



Medica Supportive Housing Program Health Care and Supportive Housing

Project Initiation

Hearth Connection reached out to Medica and proposed partnering with them to help lower costs of their high utilizers that were experiencing homelessness. Hearth Connection sold Medica on the partnership by using data regarding the cost savings shown by housing high utilizers of healthcare.

Program Description

Hearth Connection and Medica partner together to address the housing, social service and medical needs of high cost health system clients who are experiencing long-term or chronic homelessness. Medica has created an algorithm to identify their members who are experiencing homelessness; they use this algorithm to choose members to refer to Hearth Connection. When Hearth Connection is referred a Medica member they work with their direct service partners to find, engage, house and provide housing stability services to that member.

Hearth Connection contracts with a provider network which offers (a) intensive support services (care coordination and case management services) and (b) rental assistance to participants. Hearth Connection's database on all participants allows the ability to monitor and report progress on maintaining stability in supportive housing and improvements in individual functioning.

Program Overview

Location

Minneapolis, St. Paul & Duluth, MN

Year Started

2012

Target Population

Long term homeless Medica Health Plan members

Funding Sources for Housing

HUD Continuum of Care and Minnesota Housing

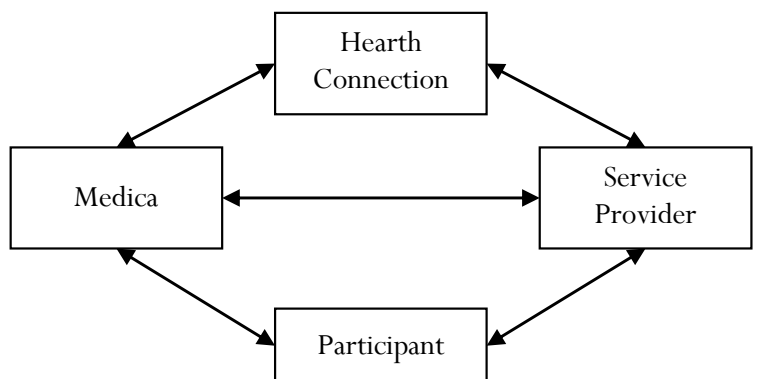
Funding Sources for Services

Medica

Type of housing use

Scattered site

Working Together Partner Relationships



Challenges

Member Coverage Termination

There have been several challenges in the first year for tenants to maintain their Medica coverage. Retaining Medica coverage is a necessity for the payment of their services, without it their housing is at risk. Members lost coverage for mostly simple reasons, their failure to renew paperwork, which was solved by better training the housing case managers on the issue. A larger issue is that when a member moves to a county that Medica does not offer coverage in. Since the vouchers are portable this is allowed by HUD, member education around their options to either stay in a Medica and receive coverage and housing or to move and lose that benefit is needed.

Care Coordination vs Case Management Duties

There has been much discussion about whether or not there is duplication of services between care coordination from the health care side as compared to intensive case management from the human services side. Currently they are considered separate services that are billed separately. The care coordination focuses solely on connecting the members to appropriate providers and the case managers handle all other areas necessary to maintain housing, including talking to members about their health problems, medications and attending doctor appointments if needed.

Rewards

Improving Participant Interaction with the Health Plan

Intensive case managers work with participants in a wide variety of ways, depending on the need of the participant. Frequently this work involves helping the participant improve their interactions with health systems. This may include:

- Facilitating enrollment in health insurance;
- Decreasing use of emergency rooms;
- Linking participant to a primary care provider conveniently located to them. The care provider may be part of a FQHC or clinic depending on the geographical restraints.
- Helping participants learn how to use health insurance and health care providers appropriately;
- Ensuring participants have transportation and show up for health care appointments;

Partners

Partner Name	Type of Organization/ Role in Program
Hearth Connection	Nonprofit intermediary that brokers rental assistance and services
Medica	Managed care organization

Contacts

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