SCANPH

SOUTHERN CALIFORNIA ASSOCIATION OF NONPROFIT HOUSING

How Housers Can Play a Central Role in Resident Health & Wellness

Housing-Based Care Management

I. Introduction

Moderator: Ayako Utsumi

Founder

VALON CONSULTING
Affordable Homes Development

Featured Speakers

Nancy Rockett Eldridge
CEO

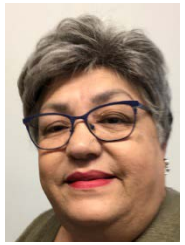
National WELL HOME NETWORK

Kiara Carvelli
Director of Resident Services

MENORAH HOUSING FOUNDATION

Meghan Rose
General Counsel & Director of Social Impact Initiatives and Housing Policy

LeadingAge® California



Laura Trejo
General Manager

CITY OF LOS ANGELES Department of Aging

SCANPH
Southern California Association of NonProfit Housing

Agenda

I. **Introduction / Welcome**

II. **Module I** - Overview of Housing-Based Care and Senior Care Coordination

III. **Module II** - Menorah Housing, the Assisted Living Waiver and Additional Coordination Programs + Brief Q&A

IV. **Module III** – Shifting Los Angeles to an Age-Friendly City + Brief Q&A

V. **Case Study –** Intro to CICH/SASH and IWISH + Brief Q&A

VI. **Module IV** – MPA Overview and CICH + Brief Q&A

VII. **Q&A** – More Audience Questions

VIII. **Adjourn** – Concluding Thoughts

* Acronyms defined later

SCANPH
Southern California Association of NonProfit Housing

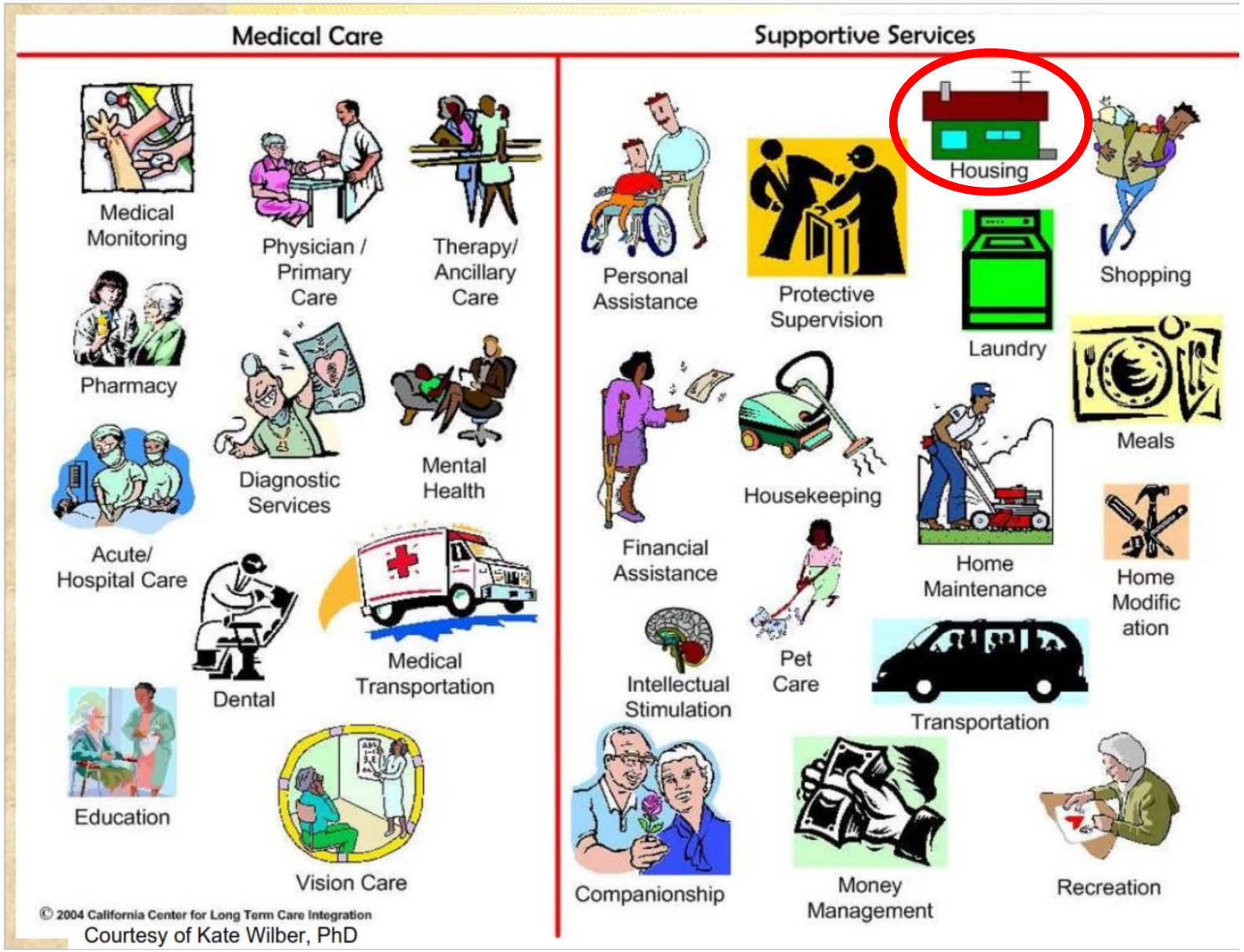
Module I

Overview of Housing-Based Care and Senior Care Coordination

Beyond Permanent Supportive Housing (PSH)

SCANPH
Southern California Association of NonProfit Housing

Beyond Permanent Supportive Housing (PSH): Health and Wellness



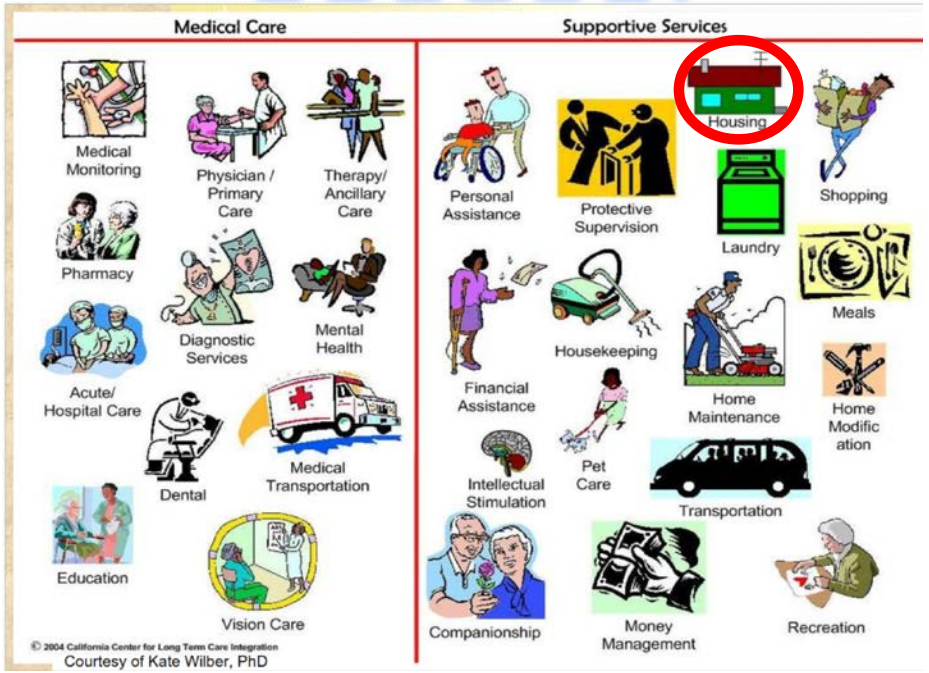
- Slide thanks to Laura Trejo
- <u>It's a lot to manage!</u>
- How does a vulnerable adult with perhaps a lifetime of inequity manage these 28+ sources of care to maximum benefit and age safely at home? *Community care before institutional care (Olmstead Act*)*
- Each service has its own qualification, case manager, data and communication systems plus patient confidentiality
- Plus, Long Term Care and services are NOT paid for by Medicare. Medi-Cal only pays a portion

* Definitions in appendix

Local System Management Based In Housing

Health Insurance

Care Coordination



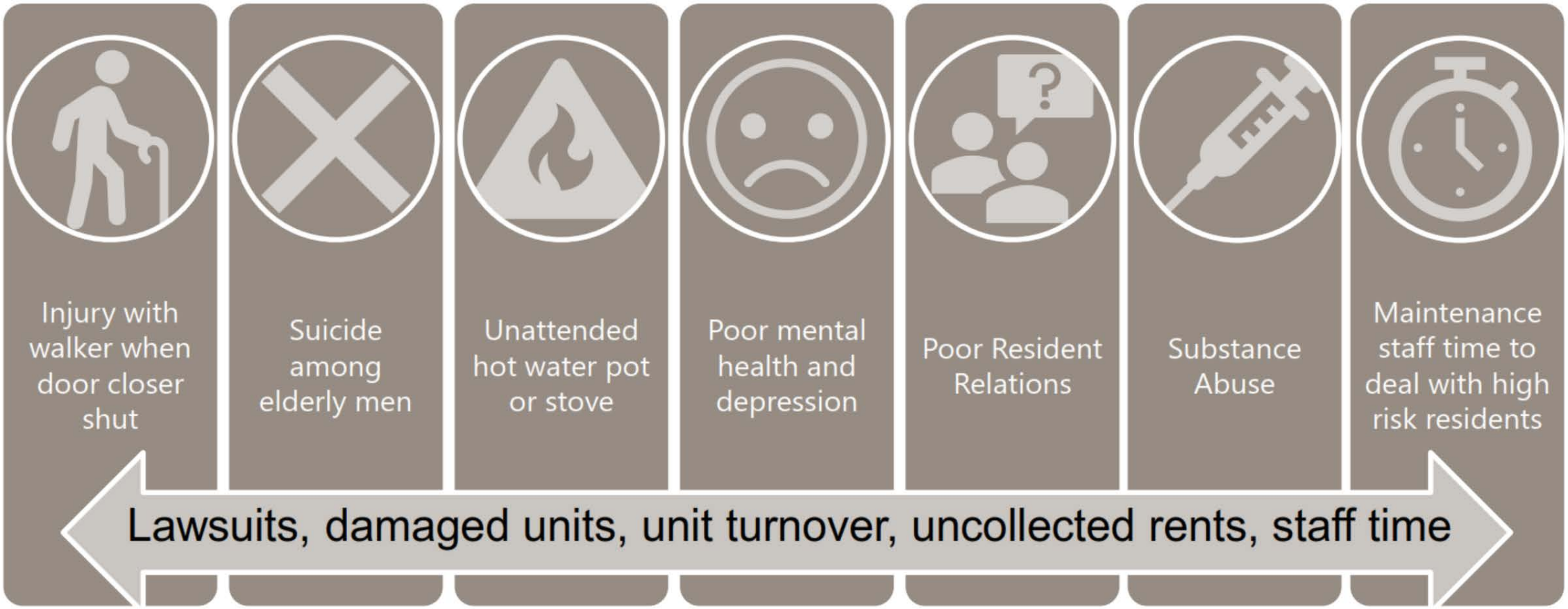
Housing-Based Care Management System

- To complicate matters, residents often go in and out of qualifying. Services are in flux. Residents are still vulnerable
- Expertise of case managing is highly local to the home
- To further complicate care, constant change may make residents <u>distrustful</u>
- There are numerous initiatives to coordinate care in varying stages of development: CalAIM, MPA, WPC, HHP, MFTP, etc.*
- Care coordination does work but may be too dependent on star performers rather than a managed system of care
- <u>Could we improve health and lower costs if there is local, housing-based care management to complement the coordination programs that are working?</u>
- Why should housers care?

* Definitions in appendix

Health Impacts Housers

High Cost $ of Lack of Care Coordination for Residents –> Impact to Housers



The Importance of Health and Home

- "The connection between the health and dwelling of the population is the most important one that exists."
  - Florence Nightingale 1820-1910
- Home is where most health and disease are generated
- Housers are in the best position to gain trust
- Therefore, housers must play a central role in wellness and disease prevention
- But we are not set up to do so
- Can we envision how we could adapt?
- But we cannot do it alone…

Module II

Menorah Housing Foundation

The Assisted Living Waiver and Additional Coordination Programs

+ Brief Q&A

Kiara Carvelli

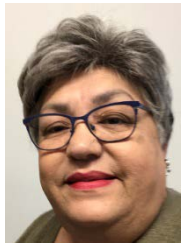
Director of Resident Services

MENORAH HOUSING FOUNDATION

SCANPH
Southern California Association of NonProfit Housing

Module III

Shifting Los Angeles to an Age-Friendly City + Brief Q&A



Laura Trejo

General Manager

CITY OF LOS ANGELES Department of Aging

SCANPH
Southern California Association of NonProfit Housing

Case Study

Intro to California Integrated Care at Home(CICH)/ Support and Services at Home (SASH®) and Integrated Wellness in Supportive Housing (IWISH) in Los Angeles

+ Brief Q&A

Nancy Rockett Eldridge
CEO

National WELL HOME NETWORK

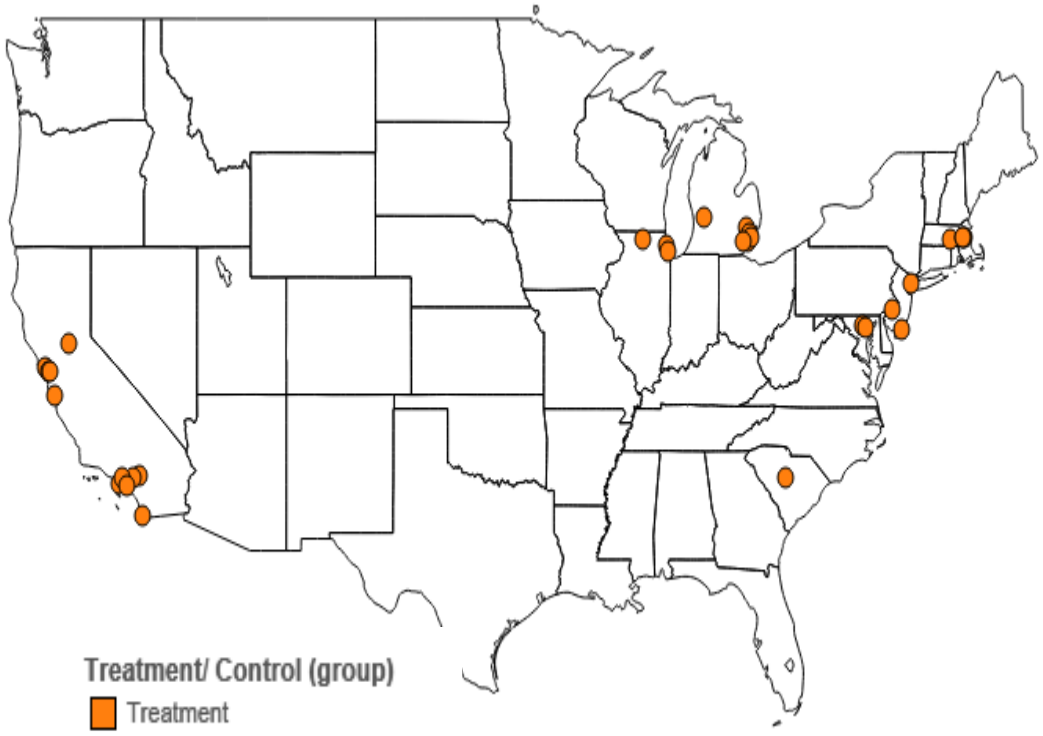
SCANPH
Southern California Association of NonProfit Housing

CALIFORNIA INTEGRATED CARE AT HOME (CICH)

UNITING TO CREATE A COMMUNITY-LEVEL POPULATION HEALTH SYSTEM

Care Management At Home
Tailored By and For California

HUD Integrated Wellness In Supportive Housing (IWISH)



- 3 Los Angeles:
  - Vista Tower (230 units)
  - Good Shepherd (143 units)
  - Castle Argyle (97 units)
    - TOTAL IWISH UNITS IN LA = 470
- 6 Southern California
- 6 Northern California

- TOTAL IWISH SITES IN CA: 15

If you Want to Know the Population's Needs – Who Would You Ask?

GO TO WHERE THEY LIVE – Use Housing Infrastructure – Ready Made SCALE!

HEALTH CARE SYSTEM NEEDS YOU – Harness the Housing Workforce

STRENGTHEN THE PLATFORM – Connect With CBOs and Government – Be More Than The Sum of the Parts!

EMBED CARE TEAMS AT EVERY HUB – Supported by consistent Training and Information

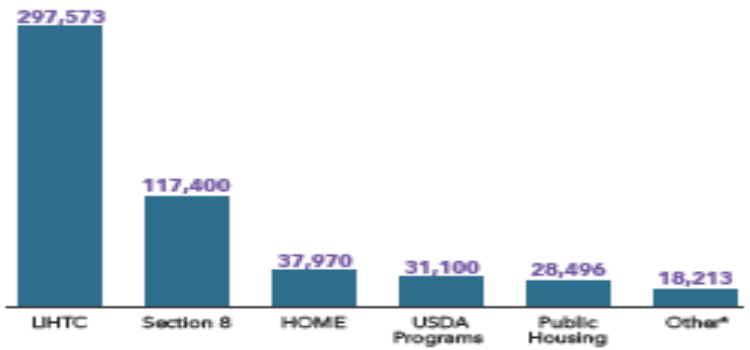
FUND THE SYSTEM BY THE BENEFICIARIES – Which Payers Benefit from great Care Management?

PAHRC 2020 PRESERVATION PROFILE

CALIFORNIA

HUD and USDA programs play an important role in providing affordable homes to extremely low-income (ELI) families across the state. Many of the publicly supported homes, however, face expiring rent restrictions and are at risk of becoming unaffordable to the state's lowest income families.

NUMBER OF PUBLICLY SUPPORTED RENTAL HOMES BY PROGRAM

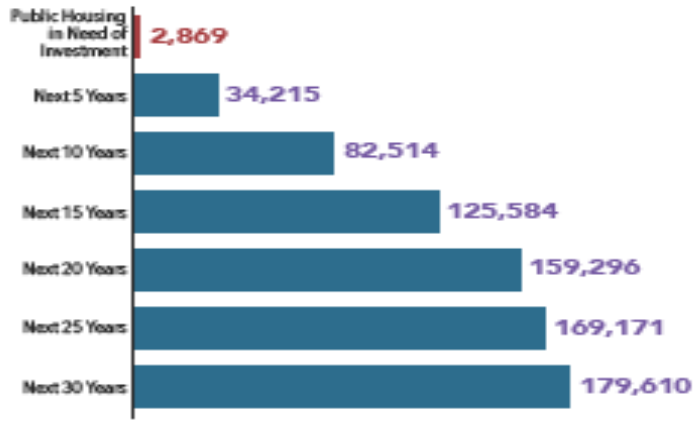


68% publicly supported rental homes across the state receive Low Income Housing Tax Credits.

*Other includes Section 236 HUD Insured Mortgages, Section 202 Direct Loans, and Section 236.

Note: Rental units can be supported by multiple programs.

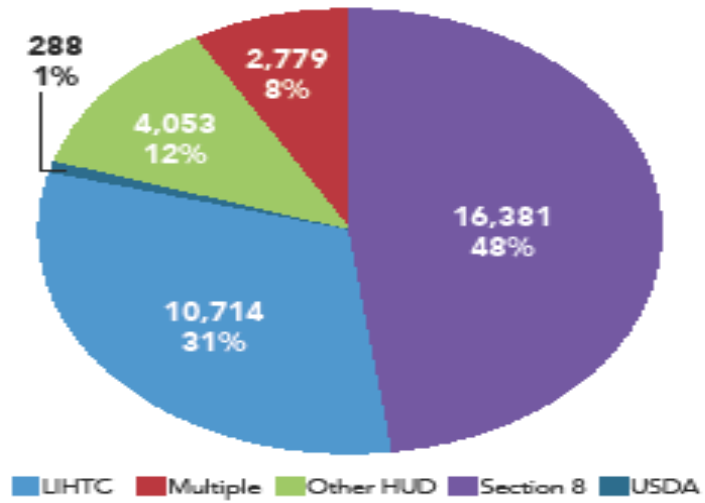
PUBLICLY SUPPORTED RENTAL HOMES AT RISK OF LOSS



8% publicly supported rental homes face an expiring affordability restriction in the next five years and 2,869 public housing units are in need of immediate investment*.

*Indicated by a REAC score less than 60.

PUBLICLY SUPPORTED RENTAL HOMES WITH EXPIRING AFFORDABILITY RESTRICTIONS WITHIN FIVE YEARS BY FUNDING STREAM



48% publicly supported rental homes with expiring affordability restrictions in the next five years are assisted by Section 8 contracts.

KEY FACTS

-998,613
Shortage of rental homes affordable and available for ELI renters

77%
Percent of ELI households spending more than half of their income on rent

436,379
Number of publicly supported rental homes

34,215
Number of publicly supported rental homes with affordability restrictions expiring in next five years

DATA FROM THE NATIONAL HOUSING PRESERVATION DATABASE

WWW.PRESERVATIONDATABASE.ORG

CICH is the All Inclusive Constant Connector

Income Limits

Time Limited

Minimum Health Needs

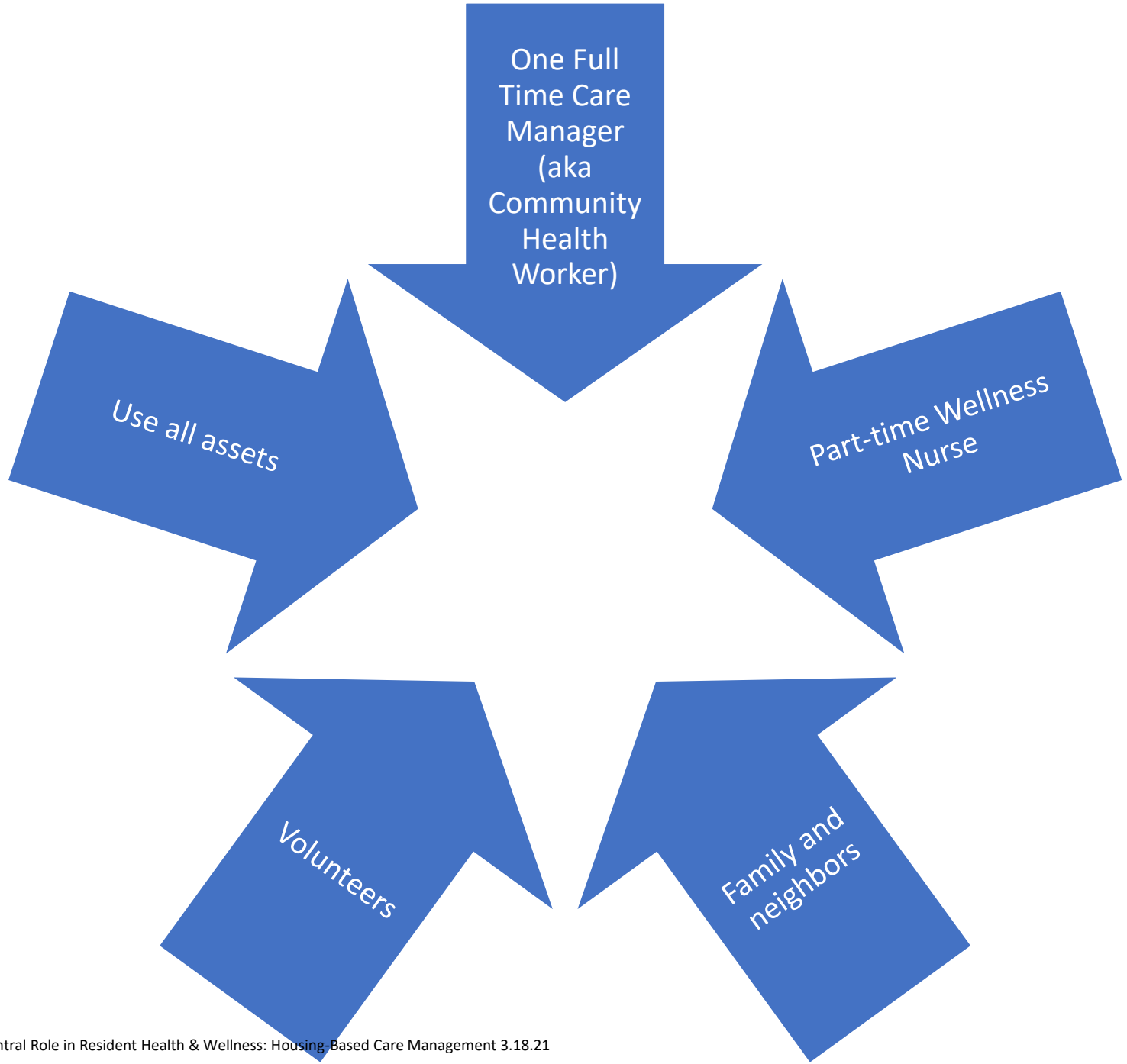
Restrictions on Choice

Locational Limits

California Integrated Care at Home

CALIFORNIA INTEGRATED CARE AT HOME (CICH)
a workforce strategy

A Care Team Supported by Constant, Continual, Consistent Training



WHAT DO CICH CARE TEAMS DO?

- Motivational Interview – first step toward empowerment and self-determination.
- Health assessment and screens.
- Healthy Living Plan BY the participant.
- Community Healthy Living Plan – data driven.
- System navigation support and communication with providers
- Medication support
- Evidence Based programming

URGENCY GROWS
AARP ADVANCES MODEL

SASH STATES

- Vermont
- Rhode Island
- Minnesota

UNDER DEVELOPMENT

- Maryland
- California

ACTIVE INTEREST

- WA, OR, TX,
- FL, VA, DC, NH,
- PA, NM
- NJ, MA, IL, MI, SC

CICH PARTICIPANTS ARE IN THE DRIVER'S SEAT

Nancy Rockett Eldridge, CEO,
National Well Home Network

nancy.eldridge@wellhome.org
https://www.wellhome.org/

March 18, 2021

Module IV

Master Plan for Aging (MPA) Overview and California Integrated Care at Home (CICH) + Brief Q&A

Meghan Rose

General Counsel & Director of Social Impact Initiatives and Housing Policy

LeadingAge® California

SCANPH
Southern California Association of NonProfit Housing

Q & A

Housers Call to Action by Laura Trejo

CA's Master Plan for Aging: What Does Health Have to Do With Housing?

Wednesday, May 12, 2021 from 11:30am – 1:00pm
Via Zoom Webinar

UCLA Ziman Center for Real Estate

Keynote Speaker:
Kim McCoy Wade
Director, CA Dept of Aging

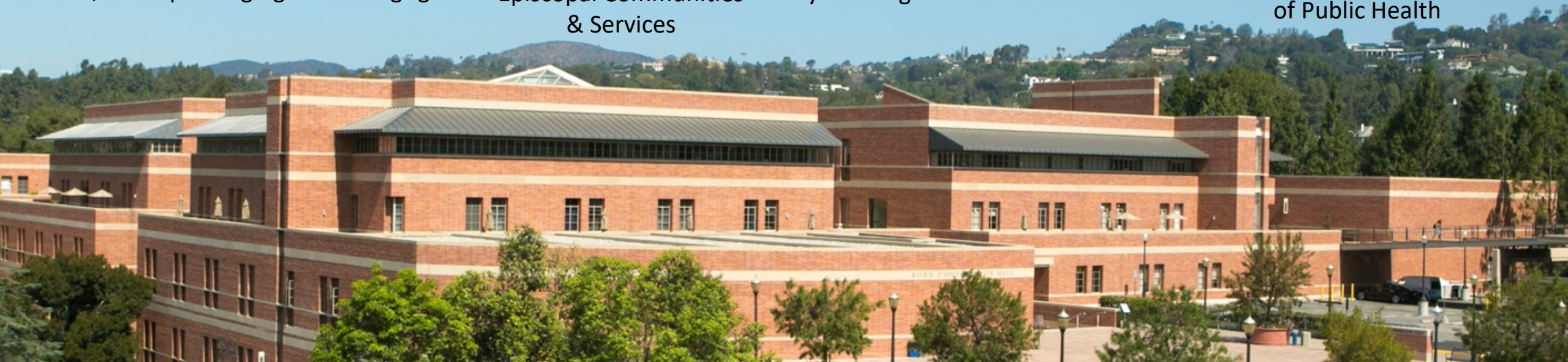
Moderator:
Meghan Rose
LeadingAge CA

Panelist:
Christina Cerrato
Episcopal Communities & Services

Panelist:
Doug Shoemaker
Mercy Housing CA

Panelist:
Sarah Steenhausen
SCAN Foundation

Panelist:
Steven P. Wallace
UCLA Fielding School of Public Health



* Appendix

1. Please note there are many programs focused on better managing care for the vulnerable that are not listed here.

2. **Assisted Living Waiver (ALW)** - (Medi-Cal exemption that allows residents to receive more care in the home rather than at an Assisted Living Facility.) ALW is a Home and Community-Based Services (HCBS) waiver that was created by legislation that directed the California Department of Health Care Services (DHCS) to develop and implement the project to test the efficacy of assisted living as a Medi-Cal benefit. These waivers are limited in number and there is a long waiting list. https://www.dhcs.ca.gov/services/ltc/Pages/AssistedLivingWaiver.aspx
3. **CalAIM** – California Advancing and Innovating Medi-Cal. CalAIM advances several key priorities of the Administration by leveraging Medicaid as a tool to help address many of the complex challenges facing California's most vulnerable residents, such as homelessness, behavioral health care access, children with complex medical conditions, the growing number of justice-involved populations who have significant clinical needs, and the growing aging population. https://www.dhcs.ca.gov/provgovpart/Pages/CalAIM.aspx
4. **CICH / SASH® –** California Integrated Care at Home (CICH) is a California model based on Support and Services at Home (SASH®) www.sashvt.org . SASH® coordinates the resources of social-service agencies, community health providers and nonprofit housing organizations to support those who choose to live independently at home. Individualized, on-site support is provided by a Wellness Nurse and a SASH® Care Coordinator.
5. **DPSS - Department of Public Social Services (County)** -- offers Medi-Cal health insurance, CalFresh food assistance, CalWORKs cash assistance for families, and General Relief cash assistance for individuals. They also assist customers who are experiencing homelessness, domestic violence, substance use disorders, and we have many other social service programs available. https://dpss.lacounty.gov/
6. **Green Houses** - The Green House Project partners with senior living providers to create homes for elders that demonstrate more powerful, meaningful, and satisfying lives, work, and relationships. We implement true culture change as well as dementia education and training to create person-directed, relationship-rich living environments. https://www.thegreenhouseproject.org/
7. **Housing For Health** – A Los Angeles County one year pilot in 2017 that provided supportive housing coupled with case management to those experiencing homelessness and was associated with sharp reductions in health care use by program participants. https://www.rand.org/pubs/research_reports/RR1694.html
8. **Health Homes Program (HHP) Pilot:** LAHSA and Partners in Care Foundation are conducting a pilot to bring Health Home support to clients in PRK. The HHP is designed to serve eligible Medi-Cal beneficiaries with complex medical needs and chronic conditions who may benefit from enhanced care management and care coordination. The HHP coordinates the full range of physical health, behavioral health, and community-based long-term care services and support needed by eligible beneficiaries. The program is in the initial implementation stage. https://www.dhcs.ca.gov/services/Pages/HealthHomesProgram.aspx
9. **IWISH -**- The HUD Supportive Services Demonstration (SSD), also referred to as Integrated Wellness in Supportive Housing (IWISH), leverages HUD's properties as a platform for the coordination and delivery of services to better address the interdependent health and supportive service needs of its older residents. The demonstration aims to promote aging in place and improve housing stability, wellbeing, health outcomes, and reduce unnecessary or avoidable healthcare utilization associated with high healthcare costs.
    1. The 3-year demonstration is being implemented in HUD-assisted multifamily properties in California, Illinois, Maryland, Massachusetts, Michigan, New Jersey, and South Carolina. Of the 40 sites around the country, California has 15 IWISH sites – 8 of which are in Los Angeles. https://www.huduser.gov/portal/IWISH_Evaluation.html#impact-overview-tab. IWISH was renewed for 2021 with pending funding implementation.

* Appendix

10. **Long-Term Services and Supports Integration (LTSS)** - The work group will provide recommendations for how to integrate Home and Community-Based Services (HCBS) in an organized system of care, including recommendations for Long-Term Services and Supports (LTSS) network adequacy standards and coordination of community resources. In particular, the group will consider issues around Community-Based Adult Services (CBAS), Multi-Purpose Senior Services Program (MSSP), and other HCBS waivers. https://www.dhcs.ca.gov/Pages/LTSSIntegration.aspx
11. **Los Angeles County CREATING A COMPREHENSIVE PLAN** AND RECOMMENDATIONS TO ADDRESS THE NEEDS OF HOMELESS OLDER ADULTS IN LOS ANGELES COUNTY (ITEM NO. 4, AGENDA OF FEBRUARY 18, 2020 AND ITEM NO. 24, AGENDA OF MAY 26, 2020)
12. **Master Plan for Aging (MPA)** - The Master Plan for Aging outlines five bold goals and twenty-three strategies to build a California for All Ages by 2030. It also includes a Data Dashboard on Aging to measure our progress and a Local Playbook to drive partnerships that help us meet these goals together. Aging is changing and it's changing California. California's over-6o population is projected to diversify and grow faster than any other age group. By 2030, 10.8 million Californians will be an older adult, making up one-quarter of the state's population. In June 2019, Governor Gavin Newsom issued an executive order calling for the creation of a Master Plan for Aging (Master Plan). The Executive Order affirmed the priority of the health and well-being of older Californians and the need for policies that promote healthy aging. It also called for a "blueprint" for state government, local government, the private sector, and philanthropy to prepare the state for the coming demographic changes and continue California's leadership in aging, disability, and equity. https://mpa.aging.ca.gov/ For the first time, the State's plan on Aging lists housing as a major goal with a specific budget line item for housing.
13. **Measure J** - funds Alternatives to Incarceration (ATI) in Los Angeles County to combat racial injustice through community investments such as youth development, job training, small business development, supportive housing services. Service coordination is an important piece. https://ceo.lacounty.gov/measure-j-background/
14. **Money Follows the Person (MTP)** - In January 2007, the California Department of Health Care Services (DHCS) was awarded special federal grant to implement a Money Follows the Person (MFP) Rebalancing Demonstration, known as "California Community Transitions" (CCT). CCT transition services are currently available through December 31, 2021. DHCS works with designated CCT Lead Organizations to identify eligible Medi-Cal beneficiaries who have continuously resided in state-licensed health care facilities for a period of 90 consecutive days or longer. CCT Lead Organizations employ or contract with transition coordinators who work directly with willing and eligible individuals, support networks, and providers to facilitate and monitor beneficiaries' transitions from facilities to the community settings of their choice. Eligible individuals of all ages with physical and mental disabilities have an opportunity to participate in CCT. Upon transitioning to the community, the transition coordinator follows the participant for 365 days, this is known as the demonstration period. The demonstration period allows participants and transition coordinators to respond to needs that are identified post-transition., CCT participants live in their own homes, apartments, or in approved community care facilities, and receive long-term services and supports included in their individual comprehensive service plans. At the end of the demonstration period, individuals who remain eligible for Medi-Cal continue to receive Medi-Cal and other home and community-based services (HCBS) where they live. https://www.dhcs.ca.gov/services/ltc/Pages/CCT.aspx
15. **The National Wellhome Network (NWHN)** -- is committed to replicate, support and promote proven housing-based health and service models like SASH, to build long term services that facilitate high quality, efficient and effective healthy aging at home with partnerships among health care providers, payers, housing and home and community-based services to make the best use of all resources, regardless of individual income or setting. https://www.wellhome.org/

SCANPH
Southern California Association of NonProfit Housing

* Appendix

16. **Olmstead Act** -- Along with all other states, California is required to comply with the US Supreme Court's 1999 landmark Olmstead decision, which concluded that confining persons with disabilities in institutions without adequate medical reasons is a form of discrimination that violates the Americans with Disabilities Act. In Olmstead, the Supreme Court held that states cannot make institutionalization a condition for publicly funded health coverage unless it is clinically mandated. Instead, states must direct their health programs for persons with disabilities towards providing community-based care. This report finds that although California's long-term care system has distinct strong points, glaring problems will hinder the state's ability to comply with Olmstead unless resolved. These include the paucity of alternatives to nursing homes for people who need more than part-time unskilled personal assistance. https://www.chcf.org/publication/the-olmstead-decision-and-long-term-care-in-california/
17. **Supportive Housing** - is permanent, affordable housing that's paired with on-site services, like mental health care, job training, or addiction treatment. It's for especially vulnerable people, like those with disabilities or survivors of trauma, who otherwise have difficulty staying in stable housing.
18. **Population health** - the health outcome of a group of individuals including the distribution of such outcomes within a group. Often used by healthcare stakeholders in association with the Triple Aim of improving the quality of care, improving the health of populations and reducing the per capita cost of healthcare. Source: https://www.ajmc.com/view/creating-clarity-distinguishing-between-community-and-population-health
19. **Program of All-Inclusive Care for the Elderly (PACE)** model of care provides a comprehensive medical/social service delivery system using an interdisciplinary team approach in a PACE Center that provides and coordinates all needed preventive, primary, acute and long-term care services. Services are provided to older adults who would otherwise reside in nursing facilities. The PACE model affords eligible individuals to remain independent and in their homes for as long as possible. To be eligible, a person must be 55 years or older, reside in a PACE service area, be determined eligible at the nursing home level of care by the Department of Health Care Services, and be able to live safely in their home or community at the time of enrollment. PACE requires that a resident use mostly only PACE health care providers. https://www.dhcs.ca.gov/services/ltc/Pages/programofall-inclusivecarefortheelderly.aspx
20. **Purposeful Aging Los Angeles Initiative (PALA)** is a groundbreaking initiative and partnership, between the County and the City of Los Angeles, other cities, AARP, the private sector, and universities. The recommendations are intended to enhance the age friendliness of the Los Angeles region for all older adults and multi-generational residents of Los Angeles County, the County and City intends to implement the recommendations in an equitable manner that would allow all residents to thrive as they gain their communities, including by prioritizing interventions to high need communities and populations - such as LGBTQ individuals, those experiencing homelessness (or those at risk of homelessness), and low income populations - as well as incorporating multi-lingual/multi ethnic services, a gender lens, and other strategies intended to empower traditionally marginalized communities. https://www.purposefulagingla.com/

* Appendix

21. **Whole Person Care (WPC)** - A five-year thru 2020, up to $1.5 billion, federally funded pilot program to test county-based initiatives that coordinate health, behavioral health, and social services for vulnerable Medi-Cal beneficiaries who are high users of multiple systems and have poor outcomes. https://www.dhcs.ca.gov/services/Pages/WholePersonCarePilots.aspx
22. Crosswalk of California Care Coordination Initiatives (WPC, HHP, CCI, PRIME): https://www.dhcs.ca.gov/provgovpart/Documents/DHCSStateInitiativesCrosswalk3-16-16.pdf