

HUD HORIZONS- HOMESAFE

ServicePoint Handbook

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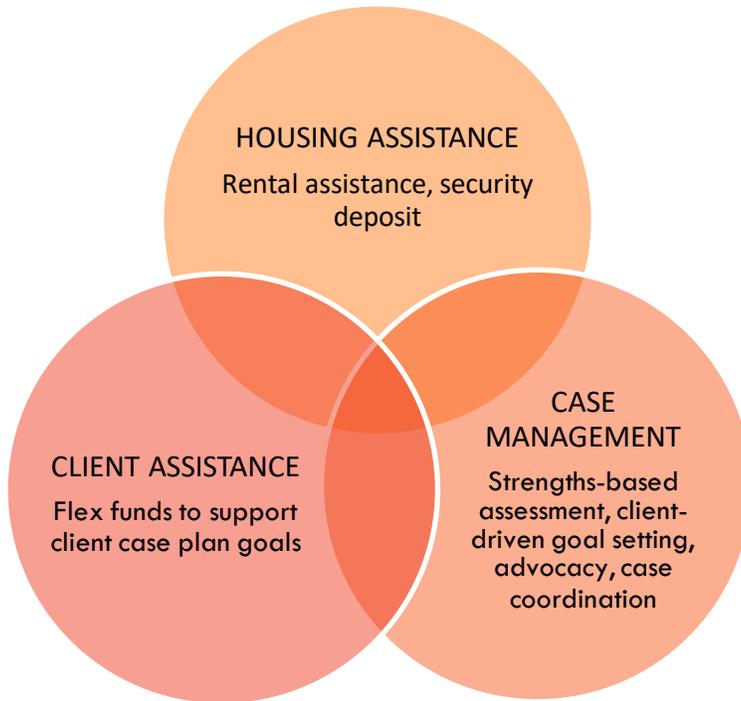
servicepoint@multco.us

HUD HORIZONS-HOMESAFE SERVICEPOINT HANDBOOK – REVISION HISTORY

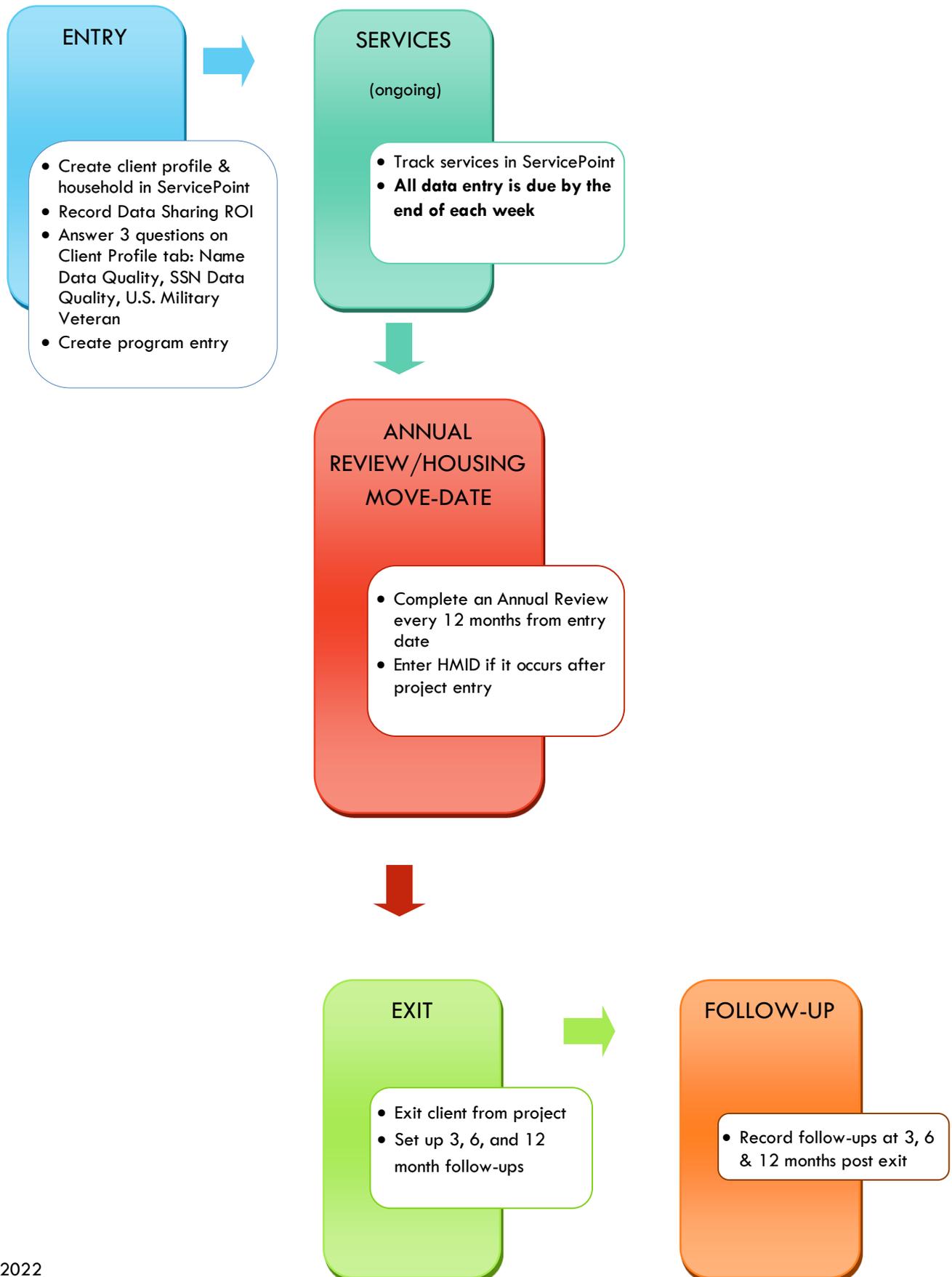
- **Revised January 2022** – fixed spelling errors throughout, added Client Profile questions to Data Milestones, added LGBTQ+ question to entry, added Reason for Leaving (homeless youth) question to exit section, updated program name in follow-up section.
- **Revised October 2021** – updated entry assessment to add new Supportive Housing System (SHS) Expansion question on Population A and B, provided clarification on how to select more than one Gender option.
- **Revised July 2020** – updated entry assessment, service transactions and interim/annual assessment sections.
- First release September 2018.

PROGRAM MODEL – HUD HORIZONS-HOMESAFE

HUD Horizons-Homesafe serves pregnant and parenting teen Mom’s and their children.



DATA MILESTONES



ENTERING A HUD HORIZONS-HOMESAFE CLIENT IN SERVICEPOINT

- Enter ROI through Head of Household profile
- Income reported in ServicePoint must be verifiable with written documentation in client case file.

1. BUILD/UPDATE HOUSEHOLD

Household Type

Head of Household	Only one person should be designated as Head of Household
Relationship to Head of HH	If youth is Head of Household, this should be 'Self'
HH Date Entered	Required if entering the client into ServicePoint for the first time; same as program Entry Date

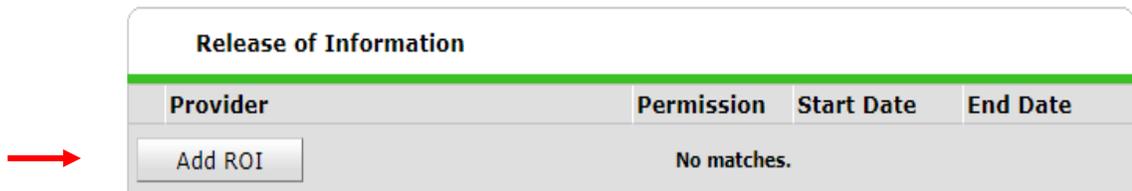
2. TRANSACT ROI **Required for ALL Household members included in the Program Entry**

After clients sign a *Data Sharing Release* for their household, add the Parent and HYC level ROI to all household members.

Only one Data Sharing Release needs to be signed per household, but it needs to be transacted in SP under multiple SP providers, including the Parent provider (also known as your Login Provider) AND all of the SP providers associated with the program they are participating in.

Download Client Consent forms here: <https://multco.us/file/65978>

Enter Data Sharing ROI under Head of Household In the client profile/Summary tab of the Head of Household, click on the "Add ROI" button in the Release of Information dashlet



Household Members Check off all household members who were included on the *Client Consent to Release of Information for Data Sharing in Multnomah County* form.

Household Members

To include Household members for this Release of Information, click the box beside each name. Only members from the SAME Household may be selected.

(289) Non-custodial Caregiver(s)

(576) Horwitz, Moses Harry

(587) Horwitz, Jerome Lester

Provider Click 'Search' to select your **PARENT provider** (also known as your Login provider) **AND all** of your **HUD Homesafe** providers for your agency.

Release Granted

Choose Yes

Start Date

Date the Client Consent to Share form was signed

End Date

Date of 25th birthday

Documentation

Select "Signed Statement from Client" – **Verbal consent is not an option**

Enter *Multco*

Witness

Release of Information Data

Clicking 'Save Release of Information' will create a distinct Release of Information for each selected provider.

Provider *

Insights - SP (2354)

Insights: HUD HomeSafe - SP (2369)

Release Granted * Yes

Start Date * 07 / 19 / 2018

End Date * 07 / 19 / 2025

Documentation Signed Statement from Client

Witness Multco

When successfully transacted, it should look like this under the ROI tab.

Client - (1) Miller, Doris

(1) Miller, Doris
Release of Information: None

Client Information | Service Transactions

Provider	Permission	Start Date	End Date
Insights: HUD HomeSafe - SP	Yes	07/19/2018	07/19/2025
Insights - SP	Yes	07/19/2018	07/19/2025

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3. CLIENT PROFILE

Every Client must have 3 questions answered in the Client Profile Tab

Name Data Quality

SSN Data Quality

U.S. Military Veteran?

Client Record	
Name	Client, Friendly
Name Data Quality	Full Name Reported
Alias	
Social Security	
SSN Data Quality	Data not collected (HUD)
U.S. Military Veteran?	No (HUD)

4. ENTRY

Entry Type Always choose 'HUD'

Entry Date Date of intake to your program

Section I Complete for Each Household Member

Housing Move-In Date Leave blank or delete answer if client move in date is different from program start date.

Relationship to Head of Household

Client Location OR-501 Portland/Gresham/Multnomah County

Date of Birth

Date of Birth Type

Gender Hit CTRL to select more than one option

If Other Gender, Specify Only required if Gender is 'Other'

Race **Required in addition to Inclusive Identity**

Race-Additional (optional) Do not answer the same as 'Race'

Ethnicity **Required in addition to Inclusive Identity**

Click 'Add' to enter a client's self-identified race/ethnicity. Add as many as apply.

Inclusive Identity



The screenshot shows a form titled "INCLUSIVE IDENTITY" with a red instruction: "(Click 'Add' to meet LOCAL requirements for reporting Inclusive Identity):". Below this is a search bar containing "Inclusive Identity (Race/Ethnicity/Origin)". Underneath the search bar is a "Start Date *" field with the instruction "Please add all that apply (Race/Ethnicity/Origin):". A red arrow points to the "Add" button at the bottom of the form.

Primary Language

Primary Language-Other Only required if Primary Language is 'Other' - **Do not enter a 2nd language**

Does client have a disabling condition?

Click 'HUD Verification' to create a Y/N response for each Disability Type

Disabilities

Covered by Health Insurance

Click 'HUD Verification' to create a Y/N response for each Health Insurance Type

Health Insurance

Section IIa

Complete the following questions for Head of Household and All Adults

Complete SHS Priority Pop for HOH if funded by JOHS

Identify the SHS Priority Population

Refer to Population A/B Determination form: <https://rb.gy/hfc1au>

Income from Any Source

Click 'HUD Verification' to create a Y/N response for each Income Source

* Only list income that will be **ongoing**

* Enter Household Income provided by a minor in the **Head of Household's profile**

Monthly Income

Non-cash benefit from any source

Complete HUD Verification; record benefit type, amount is no longer required

Non-Cash Benefits

Click 'HUD Verification' to create a Y/N response for each Benefit Source

* Only list benefits that will be **ongoing**

* Enter benefits received by a minor in the **Head of Household's profile**

* \$ amounts are not required for non-cash benefits

History of Homelessness

The following questions refer to HOMELESS SITUATIONS ONLY:

Approximate date
homelessness started:

Regardless of where they
stayed last night –
Number of times the client
has been on the streets, in
ES, or SH in the past 3
years including today

Total number of months
homeless on the street, in
ES or SH in the past 3
years

The following question refer to INSTITUTIONAL SITUATIONS ONLY:

On the night before did you stay on the streets, ES or SH? Required when a length of stay answer is less than 90 days.

The following question refer to TRANSITIONAL AND PERMANENT SITUATIONS ONLY:

On the night before did you stay on the streets, ES or SH? Required when a length of stay answer is less than 7 days.

Domestic violence
victim/survivor

If yes for Domestic
Violence Victim/Survivor,
are you currently fleeing?

If yes for Domestic
violence victim/survivor,
when experience occurred

Household Size

Level of Family Income (%
HHS Guidelines)

Employment Status

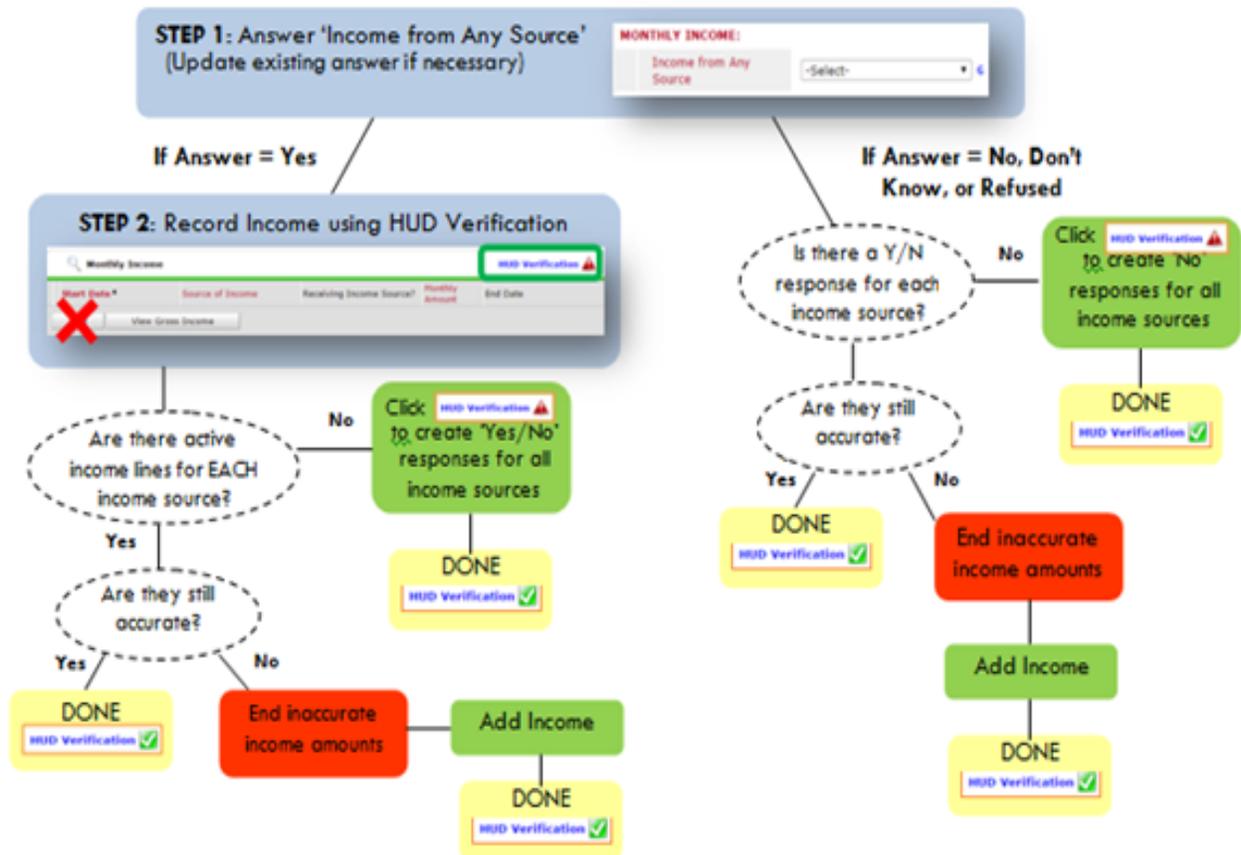
Zip Code of Last
Permanent Address

Is the Youth LGBTQ+
identified?

RECORDING CLIENT INCOME IN SERVICEPOINT

- Each client's record should store their entire income history. **Never update a client's income by deleting or writing-over the answers in an existing income record.**
- Each income source should have a Yes/No response. The same is true for Benefits, Disability and Health Insurance types.
- New program entries pre-fill with income data from previous entries. If the income data that pre-fills is not accurate for your point in time, **end date** it and **add** a new/updated income.
- When completing an annual review, record changes through the 'Interims' icon. Do not change answers in Program Entry.

Follow the process below to record client income at Entry, Interims, and Exit:



ADDING INCOME

- 1 Click
- 2 Leave Start Date as default (date of Entry, Interim, or Exit)
- 3 Select Source of Income
- 4 Monthly Amount = (\$ amount from this source)
- 5 Leave End Date blank
- 6 Save /add another and Exit

ENDING INCOME

- ⚠ If updating income at Entry/Exit, enter data in client's program Entry/Exit. If updating income *during* enrollment, use appropriate interim.
- 1 Click the pencil next to outdated income
- 2 Leave Start Date, Source, and Amount unchanged
- 3 End Date = the day before Entry/Interim/Exit
- 4 Save and Exit

NOTE: Follow the same process when recording Benefits, Disabilities and Health Insurance

ENTERING HUD HORIZONS-HOMESAFE SERVICE TRANSACTIONS IN SERVICEPOINT

- Services may be summed and entered into ServicePoint on a daily basis, or once a week.
- Enter all services under the Head of Household

SERVICES

Start Date	Day the service happened/or first day of the week if doing weekly services
End Date	Same as the Start Date – the day the service happened/or last day of the week if doing weekly services
Service Type	Always Basic Needs - automatically fills if you select a provider-specific service
Provider Specific Service	Select Case Management (all services are listed below, ONLY Case Management time is entered in ServicePoint)
Service Staff	Select staff person providing services; contact the helpline to update the list if necessary
# of Units	Total # of service hours rounded to nearest 15 minutes (.25 hours) or
Unit Type	Select Hours

PROVIDER-SPECIFIC SERVICES – HUD HORIZONS-HOMESAFE

- Case Management – **ONLY CASE MANAGEMENT IS ENTERED IN SERVICEPOINT**

INTERIM REVIEWS & HOUSING MOVE-IN DATE

The Interim Review is an annual update of a client's income, benefits, and disability status. Interim Reviews are required for **each household member** even if there have been no status changes. Interim Reviews are also used to record Housing Move-In Dates (HMID) when the HMID occurs **after** the program entry.

SETTING UP AN INTERIM REVIEW

The Interim Review can be found in the Entry/Exit Tab under 'Interims'

- 1 Click the Interims icon belonging to the program entry that requires an Interim Review

Program	Type	Entry Date	Exit Date	Interims	Follow Ups	Client Count
Impact Northwest: HUD Family Futures - SP (2372)	HUD	08/19/2013				
Impact Northwest: Parent Child Development Services - SP (2301)	Basic	05/01/2009	06/30/2010			

- 2 Click 'Add Interim Review'

Interim Reviews Associated with this Entry / Exit

Review Date	Review Type	Client Count
No matches.		

Add Interim Review

- 3 Be sure that all household members are checked off
- 4 Interim Review Type = 'Annual Review' for the annual assessment, 'Update' for HMID
- 5 Review Date = Date the Interim Review was completed (should be within 30 days before or after the anniversary of program entry)
- 6 Click 'Save and Continue'

Add Interim Review - (154) Client, Test

Household Members

To include Household members associated with the Entry / Exit for this Interim Review, click the box beside each name.

- (87) Two Parent Family
 - (174) Client, Daughter (Entry Date: 08/19/2013 10:40 AM)
 - (176) Client, Son (Entry Date: 08/19/2013 10:40 AM)
 - (154) Client, Test (Entry Date: 08/19/2013 10:40 AM)

Interim Review Data

Entry / Exit Provider: Impact Northwest: HUD Family Futures - SP (2372)

Entry / Exit Type: HUD

Interim Review Type*: Annual Review

Review Date*: 08 / 20 / 2014 2 : 29 : 45 PM

Save & Continue Cancel

For HMID, answer **ONLY** the top HMID question, for each person who was included in the entry.

COMPLETING AN ANNUAL ASSESSMENT

7 Verify that **Income** responses are still accurate as of the Interim Review date (See all areas in purple.) If not, update responses.

8 Verify that responses to **Non-Cash Benefits** questions are still accurate as of the Interim Review date. (See all areas in blue.) If not, update responses.

9 Verify that responses to **Health Insurance** questions are still accurate as of the Interim Review date (See all areas in green). If not, update responses.

10 Verify that **Disability** responses are still accurate as of the Interim Review date. (See all areas in orange.) If not, update.

Remember to also check the **Level of Family Income** question. Hover over the question to see HHS guidelines.

IGNORE EVERYTHING ELSE BELOW THE ITEMS SHOWN IN THE ORANGE BOX

Income from Any Source Yes (HUD) No (HUD) G

Monthly Income HUD Verification

	Start Date *	Source of Income	Receiving Income Source?	Monthly Amount	End Date
	06/12/2015	Earned Income (HUD)	No		
	06/01/2015	Earned Income (HUD)	Yes	US\$1,000.00	06/10/2015
	05/29/2015	General Assistance (HUD)	No		
	11/28/2014	Earned Income (HUD)	Yes	US\$200.00	12/03/2014
	11/28/2014	Worker's Compensation (HUD)	No		

Non-cash benefit from any source No (HUD) Yes (HUD) G

Non-Cash Benefits HUD Verification

	Start Date *	Source of Non-Cash Benefit	Receiving Benefit?	Amount of Non-Cash Benefit	End Date
	12/06/2014	Supplemental Nutrition Assistance Program (Food Stamps) (HUD)	Yes		
	12/05/2014	Supplemental Nutrition Assistance Program (Food Stamps) (HUD)	No		12/06/2014
	12/01/2014	Supplemental Nutrition Assistance Program (Food Stamps) (HUD)	Yes		12/04/2014
	11/28/2014	Temporary rental assistance (HUD)	No		
	11/28/2014	Other Source (HUD)	No		

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Covered by Health Insurance Yes (HUD) No (HUD) G

Health Insurance HUD Verification

	Start Date *	Health Insurance Type	Covered?	End Date
	12/05/2014	MEDICARE	Yes	

Does the client have a disabling condition? Yes (HUD) No (HUD) G

Disabilities HUD Verification

	Disability Type	Start Date *	End Date	Disability determination
	Developmental (HUD)	07/02/2015		No (HUD)
	Developmental (HUD)	06/25/2015	06/27/2015	
	Chronic Health Condition (HUD)	06/25/2015		No (HUD)
	HIV/AIDS (HUD)	06/25/2015		No (HUD)
	Physical (HUD)	06/25/2015		No (HUD)

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Relationship to Head of Household Self (head of household) Spouse Other G

In Permanent Housing Yes No G

If yes, Date of Move-In / / G

11 **SAVE and REPEAT steps 7-10 for all household members**

Interim Review Assessment

Household Members

- (1) Test, Justin A
Age: 50
Veteran: Yes (HUD)
- (SB100) Test, Just A, Jr
Age: 23
Veteran: No (HUD)

EXITING HUD HORIZONS-HOMESAFE CLIENTS FROM SERVICEPOINT

- Answers from Entry will carry over. Be sure to update all responses that have changed.

EXIT

Exit Date Defaults to data entry date - ***Change to last date that services were received***

Reason for Leaving

Destination

Housing Move-In Date

Relationship to Head of Household

Does the client have a disabling condition? Remember to review and update HUD Verification in Disabilities box

Health Insurance Remember to review and update HUD Verification in Health Insurance box

Income from Any Source Income from Any Source (only ongoing income); Remember to review and update HUD Verification in Monthly Income box

Total Monthly Income Sum of all income listed in Monthly Income box

Non-Cash Benefits Remember to review and update HUD Verification in Non-Cash Benefits box

Percent Median Family Income

Achieved Case Plan Goals

Reason for Leaving (Homeless Youth)

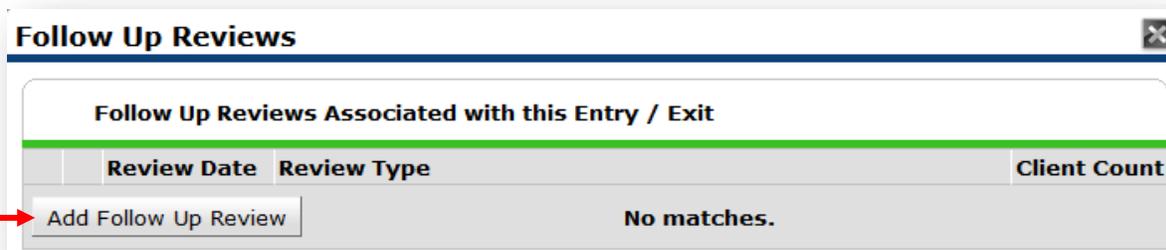
RECORDING HUD HORIZONS-HOMESAFE HOUSING FOLLOW-UPS

FOLLOW-UP **DSCP Homeless Youth Follow-Up (6 & 12 month) or Housing Outcomes**

- Follow-ups are located on the Entry/Exit tab in the client's record. Record follow-ups under the Head of Household's record only.
- Pre-set 3, 6 and 12-month follow-ups at EXIT.



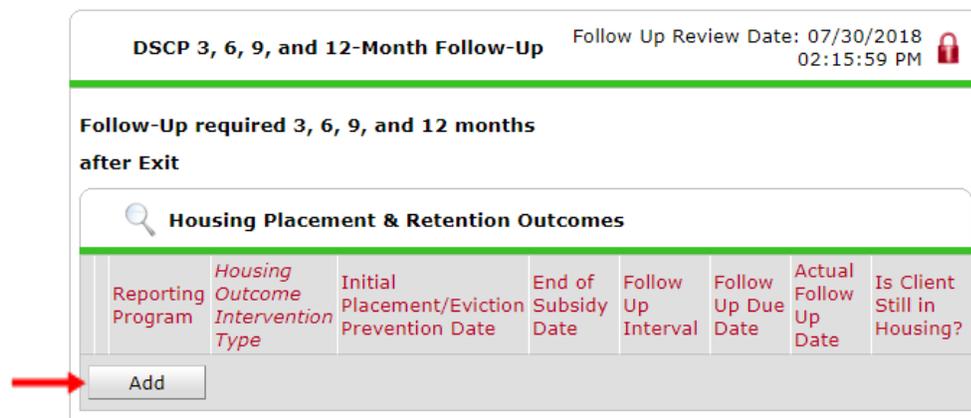
Click the **Add Follow Up Review** button



Follow Up Review Type* Select 120-day, 6-Month Review or Annual Assessment (12-month review)

Review Date Date defaults to data entry date; change to the date the review is due.

Click the **Add** button



Reporting Program HUD Horizons-Homesafe consolidated grant

Housing Outcome Permanent Placement
Intervention Type

HOUSING PLACEMENT INFORMATION:

Initial Placement/Eviction Date Program Entry Date

End of Subsidy Date Program Exit Date

FOLLOW-UP SCHEDULE

What event triggered this follow-up? End of Subsidy/Exit

Follow Up Interval 3, 6 or 12 months (90-day, 6 month, 12 month)

Follow Up Due Date 3, 6 or 12 months from Exit Date/End of Subsidy Date

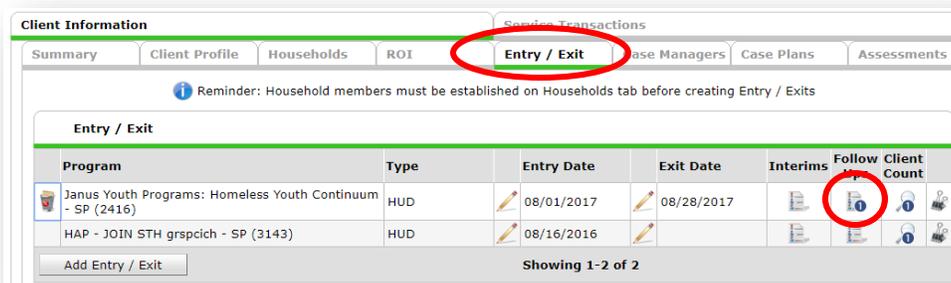
ACTUAL FOLLOW-UP OUTCOME:

Actual Follow-Up Date

Follow-Up Status

Is Client Still in Housing?

To set up 6 and 12 month follow-ups, go back to the Entry/Exit tab and start from the Follow-Ups icon again.



When you're done, it should look like this:

Follow Up Reviews

Follow Up Reviews Associated with this Entry / Exit

	Review Date	Review Type	Client Count
 	07/30/2018	Annual Assessment	
 	07/30/2018	6-Month Review	
 	07/30/2018	120-Day Review	

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The Entry/Exit tab will show 3 follow-ups:

Entry / Exit

Program	Type	Project Start Date	Exit Date	Interims	Follow Up	Client Count
 Insights: HUD HomeSafe - SP (2369)	HUD	 07/30/2018	 07/30/2018			

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APPENDIX I: HUD VERIFICATION

Answering HUD Verification Questions for New Participants

Your program's Entry may include the following questions:

- Health Insurance
- Disabilities
- Monthly Income
- Non-Cash Benefits

Though these four questions each have different answers available to choose from, all function the same way. This type of question has two parts to answer:

1. Answer the Yes/No question that sits above the HUD Verification.
2. Click HUD Verification, which opens the next window.

Health Insurance Questions
Answer the "Covered by Health Insurance" question for everyone.

Covered by Health Insurance: Yes (HUD)

Click HUD Verification and select appropriate answer for each Health Insurance Type

Start Date*	Health Insurance Type	Covered?	End Date
10/01/2014	State Health Insurance for Adults	Yes	
10/01/2014	Private Pay Health Insurance	No	
10/01/2014	Health Insurance obtained through COBRA	No	
10/01/2014	State Children's Health Insurance Program	No	
10/01/2014	Employer - Provided Health Insurance	No	

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HUD Verification for CoC Programs

3. Select the "No" link. All of the answers in the bottom section will shift to "No".
4. Carefully review the list of answers. If one of the answers applies to the participant, shift the answer on that one line to a "Yes".

If you answer "Yes" to an Income Source for the Monthly Income question, an additional box will pop up. See Step 5 below.

Otherwise, click **Save & Exit**.

5. Enter the amount of that Income. Enter an approximate amount if necessary.

Record all income received in the 30 days prior to intake, but only if that income will be continuous and ongoing.

Click **Save**.

January 2022

HUD Verification: Monthly Income for 10/01/2014

Per Source of Income, the current records for Monthly Income as of 10/01/2014 are displayed below. Any previous records for Monthly Income not overlapping as of this date are not displayed. In the event that multiple records exist per Source of Income as of 10/01/2014, records containing "Yes" values will be displayed and take precedence for reporting purposes.

Select the Receiving Income Source? value for all incomplete Source of Income records

- No
- Data Not Collected
- Incomplete

Source of Income	Receiving Income Source?			
	Yes	No	Data Not Collected	Incomplete
Alimony or Other Spousal Support (HUD)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Child Support (HUD)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Earned Income (HUD)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other (HUD)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pension or retirement income from another job (HUD)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Private Disability Insurance (HUD)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Retirement Income From Social Security (HUD)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SSDI (HUD)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SSI (HUD)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
TANF (HUD)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Unemployment Insurance (HUD)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
VA Non-Service Connected Disability Pension (HUD)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
VA Service Connected Disability Compensation (HUD)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Worker's Compensation (HUD)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Save Save & Exit Exit

Monthly Income

Start Date*: 10/01/2014

Source of Income: TANF (HUD)

If Other, Please Specify: [Text Area]

Receiving Income Source?: Yes

If other, specify: [Text Field]

Monthly Amount: 487

End Date: [Date Picker]

ARCHIVAL USE ONLY: -Select-

Save Cancel

Continue answering the remaining Entry questions.



When you're done answering questions for the Head of Household, remember to click **Save**, then scroll back to the top of the entry window and click on the names of any other household members included in the entry to complete their assessments.

UPDATING HUD VERIFICATION QUESTIONS FOR EXISTING PARTICIPANTS

If you are answering the HUD Verification questions for a participant who already exists in ServicePoint, there's a good chance that these type of questions (health insurance, disability, income, non-cash benefits) have already been answered at least once. ServicePoint will display all previously recorded answers as long as they are *ongoing*. This means that no one has entered an "End Date" for the answers you are seeing.

In order for you to update a HUD Verification question that has already been answered, you must enter an End Date for each previously recorded answer **that is no longer correct**. Then create a line for each **new** correct answer; new answers should be dated with the date of your new entry or annual update.

EXAMPLE: Last year, a youth and her child completed the intake process for a program on 01/01/2017. A couple days later, her advocate created a program entry in ServicePoint using the intake date as the entry date. The advocate answered all of the questions required by ServicePoint in the program entry, including all four of the HUD Verification-type questions (Health Insurance, Disability, Monthly Income, and Non-Cash Benefits). At the time the advocate completed her intake, the participant did not have health insurance.

Start Date	Health Insurance Type	Covered?	End Date
01/01/2017	Employer - Provided Health Insurance	No	
01/01/2017	Veteran's Administration (VA) Medical Services	No	
01/01/2017	State Children's Health Insurance Program	No	
01/01/2017	MEDICARE	No	
01/01/2017	Other	No	

Notice how each of the individual answers within the HUD Verification-type questions has a **Start Date** of 01/01/2017 (the same as the participants' entry date). Because the advocate recorded these answers from within the program entry dated 01/01/2017, the **Start Date** for each answer defaults to the entry date. (**Don't change it.**)

TIP: After completing a HUD Verification, click on the magnifying glass icon to expand the HUD Verification box and see all of your answers at once!

Provider	Date Effective	Start Date	Health Insurance Type	Covered?	End Date
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Employer - Provided Health Insurance	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Veteran's Administration (VA) Medical Services	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	State Children's Health Insurance Program	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	MEDICARE	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Other	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Indian Health Services Program	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	State Health Insurance for Adults	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Private Pay Health Insurance	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Health Insurance obtained through COBRA	No	
Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	MEDICAID	No	

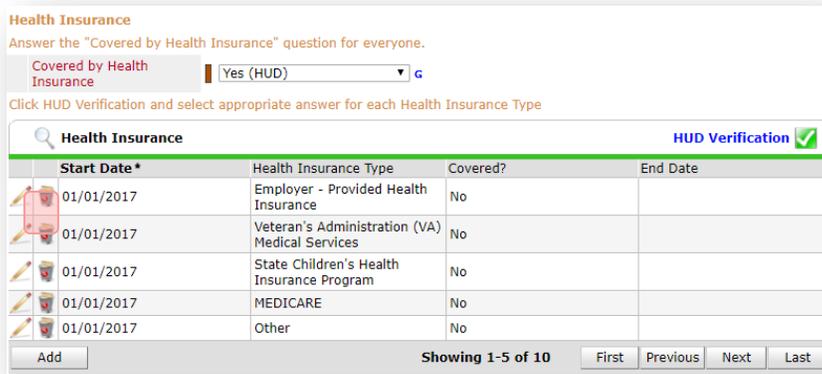
A year later, the same participant completed an intake for a new program. A couple days later, her advocate creates an entry for the new program, using the new intake date (01/01/2018) as the program entry date.

Sometime in the last year, the participant acquired health insurance through the Oregon Health Plan. Yay!

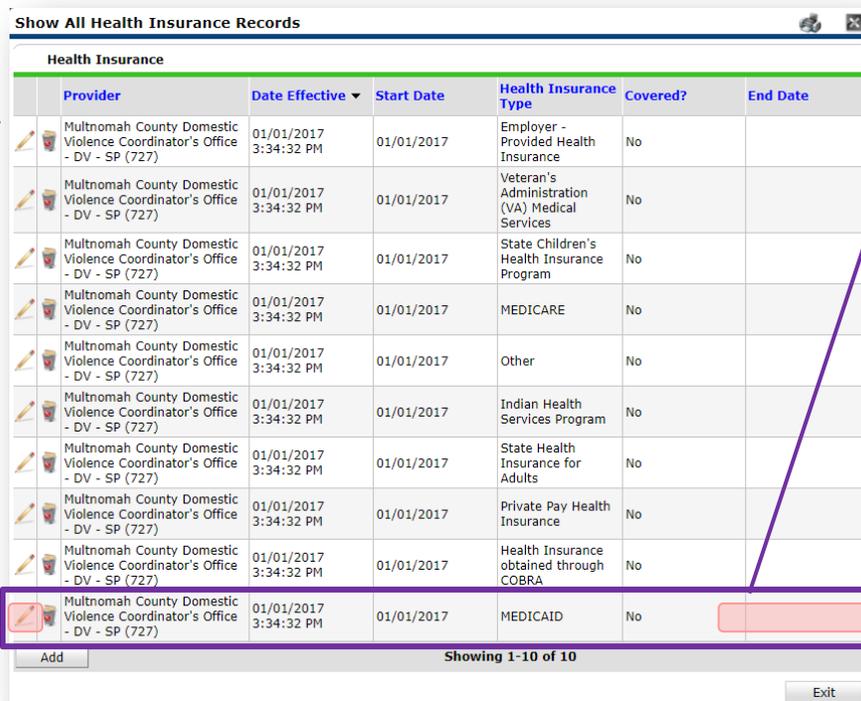
The HUD Verification question about Health Insurance in the new program's entry pulls the "No" answer from the last time this question was answered, just like all other questions in ServicePoint. Flip the answer in the first part of the question from a "No" to a "Yes".



Click on the magnifying glass icon to review each of the individual answers within the HUD Verification.



Tip: The **Start Date** shows the date of the entry wherein each answer was created.



OHP is recorded in ServicePoint as "MEDICAID", so this is the line that must be updated to reflect that the participant now has health insurance.

Click on the pencil icon in line with this answer to edit.

The **Start Date** tells you the date of the entry wherein this answer was created. When the answer was created on 01/01/2017, “No” was the correct answer to the question “Covered?” for “MEDICAID”.

But as of 01/01/2018, “No” is no longer a correct answer. Document this change by entering an **End Date** for the “No” answer. The date “No” stopped being correct is the date the participant first acquired health insurance; however, the participant isn’t expected to remember that date, and the advocate is not expected to record it.

But the advocate *does* know that on the date the participant completed the intake for the new program, she had OHP. The advocate is only responsible for reporting what is true as of the **Entry Date**. So, use the date of the day before the program entry as the **End Date**.

In this example, the **Entry Date** for the new program is 01/01/2018, so the **End Date** is 12/31/2017.

After entering an **End Date**, click **Save**.

The **End Date** now appears in line with the “No” for the MEDICAID answer.

	Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	MEDICAID	No	12/31/2017
Showing 1-10 of 10						

The next step is to document an ongoing “Yes” for MEDICAID as of the date of the new program entry. Click the **Add** button.

1. The **Start Date** defaults to the date of the Program entry. (**Don't change it**).
2. Health Insurance Type is MEDICAID.
3. Covered? Is “Yes”.

LEAVE END DATE BLANK.

Click **Save**.

A correctly updated HUD Verification question should look something like this:

Show All Health Insurance Records

Health Insurance						
	Provider	Date Effective ▼	Start Date	Health Insurance Type	Covered?	End Date
	Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2018 5:06:56 PM	01/01/2018	MEDICAID	Yes	
	Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Employer - Provided Health Insurance	No	
	Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Veteran's Administration (VA) Medical Services	No	
	Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	State Children's Health Insurance Program	No	
	Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	MEDICARE	No	
	Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Other	No	
	Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Indian Health Services Program	No	
	Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	State Health Insurance for Adults	No	
	Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Private Pay Health Insurance	No	
	Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	Health Insurance obtained through COBRA	No	
	Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/01/2017 3:34:32 PM	01/01/2017	MEDICAID	No	12/31/2017

Add Showing 1-11 of 11 Exit

A HUD Verification question that correctly captures a change in a participant's circumstances may have multiple lines with **End Dates**, but should have only one *ongoing* line per answer, whether "Yes" or "No".



When you're done answering entry assessment questions for the Head of Household, remember to click **Save**, then scroll back to the top of the entry window and click on the names of any other household members included in the entry to complete their assessments.