



# **INVESTMENT PLAN TEMPLATE**

## **HOUSING AND HOMELESSNESS INCENTIVE PROGRAM**

July 18, 2022

## PURPOSE OF THIS INVESTMENT PLAN TEMPLATE

The Housing and Homelessness Incentive Program (HHIP) is a Medi-Cal Managed Care Plan (MCP) incentive program through which MCPs may earn incentive funds for improving health outcomes and access to whole person care services by addressing homelessness and housing insecurity as social drivers of health and health disparities. The HHIP rewards MCPs for developing the necessary capacity and partnerships to connect their members to needed housing services and taking active steps to reduce and prevent homelessness.

The California Department of Health Care Services (DHCS) is providing this Investment Plan (IP) Template as a required submission for MCPs seeking to participate in the HHIP. The primary goal of the IP is for MCPs participating in the HHIP to demonstrate to DHCS that they have a clear plan for achieving measures and targets across the course of the program, in collaboration with their local partners, through targeted investments in activities and efforts that align with program measures and goals and support the MCP's performance strategies. MCPs will be eligible to earn incentive payments for successful completion and submission of the IP, subject to acceptance of the IP by DHCS. The IP is worth up to 10% of each MCP's allocated earnable funds for HHIP overall. DHCS will evaluate the IP based on the MCP's demonstration of a meaningful investment strategy, including how adequately stated needs are addressed and how effectively funding is targeted, to support the achievement of program measures and goals.

Participating MCPs will be eligible to earn HHIP payments for the successful completion or achievement of HHIP program milestones and measures. Such payments do not constitute pre-funding or reimbursement for investments made using MCP funds in pursuit of program milestones and measures. Once the HHIP payments are earned by the MCP, DHCS does not direct or restrict the MCP's use of the earned incentive funds.

Each MCP must collaborate with the local Continuum(s) of Care (CoCs) to complete one IP per county in which they are participating in HHIP using this Word file template. **Completed IPs must be submitted to DHCS no later than Friday, September 30, 2022.**

## HHIP Program Submissions



## INVESTMENT PLAN SUBMISSION STRUCTURE

The IP template has the following four components (with associated earnable points) and must be completed in full and submitted to DHCS no later than **September 30, 2022**. DHCS will not accept a submission if any of the components are missing (i.e., an incomplete submission) or unsatisfactory. MCPs participating in the HHIP across multiple counties must submit a separate IP for each county.

- **PART I: Investments:** MCPs must submit a narrative describing specific investments they intend to make to overcome identified housing and service gaps and needs to meet the goals of HHIP. The narrative should include details of anticipated funding activities, investment amounts, recipients, and timelines. For each intended investment, MCPs must specify:
  1. Which HHIP measures each investment is intended to impact; and
  2. Whether each investment will support MCP or provider/partner infrastructure and capacity (or both), or direct member interventions.
- **PART II: Risk Analysis:** MCPs must conduct a brief risk analysis to identify challenges they may face in achieving the HHIP program goals and in making the investments outlined in Part 1. This narrative description will include what steps the MCP might take to address these potential risks and barriers.
- **PART III: CoC Letter of Support:** MCPs must submit a signed letter of support from their CoC partner(s) validating that the CoC(s) collaborated with the MCP, were given an opportunity to review the MCP's IP, and support the MCP's IP. The letter of support should be included with this IP submission **as an appendix**.<sup>1</sup>
- **PART IV: Attestation:** MCPs must provide a signed attestation that the IP provides a true representation of the MCP's expected investment plan and strategy for achieving program measures and targets. The attestation must be signed under penalty of perjury by the MCP's Chief Executive Officer or Chief Financial Officer, or equivalent executive officer, or their designee, and included with this IP submission **as an appendix**.

As part of the HHIP submission 1 requirement, MCPs may detail any proposed prospective changes to the IP based on observed impacts and lessons learned from investments made during the measurement period. If prospective changes are not proposed, MCP must submit reaffirmation that the original IP (this submission) remains up to date. Retrospective changes are not allowable.

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<sup>1</sup> If an MCP is operating in a county with multiple CoCs, the MCP must obtain letters of support from at least 50% of the CoCs in the county.

## MCP INFORMATION

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

<b>MCP Name</b>	Central California Alliance for Health
<b>Lead Contact Person Name and Title</b>	Kate Nester, Program Development Manager
<b>Contact Email Address</b>	kvester@ccah-alliance.org
<b>Contact Phone</b>	510 329 6554

## PART I: INVESTMENTS

Using the table below, MCPs must submit a narrative describing specific investments they intend to make to overcome existing funding gaps and meet the goals of the HHIP. For each investment activity, MCPs should include details on anticipated:

- I. **Investment Activity:** Investment that will be made throughout CY 2022 and CY 2023 toward achieving the HHIP program goals to (1) ensure MCPs have the necessary capacity and partnership to connect their members to needed housing services, and (2) reduce and prevent homelessness.
- II. **Gap or Need Addressed:** Identify the existing funding gaps or county needs that the investment is intended to address and specify how the MCP identified this gap/need (i.e., in reviewing the HHAP<sup>2</sup>, through conversations with the CoC). Funding gaps and county needs are defined as gaps/needs in housing-related infrastructure, capacity and provider partner capabilities that are not sufficiently funded to meet the needs of Medi-Cal beneficiaries.
- III. **Description:** Details of the investment activity, including anticipated:
  - a. Dollar amount. If the specific dollar amount is not known at this time, the MCP may provide a dollar range, which should be as narrow as possible.
  - b. Recipient(s). If the specific organization is not known at this time, the MCP may provide the type of recipient which should be defined as specifically as possible (i.e., all FQHCs in a defined geographic region, short-term housing shelters in need of beds).
  - c. Timelines for the investment activity, including potential plans for sustainability after the conclusion of the HHIP.
- IV. **HHIP Measures Impacted:** Specify HHIP measure(s) that the investment activity is intended to impact. In total across all investments, a minimum of ten measures that are designated “P4P” in either Submission 1 or Submission 2, or both, must be impacted.
- V. **Domain Targeted:** Specify whether the investment will support MCP or provider/partner infrastructure and capacity (or both), or serve as a direct member intervention.

MCPs may add additional rows to the table submission as needed.

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<sup>2</sup> Materials for each round of HHAP can be accessed on the [HHAP website](#). MCPs should use the HHAP-3 assessment of funding availability to inform their IP submission (or the HHAP-2 assessment, if the HHAP-3 assessment is unavailable).

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
Provider/Partner Support	<p>Lack of landlord engagement and recruitment in housing and homelessness initiatives.</p> <p>The Alliance identified this gap/need through conversations with the CoC.</p>	<p>Establish a landlord engagement and retention program where through procurement process, a landlord engagement lead is identified and contracted to perform services to the CoC geographical area. The process of a referral system can be developed to assist in facilitating referrals for services through this landlord engagement program. Racial equity shall be address when developing parameters of program participants. At least one member of the served household must be an Alliance member.</p>	Dollar amount TBD to ensure use of funds do not overlap with existing CS.	Local providers, community-based organizations (CBOs) and/or county agencies	1/2023 – 10/2023	3.5 3.6	Direct Member Interventions
Provider/Partner Support	<p>Additional street outreach capacity to serve people experiencing homeless across the county.</p> <p>The Alliance identified this gap/need through conversations with the CoC and</p>	<p>Expand &amp; improve street outreach countywide, with an emphasis on reaching communities disproportionately impacted by housing disparities and inequities in county.</p>	\$720,000	Sierra Saving Grace, Merced County Rescue Mission, Turning Point Community Programs, Merced Community Action Agency, JMJ Maternity Homes	1/2023 – 10/2023	3.3 3.4 3.5 1.6	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
	service providers.						
CoC Support	<p>Comprehensive strategy to include the voice of people with lived experience (PLE) in CoC board and workgroups.</p> <p>The Alliance identified this gap/need through conversations with the CoC.</p>	<p>Fund external consultant to develop and implement strategy with CoC to include the voice of people with lived experience (PLE) in CoC board, community-based organizations, committees, and workgroups. The external consultant will also provide information to the Trusted Advisory Group (TAG). This is an advisory group comprised of people with lived experience. Monthly meetings include discussions on topics related to people with lived experience and their challenges/proposed remedies. When developing and analyzing data, the external consultant will also review for racial disparities. Current racial equity analysis identifies the following populations are</p>	\$120,000 a year plus admin costs	External consultant	1/2023 – 10/2023	1.6	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
		disproportionately impacted: People aged 50 and over, veterans, people of color/BIPOC, families with children, and unaccompanied youth. The CoC Board and Membership has an approved prioritization list of subcategories of persons experiencing homelessness. Utilizing this strategy, the most vulnerable and those with the highest needs are offered services with priority. Work with the CoC committees to help establish processes and meetings specifically the health committee.					
Provider/ Partner Support	Inability for Alliance to match member information with HMIS client information or to receive timely alerts when members experience changes in housing status.	Fund infrastructure to facilitate interoperability between local HMIS product and Alliance’s data systems, including funding for dedicated data manager to assess, monitor, and review CES data for meaningful and prioritized placements and service coordination, as well as to provide data feed or extract from Clarity to the Alliance.	\$15,000 - \$30,000	Merced County Community Action Agency (MCCAA)	6/2022 – 12/2022 (member matching)  1/2023 – 10/2023 (timely alerts)	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
	The Alliance identified this gap/need through conversations with the CoC and HMIS Administrator.						
Provider/ Partner Support	Support community level care coordination and population/policy analytics.  The Alliance identified this gap/need through conversations with the CoC and HMIS Administrator.	Fund HMIS Administrator to provide ongoing data feed to a local Health Information Exchange (HIE)	\$85,000 - \$160,000	Merced County Community Action Agency (MCCAA)	1/2023 – 10/2023	2.2	Provider/ Partner Infrastructure
Provider / Partner Support	Increase ability for housing-related services providers to actively share MCP member housing status information.	Fund local providers, CBOs and/or county agencies who are contracted to provide housing-related services to create and operationalize the systems and processes necessary to actively share MCP Member housing status	\$100,000 - \$150,000	Local providers, community-based organizations (CBOs) and/or county agencies	1/2023 – 12/2025	1.2	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
	<p>The Alliance identified this gap/need through conversations with the CoC.</p>	<p>information.</p>					
<p>Provider / Partner Support</p>	<p>Partnerships and strategies to support communities most impacted by housing instability &amp; homelessness. Per HHAP Round 3 Application, disproportionately impacted communities include People aged 50 and over, veterans, people of color/BIPOC, families with children, and unaccompanied youth.</p> <p>The Alliance identified this gap/need in reviewing the</p>	<p>Fund external consultant to create and implement strategy to address stated disparities and inequities identified in HHAP-3, including informing local orgs of disparate populations &amp; working towards expanding relationships w/ orgs that serve these populations to assure equitable access to CS services to house individuals; as well as working w/ partner orgs to diversify &amp; train workforce to meet needs of communities most impacted by housing instability &amp; homelessness.</p>	<p>\$300,000</p>	<p>External consultant</p>	<p>1/2023 – 12/2024</p>	<p>1.6</p>	<p>Provider/ Partner Infrastructure</p>

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
	HHAP-3 and through conversations with the CoC.						
MCP Capacity	<p>Alliance capacity to track and manage referrals to CS.</p> <p>The Alliance identified this gap/need through internal conversations, as well as conversations with the CoC.</p>	Fund a discreet system, vendor, or consultant to build internal capacity for tracking and managing referrals for CS providers, as is directly related to HHIP implementation.	\$50,000 - \$66,000	Vendor or consultant	1/2023 – 10/2023	2.3	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
CoC Support	<p>Increase CoC participation amongst all service providers.</p> <p>The Alliance identified this gap/need through conversations with the CoC.</p>	<p>Fund a vendor or consultant to create and implement an outreach and incentive strategy to ensure ALL providers/organizations servicing individuals/households experiencing homelessness or at-risk of homelessness join the CoC.</p>	TBD	Vendor or consultant	1/2023 – 10/2023	1.1	Provider/ Partner Infrastructure
Point in Time (PIT) Count	<p>Increase financial resources and volunteers to support the 2023 PIT count.</p> <p>The Alliance identified this gap/need through conversations with the CoC.</p>	<p>Fund the identified PIT vendor to build capacity for volunteers. The Vendor is seeking financial assistance to provide incentives to recruit more volunteers for the PIT count. The number of volunteers has lessened, making it more difficult to staff adequate coverage for each PIT area.</p>	\$2,000	Phil Schmauss	01/2023	1.1	Provider/ Partner Infrastructure

## PART II: RISK ANALYSIS

Using the space below, MCPs must submit a narrative response detailing a brief risk analysis for their IP, including:

- 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;
- II. Which aspects of the IP might be affected by those factors; and
- III. What steps the MCP would take to address these factors and avoid or mitigate impact to the IP.

### Description of Anticipated Contingencies (500 - 1000-word limit)

**Risk:** Merced County CoC shared that they have experienced low uptake of responses to RFPs among local service providers. Limited capacity among local partners may make it difficult to execute new LOAs to achieve various HHIP goals.

- Investments Impacted: Funding streams with service providers as primary recipients
- Mitigation Strategies: The Alliance will continue to educate service providers that offer CS and ECM on the IPP funds available support capacity building. The Alliance will also explore partnering with service providers based in other counties that may be interested in expanding presence in our service area.

**Risk:** Among our three service areas, there is variation in how funding will be administered. For example, in Santa Cruz County the Alliance will contract with the CoC to fund many of HHIP related activities, who will then subcontract with relevant service provider members. Meanwhile in Merced County, the Alliance will largely contract directly with service providers. Due to this variation, throughout the measurement period we anticipate facing challenges in partner alignment in strategic focus on development, execution and monitoring of the HHIP activities.

- Investments Impacted: All
- Mitigation Strategies: For the duration of measurement period 2, the Alliance will develop and implement a shared leadership oversight structure in each of our service areas, including periodic joint check ins with the CoC and key local service provider partners for each funding stream.

**Risk:** Lack of capacity from community-based partners to execute HHIP activities.

- Investments Impacted: Funding streams with service providers as primary recipients.
- Mitigation Strategies: As additional capacity gaps are identified throughout measurement period 2, the Alliance will consider administering additional funds through the CalAIM Incentive Payment Program (IPP) and/or the Alliance Medi-Cal Capacity Grant Program to supplement HHIP incentive funding.

**Risk:** Uncertainty that county behavioral health departments in our service areas will align with intent to share data, due to low

bandwidth and additional legal considerations in sharing patient data related to behavioral health and substance use disorder treatment.

- Investments Impacted: HHIP Measure 1.5
- Mitigation Strategies: To avoid duplication of effort and align with existing county behavioral health data sharing priorities, the Alliance will align HHIP data sharing activities with the data that county agencies are being incentivized to share with Managed Care Plans under the Behavioral Health Quality Improvement Program.

### **PART III: CoC LETTER OF SUPPORT**

MCPs must submit a signed letter of support from their CoC partner(s) validating that the CoC(s) collaborated with the MCP, were given an opportunity to review the MCP's IP response, and support the MCP's IP. For MCPs in counties with more than one CoC, **at least 50% of CoCs** must provide signatures indicating their support.

**The CoC letter of support or CoC signature(s) should be included with this IP submission as an appendix.**

### **Part IV: Attestation**

MCPs must provide a signed attestation that the IP provides a true representation of the MCP's expected investment plan and strategy for achieving program measures and targets as of the date of signature. The attestation must be signed under penalty of perjury by the MCP's Chief Executive Officer or Chief Financial Officer, or equivalent executive officer, or their designee.

**The signed attestation should be included with this IP submission as an appendix.**



Matthew Serratto  
Merced CoC Chair

Collaborative Applicant  
2115 W. Wardrobe Avenue  
Merced, CA 95341  
(209) 385-3000 x 5510  
Collabapp@countyofmerced.com

September 14, 2022

Central California Alliance for Health  
Kate Nester, Program Development Manager  
1600 Green Hills Road, Ste 101  
Scotts Valley, CA 95066

SUBJECT: Merced City and County Continuum of Care Letter of Support

Dear Ms. Nester,

On September 1, 2022, the Merced City and County Continuum of Care (CoC) Board and General Membership had the opportunity to review the Housing and Homeless Incentive Program (HHIP) Investment Plan provided by Central California Alliance for Health (CCAH). The CoC Board approved to provide a letter of support for your Investment Plan to be included with your HHIP application by September 30, 2022.

The CoC is in support of a continual effort to work with CCAH in developing community partnerships.

If you have any questions, please contact John Ceccoli, (209) 385-3000 extension 5880.

Sincerely,

Matthew Serratto  
Chairman  
Merced City and County Continuum of Care

