How does each Human Service Organization want to be paid for providing services to Medicaid recipients?

Adaptables gets federal and state dollars, could provide broader services/goods that are outside the scope of current—could be helpful to get a monthly allocation to pay for these and to be the facilitators to get the services/goods.

Greensboro Housing Coalition, could provide housing assessments and pay contractors to make repairs, could do services for supportive housing if had the resources, need to have critical mass to hire a new staff person.

Need seed money upfront rather than reimbursements because can’t always wait for payment monthly.

Do outreach to consumers to find out what their needs are—surveys to find out what no one else is doing in order to document what.

Who will monitor if payment for bundled services?

Housing counselors about rent, mortgage, financial literacy to help Medicaid-enrolled homeowners maintain housing—monthly allocation, per person.

What makes the biggest impact on health (evidence-based)—Which organization has the capacity to do this?

- Community service providers to do home-based to connect super-utilizers get services—FaithHealth
- Housing First for chronically homeless for super-utilizers—Salvation Army, Greensboro Urban Ministries, Open Door Ministries
- Respite Housing for discharge from hospital to homelessness—Haywood ministry (Asheville)
- Money follows the person post-rehab (mortgage/rental)—Financial Pathways of the Piedmont
- Building ramps, accessibility modifications—Community Housing Solutions
- Asthma trigger remediation—Greensboro Housing Coalition

Capacity building for getting up to readiness for delivering this....