HOUSING SERVICES

Service Category Description

Housing Services are the provision of short-term assistance to support emergency, temporary or transitional housing to enable an individual or family to gain or maintain medical care. Housing related referral services include assessment, search, placement, advocacy, and the fees associated with them. Eligible housing can include both housing that does not provide direct medical or supportive services and housing that provides some type of medical or supportive services such as residential mental health services, foster care, or assisted living residential services.

Unit of Service: 1 Unit = Any assistance request (including denied requests)

Requirement	Indicator	Data Source
Participant eligibility is based on income level. **Participants between 0-125% of Federal Poverty Level (FPL)** are eligible for financial and housing assistance not exceed $800 for the current fiscal year. Of this amount up to $400 maximum may be used for hotel stays.	Participant's proof of income.	**Participant's file** shows proof that the participant meets this income standard.
	Hotel Stays: One week maximum	**Participant's file** contains a copy of the bill.
Participants between 126-185% of FPL are eligible for financial and housing assistance not to exceed $400 dollars for current fiscal year. Of this amount up to $400 maximum may be used for hotel stays. **Important Note:** The $400 maximum for hotel stays under both FPL Tiers is **NOT** additional funds; it is simply the maximum		

amount available for that benefit. The following restrictions and procedures apply:		
Providers will have structured procedures for participants to gain assistance, deny requests and handle inappropriate use of funds.	The participant requesting assistance should provide information as to the purpose of the assistance, a copy of the bill to be paid, identifying the specific item and vendor to be paid. The participant should supply to the case manager the cause of the shortfall as well as a plan of action to ensure that the situation does not become an ongoing process in which the participant can never recover.	**Participant's file** show adhere to the providers procedures
	Medical Case Manager will update the participant's service plan to include goals and objectives to stabilize the participants housing situation.	**Participant's file** contains an updated Service Plan with Housing goals and objectives.

Requirement	Indicator	Data Source
	Funds cannot be used for deposits.	**Participant's file** shows adherence to the provider's procedures and Emergency Financial Standards.
	If a participant's request is denied, the participant should be given the opportunity to appeal to the respective case management provider. The reconsideration should be based on the broader appeal guidelines that apply to all provider activities in relation to direct participant service provisions.	**Participant's file** shows adherence to the provider's procedures and Emergency Financial Standards.
	Case management agencies have the opportunity to appeal single payer decisions.	**Provider's policies and procedures** outline the appeal procedures

	If a participant is suspended from services due to misrepresentation of expenses or income or fraudulent behavior, any case management provider can suspend that participant, give a timeframe for the suspension, report the suspension and timeframe to the single payer, and the suspension will be honored across all case management agencies.	**Participant's file** shows adherence to the provider's procedures and Emergency Financial Standards.
Distributed checks must insure that needs are met and limit possibilities of fraud.	Checks for emergency housing assistance will be issued by the contracted single payer provider.	**Participant's file** contains a copy of the check issued by the single payer provider.
	Checks will be issued to the vendor. Checks cannot be payable or issued to participants.	**Participant's file** contains a copy of the properly written check

Requirement	Indicator	Data Source
	A copy of the check is placed in the participant's file.	**Participant's file** contains a copy of the check
	Approved check request will be completed within 3 working days from the referral from agencies.	**Participant's file** demonstrates that the check request was completed in a timely manner.