

Housing Stabilization Services: Conflict of Interest Requirements and Forms



Home and Community-Based Services: Conflict of interest requirement

Assessment

- Health professional (physician, NP, social worker, etc.) OR
- LTCC certified assessor OR
- Trained CES assessor

Housing-focused plan

- Case manager OR
- Enrolled Housing
 Consultation provider

May be same provider

Housing Transition and Sustaining Services

Enrolled Housing
Stabilization Services
provider



Home and Community-Based Services: Conflict of Interest Requirement EXCEPTIONS

A conflict of interest exception is required for a provider agency to do the assessment/plan and transition/sustaining service for the same person.

Conflict of interest exceptions are only for provider shortage by:

- geographic area
- cultural/language specific providers

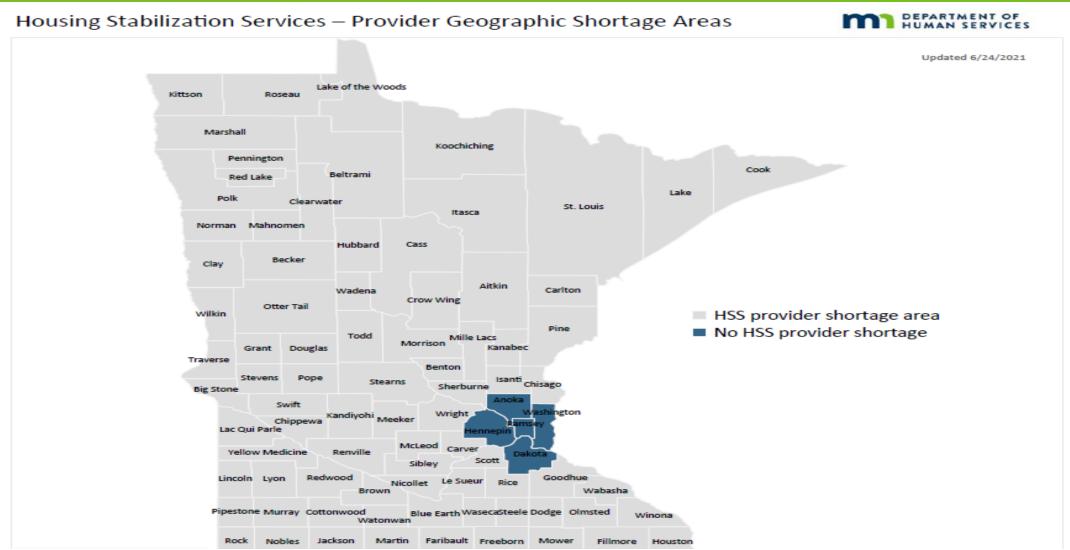
Providers will submit an exception request to DHS to determine if they can waive the conflict of interest.

Geographic Conflict of Interest Form and Updated Map

- Providers will complete the **Geographic Conflict of Interest Exception Request (DHS-7342)** when they feel they meet geographic shortage area criteria in order to waive the conflict of interest standards required for Housing Stabilization Services.
- Providers seeking an exception must not only satisfy the shortage area criteria, but also attest that safeguards are in place to protect against conflicts of interest.
- The provider's Minnesota Health Care Programs (MHCP) enrollment location must be in one of the counties in a geographic shortage area.
- If a provider location is within a geographic shortage area and has met the exception criteria, they will still need to meet the conflict of interest requirements in counties where they provide services that are not geographic shortage areas.

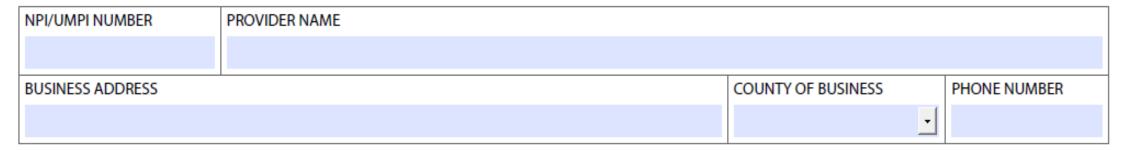


Geographic Conflict of Interest Form and Updated Map





Provider Information



<u>Provider Information</u>: Fill in the required fields using the provider's business address.

<u>Shortage Area Criteria</u>: In order for DHS to determine if the provider operates within a designated shortage area, providers submit evidence to verify business location.

Protections and Safeguards:

Housing Stabilization Services providers must attest that protections and safeguards are in place before offering assessments, person-centered plans, and transition or sustaining services. This provider attests that: (Check all boxes to indicate you attest to these requirements)

- The provider will prohibit the same professional within the organization from conducting the assessment or person-centered plan and providing transition/sustaining services to the same person.
- The provider will document the use of different professionals within the organization if an exception is granted based on record retention practices and the type of record-keeping system utilized (paper, electronic, hybrid).
- Have available a copy of the provider's proposed housing case plan or service plan which indicates that a person was notified of the conflicts, the dispute resolution process, and that the person exercised their right in free choice of provider after notification of the conflict.
- Have available a copy of the provider's policy or procedure involving a Housing Stabilization Services participant's fair hearing rights, ability to change providers, and ability to request different professionals from within the same agency. If available, have a copy of the notification of the safeguards to give to a person.

<u>Protections and safeguards:</u> If a provider successfully demonstrates that it is in a shortage area, it must also attest that it has the required safeguards in place to protect against conflicts of interest.

Signature:

I, the undersigned, acknowledge:

- I am authorized to complete and submit this form on behalf of the agency identified above;
- I reviewed all policies and procedures related to conflict of interest provisions;
- I understand DHS will review the provider shortage area annually and may re-establish the approved provider shortage area.
- I understand that as a result of DHS' reassessment, my agency may no longer be identified as practicing in a provider shortage area; that once a provider shortage area no longer exists, my agency can no longer assess or develop the person-centered plan and also provide housing transition/sustaining services for the same person.

SIGNATURE	TITLE
PRINTED NAME	EMAIL ADDRESS

An **authorized provider representative** must sign and complete the Conflict of Interest Exception Instructions. Contact information must be available for this representative should questions arise during the review process.

- Once the form is complete, e-mail it to the Housing Stabilization Services Exception Request Review Team at dhs.hss.exceptionrequest@state.mn.us
- The subject line of the e-mail should read: [Provider name Conflict of Interest Geographic Exception Request]
- DHS will process the e-mail and review exception requests as soon as possible, in the order received. Once a decision has been made, you will receive a copy of this form with the DHS section completed for your records.
- The certification will be good **three years** from the date of approval, so providers must resubmit this form every three years to waive the conflict of interest requirements.
- DHS will evaluate gaps in capacity and provider shortages annually. If a provider is no longer
 in a county that is part of a shortage area, they will have 90 days to come into compliance
 with the conflict of interest requirements

Cultural Conflict of Interest Form and Documentation

Providers complete the **Cultural Conflict of Interest Exception Request (DHS-7343)** when they feel they meet cultural or common language shortage area criteria in order to waive the conflict of interest standards required for the housing stabilization services program.

Providers seeking an exception must not only satisfy the shortage area criteria, but also demonstrate that safeguards are in place to protect against conflicts of interest.

- For the purposes of this form, **culture** may be defined as: race, ethnicity, geographic location, history, values, and shared spaces that are influenced by a characteristic which develops meaning among people, allows people to be who they are, and empowers people to take pride in their lived experiences.
- Examples of shared cultures may include racial or ethnic groups, LGBTQIA, deaf and hard of hearing, or military personnel and veterans.
- Culturally-Specific or Common Language criteria is satisfied when the provider demonstrates it is the only willing and qualified provider with the experience and knowledge to perform culturally appropriate assessments and person-centered care plans, as well as provide culturally responsive sustaining and/or transition services.

Culturally-Specific or Common Language Criteria is satisfied by selecting one of two options:

A. The provider is located on, or operated by, a tribal nation, or under contract with a tribal nation to provide services.

- If this option is checked, the "Name of Tribe" must be selected by the tribal nation or contracted provider.
- No additional documentation is required with this option.

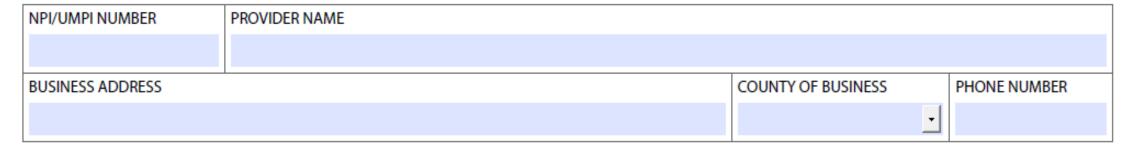


Culturally-Specific or Common Language Criteria is satisfied by:

- B. The provider, not located on or operated by a tribal nation, demonstrates at least two of the following requirements:
- The provider offers culturally-specific or language-appropriate services for the population served. Allowable documentation includes at least two of the following: provider/agency mission statement, service list with integrated culturally-specific services, and agency work plans (addresses recipients needs and questions related to their services) or policies which guide the providers approach to cultural responsivity.
- Staff share the same cultural identity or speak the common language of population served; or Staff receive culturally-specific training and/or training regarding common language needs based on population served. Documentation must be submitted which connects the population served to the training plans of the agency, including certificates of completion (if any) for staff active with the agency, and;
- 75% of the provider's total client population share a common language or cultural identity. Documentation must be submitted which demonstrates the proportion of people served sharing a common cultural identity or language as compared to all people served.

- Once the form is complete, e-mail it to the Housing Stabilization Services Exception Request Review Team at dhs.hss.exceptionrequest@state.mn.us
- The subject line of the e-mail should read: [Provider name Conflict of Interest Cultural Exception Request]
- DHS will process the e-mail and review exception requests as soon as possible, in the order received. Once a decision has been made, you will receive a copy of this form with the DHS section completed for your records.
- The certification will be good **three years** from the date of approval, so providers must resubmit this form every three years to waive the conflict of interest requirements.

Provider Information



<u>Provider Information</u>: Fill in the required fields using the provider's business address.

<u>Shortage Area Criteria</u>: In order for DHS to determine if the provider operates within a designated shortage area, providers submit evidence to verify business location.

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Protections and Safeguards:

Housing Stabilization Services providers must attest that protections and safeguards are in place before offering assessments, person-centered plans, and transition or sustaining services. This provider attests that: (Check all boxes to indicate you attest to these requirements)

- The provider will prohibit the same professional within the organization from conducting the assessment or person-centered plan and providing transition/sustaining services to the same person.
- The provider will document the use of different professionals within the organization if an exception is granted based on record retention practices and the type of record-keeping system utilized (paper, electronic, hybrid).
- Have available a copy of the provider's proposed housing case plan or service plan which indicates that a person was notified of the conflicts, the dispute resolution process, and that the person exercised their right in free choice of provider after notification of the conflict.
- Have available a copy of the provider's policy or procedure involving a Housing Stabilization Services participant's fair hearing rights, ability to change providers, and ability to request different professionals from within the same agency. If available, have a copy of the notification of the safeguards to give to a person.

<u>Protections and safeguards:</u> If a provider successfully demonstrates that it is in a shortage area, it must also attest that it has the required safeguards in place to protect against conflicts of interest.

Signature:

I, the undersigned, acknowledge:

- I am authorized to complete and submit this form on behalf of the agency identified above;
- I reviewed all policies and procedures related to conflict of interest provisions;
- I understand DHS will review providers on a three year basis, and will require providers to resubmit this form in order to attest to protections and safeguards in place and provide documentation to show how they meet the cultural criteria;
- I understand that as a result of DHS' reassessment, my agency may no longer be identified as practicing in a provider shortage area; that once a provider shortage area no longer exists, my agency can no longer assess or develop the person-centered plan and also provide housing transition/sustaining services for the same person.
- I attest that if the population I am serving changes, I will contact the Department of Human Services, and understand my Cultural Conflict of Interest exception will be reevaluated.

SIGNATURE	TITLE
PRINTED NAME	EMAIL ADDRESS

An **authorized provider representative** must sign and complete the Conflict of Interest Exception Instructions. Contact information must be available for this representative should questions arise during the review process.

Next Steps in the Conflict of Interest Form Submission

- Forms will are anticipated to be available by the end of August 2021 through the edocs repository and the Housing Stabilization policy page.
- A GovDelivery will be sent out with further details once these forms become available.
- Providers can start submitting forms if they feel they meet the cultural or geographic shortage criteria.
- Forms will be processed in the order received, with the anticipated processing time of two weeks.
- Providers can submit these forms at anytime.
- The certification will be good **three years** from the date of approval, so providers must resubmit this form every three years to waive the conflict of interest requirements.

5/17/2022





Thank you for your participation!

Visit our <u>webpage</u> Contact us at: <u>dhshousingstabilization@state.mn.us</u>

Sign up for our mailing list to stay updated about our program here.