



United Behavioral Health

Individual Access to Housing			Policy Identifier/Number: CM-12
Annual Review Completed Date: February 2018			
Policy Category: Government – Pierce Regional Support Network	Applicable Lines of Business: Medicaid	Entity/Plan: Optum Pierce Behavioral Health Organization	State: Pierce County, Washington
Approved by: Bea Dixon, Executive Director			Signature: 

Policy Statement and Purpose

- Optum Pierce Behavioral Health Organization (BHO) staff and providers promote access to and choice in safe and affordable housing for eligible adults and families of eligible children receiving BHO-funded behavioral health services including those who are homeless or at imminent risk of becoming homeless.
- Optum Pierce BHO promotes access to a wide array of safe and affordable housing options including but not limited to shared housing, Single Room Occupancy (SRO), Section 8, supportive housing, subsidized housing as well as supervised residential facilities.
- Optum Pierce BHO ensures that supervised residential facilities are licensed and that individuals residing in these facilities receive behavioral health services consistent with their service plan.

To ensure that individuals receiving services from Optum Pierce BHO are provided access to safe and affordable housing and the availability of community support services with an emphasis on supporting individuals in their own home or where they live in the community, including a full range of residential services.

Policy Audience and Applicability

This policy is applicable to the Optum Pierce BHO and benefits administered through the Washington State Department of Social and Health Services (DSHS) current Prepaid Inpatient Health Plan (PIHP).

Policy Definitions

- **Residential services** means a complete range of residences and supports authorized by resource/care management services and which may involve a facility, a distinct part thereof, or services which support community living for persons who are acutely behaviorally ill, adults who are chronically behaviorally ill, children who are severely emotionally disturbed, or adults

Optum is responsible for adhering to all applicable state and/or federal laws governing activities within the scope of this policy, including the Mental Health Parity and Addiction Equity Act (MHPAEA) and the Health Insurance Portability and Accountability Act (HIPAA) privacy requirements, as well as the applicable requirements, standards and regulations as set forth by the Employee Retirement Income Security Act (ERISA), the Center for Medicare and Medicaid Services (CMS), the Department of Labor (DoL), and any applicable accrediting organizations.

who are seriously disturbed and determined by the Optum Pierce BHO to be at risk of becoming acutely or chronically behaviorally ill. The services are to include at least evaluation and treatment services as defined in *Chapter 71.05 RCW*, acute crisis respite care, long-term adaptive and rehabilitative care, and supervised and supported living services, and are also to include any residential services developed to serve persons who are behaviorally ill in nursing homes, boarding homes, and adult family homes, and may include outpatient services provided as an element in a package of services in a supported housing model. Residential services for children in out-of-home placements related to their behavioral disorder are not to include the costs of food and shelter, except for children's long-term residential facilities existing prior to January 1, 1991. Supportive services shall promote community stability, recovery goals and individual choice.

Policy Provisions

1. In accordance with *WAC 866-865*, Optum Pierce BHO ensures active promotion of individual access to, and choice in, safe and affordable independent housing within available resources that is appropriate to the individual's age, culture, and residential needs.
2. In accordance with *WAC 866-865* the provision of services to families of eligible children and to eligible individuals who are homeless or at imminent risk of becoming homeless as defined in *Public Law 100-77*, is through outreach, engagement and coordination or linkage of services with shelter and housing.
3. In accordance with *WAC 866-865*, Optum Pierce BHO makes available community support services, with an emphasis on supporting individuals in their own home or where they live in the community, with residences and residential supports prescribed in the individual's service plan. This includes a full range of residential services as required in *RCW 71.24.025(7) and (14)*.
4. Per *WAC 388-865*, Optum Pierce BHO actively searches for comprehensive resources to meet the housing needs of individuals.
5. Optum Pierce BHO actively engages and collaborates with local and state housing programs, organizations, and advocates the development of comprehensive housing resources to meet housing needs of individuals.
6. When appropriate, BHO contracted behavioral health care providers and BHO staff:
 - 6.1. Participate in planning and developing a complete range of residential treatment and housing support services. Contracted behavioral health care providers are encouraged to establish ongoing, supportive relationships with landlords in their communities in order to expand the amount of housing available to individuals and to prevent individuals from losing their housing. Optum Pierce BHO and its contracted behavioral health care providers maintain a housing resource list.
 - 6.2. Assess and, as needed, reassess individuals' housing and housing support needs and then prescribe needed services and supports in each individual's treatment plan and consistent with his/her recovery goals. Contracted behavioral health care providers assist individuals in finding and obtaining appropriate housing and any housing supports they need in order to succeed at living in such housing.
 - 6.3. Monitor that housing and housing support services emphasize the least restrictive permanent housing appropriate to the age, cultural, linguistic, and residential/housing needs of each individual. Residential treatment programs are considered housing through which individuals' transition to permanent supportive or independent housing.
 - 6.4. Provide timely residential placement or in-home supports within available resources, when necessary to meet an individual's special needs.
 - 6.5. Maintain separation whenever possible between providers of housing and providers of behavioral health services. While housing support staff and behavioral health

care providers will need to coordinate at times, contracted behavioral health care providers are encouraged to keep treatment functions as separate as possible from housing and housing supports by having different staff provide each service.

- 6.6. Monitor that an individual's housing is not dependent on his/her willingness to participate in behavioral health services, unless such participation is required by the source of the housing subsidy funding.
- 6.7. Monitor that individuals who are homeless are provided behavioral health services and, when appropriate, that contractors engage individuals who are homeless through outreach efforts.
- 6.8. Monitor that housing support services are evidenced-based. Contractors are urged to provide housing and residential services that are consistent with *Substance Abuse and Mental Health Systems Administration's Best Practices*.
- 6.9. Ensure that referrals for housing for eligible individuals are appropriate to their age, culture, behavioral health, physical needs and residential needs.
- 6.10. Ensure the availability of community support services, with an emphasis on supporting individuals in their own homes or where they live in the community, including transitional and permanent housing, with residences and residential supports prescribed in the individual's treatment plan.
- 6.11. Assess the housing needs, preferences and strengths of individuals and provide the appropriate referrals, coordination, and direct services, including intensive services if needed. Housing goals, objectives, and interventions are included in the individual's service plan as needed or requested by the individual and/or family.
- 6.12. Provide outreach, support, life skills, psycho-education, engagement and other direct services related to housing needs in the community as needed and requested by the individual and/or family.
- 6.13. Refer eligible individuals in need of residential placement to BHO-contracted adult boarding homes, adult family homes, adult congregate care facilities, or BHO-contracted adult residential rehabilitation facilities, and ensure that all individuals are free to choose the housing they want from the range of housing available to them.
7. Optum Pierce BHO evaluates provider performance in assessing and addressing the housing needs of individuals through its Clinical and Administrative Record Review monitoring activities (See the Optum Pierce BHO policy titled, QA-08: *Clinical and Administrative Review Including Annual Review of BHAs*).
8. Optum Pierce BHO requires that behavioral health care providers who house eligible individuals in residential facilities:
 - 8.1. Ensure that individuals receive behavioral health services consistent with their individual service plans, and are advised of their rights, including long-term care rights (*RCW 70.129*).
 - 8.2. Ensure that individuals receive care in a manner and in a recovery environment that promotes maintenance or enhancement of each resident's quality of life. A resident is to have a safe, clean, comfortable, and homelike environment, allowing the resident to use his or her personal belongings to the extent possible.
9. Optum Pierce BHO, as part of the Biennial Plan, addresses efforts to meet the comprehensive housing needs of individuals and their families, both through contracted programs and services and those available through community resources and other organizations.

Related Policies, Procedures & Materials

- Pierce Behavioral Health Organization policy: AD-07 - *Biennial Plan*

- Pierce Behavioral Health Organization policy: CM-01 - *Development of Service Plans*
- Pierce Behavioral Health Organization policy: CM-02 - *Crisis Plans*
- Pierce Behavioral Health Organization policy: CM-05 - *UM/Resource Management Plan*
- Pierce Behavioral Health Organization policy: CM-06 - *Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Services*
- Pierce Behavioral Health Organization policy: CM-07 - *Accessibility, Engagement and Utilization of Services for Individuals with High Risk*
- Pierce Behavioral Health Organization policy: CM-09 - *Engagement of Community Resources*
- Pierce Behavioral Health Organization policy: CM-13 - *Coordination with Rehabilitation and Employment Services*
- Pierce Behavioral Health Organization policy: QA-08 - *Clinical and Administrative Review including Annual Review of CMHCs*

Attachments

N/A

Approval History

- Policy created and effective: 07/2009
- Policy and Procedure Committee review and approval: 09/28/2009
- Policy and Procedure Committee review and approval: 08/23/2010
- Policy and Procedure Committee review and approval: 09/26/2011
- Policy and Procedure Committee review and approval: 08/27/2012
- Policy and Procedure Committee review and approval: 12/02/2013
- Policy and Procedure Committee review and approval: 09/22/2014
- Policy and Procedure Committee review and approval: 09/28/2015
- Optum Pierce BHO reviewed and accepted: February 2018