Accessing Mainstream Service Resources For People Who Are Homeless

Maryland
September 2004
Technical Assistance Collaborative
Agenda

- Why are We Here?
- What’s the Difference Between an Entitlement and a Non-Entitlement?
- Are There Gray Areas?
- Overview of TANF, Medicaid, SSI, CHIP, Food Stamps, VA Health Care Programs
- Panel of Experts
- Lunch (on your own)
- Overview of Substance Abuse Block Grant, Mental Health Block Grant, Social Services Block Grant, Workforce Investment Act, Welfare-to-Work
- Panel of Experts
Background on the Continuum of Care and Mainstream Resources
Why are We Here?

- Increase access by homeless people to mainstream service resources
- Help redirect McKinney-Vento funding to housing
- Identify opportunities and barriers to accessing and utilizing mainstream service resources
- Strengthen Continuum of Care applications
- Eliminate chronic homelessness
Permanent Housing Emphasis

- Congressional requirement that 30% of funds go to Permanent Housing.
- HUD may need to fund permanent housing over higher scoring new non-permanent housing projects.
Emphasis on Chronic Homelessness

- Goal to end chronic homelessness in 10 years.
- 2002: HUD starts tracking state and local CoC progress toward this goal.
- Chronic homeless include individuals with disabling conditions who have been homeless for over one year OR who have had at least four episodes of homelessness in the past three years.
What are Mainstream Service Resources?

- Non-McKinney-Vento resources
- Identified by HUD
- Reflects Congressional language
“…all awards of assistance under this heading [Homeless Assistance Grants] shall be required to coordinate and integrate homeless programs with other mainstream health, social services, and employment programs for which homeless populations may be eligible including Medicaid, State Children’s Health Insurance Program, Temporary Assistance to Needy Families, Food Stamps, and services funding through the Mental health and Substance Abuse Block Grant, Workforce Investment Act and the Welfare-to-Work grant program.”
**Federal Mainstream Service Resources**

- Medicaid
- State Children’s Health Insurance Program (CHIP)
- Veterans Health Care
- Food Stamps
- Temporary Aid for Needy Families (TANF)
- Supplemental Security income (SSI)

- Workforce Investment Act (WIA)
- Substance Abuse Block Grant
- Mental Health Block Grant
- Social Services Block Grant
- Welfare-to-Work
Help homeless people achieve and maintain residential stability.

Can be used at a systems-level to address social concerns or implement policy.

Examples:

- Discharge planning
- End chronic homelessness within 10 years
- Federal Policy Academies
  - Focusing on both chronic homeless and families with children
  - State Action Plans
Importance of Mainstream Service Resources in a CoC System (cont’d)

- Increase movement out of homelessness.
- Allow McKinney-Vento resources to be used for housing.
- Provide program flexibility.
- Meet HUD match requirements.
- Leveraging of other resources.
Limitations of Mainstream Resources

- Increasing access to mainstream service resources will not address causes of homelessness for every individual/family.
- Some people who are homeless will not be eligible for some mainstream service resources.
- Greater access to mainstream service resources may not provide the complete answer for CoCs that have greater demand for McKinney/Vento resources than funds.
- Many mainstream resources are subject to state and federal budget constraints.
- Mainstream resources are controlled by federal, state, and local officials that may not prioritize or understand the needs of homeless people.
Continuum of Care Application

Requirements

- Policies that are currently in place in your CoC to help clients secure these mainstream benefits for which they are eligible. CoC were asked to check which policies are implemented with the majority of providers. Policies may include:
  - A majority of homeless assistance providers have case managers systematically assist clients in completing applications for mainstream programs.
  - CoC systematically analyzes its’ projects APRs to assess and improve access to mainstream programs.
  - CoC contains a specific planning committee to improve CoC-wide participation in mainstream programs.
  - A majority of homeless assistance providers use a single application for our or more mainstream programs.
  - CoC systematically provides outreach and intake staff specific ongoing training on how to identify eligibility and program changes for mainstream programs.
  - CoC has specialized staff whose only responsibility is to identify, enroll, and follow-up with homeless persons on participation in mainstream resources.
  - A majority of providers supply transportation assistance to clients to attend mainstream benefit appointments.
  - A majority of providers have staff systematically follow-up to ensure that mainstream benefits are received.
Project applicants required to certify that, if funded, they would coordinate and integrate homeless programs with other mainstream health, social service, and employment programs for which homeless people may be eligible.

In 2004, applicants were required to report how well the renewal projects’ participants were accessing mainstream resources from APR data.
What is an Entitlement?

What are programs with benefits that are not Entitlements?
What is an Entitlement?

Individual/family is able to receive benefits if they meet certain fixed and objective eligibility criteria.

- Financial criteria
  - Income level
  - Amount of assets
- Categorical criteria
  - Aged, blind or disabled
  - Family with children under 21
What is an Entitlement? (cont’d)

- Once individual/family is eligible for entitlement benefits, they continue to receive those benefits automatically until either their financial or categorical characteristics change [or the benefit period expires (e.g., TANF)].

- Entitlement programs must be made available to every eligible individual/family in the same way and with the same benefits throughout the state/jurisdiction.
Mainstream Service Resources that are Entitlement Programs

- **TANF** (Not an entitlement like the old AFDC program it replaced, but has some features similar to entitlements)
- **SSI**
- **Medicaid**
- **CHIP**
- **Veterans Health Care**
- **Food Stamps**
Entitlement Benefits Provided

- Eligible individuals and families must submit an application (and any necessary accompanying documentation) to qualify for entitlement benefits.
- In most cases, entitlements must be provided to qualifying individuals/families regardless of the amount of funding allocated at the federal/state level for the program.
  - Example: Medicaid
- Most entitlement programs provide specific due process rights for appeals.
Some entitlement programs have both mandatory and non-mandatory benefits.

- **Example:**
  - TANF funds can be used to provide transportation, childcare, educational and employment related services.
  - Not all TANF recipients are entitled to receive all the services at all times while enrolled in the TANF program.
Non-Entitlement Programs

- Benefits for people with certain defined characteristics or needs.
  - But not all people meeting these criteria are entitled to receive these benefits

- Can limit access to services based on budget limitations.

- Can establish caps on number of people served/units of service delivered.

- Do not have to be made available in the same way to similar categories of people.
Non-Entitlement Mainstream Service Resources

- Substance Abuse Block Grant
- Mental Health Block Grant
- Social Service Block Grant
- Workforce Investment Act
What are these Mainstream Service Resources? (Part 1)
Mainstream Service Resources 1

- Medicaid
- CHIP
- TANF (Block grant to states with some entitlement-like features)

- Food Stamps
- SSI
Medicaid Eligibility

- The applicant must be a Maryland resident, a U.S. citizen or a legal qualified alien.

- Medicaid is for people in two broad categories, “Family and Children” or “Aged, Blind and Disabled”.

- Eligibility is based on a household’s income as a percentage of the federal poverty level (FPL). See Medicaid Template for income eligibility chart.
Maryland’s HealthChoice

- **HealthChoice** is the name of the Maryland’s statewide mandatory managed care program.
- **HealthChoice** provides health care to most Medicaid recipients (approximately 80 percent of all Medicaid recipients).
- Eligible Medicaid recipients enroll in a Managed Care Organization (MCO) of their choice and select a Primary Care Provider (PCP) to oversee their medical care.
- **HealthChoice** has identified seven special needs populations which MCOs must meet specific standards set forth in the regulations in treating these individuals. Homeless individuals are one of the seven special needs populations.
- In addition, **HealthChoice** has a specific requirement for MCOs in serving homeless individuals. MCOs (through a special needs coordinator) must attempt to identify homeless individuals and link them to the appropriate service provider.
Medicaid Covered Services

Below are some of the relevant, available services under Medicaid. There may be limitations on some services. Some services require prior authorization before they will be paid.

- Ambulance services and emergency medical transportation;
- Dental services for children;
- Disposable medical supplies and durable medical equipment;
- Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) services for individuals under 21;
- Family planning services/supplies;
- Free-standing health clinics;
- Free-standing dialysis facility services;
- Free-standing Medicare-certified ambulatory surgical centers;
- Home and community-based waiver services for individuals with developmental disabilities, disabled children, older adults, physically disabled adults and children with autism spectrum disorder;
- Home health services;
- Hospice care;
- Hospital inpatient and outpatient;
- Intermediate Care Facility for persons with mental retardation (ICF/MR) or persons with related conditions;
- Laboratory and x-ray services;
- Medical day care services;
- Nurse anesthetist, midwife, and practitioner services;
- Nursing facility services (nursing homes);
- Oxygen services and related respiratory equipment services;
Medicaid Covered Services

- Personal care services,
- Pharmacy services,
- Physical therapy services,
- Physician services including a dentist’s medical and surgical services,
- Podiatry services,
- Mental Health services,
- Rare and Expensive Case Management (REM) services, for HealthChoice eligibles based on diagnosis, etc.,
- Residential treatment center services for emotionally disturbed children,
- School-based services: EPSDT school health-related or health-related early intervention services, transportation services, and service coordination for children with disabilities,
- Inpatient and Outpatient Substance Abuse Treatment,
- Targeted case management for children diverted/returned from out-of-state facilities, Early Intervention Services Case Management for children, Healthy Start Program for children and pregnant/postpartum women, HIV-infected individuals, individuals with developmental disabilities, mental health, and Statewide Evaluation and Planning Services (STEPS) for persons at risk of nursing home admission,
- Transportation--medically necessary to Medicaid covered services (provided through local health departments), and
- Vision care services for children and eye exam every 2 years for adults.
Maryland’s State Children’s Health Insurance Program (CHIP)

- The Maryland Children’s Health Program (MCHP) is for families with children under age 19 and pregnant women who live in Maryland.

- MCHP Eligibility: Children under age 19, who are not eligible for Medicaid, are uninsured, and whose gross family income is at or below 200 percent of the federal poverty level (FPL); and pregnant women of any age whose gross family income is at or below 250 percent FPL.

- MCHP provides the following services:

  **Benefits for children include:**
  - Doctor Visits (well and sick care)
  - Hospital Care
  - Lab Work and Tests
  - Dental Care
  - Vision Care
  - Immunizations (shots)
  - Prescription Medicines
  - Transportation to Medical Appointments
  - Mental Health Services
  - Substance Abuse Treatment

  **Benefits for Pregnant Women Include:**
  - Prenatal and Post-Partum Doctor Visits
  - Hospital Delivery Bill
  - Doctors Visits not relating to Pregnancy
  - Lab Work and Tests
  - Dental Care
  - Vision Care
  - Prescription Medicines (including vitamins)
  - Transportation to Medical Appointments
  - Mental Health Services
  - Substances Abuse Services
  - After delivery, family planning services
Temporary Assistance for Needy Families (referred to as Temporary Cash Assistance) (Block Grant with some entitlement-like features)

Basic Eligibility:
- Live in the State of Maryland;
- Have a Social Security Number or have applied for a Social Security Number; and
- Be a U.S. citizen or a qualified non-citizen and
- Cooperate with child support, participate in work activities and comply with substance abuse provisions.

Financial Eligibility:
- Financial eligibility is based on the family’s income, expenses, and resources. All household income, except income specifically excluded in the rules, is counted in the eligibility determination.

Assets:
- Applicants for cash assistance may have up to $2,000 in assets. Vehicles are not counted as a resource.
Work Requirements:

- The primary goal of TCA is to help each family achieve independence as soon as possible, generally through employment.
- An Independence Plan is developed that includes the agreed upon work activities that will help the family meet the goal of independence.
- TCA applicants participate in job search activities as determined by the local department, during the application period and while receiving assistance unless they are exempt, or the case manager determines that job search is not appropriate at that time.
- Maryland requires universal engagement, which means all adult TCA customers must be involved in a work activity and children 16 or over must be registered in school and attending full time at least 80 percent of the time.

- TCA Benefits may include: income support; employment services; case management; and child care.
Food Stamps

- Food assistance for low-income individuals and families.
- The amount of monthly assistance is adjusted by income, household size, expenses, assets, etc.
- Those receiving TANF or SSI automatically eligible.
- Applications expedited for those with monthly gross income less than $150 or income earned from seasonal or migrant farm work; or combined income and resources less than monthly rent.
Supplemental Security Income (SSI)

- Financial eligibility: $584 per month if living alone; $866 for a couple. Earned income disregard could allow an individual to receive up to $1,213 per month ($1,777 for a couple) [Note: income from assets is counted, but there is no absolute limit on total assets]

- Categorical eligibility: Over 65, blind or disabled (some children may be eligible if blind or disabled)
Supplemental Security Income (SSI) (cont’d)

Disability criteria

- Person 18 years or over with a physical or mental impairment or combination of impairments preventing employment and expected to last for at least 12 months or result in death;
- Person less than 18 years with physical or mental impairment(s) resulting in “marked and severe functional limitations” expected to last at least 12 months; or
- Vision no better than 20/200 or limited visual field of 20 degrees.
- Sole disability of substance abuse is not covered.
Panel of Experts I

- TANF –
- Medicaid –
- CHIP –
- Food Stamps –
- SSI –
- Disability Determination Services –
Lunch Break
What are these Mainstream Service Resources? (Part II)
Mainstream Service Resources II

- Mental Health Block Grant
- Substance Abuse Block Grant
- Social Service Block Grant
- Workforce Investment Act
- Welfare-to-Work
- Veterans Health Care
- Under Maryland’s 1115 Medicaid waiver, MD Mental Hygiene Administration (MHA) administers all State and federal, including Medicaid, funds related to mental health services.
- MHA hired Maryland Health Partners (MHP), a Statewide administrative services organization (ASO), to provide access, utilization management, claims processing, management information, and evaluation services.
- The ASO is also responsible for determining whether an individual is part of the public mental health system (PMHS) and approval of services provided by qualified mental health providers.
- The Core Service Agencies (CSAs) are the local mental health authorities responsible for local planning, fiscal management and accountability, program management and quality improvement of public mental health services at the local level.
- Individual mental health providers typically act as the entry point for consumers to mental health services in their area.
Community-Based Services in the Fee-For-Service Benefits Package

- Psychiatric Hospitals (Institutions for Mental Diseases – IMDs);
- Psychiatric units of acute care general hospitals;
- Residential treatment centers (RTCs) (children and adolescents only);
- Psychiatric day treatment (also called partial hospitalization);
- Outpatient mental health clinics, many of which provide school-based and after-school treatment programs;
- Psychiatric rehabilitation programs;
- Residential rehabilitation programs;
- Mobile treatment services;
- Supported living programs;
- Supported employment and vocational services;
- Mental health case management;
- Respite care;
- Residential crisis services; and
- Therapeutic behavioral aides.
Substance Abuse Block Grant

- All individuals needing substance abuse services without regard to income.
- The amount paid by individuals depends on a sliding-fee schedule.
- Services supported by SAPT block grant funds are targeted to low-income clients who do not qualify for other coverage.
- Maryland’s 24 jurisdictions each has a substance abuse County Coordinator.
- These County Coordinators assist local citizens and organizations in identifying alcohol and drug abuse treatment needs and services and coordinate the delivery of publicly funded treatment in each jurisdiction.
- Licensed Substance Abuse Providers are also a point of entry for accessing services. In Montgomery and Prince George’s Counties, there are 22 licensed substance abuse providers.
Substance Abuse Treatment Services/Modalities include:

- Intermediate Care Facilities;
- Halfway House Services;
- Drug-Free Residential Services;
- Outpatient Services;
- Intensive Outpatient Services;
- Medication Assisted Treatment; and
- Correctional Services.

The SAPT block grant also helps to fund prevention activities throughout Maryland. Maryland’s Substance Abuse Prevention Activities are organized through the Prevention Coordinators Network.

Each County has a Prevention Coordinator who assists local citizens and organizations in identifying needs and developing prevention projects that will be successful in their respective communities.
SSBG is a flexible block grant intended to fund social services for vulnerable people, including children, families, people with disabilities, and the elderly.

States can decide which services to fund, who is eligible to receive services, and how funds are distributed.

Eligibility for SSBG-funded services will vary depending on the person’s disability and level of income.
MD’s Department of Human Resources uses SSBG funds combined with other federal, state, and local funds to support the following programs:

- Adoption;
- Adult Protective Services;
- Certified Adult Residential Environments;
- Child Protective Services;
- Families Now;
- Foster Care;
- In-Home Aide Services;
- Intensive Family Services;
- Purchase of Child Day Care;
- Kinship Care;
- Services to Families with Children; and
- Social Services to Adult.
Adults 18 or over may receive core services. Youth between the ages of 14 – 21 are also eligible for services.

Assessments related to access to employment services are conducted by MD’s Job Service One-Stop Career Centers.

There are two Maryland Job Service One-Stop Career Centers serving Montgomery County and Prince George’s County.

Maryland’s One-Stop Career Centers provide core services which include:

- Outreach;
- Initial assessment;
- Career counseling;
- Job search and placement assistance;
- Labor market information;
- Referrals to training or education, and to supportive services; and
- Supportive services such as transportation, childcare assistance, clothing, and more may be available to enable an individual to achieve employment.
One Stop Career Centers may also provide additional services, including:

- Adult Basic Skills Training;
- Adult, Dislocated Worker and Youth employment and training services - information, advice, job search assistance, and other help so they can get and keep good jobs;
- Older Worker Programs;
- Job Corps;
- Veteran’s Employment Services – available through the Veterans One-Stop Career Center;
- Unemployment Insurance; and
- Income benefits and other social services.

Priority for these services is given to recipients of public assistance and other low-income individuals.

No application.
Welfare-to-Work


- Maryland received $13.9 million in 1999 and provided a match of $4.7 million.

- Maryland targeted TANF recipients and non-custodial parents.

- In accordance with Section 105 of the Consolidated Appropriation Act of 2004, the FY 99 grant ended on January 23, 2004. Final FFY 99 WtW expenditures were $9,396,820.
Eligibility

Veterans who served in the active military, naval or air service must have been discharged under conditions other than dishonorable. They also must have served:

- One day of active duty before 9/7/80;
- Two consecutive years of active duty after 9/7/80; or
- As a reservist brought to active duty by the President.

In January 16, 2003, the VA placed a moratorium on enrollment in the VA health care system for veterans without service-connected illnesses or poverty-level incomes.
Based on the eligibility status, the veteran will be assigned to a priority group from #1 - #9.

Veterans in higher priority groups (e.g., service related disability > 30%, POWs) may receive quicker access to services.

Some lower priority/higher income veterans may pay a fee.
Veterans Health Care (cont’d)

Covered services:

- Inpatient medical/surgical and mental health/substance abuse services
- Outpatient medical and mental health care
- Emergency services in VA facilities
- Rehabilitation
- Respite and hospice
- Transportation
- Mental health and substance abuse prevention
Panel of Experts II

- Substance Abuse Block Grant –
- Mental Health Block Grant –
- Social Services Block Grant –
- Workforce Investment Act –
- Veterans Health Care Programs –