



## 101ST GENERAL ASSEMBLY

### State of Illinois

2019 and 2020

SB3853

Introduced 2/14/2020, by Sen. Cristina Castro

#### SYNOPSIS AS INTRODUCED:

New Act

Creates the Housing is Recovery Pilot Program Act. Creates the Housing is Recovery Pilot Program within the Division of Mental Health of the Department of Human Services. Provides that the Program shall provide bridge rental subsidies for individuals at high risk of unnecessary institutionalization and individuals at high risk of overdose for purposes of stabilizing their mental illness or substance abuse disorder. Provides criteria for the award, computation, and payment of bridge rental subsidies. Sets forth the responsibilities of persons receiving from bridge rental subsidies. Provides for the identification and referral to the Program of persons eligible to receive bridge rental subsidies prior to their discharge from a hospital or release from a correctional facility. Provides standards for housing service providers, long-term housing, and temporary rental units. Provides that the Department will contract with an independent outside research organization to evaluate the Program's effectiveness, and shall report the results of the evaluation to the General Assembly after 5 years. Provides rulemaking authority. Defines terms. Effective immediately.

LRB101 20770 RLC 70459 b

FISCAL NOTE ACT  
MAY APPLY

A BILL FOR

1 AN ACT concerning health.

2 **Be it enacted by the People of the State of Illinois,**  
3 **represented in the General Assembly:**

4 Section 1. Short title. This Act may be cited as the  
5 Housing is Recovery Pilot Program Act.

6 Section 3. Definitions. As used in this Act:

7 "Individual at high risk of unnecessary  
8 institutionalization" means a person who has a serious mental  
9 illness who is homeless (or will be homeless upon hospital  
10 discharge or correctional facility release) and who has had:

11 (1) Three or more psychiatric inpatient hospital  
12 admissions within the most recent 12-month period, or

13 (2) Three or more stays in a State or county  
14 correctional facility in the State of Illinois within the  
15 most recent 12-month period, or

16 (3) A disability determination due to a serious mental  
17 illness and has been incarcerated in a State or county  
18 correctional facility in Illinois for the most recent 12  
19 consecutive months.

20 "Individual at high risk of overdose" means a person with a  
21 substance use disorder who is homeless (or will be homeless  
22 upon hospital discharge or correctional facility release) who  
23 has had:

1           (A) Three or more hospital inpatient or inpatient  
2 detoxification admissions for a substance use disorder  
3 within the most recent 12-month period, or

4           (B) Three or more stays in a State or county  
5 correctional facility in the State of Illinois within the  
6 most recent 12-month period, or

7           (C) One or more drug overdoses in the last 12 months.

8           "Engagement services" means home-based or community-based  
9 visits that assist the individual with maintaining his or her  
10 housing, and providing other wrap-around support, including  
11 linkage to mental health or substance use recovery support  
12 services. Such engagement services shall align with  
13 Medicaid-covered tenancy support services, and Medicaid  
14 community-based mental health and substance use treatment  
15 services, including case management, to ensure alignment with  
16 any existing or future Illinois Medicaid benefits, waivers or  
17 State plan amendments that include these services, and to  
18 maximize any potential federal Medicaid matching dollars that  
19 may be available to support engagement services.

20           "Homeless" means the definition used by the U.S. Department  
21 of Health and Human Services, Health Resources and Services  
22 Administration in Section 330(h)(5)(A) of the Public Health  
23 Services Act (42 U.S.C. 254(b)). Under Section 330(h)(5)(A), a  
24 homeless individual is an individual who lacks housing (without  
25 regard to whether the individual is a member of a family),  
26 including an individual whose primary residence during the

1 night is a supervised public or private facility that provides  
2 temporary living accommodations, and an individual who is a  
3 resident in transitional housing. This includes individuals  
4 who are doubled up with other households.

5 "Serious mental illness" means at least one of the  
6 following psychiatric illnesses as defined in the most current  
7 edition of the Diagnostic and Statistical Manual published by  
8 the American Psychiatric Association:

- 9 (i) Schizophrenia;  
10 (ii) Paranoid and other psychotic disorders;  
11 (iii) Bi-polar disorders;  
12 (iv) Major depressive disorders;  
13 (v) Obsessive-compulsive disorders;  
14 (vi) Schizoaffective disorders;  
15 (vii) Panic disorders; and  
16 (viii) Post-traumatic stress disorders.

17 "Substance use disorder" as defined in Section 1-10 of the  
18 Substance Use Disorder Act.

19 Section 5. Establishment of program. The Housing is  
20 Recovery pilot program shall be established and administered by  
21 the Department of Human Services, Division of Mental Health.  
22 The purpose of the program is to prevent a person with a  
23 serious mental illness who is at high risk of unnecessary  
24 institutionalization, or a person with a substance use disorder  
25 who is at high risk of overdose, due to homelessness, a lack of

1 access to recovery support services, and repeating cycles of  
2 hospitalizations or justice system involvement from being  
3 institutionalized or dying. This will be accomplished by  
4 enabling affordable housing through the use of a bridge rental  
5 subsidy combined with access to recovery support services or  
6 treatment. The triple aim of Housing is Recovery is:

7 (1) preventing institutionalization and overdose  
8 deaths,

9 (2) improving health outcomes and access to recovery  
10 support services, and

11 (3) reducing State costs.

12 Section 10. Eligibility. An individual meeting the  
13 requirements listed in this Section shall be eligible to  
14 receive a Housing is Recovery bridge rental subsidy for  
15 purposes of stabilizing his or her mental illness or substance  
16 use disorder.

17 (1) An individual at high risk of unnecessary  
18 institutionalization who is 21 years of age or older, or is  
19 aging out of guardianship under the Department of Children  
20 and Family Services, and who is eligible to enroll in, or  
21 is enrolled in, Medicaid for purposes of receiving mental  
22 health treatment pursuant to 89 Ill. Adm. Code 140.

23 (2) An individual at high risk of overdose who is 21  
24 years of age or older, or is aging out of guardianship  
25 under the Department of Children and Family Services, and

1           who is eligible to enroll in, or is enrolled in, Medicaid  
2           for purposes of receiving substance use treatment.

3           Section 15. Housing is Recovery bridge rental subsidy. A  
4           bridge rental subsidy received by an individual (the "subsidy  
5           holder") pursuant to this Act shall mirror the subsidies issued  
6           by the Department of Human Services, Division of Mental Health  
7           through the Moving On Program. The rental subsidy shall be for  
8           scattered-site rental units owned by a landlord or for rental  
9           units secured through a master lease. The rental subsidy shall  
10          assist the subsidy holder with monthly rental payments for rent  
11          that does not exceed the Fair Market Rent published annually  
12          for that year by the U.S. Department of Housing and Urban  
13          Development. The Department of Human Services, Division of  
14          Mental Health shall have the discretion to allow a subsidy to  
15          apply to rent up to 120% of the Fair Market Rent if this is  
16          justified by the lack of available affordable housing in the  
17          local housing market. Community Mental Health Centers  
18          certified pursuant to 59 Ill. Adm. Code 132 or supported  
19          housing service providers participating in this pilot program  
20          shall be responsible for assisting the subsidy holder with  
21          maintaining his or her housing that is supported by the bridge  
22          rental subsidy and either providing or coordinating engagement  
23          services with a mental health or substance use treatment  
24          provider.

25                 (1) The subsidy holder shall be responsible for

1 contributing 30% of his or her income toward the cost of  
2 rent (zero income does not preclude participation).

3 (2) The subsidy holder must agree to sign a lease with  
4 a landlord or a sublease agreement with the Community  
5 Mental Health Center or the housing services provider that  
6 has a master lease for the rental unit and agree to  
7 engagement services initiated by the supported housing  
8 provider, the Community Mental Health Center or contracted  
9 mental health or substance use treatment provider at least  
10 2 times a month, with at least one of those visits being a  
11 home visit. The engagement services shall be permitted in a  
12 home-based or community-based setting, and do not require a  
13 clinic visit.

14 (3) A goal of this program is to encourage the subsidy  
15 holder to engage in mental health and substance use  
16 recovery support services or treatment when the individual  
17 is ready. However, this is a Housing First model that does  
18 not require abstinence from substance or alcohol use and  
19 does not require mental health or substance use treatment.

20 (4) If a subsidy holder does not have an income due to  
21 a psychiatric disability, he or she shall be offered the  
22 opportunity for assistance with filing a "SOAR  
23 application" (Supplemental Security Income (SSI)/Social  
24 Security Disability Income (SSDI), Outreach, Access and  
25 Recovery application) by the Community Mental Health  
26 Center participating in the Housing is Recovery program

1           that is providing his or her mental health support or  
2           treatment within 6 months of the initiation of mental  
3           health services. If the subsidy holder is only receiving  
4           housing support services, the housing services provider  
5           must partner with a Community Mental Health Center to do  
6           SOAR applications for individuals who elect to apply for a  
7           psychiatric disability. A subsidy holder is not required to  
8           apply for a disability determination.

9           (5) The subsidy holder, if he or she is eligible, must  
10          apply for rental assistance or housing through the  
11          appropriate Public Housing Authority within 6 months of  
12          receiving a Housing is Recovery bridge rental subsidy or  
13          agree to apply when it is permissible to do so, and also be  
14          placed on the Illinois Housing Development Authority's  
15          Statewide Referral Network.

16          Section 20. Identification and referral of eligible  
17          individuals prior to hospital discharge or correctional  
18          facility release for purposes of rapid housing post  
19          discharge/release and illness stability. The pilot program is  
20          intended to enable affordable housing to avoid  
21          institutionalization or overdose death by providing for  
22          connection to housing through a variety of settings, including  
23          in hospitals, county jails, prisons, homeless shelters and  
24          inpatient detoxification facilities and the referral process  
25          established must take this into account. Within 2 months of the



1 effective date of this Act, the Department of Human Services,  
2 Division of Mental Health, in partnership with the Department  
3 of Healthcare and Family Services and the Department of Human  
4 Services, Division of Substance Use Prevention and Recovery  
5 (SUPR), the Department of Corrections, and with meaningful  
6 stakeholder input through a working group of Community Mental  
7 Health Centers, homeless service providers, substance use  
8 treatment providers, hospitals with inpatient psychiatric  
9 units or detoxification units, representatives from county  
10 jails, persons with lived experience, and family support  
11 organizations, shall develop a process for identifying and  
12 referring eligible individuals for the Housing is Recovery  
13 program prior to hospital discharge or correctional system  
14 release, or other appropriate place for referral, including  
15 homeless shelters. The process developed shall aim to enable  
16 rapid access to housing post-discharge/release to avoid  
17 unnecessary institutionalization or a return to homelessness  
18 or unstable housing. The working group shall meet at least  
19 monthly prior to development of an administrative rule or  
20 policy established to carry out the intent of this Act. The  
21 Department of Human Services, Division of Mental Health shall  
22 explore ways to collaborate with the U.S. Department of Housing  
23 and Urban Development's Coordinated Entry System and other ways  
24 for electronic referral. The Department of Human Services,  
25 Division of Mental Health and the Department of Healthcare and  
26 Family Services shall collaborate to ensure that the referral

1 process aligns with any existing or future Medicaid waivers or  
2 State plan amendments for tenancy support services.

3 Section 25. Participating Community Mental Health Centers  
4 and housing service provider responsibilities for locating and  
5 transitioning the individual into housing, assisting in  
6 retaining housing, and the provision of engagement and recovery  
7 support services. The Department of Human Services, Division of  
8 Mental Health shall select interested Community Mental Health  
9 Centers that are certified pursuant to 59 Ill. Adm. Code 132  
10 and interested housing service providers for participation in  
11 the Housing is Recovery program.

12 (1) For purposes of incentivizing continuity of care,  
13 the same participating Community Mental Health Center may  
14 be responsible for providing both the housing support and  
15 the mental health or substance use engagement, recovery  
16 support services and treatment to a subsidy holder. If a  
17 housing support services provider does not also provide the  
18 mental health or substance use treatment services the  
19 individual engages in, there must be strong coordination of  
20 care between the housing services provider and the  
21 treatment provider.

22 (2) The provider must demonstrate that the rental units  
23 secured through this program pass minimum quality  
24 inspection standards.

25 (3) Community Mental Health Centers providing housing

1 support through this program shall be responsible for any  
2 SOAR applications for a subsidy holder that has a  
3 psychiatric disability who does not have SSI or SSDI if the  
4 subsidy holder chooses to apply for disability. A housing  
5 services provider delivering the housing support services  
6 through this program must contract with a Community Mental  
7 Health Center to provide assistance with SOAR applications  
8 to subsidy holders electing to apply for SSI or SSDI within  
9 6 months of the subsidy holder receiving the subsidy.

10 (4) Service providers shall be permitted to engage in  
11 master leasing to secure apartments for those who are hard  
12 to house due to criminal backgrounds, history of substance  
13 use and stigma.

14 Section 30. Securing rental housing units for purposes of  
15 immediate temporary housing following hospital discharge or  
16 release from a correctional facility while a long-term rental  
17 unit is secured. Up to 20% of the available annual  
18 appropriation for the Housing is Recovery program shall be  
19 available to Community Mental Health Centers or the housing  
20 services provider for purposes of securing critical time  
21 intervention rental units to house an eligible individual  
22 immediately following discharge from a hospitalization or  
23 release from a correctional facility because locating an  
24 apartment unit for a longer-term one-year lease and the related  
25 move-in can take up to 3 months. Such temporary units may be

1 used for immediate temporary housing, not to exceed 90 days for  
2 purposes of preventing the individual from reentering  
3 homelessness or unstable housing, or avoiding unnecessary  
4 institutionalization. The Department of Human Services,  
5 Division of Mental Health shall allow providers to certify that  
6 such rental units meet minimum housing quality standards and  
7 ensure a process by which community providers are able to  
8 secure vacant rental units for the purpose of immediate  
9 short-term housing post-hospital discharge or correctional  
10 system release while a longer term housing rental unit is  
11 secured.

12 Section 35. Basic move-in expenses. The Housing is Recovery  
13 program shall include reasonable payment for the basic move-in  
14 expenses of the subsidy holder, including, but not limited to,  
15 payment of a security deposit and other move-in fees or  
16 expenses, and basic household supplies and furnishings.

17 Section 40. Subsidy administration. The bridge rental  
18 subsidy administration (such as payment of rent to the landlord  
19 and other administration expenses) and quality inspection of  
20 the rental units may be done by community-based organizations  
21 with experience and expertise in housing subsidy  
22 administration and by Community Mental Health Centers that the  
23 Department of Human Services, Division of Mental Health  
24 determines have the administrative infrastructure for subsidy

1 administration. Such organizations shall manage and administer  
2 all aspects of the subsidy (such as payment of rent, quality  
3 inspections) on behalf of the subsidy holder.

4 Section 45. Landlord education and stigma reduction plan  
5 and materials. The Department of Human Services, Division of  
6 Mental Health, with meaningful input from stakeholders, shall  
7 develop a plan for educating prospective landlords that may  
8 lease to individuals receiving a bridge rental subsidy through  
9 the Housing is Recovery program. This educational plan shall  
10 include written materials that indicate that individuals with  
11 psychiatric disabilities and substance use disorders often  
12 have criminal justice involvement due to their previously  
13 untreated mental health or substance use condition and periods  
14 of homelessness. Implementation of this plan shall be rolled  
15 out in conjunction with the implementation of the Housing is  
16 Recovery program.

17 Section 50. State agency coordination. The Department of  
18 Human Services, Division of Mental Health shall partner with  
19 SUPR to ensure coordination of the services required pursuant  
20 to this Act and all substance use recovery support services and  
21 treatment for which SUPR has oversight. The Department of Human  
22 Services, Division of Mental Health shall also work with the  
23 Department of Healthcare and Family Services to maximize all  
24 recovery support services and treatment that are or can be

1 covered by Medicaid.

2 Section 55. Provider and State agency education on the  
3 pilot program. The Department of Human Services, Division of  
4 Mental Health shall put together written materials on the  
5 Housing is Recovery program and eligibility criteria for  
6 purposes of educating participating providers, county jails,  
7 the Department of Corrections, hospitals and other relevant  
8 stakeholders on the program. The Department of Human Services,  
9 Division of Mental Health shall engage in an ongoing education  
10 effort to ensure that all stakeholders are aware of the program  
11 and how to screen for eligibility and referral.

12 Section 60. Reimbursement for subsidy administration,  
13 housing support and engagement services and other program  
14 costs. The Department of Human Services, Division of Mental  
15 Health shall develop a reimbursement approach for community  
16 providers doing subsidy administration that covers all costs of  
17 subsidy administration, quality inspection and other services.  
18 The Department of Human Services, Division of Mental Health  
19 shall also develop a reimbursement approach that covers all  
20 costs incurred by Community Mental Health Centers and housing  
21 services providers for identifying and securing rental units  
22 for subsidy holders, including all travel related to finding  
23 and locating an apartment and move-in of the subsidy holder,  
24 quality inspections for temporary housing units, completing

1 and submitting SOAR applications, the costs associated with  
2 obtaining necessary documents associated with obtaining a  
3 lease for the subsidy holder (such as obtaining a State ID);  
4 for engagement services not covered by Medicaid; and for any  
5 other reasonable and necessary costs associated with the  
6 program outlined in this Act. Reimbursement shall also include  
7 all costs associated with collecting and tracking data for  
8 purposes of program evaluation and improvement. At the  
9 discretion of the Department of Human Services, Division of  
10 Mental Health, up to 5% of the annual appropriation may be  
11 applied to growing mental health or substance use treatment or  
12 recovery support capacity if a participating provider in the  
13 Housing is Recovery program demonstrates an inability to take  
14 eligible individuals due to such capacity limitations.

15 Section 65. Subsidy termination. The subsidy holder shall  
16 continue to hold the subsidy until he or she receives a housing  
17 voucher or rental subsidy through a Public Housing Authority  
18 unless:

19 (1) The individual has a stay in a nursing home,  
20 Institution for Mental Disease (IMD) or specialized mental  
21 health rehabilitation facility (SMHRF) exceeding 6  
22 consecutive months. During a stay in nursing home, IMD or  
23 SMHRF of less than 6 months, the program will continue to  
24 pay the subsidized portion of the rent in order to maintain  
25 the housing unit for the subsidy holder upon discharge.

1           (2) The individual has a stay in a correctional  
2           facility exceeding 6 consecutive months. During a  
3           correctional facility stay of less than 6 months, the  
4           program will continue to pay the subsidized portion of the  
5           rent in order to maintain the housing unit for the subsidy  
6           holder.

7           (3) A subsidy does not terminate if the subsidy holder  
8           is required to move multiple times due to landlord eviction  
9           or does not engage in treatment, as the target population  
10          for this pilot program is expected to have multiple  
11          barriers to remaining housed.

12          Section 70. Developing public-private partnerships to  
13          expand affordable housing options for those with serious mental  
14          illnesses. The Department of Human Services, Division of Mental  
15          Health shall work with the Department of Healthcare and Family  
16          Services, Medicaid managed care organizations and hospitals  
17          across the State to develop public-private partnerships to  
18          incentivize private funding from hospitals and managed care  
19          organizations to match State dollars invested in the Housing is  
20          Recovery program for purposes of preventing repeated  
21          preventable hospitalizations, overdose deaths and unnecessary  
22          institutionalization.

23          Section 75. Data collection and program evaluation.

24          (a) For purposes of evaluating the effectiveness of the



1 Housing is Recovery program and for making improvements to the  
2 program, the Department of Human Services, Division of Mental  
3 Health shall contract with an independent outside research  
4 organization with expertise in housing services for  
5 individuals with serious mental illnesses and substance use  
6 disorders to evaluate the program's effectiveness on enabling  
7 housing stability, reducing hospitalizations and justice  
8 system involvement, encouraging engagement in mental health  
9 and substance use treatment, fostering employment engagement,  
10 and reducing institutionalization and overdose deaths. Such  
11 evaluation shall commence after 4 years of implementation of  
12 the program and shall be submitted to the General Assembly by  
13 the end of the fifth year of implementation. For purposes of  
14 assisting with this evaluation, the working group established  
15 pursuant to Section 20 shall also make recommendations to the  
16 Department of Human Services, Division of Mental Health  
17 regarding what data must be tracked by providers and the  
18 Department of Human Services, Division of Mental Health to  
19 evaluate the program and to make future changes to the program  
20 to ensure its effectiveness in meeting the triple aim stated in  
21 Section 5.

22 (b) Beginning after the first 12 months of implementation  
23 and on an annual basis, the Department of Human Services,  
24 Division of Mental Health shall track and make public the  
25 following information: (1) the number of individuals receiving  
26 subsidies in reporting period (12-month average); (2)

1 participant demographics including age, race, gender identity,  
2 and primary language; (3) the average duration of time  
3 individuals are enrolled in the program (by months); (4) the  
4 number of individuals removed from the program and reasons for  
5 removal; (5) the number of grievances filed by participants and  
6 a summary of grievance type; and (6) program referral sources.  
7 Reports shall be generated on an annual basis and publicly  
8 posted on the Department of Human Services website.

9 Section 80. Act subject to appropriation. This Act is  
10 subject to appropriation. The appropriation shall be divided  
11 equally between bridge subsidies issued to individuals who are  
12 at high risk of unnecessary institutionalization and those who  
13 are at high risk of overdose.

14 Section 85. Rulemaking authority. Any administrative rules  
15 necessary to implement this Act shall be filed within 12 months  
16 following the effective date of this Act.

17 Section 99. Effective date. This Act takes effect upon  
18 becoming law.