



Authorization Guide for Housing Tenancy and Sustaining Services

Housing Tenancy and Sustaining Services assist members with maintaining a safe and stable tenancy once housing is secured.

This service is covered once per lifetime. Initial authorization is for a period of 12 months. Extensions are allowed after the initial 12 months in 6-month increments based on medical necessity.

Members must meet the following criteria to qualify for Housing Tenancy and Sustaining Services:

Eligibility	Restrictions
<ul style="list-style-type: none"> • Members who received Housing Transition/Navigation Services in counties that offer the service; and • Members who are prioritized for a permanent supportive housing unit or rental subsidy through the local homeless Coordinated Entry System or similar system;¹ or • 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 and who are receiving enhanced care management, or at risk for higher utilization;² or • Members who are at risk of homelessness due to having significant barriers to housing stability and meet at least one of the following: <ul style="list-style-type: none"> ○ Have one or more serious chronic conditions; or ○ Have a serious mental illness; or ○ Are at risk of institutionalization or overdose; or ○ Require residential services because of a substance use disorder;ⁱ or ○ Have a serious emotional disturbance (children and adolescents); or ○ Are receiving Enhanced Care Management; or ○ Transition-Age Youth with significant barriers to housing stability.ⁱⁱ 	<ul style="list-style-type: none"> • Member is participating in a duplicative state funded program. • Services do not include the provision of room and board or payment of rental costs.

¹Local homeless Coordinated Entry Systems use information to identify highly vulnerable individuals with disabilities, one or more serious chronic conditions, serious mental illness or institutionalization, requiring residential services because of a substance use disorder and/or exiting incarceration.

²Members who have one or more serious chronic conditions and/or serious mental illness and/or are at risk of institutionalization or requiring residential services due to a substance use disorder.

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Service requirements:	
<ul style="list-style-type: none"> • An individualized assessment of needs and documented as reasonable and necessary in the member’s individualized housing support plan. • Use of best practices for members who are experiencing homelessness and who have complex health, disability, and/or behavioral health conditions.ⁱⁱⁱ • May need additional coordination with other entities to ensure the individual has access to supports needed for successful tenancy.^{iv} • Members who need rental subsidy support to secure permanent housing, close coordination with local Coordinated Entry Systems, homeless services authorities, public housing authorities, and other operators of local rental subsidies will be required. 	
Service includes	
<ol style="list-style-type: none"> 1. Early identification and intervention for behaviors that may jeopardize housing.³ 2. Education and training on the roles, rights, and responsibilities of the tenant and landlord. 3. Coaching on developing and maintaining key relationships with landlords/property managers with a goal of fostering successful tenancy. 4. Coordination with the landlord and case management provider to address identified issues that could impact housing stability. 5. Assistance in resolving disputes with landlords and/or neighbors to reduce risk of eviction or other adverse action including developing a repayment plan or identifying funding in situations in which the member owes back rent or payment for damage to the unit. 6. Advocacy and linkage with community resources to prevent eviction when housing is or may potentially become jeopardized. 7. Assisting with benefits advocacy, including assistance with obtaining identification and documentation for SSI eligibility and supporting the SSI application process. 	<ol style="list-style-type: none"> 8. Assistance with the annual housing recertification process. 9. Coordinating with the tenant to review, update, and modify their housing support and crisis plan on a regular basis to reflect current needs and address existing or recurring housing retention barriers. 10. Continuing assistance with lease compliance, including ongoing support with activities related to household management. 11. Health and safety visits, including unit habitability inspections.⁴ 12. Other prevention and early intervention services identified in the crisis plan that are activated when housing is jeopardized.⁵ 13. Providing independent living and life skills, including assistance with and training on budgeting, including financial literacy and connection to community resources.
Total lifetime maximum: N/A	
Codes:	
<ul style="list-style-type: none"> • T2041 U6- Support brokerage, self-directed; per 15 minutes • Do not use T2040 	
Unit of Service:	
Per Diem	

³Such as late rental payment, hoarding, substance use, and other lease violations.

⁴Does not include housing quality inspections.

⁵Such as assisting with reasonable accommodation requests that were not initially required upon move-in.

Allowable Community Support 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.^v

State services to be avoided:

Examples include but are not limited to inpatient and outpatient hospital services, emergency department services, emergency transport services, and skilled nursing facility services.

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.

ⁱ**Examples of qualifying institutionalization or residential services:** hospitals, correctional facilities, mental health residential treatment facilities, substance use disorder residential treatment facilities, recovery residences, institutions for mental diseases, and state hospitals.

ⁱⁱ**Examples of Transition-Age Youth with significant barriers to housing stability:** one or more convictions, a history of foster care, involvement with the juvenile justice or criminal justice system, and/or have serious mental illness and/or are children or adolescents with serious emotional disturbance and/or who have been victims of trafficking or domestic violence.

ⁱⁱⁱ**Examples of best practices:** housing first harm reduction, progressive engagement, motivational interviewing, and trauma-informed care.

^{iv}**Examples of potential Coordination Entities:** county health, public health, substance use, mental health, and social services departments, county and city housing authorities, continuums of care and coordinated entry system, sheriff’s department and probation officers, local legal service programs, community-based organizations, housing providers, local housing agencies, and housing development agencies.

^v**Examples of possible providers:** Vocational services agencies, providers of services for individuals experiencing homelessness, life skills training and education providers, county agencies, public hospital systems, mental health or substance use disorder treatment providers, including county behavioral health agencies, social services agencies, affordable housing providers, supportive housing providers, federally qualified health centers and rural health clinics.