

2025 IHCP Works
Annual Seminar



**Social Determinants
Of Health (SDOH):**
Housing is Healthcare-
*Advancing Health
Through Stable Housing*

2025 Indiana Health Coverage Programs
(IHCP) Annual Works Seminar

Agenda

- Key Terms
- Who We Are
- Housing Insecurity in Indiana
- Providers are Part of the Solution
- Additional Information and Referral Resources
- Questions and Discussions

Who We Are

Who is MHS

Managed Health Services (MHS) is a health insurance provider that has been proudly serving Indiana residents for 30 years through Hoosier Healthwise (HHW), the Healthy Indiana Plan (HIP) and Hoosier Care Connect(HCC).

Key Terms

What are SDOH's?

Social Determinants/Drivers of Health (SDOH): The conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

The concept of SDOH supports the idea that if someone is trying to find or handle his or her basic needs, such as housing, food, childcare, and medications.

Connecting members to a housing resource, food resource, or transportation can help meet basic needs, allowing us to then address their health needs.

Review of Key Terms

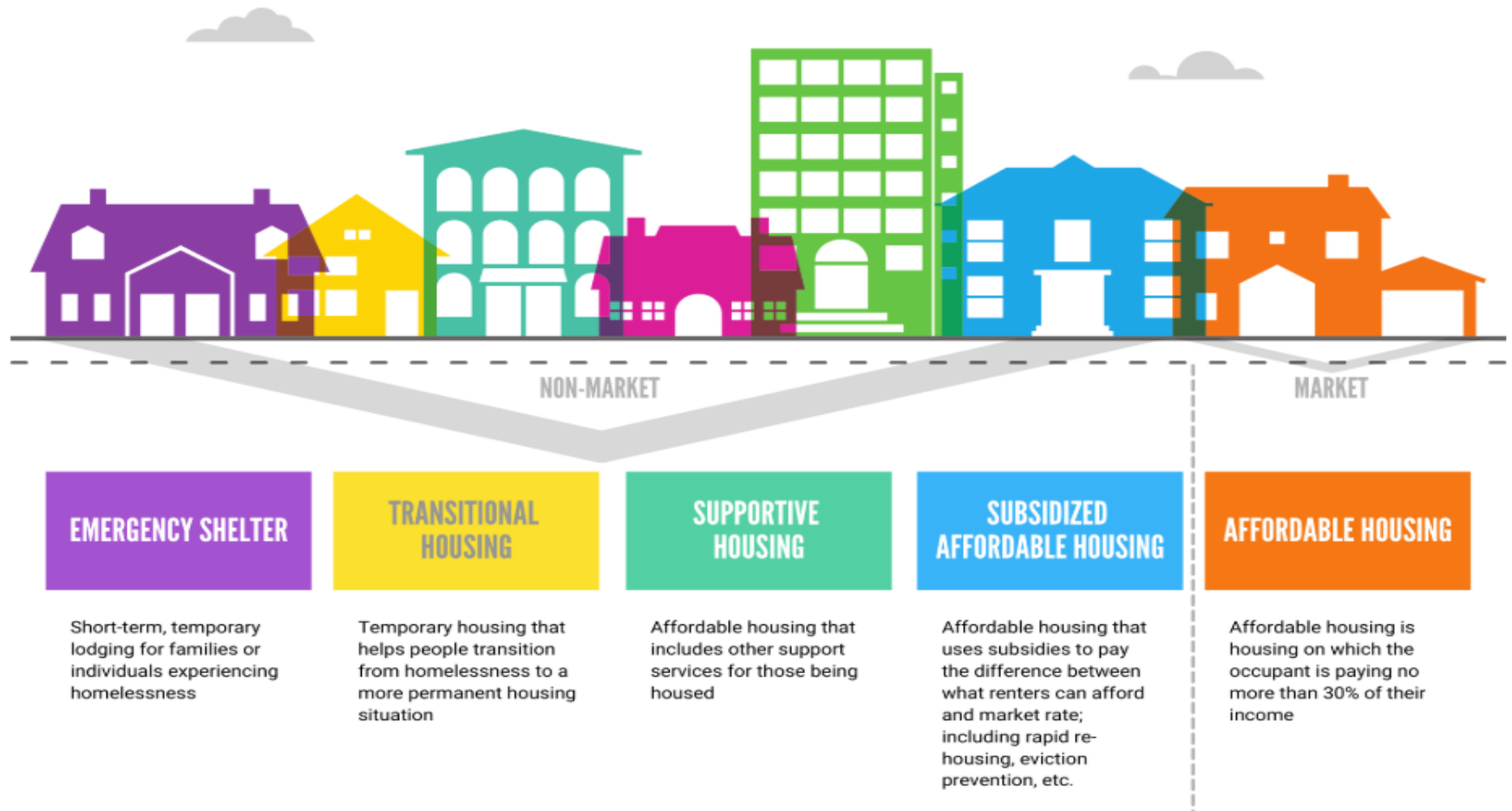
TERM	DEFINITION	NOTES
Housing insecurity	A broad term describing lack of stable, safe, and affordable housing.	Inclusive of people who are not currently unhoused but are at risk.
Unhoused or people experiencing homelessness	Refers to individuals without stable, permanent housing.	“People-first” language is respectful and avoids defining people by their condition. “Unhoused” is often preferred over “homeless” in equity-centered work.
Housing instability	Frequent moves, overcrowding, or being behind on rent.	Often used in healthcare and education to describe risk factors.
Precariously housed	Living in temporary or unstable housing situations, including couch surfing or doubled up.	Common in health equity and social work settings.
People with lived experience of homelessness	Individuals who have previously experienced homelessness.	Highlights expertise and insights from personal experience.
Chronically unhoused	Refers to people who have been unhoused for a long period, often with co-occurring health or mental health conditions.	Used in policy, HUD definitions, and service planning.
Transitionally unhoused	Individuals temporarily without housing due to specific circumstances.	Recognizes that homelessness can be situational, not always long- term.

Housing Insecurity in Indiana

Not All Housing is the Same

HOUSING CONTINUUM

[Source: Housing-Stability](#)



Housing Models

Affordable Housing

- Household pays 30% of income for rent
- Has a lease, subsidy continues as long as compliant with the lease

Supportive and Service Enriched Housing

- Household pays 30% of income for rent
- Has a lease, subsidy continues as long as compliant with the lease
- Services are voluntary, on site/home and community based

Rapid Re-Housing

- Household pays 30% of income
- Has a lease, remains 3-18 months
- Light touch services that are housing focused
- Expected to pay full market rent at the end of the program

Transitional Housing

- Household pays 30% of income
- 3-24 months
- Intensive Services
- Expected to pay full market rate rent at the end of the program

IHCDA Partners

(Indiana Housing and Community Development Authority)

- Continuum of Care (CoC) Programs
- Creating Livable Communities
- Creating Places
- Emergency Solutions Grant (ESG)
- Energy Assistance Program (EAP)
- Energy Assistance Program (EAP) Utility Vendors
- Eviction Prevention and Low-Barrier Screening
- Foreclosure Prevention Counselors
- Healthy Homes Resource Program
- HOME Tenant-Based Rental Assistance (TBRA)
- Housing Choice Opportunities (HCO)
- Housing First Program
- Housing Opportunities for Persons with AIDS (HOPWA)
- Indiana Housing Dashboard
- Individual Development Accounts (IDA)
- Ramp Up Indiana
- Supportive Services for the Emergency Housing Voucher (EHV)
- Temporary Assistance for Needy Families (TANF)
- Weatherization Assistance Program (Wx)

The Housing & Life Expectancy Link

A 14-year life expectancy gap currently exists among residents within a 28-mile area



Source: [Worlds Apart: Gaps in Life Expectancy in the Indy Metro Area](#); IU Fairbanks School of Public Health

A Snapshot of Indiana's Housing Crisis...

- 1 in 4 renters in Indiana are severely rent-burdened
- Only 1 in 4 low-income at-risk individuals can access Federal Rental Assistance
- People with substance abuse disorders face greater barriers and challenges with housing
- Shortage of affordable housing units across the state
- Rising evictions in both rural and urban counties
- Populations most impacted: people with disabilities, Medicaid recipients, youth aging out of foster care



A Snapshot of Indiana's Housing Crisis

KEY FACTS

220,399
OR
27%

Renter households that are extremely low income

-137,427

Shortage of rental homes affordable and available for extremely low income renters

\$30,400

Average income limit for 4-person extremely low income household

\$45,913

Annual household income needed to afford a two-bedroom rental home at HUD's Fair Market Rent.

74%

Percent of extremely low income renter households with severe cost burden

- In 2025, Indiana has a gap of 137,427 affordable and available homes that are needed for the state's 220,399 extremely low-income (ELI) households. This is below average for the Midwest and among all U.S. states
- Indiana has fewer than 38 rental homes available for every 100 of the most vulnerable
- In addition, more than 74% of Indiana's ELI renter households spend half or more of their income on housing costs. This rate of severe housing cost burden is the 3rd-highest rate in the Midwest and 10th-highest among all U.S. states

Source: <https://housing4hoosiers.org/2025/03/13/gap-report-2025/>

Why Housing Matters to Health...

Safe, stable housing = foundation to optimum physical & mental health

Lack of housing linked to:

- Higher Emergency Room(ER) use
- Poor medication adherence
- Chronic illness exacerbation
- Worsening behavioral health outcomes

Unstable housing and homelessness complicates efforts to treat illnesses and injuries



Health begins where we live, learn, work, and play.

Source: <https://www.healthaffairs.org/doi/10.1377/hpb20180313.396577/full/>

Providers are Part of the Solution

Why Provider – MCE Partnerships Are Essential for Housing Stability

Shared Patients, Shared Outcomes	MHS Has Flexibility, Providers Have Trust	Documentation & Data Move Housing Forward
<ul style="list-style-type: none">• MHS and providers serve the same high-need populations• Better coordination reduces ER visits, improves medication adherence, and supports care plans• Aligning around housing stabilizes care and cost	<ul style="list-style-type: none">• MHS provides housing-related supports (e.g., respite care, navigation)• Providers have direct patient relationships and insight into barriers	<ul style="list-style-type: none">• Providers can offer clinical documentation that supports housing placement (e.g., disability verification, health impact)• MHS uses this data to support prioritizing housing services and advocate for Community Based Organization supportive services

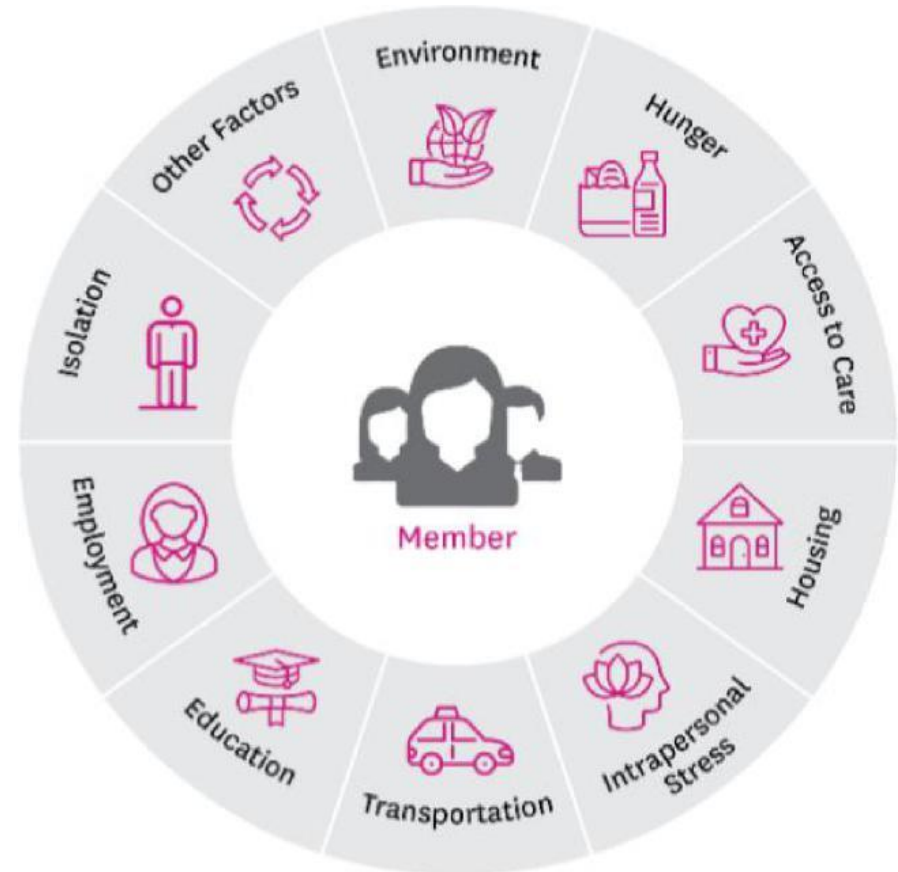
What Providers Can Do:



- Screen for housing insecurity using standardized questions, such as *“Are you worried about losing your housing in the next 2 months?”*
- Refer to community health workers or care coordinators
- Include housing status in care plans
- Educate staff on trauma-informed care for unhoused patients
- If you have someone in your office that may need case management services, please contact 1-877-647-4848 or send a message via the [MHS Secure Portal](#)

MHS Approach to Housing Support:

MHS is committed to helping members meet social needs through a spectrum of programs and services that aim to treat or prevent diseases through nutrition, responding to the critical link between housing and health and connection to the health care system.



MHS Approach to Housing Support:

Medical Respite

- Temporary housing for individuals experiencing homelessness who are too ill to be on the streets, but not ill enough for hospitalization
- Includes clinical oversight, meals, and discharge planning
- Supports hospital transitions and reduces readmissions
- MHS has Partnered with Gennesaret

Community Connection

- Free, public database of community resources given to members to assist with food, shelter, goods, employment, and other community resources

Additional Information & Referral Resources

Housing Models:

Board and Care/ Group Home Settings

- Person pays 90% of income or going rate for room and board
- Has a service agreement, limited rights.

Assisted Living

- Person pays most of income or going rate for room and board
- Agreement with operator

Recovery Homes

- Limited standards including what person pays for continued residence
- Person required to remain clean and sober, must leave if cannot maintain sobriety, often returning to homelessness
- Most commonly, a Service Agreement with the operator

MHS Provider Engagement



MHS Resources

- For additional information, please contact your MHS Provider Engagement Account Manager to schedule an appointment today
- Additional resources available at on the [MHS Website](#)
- Register online for additional [Monthly Web Sessions](#)

PEAM Contact Information

NORTHEAST REGION

For claims issues, email:
MHS_ProviderRelations_NE@mhsindiana.com
joy.k.diarra@mhsindiana.com
Joy Diarra, Provider Engagement Account Manager
1-317-864-2378

NORTHWEST REGION

For claims issues, email:
MHS_ProviderRelations_NW@mhsindiana.com
Candace.V.Ervin@mhsindiana.com
Candace Ervin, Provider Engagement Account Manager
1-317-364-7635

NORTH CENTRAL REGION

For claims issues, email:
MHS_ProviderRelations_NC@mhsindiana.com
Natalie.Smith@mhsindiana.com
Natalie Smith, Provider Engagement Account Manager
1-317-379-9035

CENTRAL REGION

For claims issues, email:
MHS_ProviderRelations_C@mhsindiana.com
ldavis@mhsindiana.com
Latisha Davis, Provider Engagement Account Manager
1-317-601-5999

SOUTH CENTRAL REGION

For claims issues, email:
MHS_ProviderRelations_SC@mhsindiana.com
DDENNING@mhsindiana.com
Dalesia Denning, Provider Engagement Account Manager
1-317-951-3800

SOUTHWEST REGION

For claims issues, email:
MHS_ProviderRelations_SW@mhsindiana.com
Dawnalee.A.McCarty@mhsindiana.com
Dawn McCarty, Provider Engagement Account Manager
1-317-556-6171

SOUTHEAST REGION

For claims issues, email:
MHS_ProviderRelations_SE@mhsindiana.com
tiffany.calloway@centene.com
Tiffany Calloway,
Provider Engagement Account Manager
1-812-697-8126

PEAM Manager Map Color Key



Large Provide Groups – Carolyn

CAROLYN VALACHOVIC MONROE

Provider Engagement Account Manager

1-317-443-8243

CMONROE@mhsindiana.com

PROVIDER GROUPS

Eskenazi/The Health and Hospital
Corp.

Baptist Health

Lifespring

Wellcare

Deaconess (including Little Company
of Mary)

Good Samaritan

Norton (including King's Daughters,
Clark & Scott Memorial)

Indiana University Health

Reid Hospital

St. Elizabeth Hospital

Community Health

Large Provide Groups - Mona

MONA GREEN

Provider Engagement Account Manager
1-812-614-1003
mona.green@mhsindiana.com

PROVIDER GROUPS

St. Vincent/Ascension
Wellcare Complete
Lutheran Medical Group
Parkview Health System
Beacon Medical Group
American Senior Care
CarDon & Associates
OrthoIndy
Heart City Health
ONE
Franciscan Health

Behavioral Health Provider Contact

ANGEL JOHNSON

Provider Engagement Account Manager

1-317-468-5184

angel.johnson3@centene.com

PROVIDER GROUPS

Park Center

Otis Bowen

Centerstone

Valley Oaks Health

Grant-Blackford

Four County

Hamilton Center

Community Mental Health
Center (Lawrenceburg)

Oaklawn

Northeastern Center

Edgewater Health

Regional Mental Health

Swanson Center

Porter-Starke Services

Southwestern Behavioral
Community Mental Health
Center (Vevay/Batesville)

Additional Contact Information

MHS Provider Network

NETWORK LEADERSHIP

JILL CLAYPOOL

Senior Vice President, Network
Development & Contracting
1-877-647-4848
Jill.E.Claypool@mhsindiana.com

MARK VONDERHEIT

Senior Director, Provider Network
1-877-647-4848
MVONDERHEIT@mhsindiana.com

JENNIFER GARNER

Manager, Provider Relations
1-317-771-5537
jgarner@mhsindiana.com

NETWORK OPERATIONS

KELVIN ORR

Director, Network Operations
1-877-647-4848
Kelvin.D.Orr@mhsindiana.Com

NEW PROVIDER CONTRACTING

TIM BALKO

Director, Network Development & Contracting
1-877-647-4848
TBALKO@mhsindiana.com

MICHAEL FUNK

Manager, Network Development & Contracting
1-877-647-4848
Michael.L.Funk@mhsindiana.com

CENTENE VISION

SIERRA HICKS

sierra.hicks@centene.com
Vision Provider Services: 1-844-820-6523

CENTENE DENTAL

THOMAS "TONY" SMITH

thomas.smith3@centene.com
Dental Provider Services: 1-855-609-5157

Thank You for Attending!

By taking a few moments to complete the event and sessions evaluations, you'll help us understand your experience and shape the future of our programs.



Questions?

Thank you for being our partner in care.
