

# Select Initiatives in MassHealth Advance the Needs of Those Experiencing Homelessness and Housing Insecurity

Individuals experiencing homelessness or housing insecurity now have new resources and coverage options available through Massachusetts' Medicaid program, <u>MassHealth</u>.

Generally, due to <u>federal statute</u>, most state Medicaid agencies are limited on what housing and nutritional services they can provide directly as a Medicaid benefit. However, state Medicaid agencies like MassHealth can use various strategies, such as Section 1115 waivers, to get some flexibility in providing housing assistance. MassHealth's new resources include new programs like the Mitigating the Cost of Housing Program, expansions of existing programs like the Flexible Services Program and the Community Support Program, and new continuous coverage options for individuals experiencing homelessness.

## Mitigating the Costs of Housing Program

A new program called Mitigating the Costs of Housing (MATCH) will provide eligible MassHealth members who are moving into community-based housing with up to \$5,500 for one-time housing costs. Eligible costs and expenses include security deposits, first month's rent, moving expenses, utilities, furniture, furnishings, toiletries, clothing, cleaning and pest control, and food pantry and cleaning supplies. Eligible members must be enrolled in MassHealth, moving from a place where they are not currently responsible for housing costs, and have secured community-based housing. MATCH assistance can be requested up to 60 days before the move and up to 60 days after the move. Only designated agencies can refer MassHealth members for MATCH assistance. More information on which agencies can help can be found <a href="here">here</a>. The program will continue through March 2025 or until all funding is used up.<sup>2</sup>

## **Flexible Services Program**

The MassHealth Flexible Services Program (FSP) provides health-related nutrition and housing supports to non-elderly MassHealth members enrolled in an <u>Accountable Care Organization</u> (ACO). MassHealth members who meet the definition of homelessness or are at risk of homelessness and meet the requirements for at least one health need can receive FSP services.<sup>3</sup> FSP services include assistance obtaining and completing housing applications, one-time support with move-in costs, help

<sup>&</sup>lt;sup>1</sup> Each state administers their own Medicaid and CHIP programs, but they are subject to certain federal requirements. However, state programs can use such tools as Section 1115 waivers to test new Medicaid and CHIP approaches that differ from the federal requirements. For decades, Massachusetts has used 1115 waivers to innovate MassHealth and progress healthcare system reform. A history of the MassHealth Section 1115 waiver can be found <a href="https://example.com/here.">https://example.com/here.</a>

<sup>&</sup>lt;sup>2</sup> MATCH is funded through the American Rescue Plan Act (ARPA).

<sup>&</sup>lt;sup>3</sup> To receive FSP services, members must be: 1) enrolled in an ACO, 2) have at least one defined health need, and 3) meet at least one defined risk factor. More information on the previously approved criteria and available services can be found <a href="here">here</a> in "Attachment R." As part of a new Section 1115 waiver, New subpopulations have become eligible for these services and MassHealth will make updates to the Flexible Services Program Protocol in the next 3 to 6 months.

communicating with a landlord, assistance setting up necessary home modifications, home-delivered medically tailored meals, food vouchers, or nutritional education support.

In 2020, FSP provided services to <u>over 6,000 members</u> throughout the state with continued growth in 2021. Early analysis showed that the program has <u>been associated with</u> reductions in both total cost of care, reductions in emergency department utilizations, and better diabetes management for members who used FSP services compared to members who were eligible but did not utilize FSP services.

A new Section 1115 waiver, approved in Fall 2022, 4 expands access to FSP services. For example, the program will now be available to members who are up to 12 months postpartum (and meet the other necessary criteria). Additionally, nutritional support services will be available to a member's entire household, expanded from previously being available to just the eligible member. These new changes are set to go into effect no later than January 1, 2025.

#### **Community Support Program**

Massachusetts' new Section 1115 waiver also expands who is eligible for and what services are provided through MassHealth's Community Support Program (CSP). CSP provides outreach and supportive services, delivered by community-based, mobile, or paraprofessional staff, to MassHealth members with mental health or substance use conditions. Prior to the new waiver's approval, <u>CSP services</u>, which include assistance with searching for housing opportunities, help sustaining tenancy, assistance with transitioning to community-based housing, and coordination of other physical or behavioral health needs, were available only to those who met the federal definition of chronic homelessness and were enrolled in managed care. This program is known as CSP for Chronic Homeless Individuals (CSP-CHI).

The newly approved waiver makes three changes to CSP services. First, CSP-CHI will be expanded to all eligible members whether they are enrolled in managed care or not. Second, the waiver also creates a new program (known as CSP for Homeless Individuals or CSP-HI) to support individuals experiencing homeless who do not meet the narrow federal definition of chronic homelessness, instead using a broader definition to provide CSP services to those who experience homelessness and are high utilizers of MassHealth services. Finally, this waiver creates a new, separate program under the CSP umbrella that provides services to help preserve tenancy for MassHealth members who are facing eviction because of a behavioral health condition (known as the CSP Tenancy Preservation Program or CSP-TPP).

The newly amended CSP-CHI and the new CSP-HI and CSP-TPP programs will be provided through MassHealth's fee-for-service and managed care systems. These new changes and new services are set to begin in 2023. MAMH <u>provided</u> comments on proposed regulations to implement the new changes to CSP. MAMH's comments are aimed at providing more flexibility to providers in providing CSP services and at addressing the unique needs of those with severe and disabling behavioral health conditions who are also experiencing homelessness.

<sup>&</sup>lt;sup>4</sup> On September 28, 2022, the Centers for Medicare and Medicaid Services (CMS) <u>approved</u> an extension of the MassHealth Section 1115 Waiver.

<sup>&</sup>lt;sup>5</sup> The federal definition of an individual who is considered chronically homelessness, as defined by the U.S. Department of Housing and Urban Development (HUD), is an individual who 1) have a diagnosable mental health or substance use condition, developmental disability, or cognitive impairment and 2) has been continuously homeless (either on the streets, in an emergency shelter, or a safe haven) for 12 or more month or has had four or more episodes of homelessness over a three-year period in which the episodes total 12 or more months. More information can be found here.

## **Continuous Eligibility for MassHealth Members Experiencing Homelessness**

It is standard for MassHealth to redetermine the eligibility of each member every 12 months. <sup>6</sup> In order to do so, MassHealth must verify members' income eligibility and other eligibility requirements first through automated means and then by sending paperwork to members. If a state Medicaid agency is not able to verify this information, that member's Medicaid coverage is terminated.

While MassHealth uses a variety of methods to streamline and simplify the verification process, people who lack a permanent address are at risk of being disenrolled from MassHealth because of incomplete or missing paperwork. For example, MassHealth <u>estimated</u> that in 2017, 15% of members experiencing homeless lost eligibility due to incomplete or missing paperwork.

The new Section 1115 waiver, once implemented, will provide 24 months of continuous eligibility for individuals experiencing homelessness. After confirming their eligibility, <sup>7</sup> MassHealth members experiencing homelessness will maintain their Medicaid coverage for 24 months regardless of changes in their circumstances. These additional months of continuous eligibility will help reduce the risk of erroneous disenrollment due to lack of paperwork and provide MassHealth members experiencing homelessness with more continuity of access and care.

To begin this process, MassHealth has reached out to 12 <u>Continuums of Care</u> (CoCs)<sup>8</sup> for assistance in obtaining data on unhoused individuals that will help MassHealth verify continuous eligibility requirements. MassHealth is hoping to implement this provision of the waiver in December 2023.

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<sup>&</sup>lt;sup>6</sup> State Medicaid programs provided <u>continuous enrollment</u> for members during the public health emergency in order to receive additional federal Medicaid funding during the public health emergency. The public health emergency <u>started</u> on January 27, 2020 and is in effect through May 11, 2023. MassHealth performed redeterminations during this time but did not disenroll any members.

<sup>&</sup>lt;sup>7</sup> Eligible individuals are those who have a confirmed homelessness status of at least 6 months as documented through <u>two</u> <u>eligible systems</u>, are under the age of 65, and qualify for MassHealth.

<sup>&</sup>lt;sup>8</sup> Continuums of Care are regional and local organizations that coordinate housing and services for individuals experiencing homelessness and their families, to help identify individuals who unsheltered or residing in emergency shelters, safe havens, or transitional house and therefore may be eligible for this continuous coverage.