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TO: Medicaid Division  
FROM: Michelle Brophy  
SUBJECT: Rhode Island 1115 Waiver Extension Request  
DATE: 1/18/13

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Thank you for the opportunity to comment of the Rhode Island 1115 Waiver Extension Request. At CSH, it is our mission to advance housing solutions that deliver three powerful outcomes: 1) improved lives for the most vulnerable people 2) maximized public resources and 3) strong, healthy communities across the country. CSH transforms how communities use housing solutions to improve the lives of the most vulnerable people. We offer capital, expertise, information and innovation that allow our partners to use supportive housing to achieve stability, strength and success for the people in most need. CSH blends over 20 years of experience and dedication with a practical and entrepreneurial spirit, making us the source for housing solutions.

Once again, I want to thank you for including the Community Based Services/Supportive Housing component of the 1115 Waiver Extension Request. Since piloting the Housing First Rhode Island program CSH and our community partners have proven that the cost of housing individuals experiencing chronic homelessness –which includes a housing subsidy and a community based service team that focuses on housing retention- cost approximately \$8,000 less per year per person than allowing them to cycle through expensive emergency systems.

Many of the individuals experiencing chronic homelessness are frequent users of systems and in 2012, the Homeless Management Information System (HMIS) matched data with the Medicaid Division and found 67 individuals experiencing chronic homelessness spent approximately \$9 million over a 2 year period. These individuals have typically fallen through the cracks of our system and are experiencing chronic health and/or behavioral health issues and without the stability of housing are unable to address these issues.

I would request that you consider the following as the Community Based Services/Supportive Housing component, as well as other services for vulnerable populations, are implemented:

1. There are many community based organizations who have established long term, trusting relationships with individuals who will be served through the waiver; in order to effect the

- successful transition into the community and achieve long term success in the area of housing retention, it will be important to encourage partnerships among the community based providers and the companies who are eligible to bill for these services.
2. Due to the spectrum and level of services needed at various points, a bundled rate for supportive housing services may be more appropriate than traditional billing systems.
  3. The Community Based Services/Supportive Housing component is meant to decrease use of emergency systems by using housing as an intervention. It will be important to allow individuals access to this services by lowering eligibility to the Preventative Level of Care. I would suggest piloting the component with the frequent users identified in the HMIS/Medicaid data match and adjust the program to meet the needs of our most vulnerable residents. This component could be expanded eventually to address the needs of a variety of Medicaid recipients, from youth aging out of foster care to elders who need additional services to age in place, allowing choice and individuals to live in the least restrictive environment.

Thank you for your work with the 1115 Waiver Extension Request and I'm happy to answer your questions or concerns.