



# **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>	Health Plan of San Mateo
<b>Lead Contact Person Name and Title</b>	Amy Scribner, Chief Health Officer
<b>Contact Email Address</b>	<a href="mailto:Amy.scribner@hpsm.org">Amy.scribner@hpsm.org</a>
<b>Contact Phone</b>	650-616-5012

## 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
<i>Example: CoC Support</i>	<i>Insufficient resources for the CoC to complete the PIT count; based on MCP/CA-501 conversation on June 15.</i>	<i>Support CA-501 San Francisco CoC in the collection of point in time (PIT) count of members by January 2023</i>	<i>\$50,000 - \$80,000</i>	<i>CA-501 San Francisco CoC</i>	<i>6/2022 – 1/2023</i>	<i>3.3</i>	<i>Provider/ Partner Infrastructure</i>
1. CoC Support	Insufficient resources for PIT count; <i>identified via conversation with CoC and HHAP</i>	HPSM will fund one temporary employee for Human Service Agency, Center for Homelessness	\$110,000-\$125,000	San Mateo CoC	1/2023-12/2023	3.3	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
2. San Mateo County HIE implementation	Current HIE is limited and outdated. This will allow for a new more efficient HIE to be implemented and data to be shared regularly; <i>conversation with County and HHAP review</i>	Build, implementation, and reporting of HIE	\$1,500,000	San Mateo County	11/1/2022 – 1/1/2024	3.1/3.2	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. Data support	County HSA has data in the system that has not been reported or analyzed ; <i>conversation with CoC and HHAP review</i>	This will fund a limited term data analyst person who will help with data mine, analysis of gaps, and integrate data from different entry points. This data can be reviewed for gaps and addressing barriers. Aggregate/cohort data can be shared with HPSM to improve collaborative planning.	\$200,000-\$250,000	San Mateo County Human Services Agency	1/1/2023 – 12/31/2024	3.1/3.2 /1.2	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
4. Services implementation	Expanding street medicine services; <i>conversation with CoC and HHAP review</i>	This will fund the implementation of a new street medicine provider to additional geography and support new Homeless Navigation Center launch	\$250,000	County /Health care in Action Provider start-up	1/1/2023 – 3/1/2023	2.1	Provider/Partner Infrastructure
5. MCP support	CoC partnership, addressing gaps and barriers, increase uptake of housing related Community Supports ; <i>conversation with</i>	This will add a support position at HPSM who will be primarily responsible for overseeing the relationship with HSA/Coordinated Entry System/Center for Homelessne	\$250,000	HPSM	1/1/2023-7/1/2024	1.1/1.4 /2.3	MCP support

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
	<i>County and CoC</i>	ss and will also support data exchange and system level planning along with primary responsibility for oversight of dollars being sent to providers.					

## 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)

1. Data-sharing: We are excited that the county will be investing in an enterprise-wide HIE, and we believe this investment will accelerate that transition. However, we know unintended delays can occur during system implementations and this could affect HHIP deliverables. We will address this risk by working with the county to improve the current data transfers and bolster current systems data sharing as much as possible in the interim.
2. Recruitment: Two key investments involve hiring and training staff to perform critical work. There have been challenges hiring staff recently, especially in recruiting limited term staff. To mitigate, we will proceed in recruiting, hiring, and training for permanent positions ASAP, especially HPSM staff, so that timelines are met. We will also offer the County assistance in their limited term recruiting to reduce delays.
3. Program Timing/Reporting: The HHIP fosters collaboration to address systemic issues which have led to increasing housing instability, especially with the high cost of living in our county. We will work to improve coordination across the community, but there is risk that the systemic changes needed will take more time than is allotted for HHIP. To mitigate, we will adjust our program and evaluate elements of program success to leverage and build on in future years.

## **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.**

***\*HPSM is a COHS plan in San Mateo County and has only one CoC – see Appendix A for Letter of Support\****

## **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.**

***\*See appendix B\****

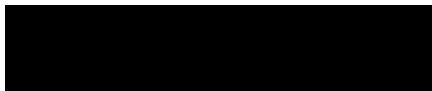
September 30, 2022

California Department of Healthcare Services  
P.O. Box 9977413  
Sacramento, CA 997413  
[DHCSHIP@dhcs.ca.gov](mailto:DHCSHIP@dhcs.ca.gov)

To Whom It May Concern:

This letter is to provide support and documentation of collaboration with the Health Plan of San Mateo (HPSM) on the Housing and Homelessness Incentive Plan (HHIP) Investment Plan. We have collaborated with HPSM on both the first HHIP submission and provided input in development and review of the current the investment plan for this round. We support HPSM's HHIP Investment Plan submission and look forward to continuing to partner and serve San Mateo County together.

Sincerely,



Jessica Silverberg  
Manager, Center on Homelessness  
CoC Lead Agency for CoC CA-512 (San Mateo County/Daly City CoC)



**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 Plan of San Mateo  
**County:** San Mateo

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:** Patrick Curran 9/30/2022  
Print name Date

 Digitally signed by Patrick Curran  
DN: cn=Patrick Curran, o=Health Plan of San Mateo,  
ou=Executive, email=pat.curran@hpsm.org, c=US  
Date: 2022.09.30 13:28:29 -07'00' CEO  
Signature Title