

118TH CONGRESS  
1ST SESSION

**S.** \_\_\_\_\_

To direct the Secretary of Health and Human Services to provide guidance to State Medicaid agencies, public housing agencies, Continuums of Care, and housing finance agencies on connecting Medicaid beneficiaries with housing-related services and supports under Medicaid and other housing resources, and for other purposes.

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IN THE SENATE OF THE UNITED STATES

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Mr. MARKEY (for himself, Mr. PADILLA, Mr. BLUMENTHAL, and Mr. BOOKER) introduced the following bill; which was read twice and referred to the Committee on \_\_\_\_\_

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**A BILL**

To direct the Secretary of Health and Human Services to provide guidance to State Medicaid agencies, public housing agencies, Continuums of Care, and housing finance agencies on connecting Medicaid beneficiaries with housing-related services and supports under Medicaid and other housing resources, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Housing Alignment  
3 and Coordination of Critical and Effective Supportive  
4 Health Services Act” or the “Housing ACCESS Act”.

5 **SEC. 2. GUIDANCE TO STATES ON CONNECTING MEDICAID**  
6 **BENEFICIARIES WITH HOUSING-RELATED**  
7 **SERVICES AND SUPPORTS AND OTHER HOUS-**  
8 **ING RESOURCES.**

9 (a) IN GENERAL.—Not later than 12 months after  
10 the date of enactment of this Act, the Secretary of Health  
11 and Human Services, in consultation with the Secretary  
12 of Housing and Urban Development and the Secretary of  
13 Treasury, shall issue guidance to State Medicaid agencies,  
14 public housing agencies, Continuums of Care, and housing  
15 finance agencies to connect individuals who are receiving  
16 medical assistance under a State Medicaid program to  
17 Medicaid housing-related services and supports and other  
18 housing resources in an integrated manner.

19 (b) REQUIRED INFORMATION.—The guidance issued  
20 pursuant to subsection (a) shall include information on—

21 (1) simplifying health care services for housing  
22 and homelessness service providers and simplifying  
23 housing support services for health care service pro-  
24 viders to understand the respective sectors;

25 (2) developing a memorandum of understanding  
26 between State Medicaid agencies, public housing

1 agencies, Continuums of Care, and housing finance  
2 agencies that—

3 (A) coordinates housing-related services  
4 and supports provided under a State Medicaid  
5 program with other housing resources by align-  
6 ing—

7 (i) eligibility criteria;

8 (ii) eligibility determination processes;

9 and

10 (iii) outcome measures, including  
11 housing stability and health outcomes  
12 disaggregated by race;

13 (B) encourages providers of housing-re-  
14 lated services and supports to seek reimburse-  
15 ment for such services and supports through  
16 the State Medicaid program, including by—

17 (i) explaining how such providers may  
18 receive such reimbursement;

19 (ii) helping such providers understand  
20 the eligibility determination process for  
21 housing-related services and supports of-  
22 fered under the State Medicaid program;

23 and

24 (iii) providing guidance with respect  
25 to tracking common outcome measures, in-

1 cluding housing stability and health out-  
2 comes disaggregated by race; and

3 (3) existing authorities under which a State  
4 Medicaid program may make Federal funds available  
5 to providers of housing-related services and supports  
6 to build information technology and financial sys-  
7 tems and establish adequate infrastructure and  
8 staffing levels to seek Medicaid reimbursement.

9 (c) REPORTING.—Not later than 2 years after the  
10 date of enactment of this Act, the Secretary of Health and  
11 Human Services, in consultation with the Secretary of  
12 Housing and Urban Development and the Secretary of  
13 Treasury, shall submit a report to Congress that in-  
14 cludes—

15 (1) information on the progress of State Med-  
16 icaid agencies, public housing agencies, Continuums  
17 of Care, and housing finance agencies in aligning eli-  
18 gibility criteria, eligibility determination processes,  
19 and outcome tracking;

20 (2) information on the adoption by such agen-  
21 cies and Continuums of Care of recommendations  
22 made in the guidance issued pursuant to subsection  
23 (a); and

24 (3) feedback from States on such guidance and  
25 challenges faced by States in connecting individuals

1 receiving medical assistance under a State Medicaid  
2 program with housing-related services and supports  
3 and other housing resources.

4 (d) DEFINITIONS.—In this section:

5 (1) CONTINUUM OF CARE.—The term “Con-  
6 tinuum of Care” has the meaning given such term  
7 in section 578.3 of title 24, Code of Federal Regula-  
8 tions.

9 (2) STATE MEDICAID PROGRAM.—The term  
10 “State Medicaid program” means a State plan for  
11 medical assistance under title XIX of the Social Se-  
12 curity Act (42 U.S.C. 1396 et seq.), and includes  
13 any waiver of such a plan.

14 **SEC. 3. NATIONAL RATE STUDY ON THE COST OF HOUSING-**  
15 **RELATED SERVICES AND SUPPORTS.**

16 (a) IN GENERAL.—The Secretary of Health and  
17 Human Services (referred to in this section as the “Sec-  
18 retary”) shall conduct a national rate study on the cost  
19 of housing-related services and supports to determine ap-  
20 propriate rates for such services and supports that will  
21 allow providers of such services and supports to pay living  
22 wages, reduce staff turnover, and ensure a maximum case  
23 manager-to-client ratio of 1:15 in alignment with the evi-  
24 dence-base for strong supportive housing outcomes. Such  
25 study shall include an analysis of reimbursement rates for

1 services provided by certified community behavioral health  
2 clinics (as such term is used in section 223 of the Pro-  
3 tecting Access to Medicare Act of 2014 (42 U.S.C. 1396a  
4 note)) and Federally-qualified health centers (as defined  
5 in section 1905(l)(2)(B) of the Social Security Act (42  
6 U.S.C. 1396d(l)(2)(B))) that promote integrated care,  
7 which may include, but is not limited to, housing-related  
8 supports and services, and serve people with complex con-  
9 ditions.

10 (b) PUBLICATION.—Not later than 2 years after the  
11 date of enactment of this Act, the Secretary shall publish  
12 the results of the study conducted under this section as  
13 guidance to State Medicaid agencies.