Housing Stabilization Services: Quick Guide and Best Practices for Corrections Partners and Professionals

Corrections partners and professionals frequently support people who have disabling conditions and experience housing instability or homelessness. Housing Stabilization Services is a new, state plan Medical Assistance (MA) service that helps people with disabilities and seniors find and keep housing; it may be used to support people currently under community supervision or releasing from a correctional setting into the community.

What is Housing Stabilization Services?

Housing Stabilization Services has three components:

- housing transition - helps a person plan for, find, and move into housing (150 hours of service per transition)
- housing sustaining - helps a person keep their housing after they have moved in (150 hours of services annually)
- housing consultation - helps a person who does not have MA-funded case management develop a person-centered plan that addresses their needs, wants, and goal for living in the community

Housing Stabilization does not pay for housing or goods.

Eligibility Criteria

In order to be eligible for Housing Stabilization Services, a person must:

- Have Medical Assistance (MA) coverage
- Be age 18 or older
- Have a disability or disabling condition
  - The disability does not have to meet Social Security’s adult standards for disability. Disabilities can include physical disabilities, mental illness, substance use disorder, and other conditions.
- Be in one of the following situations:
  - Homeless, which means lacking a fixed, adequate nighttime residence
  - At risk of homelessness (including being doubled up, needing services to keep your housing, or if the person was previously homeless and discharging from a correctional, medical, mental health, or substance use disorder treatment center without a permanent place to live)
  - Moving out of (or moved out of in the last six months) an institution, nursing facility, or certain other group settings like Board and Lodge or Adult Foster Care
At risk of institutionalization. For the purposes of Housing Stabilization Services, institutions are defined as hospitals, regional treatment center inpatient services, nursing facilities, and intermediate care facilities for people with developmental disabilities.

- Be assessed to need help with at least one of these disability-related areas:
  - Communication
  - Mobility
  - Decision-making, or
  - Managing moods or behaviors

- Not be getting similar services from other programs, like Moving Home MN transition services, Assertive Community Treatment, Housing Access Coordination, or Relocation Service Coordination.

In order to be approved for Housing Stabilization Services, a person must be assessed to need it and complete a person-centered plan.

**Assessment Pathways**

A person must complete an assessment which shows they meet needs-based criteria for the service. Assessments cannot be older than nine months at the time an eligibility request is submitted to DHS. There are three assessment pathways a person can choose from:

1. **Professional Statement of Need (PSN):** the primary pathway onto Housing Stabilization Services because it assesses for all needs-based criteria (disability, housing instability, assessed need for services).
2. **MnCHOICES Assessment/Long-term Care Consultation (LTCC):** for people who may also need other long-term services and supports through waivers or personal care attendant services
3. **Coordinated Entry System (CES) Assessment:** for people who are homeless who also need different housing resources that may only be available through Coordinated Entry

DHS’ **Person-Served Workflow** (DHS-7347) provides a visual for how a person may be supported onto Housing Stabilization Services. Note that if a person uses the MnCHOICES/Long-term Care Consultation or Coordinated Entry System pathways, they will still need proof of disabling condition, which can be obtained in different ways (see **Allowed Documentation Types for Housing Stabilization Services**).

**Person-Centered Plan Requirement**

Housing Stabilization Services are home and community-based services, an option overseen by the federal Centers for Medicare and Medicaid Services. One home and community-based service requirement is that a person must receive person-centered planning services, which can be received in two ways:

- If the person has a MA-funded waiver or targeted case manager or a MSHO/MSC+ care coordinator, that person will complete the person-centered plan and help a person pick a Housing Stabilization Services provider.
- If the person does not have a MA-funded case manager or MSHO/MSC+ care coordinator, the person will need to find a housing consultant enrolled with Minnesota Health Care Programs (MHCP) to
complete the person-centered plan and pick an ongoing housing transition or sustaining service provider.

**Enrolled Housing Stabilization Service Providers**

Housing Stabilization Services can only be received through enrolled Minnesota Health Care Programs providers. Enrolled housing consultation and/or Housing Stabilization (transition/sustaining) providers can be found via MinnesotaHelp.info. Enter “Housing Stabilization” into the search bar as well as the city where services are needed.

**Eligibility Request Process**

Once a person completes their assessment and person-centered plan, selects an ongoing housing transition/sustaining provider, and is on Medical Assistance, the Housing Stabilization Services provider submits a Housing Stabilization Services Eligibility Request (DHS-7948) to DHS for review. If the person is approved, they can start services as soon as the provider receives the approval. If the person is denied, it might mean more information is needed and to try resubmitting, or the person could appeal the decision. Once approved, the person will need to be reassessed on an annual basis and complete an updated person-centered plan.

**Additional Transition or Sustaining Service Hours Available**

If a person experiences two or more barriers to finding or keeping housing, Housing Stabilization Service providers may request that a person receive an additional 150 hours of services. Proof of the barriers must be submitted at the time of the request. Barriers include history of eviction or presence of a criminal history.

**Best Practices for Corrections Partners and Professionals**

DHS recommends the following best practices for corrections partners and professionals:

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<tr>
<th>Best Practices for Corrections Partners and Professionals</th>
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<tr>
<td>Ask about a person’s housing wants, needs, and goals right away – and determine if Housing Stabilization Services could support a person to achieve them</td>
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<tr>
<td>Explain Housing Stabilization Services to people supervised and supported so they can understand what the service does and how it might benefit them. Housing Benefits 101 has an article and brochure about the service to help with that conversation.</td>
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<tr>
<td>Help a person to identify documentation needed and talk through the enrollment process with the person</td>
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<tr>
<td>Help the person access the assessment pathway most appropriate to their situation</td>
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Best Practices for Corrections Partners and Professionals

Verify a person’s enrollment in Medical Assistance; if not enrolled, support the person to apply for Medical Assistance within 45 days of release or help the person connect to a MNsure Navigator in the area to apply for Medical Assistance.

Develop partnerships with MNsure Navigators in your area.

Develop partnerships with enrolled housing consultants willing to enter a facility and complete the Housing Focused Person-Centered Plan before release so it is ready on the day of release; alternatively, help locate an enrolled housing consultant in the planned area of release.

Identify Housing Stabilization Service providers in the community and help connect the person to a provider.

Expand provider pools by recruiting corrections partners to enroll in Housing Stabilization Services to serve this specialty population, or consider enrolling yourself.

Reach out to the enrolled Housing Stabilization Services providers in your area to build relationships and advocate for the housing needs of people you support.

Integrate housing into every communication with people supported, and use Housing Benefits 101 (HB101) as a free resource to support people’s housing goals.

Additional Resources

More information about Housing Stabilization Services may be found in the following resources:

- [DHS Housing Stabilization Services](link)
- [Minnesota Health Care Programs Housing Stabilization Services Provider Manual](link)
- [MinnesotaHelp.info](link) to find providers
- [Person-Served Workflow](DHS-7347)
- [Housing Benefits 101](link)

Additional questions regarding Housing Stabilization Services should be directed to dhshousingstabilization@state.mn.us. Questions related to developing housing stability plans for people under correctional supervision should be directed to housingsupports.doc@state.mn.us and a member of the Department of Corrections Community Stability Team will respond.