

Healthcare-Housing Integration Progress Tracking Tool

Overall Objective: Integrated and coordinated housing and health care that fosters:

- housing stability, health and wellness for people who are homeless or at-risk; and
- efficient, effective use of health care and housing resources.

Performance Category: Systems Change, Planning and Leadership

Target Outputs/Outcomes	N/A	Not Yet Started	Increased Understanding/Skills	Applied Knowledge/Concrete Progress	Accomplished
Action Planning session completed					
Action Plan (including implementation guidelines) finalized					
Ongoing and regular Leadership/Implementation Team meetings, with active participation by representatives from housing, health care, and other mainstream systems					
H ² Plan components embedded in other system plans, structures					

Performance Category: Enrollment

Target Outputs/Outcomes	N/A	Not Yet Started	Increased Understanding/Skills	Applied Knowledge/Concrete Progress	Accomplished
Expertise regarding Medicaid eligibility requirements and enrollment resources in homeless assistance agencies					
Identification of homeless/housing system clients in need of Medicaid and benefit program enrollment or renewal assistance					
Medicaid and other benefit program enrollment assistance available and offered to all eligible uninsured homeless/housing system clients					
100% enrollment in Medicaid and SSI/SSDI of eligible members of the H ² Target Populations: (1) people experiencing homelessness and (2) low-income people living with HIV/AIDS					

Performance Category: Engagement					
Target Outputs/Outcomes	N/A	Not Yet Started	Increased Understanding/Skills	Applied Knowledge/Concrete Progress	Accomplished
Connection to ongoing primary care for all homeless/housing system clients					
Increased rates of medication and health appointment adherence among homeless/housing system clients					
Improved measurable health outcomes for homeless/housing system clients with one or more chronic conditions					
Reduction of avoidable use of emergency and inpatient hospital services					
Reduction in costs incurred and/or number of visits to emergency rooms for non-emergencies					
Performance Category: Integration					
Target Outputs/Outcomes	N/A	Not Yet Started	Increased Understanding/Skills	Applied Knowledge/Concrete Progress	Accomplished
Written policies or agreements that require housing system-health care system connection (e.g. Memoranda of Understanding between housing agency and Federally Qualified Health Center; hospital policies that require participation in CoC)					
Direct links from health care providers to CoC Coordinated Entry System(s)					
Awareness and understanding of CoC Coordinated Entry System(s) by health care providers					
Regular participation by health care providers in CoC Coordinated Entry System(s)					
Discharge planning processes (in hospitals, jails, alcohol and					

drug treatment programs) that include consideration of housing needs and, if necessary, link to housing assistance system					
Integration of primary care and other health services into CoC and/or Coordinated Entry System(s)					
Integration Models (e.g., FQHC that has agreed to provide primary health care to each member of Target Populations that seeks housing assistance) operating in each CoC/county/community					

Performance Category: Data-Driven Interventions

Target Outputs/Outcomes	N/A	Not Yet Started	Increased Understanding/Skills	Applied Knowledge/Concrete Progress	Accomplished
Health care data systems that collect housing-related information (e.g., consistent use of ICD10 codes relating to homelessness by all hospitals)					
Sharing of data between homeless/housing assistance providers and health care providers					
Integration of data across homeless/housing assistance and health care system					
Identification of shared priority sub-populations and development of targeted interventions					

Performance Category: Resource Maximization

Target Outputs/Outcomes	N/A	Not Yet Started	Increased Understanding/Skills	Applied Knowledge/Concrete Progress	Accomplished
Expansion, waivers, state plan options, demonstration programs and other action to maximize use of Medicaid to support housing stability					
Medicaid billing for services provided by homeless housing and services providers (through direct billing by providers or partnerships with managed care organizations or other health					

providers)					
Maximization of health and human services funding (i.e., increased successful applications for relevant funding opportunities)					
Increased percentage of CoC funds going toward direct housing costs / Decreased percentage of CoC funds going toward services/treatment					

Note: This document was generated by TA providers to support direct TA for H² Initiative communities. It is created as a working tool for implementation planning in selected H² sites.