

Housing Stabilization Services

A new Medicaid benefit available July 2020 to help people with disabilities and seniors find and keep housing.

Making the connection: Housing and Health

“Access to safe, quality, affordable housing - and the supports necessary to maintain that housing - constitute one of the most basic and powerful social determinants of health.” –Corporation for Supportive Housing (CSH)

Some of the connections between housing and health include:

- High prevalence of serious health conditions among homeless population
- Lack of access to housing can lead to extended stays in healthcare institutions
- Lack of stable housing has a negative impact on health
- Overuse of emergency health services when people lack safe, stable housing.

Because of the strong connection between health and housing, it is important that we address access to housing within our healthcare system.

How can Housing Stabilization Services help?

Everyone needs a home, but for some, mental illness symptoms, physical health conditions and developmental or learning disabilities make it difficult for them to search for and secure housing, interact with landlords and neighbors, and understand and follow a lease. The right supports, provided by a professional with knowledge and experience in housing, can help resolve barriers people face in finding and keeping housing.

The Centers for Medicaid and Medicare Services (CMS) approved adding Housing Stabilization Services to Minnesota’s state plan on August 1, 2019. Services will become available for eligible Medical Assistance recipients in July 2020.

The **goals** of Housing Stabilization Services are to:

- Support an individual’s transition to housing
- Increase long-term stability in housing
- Avoid future periods of homelessness or institutionalization

Eligibility and Evaluation



The chart above shows the recipient eligibility requirements for Housing Stabilization Services. This section discusses those requirements and how potential recipients are assessed and evaluated to determine if they are eligible. In order to receive Housing Stabilization Services, a recipient must meet the following criteria:

- 1) **Medical Assistance recipient** who is 18 years old or older
- 2) Have a documented **disability or disabling condition** as defined by Department of Human Services Housing Support guidelines, which includes:
 - Anyone who is aged, blind, or disabled as described under Title II of the Social Security Act; and
 - People determined by a medical professional to have any the following conditions: long-term injury or illness, mental illness, developmental disability, learning disability, or substance use disorder.

Proof of disability can be documented using a Professional Statement of Need, Medical Opinion Form, proof of receipt of SSI or SSDI, and other forms of disability documentation to be determined.

- 3) Be **eligible for waiver services** OR be experiencing **housing instability** as defined by one of the following:
 - Meets Minnesota’s definition for homeless or is at-risk of homelessness¹; or
 - Currently transitioning or have recently transitioned from an institution or licensed or registered setting².
- 4) Have an **assessed need for services** and **requires assistance** due to their disability in one of the following areas: communication, mobility, decision-making, or managing challenging behaviors.

Housing instability and an assessed need for services can be documented using a **Professional Statement of Need**. For persons with a need for Long Term Services and Supports, a **MnCHOICES assessment** or Long-term Care Consultation can be used. For persons experiencing homelessness, a **Coordinated Entry assessment** can be used.

¹An individual or family is considered homeless when they lack a fixed, adequate nighttime residence. At-risk of homelessness occurs when (a) the individual or family is faced with a situation or set of circumstances likely to cause the household to become homeless, including but not limited to: doubled-up living arrangements where the individual’s name is not on a lease, living in a condemned building without a place to move, having arrears in rent/utility payments, receiving an eviction notice without a place to move and/or living in temporary or transitional housing that carries time limits; or (b) the person, previously homeless, will be discharged from a correctional, medical, mental health or substance use disorder treatment center, and lacks sufficient resources to pay for housing, and does not have a permanent place to live.

²Includes Housing With Services, Board and Lodge, Boarding Care, Adult Foster Care, hospital, ICF-DD, Intensive Residential Treatment facility, Minnesota Security Hospital, nursing facility, Regional Treatment Center

Services and Requirements

| TRANSITION SERVICES Community supports that help people plan for, find, and move into housing. | SUSTAINING SERVICES Community supports that help a person maintain housing. |
|---|---|
| <ul style="list-style-type: none"> • Creating a housing transition plan, including helping a person understand and develop a budget. • Assisting with the housing search and application process. • Identifying and assisting in resolving barriers to accessing housing, including identifying resources to cover moving expenses, deposits, application fees, etc. • Securing additional services, benefits and resources to support housing. • Helping a person organize their move and ensuring the new living arrangement is safe and ready for move-in. | <ul style="list-style-type: none"> • Creating a housing stabilization plan. • Education on roles, rights, and responsibilities of the tenant and property manager, including training on being a good tenant, lease compliance, and household management. • Coaching to develop and maintain key relationships with property managers and neighbors. • Advocacy with community resources to prevent eviction when housing is at risk. • Prevention and early identification of behaviors that may jeopardize continued housing. • Assistance with maintaining services and supports, including applying for benefits to retain housing. • Supporting the building of natural housing supports and resources in the community. |

Person-centered planning

Everyone receiving Housing Stabilization Services is required to have a *person-centered service plan*. The person-centered planning process must:

- be driven by the individual;
- include the person’s strengths, interests, wants as well as what supports they need; and
- help the person make an informed choice about their housing stabilization service provider.

Recipients who are receiving waiver case management or Targeted Case Management will get their plan completed by a case manager.

Housing Consultation is a new service available through Housing Stabilization that provides a person-centered plan for those recipients not receiving case management. The housing consultant monitors and updates the plan annually or more frequently if the person requests a plan change, experiences a change in circumstance or wants to change housing stabilization provider.

Provider Qualifications

Below is a table that shows the required qualifications and payment rate for eligible providers of the service.

| Provider Type | Qualification | Rate |
|-----------------------------------|---|---|
| Housing Consultation | <ul style="list-style-type: none"> • Planning must be focused on supporting a person to move into a setting which is Home and Community Based Settings compliant. • Knowledge of local housing resources and must not have a direct or indirect financial interest in the property or housing the participant selects. • Completed housing consultation training approved by the Commissioner. | \$174.22 per session One session annually (Additional sessions available if major change in circumstance, change in HSS provider or upon request of recipient.) |
| Housing Transition and Sustaining | <ul style="list-style-type: none"> • Knowledge of local housing resources. • Completed housing stabilization service training approved by the Commissioner. • Completed mandated reporter training which includes training on Vulnerable Adult law. | \$17.17 per 15-minute unit Transition is limited to 150 hours per transition Sustaining is limited to 150 hours annually |

Additionally, all providers must apply the standards in Minnesota Statutes, chapter 245C concerning criminal background studies.

Conflict of Interest Protections



The same provider (agency) cannot perform BOTH the evaluation, assessment and plan of care AND provide the Housing Transition and Sustaining services for the same person.

Home and Community-Based Services settings requirement

To receive Housing Stabilization Services, a person must be living in, or planning to receive services in a setting that complies with all home and community-based setting (HCBS) requirements identified by the federal Centers for Medicare & Medicaid Services in the Code of Federal Regulations, title 42, section 441.301 (c).

The setting must be integrated in and support full access to the greater community; ensure an individual's rights or privacy, dignity and respect, and freedom from coercion and restraint; optimize individual initiative, autonomy and independence to make life choices; and facilitate individual choice about services and supports and who provides them. Provider-controlled settings must meet additional requirements.

Frequently Asked Questions

1. Does Housing Stabilization Services pay for goods such as security deposits or furnishings, room and board or rent?

No. These services will not pay for goods such as security deposits or furnishings, room and board, or rent.

2. Are all Housing Stabilization Services required to be face-to-face?

Up to 20 percent of services can be provided through remote support.

3. How will these new services impact existing services?

Because the services are designed to meet the same purpose, Housing Access Coordination will end and recipients will move onto Housing Stabilization Services. People currently receiving Housing Access Coordination will transition onto Housing Stabilization. The transition plan is still under development and will ensure no one has gaps in service. More communication about this process forthcoming.

Recipients receiving Housing Support will have a supplemental service rate adjustment if they are also using Housing Stabilization Services.

4. Can people receive these services to help them move into an Adult Foster Care or Housing with Services/Assisted Living facility?

Recipients will not be able to use these services to move into adult foster care.

Recipients may use transition services to move into a Housing with Services/Assisted Living facility provided that they meet the Home and Community Based Services settings requirements and the setting is more integrated than their current housing.

5. Can a recipient ever receive BOTH the evaluation, assessment and plan of care AND the direct services from the same provider?

Generally no, however, in certain circumstances, providers can be authorized to perform both when they are:

1. In a geographic provider shortage area; OR
2. Providing services to individuals who share a common language or cultural background.