Interim Housing Resources (Motel Interim Stays for Transitions & Emergency Rental Assistance)

Chapter 6B outlines the policies and procedures for interim housing resources available to HCS clients. These resources include Motel Interim Stays for Transitions (MIST) to support individuals who don't have a place to stay, and Emergency Rental Assistance (ERA) is for those facing immediate housing instability due to non-payment of rent. This chapter provides guidance on eligibility criteria, authorization processes, and case management responsibilities to ensure that clients receive timely and appropriate housing support while working toward long-term stability.

Ask the Expert

If you have questions or need clarification about the content in this chapter or about Motel Interim Stay for Transitions, please contact:

Jonnie Matson - Rental Assistance Unit Manager - jonnie.matson2@dshs.wa.gov

If you have questions or need clarification about Emergency Rental Assistance, please email:
emergencyrentalassistance@dshs.wa.gov

If you have questions or need clarification about Motel Interim Stays for Transitions, please email:
mistreferral@dshs.wa.gov

For additional information on HCS housing resources please visit our website:
Office of Housing and Employment

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BACKGROUND

The HCS Office of Housing and Employment (OHAE) is dedicated to offering housing and supported employment resources that honor client choice. We work to eliminate barriers and expand opportunities that align with an individual's vision for their life regardless of mental health, substance use disorder, race, language, age, ability, or other status.

OHAE brings together federal, state, and local resources to create opportunities and strategies to help clients access independent housing, and in collaboration with our community partners, help build an individualized array of services to support them. This chapter provides specific guidance around interim housing and eviction prevention services and can help you refer clients who are eligible for them.

Whenever possible, we can offer guidance about difficult housing situations you might encounter with your client, including tips about working with clients experiencing homelessness. Affordable housing and tenancy support are complex topics that often do not have easy or quick solutions. Please let us know about other topics or obstacles you would like to see addressed in this chapter.

EMERGENCY RENTAL ASSISTANCE (ERA)

ERA is a one-time payment made directly to landlords on behalf of a client receiving Long-Term Services and Supports (LTSS) who is facing an eviction due to non-payment of rent. As part of the assistance request, clients must demonstrate they are able to pay their rent going forward and maintain their independent housing as a part of being stabilized in their community setting. This resource should only be requested when there are no other community options to meet the need fully or partially.
ERA does not include pre-tenancy deposits or move-in costs, including first months' rent required for moving in. There are other resources that may cover these one-time expenses; please see the Transition Resource Guide for more information.

ERA Referral Process

Complete the ERA referral form via SharePoint at Emergency Rental Assistance Referral. If the SharePoint site is down, please contact the Housing Program Managers via emergencyrentalassistance@dshs.wa.gov.

The form will ask for a detailed description of the client's current situation, why they require ERA, and what their plan is for paying rent moving forward. It will also ask you to verify the total rent amount due and what is owed specifically for each month. More information or final verification of the amount due may be requested by the Housing Program Manager prior to approval. Obtain local approval from your supervisor prior to submitting the ERA referral. It may take up to 1-2 business days for the Program Manager to determine eligibility and respond. If you have any questions about ERA, please email your questions to emergencyrentalassistance@dshs.wa.gov.

For clients eligible to receive ERA through the Health-Related Social Needs (HRSN) benefit, clients may also be able to receive assistance with back utility payments in the correlating months of the back rent.

Please fill out the ERA referral form accordingly if a client has back utility bills owed. The HPM will also send approval and direction regarding utility assistance in the ERA approval email.

Once eligibility has been determined an email will be sent with instructions on how to proceed.

The HPM will communicate via email if the client has been determined eligible and will include an ERA Acknowledgment Agreement (AA) for the CM to verbally review with the client. The CM will need to acknowledge they have reviewed the form and initial it and return to the HPM prior to approval.

Upon receipt of ERA Acknowledgment Agreement (AA) the HPM will provide an approval email which will include the RAC and authorization code to use for the ERA payment. There is more than one option, so please use the RAC and code provided to you in the specific email approval for each client.

The HPM will enter a SER note stating that the client has been approved for the ERA service.

The HCS/AAA case manager will be responsible for notifying the HPM immediately if the client no longer requires the ERA payment.

Please note: When using Health Related Social Needs (HRSN) funding, the HCS/AAA case manager will be responsible for completing a Planned Action Notice (PAN). Please see Chapter 27 for additional guidelines around Planned Action Notices. Please see the Housing SharePoint for instructions regarding HRSN PANs.

ERA Payment Process

1. The HCS/AAA case manager will need to authorize a Contracted Provider (Community Choice Guide (CCG) or GOSH Supportive Housing Provider) to make the ERA payment on the client's behalf. If there are other tasks needed to stabilize the client's housing situation, the provider can be authorized additional time for those needs.
    - When authorizing a CCG, the HCS/AAA CM will need to utilize service code SA263 to reimburse the CCG for the time it took the CCG in making the ERA payment and/or coordinating additional support for the HCS client. A GOSH Supportive Housing provider will not need to be reimbursed additional units to make the payment and/or to coordinate additional support.
    - If there is not a CCG or GOSH Supportive Housing Provider available to make the payment, the Spokane Housing Authority may be used as an alternative. Please see the Housing SharePoint for instructions and the request form. Please note: Spokane Housing Authority is not a Community Choice Guide and does not work directly with the client. They are a third-party agency contracted only to make payments. Please note that Spokane Housing Authority has an administration fee for making the ERA payment on behalf of the client. The HCS/AAA will not need to reimburse SHA for the administration fee as of now. This may change in the future.

2. The HCS/AAA case manager or authorized contracted provider will communicate with the landlord or/and property manager and discuss how the ERA Payment will be completed (ex: credit card, in-person via money order/check, or via mailing a check/money order).

3. The HCS/AAA case manager will reimburse the contracted provider for the ERA payment made.

4. Use RAC and authorization code provided by HPM in approval email.

5. Place authorization in "Reviewing" status until a receipt has been received by the HCS/AAA CM. **Please note do not submit authorization to "approval" status until a receipt has been provided by the contracted provider.**

6. Once the HCS/AAA CM receives receipt, they will verify that the amount on the receipt matches the "Reviewing" status authorization. The HCS/AAA CM will update the authorization start and end date to match the receipt's dates of service, which would be the months covered by the ERA.

7. If the amount on the receipt is different than what the HPM approved, you must inform the HPM prior to approving authorization. **If you receive a receipt for a higher amount than the ERA approval and the additional cost is related to a check fee/mail fee or etc., please don't use code SA298 to cover this expense. You will need to use SA297, or SA291, or SA294,U4 depending on the client's eligibility for federal or state funds.**

8. The HCS/AAA CM will move the authorization from "Reviewing" status to Approved.

    - Receipts for all purchases must be included in the participant's electronic case record (ECR). Attach all receipts/bids to the Packet Cover Sheet: Social Services Packet Cover Sheet (DSHS Form 02-615).

    - **Note:** When using RAC 3131 - LTSS Housing Stabilization to make an Emergency Rental Assistance payment, Community Choice Guide Service Code (SA263) can also be authorized under this RAC if the client is eligible for State Funding only.

MOTEL INTERIM STAYS FOR TRANSITIONS (MIST)

The Motel Interim Stays for Transitions (MIST) is a service to pay for a short-term motel/hotel stay offered to minimize the number of clients who discharge to and/or experience episodes of homelessness. MIST aims to minimize the time it takes to get vital LTSS in place and increase the client's chances of ending up on services in their own home. The service can be authorized for up to a six-month period

What Is the Eligibility for MIST?

At the time of the MIST referral submission, the individual needs to have been assessed and determined both functionally and financially eligible for LTSS.

Can a Client Who Declines Personal Care Receive MIST?

- For an initial assessment, a client needs to identify that they want to receive personal care or other Core services. See Chapter 3.
- If a client declines personal care and does not want to have a paid personal care provider, the client's assessment must accurately reflect the client's chosen status of "Client Declines" which means "the client will not want assistance with the task".
- Once a client is determined to be eligible for CFC, COPES or RCL, one of the LTSS from those service packages can be authorized.
- If the individual is Medicaid Personal Care (MPC) eligible, as this LTSS program is limited to personal care services (see chapter 7c), a client who is not declining personal care may access services through a state-funded benefit package. Examples Include:
    - Community Choice Guide through Housing Stability RAC 3131 (see bottom of Chapter).
    - GOSH Supportive Housing Service

Who May Qualify for MIST?

- HCS Subsidy Holders (Bridge & Acute Care Hospital)
    - Bridge Subsidy: HCS clients who have a Bridge voucher issued and are working with an authorized contracted provider on an independent housing search. Please note: MIST should not be used to transition a client out of their SNF unless they cannot stay (ex: insurance stops paying, behaviors, etc.).
    - Acute Hospital Care (ACH) Subsidy: HCS clients transitioning from an Acute Care Hospital (ACH) setting and are working with an authorized contracted provider on an independent housing search.

- GOSH Program: HCS clients who are enrolled in the Governor's Opportunity for Supportive Housing (GOSH) and are at-risk of or experiencing homelessness.

- Civil Transitions Program (5440): HCS clients who are referred through the Civil Transitions Program.

- Other Housing Resource:
    - HCS clients who will be living independently and currently have a resource from a housing agency or program. Examples include Mainstream, NED, Housing Choice, Apple Health & Homes, HEN, HOPWA, VASH, etc.
    - HCS clients who have been approved for a project-based resource and have a move-in-date. Examples might include Tax Credit units, 811 units, or Permanent Supportive Housing units from homeless service agency.

- In-Home Short-Term Displacement: HCS clients who have their own home and a short-term situation that requires them to temporarily vacate. Ex: Pest control or eradication, fire, or flooding. *Approval is at program discretion.*

- Experiencing Homelessness: HCS clients experiencing homelessness, at-risk of homelessness or fleeing domestic violence or other unsafe situations. Ex: staying in a car, park, abandoned building, tent, shelter, or couch surfing. These slots are available monthly on a limited basis. Please see the Housing SharePoint for updates.

Along with meeting one of the above eligibility criteria, to receive MIST clients must also have a Community Choice Guide or GOSH Supportive Housing provider authorized. Working with a Foundational Community Supports-Supportive Housing provider will also qualify, but please check in with HPM to ensure the FCS authorization is active and they are connected with a provider.

MIST Referral Process

1) The HCS/AAA case manager will complete the online request form via MIST Referral

2) Once the referral has been approved by the Housing Program Manager (HPM), the following will occur:

   (a.) The HPM will email a pre-approval, providing the HCS/AAA Case Manager with the Participant Agreement form. The HCS/AAA CM or Contracted Provider will review this form with the client and obtain a signature from the client as well as the CCG/GOSH staff's signature or the HCS/AAA CM's signature, whoever reviews the Participant Agreement with the client, then return the Participation Agreement to the HPM. Please submit a copy of the MIST Participation Agreement to DMS.

   (b.) The HPM will provide the RAC & Service Code to be used, authorization dates, and other pertinent information via email. There is more than one option, so please use the RAC and Service Code provided to you in the specific email approval for each client.

   (c.) The HPM will enter a SER note stating that the client has been approved for Motel Interim Stays for Transitions funds. It will include the RAC/Service Code and authorization dates.

   (d.) The HCS/AAA CM will need to coordinate with the Contracted Provider and notify them that the client has been authorized for Motel Interim Stays for Transitions for a period of up to six months.

   (e.) The HCS/AAA CM must notify the HPM immediately if any of the following occur:

- The client has not secured independent housing within the six-month approval period, and the authorization is ending.
- The client no longer requires MIST.
- The client has left the hotel and has not returned (whereabouts unknown).
- The client violated the Participant Agreement or has caused damage to the motel.
- The client has become ineligible for LTSS or has been inactivated.

Please note: The HCS/AAA CM will need to provide the HPM with the service start and end dates and outcome once the client is no longer using MIST.

(f.) If there are any issues or concerns regarding a MIST client, including eligibility concerns, the HCS/AAA Case Manager should staff with the assigned HPM. Do not close a MIST client prior to staffing with the assigned HPM. The client must remain active on LTSS to continue receiving MIST.

(g.) For clients eligible to receive MIST through the Health-Related Social Needs (HRSN) benefit, the HCS/AAA case manager will be responsible for completing a Planned Action Noticed (PAN). Please see Chapter 27 for additional guidelines about Planned Action Notices. **Please see the Housing SharePoint for instructions regarding HRSN PANS.**

How Is Payment Made for MIST?

1. For a step by step guide on how to enter a MIST authorization, please see the MIST Authorization Desk Guide.
2. If you have any questions about MIST, please email your questions to mistreferral@dshs.wa.gov. However, if your client is already enrolled in MIST, email questions to the assigned HPM.
3. If there is not a CCG or GOSH Supportive Housing provider to make MIST payments to the motel, Spokane Housing Authority can be used to make payment. For this option, a CCG or GOSH Supportive Housing provider must still be available to work with the client while in the motel as the Spokane Housing Authority does not work directly with clients. They are a third-party agency contracted to make payments only. Please note that Spokane Housing Authority has an administration fee for making MIST payment(s) on behalf of the client. The HCS/AAA will need to reimburse SHA for the administration fee. Use the instructions and form available on the Housing SharePoint site for this option.

MIST Guidelines:

1. **Participation Agreement**:
   The client must read, agree to, and physically initial, sign and date the Participant Agreement before MIST is approved. This acknowledges the client understands what is required of them to keep their

motel service. CCG/GOSH staff or HCA/AAA staff must "cosign" this agreement where indicated. Clients must be aware that their MIST service will end when they move into an apartment or other chosen setting, if they leave the motel without notice, or if they violate the terms of the Participant Agreement. Please submit a copy of the signed MIST Participation Agreement to DMS.

2. **Expectations for providers working with MIST clients:**
   Case Manager should include language in the sustainability goals and tasks that indicate expectations for regular contact with the client. The goals and tasks should indicate a minimum of weekly room visits as well as phone calls. Contracted providers should be tasked to also make sure the motel has their contact information for any potential issues. In addition, they should be supporting the client in active housing searches, where applicable. The Case Manager should also direct the provider to inform the LTC CM if the client vacates the room, is asked to leave, or causes damage.
3. **Deposits and damages:**
   Contracted providers can be authorized by the Case Manager to utilize up to a $300 deposit made to the motel upon arrival to cover damages. It can be paid by bundling it with the initial hotel payment for the first 2 weeks of the stay. Balances of damages above and beyond $300 are the client's responsibility to pay, but some clients won't be able to afford this. If the client does not have the funds to pay or the damages are above $300, referring staff should reach out to the assigned HPM for staffing. The contracted provider should not submit an invoice for reimbursement until the damage deposit is resolved (the hold of funds released or credited) to avoid paying for costs not actually charged. Pet deposits or fees are allowed if they fall within the daily room rate. This is in addition to the up-to-$300 damage deposit per motel allowance.
4. **Client ID:**
   Clients are usually required to have valid identification (ID) for a motel stay. Referring HCS/AAA CMs should make sure the client has a valid ID or authorize the contracted provider to assist the client in obtaining it. Many apartments also require valid ID when a client applies, so there are other good reasons that it will be helpful to make sure clients have access to their ID. Clients experiencing homelessness may be eligible for a no cost or reduced cost ID. For clients to access the no cost or reduced cost ID, the HCS/AAA case manager will complete the Request for Identicard form (DSHS form 16-029) and give it to the client to take to their local Department of Licensing office. More information about this service can be found at: ID Help for the Unhoused.
5. **MIST is not a crisis program:**
   MIST is not an emergency service or crisis program. HPMs have up to two business days to respond to submitted requests. HCS/AAA Case Managers should take this into account so they have a clear understanding of the program timeframes and appropriate expectations for responses.

RESOURCES

Housing Team Contacts

Office of Housing and Employment SharePoint

Office of Housing and Employment Website

HCS Housing Resources

LTSS One-Pager

Zero Income One-Pager

Income Discrimination Flyer Tenants: Legal Protection from Source of Income Discrimination

Request for Identicard Form

MIST Field One-Pager

MIST in CARE Authorization

Video: Options for Housing Through Long-Term Care Services

RAC 3132: Health Related Social Needs - Federal

Motel Interim Stays for Transitions (MIST) SA294u1

Motel Interim Stays for Transitions (MIST): is a service to pay for a short-term motel/hotel stay offered to minimize the number of clients who discharge to and/or experience episodes of homelessness. MIST aims to minimize the time it takes to get vital LTSS in place and increase the client's chances of ending up on services in their own home. The service is authorized for up to a 6-month period. Federal MIST is funded via the 1115 waiver in which the Washington State Health Related Social Needs Services Program (HRSN) will allow Medicaid enrollees to receive evidence-based, non-medical services to address an individual's unmet, adverse social conditions that contribute to poor health. This includes temporary housing.	
Who is eligible for federal MIST?	HCS/AAA clients who are receiving Medicaid long-term services who have one of the following qualifications: 1. **HCS Subsidy (Bridge or Acute Care Hospital)** • Bridge Subsidy: HCS clients who have a Bridge voucher issued and are working with an authorized contracted provider on an independent housing search. Client must be required to leave their SNF for non-medical reasons; Bridge clients cannot choose to leave their SNF in order to utilize a MIST funded hotel. • Acute Hospital Care (ACH) Subsidy: HCS clients transitioning from an Acute Care Hospital (ACH) setting, when housing is a barrier. 2. **GOSH Program:** HCS clients who are enrolled in the Governor's Opportunity for Supportive Housing (GOSH) and are at risk of or experiencing homelessness. 3. **Other Housing Resource:** • HCS clients who will be living independently and currently have a resource from a housing agency or program. Examples might include Mainstream, NED, Housing Choice, Apple Health & Homes, HEN, HOPWA, VASH, etc.

	• HCS clients who have been approved for a project-based resource and have a move-in-date. Examples might include Tax Credit units, 811 units, or Permanent Supportive Housing Unit from homeless service agency. 4. **In-Home Short-Term Displacement:** HCS clients who have their own home **and** a short-term situation that requires them to temporarily vacate. Ex: Pest control or eradication, fire, or flooding. 5. **Experiencing Homelessness**: HCS clients experiencing homelessness, at risk of homelessness or fleeing domestic violence or other unsafe situations. Ex: staying in a car, park, abandoned building, tent, shelter, or couch surfing.
What is covered under MIST 294u1?	1. Payment for up to 6-month period for a Medicaid HCS client to stay at a motel/hotel.
What is not covered under MIST 294u1?	1. Deposits 2. Damages (Please see RAC 3131 SA294,U2)
How much can I spend?	1. Up to $5,000 per month for a total of six months. • Note: not to exceed six months
Do I need to use a Community Choice Guide (CCG) or GOSH provider?	**Yes.** 1. The HCS/AAA CM will need to coordinate with the CCG or GOSH provider and notify them that the client has been authorized for Motel Interim Stays for Transitions for a period of up to 6 months. 2. The Contracted Provider should be authorized for the duration of the MIST authorization period. 3. The Contracted Provider should make periodic visits to the client to provide support and assist in a housing search, as needed. 4. The CCG or GOSH provider can make payments, or Spokane Housing Authority can be authorized to make payments.
How do I authorize federal MIST payments?	1. Upon receiving approval for MIST, the HCS/AAA CM will receive an approval email with specific instructions. should open RAC 3132. 2. For instructions on how to authorize MIST payments, please see the MIST Authorization Desk Guide. 3. If you are using Spokane Housing Authority to make the MIST payments, please see the MIST Guide for Spokane Housing Authority Payments.
When do I authorize this service?	1. MIST should only be authorized after a referral has been submitted and approved by the Supportive Housing Program Manager and a hotel/motel have been found.
Are ETRs allowed for federal MIST?	**No.** 1. When the approved MIST amount is above $2000, this will generate an error message in CARE and will require the HCS/AAA CM to reach out to the Housing Program Manager to force the error.

Emergency Rental Assistance SA298

Emergency Rental Assistance (ERA) can be used as a one-time payment made directly to landlords on behalf of an HCS client who is facing an immediate eviction due to non-payment of rent. As part of the assistance request, clients must demonstrate they are able to pay their rent going forward and maintain their independent housing as a part of being stabilized in their community setting. This resource should only be requested when there are no other community options to meet the need fully or partially. Federal Emergency Rental Assistance is funded via the 1115 waiver, in which the Washington State Health Related Social Needs (HRSN) Services Program will allow Medicaid enrollees to receive evidence-based, non-medical services to address an individual's unmet, adverse social conditions that contribute to poor health. These includes rent.	
Who is eligible for federal ERA?	1. An HCS or AAA client who is experiencing or at risk of experiencing homelessness, including facing immediate eviction due to non-payment of rent.
What is covered under federal ERA?	1. A one-time payment made directly to landlords on behalf of an HCS or AAA client who is facing an immediate eviction due to non-payment of rent. 2. Late fees can be included.
What is not covered under federal ERA?	1. ERA does not include pre-tenancy deposits or move-in costs. 2. ERA cannot pay in excess of 150% Fair Market Rent per month and can only pay for a total of six months back rent. 3. Any fees other than late fees.
How do I make payment?	1. The HCS/AAA case manager will need to authorize a Contracted Provider (Community Choice Guide, GOSH Supportive Housing Provider, or Spokane Housing Authority) to make the ERA payment on the client's behalf.
How do I authorize federal ERA	1. Use RAC 3132. 2. Use Service Code SA298 to reimburse the contracted provider for the ERA payment amount approved by the HPM.
When do I authorize this service?	1. ERA should only be authorized after an ERA referral has been submitted and approved by the Housing Program Manager.
Are ETRs allowed for the federal ERA?	**No.** 1. Note: When the approved ERA amount is above $4000, this will generate an error message in CARE and will require the HCS/AAA CM to reach out to the Housing Program Manager to force the error.

RAC 3131: Long-Term Services and Supports Housing Stabilization – State Funds

Governor's Opportunity for Supportive Housing (GOSH) Pre-Tenancy SA299u1

Governor's Opportunity for Supportive Housing (GOSH) Pre-Tenancy	
Who is eligible for GOSH?	HCS/AAA clients who are receiving Medicaid long-term services who are choosing In-Home setting and: 1. Are willing to work with a Supportive Housing Provider, **and** 2. qualify for HCS services (financially & functionally eligible), **and** 3. are discharging or being diverted from Eastern or Western State Hospitals. 4. An individual with a 90- or 180-day commitment order for further involuntary treatment who is discharging from a local community psychiatric facility into Home and Community Services Long-Term Services and Supports (HCS LTSS), or an individual who is detained through the Involuntary Treatment Act who is stabilized and discharged into HCS LTSS prior to the need to petition for a 90- or 180-day commitment order. 5. HCS clients who are currently living in a residential setting who transitioned or were diverted from Western/Eastern State Hospital within the past 18 months, as documented in CARE and counted by the State Hospital Discharge and Diversion (SHDD) team, and wish to live independently.
What is covered under GOSH SA299,U1?	Services that support an individual's ability to prepare for and transition to housing, including direct and collateral services: 1. Screening and housing assessment for individual's preferences and barriers. 2. Developing an individual housing support plan: identifying goals, addressing barriers, establishing approaches to meet goals, including identifying available services and resources. 3. Assisting with eligibility determination, housing applications, subsidy applications, and housing searches. 4. Identifying resources for modifications and/or one-time move-in needs. 5. Assisting in arranging for and supporting details of moving into housing. 6. Training on roles, responsibilities, and rights of tenant and landlord. 7. Developing housing support crisis plan. 8. Maintaining participant and collateral contacts, and timely completion of supportive housing deliverables as outlined in "Service Standards for Providers."
What is not covered under GOSH SA299u1?	1. Rent 2. Move-in costs 3. Utilities

How much can I spend?	1. 160 units per month
Do I need to use a contracted provider?	**Yes.** 1. After a referral has been submitted and approved for GOSH Services, the SHPM will contract a GOSH SHP to work with the client.
How do I authorize GOSH SA299u1?	Once the referral has been accepted by the SHPM: 1. The SHPM will open RAC 3131 – LTSS Housing Stabilization and then the pre-tenancy Supportive Housing service code, SA299-U1, to open the SH authorization in CARE. 2. It is the SHPM's responsibility to open, extend and close authorizations for service code SA299, U1.
When do I authorize this service?	1. After a referral has been submitted and approved for GOSH Services, the SHPM will contract a GOSH SHP to work with the client.
Are ETRs allowed for GOSH SA299u1?	**No.**
What about SA299,U1 for Civil Transitions Program?	1. Supportive Housing services are available through GOSH for those who meet Civil Transition Program eligibility (see Chapter 9b). 2. For clients meeting Civil Transition Program (CTP) eligibility only, use the appropriate CTP RAC and then authorize SA299u1 with the Reason Code "Civil Transitions Program". 3. If a Civil Transition Program client ends up eligible for LTSS: • End CTP RAC • End SA299,U1 authorization, then: ○ Open RAC 3131 LTSS Housing Stabilization ○ Open SA299,U1 and use Reason Code "5440 FEFE", which stands for 5440 Functionally Eligible Financially Eligible.

Governor's Opportunity for Supportive Housing (GOSH) Tenancy H0044

Governor's Opportunity for Supportive Housing (GOSH) Tenancy	
Who is eligible for GOSH?	1. HCS/AAA clients who are receiving Medicaid long-term services who: are choosing In-Home setting **and**: 2. Are willing to work with a Supportive Housing Provider, **and** 3. Qualify for HCS services (financially & functionally eligible), **and** 4. Are discharging or being diverted from Eastern or Western State Hospitals. 5. An individual with a 90- or 180-day commitment order for further involuntary treatment who is discharging from a local community psychiatric facility into Home and Community Services Long-Term Services and Supports (HCS LTSS); or an individual who is detained through the Involuntary Treatment Act who is stabilized and

	discharged into HCS LTSS prior to the need to petition for a 90- or 180-day commitment order. 6. HCS clients who are currently living in a residential setting who transitioned or were diverted from Western/Eastern State Hospital within the past 18 months, as documented in CARE and counted by SHDD team, and wish to live independently.
What is covered under GOSH H0044?	Services to support individuals to maintain tenancy once housing is secured, such as: 1. Early intervention for behaviors that might jeopardize housing, e.g., late rent payment, lease violations, etc. 2. Training on responsibilities and rights of tenant and landlord. 3. Coaching on relationship building with landlords, property managers, and neighbors, and assisting in dispute resolution. 4. Linking with community resources to prevent eviction
What is not covered under GOSH H0044?	1. Rent 2. Move-in-costs 3. Utilities
How much can I spend?	1. 1 unit per month (rate $575)
Do I need to use a contracted provider?	**Yes.** 1. After a referral has been submitted and approved for GOSH Services, the SHPM will contract a GOSH SHP to work with the client.
How do I authorize GOSH H0044?	Once the client has moved into their own apartment: 1. The SHPM will ensure RAC 3131 – LTSS Housing Stabilization's end date matches the CARE Plan end date. 2. The SHPM will close pre-tenancy service code SA299, U1, and open tenancy service code H0044. 3. It is the responsibility of the SHPM to close the authorization for SA299, U1 and open an authorization for H0044. 4. The SHPM will update the tenancy service code, H0044, on an annual basis. If there are any concerns around client eligibility, staff with the SHPM.
When do I authorize this service?	GOSH Services should only be authorized after a referral has been submitted and approved by the Supportive Housing Program Manager. Once the client has moved into their own apartment: 1. The SHPM will ensure RAC 3131 – LTSS Housing Stabilization's end date matches the CARE Plan end date. 2. The SHPM will close pre-tenancy service code SA299, U1, and open tenancy service code H0044. Please note, the date when the tenancy service code, H0044, is opened will vary based on the terms of the SHP's contract.

Are ETRs allowed for GOSH H0044?	**No.**
What about H0044 FOR Civil Transitions program?	1. H0044 should not be used for a client only eligible for the Civil Transition Program. 2. If a Supportive Housing client who was originally Civil Transition Program client ended up eligible for LTSS and secures housing use Reason Code "5440 FEFE", which stands for 5440 Functionally Eligible Financially Eligible.

Motel Interim Stays for Transitions (MIST) SA294u2

Motel Interim Stays for Transitions (MIST): is a service to pay for a short-term motel/hotel stay offered to minimize the number of clients who discharge to and/or experience episodes of homelessness. MIST aims to minimize the time it takes to get vital LTSS in place and increase the client's chances of ending up on services in their own home. The service is authorized for up to a 6-month period.	
Who is eligible for state MIST?	HCS/AAA clients who are receiving Medicaid long-term services who have one of the following qualifications: 1. **HCS Subsidy (Bridge & Acute Care Hospital)** • Bridge Subsidy: HCS clients who have a Bridge voucher issued and are working with an authorized contracted provider on an independent housing search. • Acute Hospital Care (ACH) Subsidy: HCS clients transitioning from an Acute Care Hospital (ACH) setting~~,~~ when housing is a barrier. 2. **GOSH Program:** HCS clients who are enrolled in the Governor's Opportunity for Supportive Housing (GOSH) and are at risk of or experiencing homelessness. 3. **Other Housing Resource:** • HCS clients who will be living independently and currently have a resource from a housing agency or program. Examples might include Mainstream, NED, Housing Choice, Apple Health & Homes, HEN, HOPWA, VASH, etc. • HCS clients who have been approved for a project-based resource and have a move-in-date. Examples might include Tax Credit units, 811 units, or Permanent Supportive Housing Unit from homeless service agency. 4. **In-Home Short-Term Displacement**: HCS clients who have their own home and a short-term situation that requires them to temporarily vacate. Ex: pest control or eradication, fire, or flooding. 5. **Experiencing Homelessness**: HCS clients experiencing homelessness, at risk of homelessness or fleeing domestic violence or other unsafe

	situations. Ex: staying in a car, park, abandoned building, tent, shelter, or couch surfing.
What is covered under MIST 294u2?	1. Payment for up to 6-month period for a Medicaid HCS client to stay at a motel/hotel. 2. Deposits. 3. Damages- (Requires HQ Approval. Please contact the Supportive Housing Program Manager).
What is not covered under MIST 294,U2?	1. Monthly payment that exceeds $4,000.
How much can I spend?	1. Up to $4,000 per month for a total of six months.
Do I need to use a Community Choice Guide (CCG) or GOSH Provider?	**Yes.** 1. The HCS/AAA CM will need to coordinate with the CCG or GOSH provider and notify them that the client has been authorized for Motel Interim Stays for Transitions for a period of up to 6 months. 2. The Contracted Provider should be authorized for the duration of the MIST authorization period. 3. The Contracted Provider should make periodic visits to the client to provide support and assist in a housing search, as needed. 4. The CCG or GOSH provider can make payments, or Spokane Housing Authority can be authorized to make payments.
How do I authorize state MIST?	1. Upon receiving approval for MIST, the HCS/AAA CM will receive an approval email with specific instructions. should open RAC 3131. 2. For instructions on how to authorize MIST payments, please see the MIST Authorization Desk Guide. 3. If you are using Spokane Housing Authority to make the MIST payments, please see the MIST Guide for Spokane Housing Authority Payments. 4. If a client is enrolled in GOSH services, HCS/AAA CM will need to select "2017 Governors Request Supportive Housing" as the reason code. If client is not enrolled in GOSH Service, please select "No reason code needed" as the reason code.
When do I authorize this service?	1. MIST should only be authorized after a referral has been submitted and approved by the Supportive Housing Program Manager and a hotel/motel have been found.
Are ETRs allowed for state MIST?	**No.** 1. Note: When the approved MIST amount is above $2000, this will generate an error message in CARE and will require the HCS/AAA CM to reach out to the Housing Program Manager to force the error.

Housing Subsidy - Purchasing SA294u4

Housing & Employment Stabilization Services (H&ES). These state funded services are intended to fill specific gaps to provide transitional or stabilizing supports for clients who have received a housing or Supported Employment resource or had their housing/employment coordinated through HCS to sustain community living.	
Who is eligible for state H&ES?	When an HCS client meets these qualifications: 1. Is found functionally and financially eligible and received a housing resource or had their housing coordinated through HCS; **or** 2. Is found functionally and financially eligible and enrolled with Supported Employment or had their employment coordinated through HCS; **and** 3. Are transitioning from a hospital, nursing facility, licensed assisted living facility, enhanced services facility, or adult family home to their own home, or are living in the community and need stabilization services to remain there; **and** 4. Do not have other programs, services, or resources to assist them with these costs; **and** 5. Are not eligible for federal funding.
What is covered under state H&ES?	Goods necessary to establish a residence such as essential household furnishings. 1. Items needed to help stabilize community living for a client. 2. Packing assistance. 3. Moving assistance. 4. Utility set-up fees or deposits. 5. Non-recurring health and safety assurances such as pest eradication, allergen control and/or extreme cleaning. 6. Rental deposits: all pre-tenancy payment requirements, including first month's rent, can be bundled as one deposit and reimbursed to a Community Choice Guide or a DSHS contracted Supportive Housing provider.
What is not covered under state H&ES?	1. Recreational or diversional items such as television, cable or DVD players. 2. Assistive Technology.
When do I need a provider contract?	1. A contracted provider (Community Choice Guide or GOSH SHP) will need to be authorized to complete purchases or/and payments on the behalf of the client.
How do I authorize state H&ES?	1. Open RAC 3131-LTSS Housing Stabilization. 2. Use Service Code SA294,U4 to authorize the necessary goods and services. 3. Select the appropriate reason code. Options are "In-Home Community Stabilization or Employment Stabilization"

	4. Note in the Service Episode Record (SER) that the client is eligible for LTSS Housing Stabilization services and that you have Supervisory approval to authorize state only funds. 5. Complete a SER outlining the service you are authorizing and/or the items you are purchasing and how they are necessary for the client's service plan. 6. Receipts for all purchases must be included in the participant's electronic case record (ECR). Attach all receipts/bids to the Packet Cover Sheet: Social Services Packet Cover Sheet (DSHS Form 02-615), prior to sending to DMS.
When do I authorize this service?	When an HCS client meets these qualifications: 1. Is found functionally and financially eligible and received a housing resource or had their housing coordinated through HCS; **or** 2. Is found functionally and financially eligible and enrolled with FCS Supported Employment or had their employment coordinated through HCS; **and** 3. Are transitioning from a hospital, nursing facility, licensed assisted living facility, enhanced services facility, or adult family home to their own home, or are living in the community and need stabilization services to remain there; **and** 4. Do not have other programs, services, or resources to assist them with these costs; **and** 5. Are not eligible for federal funding.
Are ETRs allowed for state H&ES?	**Yes.** 1. An ETR will be required if the total amount of goods & services exceeds $5000. 2. Select "other" for both ETR/ETP category & type. 3. Submit the ETR to "Committee, Housing ETR" 4. Note: If the amount Exceeds $2500, this will generate an error message in CARE and will require the HCS/AAA CM to reach out to the Housing Program Manager to force the error.

Emergency Rental Assistance SA298

Emergency Rental Assistance (ERA) can be used as a one-time payment made directly to landlords on behalf of an HCS client who is facing an immediate eviction due to non-payment of rent. As part of the assistance request, clients must demonstrate they are able to pay their rent going forward and maintain their independent housing as a part of being stabilized in their community setting. This resource should only be requested when there are no other community options to meet the need fully or partially.	
Who is eligible for state ERA?	1. An HCS client who is facing immediate eviction due to non-payment of rent.

What is covered under state ERA?	1. A one-time payment made directly to landlords on behalf of an HCS client who is facing an immediate eviction due to non-payment of rent. 2. Late fees. 3. Other fees that are tied into the lease where client is at risk of eviction if they are not paid.
What is not covered under state ERA?	1. ERA does not include pre-tenancy deposits or move-in costs, including first month's rent.
How do I make payment?	1. The HCS/AAA case manager will need to authorize a Contracted Provider (Community Choice Guide, GOSH Supportive Housing Provider, or Spokane Housing Authority) to make the ERA payment on the client's behalf.
How do I authorize state ERA?	1. Upon approval, the Housing Program Manager will provide instructions to authorize payment to a CCG or GOSH provider. 2. To authorize payment for Spokane Housing Authority, please see the ERA-SHA Reimbursement Guide.
When do I authorize this service?	1. ERA should only be authorized after an ERA referral has been submitted and approved by the Supportive Housing Program Manager. The HCS/AAA CM is only allowed to authorize the amount approved by the SHPM.
Are ETRs allowed for the state ERA?	**Yes.** 1. When the ERA request amount is above $4000, this will generate an error message in CARE that will require the HCS/AAA CM to reach out to the Housing Program Manager to request an ETR and force the error. There is no formal ETR request process.

Community Choice Guide SA263

Payment for specialty services which provide assistance and support to ensure the eligible client's successful transition to the community and/or maintenance of independent housing as authorized by HCS and/or AAA staff.

CCG services may include but are not limited to the following:

- Locating and arranging appropriate, accessible housing; including working with local housing authorities and other community resource providers when applicable.
- Maintaining or assisting with obtaining affordable housing.
- When relevant, liaising among and with the client, nursing or institutional facility staff, case managers, housing providers (including AFH providers), medical personnel, legal representatives, formal caregivers, family members, informal supports and any other involved party.

- Necessary assistance to support the client's community living, including assistance in settling disputes with landlord.
- Educating client on tenant rights, expectations and responsibilities.
- Assisting client with filling out forms and obtaining needed documentation to aid in maintaining successful community living (forms may include initial and renewal voucher forms, lease agreements, etc.).
- Providing emergent assistance to avoid utility shut-off and/or eviction.
- Assisting client with locating and arranging transportation resources to effectively connect with community resources.
- Assisting client to locate and engage community integration activities.
- Training or education to client about accessing community settings or health services.
- Assisting client with finding a qualified caregiver.

Detailed instructions on how to make a CCG referral using Service Codes SA263 can be found in the Chapter 7d: COPES of the LTC Manual.

The updated CCG Activity Tracking Form can be found in the resources section of this chapter and in Chapter 29: Roads to Community Living.

Related WACs:

WAC 388-106-0270: What services are available under Community First Choice (CFC)?

WAC 388-106-0030: Where can I receive services?

WAC 388-106: Long Term Care Services

WAC 388-106-1700 to WAC 388-106-1765: Supportive Housing

Acronyms:

HPM/SHPM: Housing Program Manager/Supportive Housing Program Manager	LTSS: Long-Term Services and Supports	ERA: Emergency Rental Assistance
GOSH: Governor's Opportunity for Supportive Housing	FCS: Foundational Community Supports	SH: Supportive Housing
CCG: Community Choice Guide	SHA: Spokane Housing Authority	PHA: Public Housing Authority
PBV: Project Based Voucher	AMI: Area Median Income	FMR: Fair Market Rent

Forms:

Tips for Maintaining LTSS

https://www.dshs.wa.gov/sites/default/files/ALTSA/hcs/Housing-Employment/ERARequestForm.pdf

REVISION HISTORY

DATE	MADE BY	CHANGE(S)	MB #
5/2020		Established	
8/2020		Added Chapter Section hyperlinks, Section 5B.6 GOSH and link to Supportive Housing WACs	
10/2020		Updated GOSH Pre-Tenancy service code and provided clarification around SHPM vs CM responsibility in "GOSH Client Accepted" section. Added Housing Team contacts under section 5b.11. In section 5b.4 added instruction on how to document HCS subsidy into CARE and Bridge file transition information. Added *Forms* to section 5b.11 including (2) new forms: HCS Bridge Referral and Bridge Referral and Application Process.	
2/2021		Added SA294 subsidy payment authorization information to section 5B.4. Moved GOSH Section from 5B.6 to 5B.5. Added clarification that there is no participation for Supportive Housing services. Added GOSH "Discharge Planning" and "Transition to Independent Housing" sections to 5B.5. Updated hyperlinks.	
5/2021		Deleted SA294 payment authorization process for P1. Added the need for CM support with quarterly Bridge tenancy verifications as well as annual re-certifications. Clarified steps to add "Housing subsidy (HCS/AAA)" and "Supportive Housing (HCS/AAA)" as Treatments on the Medical Screen in CARE. Added new procedure for referring to GOSH, hyperlinked to new DSHS 11-153 GOSH Referral form. Clarified GOSH eligibility and HCS and AAA CMs can refer. Clarified GOSH authorization responsibility. Hyperlinked to Chapter 30d to connect Supportive Housing service consults and consideration. Clarified on-going eligibility for GOSH clients regarding services and subsidy. Hyperlinked to Chapter 30d in the 'How can I use CTS/CTSS/WA Roads section'. Updated PM Roles.	

8/2021		Added new staff contacts for all regions by way of link to RCL Housing Resources website. Updated Bridge Referral form, Participant Agreement and Referral and Application Process form. Added updated ERA form. Updated 811 HCS HPM role regarding DDA/DBHR referrals. Added expanded GOSH eligibility criteria.	
2/2022		Updated various links throughout the chapter. Updated HCS Subsidy P&P inserted Document. Updated Participant Agreement inserted document. Added *What is needed to transfer an HCS subsidy client from HCS to the AAA?* Section. Updated GOSH section to add protocol to staff cases with SHPM prior to closing a GOSH client and protocol related to clients with short term institutional stays (e.g., re-hospitalization or jail).	
8/2022		Added RVP eligibility and availability. Update ERA with Hotel/Motel stay information and Process. Update link to ERA form. Add info from Chapter 5a regarding WA Roads and eligibility from HCS housing resources. Updated language around HCS to AAA case transfers and Annual Assessments for GOSH. Added some hyperlinks into the GOSH Section to animated YouTube Videos: What is the Governor's Opportunity for Supportive Housing?; You've Been Referred to GOSH – Now What?; Governor's Opportunity for Supportive Housing (GOSH): Good Discharge Planning	
11/2022		Added more detailed payment/authorization information for ERA SA298. Added in section from Chapter 5a on how to work with individuals on HCS Housing Resources who are not currently receiving LTSS. Added language on keeping GOSH participants open who are in jail or institutional stays into the Interim Setting section. General text/grammar corrections throughout document. Added Bellingham/Whatcom and Spokane RVP resource.	
2/2023		Updated Unit Manager titles. Updated "NED" section to "permanent HUD voucher" section and added more process details. Updated Chapter Section list to include new 5b.5. Updated 811 sections with more details regarding application process. Removed old versions of forms and added updated versions (Participant Agreement, Tips for Maintaining LTSS, Chapter Version HCS Subsidy P&P and Bridge referral). Added page numbers to footer. Added links to Brochures and Video.	

5/2023		HCS subsidy video link. Updates to Section 5b.5. Updated ERA form.	
8/2023		Updated information in the HCS Subsidy and GOSH sections related to CARE Changes. Clarified language related to ineligibility for permanent HUD vouchers.	
11/2023		Updated Emergency Rental Assistance Form. Clarified language and updated language in section 5b.5 "Working with individuals on HCS housing resources who are not currently receiving HCS LTSS". Updated GOSH Section to include new regional referral email addresses.	
1/2024		Chapter Links added and updated ERA form added	
2/2024		Added a green box in pages 14 & 24 & 29 & 34 with a process for possible no longer functionally eligible HCS clients who are already enrolled in a housing service. Added on page 33 & 34 Motel Interim Stay for Transitions (MIST) program description. Added MIST to Table of contents Page 2. Replaced Washington Roads RAC info in pages 17 & 21 & 29 with new info (RAC 3131- LTSS Housing Stabilization). Added on page 17 (1 d. and the HCS/AAA CM will extend the WA Roads RAC) & (2 i. GOSH Program Manager will end the GOSH authorization and end RAC 3131- LTSS Housing Stabilization, and HCS/AAA CM will end the WA Roads RAC). Removed from page 30 & 31 under reimbursements "while the Supportive Housing services are authorized by SHPM under the service code SA299,U1 the CM would authorize use of any CFC CTS/CTSS/WA Roads funds under a separate service code, dependent upon eligibility and funds used."	
3/27/2024		Updated Bridge documents at bottom of document with most recent versions. Page 11 &12 amended for HCS Bridge Subsidy.	
5/7/2024		Removed Motel/Hotel language from ERA section. Corrected MIST referral email address. Added MIST Request Form. Added bullet on Civil Transition eligibility.	
6/17/2024		Added ERA email address. Updated ERA referral process. Removed "How do I make a referral for a client who I believe is eligible for ERA?" Updated MIST eligibility criteria (Bridge Subsidy, GOSH program, Civil Transitions Program, Other Housing Resource, In-Home Short-Term Displacement, & Limited Residential). Updated MIST referral Process outline. Updated &	

		added "How is payment made for MIST?" process/procedure. Updated MIST Referral Form.	
9/3/2024		Added information regarding Bridge Subsidy waitlist, added information regarding Presumptive Eligibility, added policy information from chapter 9 regarding GOSH client unable to return to residential setting and being admitted to the hospital. Added policy information regarding if a client is incarcerated or hospitalized and how HCS pays the subsidy for up to 6 months. Added Stephen Miller contact info. Added Housing and Employment website, updated links to one pager. Updated table of contents to include Presumptive Eligibility. Added Global Leasing info. Updated GOSH eligibility criteria.	
10/2024	joana	Chapter 5b changed to Chapter 6. Chapter 6 Established	
11/2024	joana	Added information regarding the HCS Acute Care Hospital Subsidy, and the referral/process and referral.	
01/2025	joana	Edited information regarding the HCS Acute Care Hospital Subsidy	
03/2025	joana	Chapter 6 was divided up into 4 sections and renamed. Chapter 6B- Interim Housing Resources (Motel Interim Stay for Transitions & Emergency Rental Assistance) established. Update policy & procedure regarding ERA. Updated OHAE background and EDAI statement. Added a chart describing all the RACs and Service Codes associated with OHAE. Updated criteria, policy & procedure for MIST.	
7/2025	Jonnie	Replaced Shawna Sampson with Jonnie Matson for MIST in the "ask the expert" section; Through chapter changed language that referenced "ALTSA" to "HCS"; Added clarification of when client declines personal care, creating ineligibility for LTSS, client will not be able to receive MIST. When client becomes inactivated on LTSS, the MIST service will end; Added clarification that client must be authorized or on waitlist for CCG, GOSH or FCS-SH services; Added information on RCL and HRSN STRA and how it is used in combination with state dollars to support a client's interim HCS Subsidy.	
9/2025	Jonnie	Added HRSN utility assistance option with HRSN approved ERA. Added eligibility and instruction on using Spokane Housing Authority to make ERA and MIST payments when a provider is not available.	H25-057

		Removed using SA266 to reimburse CCGs for making ERA payments. Added line about providers being allowed to make an additional motel stay payment for a client without having submitted invoices for payment from a previous stay. Added section on MIST eligibility and declining personal care.	
4/2026	Joana	Removed funding chart Updated information regarding SA294,U4. Added info regarding PANs required for HRSN Added info regarding SHAs administration fee reimbursement. Removed ERA referral document.	
07/2026	Tom	Updated contact info for ERA and MIST. Added information to the Q&A section regarding Spokane Housing Authority making payments for MIST and ERA. Added Identicard information.	