

Leveraging Federal Recovery Money to Maintain and Expand Health Center Services and Partnerships

Department of Housing and Urban Development (HUD)

States and localities have significant new funding via the **CARES Act** and the **American Rescue Plan (ARPA)**. Health Centers are experts on new HRSA funding, but there are also new federal Department of Housing Urban Development (HUD) Funds, new Public Health Funds via the Centers for Disease Control (CDC), Medicaid Home and Community Based Services (HCBS) funds via Centers for Medicare and Medicaid Services (CMS) and State Medicaid offices and new Behavioral Health related funds via the Substance Use and Mental Health Services Administration (SAMHSA). Many of these funds are targeted to similar populations served by Health Centers, and will assist with the targeting of individuals served by health centers at the community level.

This series of briefs will describe in detail the funding sources, the differing processes by which funding becomes available at the state and local level and the planning and stakeholder input process that each funding stream requires prior to awarding or implementing funds.

The goal of this brief is for a health center audience to understand these funding streams and award processes sufficiently so that they can:

1

Build or improve relationships with community partners who are awarded these funds

2

Support patients in accessing needed housing and services

3

Represent and share the voice of their community and patients through stakeholder processes

4

Consider applying for these funds or future funding allocations via these funding streams when mission is aligned.

New Funding, Purpose and Target Population

This brief summarizes the funding received by the federal department of Housing and Urban Development (HUD) as part of the Coronavirus Aid, Relief and Economic Security (CARES) Act of 2020 and the American Rescue Plan (ARPA) funds. The CARES act was passed in March of 2020, as an immediate response to the Public Health Emergency (PHE) caused by the COVID-19 Pandemic. ARPA was passed in March of 2021, in response to the ongoing PHE and the economic crisis caused by the PHE. Via CARES and ARPA, HUD received significant increases to current programs, including the Community Development Block Grant (CDBG) program¹,

the Emergency Solutions program (ESG)², the HOME program³, and many state and local housing authorities received allocations of new Emergency Housing Vouchers (EHVs)⁴. The funding from CARES and ARPA was designed to address housing challenges that a PHE causes with the end goal of keeping everyone safe.

For a full listing of a HUD CARES Act funds see:

<https://www.csh.org/resources/what-health-centers-need-to-know-about-cares-act-an-interactive-resource-guide/>

What Funding is Available?

COMMUNITY DEVELOPMENT BLOCK GRANT

Coronavirus (CDBG-CV) program provided \$5 billion nationally to states and localities to prevent, prepare for and respond to Coronavirus.⁵ Funds were distributed to state and local government entities that already received CDBG funds and HUD posts awardees and amounts on their website.⁶ Funds must be expended by 3 years after period of performance.⁷ Eligible activities include:

- + Public Service Activities
- + Housing Related Activities
- + Public Improvement and Facilities
- + Activities to Acquire Property
- + General Economic Development
- + Administration and Planning Activities

EMERGENCY SOLUTIONS GRANT

CARES ACT (ESG-CV) program nationally received \$4 billion total for immediate COVID response, in particular to address homelessness and the increased risk of COVID spread in homeless systems.⁸ Funds must be expended by awardees by 24 months after the local grant agreement was signed.⁹ Funds were distributed to state and local government entities that already receive ESG funds and Eligible activities under ESG include:

- + Street outreach
- + Emergency shelter
- + Homelessness prevention
- + Rapid-rehousing

1 <https://www.hudexchange.info/programs/cdbg/>

2 <https://www.hudexchange.info/programs/esg/>

3 https://www.hud.gov/program_offices/comm_planning/home

4 <https://www.hud.gov/EHV>

5 <https://www.hudexchange.info/programs/cdbg-cv/>

6 https://www.hud.gov/program_offices/comm_planning/budget/fy20

7 https://www.hud.gov/sites/dfiles/CPD/documents/CDBG-CV_Notice_Federal_Register_Publication_2002-08.pdf

8 <https://www.hudexchange.info/programs/esg/esg-cv/#program-requirements>

9 <https://www.hud.gov/sites/dfiles/OCHCO/documents/20-08cpdn.pdf>

EMERGENCY HOUSING VOUCHER (EHV)

Nationally, this program received \$5 billion for public housing authorities (PHAs) to increase the number of low income households served by Housing Choice Vouchers (HCVs). Through EHV, HUD is providing 70,000 housing choice vouchers to local Public Housing Authorities (PHAs) in order to assist individuals and families who are homeless, at-risk of homelessness, fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or human trafficking, or were recently homeless or have a high risk of housing instability. Households can be awarded these vouchers through 9/30/23 and households that are using these vouchers can continue to use them until the household is no longer using the voucher. Through the HUD EVH website¹⁰ there is a listing of which PHAs received EHV's and a dashboard that tracks utilization.

Housing authorities are required to have a memorandum of understanding (MOU) with their local Homelessness system, called the Continuum of Care (COC). Eligibility requirements for the vouchers include that households are homeless or at risk of homelessness. Housing authorities are allowed to have additional requirements for these vouchers and the housing authority's administrative plans around eligibility for vouchers usually remains in place.

COC's have a Coordinated Entry (CE) process that should be the front door for health centers to access these vouchers for your patients.

THE HOME-AMERICAN RESCUE PLAN (ARP) PROGRAM

Nationally, this program received \$5 billion to assist households who are homelessness or at risk of homelessness. Funds were distributed to state and local government entities that already receive HOME funds.¹¹ State and local awardees, usually government agencies have wide discretion in how funds are used including:¹²

- + Production or Preservation of Affordable Housing
- + Tenant-Based Rental Assistance (TBRA)
- + Supportive Services, Homeless Prevention Services, and Housing Counseling
- + Purchase and Development of Non-Congregate Shelter

Awards were released in April, 2021 via HUD's Implementation Notice in September, 2021¹³ and awardees need to submit plans and go through an approval process for funds to be released.

Who Decides About the Funding in My Community?

Each community will have a variety of housing related agencies in place that plan for, receive, award and administer the funding. Each entity has their own board, strategic plan, administrative processes and stakeholder engagement process that will need to be followed.

Housing related entities in your communities include:

- + The **Continuum of Care (COC)** that manages the homeless systems in communities

- + The local **Public Housing Authority (PHA)** that manages the Housing Choice Voucher (HCV) program and also operates the Public Housing in a community
- + The state **Housing Finance Agency (HFA)** that leads state efforts around housing planning and development. The state HFA also administers the Low Income Housing Tax Credit program
- + The Local and/or **State Housing/ Community Development Department**

¹⁰ <https://www.hud.gov/ehv>

¹¹ <https://www.hud.gov/sites/dfiles/CPD/documents/HOME-ARP.pdf>

¹² <https://www.hudexchange.info/programs/home-arp/overview/>

¹³ <https://www.hud.gov/sites/dfiles/OCHCO/documents/2021-10cpdn.pdf>

Health centers, depending upon their mission or Social Determinant of Health (SDOH) data may choose one or more of these entities to engage with via their stakeholder processes. Health centers who wish to influence this process may look to join a board, offer public comments when opportunities are offered or partner with their local

housing related nonprofits or even consider becoming housing developers themselves. Health centers should look to their SDOH data to help them see the greatest needs of their patient population and consider where to engage on the local level based upon this data.

Stakeholder Engagement Process

In the affordable housing sector, each funding stream has their own process for engaging community stakeholders. Those processes commonly involve Boards that provide leadership, vision, and planning efforts that result in regular community wide reporting and an increasing amount of transparency via reports to community stakeholders. Some aspects of this process are required by HUD for funding, while others may be driven by state or local political officials. The federally required processes are noted below but Health Centers will need to investigate specific processes for their state and localities.

Health centers should start by understanding where they sit in the affordable and supportive housing space. Have conversations with the board, leadership and staff. Do you have housing related expertise and leadership on your board or in leadership? Should you consider adding that expertise? Or if already in place, what are local recommendations to drive the affordable and supportive housing development to address the needs your health center is seeing?

CONTINUUMS OF CARE (COCS)

CoCs are required to have a board that oversees the annual application for funding to HUD develops strategic plans and priorities and oversees implementation of developing programs and systems around homelessness in a specific community. Boards are required to include People with Lived Expertise (PLE) and to be as diverse as the people experiencing homelessness in a community. They also require broad representation of housing and services providers from communities including health systems and health

centers. CoCs apply annually to a HUD Notice of Funding Opportunity or NOFO both to renew federal funding for current programs and to compete for new funding as available. That application also includes a strategic plan section around how the community is deploying its current funding and asking for new money to expand efforts to end homelessness.

HOW HEALTH CENTERS CAN GET INVOLVED:

- Join** the local CoC board or subcommittee focused on Health and Housing.
- Develop** the process, so your health center can make referrals to the community's Coordinated Entry system.
- Sharing** any aggregate health center data being collected around SDOH needs in your communities.
- Host** a cross sector networking event or reach out to other community agencies whose population and mission aligns, but whose expertise complements the health center's work.

PUBLIC HOUSING AUTHORITY (PHA)

Housing Authorities also are overseen by boards, which may be appointed by the mayor, county commissioners or other local political leadership. Their boards commonly have at least one PLE, who may represent a Resident Council of a public housing development. Each Housing Authority is required every 5 years to update their strategic plan, also called a Public Housing Authority or PHA plan. That plan summarizes the

policies the housing authority uses to administer their program, including admissions and occupancy policies, priority populations, policies around housing voucher issuance, landlords and how they housing authority will ensure compliance to Fair Housing law. A segment of this plan is the Admissions and Continued Occupancy Policy or ACOP that states clearly the Housing Authorities policy on who they will serve. All aspects of the plan are reviewed and approved, by the community and the PHA board and health centers can engage here to influence this process.

HOW HEALTH CENTERS CAN GET INVOLVED:

- ☑ **Research** your community's Housing Authority Board, who its members are, how they are appointed and how to influence the process.
- ☑ **Review** your Housing Authorities' administrative plans and see what their priorities and goals are, whose restricted from their programs and how does those priorities align with the needs your health center is seeing in your community.
- ☑ **Engage** with your Housing Authority to see how to make referrals for Health Center patients with affordable housing needs.
- ☑ **Determine** how your health center policy group can support Housing Authority policy and advocacy priorities and vice versa. Engage Housing Authorities on joint policy engagement.

HOUSING FINANCE AGENCY (HFA)

Each state has a Housing Finance Agency or HFA. The HFA are commonly a quasi-governmental entity. Their core mission is to increase affordable housing availability across the state by administering a wide array of government programs. Community development as well as housing programs, often fall under their administration. The HFAs are led by a board of directors and the board is appointed by the governor, with often strong legislative engagement. HFAs have the authority to issue housing bonds, administer the HOME program and the Low Income Housing Tax Credit

or LIHTC program. Commonly state HFAs may also receive and/or administer Community Development Block Grant (CDBG) funds or operate as the Balance of State homeless CoC Program, for rural areas where the program is not large enough to merit it owns local department. HFAs annually issue a Qualified Allocation Plan or QAP, outlining the HFA's priorities throughout the year for their funding.

HOW HEALTH CENTERS CAN GET INVOLVED:

- ☑ **Understand** the type of housing programs that your state HFA administers.¹⁴
- ☑ **Understand** public planning process including the (QAP) for state HFA resources and programs.
- ☑ **Engage** in public planning processes, public participation and public comments processes to ensure resources are being utilized to meet the needs of your patient populations.
- ☑ **Provide** pertinent data where applicable to show patient housing needs.

STATE AND LOCAL HOUSING/ COMMUNITY DEVELOPMENT DEPARTMENTS

States, counties and cities have their own housing and community development departments that may also cover areas of economic development, community development as well as affordable housing and public sector activities. These government agencies commonly receive and administer HOME funds, CDBG funds, and local or state rental assistance programs and funding. They are partners with Housing Authorities and Continuums of Care in addressing homelessness, housing instability and ensuring safe, affordable, welcoming neighborhoods throughout communities. These departments usually are headed by a director or executive director, who reports to city, county or state political leadership.

These departments also usually have a community stakeholder process that holds regular meetings to hear about community needs and preferences, share plans, and stay in dialogue with the community. If the department receives HUD funds, then they need to develop and update annually a Consolidated Plan that pulls together data across the designated geographic region around housing availability, housing need and how the department's resources will be deployed to address those gaps. These department's most comprehensive, regular reporting to HUD is called the Consolidated Annual Performance and Evaluation Report CAPER or CAPER¹⁵. This report summarizes housing and community development data across the geography and offers annual updates to determine impact of the departments' efforts.

HOW HEALTH CENTERS CAN GET INVOLVED:

- ☑ **Learn** about access or entry points to these new housing resources in your community. Develop a process to refer health centers patients who are experiencing homelessness or housing instability to these resources. Develop a process about how your health center will capture this data about referrals and access. Consider what supports your patients need throughout this process and look at how health centers resources can offer that support.
- ☑ **Research** the agencies and leaders in your community, who are part of the board or planning process for your community's Consolidated Plan. Review your communities CAPER data.

- ☑ **Research** the community engagement stakeholder process and testify about your health centers SDOH data and needs you are seeing in the community.
- ☑ **Meet** with local housing department leadership or their funded agencies about a potential partnership. Consider agencies whose mission and geographies match your health center.

Significant new funding has been allocated by the federal government to a variety of state and local entities to create new affordable and supportive housing in communities across the nation. Health centers have an opportunity to create new partnerships, learn and build a network in this sector, share aggregate data around the housing needs of their patients and support their communities in new and unique ways to address the whole person needs of the people and communities they serve.

15 <https://www.hudexchange.info/programs/consolidated-plan/con-plans-aaps-capers/>



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