

KERN COUNTY INVESTMENT PLAN

HOUSING AND HOMELESSNESS INCENTIVE PROGRAM

September 30, 2022



MCP INFORMATION

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

MCP Name	Health Net Community Solutions, Inc.				
Lead Contact Person Name and Title	Deanna Eaves, Director, Compliance Sally Chow, Senior Manager, Compliance				
Contact Email Address	contact Email Address deanna.l.eaves@cahealthwellness.com sally.c.chow@cahealthwellness.com				
Contact Phone	Deanna Eaves: 916-935-1275 Sally Chow: 916-935-8157				

PART I: INVESTMENTS

To determine local HHIP investment opportunities, Health Net and our Plan Partner collaborated with the Bakersfield-Kern Regional Homeless Collaborative, which serves Kern County. MCPs will continue to coordinate HHIP Investment Plan execution and fund distribution throughout the HHIP program period to ensure non-duplication of funding.

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	Larneten
1. Supporti ng the Point in Time (PIT) Count	During MCP and CA-604 Bakersfield- Kern Regional Homeless Collaborative (BKRHC) meetings on 9/1, 9/7, and 9/21, the CoC identified having insufficient resources to complete the 2023 PIT Count.	Funds will support CA-604 Bakersfield-Kern Regional Homeless Collaborative with the staffing, volunteer recruitment, and incentives to ensure complete geographic coverage for the 2023 PIT Count.	\$10,000 — \$20,000 *CoC projected cost which may be shared between Health Net and KHS.	Bakersfi eld-Kern Regiona I Homele ss Collabor ative (BKRHC)	10/202 2 - 12/202 3	1.1	Provider/ Partner Infrastructu re

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2. Supporti ng Coordin ated Entry System (CES)	During MCP and CA-604 meetings on 9/1, 9/7, 9/21, and 9/22, the CoC identified a need to expand training, coordinate communicatio n across CES, and prioritization and match process. This need is also captured in the county's SWOT analysis report.	Funds will support Community Action Partnership of Kern (CAPK), which operates Kern County's Coordinated Entry System, to enhance their infrastructure and capacity to support CalAIM coordination and activities.	\$50,000 — \$100,000 *CoC projected cost which may be shared between Health Net and KHS.	Community Action Partners hip of Kern (CAPK)	10/202 2 - 12/202 3	1.2, 1.6, 2.2	Provider/ Partner Infrastructu re
3. Supporti ng HMIS Infrastru cture	During MCP and CA-604 meetings on 9/1, 9/7, 9/16, and 9/21, the CoC identified that Kern County Behavioral Health & Recovery Services, the HMIS lead agency, has insufficient	Funds will support Kern County Behavioral Health & Recovery Services to enhance their HMIS infrastructure and capacity, including user fees, database trainings and MOUs, and	\$95,000 — \$115,000 *CoC projected cost which may be shared between Health Net and KHS.	BKRHC, Kern County Behavio ral Health & Recover y Services (HMIS Lead Agency)	10/202 2 – 12/202 3	1.2, 2.2	Provider/ Partner Infrastructu re

	staffing and technology infrastructure to support CalAIM data sharing requirements. Similarly, Health Net needs to gain HMIS access to meet HHIP requirements.	data integrity and privacy. Funds will also support similar costs tied to Health Net gaining HMIS access.					
4. Enhanci ng Case Manage ment and Housing Navigati on Support	During MCP and CA-604 meetings on 9/1, 9/7 & 9/21, the community identified a need for more housing navigation and case management support.	Funds will support the infrastructure needs (i.e., IT, staffing, etc.) of local shelter programs to enhance referrals and service utilization by individuals experiencing homelessness.	\$100,000 — \$125,000 *We will collaborate with our Plan Partner to ensure non-duplication of funding.	Commu nity- based Organiz ations	10/202 2 - 12/202 3	2.2, 3.3, 3.4	Direct Member Interventio ns
5. Supporti ng Case Manage ment Support and Landlor d Engage	During MCP and CA-604 meetings on 9/1, 9/7 & 9/21, the CoC shared that landlords are not likely to rent available	Funds will support community-based organizations CA-604 Bakersfield-Kern Regional Homeless	\$130,000 *We will collaborate with our Plan Partner to ensure non-duplication of funding.	BKRHC, Kern Housing Authorit y, and housing service provider s	10/202 2 - 12/202 3	3.4, 3.5, 3.6	Direct Member Interventio ns

ment	units to individuals deemed "high-risk" with acute health needs.	Collaborative with case management and landlord advocacy activities to open up housing slots to those most vulnerable and online resources to support placement.					
6. Supporting Housing Placem ent	During an MCP and CA-604 meeting on 9/14, Kern County Housing Authority identified the need to find housing for 125 homeless adults and youth by April 2023, because the opening date for their permanent housing project has been pushed to October 2023 due to	Funds will help fund the housing gap caused by the construction in delay; this funding will pay for the cost of master leases until the October 2023 opening date and support pipeline projects that will yield housing units for Medi-Cal members. The project was funded through both Homekey and other funds.	\$900,000 *We will collaborate with our Plan Partner to ensure non-duplication of funding.	Housing service provider s	10/202 2 - 12/202 3	3.4, 3.5, 3.6	Direct Member Interventio ns

	delays in						
	construction.						
7. Supporti ng Street Medicin e Capacit y Building	During an MCP and CA-604 meeting on 9/26, street medicine provider shared their limitation in providing a group number of Medi-Cal members who live in encampments .	Funds will support street medicine providers in developing the infrastructure (i.e., staffing, technology, etc.) to help support the development, implementation, and enhancements street medicine services.	\$50,000 *We will collaborate with our Plan Partner to ensure non-duplication of funding.	Street medicin e provider s	10/202 2 – 12/202 3	2.1, 3.3, 3.4	Provider/ Partner Infrastructu re
8. Develop ing a Health Net Social Determi nants of Health (SDOH) Platform	Health Net 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	Health Net 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	\$68,395	Health Net	10/202 2 - 12/202 3	1.2, 2.2, 2.3, 3.1, 3.3, 3.4	MCP Infrastructu re

	timely alerts from their local HMIS when our member experiences a change in housing status.	housing and other SDoH data exchange and integration with various 3rd party vendors and community provider systems. This platform will include data			
	experiences a	party vendors			
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	status.	systems. This			
		·			
		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), Health Net is committed to collaborating with Bakersfield-Kern Regional Homeless Collaborative and our Plan Partner in Kern 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 Health Net's ability to achieve our goals and HHIP program goals include, but are not limited to, the following:

- The ability of Health Net, 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 [insert health plan] 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:

Health Net 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 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.

Our ability to ultimately house our members and meet HHIP Priority Area 3 measures through investments in housing placement and landlord engagement 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.
- Finally, new housing units being constructed with HHIP funding may not be open within the measurement period to be able to house our members. Construction delays and ongoing supply chain issues, for example, may impact our ability to demonstrate progress towards the measures tied to permanent housing (Measures 3.5 and 3.6) thereby impacting our ability to draw down 100 percent of the HHIP allocation to be able to invest these funds in the communities we serve.

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 and/or mitigate their impact on the Investment Plan, Health Net will take steps including, but 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 reoccurring 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 Health Net 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, Health Net 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, Health Net 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 BKRHC's Letter of Support in the Investment Plan Appendix.

PART IV: Attestation

Please find attached Health Net's MCP Attestation in the Investment Plan Appendix.



Letter of Support

September 21, 2022

TO: California Department of Healthcare Services

Re: Housing and Homelessness Incentive Program (HHIP) Investment Plan

The Bakersfield-Kern Regional Homeless Collaborative (BKRHC) is supportive of the California Department of Health Care Services (DHCS) Housing and Homeless Incentive Program Investment Plan(s) (IP) being submitted by Health Net and Kern Health Systems in Kern County. The BKRHC had the opportunity to engage and collaborate with Health Net and Kern Health Systems, provide input on the IP, and were able to review the IP prior to the Medi-Cal managed care plan (MCP) submission. The BKRHC 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 BKRHC 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 BKRHC 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.

Sincerely,

9/22/2022

Anna Laven, Ed. D. Executive Director Bakersfield-Kern Regional Homeless Collaborative

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:	Health Net					
County:	Kern					
•	of my knowledge, the IP provides a true represe tegy for achieving program measures and targe	·				
authorized or designated	r Executive duly authorized to sign on behalf of to make this Certification, and declare that I un f a false or fraudulent claim is punishable under	nderstand that the making of false				
Ву:	Martha Santana-Chin	September 29, 2022				
	Print name	Date				
		Medi-Cal President				
	Signature	Title				