The Health Homes Program (HHP) offers extra services to Medi-Cal members with certain chronic health and/or mental health conditions who have high health care needs or experience chronic homelessness.

Learn more about how the HHP can help the population you serve and how your community-based organization (CBO)/social service agency can work with the HHP.

How Does the HHP Help Members?
Medi-Cal managed care members who join the HHP are given a care team – including a care coordinator. The care team includes health care and social service providers who work together to help members:

- Find doctors and make appointments
- Coordinate the care they receive from different providers
- Understand their prescription drugs
- Get follow-up services after they leave the hospital or a nursing facility
- Connect to community and social services, such as food and housing

How Can CBOs/Agencies Partner with the HHP?
There are several ways you can work with the HHP to help members:

1. Receive referrals from the HHP care team for members who need services, and work with the care team to help members get services (most common role)

2. Join a member’s care team and share information about their services and needs – for clients you already serve, and clients newly referred to your services through the HHP

3. Provide information about the HHP to your existing clients who may qualify and tell them where to get more information and to see if they qualify

The Health Homes Program
bit.ly/HealthHomes
How Does the HHP Connect Members to Community and Social Services?

The HHP care team:

- Engages and builds relationships with CBOs/agencies
- Identifies appropriate community and social services for members
- Provides warm handoff referrals to CBOs/agencies
- Helps members apply for community and social service programs they may qualify for
- Routinely follows up with CBOs/agencies to make sure members obtained needed services

What Community and Social Services are HHP Members Connected to?

Members work with their care team to create a plan to get them the services they need. This is called the Health Action Plan.

Based on this plan, the care team finds and connects members to community and social services, such as:

- Housing Services
- Educational Opportunities
- Transportation Services
- Child Care
- Long-Term Services and Supports
- Legal Resources
- Support Groups
- Food & Nutrition Resources
- Job Training
- Programs to Improve Physical Fitness

The Health Homes Program
bit.ly/HealthHomes
How Should CBOs/Agencies Talk About the HHP?

Consider using the following messages when talking to people about the HHP:

- Members receive extra support at no cost as part of their Medi-Cal benefits.
- Members are given a care team – including a care coordinator – that works together to help them get the health care and social services they need.
- Members keep their doctors and get connected to other doctors and health care workers.
- Joining the HHP will not take away or change any of the member’s Medi-Cal benefits.

Who Can Join the HHP?

To access HHP services, members must meet all 3 requirements:

1. Be enrolled in a Medi-Cal health plan;
2. Have certain chronic physical and/or mental health conditions; and
3. Have been in the hospital, had visits to the emergency room, or experience chronic homelessness.*

Members can call their Medi-Cal health plan for more information and to see if they qualify.

* To be considered chronically homeless, a person must have a condition limiting his or her activities of daily living and have been homeless for:

- 12 consecutive months or more; or
- 4 or more periods of time in the last 3 years

A person who lives in transitional housing, or has been residing in permanent supportive housing, for less than 2 years is considered chronically homeless if they were chronically homeless prior to residence.

Source: AB 361 / W&I Code Section 14127(e)

For More Information:

Visit the DHCS Health Homes Program webpage at bit.ly/HealthHomes or call the local Medi-Cal plans in your county.

To find the phone numbers, go to bit.ly/plandirectory.