



Created through the new CalAIM initiative, Community Supports are medically appropriate and cost-effective alternatives to services covered under California's traditional Medi-Cal program. The services are designed to help Medi-Cal members with complex health conditions meet critical social needs, including housing-related needs. Medi-Cal managed care plans (MCPs) can choose to offer 14 Community Supports; at least 4 of the Community Supports offer housing-related services to eligible people experiencing or at risk of homelessness.

**Many of the services offered under different Community Supports are services that homeless providers already offer people experiencing homelessness.** Thus, the option to get paid for CalAIM Community Supports through contracts with local Medi-Cal MCPs provides important opportunities for homeless systems of care to:

- Expand the type of work providers can get compensated to do in their communities;
- Access new funding streams (via Medi-Cal) to pay for services already provided;
- Increase the number of organizations able to provide Community Supports;
- Enhance the types of services offered to people experiencing homelessness; and
- Provide coordinated care for vulnerable populations.

Across all Community Supports, Medi-Cal:

- Requires that Community Supports not supplant services received by the Medi-Cal member through other State, local, or federally-funded programs;
- Encourages all providers to use best practices when engaging with members who are experiencing homelessness and who have complex health, disability, and/or behavioral health conditions. These best practices include Housing First, harm reduction, progressive engagement, motivational interviewing, and trauma-informed care; and
- Allows a range of organizations and agencies to serve as Community Supports providers (so long as they are certified with their local Medi-Cal MCPs).

Community Supports are a unique opportunity to leverage Medi-Cal resources to provide comprehensive services to people experiencing homelessness without taxing under-resourced homeless systems of care.

The list of CalAIM's housing-related Community Supports includes:

- [\*Housing Transition/Navigation Services\*](#);
- [\*Housing Tenancy & Sustaining Services\*](#);
- [\*Housing Deposits\*](#); and
- [\*Short-Term Post Hospitalization Housing\*](#).

The following pages provide an overview and additional details about each of these four housing-related Community Supports.





## CalAIM Community Supports: Housing Transition/Navigation Services<sup>1</sup>

### Overview

Housing Transition/Navigation Services are intended to help eligible Medi-Cal members navigate the process of searching for and obtaining housing. **Many of the services offered under Housing Transition/Navigation are services that homeless service providers already offer people experiencing homelessness.**

There are many services that a Medi-Cal member can receive under Housing Transition/Navigation. The specific services offered should be based on each individual's assessment and documented in an individualized housing support plan.<sup>2</sup> Housing Transition/Navigation providers can:

- Conduct screening and housing assessments to identify the member's preferences and barriers that enable or prevent them from accessing and maintaining stable housing.
- Develop an individualized housing support plan that addresses barriers, develops goals and approaches to each housing issue, and identifies additional providers and services needed to meet the identified goals.
- Search for and share housing options with the member.
- Assist in obtaining housing, including activities like completing housing applications and accessing required documentation (e.g., Social Security card, birth certificate, prior rental history).
- Assist with benefits advocacy, including getting identification and documentation for SSI eligibility and supporting the SSI application process or other public benefits.

- Identify and secure resources for members to access subsidized rent programs (such as HUD's Housing Choice Voucher Program (Section 8), or state and local rental assistance).
- Identify and secure resources to cover housing expenses like security deposits, moving costs, adaptive aids, environmental modifications, moving costs, and other one-time expenses.<sup>3</sup>
- Assist with requests for reasonable accommodation.<sup>4</sup>
- Identify, coordinate, secure and fund environmental modifications for necessary accessibility accommodations.
- Educate and engage the landlord.
- Ensure the living environment is safe and move-in ready.
- Communicate with the landlord and advocate on behalf of the member.
- Identify, coordinate, secure, or fund non-emergency, non-medical transportation to ensure reasonable accommodations and access to housing prior to and on move-in day.
- Help arrange and support the move.
- Establish contacts and procedures to retain housing, including development of a housing support crisis plan that includes prevention and early intervention services that can be deployed if/when housing is jeopardized.<sup>5</sup>

Housing Transition/Navigation services may need to be coordinated with other entities – such as legal aid programs, mental health and social services departments, County and City Housing Authorities, etc. – to ensure that members have access to the comprehensive supports required to access and retain stable housing. Providers may need to coordinate closely with the local Coordinated Entry System, homeless providers, public housing authorities, and others who fund housing assistance, particularly on behalf of members who need rental subsidy support to obtain permanent housing.

<sup>1</sup> Information in this fact sheet is summarized from the [Medi-Cal Community Supports, or In Lieu of Services \(ILOS\), Policy Guide](#), Department of Health Care Services, January 2023.

<sup>2</sup> Services do not include the provision of room and board or payment of rental costs.

<sup>3</sup> Note that the payment of housing deposits and/or move-in expenses is a separate Community Support; see the [Housing Deposits](#) overview for more information.

<sup>4</sup> This relates to expenses incurred by the housing navigator supporting the individual moving into the home.

<sup>5</sup> Note that the services associated with the crisis plan are a separate Community Support; see the [Housing Tenancy and Sustaining Services](#) overview for more information.

## Eligibility for Housing Transition/Navigation

Medi-Cal members who are eligible<sup>6</sup> for Housing Transition Navigation services include:

- Individuals who are prioritized for a permanent supportive housing unit or rental subsidy resource through the local homeless Coordinated Entry System or similar system;
- Individuals who meet the HUD definition of “homeless” (including those exiting an institution, with no limit on the number of days in the institution<sup>7</sup>) **and** who receive enhanced care management (ECM) or who have one or more serious chronic conditions and/or serious mental illness and/or are at risk of institutionalization or who may require residential services as a result of a substance use disorder.
- Individuals who meet the HUD definition of “at risk of homelessness” (including children who do not qualify as homeless under the HUD definition but do qualify under other programs<sup>8</sup>) **and** also meet at least one of the following criteria:
  - They have one or more serious chronic conditions;
  - They have a serious mental illness;
  - They are at risk of institutionalization or overdose or are requiring residential services due to a substance use disorder or serious emotional disturbance (children and adolescents);
  - They receive Enhanced Care Management (ECM); or
  - They are a transitional age youth (TAY) 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 have been victims of trafficking or domestic violence.

## Restrictions/Limitations

- Duration: While specific Housing Transition/Navigation services must be identified as reasonable and necessary based on the individual’s housing support plan, **the duration of services can go on as long as necessary.**
- Frequency: N/A
- Other: N/A

## Who can Provide Housing Transition/Navigation Services

Providers must have experience and expertise providing Housing Transition/Navigation services in a culturally and linguistically appropriate manner. A range of organizations are eligible to serve as Housing Transition/Navigation providers, so long as the agencies and individual providers have demonstrated experience providing housing-related services and supports and are certified as Community Supports providers through their local Medi-Cal MCPs.



<sup>6</sup> MCPs may accept an attestation of the need for housing to satisfy any documentation requirements regarding the member’s housing status.

<sup>7</sup> For this Community Support, “institution” includes: hospitals, correctional facilities, mental health or substance use disorder residential treatment facility, recovery residences, Institution for Mental Disease, and State Hospitals.

<sup>8</sup> A child and youth may also qualify as homeless under the following programs: the Runaway & Homeless Youth Act, the Head Start Act, the Violence Against Women Act of 1994, the Public Health Service Act, the Food & Nutrition Act of 2008, the Child Nutrition Act of 1966, and the McKinney-Vento Homeless Assistance Act.



## CalAIM Community Supports: Housing Tenancy & Sustaining Services<sup>9</sup>

### Overview

Housing Tenancy & Sustaining Services (TSS) are services intended to help eligible Medi-Cal members maintain safe and stable tenancy once they have housing. **Many of the services offered under TSS are services that homeless service providers already offer people experiencing homelessness.**

TSS must be identified as *reasonable and necessary* in the Medi-Cal member's individualized housing support plan. They only are available when the member is unable to successfully maintain longer-term housing without such assistance.

There are a number of services that can be provided under Tenancy & Sustaining Services:

- Early identification of and intervention around behaviors that may jeopardize housing, such as late rental payment, hoarding, substance use, and other lease violations.
- Education and training on the role, rights, and responsibilities of the tenant and landlord.
- Coaching to help Medi-Cal members develop and maintain key relationships with landlords/property managers.
- Coordination with a landlord and case manager to address identified issues that could impact housing stability.
- Assistance to resolve disputes with landlords and/or neighbors to reduce the risk of eviction or other adverse actions; might include development of a repayment plan or identification of funding to help with back rent or payment for damage to the unit.
- Advocacy and linkage with community resources to prevent eviction when housing is or may potentially become jeopardized.
- Assistance with benefits advocacy, including getting identification and documentation for SSI eligibility and supporting the SSI application process or other public benefits.
- Assistance with the annual housing recertification process.



- Coordination with the tenant 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.
- Ongoing assistance with lease compliance, including ongoing support with activities related to household management.<sup>10</sup>
- Health and safety visits, including unit habitability inspections.
- Other prevention and early intervention services identified in the crisis plan that are activated when housing is jeopardized (e.g., assistance with reasonable accommodation requests that were not initially required upon move-in).
- Assistance with independent living, life skills, and training on budgets, including financial literacy and connection to community resources.

Not every Medi-Cal member will be eligible for the full set of services covered by TSS. Each set of services will be customized based on the unique needs of each member based on the individualized housing support plan created through Housing Transition/Navigation Services.<sup>11,12</sup>

<sup>9</sup> Information in this fact sheet is summarized from the Medi-Cal Community Supports, or In Lieu of Services (ILOS), Policy Guide, Department of Health Care Services, January 2023.

<sup>10</sup> Does not include help with housing quality inspections.

<sup>11</sup> Services do not include the provision of room and board or payment of rental costs.

<sup>12</sup> See the [Housing Transition/Navigation Services](#) overview for more information.

## Eligibility for TSS

Medi-Cal members who are eligible<sup>13</sup> for TSS include:

- Any Medi-Cal member who received Housing Transition/ Navigation Services.
- Individuals who are prioritized for a permanent supportive housing unit or rental subsidy resource through the local homeless Coordinated Entry System or similar system;
- Individuals who meet the HUD definition of “homeless” (including those exiting an institution, with no limit on the number of days in the institution<sup>14</sup>) **and** who receive enhanced care management (ECM) or who have one or more serious chronic conditions and/or serious mental illness and/or are at risk of institutionalization or who may require residential services as a result of a substance use disorder.
- Individuals who meet the HUD definition of “at risk of homelessness” (including children who do not qualify as homeless under the HUD definition but do qualify under other programs<sup>15</sup>) **and** also meet at least one of the following criteria:
  - They have one or more serious chronic conditions;
  - They have a serious mental illness;
  - They are at risk of institutionalization or overdose or are requiring residential services because of a substance use disorder or have a serious emotional disturbance (children and adolescents);
  - They receive Enhanced Care Management (ECM); or
  - They are a transitional age youth (TAY) 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.

## Restrictions/Limitations

- Duration: The TSS are available from the start of services until the individual's housing support plan determines they are no longer needed. The **length of services can be as long as necessary.**
- Frequency: **TSS are only available once in an individual's lifetime.** The MCP can approve one additional time with documentation as to what conditions have changed to demonstrate why providing TSS would be more successful on the second attempt.
- Other: N/A

## Who can Provide TSS

Providers must have experience and expertise providing TSS in a culturally and linguistically appropriate manner. Organizations and agencies providing services to individuals experiencing homelessness are eligible providers, so long as they are certified as Community Supports providers through their local Medi-Cal MCPs. The Department of Health Care Services requires that Medi-Cal MCPs coordinate with homeless service systems to provide TSS.

<sup>13</sup> MCPs may accept an attestation of the need for housing to satisfy any documentation requirements regarding the member's housing status.

<sup>14</sup> For this Community Support, institution includes: hospitals, correctional facilities, mental health or substance use disorder residential treatment facility, recovery residences, Institution for Mental Disease, and State Hospitals.

<sup>15</sup> A child and youth may also qualify as homeless under the following programs: the Runaway and Homeless Youth Act, the Head Start Act, the Violence Against Women Act of 1994, the Public Health Service Act, the Food and Nutrition Act of 2008, the Child Nutrition Act of 1966, and the McKinney-Vento Homeless Assistance Act.



## CalAIM Community Supports: Housing Deposits<sup>16</sup>

### Overview

Housing Deposits are intended to help identify, coordinate, secure, or fund one-time services or modifications necessary to enable a person to establish a basic household. **Many things covered by Housing Deposits are among those that homeless service providers already help people experiencing homelessness with, and include the following:**

- Security deposits required to obtain a lease;
- Set-up fees or deposits for utilities or service access and utility arrears;
- First month coverage of utilities (including phone, gas, electricity, heating, water);
- First and last months' rent if required by a landlord for occupancy;
- Services necessary for a person's health and safety, such as pest eradication and one-time pre-move-in cleaning; and
- Goods necessary to ensure access and safety for a person upon move-in, such as an air conditioner or heater and other medically-necessary adaptive aids and services designed to preserve a person's health and safety in the home (e.g., hospital beds, Hoyer lifts, air filters, specialized cleaning or pest control supplies).

Individuals may only require a subset of the services listed above. Services provided should be based on an assessment of each individual's needs and documented in their housing support plan.<sup>17</sup>

Housing Deposits may not be used for room and board or payment of ongoing rental costs (beyond the first and last months' coverage, as listed above).

<sup>16</sup> Information in this fact sheet is summarized from the [Medi-Cal Community Supports, or In Lieu of Services \(ILOS\), Policy Guide](#), Department of Health Care Services, January 2023.

<sup>17</sup> See the [Housing Transition/Navigation Services](#) overview for more information about housing support plans.

## Eligibility for Housing Deposits

Medi-Cal members who are eligible<sup>18</sup> for Housing Deposits include:

- Anyone who received the Housing Transition/Navigation Services Community Support;
- Individuals who are prioritized for a permanent supportive housing unit or rental subsidy resource through the local homeless Coordinated Entry System or similar system;
- Individuals who meet the HUD definition of “homeless” (including those exiting an institution, with no limit on the number of days in the institution<sup>19</sup>) **and** who receive enhanced care management (ECM) or who have one or more serious chronic conditions and/or serious mental illness and/or are at risk of institutionalization or who may require residential services as a result of a substance use disorder.

## Restrictions/Limitations

- Duration: N/A
- Frequency: **Housing Deposits are only available once in a person's lifetime** and can only be **approved one additional time with documentation** about what conditions have changed to demonstrate why providing Housing Deposits would be more successful the second time.
- Other: The services must be **identified as reasonable and necessary in the person's individualized housing support plan** and are only available when the person is unable to meet the expense. Other: People **must also receive Housing Transition/Navigation services** (at a minimum, the associated tenant screening, housing assessment, and individualized housing support plan) in conjunction with Housing Deposits.<sup>20</sup>

## Who can Provide Housing Deposits

Providers must have experience and expertise providing Housing Deposit services in a culturally and linguistically appropriate manner. A Medi-Cal managed care plan (MCP) case manager, care coordinator, or housing navigator may coordinate and pay for Housing Deposit services directly or subcontract the services.

Organizations and agencies providing services to individuals experiencing homelessness may be eligible providers, so long as the agencies and individual providers have demonstrated experience providing these services and are certified as Community Supports providers through their local Medi-Cal MCPs.

---

<sup>18</sup> MCPs may accept an attestation of the need for housing to satisfy any documentation requirements regarding the member's housing status.

<sup>19</sup> For this Community Support, institution includes: hospitals, correctional facilities, mental health or substance use disorder residential treatment facility, recovery residences, Institution for Mental Disease, and State Hospitals.

<sup>20</sup> See the [Housing Transition/Navigation](#) overview for more information.



## CalAIM Community Supports: Short-Term Post-Hospitalization Housing<sup>21</sup>

### Overview

Short-Term Post-Hospitalization Housing is temporary housing for individuals who have high medical or behavioral health needs, need the opportunity to continue their recovery from medical/psychiatric/substance use disorder(s), and have recently exited from the hospital or other institutional setting (see list of qualifying institutions in Eligibility section). **Many homeless service agencies are uniquely positioned to become contracted providers of Short-Term Post Hospitalization Housing, as many of them already provide these supportive services along with housing.**

Short-Term Post-Hospitalization Housing must give the individual the opportunity to:

- Recuperate and recover (i.e., gain or regain the ability to perform activities of daily living);
- Receive necessary medical/psychiatric/substance use disorder care and case management; and
- Become connected to other housing and Community supports such as Housing Transition/Navigation.

The setting for Short-Term Post-Hospitalization Housing may be individual or shared interim housing, as long as residents receive the services described.

Medi-Cal members must be offered Housing Transition/Navigation supports during their stay in Short-Term Post-Hospitalization Housing to prepare them to transition to more permanent housing. Housing Transition/Navigation covers the development of a housing assessment and individualized housing support plan.<sup>22</sup>

### Eligibility for Short-Term Post-Hospitalization Housing

Medi-Cal members who are eligible<sup>23</sup> for Short-Term Post-Hospitalization Housing include:

- Individuals exiting recuperative care;
- Individuals exiting an inpatient hospital stay (either acute or psychiatric or Chemical Dependency and Recovery hospital), residential substance use disorder treatment or recovery facility, residential mental health treatment facility, correctional facility, or nursing facility **and** who meet any of the following criteria:
  - Individuals who meet the HUD definition of “homeless” (including those exiting an institution, with no limit on the number of days in the institution<sup>24</sup>) and who receive enhanced care management (ECM) or who have one or more serious chronic conditions and/or a serious mental illness and/or are at risk of institutionalization or who may require residential services as a result of a substance use disorder.
  - Individuals who meet the HUD definition of “at risk of homelessness”<sup>25</sup> (including children who do not qualify as homeless under the HUD definition but do qualify under other programs<sup>26</sup>) who have significant barriers to housing stability AND 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 are requiring residential services because of a substance use disorder or have a serious emotional disturbance (children and adolescents);
    - ▶ Are receiving Enhanced Care Management (ECM); or
    - ▶ Are a transitional age youth (TAY) with significant barriers to housing stability, such as one or more convictions, a history of foster care, involvement

<sup>21</sup> Information in this fact sheet is summarized from the Medi-Cal Community Supports, or In Lieu of Services (ILOS), Policy Guide, Department of Health Care Services, January 2023.

<sup>22</sup> See the [Housing Transition/Navigation](#) overview for more information about the services included.

<sup>23</sup> MCPs may accept an attestation of the need for housing to satisfy any documentation requirements regarding the member’s housing status.

<sup>24</sup> For this Community Support, institution includes: hospitals, correctional facilities, mental health or substance use disorder residential treatment facility, recovery residences, Institutions for Mental Disease, and State Hospitals. If exiting an institution, individuals are considered homeless if they were homeless immediately prior to entering that institutional stay, regardless of the length of institutionalization.

<sup>25</sup> The timeframe for an individual or family who will imminently lose housing is extended from (14) days for individuals considered homeless to thirty (30) days.

<sup>26</sup> A child and youth may also qualify as homeless under the following programs: the Runaway and Homeless Youth Act, the Head Start Act, the Violence Against Women Act of 1994, the Public Health Service Act, the Food and Nutrition Act of 2008, the Child Nutrition Act of 1966, and the McKinney-Vento Homeless Assistance Act.



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.

In addition to meeting one of these criteria, at minimum, eligible individuals must have medical or behavioral health needs such that experiencing homelessness upon discharge from one of these settings would likely result in the person being hospitalized, re-hospitalized, or re-admitted to an institutional setting.

### Restrictions/Limitations

- Duration: Short-Term Post-Hospitalization Housing services **cannot exceed a duration of six (6) months.**<sup>27</sup>
- Frequency: Short-Term Post-Hospitalization Housing services are available **once in an individual's lifetime.**
- Other: The service is only available **if the enrollee is unable to meet such an expense** on their own.

### Who can provide Short-Term Post Hospitalization Housing

Providers must have experience and expertise with providing services such as medical/psychiatric/substance use disorder care, case management, and housing-related services and supports.

A range of organizations and agencies are eligible to serve as Short-Term Post Hospitalization Housing providers so long as they can provide the unique services to meet the needs of eligible individuals. Examples include:

- Interim housing facilities with additional on-site support;
- Shelter beds with additional on-site support;
- Converted homes with additional on-site support;
- County directly operated or contracted recuperative care facilities;
- Supportive housing providers;
- County agencies;
- Public hospital systems;
- Social service agencies; and/or
- Providers of services for individuals experiencing homelessness.



<sup>27</sup> Services may be authorized for a shorter period based on individual needs.