



**District of Columbia State Innovation Model**  
Care Delivery Work Group: Meeting Summary

January 12, 2016  
3:00 p.m. – 4:30 p.m.

**Participants:** Dena Hasan, Joe Weissfeld, Chris Botts, DaShawn Groves, Lisa Fitzpatrick, Shelly Ten Napel, Kandis Driscoll, Caroline Deneszczyk, Johanna Barraza-Cannon, Nancy Murphy, Peter Truths, Liza Fues, Dallas Williams, Carmen Hernandez, Victor Freeman, Regina Woods, Christy Kramer, Eric Vicks, D Delatorre, Meghan Davies, Jennifer Zutz, Ellen Gardner, Mildred Williams, Victoria Roberts, LaTalya Palmer, Sharon Zalewski, Keesha Griffin, Brede Eschliman, Constance Yancy, Wes Rivers, Ambrose Lane, Rebecca Sidorow, Melissa Mayer, Robert Howard, Jessica Li, Lara Pukatch, Leslie Lyles Smith, Lauren Ratner, Ellyon Bell, Karen Dale, Shelia Dean, Layo George, Barbara Ormond, Gwen Young, Jasmine Shih, Sanaz Etminan, Peter Tuths, Melissa McCarthy, Sullivan Robinson, Kathy Haines, Rachel Pierre, Amanda Harris, Catherine Crosland, Judith Hinton, An-Tsun Huang, Uchenna Okoji, Sarah Rogue, DeShawn Roe, Dorothy Johnson, Michael Crawford, Mark Weisman, Wendell Atkinson, Cyd Campbell, Cavella Bishop, Linda Holifield, Christopher King, Patricia Quinn, Marie Dorelus, Djinge Lindsay

TOPIC	DISCUSSION
<p><b>Overview of Health Home 2</b></p>	<ul style="list-style-type: none"> <li>• <b>DHCF provided an overview of the healthcare landscape in D.C. and the intended purpose of the proposed chronic conditions Health Home (HH2) benefit, highlights include:</b> <ul style="list-style-type: none"> <li>➤ In the current healthcare landscape, patients enter the system through inappropriate ED use and leave the system with minimal support. In the future landscape, accountable entities will take responsibility for a patient's whole health.</li> <li>➤ The HH2 benefit, which is intended to integrate and coordinate care, will offer a 90-10 federal match and include a pay for performance payment structure.</li> <li>➤ This benefit provides an opportunity for collaboration between permanent supportive housing (PSH) and clinical providers. Proposed options for collaboration include: <ul style="list-style-type: none"> <li>▪ <i>Option 1:</i> PSH providers contract with HH2 providers to deliver services</li> <li>▪ <i>Option 2:</i> PSH providers become a HH2 provider by expanding their scope of services.</li> </ul> </li> <li>➤ Under the collaboration, DHCF would pay for the care coordination of services delivered by the HH2 provider, which would then allow DHS to shift funding and dedicate more resources to affordable housing.</li> </ul> </li> </ul>

<p style="text-align: center;"><b>Discussion of Permanent Supportive Housing (PSH)</b></p> <p>1. What PSH services are currently being provided by PSH Providers?</p> <p>2. What social services are being provided by medical providers?</p>	<ul style="list-style-type: none"> <li>• <b>To better understand the PSH program, participants discussed the scope of work of PSH providers:</b> <ul style="list-style-type: none"> <li>➤ PSH is one housing intervention to address homelessness. The program is currently operated through DHS using local and federal funds from HUD.</li> <li>➤ PSH providers help facilitate connections to stable, safe, livable housing for individuals experiencing chronic homelessness. PSH providers assist with landlord negotiations and offer a variety of wrap around services based on their expertise, capacity, and funding.</li> <li>➤ In some circumstances, PSH providers can provide services or pay for materials that impact health, but are not directly health related, such as air-conditioners or talking clocks for blind individuals.</li> </ul> </li> <li>• <b>Participants discussed services currently being delivered by PSH providers, examples include:</b> <ul style="list-style-type: none"> <li>➤ <i>Pathways to Housing DC</i>: provides assistance securing an apartment, case management, addiction counseling, employment services, assistance obtaining social supports, and on-site medical services through a partnership with Unity Health Care.</li> <li>➤ <i>Miriam's Kitchen</i>: focused on the chronically homeless population and provides intensive support services, such as case management, career and employment coaches, and connections to medical care.</li> <li>➤ <i>Community Connections</i>: assists clients with integrating back into the community in a meaningful way by helping with daily living activities, providing introductions to neighbors, and offering rehabilitative services.</li> <li>➤ <i>Community of Hope</i>: As a PSH provider and FQHC, Community of Hope is able to provide medical care and wrap around services, such as education and employment services for adults and children and mental health services delivered by MSWs.</li> </ul> </li> <li>• <b>PSH providers experience a number of challenges while serving clients enrolled in the PSH program, these include:</b> <ul style="list-style-type: none"> <li>➤ Misaligned billing standard between the PSH program and Medicaid;</li> <li>➤ Difficulty finding case managers that can handle the complex needs of individuals experiencing chronic homelessness;</li> <li>➤ Barriers to sharing data between providers, including HIPAA privacy laws; and</li> <li>➤ Insufficient platforms to allow for sharing data in real-time.</li> </ul> </li> <li>• <b>Participants discussed social services currently being delivered by clinical providers, examples include:</b></li> </ul>
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	<ul style="list-style-type: none"> <li>➤ <i>Unity Health Care</i>: case managers help patients enroll in health insurance, arrange transportation, obtain referrals to shelters and drug treatment programs, and secure follow-up appointments for care. <ul style="list-style-type: none"> <li>▪ A clinical provider cannot refer a patient to a PSH provider because PSH providers do not have the ability to directly enroll an individual into the PSH program; all individuals must receive a vulnerability assessment through DHS or one of its community partners to determine the appropriate housing intervention.</li> </ul> </li> </ul>
<b>Wrap Up and Next Steps</b>	<ul style="list-style-type: none"> <li>• <b>The following next steps were identified:</b> <ul style="list-style-type: none"> <li>➤ DHCF will develop a process flow for how clients move through the social services and housing system.</li> <li>➤ DHCF will contact additional stakeholders to collect more information on partnerships throughout the District.</li> </ul> </li> </ul>