Intervening at the Corner of Homelessness and Health: How to Rapidly Increase Capacity for Medical Respite Statewide

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Welcome and Introductions



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Home Illinois Plan Overview

Home Illinois

Illinois' Plan to Prevent and End Homelessness (OPEH)

Learn more:

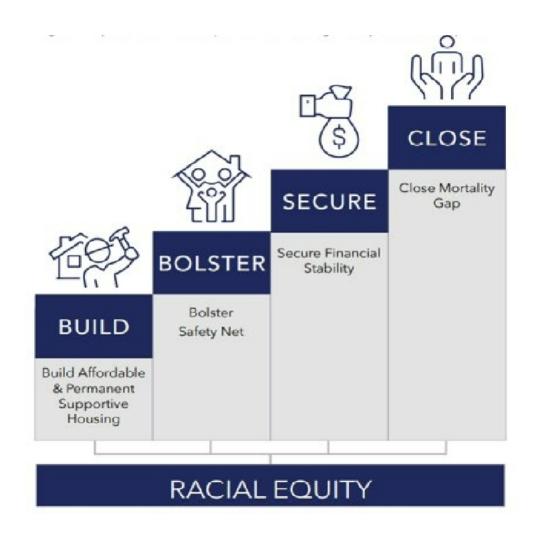
endhomelessness.illinois.gov

Homeless.office@illinois.gov

- 2021: Illinois Governor JB Pritzker signed Executive Order to Prevent & End Homelessness, creating Interagency Task Force on Homelessness, Community Advisory Council on Homelessness and OPEH
- 2022: First state plan to prevent and end homelessness, Home Illinois, released
- July 2023 HB2831: Home Illinois Bill codifies the executive order that created the Interagency Task Force on Homelessness and Illinois' commitment to "functional zero" homelessness.
- Governor Pritzker's FY24 budget affirms that commitment with almost \$360M for the initiative of which \$35M was allocated for supportive housing services, homeless youth services, street outreach, medical respite, re-entry services, access to counsel, and other shelter diversion supports.
- Governor Pritzker's Proposed FY25 budget includes a \$50M increase to Home Illinois, focused on addressing Black Homelessness



Home Illinois Framework



Progress from Home Illinois FY23-24

- Launched Medical Respite Capacity Building Initiative, will increase access to medical respite from two counties to six counties
- July 2024: University of Illinois Chicago, School of Public Health & Illinois Department of Public Health releasing Illinois' first homeless health and mortality report
- Illinois Department of Human Services investing opioid settlement funding in street outreach services to unsheltered persons with active substance use
- Illinois Department of Healthcare and Family Services submitted a request to extend and significantly amend Health Related Social Needs benefits in its 1115 Behavioral Health Transformation Waiver
- Released statewide report: Black Homelessness in Illinois: Structural Drivers of Inequity
- Led Rural Homelessness Initiative for first statewide report on rural homelessness and a 100day rural homelessness challenge

Illinois Medical Respite Capacity Building Initiative

Illinois Public Health Institute (IPHI)

IPHI mobilizes stakeholders, catalyzes partnerships and leads action to improve public health systems to maximize health, health equity and quality of life for people and communities.

- Our Vision: All people and communities, especially those that experience health, social and racial inequities, are able to achieve their optimal health, supported by an effective multi-sectoral public health system.
- Since 2017, IPHI has been working at the intersection of housing, homelessness and health, and has facilitated systems collaborations and systems development initiatives among hospitals and health care organizations, providers serving people experiencing homelessness, housing groups, and health departments in Chicago and Cook County.
- IPHI has partnered with IDHS to lead the Illinois Medical Respite Capacity Building Initiative (IMRCBI) since December 2022, awarding 11 Illinois communities in FY23 and 17 communities in FY24 with funding, technical assistance and learning collaborative meetings to build capacity for new or expanded medical respite services.

Medical Respite Care: Definition

Post-acute care for people experiencing homelessness who are too ill or frail to recover from an illness or injury on the street or in shelter, but who do not require hospital level care.

Short-term residential care that allows people an opportunity to rest, recover, and heal in a safe environment while also accessing clinical care and support services.

The terms "medical respite care" and "recuperative care" are used interchangeably to describe the same service.

Diversity of Programs
Bed number
Facility type
Length of stay
Staffing and
services
Referral sources
Admission criteria

Illinois Medical Respite Capacity Building Initiative

Prior to January 2023, there were only four active medical respite programs in Illinois – all of which were in or near Cook County. These included:

- The Boulevard
- RISE Center
- Sojourner House
- PADs Lake County

- The first phase of this initiative ran from December 2022 June 2023.
- With funding from IDHS, IPHI awarded 11 communities throughout the state to build capacity for medical respite from March – June 2023 across two tracks:
 - Track 1: Medical Respite Development support for planning of new medical respite programs.
 - Track 2: Medical Respite Expansion support for expansion or service innovation at an existing program.
- Awardees received \$25,000, 1:1 technical assistance from NIMRC, and three learning collaborative meetings.
- During this period, IPHI worked with HFS to engage stakeholders for feedback on the medical respite benefit proposed in the 1115 Healthcare Transformation Waiver.

Illinois Medical Respite Capacity Building Initiative

By the end of June 2024, we expect twelve medical respite providers to be active across the state – triple the number of medical respite providers that were active in December 2022.

Amongst these twelve providers, there will be more than 150 beds available across 6 counties.

- The second phase of this initiative is currently running from July 2023 June 2024.
- With continued funding from IDHS, IPHI has awarded 17 communities to build capacity for medical respite care from October 2023 – June 2024 across three tracks:
 - Track 1: Medical Respite Planning
 - Track 2: Medical Respite Pilot Implementation
 - Track 3: Medical Respite Expansion
- Awardees are receiving up to \$100,000, 1:1 technical assistance from NIMRC, and learning collaborative meetings.

Awarded Organizations

Track 1: Medical Respite Planning Awards

Blessing Health System (Quincy)

Christian Community Health Center (Chicago)

Home Sweet Home Ministries (Bloomington)

Journeys: The Road Home (Palatine)

Madison County Health Department (Wood River)

Phoenix Community Development Services (Peoria)

Sarah's Circle (Chicago)

Swedish Hospital (Chicago)

Track 2: Medical Respite Pilot Implementation Awards

Lee

Ford

Gallati

McLean

Bureau

Tazewell

Logan

Henry

Brown Cass

Mercer

Pike

alhoun

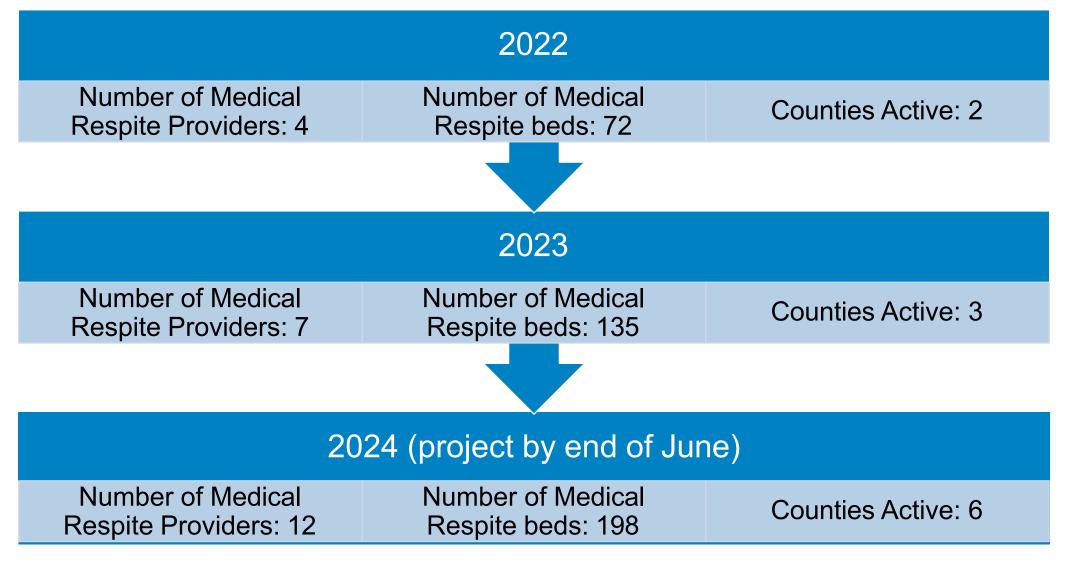
Respond Now (Chicago Heights) Franciscan Outreach (Chicago – IMD) Heartland HOUSED (Springfield) **Project Now (Rock Island)** UW Health (Rockford) Track 3: Medical Respite Expansion Awards **Connections for the Homeless (Evanston)** Housing Forward (Maywood) Joliet Township & Will Grundy Medical Clinic (Joliet) MacNeal Hospital – Sojourner House (Oak Park) PADS Lake County (Waukegan) **BEDs Plus (LaGrange)**

The Boulevard (Chicago)

Illinois Medical Respite Capacity Building Initiative Projects

Medical Respite Capacity Building Awards	Statewide Medical Respite Collaborative (SMRC)	Cook County Medical Respite Network (CCMRN)
1115 Healthcare Transformation Waiver Stakeholder Engagement	Gap Analysis	Communications Campaign

State of Illinois, by year



Program Highlight: The Boulevard

The Boulevard

Illinois Medical Respite Capacity Building Initiative (IMRCBI)



The Boulevard of Chicago provides high quality, cost-effective medical respite care, holistic support and housing services to help ill and injured homeless adults break the cycle of homelessness, restore their health and rebuild their lives.

History and Background

- Formerly known as Interfaith House, The Boulevard of Chicago was established in 1994 by a
 determined group of community leaders to address the burgeoning crisis of homelessness, especially
 its impact on people in desperate need of acute medical care resulting from an illness and/or injury.
- Many of these men and women had been discharged from local hospitals or clinics with nowhere to go to recuperate, which often resulted in their making repeated Emergency Room visits as they battled to regain and stabilize their health.
- The Boulevard filled the need for a safe place to recuperate while also offering a continuum of services and case management to help clients break the cycle of homelessness and rebuild their lives as well as their health.

Medical Respite Program

The Boulevard is one of the original medical respite care facilities in Illinois, dedicated to serving individuals experiencing homelessness through a continuum of services. We pioneered the model of adapting medical respite for homelessness services, becoming the third such facility in the U.S. in 1994 and currently has an annual operating budget of \$2.1 million. The individuals who come to The Boulevard have the continued challenge of stabilizing their health, securing income, and permanent housing. Our clients are medically vulnerable, and our focus is on stabilizing their immediate medical and behavioral health situation. This is essential to our clients without the added worry of securing their next meal or finding a place to sleep.



Medical Respite Program

- The Boulevard is an independent/single facility located in East Garfield Park on Chicago's West Side. Our congregate living facility has 12 dormitory-style rooms with a total of 64 beds.
- There are shared bathrooms in each room including 2 which are ADA-accessible on a given floor. The facility includes program offices and an on-site medical clinic (managed by our partner, PCC Community Wellness), a kitchen where the dietary staff prepares 3 nutritious meals daily, and an onsite laundry room.



PCC Community Wellness

- On-site clinic staffed and operated by PCC Community Wellness Center
- Each resident works with physicians and nursing staff and has their own personalized medical recovery plan

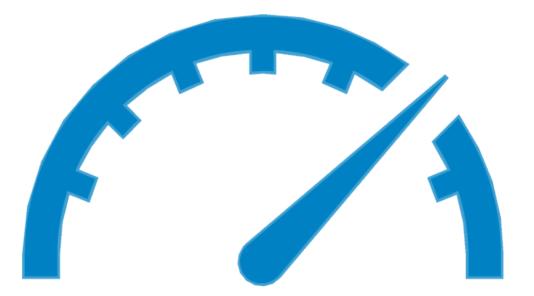




Illinois Medical Respite Capacity Building Initiative (IMRCBI)

Phase 1 – Assessment

Needs Assessment
 Benchmarking
 Growth Strategy



Needs Assessment

- To assess the level of unmet need for medical respite services among people experiencing homelessness in Chicago, as part of Phase 1 of the IMRCBI, The Boulevard of Chicago partnered with a consulting firm called Open Door Advisors (ODA) to conduct an assessment.
 Methodology
- To help us identify strategic considerations for Medical Respite Care expansion and to analyze data and insights, information was gathered through the following means:
 - Holding a Town Hall Meeting with The Boulevard's residents;
 - Conducting a survey of homeless services providers; and,
 - Conducting a survey of health care partners.

Benchmarking

 Conduct an assessment of The Boulevard's Fidelity to the National Institute for Medical Respite Care (NIMRC) Standards of Care.

Methodology

- Created a matrix that combined the two highest levels of care Integrated Clinical Care Model and Comprehensive Clinical Care Model
- Matrix assessed current compliance/fidelity with the models, and included notes and recommendations for action
- Convened a staff roundtable to compete the matrix

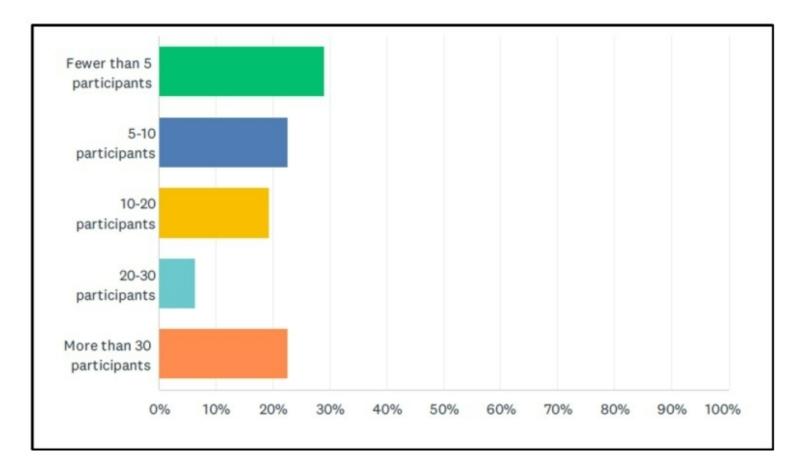
Findings – Town Hall Meeting

- Open Door Advisors facilitated a town hall meeting with 24 residents of its Medical Respite Care Program located at the Franklin Boulevard facility on June 1, 2023 to engage people with lived expertise and consider their insights and racial equity dimensions that could inform The Boulevard's planning.
- At the town hall meeting, residents agreed unanimously that there is a need for more medical respite care for people experiencing homelessness in Chicago. The diverse group of residents offered specific comments and recommendations.

- The Boulevard invited more than 120 homeless services providers to complete a brief medical respite care survey and received responses from 31 providers (26%).
- 71% of the respondents indicated that they are extremely familiar or very familiar with medical respite care
- 61% of the respondents reported that they referred individuals to the Boulevard previously

- Providers reported significant need for medical respite care among individuals experiencing homelessness in 2022
- (23%) reported more than 30 individuals in need
- Ø (7%) reported 20-30 individuals in need
- (19%) reported 10-20 individuals in need
- Ø (23%) reported 5-10 individuals in need
- (28%) reported fewer than 5 individuals in need

Number of Participants Who Would Have Benefited from Medical Respite Care, or Who Received Such Care, in 2022



- Providers reported that their participants are most in need of the following specific medical respite care services, in order of priority:
 - 1. Chronic condition management, including medical management and treatment and self-management education
 - 2. Connection and transition to long-term community behavioral health
 - 3. Monitoring and support to complete intensive outpatient medical treatment, such as dialysis, chemotherapy, and IV-based treatment (e.g., antibiotics)
 - 4. Screening & assessment for mental health and substance use conditions
 - 5. Education and skill development to self-manage and administer medications
 - 6. Inpatient clinical services to promote recovery

Findings – Survey of Health Care Partners

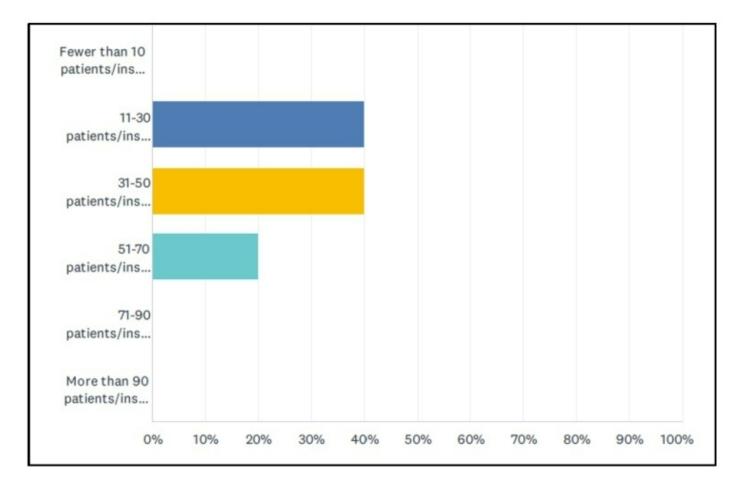
 The Boulevard invited more than 14 health care partners – including hospital emergency departments, community health centers, and managed care organizations – to complete a brief medical respite care survey.

Findings – Survey of Health Care Partners

- 60% of the respondents reported that they referred individuals to the Boulevard previously
- Health care partners reported significant need for medical respite care among individuals experiencing homelessness in 2022:
 - (20%) reported more than 50 individuals in need
 - (40%) reported 31-50 individuals in need
 - (40%) reported 11-30 individuals in need

Findings – Survey of Health Care Partners

Number of Patients Who Would Have Benefited from Medical Respite Care, or Who Received Such Care, in 2022



In total, homeless service providers and health care partners reported that approximately 479 to 570 individuals experiencing homelessness in their care needed medical respite services in 2022 and are primarily located on the south side of Chicago.

Assessment of The Boulevard's fidelity to the National Institute for Medical Respite Care (NIMRC) Standards of Care

- Open Door Advisors noted the following areas of opportunity for capacity building and service quality enhancement at the Boulevard, related to the three domains of care noted below:
- Community health worker and/or peer support The Boulevard is planning a peer support group to supplement current AA and NA support groups.
- Onsite clinical services The Boulevard does not provide palliative or hospice care because it does not currently serve end-of-life patients.
- 24-hour program staffing The Boulevard does not currently maintain 24hour staff trained to address and monitor patients with high level medical needs. It's contractor, PCC Wellness, a federally qualified health center, provides fully qualified daytime staffing and operates an overnight on-call phone line that The Boulevard's staff can access.

- Bed Reactivation The Boulevard should reactivate the twenty (20) medical respite care beds discontinued during the COVID-19 pandemic to allow for greater social distancing effective November 1, 2023
- Build the Capacity to Bill Medicaid for Services The Boulevard should engage an advisor to help the agency develop the capacity to bill Medicaid for eligible services, including those to be included in the State of Illinois' 1115 Waiver that will cover additional services for unhoused persons, including medical respite care as well as tenancy and recovery supports.
- Explore Medicare Billing The Boulevard should also consider Medicare as a source of sustainable funding to support medical care delivery, mental health and substance use treatment services, transportation services and housing. Across the country, innovative efforts are underway to meet the special needs of unhoused people through the Centers for Medicare and Medicaid Services.
- Diversifying Funding Consider increasing current and developing new partnerships with Managed Care Organizations/Hospitals and decreasing reliance on public funding for the Medical Respite Program.

Illinois Medical Respite Capacity Building Initiative (IMRCBI) Phase 2 - Expansion



Illinois Medical Respite Capacity Building Initiative (IMRCBI) Phase 2 - Expansion

Phase 2 – Expansion

Bed Reactivation
 Medicaid Sustainability Initiative
 Joint-Venture Exploration



Bed Reactivation

Project Goals/Expected Outcomes:

- On November 1, 2023, The Boulevard reactivated 20 medical respite care beds that were discontinued during the COVID-19 pandemic to allow for greater social distancing.
- In 2020, The Boulevard reduced the number of beds available at its Franklin Boulevard facility from 64 to 35 beds in accordance with public health guidance during the COVID-19 pandemic. The organization reduced the number of beds and utilized offsite hotel rooms to reduce its census and decompress the facility to allow for greater social distancing. The Boulevard is now back to its prepandemic medical respire care bed capacity level of 64 beds.

Medicaid Sustainability Initiative

Project Goals/Expected Outcomes:

- Apply for and achieve Medicaid certification status
- Develop internal infrastructure
 - Acquire and implement necessary information technology systems
 - Develop a universal roster
 - Provide necessary staff training and development
- Secure managed care contracts
- Implementation of strategic growth opportunities related to Illinois' 1115 waiver, specifically in medical respite.

Joint-Venture Exploration

Project Goals/Expected Outcomes:

To engage in exploratory conversations for a potential joint-venture with a Federally Qualified Health Center (FQHC) and local housing development corporation to expand medical respite beds on the south side of Chicago through a mixed-use development project.



The Road to Health and Home

***blvd.org

Program Highlight: The NICER Program

NICER Program Northern Illinois Community Emergency Respite

Angie Walker Angie.walker@rockfordil.gov Homeless Program Manager City of Rockford Health & Human Services







Northern Illinois Homeless Coalition

Getting started...

Initially the City of Rockford HHS was funded for medical respite planning by IMRCBI

Why did we apply?

- Increase in calls from hospitals
- Increase in people being turned away from shelter due to medical issues
- Lack of other housing options for those with medical needs
- Other groups (Mental Health & Homelessness Committee) seeing increased need in our homeless population

Partnerships:

- UW Healthcare system
- Rockford Fire Department, Mobile Integrated Healthcare Program
- Crusader Community Health (local FQHC), Healthcare For the Homeless
- In Home Medical Group
- Molina Healthcare
- City of Rockford HHS
- Rockford Rescue Mission



Initial Planning...

We began with a bi-weekly meeting of the mentioned partners. Worked with multiple hospital and service providers to assess the needs of our community.

Then we created a beautiful implementation plan.

- Program would be a in stand-alone building
- Program would have a multi-tier approach, covering MANY health concerns
- Program would have a minimum of 10 beds
- Program would include a large volunteer program
- And so on.....

Our community then received an implementation grant (UW was the recipient of these funds). But our plan quickly stalled and we learned that our plan was a dream!!



Planning again...

- Stalled progress forced the City's HHS staff to reconvene our initial stakeholders group, which had stopped meeting regularly.
- Group re-focused on the initial goals of the program, this time being much more conservative on the program itself. New plan focused on the following:
 - A much smaller program, starting with 4 beds, 2 for men and 2 for women.
 - Ø Beds would be located inside local shelter. We have talked to shelter provider and they the space, we are just awaiting final approval which we should have soon.
 Ø Committee has determined more specifics around the types of patients they will take—getting
 - rid of the multi-tier idea that they had previously established.
 - Started meeting weekly to go step by step through the eligibility, intake/referral process, and policies/procedures.
 - Ø Each stakeholder has identified what their responsibility to the program is and working on who would "own" each piece.

Where are we now?

- As mentioned, much of our initial planning is done or currently in the works.
- Once we have some initial outcomes and data, we hope to be able to grow the program.
- Finalizing all details, plan to move in our first resident by 2024.



1115 Healthcare Transformation Waiver Overview

Waivers under Section 1115 of the Social Security Act provide **expenditure authority** for state Medicaid programs to demonstrate impact of proposed **innovations** that would otherwise not be allowed under traditional Medicaid rules.

1115 Fundamentals

Approval

Allows the addition of new services or introduction of flexibilities that would ordinarily not be allowable under Medicaid.

Allows services and flexibilities to be targeted to priority populations, geographic areas, or designated pilot initiatives to demonstrate impact.

Funding

- Authorizes federal **MATCHING** to offset state expenditures on approved demonstration services and flexibilities.
- Matching available only for state expenditures that are not otherwise supported by another federal funding source.
- Match rate is 51.09%; for every \$100 of state-only funding spent on HRSN, the federal government will return \$51.09 to the State.

IL Transformation Waiver Background

- Illinois received approval for its 1115 Behavioral Health Transformation Waiver in 2018 under previous administration; expires June 30, 2023
- HFS is submitting request to extend and significantly amend to cover Health Related Social Needs benefits
 - Seeking to advance equity through policy, managed care, quality management
- Proposing to rename the demonstration "Illinois Healthcare Transformation Section 1115 Demonstration "

Addressing Health Related Social Needs

- Unmet Health Related Social Needs (HRSNs) are connected to worse health outcomes and higher health care spending
- Recent policy guidance from the Centers for Medicare & Medicaid Services (CMS) acknowledges this link and provides opportunity to request federal match for expenditures on health-related social needs (HRSN)

1115 Transformation Waiver - Proposal

Illinois' 1115 request seeks authorization for two closely related efforts:

- Adding new HRSN services targeting social determinants of health, and
- Sustaining certain existing pilots and adding new demonstration pilots to test the value of new services and flexibilities in targeted ways

1115 – Proposed HRSN Benefits



Medical Respite Proposed Benefit

Recuperative care may be offered for up to six months and includes:

- Specialized, onsite case management
- Connections to other health related services
- Transition support
- Limited support for activities of daily living and/or instrumental activities of daily living
- Monitoring of the individual's ongoing medical or behavioral health condition(s) (e.g., monitoring of vital signs, assessments, wound care, medication monitoring)

Medical Respite Eligibility

Medicaid Population(s)

- Individuals enrolled in Medicaid managed care who meet the needs criteria
- Needs Criteria
 - Experiencing homelessness or at risk for homelessness, AND meet one of the following:
 - Are at risk for ED/hospitalization or institutional care; or
 - Currently in the ED or hospitalized; or
 - o In institutional care

For More Information and Copies of Materials:

The draft waiver extension and related materials are posted on the 1115 Demonstration Waiver Home page located on the HFS website: <u>*******hfs.illinois.gov/medicalproviders/cc/1115demonstrationwaiverhome.html</u>

Panel Discussion

Q & A



Additional Resources:

Illinois Medical Respite Capacity Building Initiative Website 2022 – 2024 Home Illinois Plan 1115 Healthcare Transformation Waiver Illinois Public Health Institute Website Illinois Office to Prevent and End Homelessness Website Illinois Department of Human Services Website The Boulevard of Chicago Website UW Health Website City of Rockford Health and Human Services Department Website



Thank You!

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