POLICY & PROCEDURES POLICY NO:

SUBJECT: Miami-Dade County Homeless Trust Continuum of Care (CoC)
Mainstream Benefits and Resources Policy and Procedures

EFFECTIVE DATE: 11/8/2022

REVISED DATE:

PURPOSE: The purpose of this policy is to ensure mechanisms are in place to rapidly facilitate homeless persons' acquisition of needed government documentation and to connect them to mainstream programs for which they are entitled and eligible with the goal of assisting individuals and families in obtaining and retaining permanent housing. Specific objectives are:

- Endure all providers have ESS Partner Network (fka. ACCESS) training and have the capacity to enroll their clients online for Medicaid, Food Stamps and Temporary Assistance for Needy Families (TANF).
- Educating and assisting all people experiencing homelessness with access to and
 use of mainstream benefits and resources (i.e. Medicare, Medicaid, Supplemental
 Security Income (SSI), Social Security Disability Insurance (SSDI), Food Stamps,
 Temporary Assistance for Needy Families (TANF), employment assistance
 programs, early childhood education, health and behavioral health services,
 substance abuse programs).
- Ensuring all CoC funded providers working with people experiencing homelessness have written policies and procedures governing their role in assisting their clients in accessing mainstream benefits and resources.
- Ensuring the CoC funded providers are effective in their efforts to assist their clients to access mainstream benefits and resources.
 - Ensuring that a CoC-wide approach is applied and that the work of connecting clients to mainstream programs is not the work of a single agency or CoC-funded program.

SCOPE: Miami-Dade County Homeless Trust Continuum of Care (CoC)

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PROCEDURES:

I. Role of HMIS

The HMIS or comparable database must be used to ensure a system-wide method of tracking (a) assessment of need for mainstream benefits, resources and services ("mainstream benefits"); (b) current receipt of such mainstream benefits; (c) application or enrollment for mainstream benefits; (c) and status of provider efforts to ensure commencement of mainstream benefits.

II. Provider Responsibility

- 1. The measures below must be initiated by the first program in which the client is placed through CoC Coordinated Entry (specialized Street Outreach, Emergency Shelter, RRH or PSH provider):
 - **a.** Assist the client in securing government documents as described below.
 - **b.** Review the HMIS record of mainstream benefits to determine which benefits, resources or services the client is currently receiving, the status of application for or enrollment in mainstream benefits and the efforts of other CoC providers to assist the client in accessing such mainstream benefits.
 - **c.** Perform an assessment of need for mainstream benefits.
 - **d.** Initiate application or enrollment for clients in need of mainstream benefits and coordinate efforts of other CoC providers who initiated such application or enrollment.

2. Schedule of Activities

The above measures must take place in accordance with the following schedule to ensure timely assessment and application and/or enrollment for mainstream benefits:

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Assessment of Need for Benefits	Assessment must take place no later than 10 days of Program placement.
Government Documents	Within 60 days of placement, provider will attempt to have the necessary documents in hand.
Application or Enrollment:	Within 30 days of Assessment, provider has submitted application(s) for the client or enrolled the client in benefits identified in the Assessment. The date of submission or enrollment must be recorded in the client's HMIS Benefits record.
Follow-Up on Applications:	Provider must conduct frequent follow-up efforts on behalf of the client to determine status of benefit application(s). Such efforts must be documented in the client's HMIS Benefits record.
Follow-Up on Start of Benefits	Upon notice of approval for benefits or confirmation of enrollment, provider must monitor the actual receipt of the benefit and record date that such benefit commenced in the client's HMIS Benefits record. Provider must include a copy of the HMIS Benefits record reporting commencement of benefits in the client's case management file.

III. Government Documents

The provider must ensure that the client applies for the following government documents no later than thirty (30) days of placement:

- Birth Certificate
- Social Security Card
- Government-issued Photo Identification
- Medicaid or Medicare Card (if approved or eligible)
- Veteran Specific Documentation and Benefits (veterans' disability, veterans' pension)
- Immigration Documents (Alien Registration Card, Naturalization Papers)

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In addition, the provider must refer client for assistance with sealing and expungement of criminal history records and/or juvenile records in order to remove barriers to housing and employment.

IV. Financial Services

Client should be assisted as soon as possible in securing a bank account or reputable alternative banking service by which to receive cash assistance or employment earnings.

V. Mainstream Benefits and Resources

The list of resources can be found on our website under forms, titled *Mainstream Benefits*, which highlights the most common mainstream benefits or resources, including basic services, cash benefits, health coverage and services, education and employment programs and mainstream housing options. It is not a comprehensive list. Providers are expected to be familiar with the mainstream benefits, resources and programs that available at a federal, state and local level, the program administrators or providers and the application or enrollment process. Any individual whose public benefits are reduced, terminated, or denied should be referred for free legal assistance. Providers with HMIS entry/exit access can utilize the *Miami-Dade CoC Mainstream Benefits Assessment*.

VI. Provider Mainstream Benefits Policies and Procedures:

- 1. Providers that receive CoC funds must implement policies and procedures for client enrollment into mainstream benefits. This will include:
 - The provider's role and function in ensuring household mainstream benefit enrollment.
 - The manner in which clients are assessed for mainstream benefits.
 - Staff responsibility and processes in assisting clients to make appointments, arrange for transportation and access to appropriate mainstream benefits.
 - Identifying and implementing strategies for successfully enrolling persons in mainstream benefits.
 - Providing information and education on mainstream benefits to those experiencing homelessness in a clear, concise, culturally competent manner to: (a) promote client

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understanding of the benefits, enrollment process and requirements to maintain the benefits, (b) assess the client's ability, and the need for assistance, to navigate the enrollment process; and (c) encourage self-advocacy for benefits and other mainstream resources.

- Recording and documenting benefits application and enrollment progress in client records. At a minimum, a current print-out of the HMIS Benefits record reporting application or enrollment dates, application follow-up and commencement date of benefits must be placed in the client's case management file on a monthly basis.
- 2. The policies and procedures must incorporate the schedule of activities described above to ensure timely assessment and application and/or enrollment for mainstream benefits.
- 3. Failure to implement such policies and procedures may result in a finding, negatively impacting the provider's standing with the Homeless Trust and/or ability to participate in upcoming CoC competition for funds. The Homeless Trust will ensure compliance through monitoring.
- 4. Providers' effectiveness will be measured by increases in clients' non-employment income, HMIS record audit and other methods established by the Homeless Trust to measure mainstream benefit enrollment.

VII. SOAR Application Process for Disability Benefits

- 1. Providers must utilize the SOAR Application process designed to streamline SSI/SSDI eligibility determinations for persons at risk or experiencing homelessness.
- 2. Providers must have at least one staff person well-informed on the SOAR Model and, preferably, a staff person who has completed the Florida SOAR Online Course and deemed a SOAR-trained Case Worker with competency to process SOAR applications on behalf of clients. The Online Training can be found at https://soarworks.samhsa.gov/course/soar-online-course-adult-curriculum
- 3. If a provider does not have in-house competency to process a SOAR application, the provider must identify and coordinate with a provider with a SOAR-trained Case Worker to process a SOAR application on behalf the client.

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VIII. Trainings

- 1. The Trust will invite mainstream benefits agencies to conduct informational and benefit enrollment training sessions for CoC providers.
- 2. Providers will conduct, or arrange for, internal staff trainings on available mainstream benefits, eligibility criteria and enrollment processes.

IX. Evaluation of Systemic Effectiveness

As part of the Annual System Gaps and Needs analysis, the Homeless Trust will solicit input from providers and persons with lived experience regarding barriers experienced by clients in accessing and receiving benefits as well as the barriers faced by providers in their effort to assist their clients with benefit enrollment.

Based on such input, the Committee will propose recommendations to improve efforts within the CoC to enroll clients in mainstream benefits and recommendations to be directed toward agencies responsible for administering such benefits.

X. Innovation

The Homeless Trust will encourage and collaborate with providers and community partners on innovative efforts to bring mainstream benefits to bear on resolving the causes of homelessness and address the needs of individuals and families experiencing homelessness.

TOOLS: Wellsky HMIS: Miami-Dade CoC Mainstream Benefits Assessment