



**HOUSING and SUPPORTIVE SERVICE NETWORK**

*Providing a Continuum of Care for Vulnerable Populations in Washington County*

**Wednesday, December 4, 2013**

**8:30 to 10:00 a.m.**

**Beaverton City Hall - 1<sup>st</sup> Floor Conference Room**

4755 SW Griffith Drive, Beaverton, Oregon 97075

**AGENDA**

- I. **INTRODUCTIONS: 8:30 a.m.**
- II. **GUEST SPEAKER: 8:35 a.m.**
  - Veronica Smith, Community Warehouse
    - Furniture and Resources
  - Lisa Davila, Luke-Dorf, Inc.
    - Building Housing Partnerships with Landlords (SAMHSA CABHI Project)
- III. **APPROVAL OF MEETING MINUTES: 9:10 a.m.** ..... Action
- IV. **REPORTS AND PROGRAM UPDATES: 9:15 a.m.**
  - Subcommittee Reports
    - Children
    - Youth
    - Homelessness
    - Permanent Housing
    - Income Support/Workforce Development Workgroup
    - DD Dialogue
    - Mental Health and Special Needs Community Consortium Steering Committee
    - Veterans
    - Seniors
  - Strategic Planning and Discharge Workgroup [the CoC Board]
  - Homeless Plan Advisory Committee (HPAC)
  - Homeless Management Information System (HMIS)
- V. **GENERAL BUSINESS: 9:25 a.m.**
  - FY2013 Annual Homeless Assessment Report (AHAR) by Melanie Fletcher –  
Presentation of data and approval to submit to HUD ..... Action
  - Adopt CoC Program Administration and Monitoring Policy ..... Action
  - FY2013 CoC Program Homeless Assistance Grant Application – Update on  
Registration and NOFA Process
- VI. **ANNOUNCEMENTS: 9:50 a.m.**
- VII. **ADJOURNMENT: 10:00 a.m.**

Next Meeting: Wednesday, January 8, 2014 at 8:30 a.m. \*\*Date Change  
Guest Speaker(s): Pat Rogers - Point In Time Homeless Count  
Kim Marshall – 8<sup>th</sup> Annual Project Homeless Connect on January 24, 2014

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*Equal Housing Opportunity*

**HOUSING AND SUPPORTIVE SERVICES NETWORK**  
**Maintaining a Continuum of Care in Washington County**  
Beaverton City Hall  
November 6, 2013 at 8:30 a.m.

**Goal: Housing and supportive service agencies working to bring a broad spectrum of organizations together as partners in the community to secure funding and other resources needed in providing a continuum of care for individuals and families who are homeless or with special needs.**

**ATTENDEES:**

Adams, Jessi—Community Action	Layton, Amber—HomePlate
Bax, Catherine – St. Andrew MACG	Loverin, Robert—Sequoia Mental Health Services, Inc.
Brillman, Linn—CPAH	Moseson, Berta A. – St Andrew MACG
Brown, Allen – HUD/VASH	McVey, Jaycanna—Boys and Girls Aid
Browning, Rose—Good Neighbor Center	Nelson, Andrea—City of Beaverton, CDBG Coordination
Burnham, Jeff—Luke-Dorf, Inc.	Nelson, Barbara—Community Volunteers
Burton, Valerie—Luke-Dorf, Inc.	Orr, Patrick—HomePlate
Calfee, Bridget —HomePlate	Peltz, Leslie —CODA Inc.
Carpentier, Kristen—Family Promise	Perkowski, Kaja—Open Door Counseling Ctr.
Chavez-Hernandez, Saul—Community Action	Roberts, David—Luke-Dorf, Inc.
Coke, Claudia—Impact NW	Rogers, Pat—Community Action
Davila, Lisa—Luke-Dorf, Inc.	Schwab, Jack—Good Neighbor Center
Demry, James—Homeless To Work/Bridges to Change	Sechrist, Lauren—Wash. Co. Community Development
Evans, Annette—Wash. Co. Housing Services	Seward, Michelle – LifeWorks NW
Finnegan, Molly—US Veterans Affairs	Skyrha, Vicki—HUD
Fletcher, Melanie—Wash. Co. Housing Services	Stevens, Kari—HUD/VASH
Fowler, Alisa—Luke-Dorf, Inc.	Stoller, Rick—The Salvation Army/Harbor Light
Galian, Katherine—Community Action	Teifel, Gordon—Families for Independent Living/DEAR
Graham, Mary—Bridges to Change	Tong, Melanie—Wash. Co. Health & Human Services
Hausman, Marlina – Impact NW	Tovar, Laura—Oregon Food Bank
Holland, Marah—Washington Co. Public Health	Wai, Kathy—211info
Jamison, Jeanne—Love Inc.Tigard/Tualitin/Sherwood	Werner, Judy—Lutheran Community Services NW
Lawrence, Kristen – Boys and Girls Aid	Wilson, Shannon—CPAH

Chair: Annette Evans, Public Agency Representative [annette\\_evans@co.washington.or.us](mailto:annette_evans@co.washington.or.us)

Co-Chair: Judy Werner, Nonprofit Agency Representative [jwerner@lcsnw.org](mailto:jwerner@lcsnw.org)

**I. INTRODUCTIONS**

**II. GUEST SPEAKERS**

**Affordable Healthcare Act and Medicaid Expansion**

E.V. Armitage, Central City Concern & John McDaid, Cover Oregon

John McDaid works for Oregon Health Authority on behalf of Cover Oregon. Cover Oregon is Oregon's implementation of the Affordable Care Act (ACA) as it relates to the national health insurance exchanges. Its intention is to get people who are uninsured access to coverage – both public programs and private insurance. Cover Oregon can also be used by small businesses to offer coverage to employees.

**Enrollment - Private Insurance**

To apply, go to [www.coveroregon.com](http://www.coveroregon.com) to download a paper application. For assistance completing the application, call the customer service center (1-855-COVER-OR) or a “community partner.” (To

search for community partners on the website – click the “Find an assister” button. Assistance is available in different languages.) The website application is not working at this time. There is a PDF-fillable form available to type in answers and electronically submit.

Enrollment began October 1 and is open through March 31, 2014. 70,000 people enrolled in the first month. Coverage starts January 1 for applications completed by early December. For those who apply after January 1, coverage will begin either the next month (for private pay plans) or immediately (for Medicaid). The open enrollment period is only for qualified health plans. Those who are eligible for Medicaid can apply at any time.

Marketing started with brand recognition (“Long live Oregonians!”). The target market was 18 to 34 year olds, to make an extra push for them to create an extra level of financial stability among that group. New ads are going out that are more testimonial oriented (people sharing their stories about the difference with access to coverage).

Each plan meets the ACA requirements:

- No denials due to pre-existing health conditions.
- 10 essential health benefits
- Financial help (up to 400% FPL, \$94,200 for a family of 4)
- Medicaid expansion (up to 138% FPL qualified for no-cost insurance)
- Requirement to have insurance
- Health insurance exchanges established
- Carriers must spend 80% of premiums on care

The 10 Essential Health Benefits are:

- Hospitalizations (inpatient care)
- Pediatric vision care (OHP will include dental and vision after 01/01/14)
- Ambulatory services (outpatient care)
- Emergency services
- Maternity and newborn care
- Mental health and substance use disorder services
- Prescriptions
- Rehabilitative services and devices, including physical and occupational therapy, speech-language pathology, psychiatric rehabilitation, and more.
- Lab tests
- Preventive and wellness services and chronic disease management

On the Cover Oregon website there is a function that provides a side-by-side comparison of plans. The plans are rated for quality by an independent organization. This function is working really well.

### **Fast Track Enrollment for the Oregon Health Plan (Medicaid) - Public Insurance**

Each state is federally mandated to create efficiencies in enrollment by springboarding off of information from other programs (TANF, Healthy Kids, SNAP, etc). Here in Oregon approx. 240,000 people were already eligible for Medicaid. Those 240,000 were sent fast track letters saying “you’re eligible, pick a CCO, sign here, and your coverage will begin January 1.” 56,000 applications were turned in within two weeks. There was very significant enrollment in the first month – a 10% reduction in uninsured already. (Coordinated Care Organizations –CCOs -- are the umbrella organizations that govern and administer care for OHP members.)

### **Affordability & Financial Assistance**

In theory, the ACA is supposed to make insurance more affordable. There are a number of states that have only two to three carriers in the exchange. Oregon has 11 and therefore has the lowest

monthly premiums in the country. Marketplaces really work and drive down costs. Costs are 20% lower than expected, all across the country. Some plans have monthly premiums so low that people may not get a tax credit because the plan they choose is already so affordable.

There is financial assistance available for up to 400% of the federal poverty level (about 90% of Oregonians fall into this income category). Financial assistance will come in two forms: tax credits or cost share. Example: if you get \$1200 tax credit, you can apply \$100 a month toward premiums to reduce cost or you can get it as a refund when you file your taxes. Cost sharing is for out-of-pocket expenses.

### **Case Study: Central City Concern**

E.V. Armitage talked about Central City Concern's experience with the ACA. CCC serves approximately 13,000 unduplicated persons a year, provides 1500 units of affordable housing, and runs a federally qualified Health Center (like Virginia Garcia). CCC received federal funding to help with enrollment.

CCC is focused on enrolling clients for health insurance. Twenty trained staff help with fast track letters and paper applications, resulting in 250 enrollments to date. This is 15 to 20 applications per day. The paper application takes about the same amount of time as the website when it's up. The more people who sign up by December, the more people insured on January 1, 2014. Staff use simple, clear messaging: "Are you uninsured? Ask us how to sign up!" There is a lot of misinformation out there.

CCC has the perspective of a healthcare provider and a housing provider. It's amazing that many of our clients, who for years could not get on OHP, now can, with full benefits including dental. For healthcare providers, it's going to be this huge expansion of capacity. We've been providing services for uninsured people, using various funds cobbled together. Now that we can bill for those services there will be so much more money coming into our system.

There's also a lot of regional discussion about the connection between housing and healthcare. With all this healthcare transformation, how can we get more housing capacity? If the focus is good health, living on the streets isn't going to work.

### **Q & A**

Q: With paper enrollments, there are bound to be mistakes. Will that cause delays?

A: No, not really. In this new system, it's real time eligibility. Once the application is submitted, even if it needs additional documentation, we start enrollment and the applicant has 90 days to turn in whatever additional documentation is needed. In theory, it should be the rare case that we need additional documentation. We already have access to the information we need to determine eligibility and level of assistance: IRS records, wage and income records, etc.

Q: Is a residential address required?

A: No, at the least we need a zip code so we can enroll you in the appropriate CCO. If you have no fixed address, we can do communication through email.

Q: Is information posted in libraries and places where people go?

A: Yes, libraries have been fantastic. The City of North Plains Public Library in Washington County received grant funds to provide information on Cover Oregon, and in Clackamas County to do some outreach. Most of our community partners are unfunded partners; many libraries are doing it unfunded and utilizing it as additional resources for their clients.

Q: Is there an annual recertification process?

A: You get a full 12 months of coverage and must renew every 12 months, whether it's through OHP or a qualified health plan.

Q: What about insurance agents? There are a lot of insurance companies listed on your website.

A: Yes, both insurance agents and community partners can assist, and it's free. A lot of folks will feel comfortable with a community partner but some people will have insurance questions and that may be more appropriate. Community partners can also do a handoff to an insurance agent.

Q: Are insurance agents paid for their service?

A: Yes, they get a commission if they sell a policy through the exchange. Community partners do not. (Some are grantees of the Oregon Health Authority). In Oregon we decided not to do a per application payment process. We tried that under Healthy Kids. It wasn't that successful. For insurance agents, there is no incentive for them to point to any one insurance company. Agents typically represent two or three different carriers. When they come through the exchange, they represent every carrier in the marketplace. We do a monitoring process, and if an agent seems to only be selling insurance from a specific carrier, that would trigger a review. Commission for all plans is about the same.

Q: How does medical debt effect eligibility?

A: It's as if it's nonexistent. They'll be able to pick whatever plan they want to.

Q: How are we going to have enough medical and dental providers to fill this need?

A: That's really the next question. I know Multnomah county just built a new dental clinic downtown. At our primary clinic we're expecting a huge influx of people who now have insurance. The good thing is that there are so many more resources now. Capacity will be an interesting issue.

Q: How many CCOs are there? Examples?

A: There are 15 CCOs operating in communities around Oregon. Two CCOs serve this area: Family Care and Health Share of Oregon (includes Kaiser, Providence, Legacy).

Q: Is the Kaiser coverage comparable to a paid plan?

A: The short answer is "pretty much." Each plan must include the 10 essential health benefits.

Q: Do you have a rough estimate of how many folks chose which CCO?

A: Not yet. I'm sure we will know at some point.

Q: For a family of four where the parent has coverage through employer and the kids are on free coverage, can the kids still be on free coverage? Or what if they do have coverage, but it's expensive?

A: The simple takeaway is that everyone in Oregon, regardless of citizenship status or income should come apply. If you have employer-provided insurance, you already have coverage. If you have access to insurance coverage, you're not eligible unless it's inadequate or unaffordable. If the annual premium is 9.5% more than your adjusted gross income, it's unaffordable (expenses like college tuition are taken out of gross income to determine adjusted gross).

Q: What about big deductibles and out-of-pocket expenses?

A: Some people are going to benefit, some are going to pay more, and for some it will be about the same. It depends on your income level, household size, etc. There are still maximum deductibles and out-of-pocket costs, but with the financial assistance some of that will be offset. It's less about this plan being more expensive than this plan - it's about where you spend your money. Lower monthly premium will result in higher out of pocket. I don't think there's an easy answer. The truth is that healthcare is still expensive, even with financial assistance. The good news is people now have comprehensive coverage.

Q: Some plans have a high deductible, but some of the primary care services don't apply to that. You just pay the \$10 or \$15 copay before you meet your deductible.

A: Yes, preventive services are covered.

Q: Some people are going to be confused by the deductibles. The way it is now, someone can owe \$100K that they can't pay, but with this, they can owe a max of \$6K. They may still not be able to pay, but it's lower.

A: Yes. The maximum out-of-pocket per household is \$12K per year. That is a big difference.

Q: Are there any health savings accounts offered?

A: No, not through the exchange.

Q: If you switch insurance carriers, will you have to change primary care providers?

A: If you have a provider you really like, but you're going to be shopping through the exchange, we will ask if you want to keep your primary care provider, and the system will look for those plans that your doctor works with so you can keep your current care provider. It's a real issue when you switch carriers. If you're with a Kaiser plan, you can still purchase Kaiser through the exchange. That's possible. But if you're with a carrier not affiliated with the exchange, that will be a problem. But since most carriers are with the exchange, it shouldn't be a problem.

### III. APPROVAL OF MEETING MINUTES

Motion: Approve the October 2 HSSN meeting minutes, with the following revisions:

- Page 1 - Under Attendees: Leslie Peltz is listed as representing "COSA Inc.", and it should read "CODA Inc."
- Page 5 - Gordon Teifel is reported asking to explain the "three" plan levels and he said it should read "four" plan levels.

Action: Gordon Teifel

Second: Katherine Galian

Vote: Approved, unanimous

### IV. GENERAL BUSINESS

#### Severe Weather Shelter Response Plan for Winter 2013 - 2014

SWS information was shared with HSSN, 211info, 911 dispatch, Land Use and Transportation and City Public Works staff. Currently Safe Place is open as a daytime warming center and overflow shelter for unaccompanied youth 19 and younger; St. Francis (Sherwood) provides shelter every Sunday evening; Rolling Hills (Tualatin) every Wednesday night. An updated schedule will go out to everyone as shelters open in severe weather. The SOS Shelter (a 90 day winter shelter), starts December 2, 2013.

#### Annual Update and Adoption of CoC and HMIS Governance Charter

In 2008, this group met and developed and formed an HMIS governance policy piece that was signed by the chair and co-chair, in addition to the HMIS lead agency. The policy is updated when there is a new signer and if HUD policies change. The HEARTH Act requires approval of policies in several areas, including HMIS, in order for Wash. Co. to be eligible for HUD funds.

Annette Evans handed out a revised, draft policy. Portions included HMIS proposed rule requirements – to meet HEARTH policies -- that were in gray text. Melanie Fletcher reported that CPD representatives have advised that implementing these rules at this time is not required as the rules are "proposed" and subject to change before HUD finalizes them in 2014.

Motion: Adopt the revised policy without the gray text.

Action: Gordon Teifel

Second: Katherine Galian

Vote: Approved, unanimous

FY2013 CoC Program Homeless Assistance Grant Application: Update on Registration and NOFA  
HUD had hoped to release NOFA, but it was delayed due to government shut-down; it is expected soon. As soon as the NOFA is released, Annette Evans will work with everybody who has a current project and begin working on applications and performance outcomes, how we align with McKinney-Vento Title 10, HMIS, point in time process, etc.

Most likely will not be new money for this year's funding. This is a competitive process – competing to sustain what we already have. If there is new money available, Annette will put out an RFP and then the HSSN will select the project(s).

Vicky Skyrha said sometimes people change their numbers a bit in eSnaps. Now that everything is electronic, there is a lot of cross-checking, so be sure to get it right. Annette explained that budget numbers should be changed in grant agreement amendments or notices with the recipient and HUD.

## V. ANNOUNCEMENTS

- Annette Evans announced that the Centralized and Coordinated Assessment System Subcommittee is meeting Friday November 8<sup>th</sup> at 8:30 a.m. at the Public Services Building. Next month the plan is to roll out what the system will look like; with a mock enrollment to test it. After that that committee will come back to the HSSN with messaging, time frame, etc. The local family shelter system is an example of a great coordinated system. More info. next month.
- Bridget Calfee announced that Jersey Mike's (by Red Robin on Canyon) is doing a fundraiser for HomePlate Youth Services: donate \$2 and get a free sub.
- Lynn Brillman announced that CPAH received a distribution from OHCS to build Barcelona project (directly across from STARS cabaret). 47 units, predominantly 1 bedrooms.
- Andrea Nelson announced City of Beaverton happenings:
  - i. A Civil Rights training, at 10:15 today. Speakers include Laura O'Neil from NAMI (talking about serving clients with mental illness and deescalating situations) and Antonia from the Oregon Food Bank.
  - ii. A "What's Working/Housing" workshop on November 12, 2013 at 9 am at PSB cafeteria.
  - iii. A "What's Working/Community Development: workshop on November 18, 2013 same time and place.
  - iv. CDBG applications for 2014 will available in the next few weeks.
- Boys and Girls Aid staff announced that their HUD apartment units have two openings for youth ages 18-23; requires some form of income.
- Kathy Wai shared two 211Info resources:
  - i. To get live updates for winter shelter openings, text the word "Shelter" to 898211.
  - ii. The 2013 Holiday Assistance Guide is out. It lists food pantries, toy donations, holiday meals, etc. See [www.211Info.org](http://www.211Info.org).
- Jeanne Jamison announced that Love INC. of Tigard, Tualatin and Sherwood is making a shelter card for homeless community members, with calendar listing of open shelters, hot meal sites, shower/laundry sites. They also have bus passes for local residents to get to work.
- Mary Graham reported a program participant with a service dog is looking for housing to accommodate the animal. HSSN members agreed to meet with Mary following the meeting to discuss Fair Housing rules and community resources available for the program participant.
- Melanie Fletcher thanked those HSSN members who included data in the Annual Homeless Assessment Report (AHAR). Due to their hard work cleaning up data anomalies and missing

items, we have the lowest occurrence of missing/don't know responses in the history of our AHAR submissions, which we've been doing since 2009. Draft data for all categories was submitted on November 5, 2013. A consultant from Abt Associates will review the data and ask questions, if there are any. Expect that I may be in touch if there are any questions I can't answer (usually regarding bed utilization if it is low or high). Also, training that was scheduled for November 5, 2013 has been rescheduled

**VI. ADJOURNMENT**

The meeting adjourned at 10:00 a.m. The next HSSN meeting is December 4, 2013 at 8:30 a.m.

Minutes prepared by,  
Amanda McCloskey  
Washington County Department of Housing Services

To be added to the HSSN email list, contact Annette Evans at  
[Annette\\_Evans@co.washington.or.us](mailto:Annette_Evans@co.washington.or.us)