



INVESTMENT PLAN – Madera County

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	CalViva Health
Lead Contact Person Name and Title	Mary Lourdes Leone, Chief Compliance Officer
Contact Email Address	Compliance@calvivahealth.org
Contact Phone	559-540-7856

PART I: INVESTMENTS

To determine local HHIP investment opportunities, CalViva Health and our Plan Partner collaborated with the Fresno-Madera Continuum of Care, which serves Fresno and Madera Counties. The costs listed below were determined based on conversations with the CoC and our Plan Partner and are apportioned to Madera 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	During an MCP and CA-514 Fresno-Madera CoC (FMCoC) meeting on September 16, FMCoC identified the need for additional resources to complete the 2023 PIT Count and additional infrastructure to support CalAIM and HHIP implementation, particularly related to Coordinated Entry (CES), HMIS and data sharing requirements,	Funds will support CA-514 FMCoC and/or local housing service providers with the staffing, volunteer recruitment, and incentives to ensure complete geographic coverage for the 2023 PIT Count. Additionally, funds will help FMCoC and/or housing service providers to enhance their infrastructure and capacity to support CalAIM coordination and activities (i.e., Coordinated Entry, HMIS). Funds will also	\$84,000	CA-514 Fresno-Madera CoC (FMCoC), housing service partners, and CalViva Health	10/2022 – 12/2023	1.1, 1.2, 1.6, 2.2	MCP and 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
	and other racial equity efforts.	support MCPs to explore becoming a CES “access site” and gain HMIS access.					
2. Supporting Street Outreach and Street-Based Housing Navigation Services	During an MCP and CA-514 FMCoC meeting on June 2, 2022, and again on September 15, 2022, FMCoC shared that local homeless service providers offer limited outreach services to those most vulnerable. Additional infrastructure (i.e., staffing, technology) support is needed to enhance unsheltered member connections in Madera County.	Funds will support housing service providers with needed infrastructure support to expand outreach to over 128 unsheltered people in Madera County.	\$300,000	Housing service providers	10/2022 – 12/2023	1.2, 1.6, 2.1	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
3. Supporting Landlord Engagement Infrastructure	During a meeting between MCPs and housing service providers on June 2, 2022, providers shared that landlord engagement activities are currently limited in scope. In a subsequent meeting, it was identified that there are no providers in Madera County supporting landlord engagement.	Funds will support local housing service providers with building the infrastructure (i.e., IT, staffing) to support the landlord advocacy activities that open housing slots to those most vulnerable. Tactics may include, but are not limited to, flex funding, Emergency Housing Voucher incentives, Shared Housing Incentives, and mitigation funds.	\$200,000	Housing service providers	10/2022 – 12/2023	3.4, 3.5, 3.6	Direct Member Interventions
4. Supporting Street Medicine Capacity Building	During an MCP and CA-514 FMCoC meeting on July 22, 2022, and again on August 19, 2022, FMCoC shared that there are no street medicine services	Funds will support new street medicine providers in building the infrastructure (i.e., staffing, technology, etc.) to help support the development, implementation, and enhancements	\$150,000	Street medicine providers	10/2022 – 12/2023	2.1, 3.3, 3.4, 3.5	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
	provided in Madera County and that infrastructure support is needed to build these programs.	street medicine services.					
5. Supporting FMCoC's Shared Housing Capacity Building and Training Initiative	During an MCP and CA-514 FMCoC meeting on July 22, 2022, and again on July 19, 2022, the CoC shared that the community lacks affordable housing supply.	Funds will support the Shared Housing Learning Collaborative, which is a series of weekly trainings that are scheduled from October 6 to November 17, 2022, that intend to strengthen knowledge and capacity to expand shared housing options across Fresno and Madera Counties. MCPs, providers and lead staff will learn shared housing tools and resources, engage with national experts in the field, and build local	\$3,500	Shared Housing Institute	10/2022 – 12/2023	1.6, 3.4	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
		capacity to implement shared housing options.					
<p>6. Developing a Health Net Social Determinants of Health (SDOH) Platform</p> <p>NOTE: CalViva has an Administrative Services Agreement (“ASA”) with Health Net Community Solutions, Inc. (“Health Net”). CalViva also has a Capitated Provider Services Agreement (“CPSA”) with Health Net for the provision of health care services to CalViva Health members through Health Net’s network of contracted providers in Fresno, Kings, and Madera Counties.</p>	Health Net needs to enhance its existing technical capabilities and processes to handle SDOH/HMIS workflow more optimally 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 housing status.	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 housing and other SDOH data exchange and integration with various 3rd party vendors and community	\$42,933	Health Net	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
		<p>provider systems. This platform will include data exchange through SFTP/FHIR API with HMIS systems.</p>					

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), CalViva Health (CalViva) is committed to collaborating with the Fresno-Madera Continuum of Care (FMCoC) and our Plan Partner in Madera 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 could arise that may impact CalViva's ability to achieve our goals and HHIP program goals include, but are not limited to, the following:

- The ability of CalViva's 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 CalViva Health 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:

CalViva Health is making investments to support our internal data systems and the local HMIS achieve two-way 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.

Our ability to ultimately house our members and meet HHIP Priority Area 3 measures through investments in housing supply 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:

- FMCoC 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 CalViva Health will take include, but are not limited to, the following:

- Establish and maintain ongoing communication channels between our Plan Partner and FMCoC 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 FMCoC agreed to discuss and assess HHIP implementation in FMCoC’s Document Collection and Housing Navigation Workgroup meetings.
- Develop guardrails that promote accountability and minimize fraud, waste, and abuse, including ensuring that the financial agreements between CalViva Health and entities receiving HHIP disbursements include provisions with specific fund use cases and clear processes to ensure funds are used properly.
- Continue to educate the CoCs 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, CalViva Health 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 Fresno-Madera CoC's Letter of Support attached in the Appendix.

PART IV: Attestation

Please find CalViva Health's signed MCP Attestation attached in the Appendix.



FRESNO MADERA CONTINUUM OF CARE

September 19, 2022

To: California Department of Health Care Services

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

The Fresno Madera Continuum of Care (FMCoC) is pleased to provide this letter in support of the California Department of Health Care Services (DHCS) Housing and Homelessness Incentive Program Investment Plans submitted by Anthem Blue Cross and CalViva Health for Fresno and Madera Counties.

Anthem Blue Cross and CalViva Health have actively engaged the FMCoC by participating in general membership meetings, leadership meeting and action camps with the goal of working in partnership to develop strategies to reduce homelessness among their members.

The FMCoC has had the opportunity to engage and work in partnership with Anthem Blue Cross and CalViva Health, collaborate on the HHIP Investment Plan, and review the plan prior to the Medi-Cal managed care plan (MCP) submission. The FMCoC 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 FMCoC 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 FMCoC is committed to collaborating with the MCPs as they engage locally to meet HHIP program metrics.

If you have any questions, please contact me at lhaga@fresnocountyca.gov or via phone at (559) 600-2335. Thank you.

Sincerely,

Laura Moreno, Chair
Fresno Madera Continuum of Care

**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: CalViva Health

County: Madera

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: Mary Lourdes Leone

Print name

September 30, 2022

Date



Signature

Chief Compliance Officer

Title