



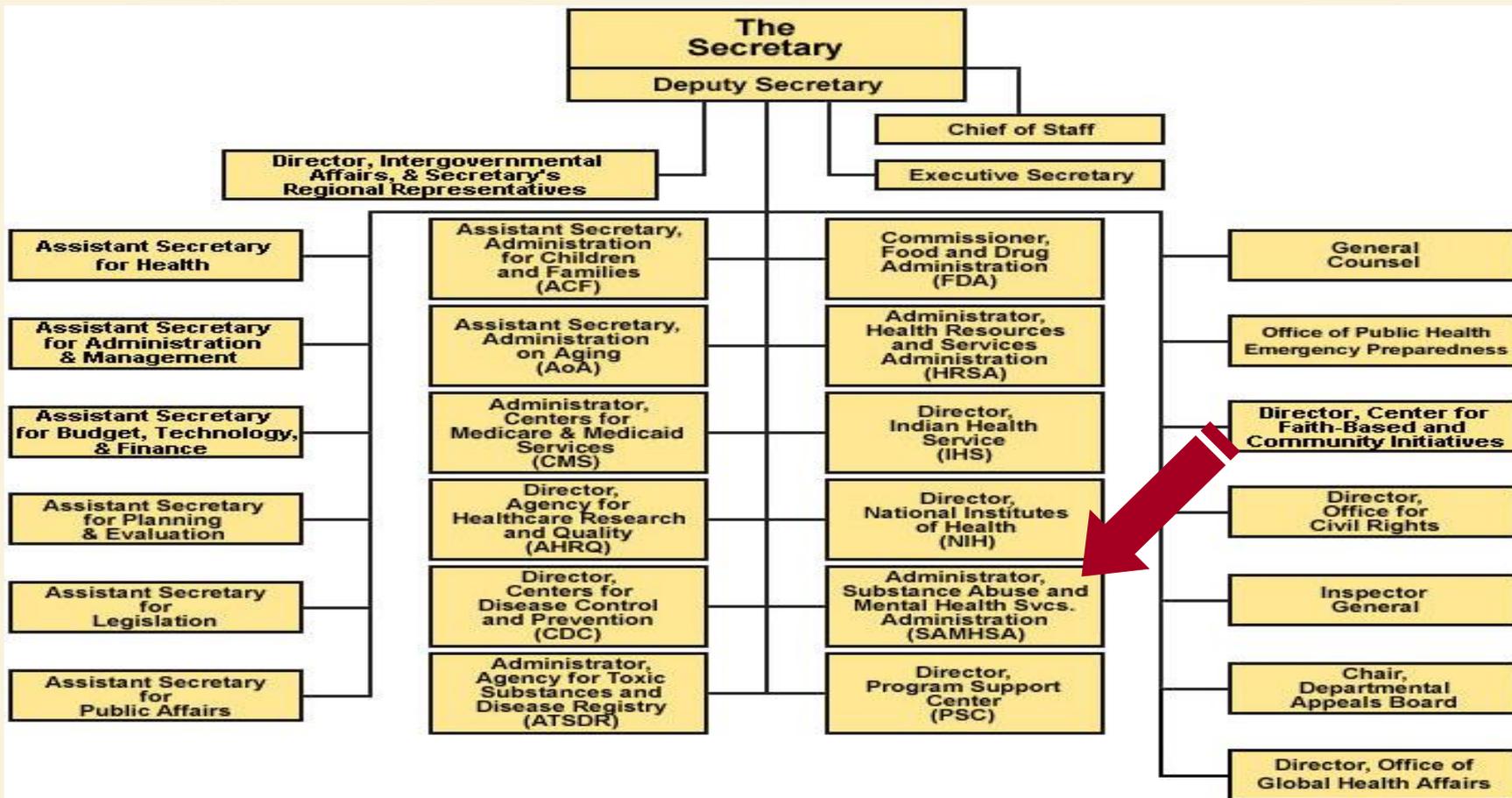
Behavioral Health As Public Health In An Era Of Health Reform: *SAMHSA Programs To Reduce Homelessness*

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16th Annual NJ Supportive Housing Conference
Breaking New Ground
Iselin, NJ
December 5, 2014



The U.S. Department of Health and Human Services (DHHS)



BEHAVIORAL HEALTH



**SOCIAL
PROBLEM?**

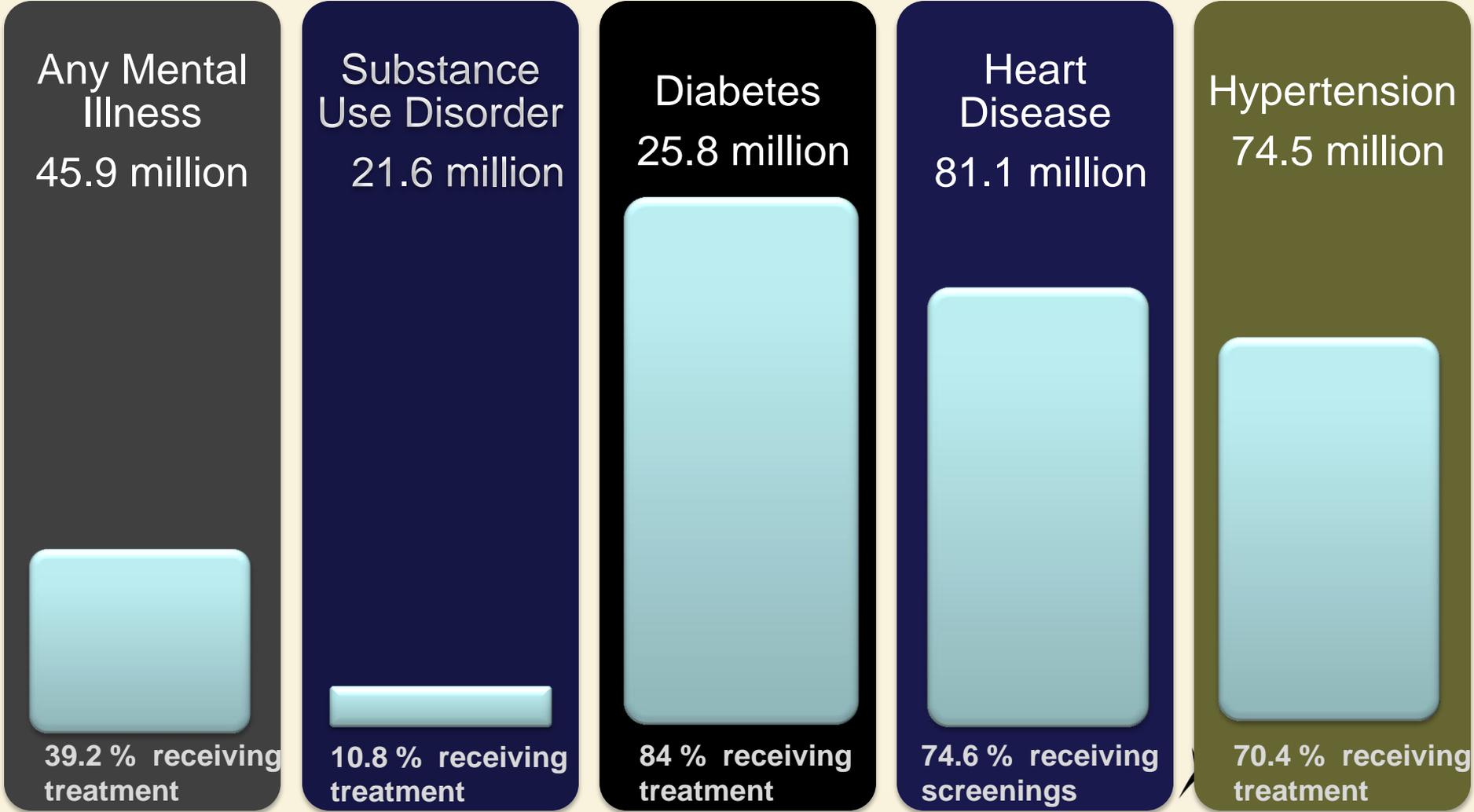


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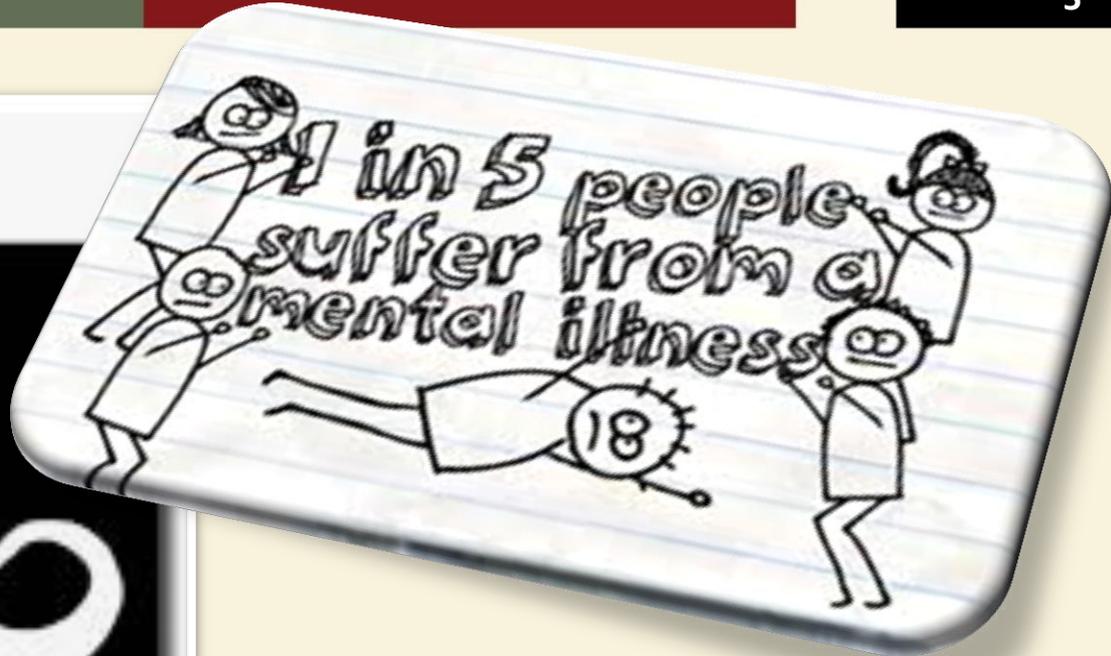
**PUBLIC HEALTH
ISSUE?**



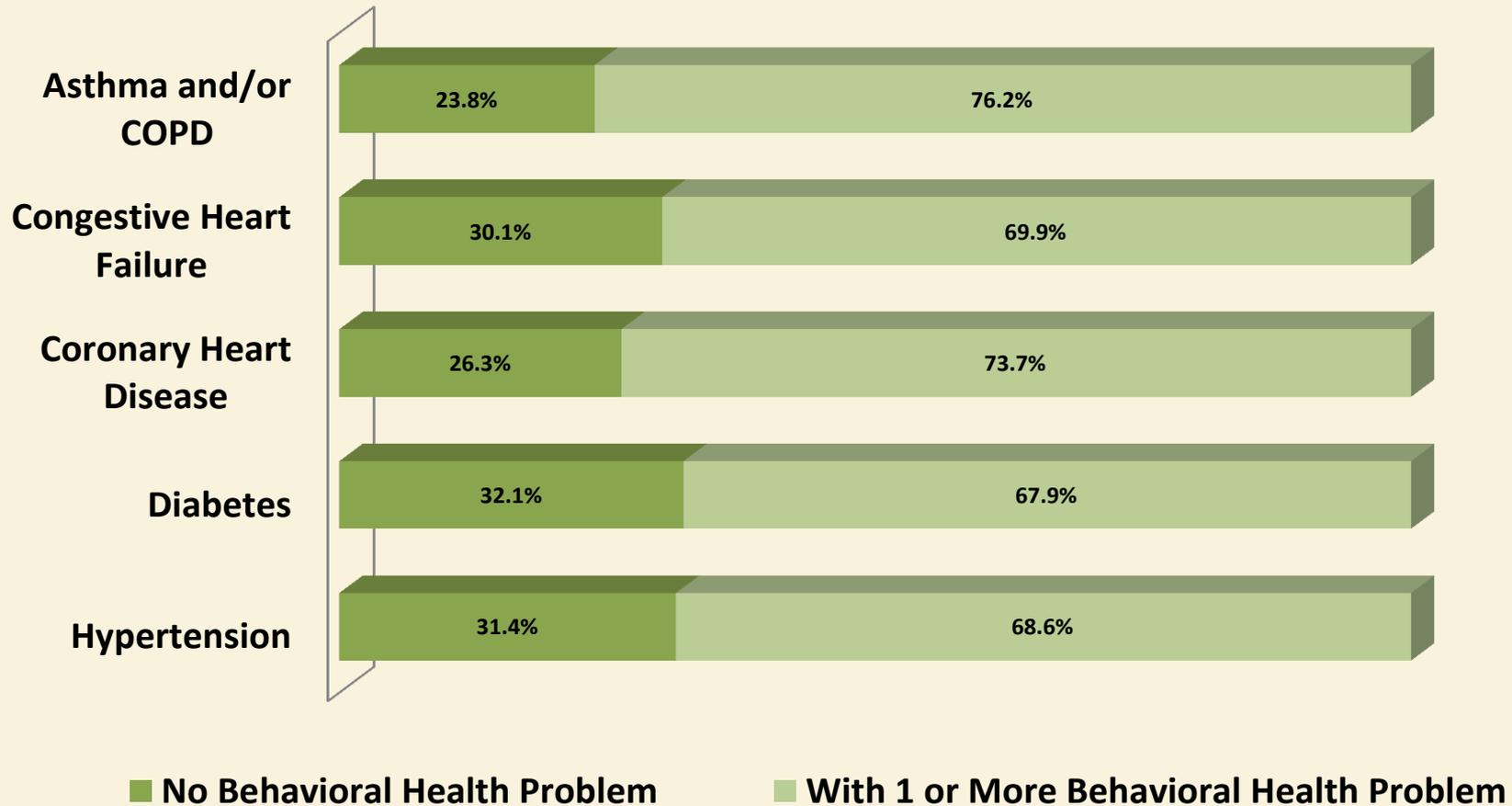
Daily Disaster of Unprevented and Untreated Mental and Substance Use Disorders



Why Behavioral Health Matters To Public Health



Health & Behavioral Health Go Hand In Hand



Boyd, C., Clark, R., Leff, B., Richards, T., Weiss, C., Wolff, J. (2011, August). Clarifying Multimorbidity for Medicaid Programs to Improve Targeting and Delivering Clinical Services. Presented to SAMHSA, Rockville, MD.

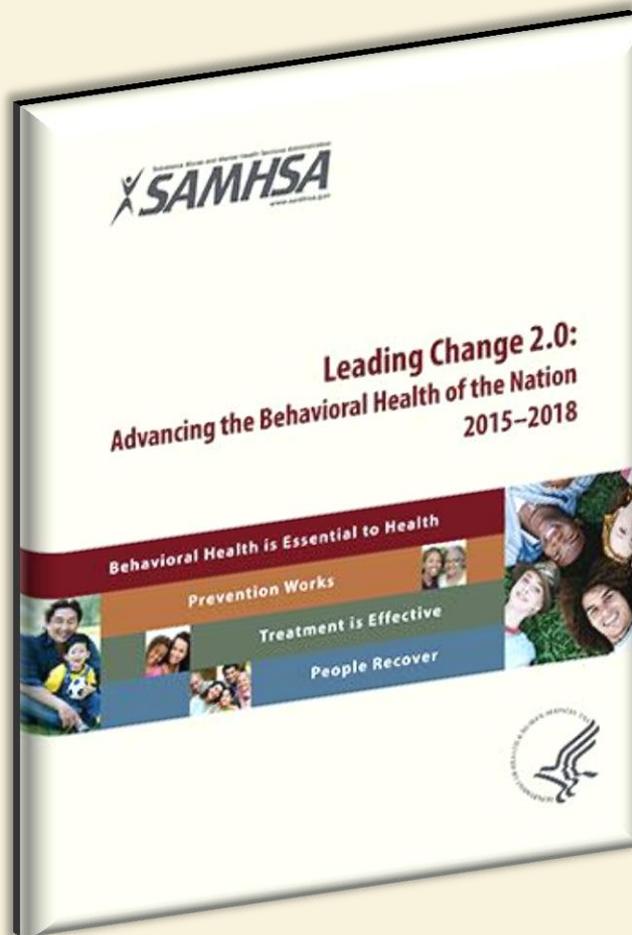
Homelessness and Behavioral Health

- Approximately 30% of people experiencing homelessness have a serious mental illness
- About two-thirds have a primary use disorder or other chronic health condition
- These health conditions may create difficulties in accessing and maintaining stable, affordable, appropriate housing



SAMHSA's Strategic Initiatives

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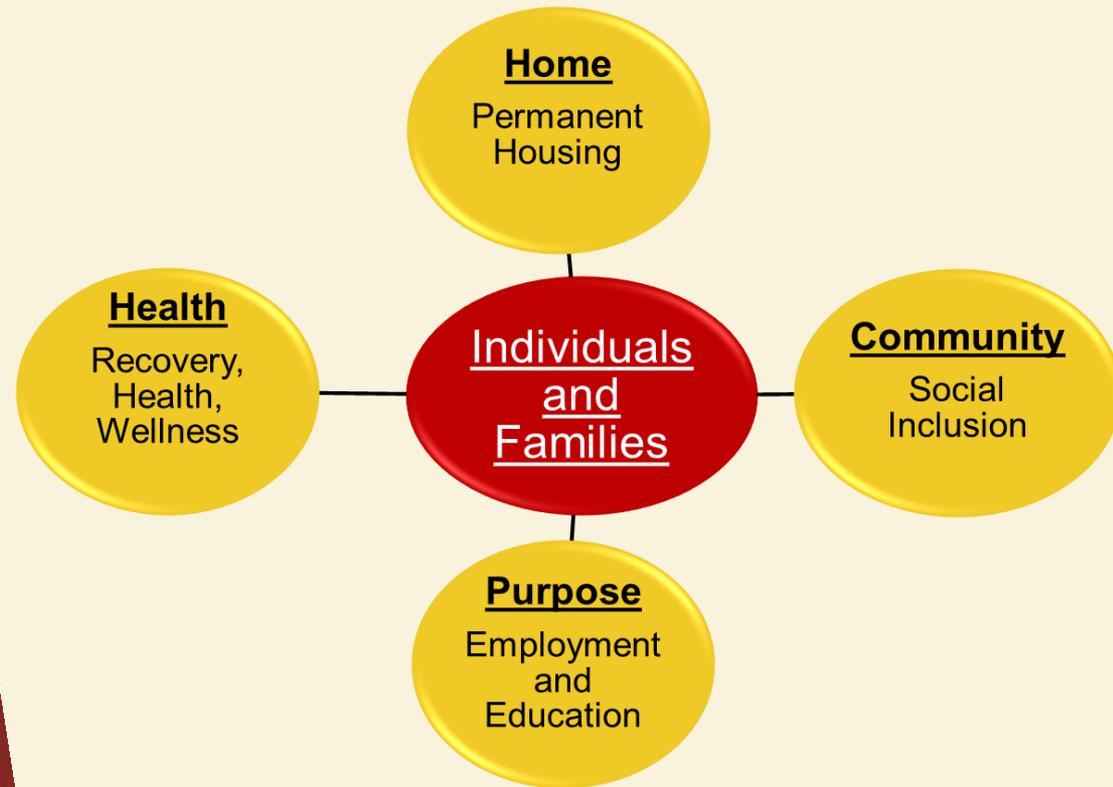
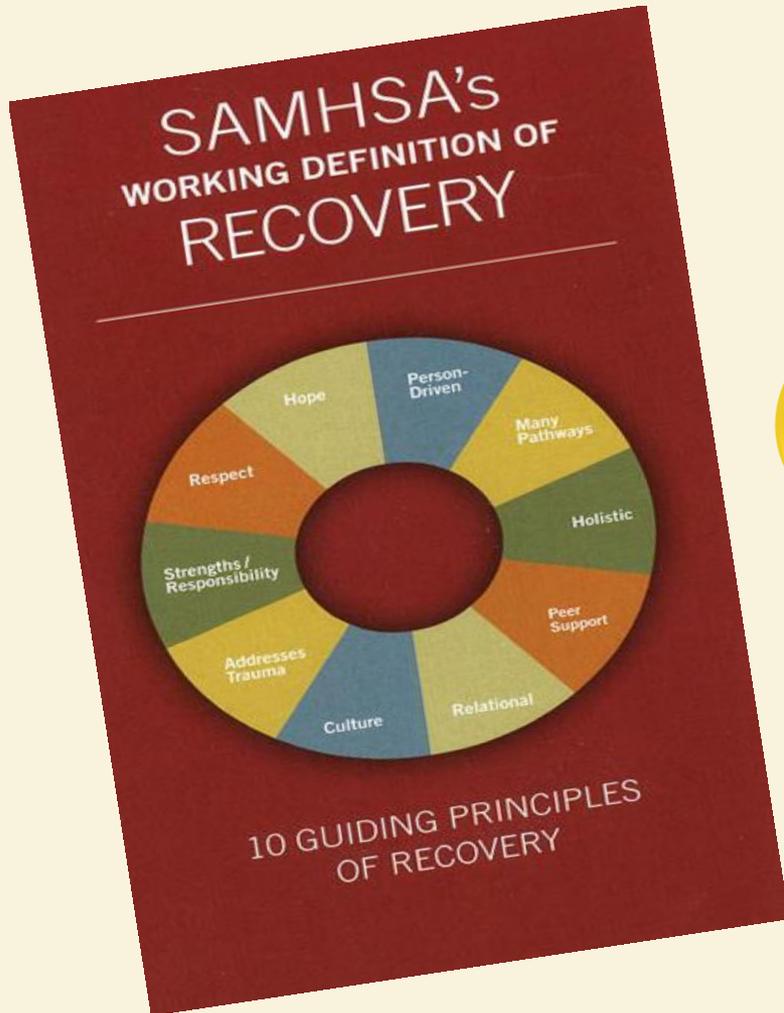
1. Prevention of Substance Abuse and Mental Illness
2. Health Care and Health Systems Integration
3. Trauma and Justice
4. ***Recovery Support***
5. Health Information Technology
6. Workforce Development

Recovery Support Strategic Initiative

Purpose

- **Partner** with people in recovery from mental and substance use disorders.
- **Promote** individual-, program-, and system-level approaches that foster health and resilience.
- **Increase** permanent housing, employment, education, and other supports.
- **Reduce** discriminatory barriers.

Recovery Support Strategic Initiative



Core Values: Housing is Healthcare

- Homelessness is ***unacceptable***.
- There are no “homeless people,” but rather individuals who have ***lost their homes*** who deserve to be treated with dignity and respect.



- Homelessness is ***expensive***; it is better to invest in solutions.
- Homelessness is ***solvable***; we have learned a lot about what works.
- ***HOMELESSNESS CAN BE PREVENTED.***

Causes of Homelessness

The causes of homelessness are numerous, complex, and often interrelated.

For persons in families, the three most commonly cited causes are:

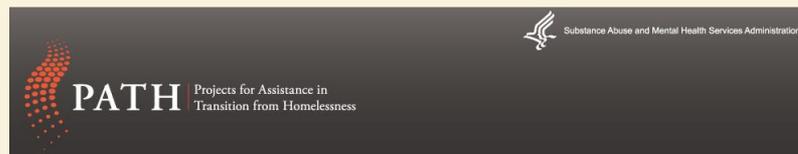
- Lack of affordable housing
- **Poverty**
- Unemployment

For singles, the three most commonly cited causes of homelessness are:

- **Unemployment**
- Lack of affordable housing
- Mental health and substance use disorders

SAMHSA's Commitment

- SAMHSA is a key player in efforts to end homelessness, especially chronic homelessness.
- SAMHSA's 2014 homeless programs budget is approximately \$139 million.
- Currently SAMHSA's homeless programs provide support for over 150 direct grantees and nearly 550 local providers and subcontractors receive Projects for Assistance in Transition from Homelessness (PATH) funding.
- SAMHSA's homeless program grants are designed to serve people who have been underserved or those who have previously not received services at all.
- The majority of SAMHSA's homeless program grants help people who are chronically homeless.



SAMHSA's Partners



- United States Interagency Council on Homelessness – Partner on different activities. Coordinate the federal response with 19 federal agencies to end homelessness through expert panel meetings, grantee meetings, TA, etc.
- U.S. Department of Housing and Urban Development (HUD) – Collaborate on services, supports and data reporting.
- Department of Veterans Affairs – Services and supports for Veterans/SAMHSA led expert panel on addressing homelessness among Veterans.
- Indian Health Services- addressing needs of Native American/Alaskan Native Homelessness/Expert Panel on AI/AN
- And others (e.g., DOL, DOJ, DOA, DOE)

Projects for Assistance in Transition from Homelessness (PATH)

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- The PATH program was authorized by the Stewart B. McKinney Homeless Assistance Amendments Act of 1990. State allotments are calculated based on the size of populations living in urbanized areas.
- PATH is a formula grant administered by SAMHSA's Centers for Mental Health Services (CMHS) that is available to the 50 states, the District of Columbia, Puerto Rico, American Samoa, Guam, the Northern Mariana Islands, and the U.S. Virgin Islands.
- Nearly 550 local providers and subcontractors receive PATH funding.

PATH Clients: Data

- In 2012, 508 PATH provider agencies reported contacting 192,299 people through outreach.
- ***Of those individuals who are eligible for PATH, 58 percent were enrolled in PATH services.***
- Of all PATH clients, 60 percent were living outdoors or in short-term shelter at the time of first contact (i.e., literally homeless).

Homeless and Housing Resource Network (HHRN)

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HHRN provides support on homeless, housing, and behavioral health issues for targeted homeless grantees and stakeholders. HHRN is jointly funded by CMHS and CSAT and is available to assist the field through:

- Training and technical Assistance
- Virtual Learning Classrooms
- Webinars
- Issue Briefs
- Expert Panel
- Policy Academies



Cross-Cutting Technical Assistance

Technical assistance is provided on numerous issues, such as:

- Intersection of the Affordable Care Act and chronic homelessness
- Homelessness and the criminal justice system
- Services that support persons experiencing homelessness
- Supported employment
- Rural/frontier homelessness
- Health Homes
- Mental Health First Aid

CMHS Services in Supportive Housing (SSH) Grants



- SSH grantees provide individualized, wraparound services, and supports linked to existing permanent supportive housing.
- Programs serve individuals and families who are chronically homeless and have mental illnesses or co-occurring mental and substance use conditions.
- There are 49 active SSH grantees.

Grants for the Benefit of Homeless Individuals (GBHI)

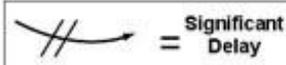
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- *GBHI-General* serves people with substance use disorders, including those with co-occurring mental health problems, who are homeless or at risk of becoming homeless.
- *GBHI-SSH* serves people who are chronically homeless and who are housed in permanent supportive housing.
- *GBHI-Cooperative Agreements to Benefit Homeless Individuals (CABHI)* serves the most vulnerable individuals who are chronically homeless. Program participants receive access to sustainable, mainstream, permanent housing, treatment, and recovery supports.
- There are 72 active GBHI grantees, including 31 CABHI and 11 CABHI-State grantees.

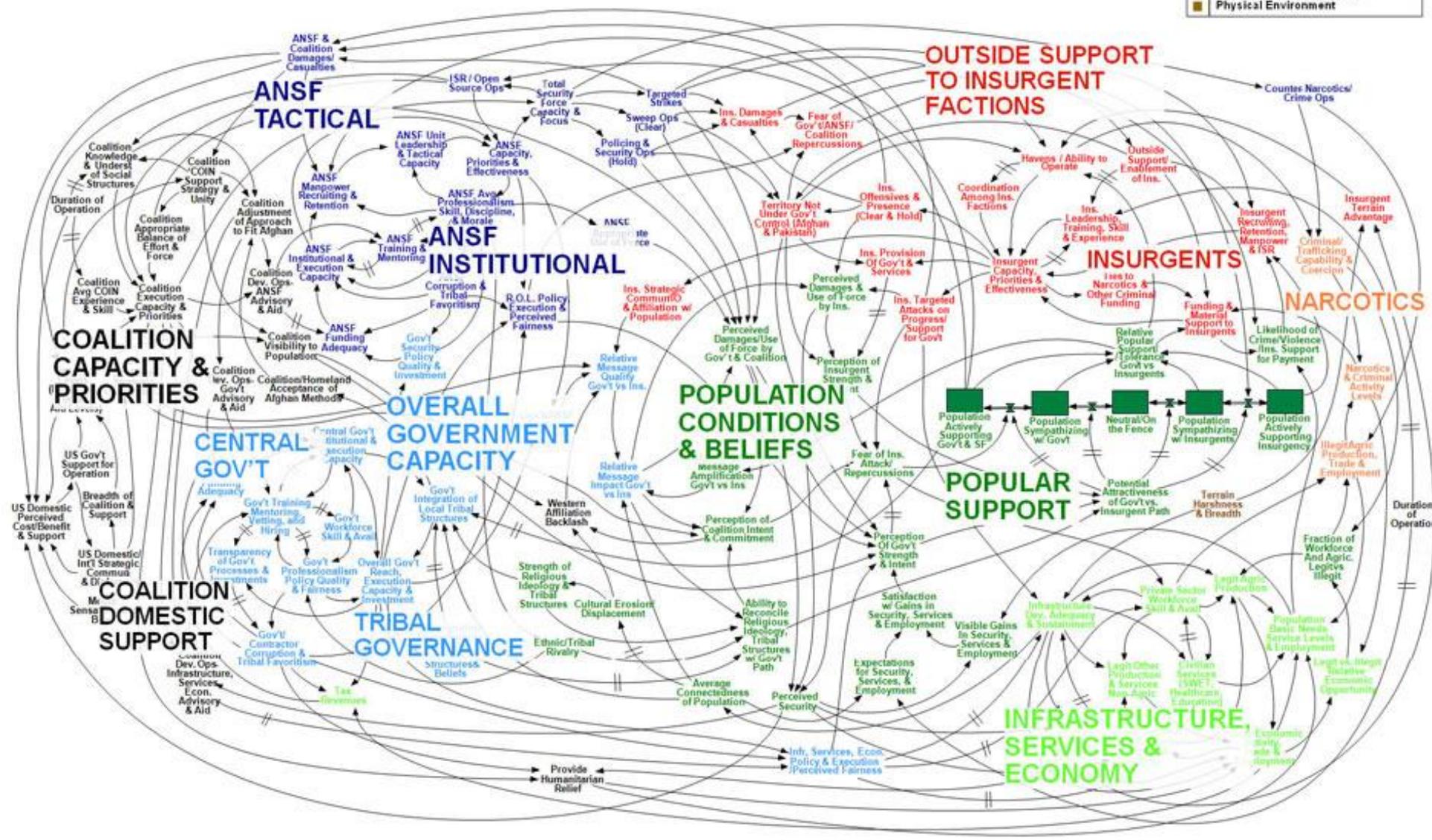
SAMHSA's CABHI Program

- Cooperative Agreements to Benefit Homeless Individuals (CABHI) is a subprogram of the SAMHSA Grants for the Benefit of Homeless Individuals (GBHI).
- CABHI emphasizes the importance of access to permanent housing and supportive services for individuals who are chronically homeless.
- CABHI mandates partnerships at the state and local level. Emphasize partnerships and collaboration.
- CABHI is a 3-year program that began in September 2011.
- There are 31 active CABHI and 11 CABHI-State grants.

Afghanistan Stability / COIN Dynamics



- Population/Popular Support
- Infrastructure, Economy, & Services
- Government
- Afghan Security Forces
- Insurgents
- Crime and Narcotics
- Coalition Forces & Actions
- Physical Environment



WORKING DRAFT - V3

When You Can Enroll in Marketplace

- **2015 Open Enrollment Period: November 15 – February 15**

If You Enroll Between the...	Your Coverage Begins the...
1st and 15th days of the month	First day of the next month
16th and last day of the month	First day of the second following month

- Special enrollment periods are available in certain circumstances during the year
- Medicaid/CHIP enrollment is year-round

Qualified Health Plans Cover Essential Health Benefits

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1. Ambulatory patient services
2. Emergency services
3. Hospitalization
4. Maternity and newborn care
5. ***Mental health and substance use disorder services, including behavioral health treatment***
6. Prescription drugs
7. Rehabilitative and habilitative services and devices
8. Laboratory services
9. Preventive and wellness services and chronic disease management
10. Pediatric services, including oral and vision care



Issuers Offering Marketplace Plans in NJ

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- AmeriHealth New Jersey
- Health Republic Insurance of New Jersey
- Horizon Blue Cross Blue Shield of New Jersey
- Oscar *
- UnitedHealthcare *

To see available plans and prices:

<https://www.healthcare.gov/see-plans/>

How the Marketplace Works



Create an account

First provide some basic information. Then choose a user name, password, and security questions for added protection.

Apply

Next you'll enter information about you and your family, including your income, household size, other coverage you're eligible for, and more.

Visit HealthCare.gov to get a checklist to help you gather the information you'll need.

Pick a plan

Next you'll see all the plans and programs you're eligible for and compare them side-by-side.

You'll also find out if you can get lower costs on monthly premiums and out-of-pocket costs.

Enroll

Choose a plan that meets your needs and enroll!

May apply or change plan during Special Enrollment Period due to certain life



Renewal and Auto-Enrollment

- All 2014 Marketplace health plans will come up for renewal in 2015
- Consumers should receive 2 notices if they were enrolled in 2014:
 - *Marketplace notice indicating whether or not financial assistance will continue in 2015*
 - *Notice from insurance company about changes in premium and benefits*
- Nearly all consumers will be automatically renewed for 2015
- All consumers should review their plan's 2015 changes and update their information with the Marketplace

Marketplace Affordability

- Financial help is available for eligible families and individuals, including
 - *Tax credits that may be used to lower monthly premiums*
 - Refundable premium tax credits
 - Advance payment of premium tax credits
 - *Reduced cost sharing to lower out-of-pocket spending for health care costs*

SAMHSA Resources

- SAMHSA www.samhsa.gov
- Homeless Resource Center:
<http://www.nrchmi.samhsa.gov/>
- PATH program website:
<http://www.pathprogram.samhsa.gov/>
- Co-occurring & Homeless Activities Branch
website: <http://www.chab.samhsa.gov/>

Health Reform Websites

- **Kaiser Family Foundation Health Reform Gateway**
 - <http://healthreform.kff.org/>
- **National Council for Community Behavioral Healthcare**
 - <http://mentalhealthcarereform.org/>
- **Coalition for Whole Health**
 - <http://www.coalitionforwholehealth.org/resources-for-local-advocates/>
- **The Bazelon Center for Mental Health Law**
 - <http://www.bazelon.org/Where-We-Stand/Access-to-Services/Health-Care-Reform.aspx>

Additional SAMHSA Resources

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SUICIDE PREVENTION
LIFELINE
1-800-273-TALK (8255)



**TREATMENT
LOCATOR**

24/7 Treatment
Referral Line
1-800-662-HELP (4357)



Disaster Distress Helpline
1-800-985-5990
Text TalkWithUs to 66746

→ www.samhsa.gov

→ www.suicidepreventionlifeline.org

→ www.samhsa.gov/treatment

→ www.disasterdistress.gov

→ www.mentalhealth.gov

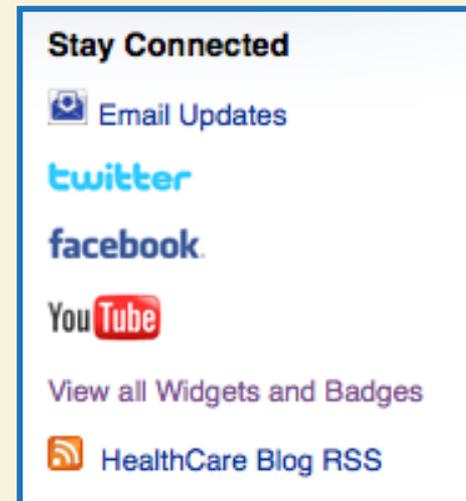
connect with samhsa



Learn More . . .

www.healthcare.gov
www.cuidadodesalud.gov

Social Networks



Thank You

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Behavioral Health is Essential To Health • Prevention Works
Treatment is Effective • People Recover