

INVESTMENT PLAN

HOUSING AND HOMELESSNESS INCENTIVE PROGRAM

September 30, 2022

Plumas County



MCP INFORMATION

Provide the name and contact information for the MCP submitting this IP response.

MCP Name	California Health & Wellness	
Lead Contact Person Name and Title	eanna Eaves, Director, Compliance ally Chow, Senior Manager, Compliance	
Contact Email Address	ntact Email Address deanna.l.eaves@cahealthwellness.com sally.c.chow@cahealthwellness.com	
Contact Phone	t Phone Deanna Eaves: 916-935-1275 Sally Chow: 916-935-8157	

PART I: INVESTMENTS

To determine local HHIP investment opportunities, California Health & Wellness and our Plan Partner collaborated with the Plumas Sierra Advisory Board within the NorCal County Continuum of Care, which serves seven counties including Plumas and Sierra. The costs listed below were determined based on conversations with the CoC and our Plan Partner and are apportioned to Plumas County based on Medi-Cal membership in the county.

Investment Activity	Gap or Need Addressed	Description (2 – 3 sentences for each activity)	Dollar Amount or Range	Recipient(s) or Recipient Type(s)	Timeline	HHIP Measure(s) Impacted	Domain Targeted
1. Supporting CoC Infrastructure & Capacity	During an 8/19 meeting with the Plumas Sierra CoC Advisory Board, which is a subgroup within CA-516 NorCal CoC, they noted there is limited capacity and infrastructure within the Advisory Board to engage with MCPs on HHIP activities.	Funds will support the Plumas Crisis Intervention and Resource Center (PCIRC), which is a member of the NorCal CoC Board and the main homeless provider in the County. Funds will support HMIS access via the NorCal CoC, Point in Time (PIT) Count support, and other CoC activities related to CalAIM implementation, such as Coordinated Entry (CES).	\$12,128	PCIRC and NorCal CoC	10/2022	1.1, 1.2, 1.4, 1.6, 2.2	Provider/ Partner Infrastructure

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2. Enhancing Services at the local Day Center	The Plumas Sierra CoC Advisory Board shared during a meeting on 8/19 that PCIRC will be moving back into their homeless day center in Fall 2022 and that additional funding is needed to promote continuity of services.	Funding will support enhanced day center staffing and capacity for outreach, case management, and diversion to coordinate with ECM and CS services. Funds will also support PCIRC to have a pool of funds for flexible financial assistance to prevent and address homelessness.	\$43,659	PCIRC	10/2022 - 10/2023	3.3, 3.4, 3.5, 3.6	Provider/ Partner Infrastructure
3. Increasing Low-Barrier Shelter Beds	The Plumas Sierra CoC Advisory Board noted during a meeting on 8/19 that there is severe lack of shelter beds in the region (Plumas and Sierra Counties) to meet the	Funds will support PCIRC to bring online new emergency shelter beds by December 2022 focused on serving homeless families. Shelter was identified as a critical gap in the County and a significant need	\$121,276	PCIRC	12/2022 - 10/2023	1.2, 3.3, 3.4, 3.5, 3.6	Provider/ Partner Infrastructure

Investment Activity	Gap or Need Addressed	Description (2 – 3 sentences for each activity)	Dollar Amount or Range	Recipient(s) or Recipient Type(s)	Timeline	HHIP Measure(s) Impacted	Domain Targeted
	need. PCIRC is in process of creating a shelter program but has limited funds.	to address local homelessness, as the shelter can serve as an access point for ECM/CS services.					
4. Developing a California Health & Wellness Social Determinants of Health (SDOH) Platform	California Health & Wellness needs to enhance its existing technical capabilities and processes to more optimally handle SDoH/HMIS workflow to be able to match our member information with HMIS client information and to receive timely alerts from their local HMIS when our member experiences a change in	California Health & Wellness is developing a Social Determinants of Health (SDoH) Platform to ensure there is a unified, holistic, and scalable technology approach for enabling race, ethnicity, and language (REL), sexual orientation and gender identity, (SOGI) and housing and other SDoH data exchange and integration with various 3rd party vendors and community provider	\$4,500	California Health & Wellness	10/2022 - 12/2023	1.2, 2.2, 2.3, 3.1, 3.3, 3.4	MCP Infrastructure

Investment Activity	Gap or Need Addressed	Description (2 – 3 sentences for each activity)	Dollar Amount or Range	Recipient(s) or Recipient Type(s)	Timeline	HHIP Measure(s) Impacted	Domain Targeted
	housing status.	systems. This platform will include data exchange through SFTP/FHIR API with HMIS systems.					

PART II: RISK ANALYSIS

Description of Anticipated Contingencies (500 - 1000 word limit)

I. What factors the MCP anticipates may arise that would make it challenging for the MCP to achieve its goals and the HHIP program goals:

Through the DHCS Housing and Homelessness Incentive Program (HHIP), California Health & Wellness is committed to collaborating with CA-516 and our Plan Partner in Plumas County to make investments that enhance Medi-Cal Managed Care Plan (MCP) capacity and partnerships to connect members to needed housing services and ultimately reduce and prevent homelessness.

Factors that may arise that may impact California Health & Wellness' ability to achieve our goals and HHIP program goals include, but are not limited to, the following:

- The ability of California Health & Wellness, local providers, and community partners to quickly build and maintain the
 operational processes and data connections between MCPs and the homeless system to connect members to needed
 housing services and, ultimately, permanent housing. This will ultimately determine if MCPs can meet HHIP program
 measure requirements and thereby draw down HHIP funds to invest in the local communities we serve.
- The time needed to educate providers on HHIP. Throughout the development of the HHIP County Local Homelessness
 Plan that California Health & Wellness submitted to DHCS on June 30, 2022 and this HHIP Investment Plan deliverable,
 there has been a learning curve for all stakeholders to understand Medi-Cal managed care, the local housing system,
 and how the two will be connected through CalAIM and HHIP. We expect this collective learning and development to
 continue throughout the HHIP program period, which may impact the progress of HHIP strategies.
- Staffing capacity and infrastructure of our local level partners. The CoC and community partners have resource constraints that may impact their ability to engage with MCPs on HHIP. Staff turnover, competing priorities, budget limitations or freezes, and other operational changes (i.e., human resources, information technology, legal) that are experienced by our local level partners may impact the MCP's ability to demonstrate the required measure performance necessary within the measurement period to draw down the full HHIP allocation to be able to invest these funds in our local communities.

II. Which aspects of the IP might be affected by those factors:

California Health & Wellness is making investments to support our internal data systems and the local HMIS in achieving bidirectional data connectivity; however, the success of these investments may depend on whether both MCP and CoC staff are able to upgrade both platforms to support HHIP program goals, as well as stand up processes between all entities that ensure data confidentiality and compliance with both Health Insurance Portability and Accountability Act (HIPAA) and Health Information Technology for Economic and Clinical Health Act (HITECH). This may impact all three steps related to the timely transit of information – 1) Securely move the data between entities, 2) validating data quality, and 3) developing the ability to bucket the data within the MCP – and may require the development of new risk mitigation strategies, and corresponding trainings, to ensure that all MCPs, providers, and partners input accurate local housing data and maintain a secure and effective data exchange.

Finally, our ability to ultimately house our members and meet HHIP Priority Area 3 measures through investments in case management may be impacted by our ability to make the systemic changes necessary within the HHIP measurement period to unlock current housing units and/or expand housing supply. For example:

- The CoC and community partners have shared concerns about landlord hesitancy to open units to those most vulnerable. Shifting the perceptions that landlords have about the ability of our members experiencing homelessness to maintain stable housing will require significant relationship building and time between community housing providers (i.e., housing navigators), landlords, and the MCPs.
- As noted through the 2022 PIT Count and our ongoing conversations with the CoC, the County is experiencing a shortage in housing supply. There is a risk that newly available units through our HHIP investments may not be given to our members, but rather, to those on the By Name List who are determined to be more vulnerable through the prioritization criteria.

III. What steps the MCP would take to address these factors and avoid or mitigate impact to the IP.

To address these potential risks and avoid or mitigate their impact on the Investment Plan, steps that California Health & Wellness will take include, but are not limited to, the following:

- Establish and maintain ongoing communication channels between our Plan Partner and the CoC to track the status on HHIP investments, identify operational risks, and troubleshoot problems that arise. As part of the County Local Homelessness Plan submitted on June 30, 2022, the MCPs and the CoC agreed to recurring meetings to discuss and assess HHIP implementation. HHIP investments will be discussed in these forums.
- Develop guardrails that promote accountability and minimize fraud, waste, and abuse, including ensuring that the financial agreements between California Health & Wellness and entities receiving HHIP disbursements include provisions with specific fund use cases and clear processes to ensure funds are used properly.
- Related to our internal technology investments, we will be intentional in applying focused resources and working in collaboration with our CoC partners to achieve results in a secure and timely matter. Additionally, California Health & Wellness will leverage the expertise of our parent company, Centene Corporation, to launch these capabilities.

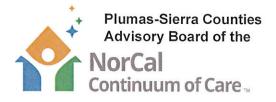
- Continue to educate the CoC and community partners about CalAIM, its housing-related service offerings, and
 associated funding opportunities to support infrastructure development and capacity-building. Our community partners
 are implementing a variety of local and innovative solutions to tackle the housing crisis and are still learning about
 CalAIM, Medi-Cal managed care, and the housing-related service offerings. To support CalAIM implementation and
 ensure non-duplication of funding, we are committed to educating stakeholders about the various funding opportunities
 offered through CalAIM (i.e., HHIP, CalAIM Incentive Payment Program, Providing Access and Transforming Health
 (PATH) Capacity and Infrastructure Transition, Expansion and Development (CITED) initiative, etc.)
- Finally, California Health & Wellness is committed to assessing the lessons learned from the development and implementation of the Investment Plan and we look forward to sharing these learnings as part of the Submission 1 and Submission 2 deliverables. Through continuous improvement and working closely with the CoC and community partners, we can ensure that investments address the HHIP program goals to build MCP capacity to connect members to services and ultimately reduce and prevent homelessness.

PART III: CoC LETTER OF SUPPORT

Please find attached the Plumas Sierra Advisory Board of the NorCal CoC's Letter of Support in the Investment Plan Appendix.

PART IV: Attestation

Please find attached California Health & Wellness's MCP Attestation in the Investment Plan Appendix.



September 7, 2022

To: California Department of Health Care Services

Re: Housing and Homelessness Incentive Program (HHIP) Investment Plan Letter of Support Plumas-Sierra Counties CoC Advisory Board

Dear California Department of Health Care Services,

The Plumas-Sierra Counties CoC Advisory Board (Advisory Board) is supportive of the California Department of Health Care Services (DHCS) Housing and Homeless Incentive Program Investment Plans (IP) being submitted by Anthem Blue Cross and California Health and Wellness in Plumas and Sierra counties.

Representation from Plumas and Sierra counties engaged and collaborated with Anthem and California Health and Wellness to provide input on the draft IP. The draft IP was then reviewed by the Advisory Board voting and participant members and the public at a Special Meeting of the Advisory Board on September 7, 2022, prior to the Medi-Cal managed care plan (MCP) submission.

The Advisory Board understands that the IP reflects a non-binding general direction for investments the MCPs are willing to initially make to meet DHCS' HHIP program metrics independent of how the MCPs plan to invest HHIP incentive funds once earned.

The Advisory Board also understands that the MCPs' HHIP investments are contingent on the MCPs meeting HHIP measures over the two-year HHIP program. To this end the Advisory Board is committed to collaborating with the MCPs as they engage locally to meet HHIP program metrics.

If you have any questions, please feel free to reach out directly at 530-283-6214 or traceyferguson@countyofplumas.com.

Thank you,

Tracey Ferguson, Chair Plumas-Sierra Counties CoC Advisory Board Medi-Cal Managed Care Housing and Homelessness Incentive Program (HHIP) Investment Plan (IP) Certification (to be completed by Health Plan CEO/CFO/COO/Authorized Executive)

Health Plan:	California Health & Wellness
County:	Plumas

I certify that, to the best of my knowledge, the IP provides a true representation of the MCP's expected investment plan and strategy for achieving program measures and targets.

As a CEO, CFO, COO, or Executive duly authorized to sign on behalf of the Health Plan listed above, I am authorized or designated to make this Certification, and declare that I understand that the making of false statements or the filing of a false or fraudulent claim is punishable under state and federal law.

By:

 Martha Santana-Chin
 September 29, 2022

 Print name
 Date

 Medi-Cal President
 Medi-Cal President

 Signature
 Title