

Authorization Guide for Short-Term Post-Hospitalization Housing

Short-Term Post-Hospitalization Housing provides a place to stay for high medical- or behavioral-health utilization members who do not have a home to continue their recovery immediately after exiting an inpatient setting.

Members must meet the following criteria to qualify for Short-Term Post-Hospitalization Housing:

| Program overview | Required documentation |
|--|---|
| <ul style="list-style-type: none"> • Provides member with ongoing support necessary for recuperation and recovery.¹ • Housing Transition Navigation supports must be offered to member during the period of Short-Term Post-Hospitalization Housing to prepare them for transition from this setting. | <p>Clinical document required to confirm the member has medical/behavioral health needs that experiencing homelessness upon discharge from the hospital, substance use or mental health treatment facility, correctional facility, nursing facility, or recuperative care would likely result in hospitalization, re-hospitalization, or institutional readmission.</p> |
| Eligibility | |
| <ul style="list-style-type: none"> • Members exiting recuperative care. • Members exiting an inpatient hospital stay.² • Members who meet the Housing and Urban Development (HUD) definition of homeless as defined in Section 91.5 of Title 24 of the Code of Federal Regulations. Including those: <ul style="list-style-type: none"> ○ exiting institutions but not including any limits on the number of days in the institution; and ○ receiving enhanced care management; or ○ having one or more serious chronic conditions and/or serious mental illness and/or ○ at risk of institutionalization or ○ requiring residential services because of a substance use disorder. | |
| Authorization | |
| <p>Initial authorization: Up to 30 days, which can be extended for up to six months, based on individual needs.</p> <p>Reauthorization: 30 days at a time. A reassessment is required for each reauthorization request.</p> | |
| Restrictions | State services to be avoided |
| <p>Lifetime maximum is six months.</p> <p>Member is participating in duplicative state, local, or federally funded programs.</p> | <p>Examples include but are not limited to inpatient and outpatient hospital services, emergency department services, emergency transport services, and skilled nursing facility services.</p> |
| Codes | |
| <p>Please use the code listed in the provider’s contract agreement.</p> <p>H0043 U3 or H0044 U3</p> | |

¹ **Examples of support:** gaining (or regaining) the ability to perform activities of daily living, receiving necessary medical/psychiatric/substance use disorder care, case management, and beginning to access other housing supports such as Housing Transition Navigation.

² **Examples of inpatient hospitals:** either acute or psychiatric or chemical dependency and recovery hospital, residential substance use disorder treatment or recovery facility, residential mental health treatment facility, correctional facility, or nursing facility.

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Eligible providers

Providers must have experience and expertise with providing housing-related services and supports in a culturally and linguistically appropriate manner. Provider must use best practices in rendering services.³

Section 91.5 of Title 24 of the Code of Federal Regulations

(1) A member or family who:

- Has an annual income below 30 percent of median family income for the area, as determined by HUD; or
- Does not have sufficient resources or support networks; or
 - Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homelessness prevention assistance; or
 - Is living in the home of another because of economic hardship; or
 - Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance.
- Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or by federal, state or local government programs for low-income individuals; or
- Lives in a single-room occupancy or efficiency apartment unit in which there reside more than two persons or lives in a larger housing unit in which there reside more than 1.5 people per room, as defined by the U.S. Census Bureau; or
- Is exiting a publicly funded institution or system of care (such as a health care facility, a mental health facility, foster care or other youth facility or correction program or institution); or
- Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient’s approved consolidated plan.

(2) A child or youth who does not qualify as “homeless” under this section but qualifies as “homeless” under section 387(3) of the Runaway and Homeless Youth Act (42 U.S.C. 5732a(3)), section 637(11) of the Head Start Act (42 U.S.C. 9832(11)), section 41403(6) of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2(6)), section 330(h)(5)(A) of the Public Health Service Act (42 U.S.C. 254b(h)(5)(A)), section 3(m) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012(m)), or section 17(b)(15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)(15)); or

(3) A child or youth who does not qualify as “homeless” under this section but qualifies as “homeless” under section 725(2) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a(2)), and the parent(s) or guardian(s) of that child or youth if living with her or him.

³ **Examples of Provider:** include but not limited to: Interim housing facilities with additional on-site support • shelter beds with additional on-site support • converted homes with additional on-site support • county directly operated or contracted recuperative care facilities • supportive housing Providers • county agencies • public hospital systems • social service agencies • providers of services for individuals experiencing homelessness.