Urban Federally Qualified Health Centers (Part III of 3)

In February’s issue of Homeless Headlines, Dale Fiedler of Southern Illinois Healthcare Foundation (SIHC) gave a rural Federally Qualified Health Center’s (FQHC) perspective of their collaboration with a mental health provider of permanent supportive housing, Chestnut Health Systems. Dale described the growth of SIHC and their current extensive geographic reach in southern Illinois. He also articulated the benefits to Chestnut Health Systems’ residents of supportive housing - the residents become patients of SIHC, which include 24/7 on-call medical consultation. Through this relationship, the residents have a medical “provider,” admission and follow through hospital care if needed, access to discounted drug programs, and a sliding fee scale for services if the patient is not on Medicare or Medicaid. The health center gets patients who already have some case management and are in a group setting when services are brought to their location. SIHC not only provides on-site medical and behavioral health services at supportive housing sites, they also have a health care for the homeless program that uses a mobile van to take services to homeless shelters in two counties.

In Chicago, there are a number of FQHCs that provide services to permanent supportive housing residents. Here are three examples from Chicago – each is different but each is also replicable.

The Christian Community Health Center (CCHC) began as a FQHC on Chicago’s south side and then added permanent supportive housing to serve its patients. CCHC now has 1 main health

Mortgage Foreclosure Crisis

The continuing expansion of the mortgage crisis and the recent bailout of a major investment bank by the Federal Reserve have increased pressure on Congress to act to stabilize the mortgage markets and the economy.

On April 9, Representative Barney Frank (D-MA), Chair of the House Committee on Financial Services, will begin two days of hearings on his draft “economic, mortgage and housing rescue proposal.” This proposal, which was released March 13, would allow the Federal Housing Administration (FHA) to provide up to $300 billion in new mortgage guarantees to help refinance at-risk single-family homeowners into viable mortgages; authorize the FHA to establish procedures to refinance loans on a bulk basis; and authorize $10 billion in loans and $5 billion in grants for the purchase and rehabilitation of vacant, foreclosed homes. Witnesses will include federal regulators, academics, economists, and representatives of the cities and communities that are being negatively affected.

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House, Senate Continue Work on Foreclosure Issues

The foreclosure crisis continues to dominate federal housing policy discussion, with the House and Senate each planning to take up legislation in the coming weeks.

In the House, Financial Services Committee Chair Barney Frank (D-MA) has planned two days of testimony on his proposed economic, mortgage and housing rescue plan. The House Committee on Financial Services will hold the hearing on April 9 and 10. While the full witness list has not been announced, NLIHC president Sheila Crowley is scheduled to testify on the second day of hearings. According to Mr. Frank’s press release announcing the hearing, witnesses will include federal regulators, academics, economists and representatives of the cities and communities that are being negatively impacted by high numbers of foreclosures. Witnesses will be asked to discuss the proposal and to provide suggestions to the committee.

“Mr. Frank has pointed out publicly that we are in uncharted territory in the challenges to our economy, and he has been seeking input from a wide range of experts on this subject,” the press release read. “This hearing is a part of that process.”

NLIHC is sending a letter to Mr. Frank with suggested changes to his draft bill, focusing on Title III, which provides loans and grants to states to allow for the purchase of foreclosed-upon single family and multifamily homes. NLIHC’s comments urge Mr. Frank to include deeper targeting of the title’s $10 billion in resources to ensure that needs of very low and extremely low income renters and homeowners are addressed. The bill allows the loans and grants to assist homeowners up to 140 percent of area median income (AMI) and renters up to 100 percent AMI. NLIHC urges that at least 50 percent of the funds be used for families with very low incomes (50 percent AMI or less), with 25 percent for extremely low income families (30 percent AMI or less).

Senate to consider foreclosure bill again. After a failed attempt to consider the bill on February 28, the Senate is expected to try again the week of March 31 to consider S. 2636, Senate Majority Leader Harry Reid’s (D-NV) mortgage crisis legislation. Among other provisions, the bill would release $4 billion through the Community Development Block Grant program for the purchase of foreclosed, abandoned homes. NLIHC has expressed strong concerns with the income targeting provisions of this bill.

A provision in the bill that would allow bankruptcy judges to alter mortgage terms is also being contested by industry groups and members of the minority party. Opposition to the bankruptcy provisions could again stall the bill on the Senate floor.

NOFA General Section Published

On March 19, 2008, the U. S. Department of Housing and Urban Development (HUD) published the NOFA Policy Requirements and General Section to HUD’s FY2008 NOFA for Discretionary Programs. This notice provides prospective applicants for HUD competitive funding with the opportunity to become familiar with the General Section of HUD’s FY2008 NOFAs, in advance of publication of any FY2008 NOFAs. The expected publication date of the NOFA will be no earlier than July 1, 2008. Although the application timeline will be delayed in 2008, HUD expects to make an on-time announcement of awards.

For the Federal Register notice, go to http://edocket.access.gpo.gov/2008/pdf/E8-5626.pdf
The House and Senate Budget Committees passed budget resolutions on March 5 and 6, respectively, that allow deficit-neutral affordable housing funds to be created.

The Senate committee’s FY09 resolution would set up a reserve fund for the Affordable Housing Fund within the government sponsored enterprises (GSEs) legislation. A reserve fund would allow the committee chair to revise committee figures for deficit-neutral legislation like the Affordable Housing Fund or a National Affordable Housing Trust Fund. The Affordable Housing Fund is deficit-neutral because its revenues come from the GSEs, not from the Treasury.

Senator Russ Feingold (D-WI) offered an amendment at markup, accepted by voice vote, ensuring that the use of the fund would include rental assistance and that sources other than the GSEs may be used to finance the fund.

The House committee’s resolution also includes a reserve fund for affordable housing, authorizing the budget committee to revise spending targets for an affordable housing fund if it is deficit-neutral.

For further information, contact the National Low Income Housing Coalition at the address in Headlines Directory.

Making the Connection
Public Benefits for Persons Affected by Floods, Fires or other Natural Disasters
Contributor: DuPage Federation on Human Services Reform

The authors of this column welcome your comments and questions. See contact information at the end of the article.

Recently the weather has been on many of our minds. The flooding in Southern Illinois, as well as the harsh winter weather that is being felt in Northern Illinois, are adding to the daily stresses felt by many of our clients. This weather crisis does provide a great opportunity to discuss state policy targeted to individuals and families who receive public benefits and who are faces crisis created by natural disasters or homelessness.

Food Stamps Lost to Disasters/Power Outages

Current Food Stamp policy (PM 22-03-02) states that food destroyed due to a disaster, or power outage, can be replaced if a request is made at the state IDHS Family Community Resource Center (FCRC) office within 10 calendar days of the disaster. A crisis is a disaster such as a fire, flood, tornado, or other devastating event that is beyond the individual’s or family’s control.

To be able to replace the food, the individual has to have been issued Food Stamps at least 30 days prior to the disaster. In addition, if the loss is due to a power outage, the outage cannot be caused by mechanical failure or non-payment of a bill.

If replacement of the food is approved, benefits can be issued for the amount of the prior months Food Stamp benefit. Your client is able to receive replacement of benefits only twice in every 6 months. If your client has experienced a disaster, then s/he needs to contact the state IDHS caseworker and sign and date a request (Form IL444-1989) to replace food.

Recently clients in Iroquois and Livingston counties were affected by floods and power outages. Since many of the people were not able to return home and contact the IDHS office within the 10 day time period, the state requested a waiver of the time frame.

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Ohio NAEH Rural Homeless Initiative

For the past two years, the National Alliance to End Homelessness has worked collaboratively with the Osteopathic Heritage Foundations and seventeen rural counties in Ohio on the Rural Homeless Initiative of Southeast and Central Ohio, or the RHISCO Project. These efforts resulted in sixteen communities adopting and beginning to implement plans to end homelessness.

The process of creating those plans is detailed in a report, Rural Homeless Initiative of Southeast and Central Ohio: A National Model for Planning to End Rural Homelessness, that provides an extensive discussion of the RHISCO Project, the issue of rural homelessness, and the nature of the participating counties. The report also highlights the cross cutting findings, promising practices, and challenges and opportunities that emerged from the RHISCO Project. This report will be a useful tool for all rural communities looking to develop ten year plans to end homelessness and working to advance better approaches to address the issue.

For the complete report, go to http://www.endhomelessness.org/content/article/detail/1961

HUD’s Second Annual Homeless Report

During a six month period from January to June 2006, 1,150,000 persons used emergency shelter and/or transitional housing, according to The Second Annual Homeless Assessment Report to Congress (AHAR 2), published in March 2008 by the U. S. Department of Housing and Urban Development. The total includes 838,000 persons in households without children (73 percent) and 313,000 persons in households with children (27 percent). The six-month estimate (January to June 2006) is 2.5 times the one night sheltered count (January 2005) and 1.6 times the total number of sheltered homeless persons over a three-month period (February to April 2005) reported in the first AHAR. According to the report, “These estimates suggest that... a three month count cannot be doubled to produce a six-month count.” The data reveals an important pattern of homelessness, where the length of time people spend homeless dramatically affects annual estimates. For instance, persons in families, who tend to stay in shelter or transitional housing for longer periods than single adults, will make up a smaller proportion of the homeless population over the course of the year.

While AHAR 2 cannot yet look at HMIS data to measure trends in homelessness, the report includes estimates from local point-in-time counts, including a state by state look at the numbers. Additionally, AHAR 2 provides information on the characteristics of people who experience homelessness, our nation’s capacity for sheltering people, and how homeless persons use emergency shelter and transitional housing.

For the full report, go to http://www.hudhre.info/documents/2ndHomelessAssessmentReport.pdf
Working Poor and Commuting Costs

Working poor households, defined as earning between $20,000 and $49,999, not only spend a higher proportion of income for location-related costs, housing and commuting, than higher income households, but the difference is most severe when they rely on automobiles. While the working poor spend 6.1 percent of their income on commuting compared to 4.1 percent for all workers, those who owned cars spent nearly 8.4 percent on commuting, compared to 5.0 percent for all workers. That is one of the new findings from a recent research report by Elizabeth Roberto for the Brookings Metropolitan Policy Program.

Section Eight Reform

Section Eight Reform Bill
Introduced Senators Chris Dodd (D-CT), Chuck Schumer (D-NY), and 3 other Senators introduced the Section Eight Voucher Reform Act (SEVRA) on March 3. SEVRA (S. 2684) would promote affordable housing development, establish a clear funding policy to restore stability to the voucher program, simplify rent rules, and streamline inspections.

A similar bill passed the House of Representatives last July. Both the House and Senate versions would increase the cap on the amount of project-basing that public housing agencies would be allowed. Project-basing vouchers has been a significant tool for developing permanent supportive housing and other housing for people who are homeless or at risk of homelessness.

For further information, contact the National Alliance at the address in Headlines Directory.

Disabled Housing Exceed HUD Estimate

The Consortium for Citizens with Disabilities (CCD) Housing Task Force released the results of a new study, The Hidden Housing Crisis: Worst Case Housing Needs Among Non-Elderly Adults With Disabilities, that estimates that 1.2 to 1.4 million very low income non-elderly disabled households without children had worst case housing needs in 2005. This range is more than twice the U. S. Department of Housing and Urban Development’s (HUD’s) estimate of 542,000 non-elderly disabled households published in HUD’s most recent worst case housing needs report to Congress. This study analyzed data on the housing of persons with disabilities from the 2005 American Community Survey to estimate worst case needs among non-elderly adult renters with disabilities.
**Urban FQHCs**

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clinic and three satellite clinic sites and over 150 units of scattered site permanent supportive housing. The tenants of the scattered sites units use the health center for their primary health care needs. CCHC also has a mobile health van that travels to area community organizations and schools.

Heartland Health Outreach (HHO), an affiliate of Heartland Alliance, is an FQHC that provides health services to residents of Heartland’s housing sites – project-based and scattered site. HHO also provides services to tenants of Mercy Housing Lakefront’s housing sites. HHO has a Healthcare for the Homeless grant to serve people who are homeless. HHO provides primary care at its community health center in Uptown and satellite sites in homeless shelters, soup kitchens and drop-in centers as well as through street outreach. HHO also operates the Spang Center for Oral Health that provides dental services at five sites across the City.

Thresholds, Illinois’ oldest and largest psychiatric rehabilitation and recovery agency, in cooperation with the University of Illinois College of Nursing, initiated a relationship with Miles Square Health Center, an FQHC on the near West side of Chicago. In order to have Miles Square locate within Thresholds facilities, Thresholds undertook an analysis of its members and found that a majority of them came from underserved areas for primary health services, a requirement for FQHCs. Thresholds rents space to Miles Square at three long-standing Thresholds sites in order for Miles Square to operate satellite health clinics in the space. There are many advantages to the Thresholds members to having the clinic on site. They are comfortable with coming to the site, and they have access to UIC College of Nursing, advance practice nurses with on-time appointments. The Integrated Healthcare staff of the College of Nursing can take more time with each member/patient and Thresholds case managers can ask questions about medications and other medical issues on an informal basis.

In addition to providing primary medical care, the Integrated Healthcare/Miles Square staff are working together with Thresholds case managers to do public health interventions with the members – e.g., smoking cessation, weight loss, diabetes management. Each of the three partners wins. Thresholds members get the primary healthcare they need. UIC College of Nursing staff and students have a population with which to train while delivering superior care and Miles Square has a stream of patients who fit their mission and are, for the most part, on Medicaid, so they are “billable.”

Most importantly, Thresholds members all of whom have a severe and persistent mental illness receive coordinated mental health/primary health interventions integrated in such a fashion as to assure mental health recovery and physical wellness.

There are challenges to crafting a partnership between supportive housing providers and FQHCs. Supportive housing providers should not assume that the health centers can provide all of the supportive services needed for tenants. Health centers may not be able to bill for all services or include all of the costs related to providing supportive housing services because billable services vary. Many supportive housing tenants are not eligible for, or are not currently enrolled in Medicaid. And, Medicaid usually will not cover all of the costs of the services necessary for keeping someone maintained in housing.

The advantages to both the supportive housing tenants and the health clinics seem to outweigh the challenges posed by trying to mesh two entirely separate systems – housing and health care. The mantra – Housing is Health Care – should be our rallying cry. If you are interested in learning more about how you can establish a relationship with either a FQHC or a supportive housing provider, please contact Sue Augustus at the Corporation for Supportive Housing – sue.augustus@csh.org.

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**Public Benefits**

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from the federal government, and was approved. If your clients are unable to meet the 10 day requirement it is best to still apply just in case the state is able to make an exception.

**Crisis Assistance/ Homelessness**

Often a natural disaster results in your client becoming homeless, or at a minimum loosing many essential household items. In some instances, your client also loses employment and income since area businesses are also affected by the disaster. For clients with families with children 18 and younger, the loss of income may mean they could now qualify for TANF benefits. The state operates a Crisis Assistance program to help TANF eligible families. Crisis Assistance provides help with payment for rent, food, clothing, household supplies, and essential household furnishings.

To apply for this benefit your client has to be TANF eligible, so a TANF request has to be made. Often your clients are already enrolled in All Kids/Parent Assist. All your client will need to do is to contact the local IDHS office and speak to the caseworker who handles the All Kids case. Your client can request a SWAP to TANF cash due to the loss of income and also file a request for Crisis Assistance. If your client’s family is not enrolled in All Kids, or the All Kids case is served by...
Foreclosure

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impacted by high numbers of foreclosures. The Financial Services Committee is expected to markup the bill the following week, and the House may complete action on the bill by the end of April.

Senator Christopher Dodd (D-CT), Chair of the Senate Committee on Banking, Housing and Urban Affairs, has also announced a foreclosure mitigation bill, “HOPE for Homeowners Act of 2008.” This proposal provides for FHA refinancing of loans for homeowners facing difficulty meeting their mortgage payments, and includes a new foreclosure prevention affordable housing goal for Fannie Mae and Freddie Mac. The proposal does not mention the use of bulk or auction sales or loans or grants for the ultimate purchase or rental of foreclosed homes. No hearings have been scheduled in the Senate.

These measures are in addition to other actions being considered by Congress including FHA modernization, modernization of the regulatory structure for Freddie Mac and Fannie Mae (the two housing-related government sponsored enterprises, or GSEs) and legislation to prevent a reoccurrence of the lending problems in the subprime market that contributed to the current foreclosure crisis. FHA modernization bills have passed both the House (H. R. 1852, passed September 8, 2007) and the Senate (S. 1338, passed December 14, 2007). The House passed H. R. 1427, GSE reform legislation, on May 22, 2007, and H. R. 3915, the Mortgage Reform and Anti-Predatory Lending Act of 2007, on November 15, 2007. The Senate has not acted on GSE reform or anti-predatory lending legislation.

In addition to proposals that directly address issues in the mortgage market, Mr. Frank has proposed extensive reforms to the overall financial system in the United States. In a speech to the Greater Boston Chamber of Commerce on March 20, Mr. Frank called for the establishment of a financial services systemic risk regulator with the capacity and power to assess risk across financial markets regardless of the corporate structure of the financial entity. He also suggested that consumer protections should be enhanced because “consumer protection, safety and soundness and systemic risk are intertwined.”

For further information, contact the National Low Income Housing coalition at the address in Headlines Directory.

Disabled Housing

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HUD’s Worst Case reports acknowledge that American Housing Survey (AHS) data, the source of HUD’s estimates of worst case housing needs among all household types, are imperfect for assessing the housing needs of people with disabilities. In the past, several HUD reports attempted to correct for the known undercount of AHS data, but the two most recent reports omitted this adjustment.

The full report is available at http://www.tacinc.org/Docs/HH/The%20Hidden%20Housing%20Crisis.doc

Public Benefits

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the All Kids Unit in Springfield, then a TANF application has to be completed at the local IDHS FCRC office along with a request for Crisis Assistance.

Requesting TANF at the same time Crisis Assistance is requested means the state worker is to determine TANF and Crisis eligibility within 5 days and if your client meets the TANF eligibility criteria the worker is to issue benefits within 2 days. (State policy says the mandatory 30 day wait for TANF benefits is waived for families who qualify for Crisis Assistance.)

Sometimes clients are told that TANF is not able to be approved until all proof is provided. If your client is unable to obtain birth certificates and other proofs that are not income or asset related, the worker is able to approve the TANF as Presumed Eligible (PM 17-02-01-b), and not delay issuance of the TANF and Crisis Assistance benefits. Your client then is able to receive TANF for up to 90 days while waiting to obtain the required non-financial proofs.

If your client is eligible the worker is able to issue limited help to replace clothing and household supplies lost in the disaster, as well as up to $250 to help cover rent if the disaster requires your family to relocate.

The rules for the Crisis Assistance program are discussed in the state policy manual in chapter PM 06-06-04.

The DuPage Federation on Human Services Reform, a non-profit 501(c)(3) organization focused on advocacy and planning in DuPage County, Illinois and designer and trainer of Making the Connection: A Guide to Accessing Public Benefits. The DuPage Federation is affiliated with Northern Illinois University, Regional Development Institute. Questions can be directed to knelson@dupagefederation.org or cking@dupagefederation.org.