

118TH CONGRESS
1ST SESSION

S. _____

To direct the Secretary of Health and Human Services to provide guidance to State Medicaid agencies, public housing agencies, Continuums of Care, and housing finance agencies on connecting Medicaid beneficiaries with housing-related services and supports under Medicaid and other housing resources, and for other purposes.

IN THE SENATE OF THE UNITED STATES

Mr. MARKEY introduced the following bill; which was read twice and referred to the Committee on _____

A BILL

To direct the Secretary of Health and Human Services to provide guidance to State Medicaid agencies, public housing agencies, Continuums of Care, and housing finance agencies on connecting Medicaid beneficiaries with housing-related services and supports under Medicaid and other housing resources, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Housing Alignment
5 and Coordination of Critical and Effective Supportive
6 Health Services Act” or the “Housing ACCESS Act”.

1 **SEC. 2. GUIDANCE TO STATES ON CONNECTING MEDICAID**
2 **BENEFICIARIES WITH HOUSING-RELATED**
3 **SERVICES AND SUPPORTS AND OTHER HOUS-**
4 **ING RESOURCES.**

5 (a) IN GENERAL.—Not later than 12 months after
6 the date of enactment of this Act, the Secretary of Health
7 and Human Services, in consultation with the Secretary
8 of Housing and Urban Development and the Secretary of
9 Treasury, shall issue guidance to State Medicaid agencies,
10 public housing agencies, Continuums of Care, and housing
11 finance agencies to connect individuals who are receiving
12 medical assistance under a State Medicaid program to
13 Medicaid housing-related services and supports and other
14 housing resources in an integrated manner.

15 (b) REQUIRED INFORMATION.—The guidance issued
16 pursuant to subsection (a) shall include information on—

17 (1) simplifying health care services for housing
18 and homelessness service providers and simplifying
19 housing support services for health care service pro-
20 viders to understand the respective sectors;

21 (2) developing a memorandum of understanding
22 between State Medicaid agencies, public housing
23 agencies, Continuums of Care, and housing finance
24 agencies that—

25 (A) coordinates housing-related services
26 and supports provided under a State Medicaid

1 program with other housing resources by align-
2 ing—

3 (i) eligibility criteria;

4 (ii) eligibility determination processes;

5 and

6 (iii) outcome measures, including
7 housing stability and health outcomes
8 disaggregated by race;

9 (B) encourages providers of housing-re-
10 lated services and supports to seek reimburse-
11 ment for such services and supports through
12 the State Medicaid program, including by—

13 (i) explaining how such providers may
14 receive such reimbursement;

15 (ii) helping such providers understand
16 the eligibility determination process for
17 housing-related services and supports of-
18 fered under the State Medicaid program;

19 and

20 (iii) providing guidance with respect
21 to tracking common outcome measures, in-
22 cluding housing stability and health out-
23 comes disaggregated by race; and

24 (3) existing authorities under which a State
25 Medicaid program may make Federal funds available

1 to providers of housing-related services and supports
2 to build information technology and financial sys-
3 tems and establish adequate infrastructure and
4 staffing levels to seek Medicaid reimbursement.

5 (c) REPORTING.—Not later than 2 years after the
6 date of enactment of this Act, the Secretary of Health and
7 Human Services, in consultation with the Secretary of
8 Housing and Urban Development and the Secretary of
9 Treasury, shall submit a report to Congress that in-
10 cludes—

11 (1) information on the progress of State Med-
12 icaid agencies, public housing agencies, Continuums
13 of Care, and housing finance agencies in aligning eli-
14 gibility criteria, eligibility determination processes,
15 and outcome tracking;

16 (2) information on the adoption by such agen-
17 cies and Continuums of Care of recommendations
18 made in the guidance issued pursuant to subsection
19 (a); and

20 (3) feedback from States on such guidance and
21 challenges faced by States in connecting individuals
22 receiving medical assistance under a State Medicaid
23 program with housing-related services and supports
24 and other housing resources.

25 (d) DEFINITIONS.—In this section:

1 (1) CONTINUUM OF CARE.—The term “Con-
2 tinuum of Care” has the meaning given such term
3 in section 578.3 of title 24, Code of Federal Regula-
4 tions.

5 (2) STATE MEDICAID PROGRAM.—The term
6 “State Medicaid program” means a State plan for
7 medical assistance under title XIX of the Social Se-
8 curity Act (42 U.S.C. 1396 et seq.), and includes
9 any waiver of such a plan.

10 **SEC. 3. NATIONAL RATE STUDY ON THE COST OF HOUSING-**
11 **RELATED SERVICES AND SUPPORTS.**

12 (a) IN GENERAL.—The Secretary of Health and
13 Human Services (referred to in this section as the “Sec-
14 retary”) shall conduct a national rate study on the cost
15 of housing-related services and supports to determine ap-
16 propriate rates for such services and supports that will
17 allow providers of such services and supports to pay living
18 wages, reduce staff turnover, and ensure a maximum case
19 manager-to-client ratio of 1:15 in alignment with the evi-
20 dence-base for strong supportive housing outcomes. Such
21 study shall include an analysis of reimbursement rates for
22 services provided by certified community behavioral health
23 clinics (as such term is used in section 223 of the Pro-
24 tecting Access to Medicare Act of 2014 (42 U.S.C. 1396a
25 note)) and Federally-qualified health centers (as defined

1 in section 1905(l)(2)(B) of the Social Security Act (42
2 U.S.C. 1396d(l)(2)(B))) that promote integrated care,
3 which may include, but is not limited to, housing-related
4 supports and services, and serve people with complex con-
5 ditions.

6 (b) PUBLICATION.—Not later than 2 years after the
7 date of enactment of this Act, the Secretary shall publish
8 the results of the study conducted under this section as
9 guidance to State Medicaid agencies.