

The background features a purple-tinted image of a stethoscope on the right and a line graph on the left. The graph has a vertical axis with numerical markers at 3, 6, 9, 12, and 15. The line graph shows an overall upward trend with some fluctuations. The text is overlaid on this background.

HHIP Program Design

May, 2022

Housing and Homelessness Incentive Program (HHIP) Background & Overview

In accordance with section 9817 of the American Rescue Plan Act (ARPA) of 2021, DHCS developed a Medi-Cal Home and Community-Based Services (HCBS) Spending Plan detailing a series of initiatives that will enhance, expand, and strengthen HCBS in California. *The Housing and Homelessness Incentive Program (HHIP)* is one of the HCBS Transitions initiatives, which aim to expand and enhance programs that facilitate individuals transitioning to community-based, independent living arrangements.

- » **HHIP Overview:** HHIP is a voluntary incentive program that will enable Medi-Cal managed care plans (MCPs) to earn incentive funds for making progress in addressing homelessness and housing insecurity as social determinants of health.
- » **Total Incentive Funds:** \$1.288 billion one-time funds
 - » (\$644 million in state funds [ARPA] + \$644 million in matching federal funding)
- » **HHIP Program Design:** DHCS is designing HHIP with input from stakeholders, including but not limited to, MCPs, cities, counties, local Continuums of Care, providers, nonprofits, county behavioral health, county social services, local housing departments, and community-based organizations.
- » **Funding Timeline:** Funding available through March 31, 2024
- » **CMS Approval:** The California HCBS Spending Plan, including HHIP, was approved by CMS on January 4, 2022.¹

¹ <https://www.dhcs.ca.gov/Documents/CMS-Conditional-Approval-1-4-2022.pdf>

Program Vision, Goals & Strategic Approach

Drawing on the HCBS Spending Plan and the DHCS Quality Strategy, DHCS proposes the following program vision, goals, and strategic approach that will guide and shape the design and implementation of HHIP.

VISION: improve health outcomes and access to whole person care services by addressing housing insecurity and instability as a social determinant of health for the Medi-Cal population

PROPOSED GOALS

- 1 Ensure MCPs have the necessary capacity and partnerships to connect their members to needed housing services
- 2 Reduce and prevent homelessness

PROPOSED STRATEGIC APPROACH

- **Develop** partnerships between MCPs and social service agencies, counties, public health agencies, and public and community-based housing agencies to address homelessness
- **Provide** rapid rehousing for Medi-Cal families and youth, and interim housing for aging and disabled populations
- **Expand** access to housing services and street medicine programs
- **Improve** access to coordinated housing, health and other social services
- **Reduce** avoidable use of costly health care services
- **Improve** whole person health for Medi-Cal enrollees, including behavioral health treatment and resources
- **Implement** solutions that manage information to better identify populations of focus and Member needs

Program Definition

DHCS has provided a definition for individuals who are experiencing homelessness and are at risk of homelessness that aligns with the Community Supports Policy Guide and the Housing and Urban Development (HUD) definition as provided in Section 91.5 of Title 24 of the Code of Federal Regulations (CFR).¹

Individuals who are at risk of or are currently experiencing homelessness.

Experiencing homelessness is defined as:

- An individual or family who lacks adequate nighttime residence;
- An individual or family with a primary residence that is a public or private place not designed for or ordinarily used for habitation;
- An individual or family living in a shelter;
- An individual exiting an institution into homelessness;
- An individual or family who will imminently lose housing in next 30 days;
- Unaccompanied youth and homeless families and children and youth defined as homeless under other federal statutes; or
- Individuals fleeing domestic violence.

¹ Definition aligns with the [Community Supports Policy Guide](#) and 24 CFR § 91.5.

HHIP Program Timeline

2022												2023												2024					
Q1			Q2			Q3			Q4			Q1			Q2			Q3			Q4			Q1					
J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M			
LHP Measurement Period 4 months				MCPs draft & submit LHP		DHCS review LHPs		Payment issued \$																					
Measurement Period 1 8 months												MCPs draft & submit S1		DHCS review S1		Payment issued \$													
Measurement Period 2 10 months										MCPs draft & submit S2		DHCS review S2		Payment issued \$															

LHP Structure and Content

MCPs will submit one Local Homelessness Plan (LHP) per county by June 30, 2022, as well as a unique MCP LHP submission. The goal of one LHP submission per county is to ensure a unified approach to addressing homelessness across MCPs operating in the same county.

Local Homelessness Plan Structure and Content		County LHP Submission	Unique MCP LHP Submission	Available Points
Part I <p>Measures across three program priority areas:</p> <ol style="list-style-type: none"> Partnerships and capacity to support referrals for services Infrastructure to coordinate and meet member housing needs Delivery of services and member engagement 		✓	190	
Part II <p>MCP strategies to address identified housing and service gaps</p>	✓	✓	100	
Part III <p>Landscape analysis of demographic, needs, and gaps</p>	✓	✓	80	
Part IV <p>Identification of funding availability</p>	✓		10	

Local Homelessness Plan Evaluation

Payments will be earned by each MCP based on the successful completion of four LHP components, and the successful completion of the required measures. Each LHP component and each measure will be earned either in full, or not earned.

Local Homelessness Plan

LHP Component	Points
1. Measures	190
2. MCP Strategies	100
3. Landscape Analysis	80
4. Funding Availability	10
Total	380

Measures (for LHP, S1, and S2)

	Non-Priority Measures	Priority Measures
Pay for Reporting Measures	10 points	20 points
Pay for Performance Measures	20 points	40 points

Priority Measures

- 1.2 Connection with the local Coordinated Entry System
- 1.4 Partnerships with counties, COC, and/or organizations that deliver housing services with whom the MCP has a data sharing agreement that allows for timely exchange of information and member matching
- 2.1 Connection with street medicine team providing healthcare for individuals who are homeless
- 2.2 MCP connection with the local Homeless Management Information System (HMIS)
- 3.5 MCP Members who were successfully housed
- 3.6 MCP Members who remained successfully housed

Priority Area 1 Measurement Areas

The final proposed set of measures includes fifteen measures across three priority areas. The measures in bold are priority measures. Details pertaining to the numerator, denominator, measure weight, and evaluation criteria for each measure is available in the Measure Set excel file.

1. Partnerships and capacity to support referrals for services

1.1 Engagement with CoC, including, but not limited to:

- Attending CoC meetings
- Joining the CoC board
- Joining a CoC subgroup or workgroup
- Attending a CoC webinar

1.2 Connection and integration with the local Coordinated Entry System

1.3 Outreach and engagement efforts and approach to providing medically appropriate and cost-effective housing-related Community Supports services or other housing-related services to MCP members who are experiencing homelessness

1.4 Partnerships with counties, COC, and/or organizations that deliver housing services (i.e., interim housing, rental assistance, supportive housing, outreach, prevention/diversion) with which the MCP has a data sharing agreement that allows for timely exchange of information and member matching

1.5 Data sharing agreement with county MHPs and DMC-ODS (if applicable)

1.6 Partnerships and strategies the MCP will develop to address disparities and equity in service delivery, housing placements, and housing retention (Aligns with HHAP Round 3 Application)

Priority Area 2 Measurement Areas

2. Infrastructure to coordinate and meet member housing needs

2.1 Connection with street medicine team providing healthcare for individuals who are homeless¹

2.2 MCP connection with the local Homeless Management Information System (HMIS)

2.3 MCP process for tracking and managing referrals for the housing-related Community Supports it is offering during the measurement period, which may include:

1. Housing Transition Navigation
2. Housing Deposits
3. Housing Tenancy and Sustaining Services
4. Recuperative Care
5. Short-Term Post-Hospitalization Housing
6. Day Habilitation Programs

MCPs will be evaluated based only on the Community Supports they are offering during the measurement period.

¹ Street medicine defined as health and social services developed specifically to address the unique needs and circumstances of unsheltered homeless individuals delivered directly to these individuals in their own environment.

Priority Area 3 Measurement Areas

3. Delivery of services and member engagement

3.1 MCP Members screened for homelessness/risk of homelessness

3.2 MCP Members screened for homelessness or at risk of homelessness who were discharged from an inpatient setting or have been to the emergency department for services two or more times in a 4-month period

3.3 MCP efforts to support the CoC in the collection of point in time (PIT) count of members determined as homeless

3.4 MCP Members receiving housing-related Community Supports, including:

1. Housing Transition Navigation
2. Housing Deposits
3. Housing Tenancy and Sustaining Services
4. Recuperative Care
5. Short-Term Post-Hospitalization Housing
6. Day Habilitation Programs

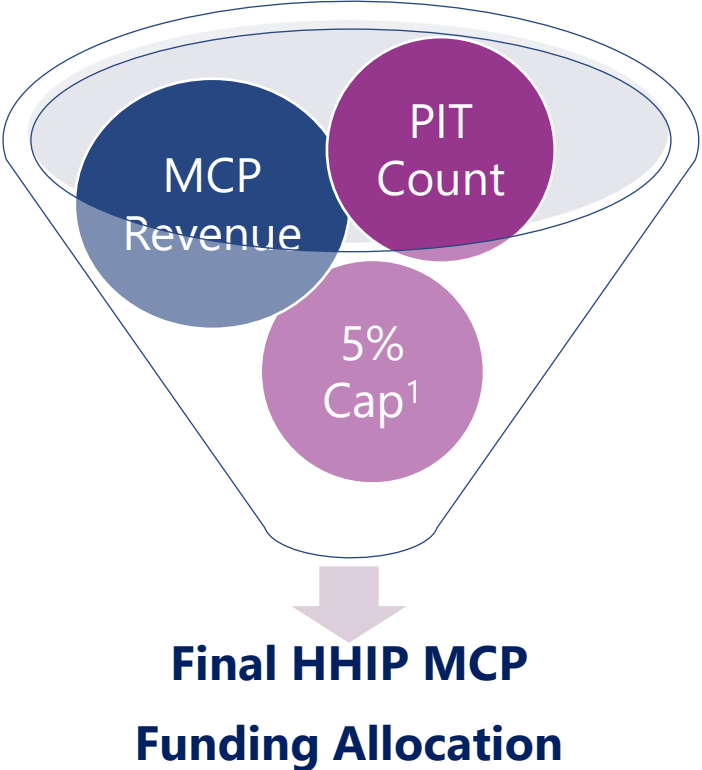
3.5 MCP Members who were successfully housed

3.6 MCP Members who remained successfully housed

Payment Allocation Methodology

DHCS will issue a total of \$1.288B split across three payments. MCPs will be eligible to earn up to a specified dollar amount for the successful achievement of the program measures.

The department considered the following factors in the allocation methodology:



¹Federal contract provisions related to payment: CFR 438.6(b)(2)

Thank you

A decorative graphic consisting of several overlapping, wavy, horizontal bands in various shades of purple, ranging from a deep magenta to a light lavender, positioned below the 'Thank you' text and above the contact information.

Please visit the HHIP Website for more information and access to the HHIP documents and supporting resources: [Housing and Homelessness Incentive Program \(ca.gov\)](https://www.dhcs.ca.gov/Programs/Pages/HHIP.aspx)

Please send questions to DHCSHHIP@dhcs.ca.gov.