

August 7, 2024

Tomiquia Moss
Secretary
Business, Consumer Services and
Housing Agency
500 Capitol Mall, Suite 1850
Sacramento, CA 95814

Gustavo Velasquez
Director
California Department of Housing and
Community Development
2020 West El Camino Avenue
Sacramento, CA 95833

Michelle Baass
Director
California Department of Health Care
Services
1501 Capitol Ave MS 0000
Sacramento, CA 95899-7413

Lindsey Sin
Secretary
California Department of Veterans Affairs
P.O Box 942895
Sacramento, CA 94295

RE: Behavioral Health Transformation (Proposition 1) Recommendations

Dear Secretaries Moss and Sin and Directors Baass and Velasquez:

We, the undersigned, represent a diverse group of local and statewide behavioral health organizations dedicated to ensuring that all Californians have equitable access to high-quality services, enabling them to lead full and purposeful lives. The California Behavioral Health Planning Council (CBHPC), the lead organization of this letter, is a majority Consumer and Family member advisory body to state and local government, the Legislature, and residents of California on behavioral health services.

We support the Administration's goal of reducing homelessness and providing mental health and substance use disorder (SUD) services to some of the state's most vulnerable residents through the Behavioral Health Transformation, and we appreciate the opportunity to provide input. **We strongly urge the California Department of Housing and Community Development (HCD) and California Department of Health Care Services (DHCS) to adopt DHCS Behavioral Health Bridge Housing's (BHBH) definition of homelessness.** This recommendation will expand the number of persons served and maximize funds spent resulting in the successful implementation of Proposition 1's transformation.

We are concerned that the federal definitions of homelessness and chronic homelessness, set forth by the United States Department of Housing and Urban Development (HUD) through the Continuum of Care programs, are too restrictive. Adopting these definitions would exclude vulnerable populations in dire need of housing, particularly those who have been residing in an institutional care facility or the incarceration system for more than 89 days and are exiting the facility or system.

Part of HUD’s eligibility criteria sets an 89-day limit for stays in an institutional setting.¹ This means that individuals incarcerated for more than this period are no longer considered “homeless” even if they have no place to go upon discharge. Additionally, people with behavioral health challenges are often released onto the streets from residential facilities for substance use disorder (SUD) or mental health treatment, jails, prisons, and both locked and unlocked mental health treatment programs as they are not considered “homeless” if they have been in one of these facilities for more than 89 days under federal regulations.

The implications of the federal definitions are substantial, as it impacts individuals’ eligibility for benefits and services, leaving them in a precarious position that would only perpetuate the cycle of homelessness. Additionally, it disincentivizes individuals and families experiencing homelessness from entering much-needed residential treatment programs for mental health or SUD treatment as they fear losing their “homeless status,” which provides an entry into many permanent housing programs.

Recently, the State of California has taken a commendable step by determining that eligibility criteria for homelessness under the Behavioral Health Bridge Housing (BHBH) program administered by DHCS will match the criteria set under the California Advancing & Innovating Medi-Cal (CalAIM) Enhanced Care Management (EMC) program,² rather than the federal HUD criteria. **BHBH’s criteria now include individuals exiting institutions who have no place to go upon release, regardless of length of stay and homeless status prior to entry.**³ Additionally, the timeframe for an individual or family who will imminently lose housing is extended from 14 days for individuals considered homeless under the current HUD definition to 30 days.

Specifically, under the BHBH program, an individual or family experiencing homelessness is defined as meeting one or more of the following conditions:

- *Lacking a fixed, regular, and adequate nighttime residence;*
- *Having a primary residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;*
- *Living in a supervised publicly or privately operated shelter, designed to provide temporary living arrangements (including hotels and motels paid for by federal, state, or local government programs for low-income individuals or by charitable organizations, congregate shelters, and transitional housing);*
- *Exiting an institution into homelessness (regardless of length of stay in the institution);*
- *Will imminently lose housing in the next 30 days;*

¹ Code of Federal Regulations. Title 24, sec. 578.3 Definitions. <https://www.ecfr.gov/current/title-24/subtitle-B/chapter-V/subchapter-C/part-578/subpart-A/section-578.3>

² CalAIM Enhanced Care Management Policy Guide. September 2023. Pgs. 11-12. [ECM Policy Guide Updated September 2023.pdf \(ca.gov\)](https://www.dhcs.ca.gov/Programs/Pages/ECM-Policy-Guide-Updated-September-2023.pdf)

³ DHCS BHBH Program Request for Application Round 3: County Behavioral Health Agencies. Pg. 10. https://bridgehousing.buildingcalhhs.com/wp-content/uploads/2024/01/BHBH_Round_3_RFA_508_Corrected_Dates_final.pdf

- *Fleeing domestic violence, sexual assault, stalking, and other dangerous, traumatic, or life-threatening conditions relating to such violence.*

We also urge the adoption of No Place Like Home’s (NPLH) definition of “at-risk of chronic homelessness” as the definition of “chronically homeless” under Proposition 1 to improve statewide efforts to combat homelessness. NPLH’s definition similarly expanded the definition to allow individuals, including transition-age youth, who have been in treatment or institutional settings to qualify as “at risk of chronic homelessness” to access needed housing. Under this definition, the individual must have had a history of homelessness in the year prior to entering the institution. This is a viable way to include more at-risk individuals in housing limited to chronically homeless persons.

Under the NPLH program⁴ administered by HCD, the following definitions apply:

Applicant is “At Risk of Chronic Homelessness” Persons qualifying under this definition are persons who are at high-risk of long-term or intermittent homelessness:

- *Persons, including Transition-Age Youth, who are exiting an institution or facility and prior to entering into one of the facilities or types of institutional care listed herein, had a history of being Homeless: a state hospital, hospital behavioral health unit, hospital emergency room, institute for mental disease, psychiatric health facility, mental health rehabilitation center, skilled nursing facility, developmental center, residential treatment program, residential care facility, community crisis center, board and care facility, prison, parole, jail or juvenile detention facility, or foster care.*
- *Transition-Age Youth experiencing homelessness or with significant barriers to housing stability, including, but not limited to, one or more evictions or episodes of homelessness, and a history of foster care or involvement with the juvenile justice system; and others as set forth below.*

NOTE: Having a history of being homeless means, at a minimum, one or more episodes of homelessness in the 12 months prior to entering one of the facilities or types of institutional care listed herein. There is no limitation on the length of stay in the institution. Although persons exiting an institution must have a history of homelessness in the 12 months prior to entering the institution, this criterion can be satisfied if, in the 12 months prior to entry into any of the facilities or types of institutional care listed above, have resided at least once in any kind of publicly or privately operated temporary housing, including congregate shelters, transitional, interim, or bridge housing, or hotels or motels.

⁴ ⁴ HCD No Place Like Home Program Round 3 Guidelines. October 2020. Pgs.1-2. <https://www.hcd.ca.gov/grants-funding/active-funding/nplh/docs/nplh-2020-amended-guidelines-clean-version.pdf>

Thank you for considering these recommendations. We believe these definitions will significantly improve the lives of many vulnerable individuals and families across California by providing them with the necessary support and housing stability they need. By adopting these definitions, more people can be served resulting in the successful implementation of Proposition 1.

Should you have any questions, please feel free to reach out to Jenny Bayardo with the California Behavioral Health Planning Council at Jenny.Bayardo@cbhpc.dhcs.ca.gov.

Sincerely,

A handwritten signature in blue ink that reads "Deborah Starkey". The signature is fluid and cursive, with the first name "Deborah" written in a larger, more prominent script than the last name "Starkey".

Deborah Starkey
Chairperson
California Behavioral Health Planning
Council