CCICH Meeting Notes

Affordable Care Act Implementation: Expansion of Medicaid Eligibility and State Provisions

- Waiting for SCOTUS decision—future uncertain
  - May strike down all, part, or leave as is
  - If strike down all or part, future of ACA is unclear
- Expansion of eligibility in Medicaid will bring in a lot of uninsured into the fold (nationally, 16 million people starting in 2014)
- States will receive 100% FMAP initially, phased to 90% by 2020
- Before ACA: individuals with MH/SA issue had to be “categorically” eligible for Medicaid due to disability status as recognized by SSA
- States must include prescription drug coverage, MH benefits, additional services
- Q: under children and foster care until 26—does this include children on probation (folded in to foster care population until 21)?
- CA specific measures
  - Supposed to reduce uninsured by half (7 million)
  - 10% enrollment increase in Medi-Cal
  - HHS allowing states to apply for an 1115 Medicaid demonstration waiver--$8 billion
- Key initiatives of CA Bridge to Reform:
  - LIHP Coverage Expansion
    - Medicaid coverage expansion (MCE)
    - Health Care Coverage Initiative (HCCI)
  - Mandatory enrollment of seniors and people with disabilities (SPDs) into managed care plans
  - Delivery System Reform Incentive Pool (DSRIP)
- Contra Costa DSRIP:
  - Primary care medical home model
  - Pilot integration of physical and behavioral health
  - Expand/update training of primary care workforce
- Anything already underway on ACA reform won’t go away if ACA repealed

Redevelopment Agencies: Efforts to Maintain Low and Moderate Income Housing Funding

- It looks like we’ve lost all of the funding—bills to save low and moderate income housing fund deposits and to reverse claw-back provisions
- But, there is still the obligation under the housing element—so, there needs to be some sort of funding
- Funding will probably be overseen and administered by the state
• Reach out to your representatives—tell them how important redevelopment funding is to ending homelessness, helping the community
  o Loni Hancock – West County – we will add this to the bottom of the update sheet

HEARTH Implementation Update
• HMIS Guidance:
  o More guidance is forthcoming; will need to set aside a lot of time through September to learn the new system
• 2012 NOFA Preview
  o FY2012 appropriation will not be the amount needed for every renewal—talk to Washington about McKinney money for HUD!
• CoCs preparing for HEARTH: HUD has suggestions
  o Partnerships: what’s working, what isn’t? (Contra Costa is cutting-edge on this, but can look deeper)
  o HPRP is ending: need to look at what financial gap it leaves us, what we learned from it, figure out how to build upon that success
  o Greater emphasis on data/HMIS collection, accuracy, monitoring, and use—how to improve?
  o Performance and compliance will be significant part of the competition—e.g., increasing income is important to sustaining housing
    ▪ Should look at issues that arise as collective community problems, not agency problems (e.g., no jobs, so can’t increase income)
  o Q: what happens if some of the providers work with specific populations (e.g., disabled folks not getting jobs)—does this mess up performance/compliance?
    ▪ A: No, this is viewed collectively, must have balance—progress is measured by people served; can get data standards changed if they don’t accurately reflect the reality of the community (the solution is NOT to change who we are serving)
  o Q: what if a community isn’t performing, someone has a new program that wants HUD funding—how will HUD look at new programs?
    ▪ Up until last year, had additional money for new programs—not sure if they’ll have the funding this year, since they need to fund the renewal projects
      • May not implement the special bonus this year
      • We can convene a public meeting related to new program opportunities
  o Q: Is the discharge data in the performance measures matrix being screened for duplicates?
    ▪ A: No, these are individual discharges and are not unduplicated
  o Everyone should listen to the HUD webinar on the new homelessness definition and documentation requirements—a lot is changing
- Should get on their listserv to sign up for the webinars as they come out (also post them online later)
- May want to conduct training at each agency
- Perhaps discuss at the next HUD Grantee Meeting (June 26, 3pm)—will add to the agenda

**ESG & Continuum of Care Coordination: Next Steps**

- ESG is the successor program for potential continuation of HPRP work
- ESG and CoC coordination requirement—is a dual requirement for ESG grantee and the CoC
- ESG regulations came out at the end of 2011: new consultation and coordination requirements with CoC, local, and state government
  - ESG recipients must consult with CoCs
  - Must coordinate and integrate ESG-funded activities with other programs
  - Coordinated Plan development
  - Align goals with the federal plan (FSP)
- Coordinated assessment system: need to start thinking about how to do this
  - Proposed requirement: centralized/coordinated system to assess needs of individuals/families (intake) in cooperation with CoC
    - Will be proposed for public comment soon
- HMIS participation mandatory for ESG
- CoC should established joint expectations/agreements with ESG grantees
- Brenda:
  - Substantial amendment in process for FY 2011-12
  - No more than 60% of current grant can be used for emergency shelter and street outreach—in the past, all of the money has been for this
    - So, need to shift money to HPRP programs
    - We’ve been out of RR money for months, only have a few thousand in HP left
  - New focus on children, veterans/families—should use money to do RR with those priorities (but not excluding anyone else)
  - Want to know how to coordinate with the CoC
    - ESG program is being formulated on the HPRP program
    - HPRP was a collaborative effort, so can use some of the HPRP standards as a start (but is a work in progress)
    - Will be dynamic until HUD finalizes regs
- What should coordination look like?
  - Information is power, brings forth collaboration
    - Need an email group
    - Meetings with progress for the three bodies (or at least reps)
  - Efficiency: same reporting tool and grant application process (reduce the amount of work)
  - Scoring criteria should be transparent, clear
  - Reviewing and ranking should be done in coordination
Will eventually need to coordinate all HUD funding—should start thinking about how coordination/leveraging will work

Good start that Brenda is on the CoC Executive Committee

Five cities in Contra Costa County eligible to receive ESG funding from HCD—currently there is little attempt at coordination
  ▪ Don’t want two ESG projects functioning differently just because one is federally funded, another is state-funded

Q: What is the ESG money last year vs. this year?
  o County: $74,000 for 11/12 and 12/13—very small compared with HPRP (~$400,000)
  o State: $150,000 cap for a one-year grant; agency could apply for several different types of projects, but probably won’t get them all
    ▪ Some years we get no ESG state funding, other years multiple projects funded
  o We should go back in time to look at how funding has been working (spreadsheet)

Developing the new Consolidated Plan
  o HUD already has the substantial amendment for 11/12—CCICH should see it (is available on ccreach.org – Publications – CDBG 12/13 action plan and related tables/documents)—we will do an analysis of this at the September CCICH meeting (working with Brenda, etc.)
  o Just starting CAPER (due at end of September, Gabriel is managing)—is an opportunity for coordination (CAPER for this year is on ccreach.org)
    ▪ Can give Brenda comments
  o Consolidated Plan for CDBG: HOME Consortium has five jurisdictions
    ▪ Hired a consultant to create the Con Plan: a five-year document with community input (not just agency people, but residents)
    ▪ Based on input, Con Plan outlines certain priorities for funding in housing, public services, infrastructure, etc.
    ▪ Con Plan is how funding is distributed: rate projects high, medium, or low priority
      ▪ Tend to fund high priority projects, probably not medium priority
    ▪ Each jurisdiction’s City Council approves the priorities
    ▪ Last time, there was a CCICH community meeting
    ▪ Action Plan is a look ahead over the coming year: just created FY 12/13 Action Plan
    ▪ CAPER is the Consolidated Action Plan Evaluation Report, a look back over the past year (how did we do on the last Action Plan?)
    ▪ Con Plan measures the unmet need: is very difficult to project for the next five years, tracking comments from community meetings—CCICH can provide more input on this through HMIS data, is a coordination opportunity
Anecdotal information should be included in CAPERs (photos, newsletters, etc., “jazz it up!”)—providers should let Brenda/ESG team know if there is something in the community that should be included

Q: Jurisdictions vs. county vs. state—how do the different funding streams work?
- HB can present on this next time

Behavioral Health Integration Update
- BHS brings together MH, AOD, and HS into one system focused on treating and providing services to the whole individual and their families
- Work plans have been developed for the next three years
- Steering Committee: representative body of providers, consumers, county managers, line staff, etc.
  - Sounding board for recommendations of how to change/enhance the system of care
  - Is also a point of contact to distribute information to the constituents in the rest of the community
  - 40 members, will continue to grow
  - Next meeting is June 18th
- Change Agents: individuals who represent a constituency; will take the information back into their systems of care to start the changes, make the agency/county structures complexity capable
  - Line staff, managers, consumers
  - Next meeting: June 21
- Program Managers and Line Staff meetings
  - Trying to learn about one another’s systems (“meet the in-laws”)
- Design Teams: people with areas of expertise (e.g., administrative, service delivery)
  - Know what we need to make the system of care work
  - Admin Design Teams are underway: building administrative infrastructure
  - Service Delivery Design Teams will be underway soon
- Newsletter: communication tool, both internally and with community
  - Various stakeholders wanted to know what’s going on
  - Currently in an internal test phase (email)—working out the kinks
  - Next iteration will go out to the community
- Lauren, Steve will be at the next CCICH meeting with more information
- Feedback on BHS from CCICH:
  - Frustration: who is participating?—beginning to address that
  - Exciting: Zia partners 12 steps for agencies to become competent to deal with people with complex issues (see Zia website)

Other Business
- Project Homeless Connect (Arturo)
• June 14th, 9-3: 8th year for the event
  o Need more providers, volunteers
  o City of Concord and Concord PD have been a great help with donations and logistics
  o Opening speech at 8 am
  o Estimate 600 individuals (last year 842 adults, 77 children)
  o Need donations: donation list is in the packet/online (summer hygiene, water, reusable bags)
  o Shuttles will pick up from various shelters/service centers
  o Clean Slate services will be at Project Homeless Connect (expunging program)—will have legal aid from Bay Area Legal Aid and Rubicon
    ▪ What about felony in another state? Depends

• AB 109 Reentry Plan: Update (Lavonna)
  o New budget still in development
  o Expecting additional money for Contra Costa (first allocation was only for 9 months, next one will be for the whole year)—could be an additional $9 million if the numbers work out depending on which formula the state chooses
  o Advisory Board will have needs discussion based on past nine months, determine how to use the additional funding

• Supportive Services for Veteran Families Program: Update
  o Shelter Inc. is partnering with the county programs, have served 115 veterans; 63% have obtained/maintained housing
  o Started in October; focused on case management
  o Need help with outreach (passed out posters)—get the word out that veterans are eligible for services (criteria on posters)
    ▪ Can send out electronic version, or send posters to offices

• Concord Naval Weapons Station: Update
  o Set of legally binding agreements that all partners and local reuse authority for City of Concord have approved—now moving toward Board approval
  o Once approved by all partners, will go to Navy for approval—will hopefully have a project in 10, 15 years...
  o The Station is being turned back over to the city; must provide a homeless conveyance
    ▪ HS has been working with the city to develop a plan: 260 units of housing for homeless individuals and families

• 2012 Sheltered Homeless Count: Update
  o Starting this year, HUD requires CoC to conduct a sheltered homeless count every year (in addition to sheltered and unsheltered (street) count every two years)
  o Notable findings:
    ▪ 29 fewer sheltered homeless people than in 2011: due to reduced capacity in HPRP programs (ran out of funding)
- 46 person increase in transitional housing, 75 person decrease in emergency shelters—two large shelters reclassified or shifted beds classification to transitional housing

- City of Concord: new initiative called Change for Real Change
  - Beginning same day as Project Homeless Connect
  - Designed to support homeless services in Concord (Central County Homeless Outreach, Project Hope)
    - Mechanics Bank donated $2,000
  - Will have change jars at local businesses
  - Instead of giving the homeless change, give them vouchers with information about services
  - Using PayPal, cell phone payment system
  - Idea is that the community will take over the project management
  - Change4RealChange.org; also on Facebook

- Feedback: email Jay
- Next meeting: September 14