Introduction
Health centers are increasingly addressing the social determinants of health for their patient population through partnerships and linkages to local housing and service resources. There are many resources that exist through partner federal, state, and mainstream infrastructures that should be part of a health center’s “toolbox” to aid in linking patients to local housing. The US Department of Housing and Urban Development (HUD)’s Section 8 Housing Choice Voucher (HCV) program is a long-standing, critical resource that provides housing stability through rental assistance. With a voucher, individuals and families are able to secure housing, certified by a HUD inspection to meet basic housing quality standards, in the private market. Those working in the front lines of health centers (case managers, social workers, care coordinators, etc.) can be key partners in linking eligible individuals to sustainable, affordable housing and providing health care to HCV participants.

The Housing Choice Voucher Program
The HCV program, the federal government’s primary source of housing assistance for very low-income families, the elderly, and individuals with disabilities, was established in 1974 as part of the Housing and Community Development Act of 1974. The program, which provides housing assistance payments for use in the private rental market, was created “for the purpose of aiding lower-income families in obtaining a decent place to live and of promoting economically mixed housing...” The vouchers are federally funded by HUD, and administered locally by Public Housing Agencies (PHAs).

How the Vouchers Work
Available HCVs are issued to eligible households, allowing them to select a unit in the private market. These are commonly referred to a ‘tenant based’ vouchers, because they are assigned and move with an eligible household. A ‘project-based’ voucher is assigned to a specific unit or property, and residents moving into the unit must meet the program guidelines. Although there are some variations among PHAs in the details of how the program is administered, in all cases, the following guidelines apply:

- PHAs set a rent payment standard based on the average cost of renting a unit depending on size in the community.
- Tenants are responsible for paying 30% of their household’s monthly adjusted gross income for rent and utilities or the PHA’s minimum rent, whichever is less. The PHA then pays the landlord the difference between the tenant portion and the payment standard.
- Once determined eligible, individuals and families receive a voucher that outlines payment standard and size of unit, and a set amount of time to find a unit on the private market.

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1 Defined as families with incomes at or below 50% of the area median income.
Once a tenant finds a unit and the landlord agrees to rent to them, the PHA does a housing quality standards (HQS) inspection and enters an agreement with the landlord. Each year, current voucher holders’ household income and composition are re-examined to confirm eligibility, and the unit is re-inspected.

**Accessing Housing Choice Vouchers**

While the federal guidelines set forth standards for Housing Choice Voucher programs, there are variations in how programs are administered and operated locally. Each PHA develops a written administrative plan, detailing local policies for the administration of their Section 8 HCV program. Health centers can learn and have an understanding about key local policies and procedures in the following areas to inform clients in need of stable affordable housing:

- **Eligibility** depends on factors including income, family size, and citizenship or immigration status. Some criteria are federal and apply to all applicants (e.g. citizenship or eligible immigration status); others, such as income limit, have some flexibility within the federal limits to be determined locally by each PHA. Typically, households must not exceed 50% of the area median income (AMI) in order to be eligible. *They must by law, however, provide 75% of vouchers to applicants with incomes at or below 30% of AMI.*

- **Application** for the HCV program includes the collection and verification of family income, assets, and family composition. Applicants are expected to provide documentation for all members of the household, including items such as: birth certificate, proof of citizenship or immigration status, proof of income, bank statements, benefit award letters, and photo ID.

- **Preferences and Wait Lists.** In most communities, the demand for HCVs far exceeds the resources available, leading to waiting lists and brief windows for application. PHAs can set admissions preferences based on need (for example, by prioritizing households experiencing homelessness) or other factors/populations, such as people with disabilities or veterans. In most communities, applying for a voucher will not address a household’s immediate housing crisis. For more information on the application process and wait list, contact your local PHA.

**Types of Vouchers**

In addition to traditional tenant-based vouchers for very low-income individuals and families, there are specialized programs targeted to specific populations. Health Centers should be aware of these resources as they are focused on special and vulnerable populations. Some of these specialized vouchers include:

- **Veterans Affairs Supportive Housing (HUD-VASH):** combines HCVs with case management services from the Department of Veterans Affairs (VA) for veterans in need of rental assistance, case management, and clinical services in order to maintain stable housing.

- **Family Unification Program (FUP):** targeted to families that have child welfare involvement due to lack of stable housing, and youth (18-24 years) who are experiencing or at risk of homelessness and have left, or will shortly leave, foster care.

- **Mainstream (Section 811) Vouchers:** targeted to non-elderly individuals with disabilities who are transitioning out of institutional or other segregated settings, at serious risk of institutionalization, homelessness, or at risk of becoming homeless.

*Please note that not all PHAs have all types of vouchers, so it is important to contact your PHA to inquire about the programs available locally.*

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4 More information on HUD-VASH available here: [https://www.va.gov/homeless/hud-vash.asp](https://www.va.gov/homeless/hud-vash.asp)

5 More information on FUP available here: [https://www.hud.gov/sites/documents/FUP_FACT_SHEET.PDF](https://www.hud.gov/sites/documents/FUP_FACT_SHEET.PDF)
Health Center Connections
Having an understanding of the Housing Choice Voucher program and how it works in your local community provides another tool in the Social Determinants of Health toolbox for Health Centers. Some specific steps that health centers can take to better connect their consumers experiencing homelessness or housing instability to rental support through the Housing Choice Voucher program include:

- **Contacts** Learn which PHA administers HCVs and public housing units in your community and how the application processes work, including what information/documentation needs to be provided.
- **Eligibility** Find out about local eligibility criteria, priorities, and approximate waiting list length. Information can be gathered from the PHA’s administrative plan, website, and/or by phone.
- **Property Locations** Research other affordable housing opportunities in your community, including Section 202 and Section 811 buildings, and find out about application processes, preferences, and wait lists.
- **Documentation** Provide a list of documentation needed to people that are considering applying for PHA housing programs, and if possible, help them secure documentation that they need. Individuals and families experiencing homelessness often do not have all of the documents that will need to be submitted, and it may take time and effort to secure these items.
- **Coordination and Partnerships** Work to develop partnerships with local PHAs and the local homeless/housing system to enhance coordination of efforts to access housing and health care for individuals and families who are experiencing or at risk of homelessness.
- **Types of Services** Help PHAs understand the services your health center can provide to their tenants, and the importance of stable, affordable housing for positive health outcomes.
- **Data and planning** Participate in the local PHA’s planning process by providing data and best practices to encourage the creation or maintenance of preferences and set-asides and programs targeted to homeless, disabled, and medically vulnerable individuals in need of stable, affordable housing.

ABOUT CSH
CSH has been the national leader in supportive housing for over 25 years. We have worked in 48 states to help create stable, permanent homes for individuals and families. This housing has transformed the lives of over 200,000 people who once lived in abject poverty, on our streets or in institutions. A nonprofit Community Development Financial Institution (CDFI), CSH has earned a reputation as a highly effective, financially stable organization with strong partnerships across government, community organizations, foundations, and financial institutions. Our loans and grants totaling over $750 MM have been instrumental in developing supportive housing in every corner of the country. Through our resources and knowledge, CSH is advancing innovative solutions that use housing as a platform for services to improve lives, maximize public resources, build healthy communities and break the cycle of intergenerational poverty. Visit us at csh.org to learn more.
“This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under # U30CS26935, Training and Technical Assistance National Cooperative Agreement (NCA) for $450,000 with 0% of the total NCA project financed with non-federal funds. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.”