Neighborhood House

19th Avenue Rapid Re-Housing (RRH)

ServicePoint Handbook

Contents

Questions? Contact the ServicePoint Helpline at servicepoint@multco.us
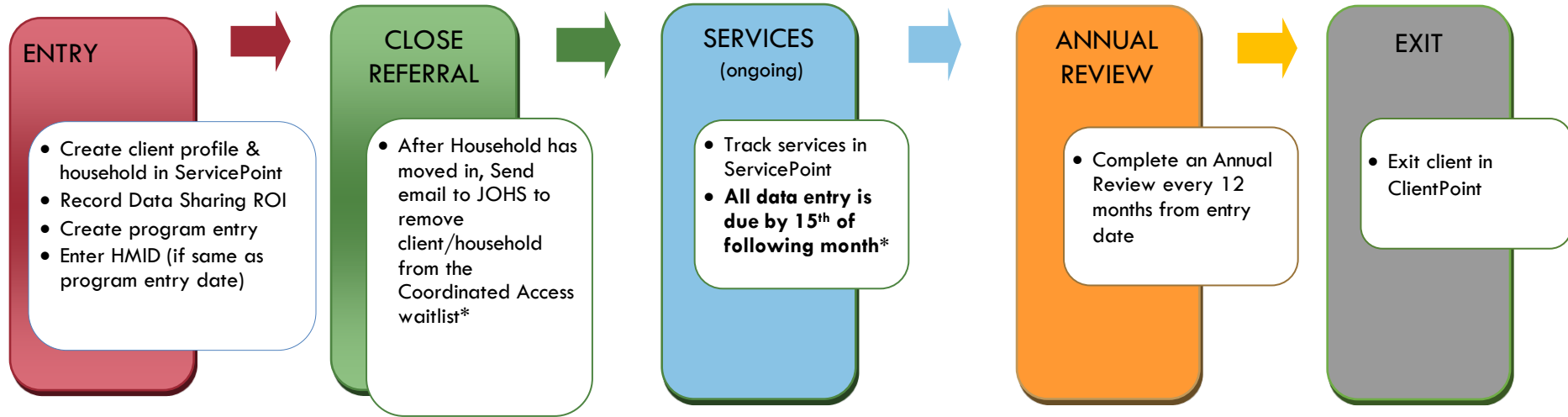http://multco.us/servicepoint

Version 1.1

Neighborhood House RRH ServicePoint Handbook - Revision History

- **November 2021** - Added information on how to select more than one Gender option; added new JOHS Population A/B question to program entry
- **January 2020** – revised steps for removing a family from the Coordinated Access waitlist
- **August 2019 –** original version published

Program Model – Neighborhood House – 19th Avenue

Neighborhood House 19th Avenue Rapid Rehousing Program helps homeless families with children through referrals from Coordinated Access of the Homeless Family System of Care and Domestic Violence System of Care Programs. Neighborhood House operates in a trauma informed manner, a driving framework that recognizes the impact of trauma on family stability. This program uses Assertive Engagement, a client-driven and strengths-based mode of practice that empowers individuals to overcome barriers and achieve self-sufficiency

DATA MILESTONES

ENTRY
- Create client profile & household in ServicePoint
- Record Data Sharing ROI
- Create program entry
- Enter HMID (if same as program entry date)

CLOSE REFERRAL
- After Household has moved in, Send email to JOHS to remove client/household from the Coordinated Access waitlist*

SERVICES (ongoing)
- Track services in ServicePoint
- **All data entry is due by 15th of following month***

ANNUAL REVIEW
- Complete an Annual Review every 12 months from entry date

EXIT
- Exit client in ClientPoint

***EMAIL: SERVICEPOINT@MULTCO.US** TO REMOVE CLIENT/HOUSEHOLD FROM THE COORDINATED ACCESS WAITLIST

BUILD/UPDATE HOUSEHOLD

Household Type	
Head of Household	Only <u>one</u> person should be designated as head of household
Relationship to Head of HH	If client is head of household, this should be 'Self'
HH Date Entered	

TRANSACT ROI — Required for ALL Household Members included in Program Entry

After clients sign a *Client Consent to Release of Information for Data Sharing in Multnomah County* form for their household, transact Parent and NHH 19th Ave level ROI to all household members.

Clients only need to sign one Client Consent form <u>per agency</u>.

Only one Client Consent form 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/multnomah-county-servicepoint-helpline/homeless-family-system-care-hfsc

- View a Video on How to Transact an ROI here: https://www.youtube.com/watch?v=A6YYacA-sd4

Transact ROI under Head of Household	In the client profile of the <u>Head of Household</u>, click on the "ROI" tab. Then, click on "Add Release of Information."
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.

Provider	Click 'Search' to select your PARENT provider (also known as your Login provider) AND **all** applicable Neighborhood House Providers.	**Release of Information Data** Clicking 'Save Release of Information' will create a distinct Release of Information for each selected provider. **Provider *** ☑ Neighborhood House - SP (15) ☑ Neighborhood House: 19th Avenue Rapid Re-Housing (6057) [Search]
Release Granted	Choose Yes or No based on the Client Consent to Share form	
Start Date	Date the Client Consent to Share form was signed	**Release Granted *** Yes **Start Date *** 08 / 19 / 2019 **End Date *** 08 / 19 / 2026
End Date	7 years after Start Date	
Documentation	Select "Signed Statement from Client" - **Verbal consent is not an option**	Documentation Signed Statement from Client Witness Multco [Save Release of Information] [Cancel]
Witness	Enter *Multco*	

When successfully transacted, it should look like this under the ROI tab. You may choose to attach the signed Client Consent to Share form by clicking on the image of the binder clip (optional).

Client Information | **Service Transactions**

Summary | Client Profile | Households | **ROI** | Entry / Exit | Case Managers | Case Plans | Assessments

Release of Information

	Provider	Permission	Start Date	End Date	
	Neighborhood House - SP	Yes	08/19/2019	08/19/2026	
	Neighborhood House: 19th Avenue Rapid Re-Housing	Yes	08/19/2019	08/19/2026	

[Add Release of Information] Showing 1-2 of 2

[Exit]

* Email or call the ServicePoint Helpline if you notice there are other ROIs transacted for the household already and you are unsure what to do: 503-970-4408 or servicepoint@multco.us

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

Name Data Quality

SSN Data Quality - always answer **'Client Refused'** (unless SSN is required for a particular project)

U.S. Military Veteran?

Click the pencil to answer the 3 profile questions

Client Information

| Summary | Client Profile | Households | ROI |

✏️ **Client Record**

Name	Client, Sample
Name Data Quality	Full Name Reported
Alias	
Social Security	
SSN Data Quality	Client refused (HUD)
U.S. Military Veteran?	No (HUD)

ADD PROGRAM ENTRY

- Create a program entry for the <u>Head of Household</u> by clicking on "Add Entry/Exit" from the Summary or Entry/Exit tabs. Click the check box next to the names of **all household member**s to include in the program entry.
- Go into the entry of **EACH** household member (adults and children) to enter program entry data

Entry Provider	Choose the relevant provider: Neighborhood House 19th Ave Rapid Rehousing
Entry Type	Always choose 'HUD'
Entry Date	Defaults to data entry date - **Change to date of intake**

Complete the following questions for EACH Household Member

Housing Move-in Date	If this person is NOT in permanent housing at the time of program entry, make sure this field is **blank** (delete date if needed). When permanent housing placement is made, update this field by creating an Interim Review (see page 9).
Relationship to Head of Household	Choose "Self" if client is head of household. Make sure to designate one person as the head of household. Do NOT assign more than one person as the head of household.
Date of Birth	
Date of Birth Type	
Gender	Use CTRL to select more than one option

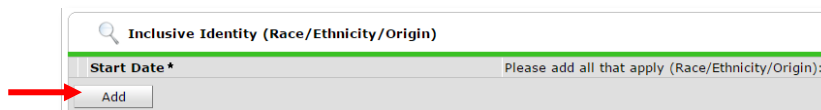**Federal Race/Ethnicity Questions: Required by HUD**

Race	
Race-Additional	(optional) Do not answer the same as what was selected under 'Race' above
Ethnicity	

Inclusive Identity: Required Locally

Inclusive Identity	**Click 'Add' to enter a client's self-identified race/ethnicity. Add all that apply.** This is <u>in addition to</u> the Federal Race/Ethnicity Questions above (i.e. If you entered "White" under Race above, enter "White" here as well).

🔍 **Inclusive Identity (Race/Ethnicity/Origin)**

| Start Date* | Please add all that apply (Race/Ethnicity/Origin): |
| Add | |

Primary Language	

If Primary Language is Other, then Specify	Required if Primary Language chosen above is 'Other' - **Do <u>not</u> enter a 2nd language or a language that is part of the picklist options under "Primary Language"**
Does client have a disabling condition?	
Disabilities	**Click 'HUD Verification' to create a Y/N response for each Disability Type** Disabilities — HUD Verification ⚠ Disability Type · Start Date* · End Date · Disability determination Add
Covered by Health Insurance?	
Health Insurance	**Click 'HUD Verification' to create a Y/N response for each Health Insurance Type** Health Insurance — HUD Verification ⚠ Start Date* · Health Insurance Type · Covered? · End Date Add

Required if Primary Language chosen above is 'Other' - **Do <u>not</u> enter a 2nd language or a language that is part of the picklist options under "Primary Language"**

Does client have a disabling condition?

Disabilities

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

Disabilities HUD Verification ⚠
Disability Type | Start Date* | End Date | Disability determination
Add

Covered by Health Insurance?

Health Insurance

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

Health Insurance HUD Verification ⚠
Start Date* | Health Insurance Type | Covered? | End Date
Add

Complete the following questions for Head of Household and All Adults

Identify JOHS priority population

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

Income from Any Source?

See Appendix I for detailed instructions on recording and updating already existing client income.

Monthly Income

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 HUD Verification ⚠
Start Date* | Source of Income | Receiving Income Source? | Monthly Amount | End Date
Add | View Gross 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

Non-Cash Benefits HUD Verification ⚠
Start Date* | Source of Non-Cash Benefit | Receiving Benefit? | Amount of Non-Cash Benefit | End Date
Add

Residence Prior to Project Entry

Length of Stay in Previous Place

Residence just prior to entry (i.e. the night before entry date). Choose only ONE.

If response to Residence Prior to Project Entry is under HOMELESS SITUATION, you will see the following questions:

Approximate date homelessness started

Regardless of where they stayed last night - Number of times client has been on the streets, in emergency shelter, or safe haven in the past 3 years including today

Total number of months homeless on the street, in emergency shelter or safe haven in the past 3 years

If response to Residence Prior to Project Entry is under INSTITUTIONAL SITUATION **and** Length of Stay in Previous Place is less than **90 days**, you will see the following questions:	
On the night before [residence prior situation], did client stay on the streets, emergency shelter or safe haven? If yes, complete the following:	
Approximate date homelessness started	
Regardless of where they stayed last night - Number of times client has been on the streets, in emergency shelter, or safe haven in the past 3 years including today	
Total number of months homeless on the street, in emergency shelter or safe haven in the past 3 years	
If response to Residence Prior to Project Entry is under TRANSITIONAL AND PERMANENT HOUSING SITUATION **and** Length of Stay in Previous Place is less than **7 days**, you will see the following questions:	
On the night before [residence prior situation], did client stay on the streets, emergency shelter or safe haven? If yes, complete the following:	
Approximate date homelessness started	
Regardless of where they stayed last night - Number of times client has been on the streets, in emergency shelter, or safe haven in the past 3 years including today	
Total number of months homeless on the street, in emergency shelter or safe haven in the past 3 years	

Client Location	Choose OR-501 Portland/Gresham/Multnomah County
Domestic violence victim/survivor?	If response is "Yes," also provide a response to the two follow-up questions: *When did the experience occur?* and *Are you currently fleeing?*
If yes for Domestic violence victim/survivor, when experience occurred	
If yes for Domestic Violence Victim/Survivor, are you currently fleeing?	

Update the following questions when required by funder or administrator:	
Household Size	Required for EACH household member
Percent of Median Family Income	NOT required
Level of Family Income (% HHS Guidelines)	NOT required
Employment Status	Required for Head of Household and ALL Adults
Zip Code of Last Permanent Address	Required for Head of Household and ALL Adults
Client's Residence/Last Permanent Address	NOT required

ADDING A CASE MANAGER

❶ Click on the Case Manager tab in client's profile

❷ Click 'Add Case Manager'

❸ **Check boxes next to client names to include all household members**

❹ Click the 'Me' option to set yourself as the Case Manager

❺ Choose your agency's **MHT Rapid Re-Housing** Provider

❻ Start Date should be the date you started working with the client.

❼ Click 'Add Case Manager'

CHANGING A CASE MANAGER

❶ Click on the pencil next to the name of the former Case Manager

❷ Set the End Date to _the day before_ you started working with the client

❸ Click 'Save Case Manager'

❹ Follow the steps above to add yourself as the new Case Manager

When a household has been placed in permanent housing after the initial program entry date, update the Housing Move-in Date using the following steps. Do NOT pencil back into the program entry to update this field.

❶ Click on the Entry/Exit tab in the <u>Head of Household's</u> profile

❷ Click on the icon in the 'Interims' column

❸ Click the 'Add Interim Review' button

❹ Click to include all household members

❺ Choose 'Update' for Interim Review Type

❻ Set 'Review Date' to Housing Move-in Date

❼ Click 'Save & Continue'

❽ Fill in or update the 'Housing Move-in Date'

❾ Click on **each** household member and repeat step 8.

When steps above are Completed, click on 'Save & Exit.'

ENTERING SERVICE TRANSACTIONS IN SERVICEPOINT

- Services may be summed and entered into ServicePoint on a monthly basis.
- Enter all services under the Head of Household; **do NOT** check off children in AE service transactions' **DO** check off children in housing related service transactions.

SERVICES

Start Date	The first date of the month.
End Date	The last date of the month.
Service Type	Select the service type.
Service Staff	Select staff person providing services; contact the helpline to update the list if necessary
# of Units	Total number of service hours rounded to nearest 15 minutes (.25 hours) or Exact dollar amount
Unit Type	Select Hours or Dollars

PROVIDER SERVICES

- Debt Reduction Funds
- Housing Expense Assistance
- Eviction Prevention Legal Assistance
- Housing Expense Assistance
- Rental Deposit Assistance
- Rent Payment Assistance
- Utility Assistance

EXITING FROM NEIGHBORHOOD HOUSE

See income instructions on pg.16 on how to **end date** income and benefits records and **add** new ones.

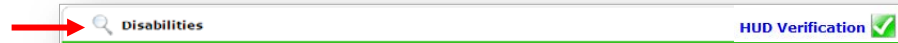| EXIT	Answers from Entry will carry over. <u>Remember to update all responses that have changed</u>.
Exit Date	Defaults to data entry date – change to Exit Date
Reason for Leaving	
Destination	
Verify, and if applicable, update the following questions for EACH Household Member	
Housing Move-in Date	Review. Leave blank or delete only if client is NOT in permanent housing at exit.
Relationship to Head of Household	
Does client have a disabling condition?	
Disabilities	**Click magnifying glass to check that all responses are still accurate**
Covered by Health Insurance?	
Health Insurance	**Click magnifying glass to check that all responses are still accurate**
Verify, and if applicable, update the following questions for Head of Household and All Adults	
Income from Any Source?	
Monthly Income	**Click magnifying glass to check that all responses are still accurate**
Non-cash benefit from any source?	
Non-Cash Benefits	**Click magnifying glass to check that all responses are still accurate**
Update the following questions when required by funder or administrator:	
Percent of Median Family Income	NOT required
Achieved case plan goals	NOT required
Client's Residence/Last Permanent Address	NOT required
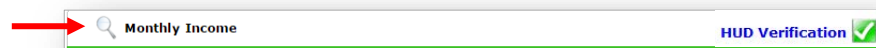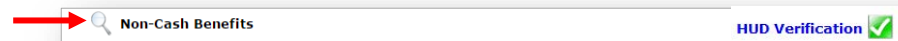
How To Do The Annual Assessment For Participants Receiving Housing Support

Any Participant enrolled in a Housing program for a year or more should have an Annual Assessment completed to update Health Insurance, Disabilities (for all adults and children) and Income and Non-cash Benefits (for all adults in household). The Review Date must be within a month before or after their enrollment anniversary in the program

1. Click on the Entry/Exit tab
2. Click Interim for the correct Program Entry

3. Click Add Interim Review

4. Select "Annual Assessment" as the Interim Review Type

5. Enter the Review Date (within one month before or after anniversary date) then click Save & Continue

The four questions/topics that need to be updated will appear. Check each one using the directions on the following page to determine if the data needs to be updated. Things to remember:

- The Health Insurance and Disabilities questions need to be updated for all people in the household, including children. If anyone's got, lost or changed Health Insurance from the time of Program Entry, it should be updated at the Annual Assessment. Same for Disabling Condition and the Disability Type.

Income and Non-cash Benefits need to be updated for all adults (people over 18) in the household **Income**:

1. Click on the magnifying glass to the left of Monthly Income. This will pop open a window that says Show All Monthly Income Records

Income

| Income from Any Source | Yes (HUD) ▾ | G |

🔍 **Monthly Income**   **HUD Verification** ✅

	Start Date*	Source of Income	Receiving Income Source?	Monthly Amount	End Date
✏️ 🗑️	10/01/2014	Worker's Compensation (HUD)	No		

2. Click on Monthly Amount to sort by that column so you can see all the active Income Records (which means: there is a Yes under "Receiving Income", an amount under "Monthly Amount" and a blank End Date).

Show All Monthly Income Records

Monthly Income

	Provider	Date Effective	Start Date	Source of Income	Receiving Income Source?	Monthly Amount	End Date
✏️ 🗑️	Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	10/30/2014 4:41:31 PM	10/30/2014	TANF (HUD)	Yes	US$345.00	
✏️ 🗑️	Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	10/01/2014 8:18:56 PM	10/01/2014	Alimony or Other Spousal Support (HUD)	No		

3. If an Income has changed, click the pencil on the far left of that Income line, which will open the window for that record so you can edit it

4. Enter an End Date that is <u>one day before the date of your Annual Assessment</u>. Then click Save.

Edit Recordset - (198068) test, HOH

Monthly Income

Start Date*	10 / 30 / 2014	G
Source of Income	TANF (HUD) ▾	G
If Other, Please Specify		
Receiving Income Source?	Yes ▾	G
If other, specify		G
Monthly Amount	345	G
End Date	01 / 26 / 2015	G
ARCHIVAL USE ONLY!	-Select- ▾	G

5. If that Income Source has a new Amount, click Add at the bottom of the page (not shown here), which will bring up a new Income window that automatically has the date of your Annual Assessment

6. Select the Source of Income

7. Select Yes for Receiving Income Source ***(very important and easy to miss)***

8. Enter the new Monthly Amount, leaving the End Date blank

Add Recordset - (198068) test, HOH

Monthly Income

Start Date*	01 / 27 / 2015	
Source of Income	TANF (HUD) ▾	G
If Other, Please Specify		
Receiving Income Source?	Yes ▾	Don't forget about me!
If other, specify		G
Monthly Amount	550	G
End Date	/ /	G
ARCHIVAL USE ONLY!	-Select- ▾	G

Save   Save and Add Another   Cancel

When you're done updating, repeat Step 1 and 2 above to confirm what you've entered is correct. You should see something like this for each Income Source you changed:
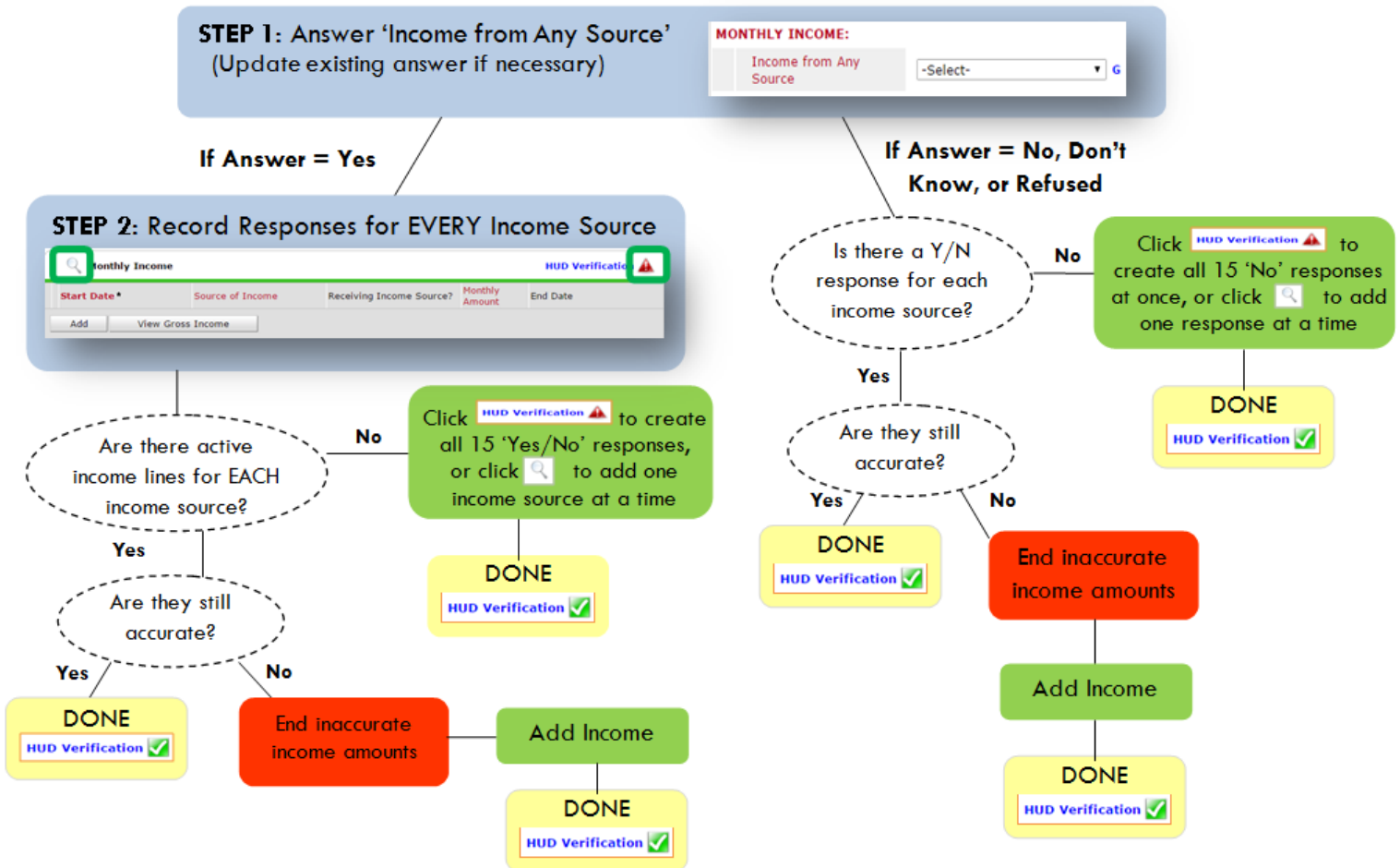
Show All Monthly Income Records

Monthly Income

	Provider	Date Effective	Start Date	Source of Income	Receiving Income Source?	Monthly Amount	End Date
✏️ 🗑️	Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	10/30/2014 4:41:31 PM	10/30/2014	TANF (HUD)	Yes	US$345.00	01/26/2015
✏️ 🗑️	Multnomah County Domestic Violence Coordinator's Office - DV - SP (727)	01/27/2015 11:29:58 AM	01/27/2015	TANF (HUD)	Yes	US$550.00	

- 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.

STEP 1: Answer 'Income from Any Source' (Update existing answer if necessary)

MONTHLY INCOME:
Income from Any Source — -Select- — G

If Answer = Yes

If Answer = No, Don't Know, or Refused

STEP 2: Record Responses for EVERY Income Source

Monthly Income — HUD Verification

| Start Date * | Source of Income | Receiving Income Source? | Monthly Amount | End Date |

Add — View Gross Income

Are there active income lines for EACH income source?

No → Click **HUD Verification** to create all 15 'Yes/No' responses, or click 🔍 to add one income source at a time

DONE — HUD Verification ✅

Yes

Are they still accurate?

Yes → **DONE** — HUD Verification ✅

No → End inaccurate income amounts → Add Income → **DONE** — HUD Verification ✅

Is there a Y/N response for each income source?

No → Click **HUD Verification** to create all 15 'No' responses at once, or click 🔍 to add one response at a time → **DONE** — HUD Verification ✅

Yes

Are they still accurate?

Yes → **DONE** — HUD Verification ✅

No → End inaccurate income amounts → Add Income → **DONE** — HUD Verification ✅

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

ADDING INCOME

❶ To create all 15 income responses at once for NEW clients, click the HUD V icon **HUD Verification**. If updating clients who already have responses, click the magnifying glass 🔍

❷ Leave Start Date as default (date of Entry, Annual Review, or Exit)

❸ Select Source of Income

❹ Monthly Amount = ($ amount from this source)

❺ Leave End Date blank

❻ 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.

❶ Click the pencil next to outdated income

❷ Leave Start Date, Source, and Amount unchanged

❸ End Date = the **day before** Entry/Annual Review/Exit

❹ Save and Exit

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

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.

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, or for the Disability types, an additional box will pop up. See Step 5 and/or 6 below.

Otherwise, click **Save & Exit**.

5. **INCOME**: 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 it that income will be continuous and ongoing.

Monthly Income

Start Date *	10 / 01 / 2014
Source of Income	TANF (HUD)
If Other, Please Specify	
Receiving Income Source?	Yes
If other, specify	
Monthly Amount ⑤	487
End Date	/ /
ARCHIVAL USE ONLY!	-Select- ▼

Save   Cancel

6. **DISABILITIES**: Enter "Yes"* in the 2 fields below the Note on Disability box.

***If the project requires an official documentation of disability, you must have that in the client file in order to enter "Yes".**

Click **Save.**

Continue answering the remaining Entry questions.

Add Recordset ⊠

Disabilities

Disability Type	Mental Health Problem (HUD)
Start Date *	07 / 30 / 2018
Note on Disability	
Above condition is going to be long term? (Retired)	Yes ▼
If Yes, Expected to be of long-continued and indefinite duration and substantially impairs ability to live independently	Yes (HUD) ▼
Disability determination	Yes (HUD)
End Date	/ /

Save   Cancel

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 survivor 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.

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!

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.

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.