



L.A. CARE HHSS PROVIDER GUIDE

PROVIDER RESONSIBILITIES & EXPECTATIONS

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PROVIDER RESONSIBILITIES & EXPECTATIONS SUMMARY

HHSS PROVIDER GUIDE

Overview of Provider Responsibilities and Expectations for LA Care HHSS contracted providers. Please share with your housing teams, including Housing Navigators and Case Managers working with HHSS enrolled members.

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OVERVIEW

L.A. Care Homeless and Housing Support Services (HHSS) provides two services to eligible members:

- **Housing Navigation (HN)** — services to help homeless members find housing.
- **Tenancy Sustaining Services (TSS)** — services to help formerly homeless members maintain safe and stable tenancy once housing is secured.

Please note that HHSS does not offer housing subsidies or housing vouchers.

ELIGIBILITY: HOUSING NAVIGATION

L.A. Care MCLA or DSNP Member; and

1. Individuals who are prioritized for a permanent supportive housing* unit or rental subsidy resource through CES or similarsystem	AND	Meet at least one of the following: • highly vulnerable individuals with disabilities; and/or • one or more serious chronic conditions; and/or • serious mental illness; or • institutionalization; or • requiring residential services because of a substance use disorder; and/or • exiting incarceration;
OR		
2. Individuals who meet the (HUD) definition of homeless	AND	Meet at least one of the following: • ECM; or • one or more serious chronic conditions; and/or • serious mental illness; and/or • at risk of institutionalization; or • requiring residential services as a result of a SUD
OR		
3. Individuals who meet the HUD definition of at risk of homelessness (see DHCS guidelines for details on 1) At-risk of Homelessness Individual or Family and 2) At-risk of Homelessness Child or Youth	AND	Must meet at least one of the following: • Have one or more serious chronic conditions; • Have a Serious Mental Illness; • Are at risk of institutionalization or overdose or requiring residential services because of a substance use disorder or Serious Emotional Disturbance (children and adolescents); • Are receiving ECM; or • Are a Transition-Age Youth with significant barriers to housing stability, such as one or more convictions, a history of foster care, involvement with the juvenile justice or criminal justice system, and/or have a serious mental illness and/or a child or adolescent with serious emotional disturbance and/or who have been victims of trafficking or domestic violence.

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ELIGIBILITY: TENANCY SUSTAINING SERVICES

L.A. Care MCLA or DSNP Member; and

1. Any individual who received Housing Transition/Navigation Services CS in counties that offer Housing Transition/Navigation Service		
OR		
2. Individuals who are prioritized for a permanent supportive housing* unit or rental subsidy resource through CES or similarsystem	AND	Meet at least one of the following: • highly vulnerable individuals with disabilities; and/or • one or more serious chronic conditions; and/or • serious mental illness; or • institutionalization; or • requiring residential services because of a substance use disorder; and/or • exiting incarceration;
OR		
3. Individuals who meet the (HUD) definition of homeless	AND	Meet at least one of the following: • ECM; or • one or more serious chronic conditions; and/or • serious mental illness; and/or • at risk of institutionalization; or • requiring residential services as a result of a SUD
OR		
4. Individuals who meet the HUD definition of at risk of homelessness (see DHCS guidelines for details on 1) At-risk of Homelessness Individual or Family and 2) At-risk of Homelessness Child or Youth)	AND	Must meet at least one of the following: • Have one or more serious chronic conditions; • Have a Serious Mental Illness; • Are at risk of institutionalization or overdose or requiring residential services because of a substance use disorder or Serious Emotional Disturbance (children and adolescents); • Are receiving ECM; or • Are a Transition-Age Youth with significant barriers to housing stability, such as one or more convictions, a history of foster care, involvement with the juvenile justice or criminal justice system, and/or have a serious mental illness and/or a child or adolescent with serious emotional disturbance and/or who have been victims of trafficking or domestic violence.

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HHSS REFERRAL PROCESS

Members may be identified as eligible and referred to HHSS services in two ways: by LA Care or by the Provider

LA Care Identified

1. LA Care identified and referred Member
 - Referring party obtains Member opt-in to HHSS services prior to authorization form submission
2. Assignment to contracted Provider
 - An Authorization Letter is sent to the referring agency, assigned Provider, and Member
 - Upon referral authorization/approval, Member automatically enrolled with assigned Provider
 - Provider must outreach to Member within 5-days of assignment
 - Providers must acknowledge notification email upon receipt within 48-hours

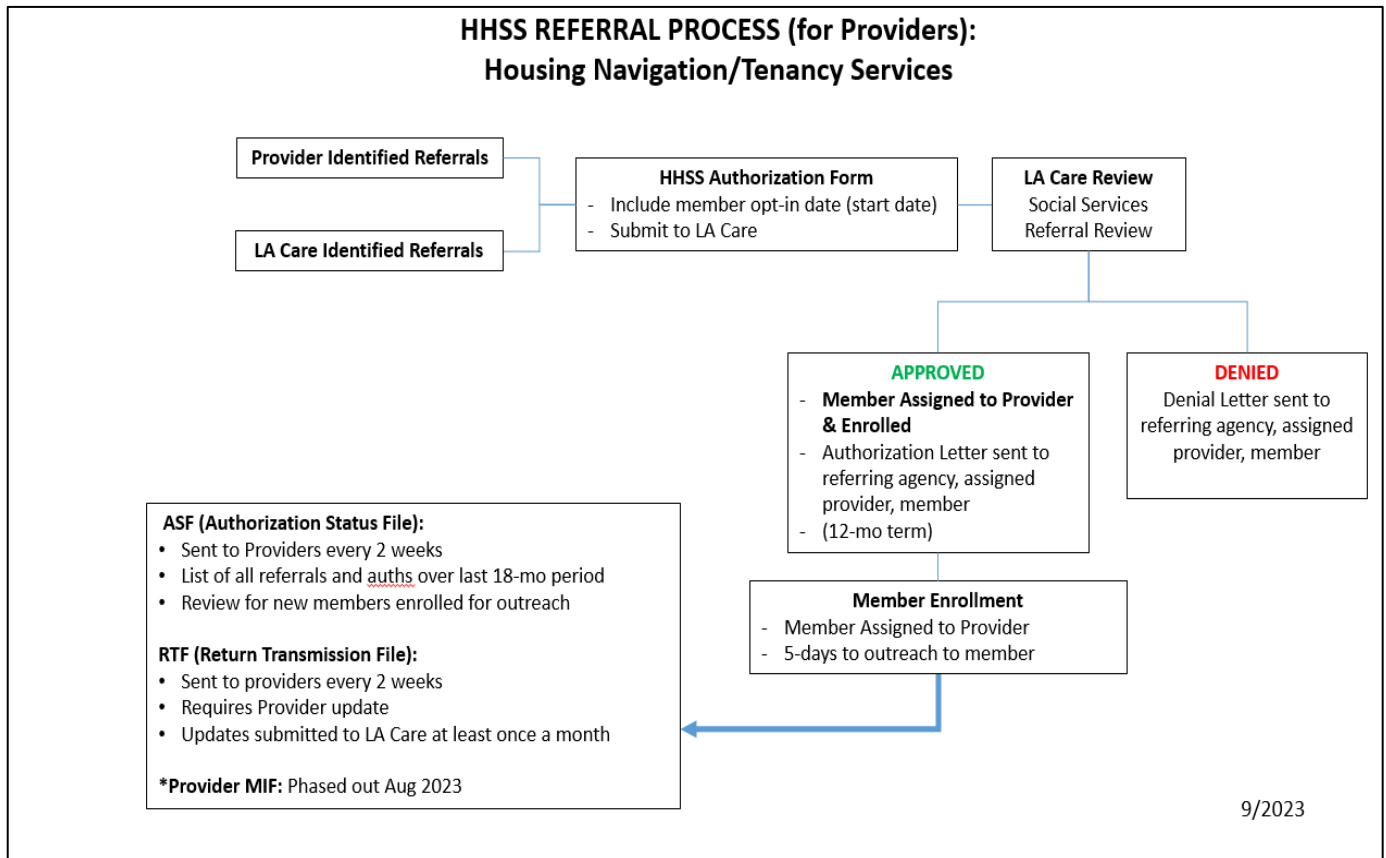
Provider Identified

1. Provider submits HHSS Authorization Form
 - Provider must obtain member opt-in to HHSS services
 - Please submit (1) Form per secure fax (email if no secure fax available)
 - No bulk submissions
 - No more than 90 authorization/re-authorization request submissions per day
2. L.A. Care reviews and respond within 5-business days
3. Member will be assigned to referring provider (may be assigned to another provider based on Provider capacity, etc.)
 - An Authorization Letter is sent to the referring agency, assigned Provider, and Member
 - Provider must outreach to Member within 5-days of assignment
 - Providers must acknowledge notification email upon receipt within 48-hours

CS Provider will be reimbursed only for services that are approved by LA Care.

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GENERAL REQUIREMENTS FOR HHSS (Section B)

MEMBER CONSENT/DATA AUTHORIZATION

- CS Provider will conduct outreach to the referred Member to confirm participation and interest in opting in to receive HHSS (initial outreach within 5 business days of the authorization notification)
- CS Provider will be responsible to inform potentially eligible members that they may access an CS on a voluntary basis, and to ensure that the Member agrees to the receipt of CS
 - Member's voluntary consent may be verbal or written.
 - CS Providers will document the member's voluntary consent to receive the CS in a system of record.
- LA Care will not require members to authorize CS-related data sharing as a condition of initiating delivery of CS, unless such authorization is required by federal law.
 - Contracted CS Provider will offer all members the opportunity to authorize additional data sharing beyond that required by law to facilitate care coordination and improve services.
 - If the member agrees to authorize data sharing, the CS Provider will document the member's written authorization for data sharing.

CS PROVIDER SERVICES RESONSIBILITIES

CS Provider will provide HHSS to members in accordance with the requirements of Section C (Housing Navigation) and D (Tenancy Sustaining Services) below:

- **Services Provided:** Members may require and access only a subset of the services below based on their needs.
- **Service Delivery Method:** Services will be provided primarily in-person, and in the Member's preferred location, or via other methods, including telephonic, as agreed to by LA Care and CS Provider.
- **Best Practices:** The services provided should utilize best practices for members who are experiencing HUD Homelessness or Chronic Homelessness and who have complex health, disability, and/or behavioral health conditions.
- **Rental Subsidy:** HHSS does not provide rental subsidies. For Members who will need rental subsidy support to secure permanent housing, services will require close coordination with the local CES, homeless services authorities, public housing authorities, and other operators of local rental subsidies.
- **Room and Board:** HHSS does not include the provision of room and board or payment of rental costs.
- **Language Accessibility:** CS Provider Communications must be provided in the appropriate threshold languages for Members with limited English proficiency and in a manner that meets the needs of Members with disabilities, including TTY.

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COORDINATION

CS Provider will assure the Member's needs regarding HHSS are met

- **Member Updates:** Provider will submit information as required to LA Care regarding the Members that have been served, declined, and approved for HHSS, as well as informing LA Care of any ad hoc issues.
- **HA & IHSP:** For each Member enrolled, the CS Provider must submit Screening and Housing Assessment (HA) and Individual Housing Support Plan (IHSP)
 - Must be submitted within 90 days of enrollment via Provider's SFTP
 - The HA and IHSP templates must be approved by L.A. Care
 - Must be maintained and updated on a regular basis
- **Member Housed:** When a Member becomes housed, Member will transition from HN to TSS
 - If Member is transitioned to TSS, start date will be the Member's move-in date.
 - CS Provider must notify LA Care of the transition to housing within 30-days, include the move-in date and the member's new address.
 - CS provider may notify LA Care individually or via the Provider MIF
- **HMIS:** For members who are not already connected to a permanent housing opportunity or otherwise ineligible, CS Providers will assess members' eligibility for housing opportunities and programs offered through the CES.
 - For Members experiencing HUD Homelessness or Chronic Homelessness, CS Providers will document themselves as one of the member's Point of Contact in the Homeless Management Information System (HMIS) maintained by the LAHSA within 2-weeks of the member's enrollment into the program and confirm active connection with Member every 90-days.
 - Provider must update Member's profile information and establish Points of Contact in HMIS to ensure that Member can be reached when a housing resource becomes available.

FREQUENCY OF CONTACT

CS Provider will maintain regular contact or interaction with Members receiving services. Contact means a direct interaction between the CS Provider and the Member, such as in person or telephonic interventions; unsuccessful attempts to reach the Member would not qualify as a contact.

- **Housing Navigation.** CS Provider shall contact the Member at least every other week on average, and more frequently for higher risk Members.
- **Tenancy Services.** On average, contact at least every other week for the first 3 months after the member moves into housing and at least monthly thereafter on average, or more frequently for higher risk members.
- **Disenrollment When Member is Non-Responsive.** Member will be disenrolled from the provision of services under HHSS if the below criteria are met:
 - If, after five (5) attempts to reach the Member over a forty-five (45) day period Member cannot be reached, the CS Provider will disenroll the Member from the program
 - The five attempted contacts of the Member must take place on different days / times and at least one attempt must be in person, if Member's preferred location is known/available.
 - If a member attempts to return CS Provider outreach from the CS Provider but does not connect (e.g. voicemail left for CS Provider), the CS Provider should restart engagement.
 - Members may also exit HHSS by declining /opting out of continued services or newly meeting one of the exclusion criteria for the program.
 - Within 30 days of disenrollment, CS Providers must report Member disenrollment date to L.A. Care and include disenrollment reason.
 - CS provider may notify L.A. Care individually or via the Provider MIF

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DURATION OF SERVICES

L.A. Care will approve HHSS, consistent with the below:

Housing Navigation Services

Housing Navigation initially authorized for 12-months

- CS Providers must assess the need for HN on an ongoing basis. If continued services are assessed as necessary, CS Provider can submit a request for re-authorization of services in 6-month increments. Re-Authorization requests must be submitted to L.A. at least 30-days prior to authorization end date and no earlier than 60-days from end date.
- Must have updated HA and IHSP.

Tenancy Sustaining Services

Tenancy Sustaining Services are initially authorized for 12-months

- CS Providers must assess the need for TSS on an ongoing basis. If continued services are assessed as reasonable and necessary, CS Provider can submit a request for re-authorization of services in 6-month increments. Re-Authorization requests must be submitted to L.A. at least 30-days prior to authorization end date and no earlier than 60-days from end date.
- Must have updated HA and IHSP.

MEMBER TRANSITIONS

For member transitions between Housing CS programs, Providers are expected to adhere to the following process:

Housing Navigation

- HN to TSS: When member in HN is housed and transitioning to TSS, provider will submit a new HHSS Authorization request for TSS
 - Must submit within 30-days of transition
- Providers will continue to report transitions/"level" change on RTF
 - Include move-in date for transition to TSS

Tenancy Sustaining Services

- TSS to HN: When member in TSS loses housing/become homeless and transitions to HN, provider will submit a new HHSS Authorization request for HN
 - Must submit within 30-days of transition
- Providers will continue to report transitions/"level" change on RTF
 - Include move-in date for transition to TSS

STAFFING

- **Staffing Ratio:** CS Provider must maintain a minimum staffing ratio of (1) FT equivalent staff member providing HHSS for no more than 30 enrolled members on average (1:30)
- **Staff Experience:** CS Provider must ensure that staff providing HHSS have adequate experience working with people experiencing homelessness, and training in how to provide services.
- **Management:** CS Provider must ensure that staff providing HHSS have adequate support and supervision by experienced professional(s) at the organization, including at least one supervising or managing team member for the program who is a licensed clinician or has at least five years of experience working with people experiencing homelessness and/or housing navigation and tenancy services programs.

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- **Staffing List:** CS Provider shall provide L.A. Care with a complete list of its HHSS staff whenever requested by L.A. Care, and no less than quarterly.
- **Quarterly CS Provider Staffing and Capacity Reports:** will be submitted to LA Care to demonstrate Provider's maximum capacity to provide services to members and that adequate staffing is available to serve CS enrolled members.
 - This information will also be used to determine Provider's capacity to receive additional referrals.

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MONITORING HHSS

- LA Care will conduct spot review of Provider submitted HA and IHSPs to ensure quality of services and compliance with program requirements.
- Other monitoring and reviews to identify potential quality concerns may include:
 - Provider claims
 - Overall HHSS metrics
 - Appeals and Grievance reports related to service requests
 - Facility related complaints
 - Provider complaints
 - Other reports as guided by DHCS
- If LA Care identifies CS Provider quality or service issues or noncompliance with requirements, may require additional monitoring and oversight, and will cite deficiencies.
 - Provider shall cooperate and comply with Plan's monitoring and oversight activities.
 - A corrective action plan shall be developed to address and correct cited deficiencies and CS Provider shall comply with such corrective action plan.
 - Provider's failure to meet requirements or failure to correct cited deficiencies is a material breach of this Agreement subject to termination.

DISCONTINUATION OF SERVICES

HHSS services may be discontinued for Members by either the CS Provider, LA Care, or Member consistent with the following:

- CS Provider will disenroll Member consistent with the below.
 - CS Provider is unable to contact the Member as set forth above
 - CS Provider becomes aware of the Member no longer meeting the eligibility requirements HHSS, including members who decline services.
 - In such instance, CS Provider will report the loss of eligibility to L.A. Care within 30-days of becoming aware of the loss of eligibility
 - Member graduates from services (no longer assessed as necessary)
- LA Care will disenroll Member when the Member no longer meets the eligibility requirements for the HHSS program.
 - LA Care will report the disenrollment to the CS Provider within 30 days of becoming aware of the loss of eligibility.
- Member choice. Member may choose to opt-out of services.

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CS HOUSING NAVIGATION (Section C)

CS Provider shall only provide those Provider Services approved by LA Care and/or for which the Member is enrolled. CS Providers shall assist Members with obtaining housing and shall provide the following services:

1. **Referrals.** The referral process for Members for HN services will be the same as that described above
2. **Eligibility Criteria.** CS Provider will accept Member into this CS based on LA Care's eligibility criteria
3. **Screening and Housing Assessment (HA).** CS Provider will conduct a housing assessment and tenant screening that identifies Member's housing preferences and Member's barriers related to successful housing tenancy. The HA will include, at a minimum, the following:
 - Identify and collect information on the Member's housing status and needs,
 - Identify and collect information on potential housing transition barriers, and
 - Identify and collect information on housing retention barriers for the Member.
4. **Individualized Housing Support Plan (IHSP).** For each Member, CS Provider will develop an IHSP based upon the tenant screening and housing assessment. The IHSP will do the following:
 - Address identified barriers, including the establishment of short- and long-term measurable goals for each identifies barrier;
 - Establish the Member's approach to meeting the measurable goals; and
 - Identifies when other providers or services, both reimbursed and not reimbursed
5. **Locating Housing for Members.** CS Provider will search for housing for Members consistent with the IHSP and present housing options for Members. CS Provider shall do the following:
 - Applications and Documentation Assistance
 - Benefit Advocacy
 - Subsidized Rent Assistance
 - Identifying and Securing Resources for Housing Expenses
6. **Landlord Related Services.** ILOS Provider will assist Member with the following:
 - Assisting Member with any reasonable accommodation, if necessary.
 - Educate and engage the landlord regarding the program;
 - Ensuring that the living environment is safe for Member and ready for move-in;
 - Communicating and advocating on behalf of Members with landlords
7. **Move-In Related Services.** CS Provider will do the following:
 - Assist Member in arranging for and coordinating the details of the move.
 - Prior to the transition and move in, CS Provider shall identify, coordinate, securing, or funding non-emergency, non-medical transportation to assist members' mobility to ensure reasonable accommodations and access to housing options prior to transition and on move in day
 - May be referred to Housing Deposits CS
8. **Housing Retention.** Establishing procedures and contacts to retain housing, including developing a housing support crisis plan that includes prevention and early intervention services when housing is jeopardized. (Note: The services associated with the crisis plan are a separate CS under TSS.)

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CS TENANCY SERVICES (Section D)

CS Provider shall only provide those Provider Services approved by LA Care and/or for which the Member is enrolled. CS Providers shall assist Members and provide the following housing tenancy and sustaining services:

1. **Referrals.** The referral process for Members for TSS will be the same as that described above
2. **Eligibility Criteria.** CS Provider will accept Member into this CS based on LA Care's eligibility criteria
3. **Providing early identification and intervention** for behaviors that may jeopardize housing (eg, late rental payment, hoarding, substance use, and other lease violations). CS Provider will utilize the housing assessment tool and service planning process to identify potential barriers to tenancy and address these through regular service delivery.
4. **Education and training** on the role, rights and responsibilities of the tenant and landlord. CS Provider will provide materials to explain tenant rights and responsibilities so that each Member understands how to navigate relationship and expectations.
5. **Coaching** on developing and maintaining key relationships with landlords/property managers with a goal of fostering successful tenancy. CS Provider will maintain an on-going relationship with the tenant and landlord/property manager to ensure positive communication and problem-solving.
6. **Coordination with the landlord and case management** provider to address identified issues that could impact housing stability.
7. **Assistance in resolving disputes** with landlords and/or neighbors to reduce risk of eviction or other adverse action including developing a repayment plan or identifying funding in situations in which the client owes back rent or payment for damage to the unit.
8. **Advocacy and linkage with community resources** to prevent eviction when housing is or may potentially become jeopardized. ILOS Provider will work to mediate between landlord and Member, when necessary.
9. **Assisting with benefits advocacy**, including assistance with obtaining identification and documentation for SSI eligibility and supporting the SSI application process. Such service can be subcontracted out to retain needed specialized skillset.
10. **Assistance with the annual housing recertification process.** CS Provider will assist each Member with the annual recertification process by discussing and prompting in advance of the process.
11. **Coordinating with the member to review, update and modify their housing support and crisis plan** on a regular basis to reflect current needs and address existing or recurring housing retention barriers.
 - CS Provider will meet with Members on a monthly basis to review the Housing Support and Crisis Plan and update as needed to address any issues that may interfere with their housing stabilization.
12. **Continuing assistance with lease compliance**, including ongoing support with activities related to household management.
13. **Health and safety visits**, including unit habitability inspections
14. **Other prevention and early intervention services** identified in the crisis plan that are activated when housing is jeopardized (e.g., assisting with reasonable accommodation requests that were not initially required upon move-in)

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15. **Providing independent living and life skills** including assistance with and training on budgeting, including financial literacy and connection to community resources

REPORTING & MONITORING

REPORTS

CS Providers are required to submit reporting as part of L.A. Care requirements. Key submissions include:

- Monthly ASF and RTF (via SFTP, DHCS required)
- Monthly Claims Needed Report (via SFTP)
- Quarterly Staffing and Capacity Report (via SFTP, DHCS required)

ASF and RTF

As of September 2023, per DHCS guidance, L.A. Care will be replacing the Provider Member Information Files (Assigned MIF and Enrolled MIF) with the new **Authorization Status File (ASF)** and **Return Transmission File (RTF)**.

	Summary	Frequency	Action Required
ASF: Authorization Status File	Includes list of all referrals and authorizations over the last 18-mo period (including enrolled and denied).	Goes out every 2 weeks	For review. No return submission required. Providers should track "New" members for outreach.
RTF: Return Transmission File	This is similar to the MIF <u>Approved</u> authorizations only. Includes fields for Providers to complete/update.	Goes out every 2 weeks	Providers must submit updates <u>at least</u> once a month via Provider SFTP.

CLAIMS NEEDED REPORT

The Claims Needed Report shows the HHSS members where LA Care has not yet received a claim to support the capitation payments made to your organization. Additionally, it will show claims that need to be resubmitted.

QUARTERLY STAFFING AND CAPACITY REPORT

For each CS provider is contracted for, must include staffing and capacity.

MONITORING

Ongoing requirements and engagement for monitoring include:

- Monthly provider check-in
- Monthly provider information and contact updates (includes provider information; program information including capacity, SPAs served, etc); program contacts
- Review of any issues, TA, updates
- HA and IHSP (via SFTP)

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HA & IHSP TEMPLATE GUIDE

Member HA and IHSP must be submitted via Provider's SFTP within 90-days of enrollment to HHSS. Periodic reviews of forms will be conducted by the HHSS team. LA Care reserves the right to request updated HAs and IHSPs submission at any time during the course of services.

CS Provider Templates for HHSS HAs and IHSPs should include the information indicated below:

Basic Information
Member Name
Member DOB
Member CIN
Date of HHSS Enrollment
HHSS Provider Organization Name
HHSS Housing Navigator Name
Date of Housing Assessment was Completed or Updated with Member by HHSS Provider
- Name of Staff completing/updating HA
Date of Individualized Housing Support Plan was Completed or Updated with Member by HHSS Provider
- Name of Staff completing/updating IHSP
Demographics
Member contact information
Member Mailing Address/Current Location at the time of Assessment
Best Way to contact Member
Member Gender
Emergency Contact Person and Contact Information

Additionally, HA's and IHSP's must include the following:

Housing Assessment (HA)
Member's history of homelessness (ie length and/or episodes of homelessness)?
Member's current living situation?
Member's medical and/or psychiatric conditions?
Member's functional needs and special needs, ie ADLs?
Member's substance use?
Member's domestic violence history?
Member's source of income?
Member's transportation needs?
Member's legal history?
Member's social support?
Member's housing preferences?
Member's barriers to obtain housing (HN) or to maintain housing (TS)?
Individualized Housing Support Plan (IHSP)
Does the IHSP identify member's short term housing-related goals?
Does the IHSP identify member's long term housing-related goals?
Are the goals measureable?
Does the IHSP address identified barriers to obtain housing or to maintain housing?
Does the IHSP identify specific interventions for HN or TS?