HEALI Meeting
12/20/23

Waiver Updates

- Social Care Network Coalition met with Executive Chamber to discuss urgency for waiver approval due to time limitations for building the capacity and infrastructure to achieve improved health outcomes
- Waiver is an important funding tool to focus on patient-centered care integrating health care, behavioral health care, and social care

Other funding tools to achieve integrated care

- Efforts to Align Health and Social Care & Address Health-Related Social Needs
    - Medicare Physician Fee Schedule
        - Social Determinants of Health Risk Assessment
    - Medicaid State Plan Amendment
        - Health Advocacy
        - Health Education
        - Health Navigation
    - 1115 Medicaid Waiver
        - Screen Medicaid members for social care needs
        - Refer to navigation and social care services using shared technology platform
        - Navigate to health-related social services

HEALI update

- Participating in Partnership to Align Social Care's Health Equity Learning Collaborative
    - Community-Driven, Multi-Payer Health Equity Solutions: An ECHO Collaborative

Unite Long Island

- Success to date
    - 700 referrals resolved and closed
    - Building a comprehensive community to form an integrated care ecosystem and improve health outcomes

CHW Training Opportunity with Staten Island PPS and HWCLI

- Exciting opportunity for employers to enroll staff to participate in Staten Island PPS
- There are 3 phases for the program:
    - First phase: All virtual CHW training program provided by College of Staten Island
        - Begins January 30th - two evenings per week from 6-8pm
    - Second Phase: Lay Counselor training (this is replacing the Phase 2 of advanced CHW training, please see LCA7 curriculum for more details)
        - Begins March 27th - two, 3-hour live session per week from 12pm-3pm
    - Third Phase: Hands on training/apprenticeship
        - 2,000 hours to complete
        - Employees receive $1,200 after first 100 hours and additional $4,000 after 2,000 hours completed for total of $5,200
        - Employers receive $1,000 once CHW completed first two phases and additional $1,000 after 2,000 hours completed

Deirdre Sekulic – Montefiore Medical Center

- Primarily based in the Bronx
    - 1.4 million residents in the poorest urban county in the nation
    - Median household income $34,000

    - 54% Hispanic, 37% African-American
- Housing @ Risk Program
    - H@RP was established in March 2009 in the Moses division
    - This program was designed to:
        - Provide highly coordinated health and housing support to patients who are homeless or unstably housed
        - Improve health outcomes
        - Reduce preventable Emergency Department visits and hospital admissions
    - H@RP Target Population
        - Homeless patients
        - Unstable housed patients
        - Potentially homeless patients
        - Unmet housing needs
        - Recently housed with history of homelessness
    - How Does H@RP work?
        - Alert system in registration in emergency rooms and EHR
        - Referrals
            - Case consultation
            - Intensive housing support
        - Housing clinic
        - Comunilife Respite
- Referral Process
    - Referrals should be completed as soon as housing instability is identified
    - Complete referral and email to team
    - Include as much detail as you can
    - Depending on the situation and scheduling, H@RP goal is to respond in a week
    - H@RP staff will assess referral and determine the level of support that can be provided
    - Referrals will result in H@RP staff providing case consultation or accepting the patient onto the H@RP caseload for intense intervention
- Types of H@RP Interventions
    - Assist patients with getting vital documents
    - Assist patients with getting income from PA or SSI/SSD
    - Housing search
    - Preventing eviction & homebase initiative
    - Repairs advocacy
    - Ongoing collaboration & case conferencing
    - Addressing psychosocial stressors
- Comunilife Program Requirements
    - Patient must be independent in ADL's
    - Patient should dhave a respite discharge goal
    - Patient can be in a wheelchair but must be able to independently transfer
    - Patient can have a substance abuse history and recent use but must be already linked to outpatient treatment
    - Eligible cases will be interviewed via telephone by the Comunilife staff

Q&A

Q: Does Montefiore have housing inventory?
A: It's strictly through partnerships, Montefiore doesn't have housing inventory. We work with landlords in the Bronx.

Q: How many veterans do you serve?
A: Unsure of how many veterans served. There is more housing available for veterans, depending on discharge from service. One of the hardest cases is what we consider medically homeless. It's patients that live paycheck to paycheck and get a chronic illness and can no longer work and fall behind on rental arrears and lose their apartment. Sometimes they don't fit into the housing that's available. It's difficult to house this population into supportive housing because they don't have a severe mental illness, substance use disorder, and they may have an eviction on their record.

Q: Are you utilizing a referral technology?
A: In the past, we had Now Pow. We were contemplating Unite Us or Find Help and we are using Find Help.

Q: Are case managers not employed with partner CBOs notified that their clients are H@RP eligible?
A: All of our clients come from the Montefiore system. If a patient comes from the community and gets admitted to Montefiore, they're eligible to be part of our program. Patient can be eligible from a one-time ED visit or be an ongoing patient.

Q: How have you been able to support undocumented families?
A: Undocumented families are very hard to for us to place. We can really only advocate within the DHS system and family shelter system. We have created a great partnership with the intake path system into family housing where we can get them expedited. We have templates for our physicians to write letters. We advocate to get them housed within the Bronx close to the hospital.