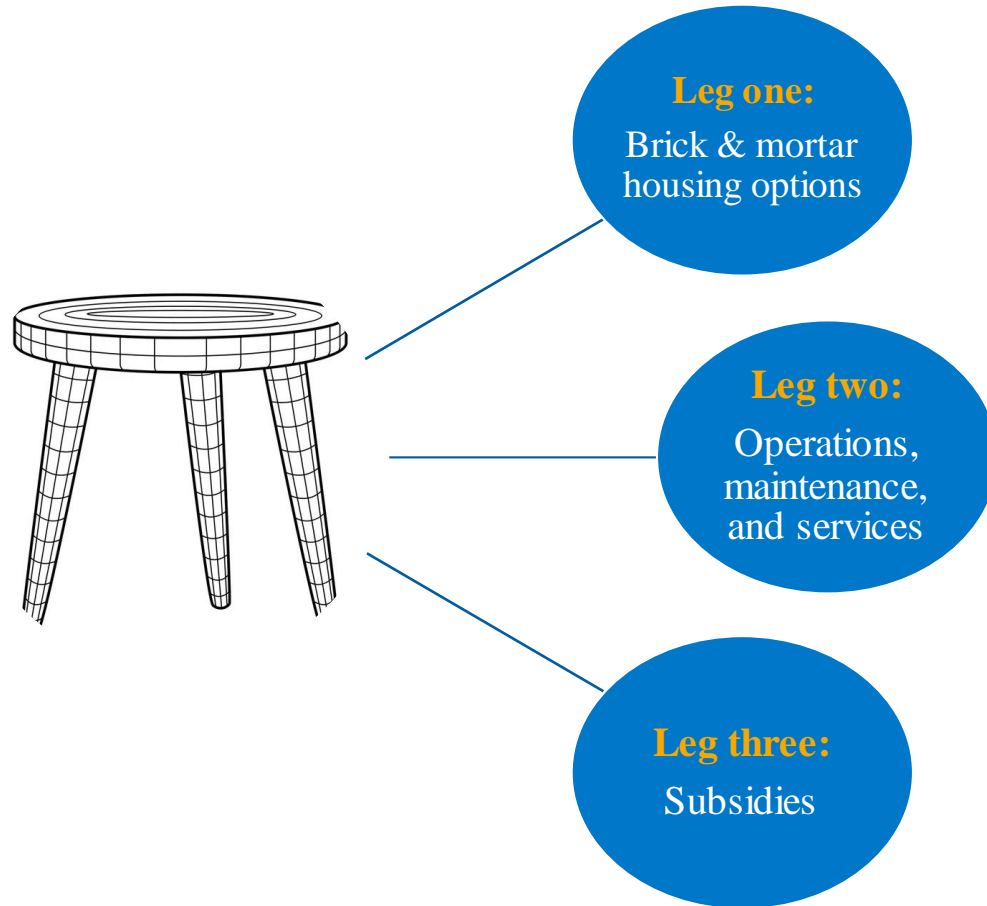
2022: MTP Extension Year

- MTP renewal application already submitted (5-year period), and will include FCS
- Expand supportive housing services into mental health and substance use disorder IMD facilities – Ongoing
- Apple Health and Homes (ESBH1866) – slated to launch January 1, 2023

Waiver Renewal: Proposed enhancements

- Expand supportive housing eligibility to ages 16 and older (currently 18+).
- Add additional risk factor to supported employment to include people exiting jail, prison, or on parole.
- Use Medicaid to pay for one-time transition fees (first/last month's rent, fees, etc.) for individuals exiting mental health and substance use disorder inpatient treatment.

Affordable Housing: 3 legs of a stool



No FCS-specific financial resources to support enrollees as they take steps to achieve individualized housing goals...
UNTIL NOW!

FCS TAP: an Overview

- ▶ Nearly \$6m appropriated for 2021-22 biennium
- ▶ Flexible funding resource aiming to lower or remove financial barriers to housing stability for FCS Supportive Housing enrollees
 - ▶ FCS Supported Employment enrollees are not currently eligible for FCS TAP funding
- ▶ Amerigroup – third-party administrator
 - ▶ Reimburses providers when FCS TAP funds are spent in accordance with program rules

FCS TAP: Expenditures

- ▶ Max spending estimated at \$5,000 per enrollee per 12 months
 - ▶ Rolling authorization for up to \$5,000 per 12 months
 - ▶ Spending over \$5,000 within a year for an enrollee *must* be approved by Amerigroup via ETP
- ▶ Covers certain housing-related costs that can be barriers to obtaining and maintaining affordable housing
 - ▶ Pays fees for IDs, application fees, move-in fees like first/last months rent, and more
 - ▶ Braidable funding compatible with longer-term rental assistance resources
 - ▶ FCS TAP is a short-term resource – no ongoing rents can be paid

Braiding FCS TAP with longer-term rental resources

- ▶ FCS TAP aims to lower or remove financial barriers to housing stability
- ▶ When enrollees are seeking longer-term support, FCS TAP can be used to cover costs that are not covered by the longer-term rental resource
 - ▶ Common costs encountered by FCS SH enrollees: move-in costs and costs incurred during pre-tenancy (or arrearages that led to eviction), such as IDs, application fees, and more
- ▶ Longer-term rental resources:
 - ▶ Section 8: Project-based or Housing Choice Voucher (HCV)
 - ▶ 811 units and other programs
 - ▶ Any project-based and tenant-based program (DSHS, AL TSA, Commerce, and more)
 - ▶ Can be braided with other time-limited funding resources to support new transitions

Discussion

Lessons learned, program impact and successes, and other topics

Lessons learned

Generate network capacity and closeness among peer agencies

- Increases ability to transmit best practices
- Administrative lift of FCS – agencies should consider internal growth vs need to identify entities to contract with for admin/billing

Equity in access to BH services and affordable housing

- Rural/urban areas and historically underserved and marginalized populations
- Compounding barriers to access for many BIPOC individuals

Consider need for collaboration & coordination at every level

- Must align programs (subsidies and services) across agencies
- Identify and engage stakeholders early
- Don't assume housing providers plan to provide supported employment services and vice-versa; many are not equal advocates for both services

Holistic Training Resources

- Medicaid Academy
- Supportive Housing Institute
- Specific trainers
- Monthly webinars
- Ad hoc Trainings based on agency needs

Adaptable COVID response

- Statewide cell phone distribution

Administrative/budgeting tool for FCS services

- ▶ How do agencies use FCS to expand service capacity—weaving of funding
- ▶ Billing infrastructure
- ▶ Reimbursement Rates:

Supported Employment Benefit

- 1 unit = **15 minutes** of service
- Limit of **120 units** (30 hours) of service per **6 month** authorization period
- Reimbursement rate of **\$27/unit** of service
- Services may be **reauthorized** if a participant continues to need services
- “**Exception to Rule**” authorization process is available for additional service units within a 6 month period for participants who have exceptional service needs

Supportive Housing Benefit

- Per diem rate
- Limit of **30 days** of service per **6 month** authorization period
- Reimbursement rate of **\$112/day**
- Services may be **reauthorized** if a participant continues to need services
- “**Exception to Rule**” authorization process is available for additional service units within a 6 month period for participants who have exceptional service needs

Impacts/successes

Individual

- Greater access to employment and affordable housing

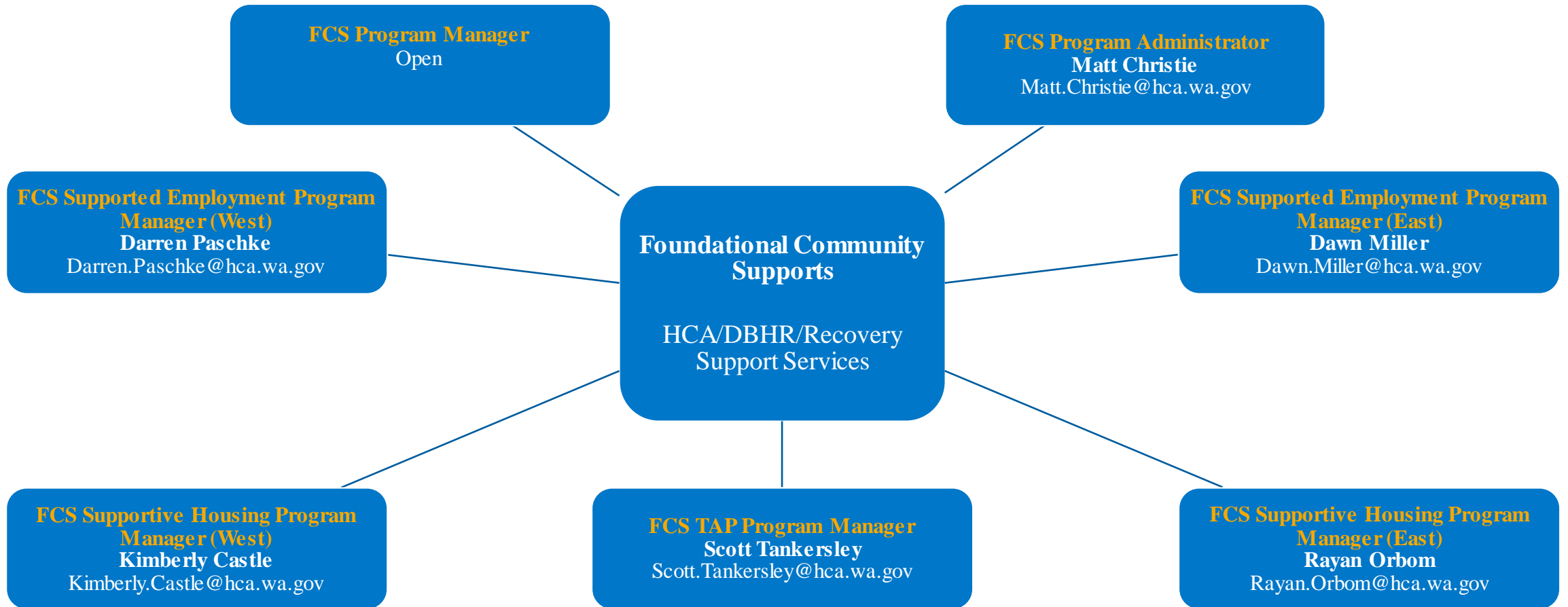
Agency/Provider

- Developed long term Aftercare programs and support

Community

- Outcomes (housing and employment) occur more rapidly than traditional services.
- Agencies that pair diversion with supported employment achieve greater success.

WA State Health Care Authority FCS Team





Questions?

Dawn Miller

FCS Supported Employment Program Manager
(East)

Dawn.Miller@hca.wa.gov
360.522.3544

Rayan Orbom

FCS Supportive Housing Program Manager (East)

Rayan.Orbom@hca.wa.gov
360-643-6932

Scott Tankersley

FCS Housing Subsidy Program Manager

Scott.Tankersley@hca.wa.gov
360-725-5732