

Housing and Health Services Coordination Council
Wednesday, April 19, 2023
10:00 AM

221 East 11th Street
Austin, TX 78701

Doni Green: (00:00): Good morning everyone, and welcome. Bobby will not be able to be with us today. He is quite involved with, with session. Um, so, um, my name is Doni Green. I'm with the North Texas Council of Governments. And I'll be chairing the meeting today. In Bobby's absence, we will start with a roll call and we'll start with the agency appointees first. Claire

Claire Irwin: Present.

Doni Green: Suzanne.

Suzanne Barnard: Present.

Doni Green: Excellent. Michael's not yet arrived. Dr. Blake Harris?

Dr. Blake Harris: Present.

Doni Green: Fantastic. And Josh?

Josh Hutchison: Present.

Doni Green: Alrighty, Um, Mike?

Mike Goodwin: Here.

Doni Green: Donna? I believe is with us by phone. Donna, are you on the phone?

Donna Klaeger: (00:52): I am on the phone. And if you took, put your, your, uh, voice back. Closer. Closer.

Doni Green: (00:58): Okay. I'll also, also, a little better <laugh>. Thank you.

Donna Klaeger: (01:04): Thank you very much.

Doni Green: (01:06): Thank you. Uh, Joyce. Sarah McCabe, I don't believe she's with us today. Dr. Jennifer Gonzalez. Diana Delaunay.

Diana Delaunay: Good morning. Good morning.

Doni Green: And Barrett Reynolds, I don't believe Barrett is with us today. Um, so we do not yet have quorum, which would be nine members. So we will not take action on approval of the January 18th, 2023

minutes. And, um, let me just do a, a volume check. Donna, are you able to hear maybe better?

Donna Klaeger: [\(01:43\)](#): Yes. Thank you very Much.

Doni Green: [\(01:44\)](#): Very good, thank you. So we will move right into agenda item number two, which is the TDHCA, legislative update.

Jeremy Stremmer: [\(01:54\)](#): Elizabeth will actually be yes, presenting that cause Michael is under the weather and also very involved with session.

Elizabeth Yevich: [\(02:01\)](#): Good morning. This is Elizabeth, director of the Housing Resource Center here at TDHCA. I'm filling in for our staff in, policy and public affairs, which is Jeremy said Michael, who is Yes, both under the weather and like several of us we're listening to the House Urban Affairs Committee until 11:30 last night with a plethora of TDHCA bills. And that's what I'm here to chat about. Michael sent me some notes on some bills that might be of interest to this council. So I'll read his prepared notes and I have a list of bills and we can talk about any of them that you might want to talk about further or not. So Michael is saying that the following bills contain subject matter, which may be of interest to the council.

Elizabeth Yevich: [\(02:46\)](#): Most of these bills have not moved or had committee meetings, so if you realize that, then they're probably not going anywhere. But as we all know, sometimes things can pick up speed, you know, right at the end. So the state tax credit bill, so it's housing tax credit, and that is HB 1058 by Representative Craig Goldman appears to have a chance of passing. So that's one where Michael thinks it might pass. That's 1058. He went on to say that the last few sessions, it's been held up in Senate Finance, but as of this morning, that's where the bill is. Uh, he said it'll be interesting to see if proponents will be able to get it through the finance committee and onto the Senate floor. So there's still quite a bit of movement that would need to happen on that one. So two other bills that have a lesser chance, but one that directly affects this council. We've talked about it the last two times, and that is HB 833 by Representative Elizabeth Campos, uh, I think she goes by Liz Campos. And there's another one that Michael has put on that it's HB 3220 by representative, uh, Josie Garcia. Despite the cost for implementing HB 833, and I think we talked about this, there was a, a large fiscal note attached to that which was identified by TDHCA and also the legislative budget board, the LBB,

Jeremy Stremmer: [\(04:24\)](#): Just for a reminder, that's the one about reviewing the 211 system.

Elizabeth Yevich: [\(04:26\)](#): Yeah, that's, yeah. Yeah. Uh, that this council would be charged with doing. So that's why it's of great interest to this council. The legislature did not adopt any budget writers that would cover these costs. So if the bill were to pass, it remains to be seen how the cost would be covered. And the rest of all the bills that he lists, and there's 18 of them that he gave me here, they've not yet had a hearing, so it, I'm sure everyone here is familiar on how it works. There's only five and a half weeks left. They appear unlikely to move forward.

Michael Wilt: [\(05:03\)](#): Could you talk about HB 3220 from Garcia?

Elizabeth Yevich: [\(05:05\)](#): Sure. That is relating to an assessment on the use of surplus government property to provide housing to homeless veterans. So that's one of the homeless bills. There's, there's quite a few related to homelessness issue. So, uh, what it does, it creates a work group, including TDHCA to study possible use of surplus government property and the funding sources to house homeless veterans. So, on March 15th, it was referred to, uh, defense and Veterans Affairs, and then just, uh, a day or two ago, it was voted favorably. So that's why Michael is thinking it, it might, might move forward. Again, there's still a couple more hurdles they all need to jump through before passage. So on the federal level, there

Megan Sylvester: [\(05:56\)](#): So on the federal level, there is an interagency working group. And like 20 years ago when I worked for HUD, I shared an office with the person that was, oh, Megan Sylvester with TDHCA, um, shared an office with the person at HUD that was in charge, sat on that committee. So, this has been going on at the federal level for quite some time about looking at surplus government property. And, and how it works federally is, they publish in federal register and then people can bid on the property. And if you're gonna use it for homeless services, you get a first look. And then sometimes there's a preference with certain types of funding that if you have one of those types of funding, you get a super preference among the homeless preference providers. That's how it works federally. I think this legislation would be doing somebody similar, but not quite the same on the state level.

Doni Green: [\(06:55\)](#): So we, we do have, we do have quorum.

Jeremy Stremmler: Yeah.

Doni Green: [\(06:58\)](#): All righty. Were there, were there any other questions in terms of the legislative update before we circle back to the...

Doni Green: [\(07:04\)](#): Anybody on the phone?

Doni Green: [\(07:05\)](#): Approval of the minutes?

Doni Green: [\(07:08\)](#): Okay. Okay. Hearing no questions. We will entertain a motion on approval of the January 18th, 2023, meeting minutes.

Michael Wilt: [\(07:21\)](#): So moved. Michael Wilt, Texas State Affordable Housing Corporation,

Doni Green: [\(07:24\)](#): Moved by Michael. Do we have a second?

Claire Irwin: [\(07:27\)](#): Second. Claire Irwin, HHSC.

Doni Green: [\(07:29\)](#): Second by Claire. All in favor indicate by saying aye.

Unanimous: [\(07:33\)](#): Aye. Aye.

Doni Green: [\(07:35\)](#): Opposed? Okay. The minutes are approved. Okay. Next up, we will have an update on Section 811 Project Rental Assistance Program by Spencer Duran TDHCA

Spencer Duran: [\(07:51\)](#): Hi. Good morning everybody. Spencer Duran TDHCA, I have just a quick update on the Section 811 project Real Assistance program.

Spencer Duran: [\(08:04\)](#): So as everybody knows, we regularly report out to this group on the progress the program as it's served with disabilities. So the general update on 811 is, we currently have 429 households housed. Last time Bobby requested a breakdown of the waiting list, and those housed. So I was gonna give a quick overview of how the target populations breakdown. So, and this is not changed, but I think I've shared this before. So, so the way that the breakdown is, we serve a lot of target populations and currently, people with IDD that are exiting the ICF system, the ICF IIDs Intermediate Care, those are 1% of the people that we housed and the number of people on the waiting list. So the waiting list, and then the house percentages, they match up.

Spencer Duran: [\(09:06\)](#): So 1% are those folks with IDD, and then 6% are folks that are exiting out of nursing facilities. And then 92% are people who have a serious mental illness. And those are folks that are generally served by the local mental health authorities or the local behavioral health authority or local behavioral health authorities. Uh, and then 1% are youth that are exiting out of the foster care system who also have disabilities. So this has been the theme with our program pretty much the entire time where over 90% of the people we're serving are people with serious mental illness. We've been working on a lot of different ways to try and rebalance who we're serving with, you know, preferences and all kinds of other tools like targeted training to the other referral agents that serve other populations. But we've kind of been stuck at this breakdown of the target population basically throughout the entire program.

Spencer Duran: [\(10:18\)](#): Um, I also wanna mention that, you know, kind of, we're really trying to focus this year on increasing our customer service to the properties and also the referral agent network. So we're conducting a ton of peer-to-peer calls between properties. We're also doing onsite property trainings all year. Property management staff has a pretty high turnover. And so we're wanting to, you know, kind of constantly have a training, you know, system that's ongoing. Uh, and we see that, that this effort has cut down on non-compliance, and it's cut down on mistakes that can sometimes harm the tenants, you know, so if you don't know how to, to really calculate the tenant portion of income, if you're a little rusty on that, sometimes those math errors will cause the tenant to pay more. And so when we catch those types of errors rather than waiting for compliance to catch them, because our compliance folks only go out every three years, so, uh, and, and they'll make corrections, but, you know, three years, it, it's kind of a long time.

Spencer Duran: [\(11:35\)](#): So those efforts have definitely cut down on problems. We're also really trained the referral, the referral agent network. So we've, we've done a lot of webinars that have had probably literally hundreds of people attend. These are the people that are out there in the field across state that identify members of the target population, and they provide referrals and they provide, you know, or they coordinate the services. So it's managed care service coordinator, staff or local mental health authority staff, nursing home, social workers, all those folks are feeding referrals to us and coordinating the long-term services and supports to support the households. So with that, if there's any, questions, that's my update.

Doni Green: [\(12:27\)](#): And then Spencer, at the last meeting, you indicated that, um, most of the state have wait lists in effect, because there was so much more demand. There were a few communities that were still accepting applications. Has that changed?

Spencer Duran: [\(12:40\)](#): Yeah, so our webpage, we, we keep, we were always trying to manage our waiting list. So if we can ever open a waiting list, we, we do that. And we have a few different metrics, foreclosure and opening. So if we get, you know, so if a wait time for, uh, for all the properties in a county is in excess of 12 months, then we'll cut, then we'll shut the waiting list down. Um, and then if we like fall below that, then we'll open the waiting list back up. Um, we're also constantly managing our waiting list by purging out households that have been on the waiting list for a long time, and they're not responsive to us. All housing authorities, you know, will manage their waiting lists like that. So I'm not sure exactly what counties are open or closed.

Spencer Duran: [\(13:29\)](#): One of the new things we are doing right now is we're opening, um, yeah, we're, we're just, we're just, we're really trying to, to, to actively manage that. So we just opened up some, I think, I don't even want to say it. Go, go to the webpage, check it out, see what's open right now. Um, but whatever we open or close, we send out, you know, emails to the properties and the referral agents that, uh, that serve those areas. But yeah, it's very dynamic right now. So we're really trying to make sure that we're open, but we need to be open, but then not cause undue weight or cause undue hope that you're gonna get housed.

Doni Green: [\(14:12\)](#): Have y'all run into any problems with the, with a project based voucher? If for any reason it's not a good fit, it's not as if the tenant can take a voucher and transfer it to another landlord who will accept. So have you had any problems with either tenants just not liking it and not having other options? Or have you had any problems with tenants being asked to leave because they violated the terms of their lease and, and what, what resources may be available in either of those situations?

Spencer Duran: [\(14:44\)](#): Yes.

Spencer Duran: [\(14:46\)](#): So it's a, so as Doni said, it's a project based voucher. So they're really, really important aspect of that is the subsidy is tied to specific properties and specific unit types here. So if you get on 811, you can't decide you want to go move to a different property and take your subsidy with you. It's project based, it's tied to the

project. So that's different than a section 8 housing choice voucher. Which is what most people kind of think of when they think of housing assistance. These, they're not mobile, so you're kind of stuck. So if you wanna move, you have to reapply, so you go back down to the bottom of the waiting list. Um, so that's, so that, that's, yeah, some people have wanted to move and some people have actually moved. They've reapplied and they've just waited and then they've moved. Um, and then yeah, we've had our share of, uh, lease violations and evictions and all of that normal stuff, uh, that you see in any other subsidized program or any other market program. There's gonna be evictions and things like that.

Doni Green: [\(15:55\)](#): And in some cases there, there may not be much support with that process. You know, nursing home residents are pretty small slice of the pie, but under the, the relocation contracts with the health plans, those relocation specialists are required to stay engaged for 90 days. You know, the, the standard is to close the case at the end of the third month. And I know we've gotten notices a year or two years later, your tenant is being evicted and, you know, we've scrambled and we've tried to, um, identify resources where there's no funding and really no program to support that. But, um, you know, it does create some challenges for, for the tenant, particularly if it's an involuntary. Um, and, you know, there's a date certain where they have to vacate it's, you know, as I mentioned before, we struggle with people calling us and saying, I've been evicted, or I'll be evicted next week. I need you to find me an apartment for, you know, \$200 a month. Hey, I'm Sorry I run out of those

Spencer Duran: [\(17:05\)](#): Yeah. Well, so what would, what should be occurring then is, you know, there should be a warm handoff between the referral agent who does the relocation and the managed care organization service coordinator. So we would love it if that referral agent, whatever they roll off of helping that client or that member, I guess they would call them, they would then let us know who that longer term managed care service coordinator is. And then we would contact that managed care service coordinator for the intervention, what we call the Okay. What we call the, um, there's a term, a risk management plan or something. So we have a protocol in place to contact whoever is associated with that tenant to try and help'em out. And there's language actually in the state of Texas managed care contract that says those service coordinators are supposed to coordinate with TDHCA. And so that's what should be happening. Yeah, I know that it's not, Well, that's just the, the service

coordinator's scope of work is specific to arranging, fairly specific to arranging Medicaid long-term services and supports.

Doni Green: Yep. And the reason they contract out relocation to other entities is that's, that's, um, that's a significant expansion of their responsibilities. I mean, they don't have apartments for \$200 a month and they can just Okay. <laugh>. Right. We'll send over the Van <laugh>.

Spencer Duran: [\(18:46\)](#): Yeah. I mean, but that service coordinator is responsible for a lot of stuff, including, you know, the whole, I mean, you would know more than I went the whole LTSS service package and we've added language into the handbook and the contract that talks about housing coordination, and it's also in the best interest of the MCO that their members are not homeless or evicted or reins institutionalized. So I think that there is a natural incentive there for the MCOs to try and figure out how to keep their members housed

Doni Green: [\(19:28\)](#): There. There's absolutely an incentive. And for those who qualify for waiver services, the star plus waiver will pay for assisted living. Yep. But otherwise, Medicaid does not pay for any housing, and that's where people fall through the cracks. That's where we have to counsel, you know, frail people in their eighties, you know, there's a homeless shelter.

Spencer Duran: [\(19:54\)](#): Yep.

Doni Green: [\(19:54\)](#): And we know that's not appropriate, but unless Adult Protective Services will intervene and they're not, they're not responsible for housing homeless people, um, in some cases that the person is incapacitated, maybe they can arrange a nursing home or, you know, in some cases a hotel. But there's just, there, there are a lot of people who fall through the cracks where they're not disabled enough to qualify for institutional care that's funded by Medicaid. And particularly if they don't have any housing supports, if they don't have a Section eight voucher, they can travel. We just haven't been able to find a, a good solution.

Spencer Duran: [\(20:45\)](#): Yep,

Michael Wilt: [\(20:50\)](#): Doni can Medicaid pay for housing?

Doni Green: [\(20:53\)](#): No, regardless of the state, we will pay for assisted living, but the workaround is that the person's applied income would have to pay for the cost of room board and Medicaid would pay for the care. So by policy, Medicaid will not pay for, for housing

Michael Wilt: [\(21:12\)](#): Can the state seek a waiver.

Doni Green: [\(21:15\)](#): I don't believe that's something that can be waived. Claire, I know that's kind of beyond your,

Claire Irwin: [\(21:21\)](#): Not that I'm aware of,

Claire Irwin: [\(21:24\)](#): Well, we use one of it. Yeah. We use Money follows the person, not as a waiver, but you know, money follows the person. There's a lot of, you can pay for a short term rental assistance for up to maybe 24 months, I think is the new rule that was put into place. So not through a waiver, I don't think you can like write an 1115 waiver to say we're gonna pay rent. But there are lots of states that do a lot of innovative things around doing everything that would be, that would support a person if they had a housing voucher or housing subsidy

Doni Green: [\(22:02\)](#): So you can do a lot of stuff like, uh, Deposits Or like supportive services maybe. I mean, I mean, supportive services, Medicaid funds can be used for deposits, Maybe deposits. And

Doni Green: [\(22:14\)](#): I think that that is where the state has actually written and written that into its money follows the person plan. So they're transition grants funded by Medicaid that can be used for utility deposits and security deposits and, you know, pots and pans and groceries and You know, non-traditional Medicaid items. Yeah. But you know, that's a one-time only grant. And that doesn't assume any of the, you know, doesn't assume the rent beyond that, uh, deposit limited to first and last month's rent.

Michael Wilt: [\(22:48\)](#): I mean, it seems like Medicaid would save the money in the long run if they had People stably housed.

Doni Green: [\(22:53\)](#): Absolutely. You know, that might be worth a conversation at a later meeting. Maybe have somebody from HHSC come in and kind of talk us through, you know, what Medicaid will and will not pay for and, you know. Yeah. Any, any waivers, um, for obtaining assistance with housing,

Claire Irwin: [\(23:18\)](#): I Can try to find a contact to connect you.

Doni Green: (23:26): So, One more thing that just to, because our facilities are so up, so there are those problems with they once they get in the community, but we see, we see all just a big reduction in the number of incoming referrals we get. And I, what HHSC is said is that that is in large due to a lack of, uh, attendant care workers. Yeah. So people are stuck in nursing homes because, you know, you could have, I could have a housing subsidy ready, they could have their qualification to, for their ITSS, but they can't hire, uh, an attendant care worker. Uh, and so that's the reason why they're stuck in the institution.

Doni Green: (24:09): Yeah. Another thing we've seen just performing relocation services and, you know, in a small portion of the state, not necessarily small portion of the state, is, um, you know, through relocation, folks can choose to go into assisted living facilities, which under money falls, a person is considered a community setting for this committee's purposes. It's not. And, um, so we find that, uh, the majority of people who relocate choose assisted living facilities, not because it's their first choice, but because it's more timely available. You know, we have a lot of people, they, you know, they don't have group of, they don't even have the necessary documents to apply for a voucher. And once their application goes in, you know, there may be a wait of a year or two years before their name comes up on the list. And so they just go with, with an option that's more timely available.

Doni Green: (25:11): Yeah. Which, you know, we support whatever that resident wants. That's what our plan is gonna be. But, um, you know, unfortunately, once they go into assisted living, they, they're not eligible for any of those other money follows the person's supports. So, you know, if the voucher becomes available in, you know, three months, the, you know, the transition grants are off the table, the, you know, the vouchers are off the table. So, um, you know, it is, you know, again, it's consumer choice, but it's, it's unfortunate that, um, that oftentimes it's, it's a lesser choice. Just, you know, we have people say, I'll take anything to get out of this place. Yep. You just tell us what you want.

Spencer Duran: (25:58): Yeah. So we, 811, we allow people to make that first jump out of the nursing home into assisted living, and then we allow them to still retain you. You don't have to literally exit directly into 811. You can jump to assisted living and then jump to 811. So we, we, we, we allow that. But you're right. What we found is while the, while the housing program allows that they're, they have washed off their transition services.

Doni Green: [\(26:27\)](#): They don't have furniture, they don't have groceries, they don't have pots and pans.

Spencer Duran: [\(26:32\)](#): Right.

Doni Green: [\(26:32\)](#): And does that time out? Is there a time

Spencer Duran: [\(26:34\)](#): We'll have a one year look back? One year look back? Well, we could, I mean, we can modify that if we needed to.

Doni Green: [\(26:38\)](#): You know, I assume that the referral agents are more knowledgeable than I, but that might be a point to kind of remind, the referral agents particularly, you know, I know you've reached out recently where there've been some 811 units that would've become available. And, you know, it might be worth reaching out to folks in who've recently transitioned to assisted living to see if that's an interest. And then, you know, the burden would be on us to kind of secure all of those essential you know, household supplies and services, which would be difficult.

Spencer Duran: [\(27:16\)](#): But yeah, I want to just give a shout out to Joyce Pullman, the MFP director. That was her idea to allow that second jump. So that was all Joyce's idea.

Doni Green: [\(27:28\)](#): Well, that's great. Yeah. That's great.

Doni Green: [\(27:36\)](#): Any other questions? About 811.

Michael Wilt: [\(27:37\)](#): What were the percentage of LMHA referrals?

Spencer Duran: [\(27:41\)](#): LMHA referrals? 92 percent. And that technically includes the LBHA in the Dallas area. I don't necessarily understand it's when LBHA and LMHA, but

Doni Green: [\(27:59\)](#): Right. Thank you, Spencer. The next, item is also yours. Sure. And that's emergency housing vouchers.

Spencer Duran: [\(28:07\)](#): Yeah. So, um, like I love, we've been reporting out to this group about the Emergency Housing Voucher program, and just a quick reminder, these are Section 8 housing choice vouchers. These are mobile, these are not project based like 811. Uh, and so these serve people experiencing homelessness, people exiting homelessness, and then people who, are domestic violence survivors. And so we have partnerships with Continuum of Care

organizations across the state. We're partnering with, Tarrant County Homeless Coalition, part of Texas Homeless Coalition, and, the Texas Homeless Network. So, we have almost 800 of these Section 8 vouchers that have to serve that, those particular target populations. Of the 798 vouchers, we have 195 people housed so far. And THN has given us 536 referrals. Um, so we have allocated, you know, almost, you know, around, you know, 300 vouchers to Texas Homeless Network allocated around, you know, 300 something vouchers to Tarrant County, and then allocated 50 vouchers to the heart of Texas Homeless Coalition that serves the Waco area.

Spencer Duran: [\(29:31\)](#): HUD requires that public housing authorities partner with the COCs to Continuum of Care organizations to get referrals and through the HMIS system and all that. And so we get referrals from those COCs, we provide the housing voucher, and then the COC partner provides housing search assistance. They negotiate with landlords. They have \$3,500 available that they can use to pay deposits, to buy furniture, all those sorts of things. So the emergency housing voucher, it's a tough population to serve, but the COCs are, they excel at doing this, this is what they do. So they've done a great job working with their provider network. So even though we're at, you know, 195 housed out of 798 the program is working well, I think that we should have, you know, all of our folks, housed, you know, well before HUD would try and recapture our vouchers or, or anything like that. Also mentioned that, you know, through our THN, Texas Homeless Network Partnership, they're getting referrals from Texas Council on Family Violence. So a large percentage of our population are survivors of domestic violence, and they're also receiving referrals through Texas Veterans Commission. And so, you know, although we're not directly partnering with the Veterans groups or Texas Council Family Violence, they're routing those referrals through, THN. So we're still serving those populations. So 195 house that's 40 more housed than last time I talked to y'all. So we're getting there.

Michael Wilt: [\(31:31\)](#): How did you select the COCs?

Spencer Duran: [\(31:35\)](#): That's a good question. Um, our, our methodology was to try and plug all of the holes that were, the, the other COC PHA partnerships had left behind. So, like, you know, in Austin, so Austin Housing Authority, they got EHV Austin Housing Authority is partnering with echo, the local COC. So we're not gonna serve Austin. So what are the, the, we're gonna fill the Swiss cheese holes, around the state of Texas. So we tried to be the provider

that would serve the areas that were not otherwise, EHV awarded. So we're mostly doing that. But we're also not trying to micromanage the COCs about, you know, so, like, for example, Waco, the heart of Texas COC, you know, the Waco Housing Authority Guide, EHV allocation. So we were kind of designed, we kind of designed our Waco area partnership to serve the counties around Waco, but not Waco itself.

Spencer Duran: (32:51): But that COC actually does serve Waco. So we're allowing them to use our voucher in the, in the, in the city of Waco. So we have a, we have authority for a statewide housing, for a statewide footprint with EHV. so we can house people in Waco, but the actual COC selection, that part was to try and be the provider that filled those caps.

Michael Wilt: (33:20): I mean, you've got pretty good geographic coverage thanks to THN. Probably have 220 plus counties.

Spencer Duran: (33:26): Yes. Yes. So it's about, so I think that the, like Michael was saying that they're the balance of state COC. So they fill those gaps as their COC area. I think we're starting slightly under 200 because about 20 of their counties, already have a PHA partner. So the THN footprint is around 220, but 20 already have a PHA that's administering EHV So our EHV footprint with THN is actually about 200 counties. And functionally we're not active. I mean, it's, we're not really in 200 counties, we have, it kind of depends on having an active referral source and a qualified household and a willing landlord. So we're not really housing people into Tahoka. We're really housing people in those areas where there is some homelessness infrastructure already available.

Michael Goodwin: (34:28): We gotta get Spencer new project.

All: (34:31): <laugh>,

Michael Goodwin: (34:32): You're, you're speaking in initials,

All: (34:35): <laugh>.

Doni Green: (35:07): Very good. Any other questions for Spencer? If not, uh, we'll move to a discussion of home and the American Rescue Plan and Naomi Cantu, director of Home ARP will present.

Naomi Cantu: (35:24): Yes. My name's Naomi Cantu. I'm director of Home ARP, HOME American Rescue Plan. I always like to go after the EHV

update because it's a very similar population that we're trying to serve. It's a very hard to house, homeless at risk of homelessness and other vulnerable populations. So we have pro, we are one time funding source. So again, American Rescue Plan, we received \$132 million in a onetime funding. Uh, we are a temporary program, set to phase out in 2026. We programmed the funding into three main categories. One is rental development, one is non congregate shelter development, and one is non-profit capacity building operating cost assistance to support those developments, we have a NOFA released a notice of funding and availability released. We released that in December of last year. Applications due in January. We have several. We are oversubscribed more than two to one.

Naomi Cantu: [\(36:25\)](#): So we have about \$52 million available in that NOFA and received about \$120 million in requests. So we are competitive. We have scoring criteria, and going down the list, we plan to fund hopefully around 10 to 12 developments throughout Texas, for these populations. We have our first hopefully awards going in May to our board meeting. And then all the way through until July, there might be a few stragglers into the fall. Our other side of the development is non congregate shelter. So non congregate shelter is different than a traditional shelter because everyone has their own unit, so that's non congregate. So they have their own unit for each household with a sanitation facility in that unit. So that means a bathroom, they don't have to have a kitchen in the unit, but it is shelter. So they don't have lease agreements.

Naomi Cantu: [\(37:30\)](#): So it works differently that way cause there's no rent, right? So they have to have come up with operating funds. We cannot pay for operating funds for the shelter. We have had a change of direction for our non-congregate shelter. We have been saying we were going to do a notice of funding availability for our non-congregate shelter. We decided to, amend our allocation plan, Jeremy had the one year action plan. We decided to amend our allocation plan to do direct awards, based on a list of criteria, such as, where the highest unhoused population is in Texas. We are currently working on that list, to be chosen by our executive director. And the awards will be going to the board for a non-profit capacity building operating cost assistance grant with reservation for the non-congregate shelter. So it's kind of like a part one, part two application. Some support funds to help them figure out, how to run that shelter and develop that shelter. And then the shelter application as well. We anticipate doing anywhere from one to four

of the non-congregate shelters, throughout Texas, depending on the size.

Naomi Cantu: [\(38:56\)](#): Um, any questions? That was a lot of information I threw out there.

Doni Green: [\(39:06\)](#): Alrighty. Thank you Naomi.

Doni Green: [\(39:07\)](#): And now, Jeremy Stremmer. Who will present on consultation for 2023 State of Texas one year action plan.

Jeremy Stremmer: [\(39:19\)](#): Yeah. So my name's Jeremy Stremmer. I'm with TDHCA. So essentially we do consultation every time we do a one year action plan, consolidated plan. We like to come to our different bodies such as HHSCC, to just hear from members, if anybody has any, suggestions about programs, uses of funds that we receive, through the one-year action plan, which is HOME, ESG, CDBG and NHTF funds. We have a rare moment for those at this meeting because Here we have our, Suzanne from TDA who manages the CDBG program. And then Josh, which he will talk about in his presentation later, oversees the HOPWA program, with his staff at DSHS. So it's really just, an opportunity if anyone has, any suggestions or comments they'd like to make about those programs and, how they're operated, how the funds are used, you know, we're open to hearing it and, starting those conversations.

Jeremy Stremmer: [\(40:28\)](#): Also for everyone's general knowledge, the 2023 one year action plan, will go out starting next on Monday, April 24th for public comment for 30 days. So you're also more than welcome, should you have any suggestions that you want to make as official public comment are welcome to do that. And all of that information will be on, the TDHCA website. And if you are signed up to our HHSCC listserv, you will also see that email about that public comment, either today or tomorrow, going out on that listserv. I'd just like to open it up if anyone has any comments or, or questions, about the, one year action plan.

Doni Green: [\(41:11\)](#): So does that include 811 in that the scope or Beyond?

Jeremy Stremmer: [\(41:14\)](#): No. 811 is outside of, the plan. This, the one year action plan is specifically for ESG funds, HOME funds, CDBG funds, HOPWA funds and Housing Trust Fund, what we call National Housing Trust Fund, which is HUD Housing Trust Fund.

Elizabeth Yevich: [\(41:37\)](#): Yeah. Doni HUD calls those CPD programs, community Planning and Development programs, and they're the ones that let's say, bundle that group together. So something like Section 811, a voucher program is outside of these block brands. These are block grants.

Jeremy Stremmler: [\(41:53\)](#): Yeah. This plan specifically has to be submitted in order to receive those funds. Mentioned.

Suzanne Barnard: [\(41:59\)](#): We would like to receive those funds

Elizabeth Yevich: [\(42:01\)](#): <laugh> let it be noted. Suzanne, Bernard <laugh>. Just thank Yeah, because every, every year there's a one year action plan and then every five years, five years, there's a consolidated plan a much larger plan of which one component is the one year action plan.

Jeremy Stremmler: [\(42:22\)](#): Right. And that will take place not next year, but the year after. Right. But we'll start working on it next year.

Elizabeth Yevich: [\(42:27\)](#): And so that's the plan looking forward. And then every year there's also something called a CAPER report, which is these same five programs reporting on what they did. So there's, within any given year for six months, Housing Resource Center, Jeremy and, and Ileana here, who just started, will be working on the one year action plan looking forward. And then the remaining time looking at the report looking backwards, that's to get the money so that Suzanne and all the other programs receive their money timely.

Jeremy Stremmler: [\(42:56\)](#): And for anyone that is closely watching these documents when they are published and go out, the one year action plan does not include, CDBG-CV, HOPWA-CV or ESG-CV funds, which are funds that were administered, which are funds, administer through the CARES Act and the American Rescue Plan. But you will see in CAPERs now that the CDBG-CV, ESG CV and HOPWA-CV funds are out, you'll see in capers every year reporting on how those funds have been spent. But they only live in the 2019 one year action plan, you will not see them in any other one year action plan.

Jeremy Stremmler: [\(43:43\)](#): So just, just make it not, you know, more confusing. You'll see them in the CAPER, but they will not be in one year action plans cause they've all been allocated for their purpose.

Jeremy Stremmler: [\(43:58\)](#): Yeah. CDBG is divided into separate the Yeah. Regular CDBG is with Suzanne Barnard at Texas Department of Agriculture, CBDG-CV known as the CARES Act, is at TDHCA, but that's separate and not really included in the plan. And then there's also the CDBG, DR Disaster Recovery and

Michael Wilt: [\(44:22\)](#): Right, right.

Jeremy Stremmler: [\(44:23\)](#): And those are GLO. There's,

Suzanne Barnard: [\(44:27\)](#): If I could just make a comment, about the CDBG-CV

Suzanne Barnard: [\(44:31\)](#): Since you've mentioned it.

Suzanne Barnard: [\(44:33\)](#): I just wanna give TDHCA lot of kudos because nationally y'all are amongst the best performing program, best performing state program. These are hard funds to spend. They are really challenging to find the gaps in actually make it work with the CDBG regulations. And Texas is actually doing a fantastic job of putting these funds to work.

Elizabeth Yevich: [\(44:56\)](#): Just wanted that on the record for that. More than likely my supervisor, Brooke Boston, um, is on the phone. Is on the phone, I believe. So I'm sure that she is excited to hear that.

Suzanne Barnard: [\(45:05\)](#): But I do get reports of how all the states are doing and Texas is performing very well,

Jeremy Stremmler: [\(45:17\)](#): But did anybody have any comments or questions about the 2023 one year Action plan?

Michael Wilt: [\(45:22\)](#): I mean, it's not really a, a about the plan but I mean, we're joking about all these acronyms, but I mean, it really stands out to me that we've got four federal funding streams, maybe more, and they're being administered by three, four different agencies.

Jeremy Stremmler: [\(45:39\)](#): <affirmative>. Mm-hmm. <affirmative>.

Michael Wilt: [\(45:40\)](#): Um, intuitively that doesn't make sense to me, but I think it would be helpful in addition to understanding about Medicaid, what it can pay for if we had somebody go over all the federal

funding streams and, and, and work through, like which agency is, is responsible for administering them. Yeah.

Elizabeth Yevich: [\(45:54\)](#): So you want a visual map, <laugh>?

Michael Wilt: [\(45:55\)](#): Yes.

Elizabeth Yevich: [\(45:56\)](#): Okay. <laugh>

Jeremy Stremmer: [\(45:57\)](#): Home, ESG and National Housing Trust Fund are administered by TDHCA,

Michael Wilt: [\(46:03\)](#): Oh, I was talking about for like the future, just in future meeting.

Jeremy Stremmer: [\(46:03\)](#): Okay. Yeah, we can go that. I'll give you the quick, I'll give you this, the quick one here and we'll see it in the transcript. But we will have a, I'll provide something that gives a little bit more explanation about, cuz CDBG has had a long road from TDHCA to TDA, um,

Michael Wilt: [\(46:20\)](#): And then GLO being Right and

Jeremy Stremmer: [\(46:22\)](#): Yeah, DR. Funds Yeah. A totally different, and, and the GLO does, is responsible for, annual reports about CDBG-DR funds. They, there's a little paragraph in the one year action plan about how, if you want to see their annual reports, you can go to their website and view them because obviously they received DR funds for, every major disaster that, the federal government identifies as being, a disaster and, and needing assistance from the federal government. They have to have a plan about each one. So they have a number of them. And then, HOPWA funds, of course, at the Department of State Health Services, as those ones are primarily are identified as housing opportunities for persons with AIDS. So it's under Josh's, division, the HIV/STD division at DSHS. Um, but yes, we can, we can have a little bit more of a, A visual,

Elizabeth Yevich: [\(47:19\)](#): Visual, a handout on where they live, Permanently, because I know for myself with Ileana coming on last month, you know, we're, we're sort of talking about it in our meetings or typing it up in a, in an email. But yes, we don't have anything that really sort of diagrams it out and I think it would be helpful. Yeah. For, for absolutely everyone and GLO is General Land Office. Okay. Okay.

Michael Goodwin: (47:43): I was gonna ask, McCarthy has asked that the biggest disaster we got right now is Congress

Elizabeth Yevich: (47:52): <laugh>, but yeah, no, that's a good suggestion.

Michael Wilt: (47:57): GLO is not part of this council, right? There's no reason there would be.

Elizabeth Yevich: (48:02): No, no, not when this legislation was written in. They have not been added since

Suzanne Barnard: (48:07): They do some housing if they're their DR. Yeah, it's okay.

Doni Green: (48:13): Okay, thank you. We'll move into a Josh Hutchinson, with Department of State Health Services and he's with mentioned before the HIV/STD section.

Josh Hutchison: (48:28): Hey, good morning everybody. Hey, I just here, just wanna share what's kinda what we do. Hopefully we can partner with you guys and explain<INAUDIBLE> partner involve with this council as well. So I'm over the HIV/STD section within the Laboratory of Infectious Disease. There's a handout for you there. You can go through it just,

Jeremy Stremmer: (48:47): And I would like to apologize. Our printer had a mind of its own, so some of the pages are cut off, but it will be emailed out after the meeting and will be on the website, um, for you to consume better format.

Josh Hutchison: (49:00): So my section specifically, we do preventative services, uh, care for those with living with HIV and treatment of STDs. And then also surveillance of the Reportable HIVs and STDs in Texas. So, uh, we have a big IT system. So we do disease surveillance stuff. We get involved in M Pox response or monkeypox response efforts. Then we also have programs. Our largest program is probably our Texas HIV medications program, which supports over a hundred million worth of HIV medications, the people living with HIV every year. And then we also provide STD services as well, um, treatment of syphilis, which also track congenital syphilis and do all the federal reporting for those diseases. Really, the involvement, my involvement, this council is based upon our HOPWA program, our housing opportunity for people living with aids. It is one of the smaller programs in my section. It's only about \$7 million, in your packet.

Josh Hutchison: (50:02): The last several pages really kind of go through the HOPWA program specifically. And so our eligibility criteria, you have to be, you have to have a member of the household living with HIV or aids, uh, the funding criteria. You have to be eligible based upon that. We use the FMR rate or, um, can I remember that? Accurate market rate. Fair Market rent. Thank you. Yeah. I actually don't live in, uh, stuff every day, so I apologize. I also don't follow 90% of the acronyms. You guys use <laugh>, so I will. Uh, but we do, yeah, our program is one of our smaller programs. It does a lot of work though. The last page, it covers over all the different number of clients we serve every year. Our biggest one is gonna be the tenant base rental assistance, which we administer through our Ryan White clinics.

Josh Hutchison: (50:54): We call'em administrative agencies. So we subcontract those services out and they really support the clients health and fund housing. The biggest gap that we have in our program is finding enough available housing, which I'm sure is a common theme everyone is aware of. We do have about 128 clients on our backlog list or waiting lists that we are trying to serve as well. So that is just a little bit about my section and what we do and why I'm here. So happy to take any questions. If we can partner anything, any efforts, please let us know.

Josh Hutchison: (51:34): Well, I know that HOPWA funds have been, uh, tremendous impact to developments like, the project transitions development in Austin, they opened one this year, broke ground on the other ones. So I know from a housing perspective, uh, the of support is critical for those types of service agencies that have built housing now.

Naomi Cantu: (51:53): And that Project Transitions was also one of our first, our, our first HOME-ARP award. So we did, uh, support that. And I think those were City of Austin. Uh,

Michael Wilt: (52:04): Yeah. How many households Did you say you were currently working?

Josh Hutchison: (52:10): Servicing? Servicing? It was over 1100. It was over a thousand, uh,

Josh Hutchison: (52:16): Yeah, <laugh> 1131. Um, and then 120 on the backlog as well. I was referencing.

Michael Wilt: (52:26): Are those, uh, people on the backlog concentrated in certain areas of state geographically dispersed, I assume?

Josh Hutchison: (52:32): Yeah, they're, I mean, they're all throughout Texas, but there are some areas, obviously the higher morbidity, the higher aggregation of people living with HIV is in the cities, basically. So that's where most of them live.

Doni Green: (52:50): Hi, any other questions for Josh? All righty, thank you. We do have public comment today. Mark Lyons, stay with us and I believe, have information to share with us in writing. Well,

Mark Lyons: (53:18): I think I'm speaking to the choir here.

Doni Green: (53:22): Go ahead.

Mark Lyons: My name is Mark Lyons, my wife and are the proud parents of an autistic adult. He's 25 years old and lives with us. Our country is undergoing a severe shortage of supportive housing for autistic adults. Supportive housing is housing that includes long-term services and supports. These shortage is at odds with the right of autistic adults to determine where they choose to live as codified in legislation and Supreme Court decisions, such as the Federal Developmental Disabilities Assistance to Bill of Rights Act of 2000, the American with Disabilities Act of 1990 and the Supreme Court's Olmstead decision of 1999. If the shortage continues, these individuals will be at a greatly increased risk of homelessness or unnecessary placement in Medicaid funded, provider controlled settings or institutions. You can help enact change to solve this crisis and provide supportive housing that positively impacts the lives of autistic adults and the communities they live in.

Mark Lyons: (54:15): That benefit from neurodiverse citizens living in a home of their choosing reasons for this housing crisis. Included, there are over 5 million autistic adults in the United States. Population of autistic adults is growing. Over 500,000 autistic people will turn 18 over the next 10 years. Most autistic adults live with their aging parents. Autistic adults often have behavioral and medical challenges that require supervised long-term services and supports. What we can do, educate people, especially those with the power to implement meaningful changes to help end this crisis, increase and expand the use of Medicaid funds to states. So autistic adults can be provided affordable, supportive housing of their choice, increase funding for housing and urban

development, housing vouchers and programs to cover all autistic adults. Increase financial support for parents, guardians, caregivers and direct care providers of autistic adults create local, state and federal funded income sources, including tax credits, bonds and sales taxes to provide supportive housing for this population mandate. But all local comprehensive planning and statewide housing plans include the housing needs of autistic adults to deal, high risk for homelessness, community displacement or forced institutionalization, remove zoning laws or land use barriers that hinder supportive housing and ex approval to develop supportive housing on property owned or controlled by organizations that develop this type of housing. Actively seek out organizations and businesses that develop supportive housing and encourage and incentivize them to do their work here. In conclusion, the legislation and decisions are in place to support the right of autistic adults to independent and supportive living, but the resources and housing options are not there. We need additional comprehensive coordinated policies, programs, and legislation at local, state, and federal governmental levels to provide supportive housing for autistic adults with your help we can start here. Thank you.

Doni Green: (56:09): Thank you Mr. Lyons. Okay. Jeremy, do you have any updates, bodies absence?

Jeremy Stremmler: (56:20): No, just the, the next meeting, as of right now for July 12th. We'll, , follow up with some of the action items that we've asked about, like, Michael's, request to show something a little more on where, the CPD programs live and why they're there, how they got there. and then, you know, I'll follow up with Claire to see if we can get somebody to speak about, uses of Medicaid funds related to housing, what's allowable, what's not allowable, um, that kind of thing. And see if, if we can't get anybody for the July 12th meeting. Of course the, the next meeting after that will uh, be in October. It's on the bottom of your agenda, scheduled for October 18th.

Doni Green: (57:05): Very good. Any other business?

Michael Goodwin: (57:07): I'd like to ask Mr. Lyons question. Is there a model of a type of housing that you're looking for and, uh, showing My ignorance, would not autism be classified as a mental disability of shorts that would fall under a lot of these programs?

Mark Lyons: (57:26): I think it region would fall under the I D D. Um, there are housing around where I live. I live in Hutto, Georgetown has a

place called Big Recall in Georgetown. Has a residential residence. It's private pay. Uh, there's in South South Austin. They take, uh, I think federal funds. Uh, there's a few other ones that, a lot of those are private pay. There's one, one in Elgin Down Home Ranch comes to mind. They have these, I think federal funds as well. It's just not a lot of 'em out there.

Mark Lyons: [\(57:58\)](#): If you're looking for a, uh, a national model, I would suggest First Place in Phoenix. It's referenced in the annotated notes at the bottom. It's 55 units and it's exclusively for a neuro neurodiverse population. It was, uh, developed by, uh, the parents of somebody of, of a neurodiverse. Their son was neurodiverse and they're worried whenever he was exiting out or potentially exiting out of their house, he had no place to go. And so they built housing for him.

Doni Green: [\(58:29\)](#): Okay. Any other comments, questions, concern?

Doni Green: [\(58:35\)](#): Seeing none, <laugh>, we will go ahead and adjourn at 11 o'clock. Thank You all. Thank you to Everyone's on the phone.