

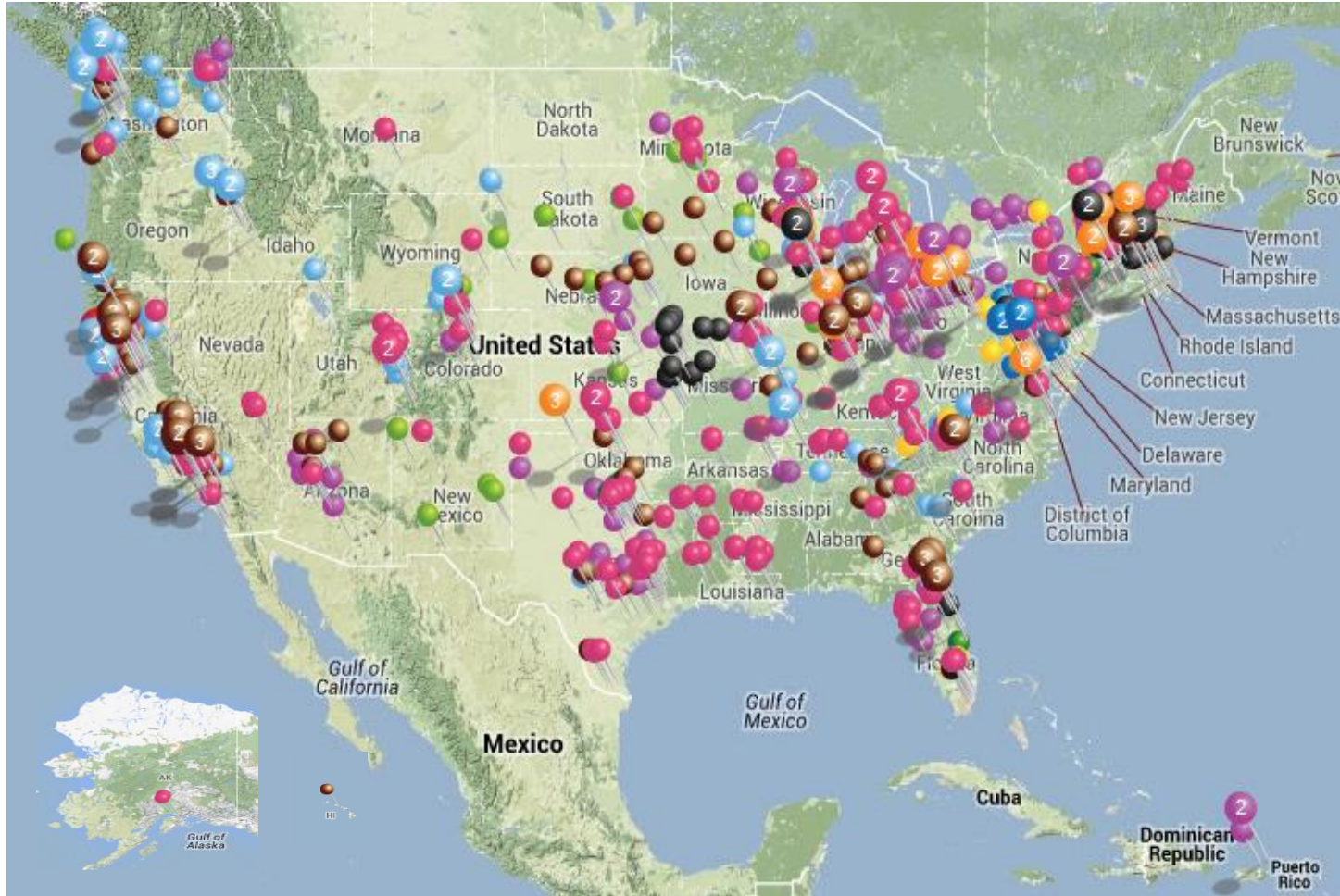


The SAHF Experience: Building Partnerships between Affordable Housing Developers and Medicaid Managed Care Organizations (MCOs)

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THE SAHF COLLABORATIVE

1600 Properties / 116,000 Rental Units / ~190,000 Residents



SAHF Members

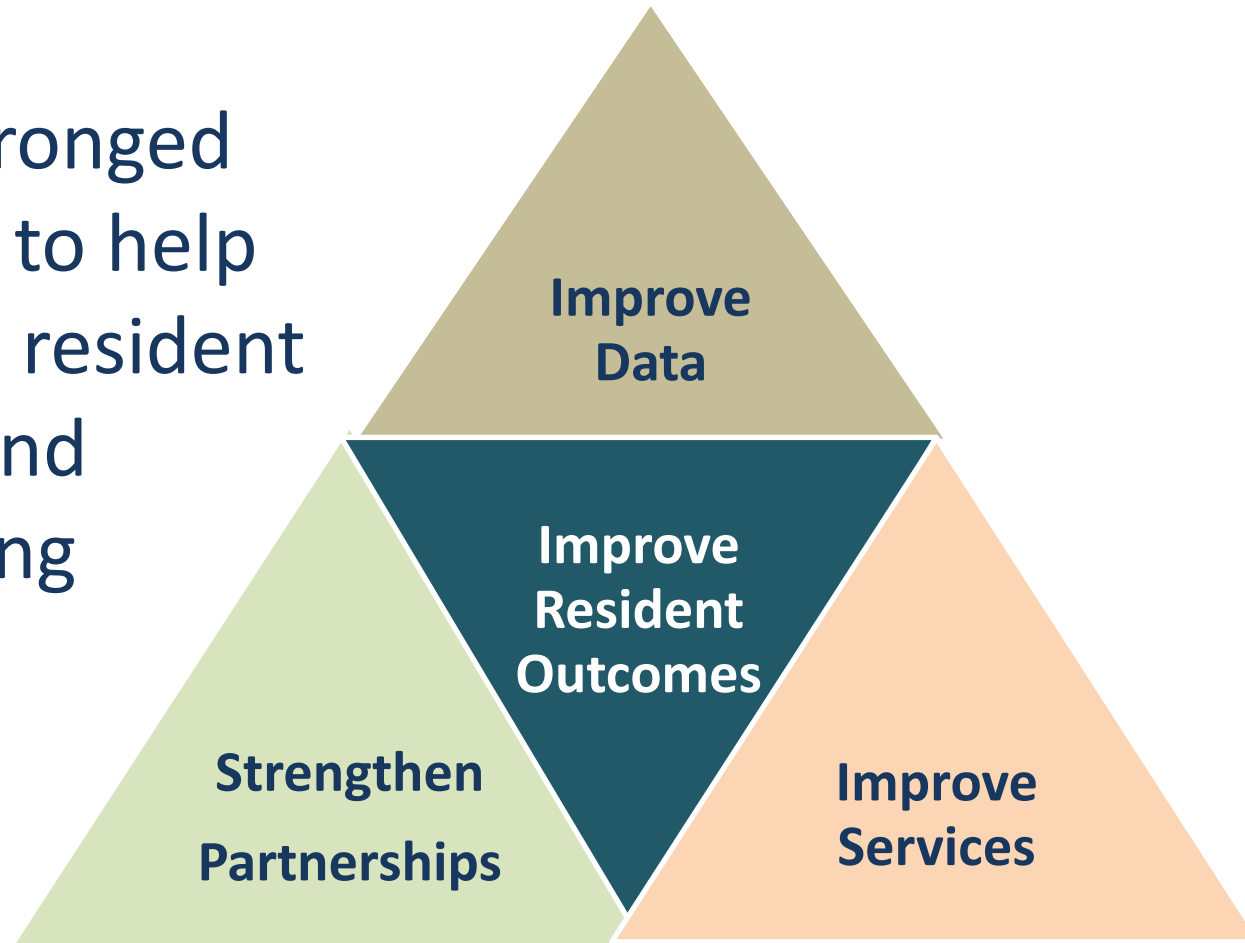
- BRIDGE Housing
- The Community Builders
- The Evangelical Lutheran Good Samaritan Society
- Homes for America
- Mercy Housing
- National Church Residences
- The NHP Foundation
- National Housing Trust/Enterprise
- Preservation of Affordable Housing
- Retirement Housing Foundation
- Volunteers of America

SAHF'S APPROACH

- SAHF's mission is to support and enhance its members efforts to provide affordable housing and to enable the residents to improve the quality of their lives.
- SAHF is a leader in practice-based policy, working with its members, to develop solutions that are effective on the ground.
- SAHF focuses on pursuing innovation where the scale of the collaborative can have unique and substantial impact.
- SAHF members share and leverage each other's best practices and collaborate on business and mission opportunities.

THE SAHF OUTCOMES INITIATIVE

Three-pronged strategy to help improve resident health and well-being



THE SAHF PARTNERSHIP GOAL

GOAL: Develop partnerships with managed care that provide *sustained* support to improve the ability of SAHF members to provide and expand the reach of service-enriched housing that helps residents improve their health and well-being.

SAHF'S PARTNERSHIP STRATEGY

- Identify strategic opportunities (critical mass/MCO environment)
- Contact relevant managed care plans
- Get to know each other / present value proposition
- Match property addresses with MCO database
- Develop demonstration projects
- Secure funding

KEY CHALLENGES

- Achieving a critical mass of residents
- Pursuing a moving target (i.e., a rapidly evolving health system and changing players)
- Working across systems that are not aligned

ACHIEVING A CRITICAL MASS

Example: Texas Dual Eligible Integrated Care Project

Participating Counties, Number of Clients Covered and Health Plans

<i>County</i>	<i># of Clients</i>	<i>Health Plans</i>
Bexar	26,452	Amerigroup, Molina, Superior
Dallas	27,941	Molina, Superior
El Paso	19,645	Amerigroup, Molina
Harris	47,160	Amerigroup, Molina, United
Hidalgo	27,090	Cigna-HealthSpring, Molina, Superior
Tarrant	16,986	Amerigroup

PURSUING A MOVING TARGET

- No two Medicaid programs are exactly the same
- Getting/keeping appointments
- Changes in leadership
 - Governors
 - Medicaid Directors
 - Manage Care CEOs
- Medicaid contracts are time-limited

WORKING ACROSS SYSTEMS

- Serving same population, but different target populations
 - All residents vs. health plan beneficiaries
 - Focus on high-risk, high cost plan beneficiaries
- Both sectors highly regulated
 - Affordable housing regulations and long waiting lists limit MCO access to affordable housing for their beneficiaries
 - Many of the prevention services provided by resident service coordinators are not reimbursable through Medicaid

KEY LESSONS LEARNED

- Process takes time and bandwidth
- Housers need knowledge of the Medicaid system and players and MCOs need to understand what housers can and cannot do
- It's worth it!

SUCCESSSES

- Achieved a critical mass of residents
- Are in discussions about the structure of the partnership and desired outcomes
- Common themes for demonstrations and 'generic' SAHF partnership tools and approaches are emerging
- MCOs are interested in working out financing solutions