

Hello, my name is Jocelyn Stakem, and I am the CHIPP Coordinator/Housing Specialist for Lebanon County Mental Health/Intellectual Disabilities and Early Intervention Program. For reference, CHIPP stands for Community Hospital Integration Project Program. More specifically, the programs that I work with are geared toward adults aged 18 years and older who have been diagnosed with a serious and persistent mental illness (SMI). Lebanon County follows the Office of Mental Health and Substance Abuse Services (OMHSAS) Bulletin which defines the Adult Priority Group for planning and service development for adults with SMI. These disorders include Bipolar Disorder, Major Depressive Disorder, Schizophrenia, Schizoaffective Disorder, Other Specified Schizophrenia Spectrum and Other Psychotic Disorder, and Borderline Personality Disorder.

The county MH system must also adhere to the OMHSAS Bulletin for Cost Centers for County Based Mental Health Programs which specifies allowable cost centers for appropriate reporting and monitoring of expenditure and service information. In Bulletin OMHSAS 12-02, Section 3.22 is titled Housing Support Services (HSS). These support services are “provided to mental health consumers which enable the recipient to access and retain permanent, decent, affordable housing, acceptable to them.” Two services fall under this category – Supportive Living, which is provided to an individual in a setting in which they do not hold a lease and as a condition of retaining the housing, the individual must receive community-based behavioral health services. The setting may be a private residence or apartment, and the services may include life skills or treatment. The other service is Supportive Housing, which is a SAMHSA-recognized Evidence Based Practice (EBP). The services are provided in a setting for which the consumer does hold a lease and there is no requirement that behavioral health services must be received to retain housing. HSS include, but are not limited to the following:

Housing Location/Re-Location Assistance

Renter Skills Training

Emergency Rent or Utility Payments

Landlord/Tenant Negotiations

Rent Guarantees

Security Deposits for Rent or Utilities

Furniture or Household Goods

Moving Assistance

Repair Guarantees

## Interim Rent Assistance

### Assistance in Obtaining Housing Benefits

Under this cost center category, Lebanon County operates a variety of housing programs and services for our individuals. In FY 24 – 25, we served 95 individuals in our housing programs. We operate two transitional housing programs that serve individuals coming from a variety of backgrounds – these include but are not limited to the foster care system, inpatient hospitalization, incarceration, or an unhoused environment. These programs offer a safe place for individuals to use an available opportunity and work with dedicated housing workers as they gain the skills to move on to the next step, with length of stay varying anywhere from several months to a maximum of 18 months in one program. Three of our programs are more permanent in nature. This means that there is no set limit for duration of stay, and the individual can remain in the unit for as long as that setting meets their needs. We also oversee a program where the housing worker meets with individuals in the community. This worker is typically meeting individuals in their own dwelling and assisting them in keeping that unit.

It is important to mention that the MH program cannot operate any of these programs alone. We rely heavily on the partnerships that we have created in enabling us to conduct this work in our community. We are thankful to our partner agencies who assist us daily in meeting the needs of the individuals that we serve – Community Services Group, Keystone Human Services, Lebanon County Housing Authority, Threshold Rehabilitation Services, and WellSpan Philhaven. I am privileged to work with not only my other county partners, but these agency partners who truly understand how important this work is in keeping our individuals housed.

Section 3.16 of the Bulletin is titled Community Residential Services. This cost center “applies to care, treatment, rehabilitation, and social and personal development services provided to persons in a community based residential program which is a Department-licensed or approved community residential agency or home.” Included in this category are the room and board costs associated with the residence. Those costs include food, clothing, and shelter. Of the settings listed under this category, the most applicable to adults are Community Residential Rehabilitation Services (CRRs), Personal Care Homes, Long Term Structured Residences (LTSRs), and Enhanced/Specialized Personal Care Homes. Of note, the Lebanon County MH Program does not have any CRRs or LTSRs within their system of care, which you may find in some of our surrounding counties. Each county must choose and operate the housing initiatives that work best for them, while meeting the needs of their constituents. The money and funding available to that county will also play a part in the decision-making process. Lebanon County does partner with several of our

larger Personal Care Homes within the county to meet the needs of any of our individuals that may reside there, though the county program does not provide any funding for this. We do have one Specialized PCH in Lebanon, which serves eight individuals. The funding for the support services for the Specialized PCH is provided through CHIPP, Base, and HealthChoices Reinvestment, while the individual pays the room and board through their Social Security income.

As mentioned, funding for the county housing programs is based on the above allowable cost centers, and is comprised of federal, state, and county funds, with the county funds being a match. These funds are part of the Community Health Services Block Grant, which multiple departments participate in. It should be noted that there is some flexibility with these funds, however, it is still limited by the constraints of the cost center guidelines. Over the past several years, funding has been flat funding, creating a system where counties do struggle to maintain their existing services without an increase.

Additionally, the HealthChoices system does not pay for housing or any of the support services that are necessary to accompany the housing piece in serving this population. The MH system is heavily reliant on base funds to support the housing programs and services that it creates as well as the ability to sustain it year over year.

The county MH program is classified as the funder of last resort. This means that we are serving extremely low-income individuals, many of whom do not have any insurance or may be part of the HealthChoices system. This is important to keep in mind as we examine that the current average market rent for a one-bedroom apartment in Lebanon can range between \$800 and \$1470/month while the maximum Social Security Income per individual is currently at \$994/month.

I will briefly touch on housing as it relates to Intellectual Disabilities, as this is not my area of expertise. The Office of Developmental Programs (ODP) Multi-Year Program Growth Strategy (MYGPS), introduced the management of the budget process for waiver capacity from ODP to the Administrative Entities (AE). This allows the Administrative Entities to more efficiently manage waiver capacity and is a critical element of the Commonwealth's commitment to ending the emergency waiting list for adults 21 years of age and older.

It is the responsibility of the AE to perform administrative functions for the Waivers and manage enrollment. The number provided for each waiver capacity commitment cannot be exceeded or modified without the approval of ODP. The AEs continue to be responsible for ensuring that individuals needing services are enrolled in the Waivers when there is available capacity.

The idea is that there is a budgeted amount of waiver funding assigned to each AE (county program) per year. Often, budgets for individuals are authorized to maximum funding allowed. However, the counties typically have a percentage of their budgets authorized that are unused at the end of the fiscal year. ODP is expecting the AE to manage the unused funds to increase waiver capacity to enroll additional individuals into services. ODP also expects the AE not to exceed the cap amount of waiver funds provided to the AE, even though there is not a cap attached to the consolidated waiver.

The consolidated waiver can provide Group Home and also LifeSharing services (the two main residential habilitation services provided in the ID/A system). These are very costly services and there is typically a need to authorize funds for individuals above the statewide average for the waiver to ensure the health and safety of the individual. This results in less funding available to the AE to add additional Individuals to the waiver. At this time, Lebanon County has been unable to expand our resources to accommodate additional waiver capacity.

I offer all this information as you have asked me to touch on how my work may impact your future work in policy and legislation. What I can share in my years of working in mental health housing is that it is not just about housing. It's about the support services that must go hand in hand with the housing for the individual to be successful. These are the stories of the individuals that I have seen have the most success – the ones that have come from long-term state hospitalization who are now thriving in their own apartment; the ones who turned 18 and just needed someone to offer them some guidance and support as they make the next step into becoming an adult. These services typically go unnoticed and do not fit “neatly” into any funding stream, but they remain a vital piece of the work that we do in meeting the needs of our community.

I thank you for this opportunity in speaking with you today!