

Law and Disability Conference

Housing: A Social Determinant of Health

May 2, 2024



Housing: A Social Determinant of Health

Moderator: Diane Riley, Executive Director, Supportive Housing Association

Panelists:

**Joseph Bongiovanni, Director MLTSS
New Jersey Department of Human Services**

**Jonathan Tew, Policy Director
Division of Medical Assistance & Health Services
Department of Human Services**

**Melanie Walter, Executive Director
NJ Housing and Mortgage Finance Agency**

**Janel Winter, Asst Commissioner & Director
Division of Housing & Community Resources
The Department of Community Affairs**

**Erika Kerber, Executive Director
Community Health Law Project**



AFFORDABLE

SAFE

CLEAN

ACCESSIBLE



Supportive Housing
Association of New Jersey

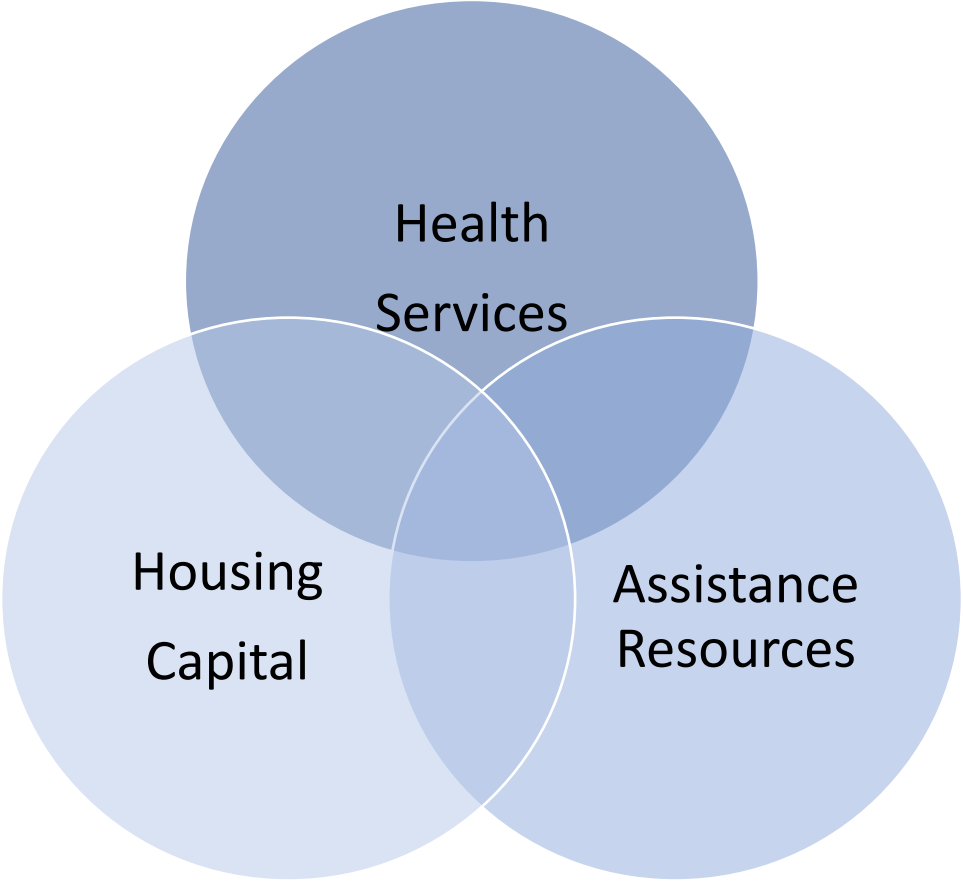
Who Needs Housing



- HOMELESS
- I/DD
- MENTAL HEALTH
- ADDICTION
- AGING
- PHYSICALLY
- VETERANS
- JUSTICE
- FAMILY ECONOMICS
- OTHER



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Affordable Housing



Constitutional Obligation for municipalities to provide their “fair share” Number of required units varies for each municipality

Based on population, expected growth, median income of the region, current availability of affordable housing stock

Can be met through sales, rentals, **supportive housing**, senior/age restricted developments, housing rehabilitation programs



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Joseph Bongiovanni

Housing and Healthcare

- NJ FamilyCare and our provider and managed care partners see the impact stable housing and supports can have on the health of members.
- National evidence and experience have also shown the importance of housing in health.
- The healthcare culture is shifting in NJ and nationally from a strictly medical model to one of whole-person care.
- NJ FamilyCare is working to reduce silos across physical health, behavioral health and the social determinants of health (SDOH).
- This effort is enabled by the support and leadership of the Centers for Medicare and Medicaid (CMS). Years of work has resulted in frameworks and rules at the federal level to allow NJ to recognize and address the role of housing in health.



Investing in People, Changing Lives: Innovations in Supportive Housing and Healthcare Partnerships

By: Executive Director Melanie R. Walter, Esq.



ABOUT US:

The New Jersey Housing and Mortgage Finance Agency (NJHMFA) provides funding for affordable homeownership and housing opportunities for New Jersey residents. NJHMFA is the State's housing finance agency. We respond to the needs of residents by implementing creative programs and establishing alliances that: fund affordable home mortgages for first-time home buyers. NJHMFA's programs are offered through our network of approved lenders.



Special Needs Housing Trust Fund

- The Special Needs Housing Trust Fund (SNHTF) has served as a critical financing source for permanent and supportive housing initiatives.
- Since its inception in 2005, the SNHTF has funded 172 projects, resulting in the creation of over 4,000 homes, including more than 2,000 special needs beds.
- Recent legislation enacted in 2021 provided permanent financing for the trust fund, enabling significant progress. In 2023 alone, we closed on projects that delivered 164 units and 79 special needs beds.



Special Needs Housing Trust Fund

- Funding Support: Up to \$4 million or 80% of development costs for land acquisition, construction, and unit rehabilitation.
- Long-Term Affordability: Emphasis on projects ensuring affordability for residents earning under 20% of the Area Median Income over 30 years.
- Project Range: From small group homes to large multifamily complexes, addressing varied housing needs.
- Qualified Allocation Plan (QAP) Requirements:
 - Allocate a minimum of 25% of units to individuals with special needs.
 - Include a dedicated social service coordinator and tailored services for specific populations, such as those with disabilities, mental illness, homelessness, youth transitioning from foster care or the juvenile justice system, ex-offenders, victims of domestic violence, and other identified groups by State agencies.



Wharton Group Home Wharton, New Jersey



The Wharton Group Homes offer individuals with disabilities a supportive environment for independent living. Residents personalize their own rooms to create a comfortable home. Dedicated staff are available 24/7 to empower residents to engage in community activities and pursue personal interests. With four individual bedrooms, personalized care and community integration are prioritized. The SNHTF contributed \$456,000 to this project.



Osprey Point Little Ferry, New Jersey



Osprey Point demonstrates the positive impact of affordable housing near essential services for seniors and individuals with special needs. It includes 68 apartments for those aged 55 and older, located near a community center providing key services for active aging. Additionally, there are 22 units for special needs residents, including 14 for individuals with Intellectual and Developmental Disabilities and 8 for mental health support. The SNHTF contributed \$2,867,954 to this project.



Hospital Partnership Subsidy Program

- The Hospital Partnership Subsidy Program stems from a very simple premise: Housing is health care.
- Hospitals, Communities, Service Providers, Developers and NJHMFA work together to create affordable and supportive housing near health care institutions
- NJHMFA provides federal low-income housing tax credits and matching gap subsidy funds to make hospital owned affordable housing units viable.
- Hospitals benefit from on-site clinic space, reduced ER utilization, and measurable beneficial outcomes in their host city.
- Projects under this program contribute to positive health outcomes, reducing costs for hospitals, jails, and shelters.



Hospital Partnership Subsidy Program

- Projects with hospitals like St. Joseph University Medical Center (56 units), University Hospital in Newark (78 units), and Virtua Health in Camden (47 units, currently in development) since 2018 have made significant impacts.
- The three closed projects resulted in 178 housing units, including 42 special needs beds, generating over \$90 million in total development.
- Barclay Place in Paterson, a flagship result of this program, has garnered prestigious awards, including the NJ BIZ Award, NJ Smart Growth Award, 2023 Governor's Excellence in Housing and Economic Development Award for Excellence in Housing Development, and Affordable Housing Excellence Award from the Urban Land Institute Northern New Jersey.
- The success of the HPSP led to the creation of the Healthy Housing, Healthy Communities Partnerships (H3C) initiative by NCSHA, funded by a grant from the RWJ Foundation, to replicate similar projects in seven states.

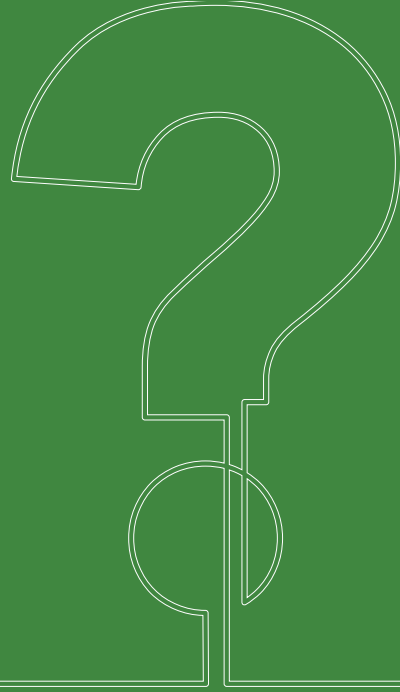


Barclay Place St. Joseph University Medical Center Paterson, NJ



Barclay Place in Paterson offers 56 accessible housing units with supportive services from St. Joseph's Health. The project's financial structure includes contributions of \$3.4 million from the HMFA Hospital Program and a matching amount from the SJH Program, along with \$1 million from the Special Needs Housing fund. LIHTC (4%) proceeds contribute \$9.16 million, supported by a \$4.5 million HMFA Note and grants totaling \$510,103 from sources like FHLB/HOME. A deferred development fee of \$1.43 million completes the funding structure, amounting to a total project funding of \$23.4 million.





Questions & Answers

<https://www.nj.gov/dca/hmfa/>





Jonathan Tew

NJ FamilyCare is Beginning Two Major Housing Initiatives

Healthy Homes

- In partnership with DCA
- Funds the production of up to 200 low rent housing units
- Places Medicaid members in need of housing
- Does NOT include any housing services

1115 Housing Services

- New service offering for NJ FamilyCare managed care members
- Tenancy and Transition Services to help members find and sustain a home
- Includes clinical and social eligibility criteria
- Does NOT provide housing units

North Star Principles

Serve people the best way possible.

We will emphasize **simplicity, efficiency, and comprehensiveness** in our program design to ensure our members are able to receive the services they require.

Communicate with clarity and concern.

We will **maintain communication** with community and state partners to support community-based program design and meaningful program oversight.

Experiment with new ways to solve problems.

We will strive to **seamlessly integrate** into the housing sector, coordinate with ongoing service delivery, and bridge gaps between programs.

Work closely with our stakeholders.

We will collaborate with our **community stakeholders** to raise awareness and provide support, with a shared commitment to equity, inclusion, and continuous improvement.

Show people we care.

We will be **empathetic** and ensure the **member's needs and priorities** are at the center of all decision making.

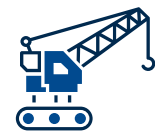
Healthy Homes



Healthy Homes At-A-Glance

Program Overview

New Jersey's Healthy Homes program is a first-of-its-kind program providing stable, supportive housing to Medicaid Members in conjunction with 1115 waiver housing services.



Developing Healthy Homes

Program Financing

\$100M of ARPA Section 9817 funds approved by CMS for use as capital funding for construction & ongoing repairs and replacements.

Housing Development

Development of ~200 deed-restricted affordable units in developments that are or will be approved for other DCA housing production programs.

Units to be distributed throughout the State and in compliance with HCBS requirements.



Housing Members

Eligible Population

Medicaid Members who are homeless or at risk of homelessness or institutionalization.

Member Placement

Units will be divided up among MCOs proportional to their share of the Member population.

Relying on their direct knowledge of member needs and preferences, MCOs will identify and place members who fit program criteria within the bounds of program requirements.

Roles and Responsibilities

	DMAHS	DCA	Developer/ Landlord	MCO	Healthy Homes Participant
Role	Fund and oversee the Healthy Homes program, ensuring that it serves Members' needs and abides by funding restrictions	Support Program oversight and disburse and monitor Healthy Homes funds	Construct Healthy Homes units and ensure they are maintained throughout the program	Identify and select Members for unit placement and support them in transitioning to and living in the unit	Live in the Healthy Homes unit full time and comply with the terms of the program

Funding

Capital Funding (HCBS Spend Plan)

- Fund construction of new units or rehabilitations of existing units
- Can also be used for basic housing needs such as refrigerator, stove, oven, bedframe, mattress, couch, table, etc.

Repair and Replacement Fund (HCBS Spend Plan)

- Fund ongoing maintenance and upkeep of the unit and a proportional amount of common infrastructure (elevators, walkways).

Capitalized Operating Reserve and Rental Assistance (CORRA) (DCA State Funds)

- Will cover a portion of the rent for the member and other costs not covered by the repair and replacement fund (i.e. salaries and taxes).
- Will function similarly to a rental subsidy or voucher for the member.

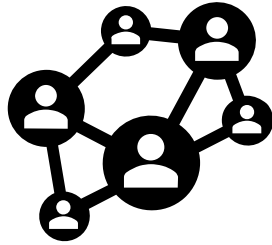


1115 Waiver Housing Services

1115 Demonstration Renewal: April 1, 2023 through June 30, 2028

- On March 30th, 2023, the Centers for Medicare and Medicaid Services (CMS) approved a renewal of New Jersey's Comprehensive 1115 Demonstration.
- We have been designing the housing service program for several months, with several more to go. Looking to launch Q1 2025.
- Has been a collaborative process across DMAHS, other local/state agencies, and numerous stakeholder groups.

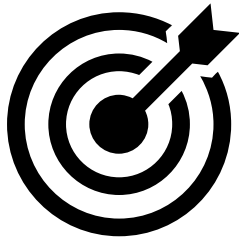
The approval allows us to provide and create...



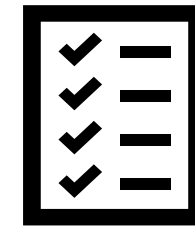
An integrated housing strategy for Medicaid beneficiaries



Medicaid coverage of transition and tenancy sustaining services



Increased MCO accountability to support housing and maintain community connections



A simple and user-friendly assessment process to identify members in need of housing services

Four Proposed Buckets of Services

Pre-Tenancy Services/ Transition Services	One-Time Set Up and Transition Costs	Modification and Remediation	Tenancy Sustaining Services
<ul style="list-style-type: none">• Assist with the housing search and application process• Assist with the set up of a new housing unit to address needs found in the person-centered care plan• Provide connections to resources aiding with housing costs and other expenses	<ul style="list-style-type: none">• Assist with the set-up of the new housing unit, to address needs identified in the person-centered care plan• Identify needs for assistance with arranging the move and supporting the details of the move, as appropriate	<ul style="list-style-type: none">• Remediate (air conditioning units, air filtration devices, asthma remediation)• Modify home environment (ramps, handrails, grab bars)	<ul style="list-style-type: none">• Assistance in linking members to free legal services• Connections to financial resources• Assistance in connecting to social services to help with documentation and applications• Assistance in addressing circumstances and/or behaviors that may jeopardize housing• Assistance in resolving disputes with landlords• Assistance with the housing recertification process

Members must demonstrate social and clinical risk to be eligible housing services

Social risk criteria

- At risk of homelessness or currently experiencing homelessness
- At risk of institutionalization and requiring a new housing arrangement
- Transitioning from an institution to the community
- Recently released from correctional facilities

Clinical risk criteria

- Chronic health condition
- Mental health condition
- Substance misuse
- Pregnancy
- Complex mental health condition from intellectual or developmental disability
- Victims of intimate partner violence, domestic violence, and/or human trafficking
- Assistance with ADLs or IADLs
- Repeated emergency department use or hospital admissions

Program Timeline



Thank you!

To learn more, please contact:

Healthy Homes

- Chelsey Hoelz, Chelsey.Hoelz@dhs.nj.gov
- Joseph Bongiovanni, Joseph.Bongiovanni@dhs.nj.gov

1115 Waiver Housing Services

- Tristan Gibson, tristan.gibson@dhs.nj.gov
- Jon Tew, Jonathan.Tew@dhs.nj.gov

Janel Winter

DCA's rental assistance programs keep more than **47,000** families safely housed every year.



- ▶ Section 8 Housing Choice Voucher Program – 24,400 vouchers
 - ▶ Supportive Housing Connection – 18,000 vouchers
 - ▶ State Rental Assistance Program – 3,500 vouchers
 - ▶ Other Programs – 1,500 vouchers
- More than \$35 million paid to landlords each month on behalf of NJ families

DCA's COVID Emergency Assistance (CVERAP) paid arrears and rent for more than **75,000** households to date.



DCA received more than **\$880 million**

in federal Emergency Rental Assistance (ERA) funds:

Eviction Prevention Program (EPP) assists **30,000** families with \$500 million in ARPA funds

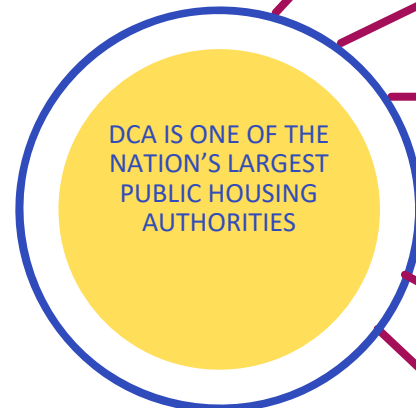


ERA

\$629 million original allocation and \$251 million in reallocations from other areas (29% of total ERA funding due to efficient spending of original allocation)

SECTION 8 HOUSING CHOICE VOUCHER SNAPSHOT

HUD funds more than 3,300 housing authorities nationally; DCA's Section 8 Housing Choice Voucher Program is the **13th Largest in the Nation**



1 24,400 families served annually.

2 \$300 million annual budget

3 99% voucher utilization rate (national average is 86.5%)

4 Avg. rent payment - \$938 per month
13.6% increase in past 5 years

5 Earns \$32 million annually in administrative fees

6 Designated "High-Performing Agency" HUD's Highest Ranking

*Growth since 2015	2015	2022
Vouchers under lease monthly	20,220	23,734
Voucher Utilization Rate	88.7 %	99.1%
Average Monthly Rent Paid	\$16,404,622	\$22,495,559

Health & Housing



Creating New Affordable Housing

Medicaid Health Housing Initiative - \$100 million

Preventing Trauma and Sustaining Family Health

Office of Eviction Prevention

Office of Homelessness Prevention

Lead Remediation and Abatement Programs

Building Healthy Futures

Family Self-Sufficiency and Homeownership Programs

DCA Housing Assistance



Janel Winter

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Legal Services to Support Housing Stability

Presented by:

Erika Kerber, Esq.

Community Health Law Project

Law & Disability Conference

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Social Determinants of Health



“[C]onditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.”

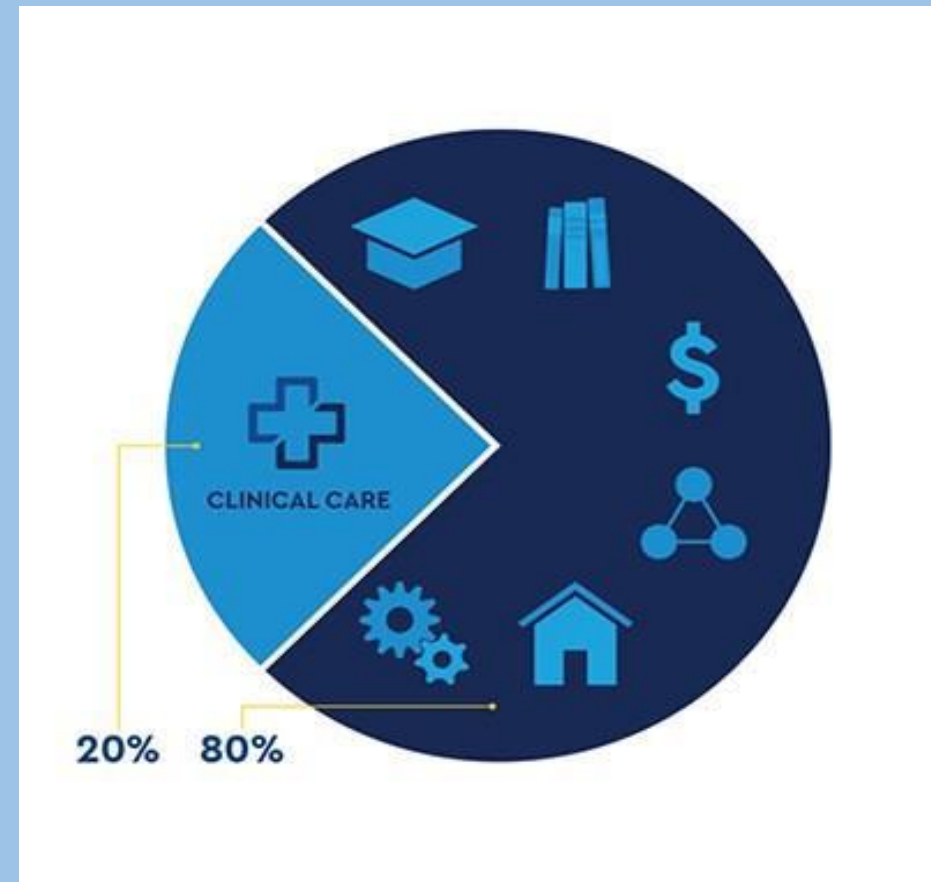
Source: Office of Disease Prevention and Health Promotion, 2020 Topics and Objectives

Common Social Determinants of Health

- **Housing & Utilities:** Healthy Physical Environment
- **Income & Health Insurance:** Resources to Meet Basic Daily Needs and Healthcare
- **Education & Employment:** Quality Education and Job Opportunities
- **Legal Status:** Access to Public Entitlements; Jobs
- **Personal & Family Stability:** Safe Homes and Social Support

How do Social Determinants of Health Affect Health Outcomes?

- 80% of a person's health is determined by Social Determinants of Health, while 20% is impacted by clinical care.



Initiatives to Improve Housing Stability

- Building More Affordable Housing
 - Partnerships between Hospitals and NJHMFA to Invest in Affordable Housing Programs
- Rental Assistance Programs
- Supportive Services

Studies have shown that permanent supportive housing can improve the quality of life and health of frequent ER users, as well as help hospitals save on emergency room costs.



Legal Services

Legal support must also be provided to help ensure that individuals are able to maintain their housing in order to break the cycle of homelessness.



Examples of Legal Assistance Promoting Housing Stability

- Fighting unlawful evictions
- Reasonable accommodations
- Forcing landlords to comply with building or health codes
- Restraining orders for victims of domestic violence to keep themselves and their children safe in their homes
- Access to public entitlements and food stamps to ensure sufficient resources to pay rent, utilities, etc.



According to a recent study:

In 2017, **71%** of low-income households experienced at least one civil legal problem including problems with housing conditions, disability access, and domestic violence.

Legal Services Corp. The Justice Gap (2017)

Medical-Legal Partnerships



Partnerships between health care providers and legal service providers where attorneys are embedded as specialists in health-care settings to “strengthen the social determinants of health among low and moderate income patients using the force of law.”

- Integration - Integrate civil law attorneys into health care settings.
- Training - Attorneys train health care workers to screen for health-harming legal needs.
- Proactive Response - When problems are found, like unsafe living conditions, these problems can be addressed preventively through the in-clinic attorney.
- Working Together - Allows clinicians and lawyers to work together to help patients by strengthening legally protected social supports.
- Advance Local and State Policies - Some partnerships leverage their knowledge and expertise to advance local and state policies that lead to safer and healthier environments.

Source: National Center for Medical-Legal Partnership; Center for Health Policy at Brookings

“But we already refer patients to legal aid.”

- Clinicians usually don't know about a patient's legal problems, and when they do the patient is often already in crisis, eg. patient got evicted.
- By screening for legal problems as well as health problems, attorneys in the medical-legal partnership can 'treat' these legal problems before they get to a crisis point and negatively affect the patient's health.
- When a doctor refers a patient to legal aid, that outside attorney doesn't know the patient's medical history and how their legal crisis may affect their health.
- When a patient who is already in crisis is referred to an outside attorney, the options that attorney has to aid the patient are often already limited.
 - For example, an attorney representing a patient at risk of eviction has many more options (housing vouchers, negotiating with the landlord, etc.) than if the patient has already been evicted and is homeless.



IMPACT

- When Legal Expertise is Used to Address Social Needs:
 - Individuals with Chronic Illnesses are Admitted to the Hospital Less Frequently
 - Individuals More Likely to Take Their Medications as Prescribed
 - Individuals Report Less Stress
 - Less Money is Spent on Health Care Services for Those who Would Otherwise be Frequent Hospital Users
 - Clinical Services are More Frequently Reimbursed by Public and Private Payers

Source: National Center for Medical-Legal Partnership (citing to several research articles)

Medical-Legal Partnerships Improve Access to Safe, Decent, Affordable Housing

- 2016 Study of MLP out of Boston, MA
- Interviews of 36 patients who participated in the MLP
- Prior to the legal intervention:
 - 53% very-low income patients reported living in inadequate housing
 - Poor physical conditions
 - No reasonable accommodations for a disability
 - Living in dangerous neighborhoods
 - Utility Shut Offs
 - 33% struggled to afford rent and 14% reported being at risk of eviction and homelessness
- After MLP intervention:
 - 83% of MLP patients improved their living situation (reinstated utilities, avoided eviction, obtained reasonable accommodations for disabilities, physical improvements to housing).
 - 64% of non-MLP patients did not resolve their housing problems, compared to just 17% of MLP patients.

Case Illustrations

1. A client who depends on insulin and breathing treatments was behind in her rent. Her landlord disconnected her utilities and threatened eviction. We filed an emergency application with the court to have her utilities restored. We were also able to help the client obtain rental assistance. In addition to preventing her eviction, we restored the client's access to necessary medical treatments and medications within her home.

2. A client diagnosed with end stage renal failure and physical disabilities was being evicted for nonpayment of rent after her mother withdrew her financial support. Because of her physical disabilities and her onerous schedule of kidney dialysis 3 times per week, the client had great difficulty in applying for public benefits, such as Social Security, in order to help her pay her rent.

- We helped her apply for Social Security Disability benefits to stabilize her income.
- We defended her in the eviction action.
- The eviction required numerous court visits that were frequently scheduled during her dialysis appointments. We assisted her with navigating the court dates and requesting scheduling accommodations so that she could attend court after dialysis.
- We were able to adjourn her eviction trial for about 9 months while we assisted her with obtaining rental assistance and advocating for the approval of her Social Security application.
- After we finally secured the dismissal of the eviction case, the client was able to focus on attending her dialysis appointments and maintaining her other health needs without the stress and distraction of the eviction.

Thank you!

Contact Information

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How Do You Work Together To Get Things Done?

How Do You Foster Collaboration?

