HISTORY & OVERVIEW OF PERMANENT SUPPORTIVE HOUSING IN LOUISIANA

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CAVEATS AND ACKNOWLEDGEMENTS
AGENDA

Louisiana PSH Program Overview
Partnerships
Outcomes & Take Aways
WHAT IS PERMANENT SUPPORTIVE HOUSING?

Decent, safe and affordable community housing providing occupants with rights of tenancy under landlord/tenant law and linked to voluntary, flexible services.

Emphasis on
- Choice
- Affordability
- Quality
- Consumer control of housing
- Normal and integrated housing settings (apartments)
Pre-Tenancy

- Housing application
- Eligibility requirements and addressing housing barriers
- Understanding the role of tenant
- Engagement and planning for support needs
- Housing search and choosing a unit

Move-In

- Arrangement of actual move
- Ensuring unit and individual are ready for move in-date
- Initial adjustment to new home and neighborhood

On-going Tenancy

- Sustained, successful tenancy
- Personal satisfaction: Relationships, employment, and education
- Flexing the type, intensity, frequency and duration of services based on needs and preferences
OVERVIEW OF LOUISIANA PSH
Planning began in the immediate aftermath of Hurricanes Katrina and Rita.

First units occupied.

Community Development Block Grant (Disaster CDBG) initially used to fund services.

State-level housing authority created within state housing corporation.

Tenancy supports funded under Medicaid for behavioral health.

Agreement with U.S. DOJ requiring 1,000 additional units by 2023.

Set aside requirements created in Low Income Housing Tax Credit Program.

Congress funds initial rental subsidies.

Tenancy supports funded under Medicaid HCBS waivers for people with disabilities.

811 Project Based Rental Assistance (PRA) Demonstration awarded.

State rental subsidy and NED Housing Choice added to subsidy array.
Persons/Households eligible for PSH services must meet all 3 of the following:

- Have a disability or a family member with a disability;
- Have a disability significant enough that the individual/household is determined unable to maintain tenancy without supports
- Low income

State’s tenant selection policy ensures the following priority populations gain access to PSH:

- People with disabilities who are homeless or at-risk of homelessness
- People living unnecessarily in institutions or at-risk of institutionalization
- Disaster displaced with disabilities

Goal: At least one-third of all PSH participants will be PSH eligible homeless households.
### Program Demographics

- **57 percent** Households were homeless
- **15 percent** Households were Chronically Homeless (of those homeless)
- **10 percent** Households previously lived in Institutions
<table>
<thead>
<tr>
<th>Household Size</th>
<th>Average Age</th>
<th>Single v. Family</th>
<th>Race/Ethnicity</th>
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<tbody>
<tr>
<td>1.7 People</td>
<td>46</td>
<td>94% Single vs. 6% Families</td>
<td>4% Hispanic/Latino</td>
</tr>
<tr>
<td>Range = 1-10 people</td>
<td>8% = 62+</td>
<td>PBV = 43% singles vs. 57% families</td>
<td>68% African-American</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>27% White</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>5% Other</td>
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• A major objective in Louisiana’s Road Home hurricane recovery plan was to create 3,000 PSH units in the Gulf Opportunity (GO) Zone.

• PSH units are ‘scattered-site’ units “leased using rental subsidies dedicated to the PSH program.

• Program has been statewide since 2012

\[ \text{= 100 PSH units} \]
Subsidy Mix

2000 Section 8 project-based vouchers (PBVs)
1000 Continuum of Care Rental Assistance subsidies (CoC)
300 Non-Elderly Disabled Housing Choice vouchers
200 Section 811 Project Rental Assistance vouchers (PRA)
100 State-funded Rental Subsidies for SMI

= 100 PSH units
Since 2006, requirements and/or incentives to “set-aside”/integrate small percentage of PSH units (no more than 25%) in new rental properties financed with federal resources (Low Income Housing Tax Credits, Housing Trust Fund, Small Rental Repair Program, CDBG “Piggy-Back” Program, etc.)

Result: Over 1,200 set-aside PSH units
STATE-LEVEL PARTNERSHIPS
LOUISIANA PSH - BRAIDED FUNDING MODEL

Capital
• Low Income Housing Tax Credit (LIHTC)
• Home Investment Partnership Program (HOME)
• Housing Trust Fund (HTF)
• Community Development Block Grant (CDBG)

Tenancy and Other Supports
• Medicaid State Plan
• Medicaid Waivers
• Ryan White
• Veteran’s Affairs
• Community Development Block Grant (CDBG)

Rental Assistance
• 811 Project Rental Assistance (PRA)
• Project-Based Vouchers (PBV)
• Continuum of Care (CoC) PSH Rental Assistance
• NED
• State-funded rental assistance for SMI
A PARTNERSHIP BETWEEN AGENCIES

LHC
Louisiana Housing Corporation

LHA
Louisiana Housing Authority

LDH
Louisiana Department of Health

OCD
Louisiana Office of Community Development
LHC & LHA together manage the tax-credit side of unit production; administer the rental subsidies both directly and through sub-contracted subsidy administrators. HOME, Housing Trust Fund, application for additional subsidies under opportunities such as 811 PRA and NED.
LDH takes program applications, determines eligibility, refers for appropriate unit/subsidy, connects program participant to a tenancy supports provider, trains and certifies agencies providing tenancy supports, monitors agencies for quality and fidelity, pays providers for services.
OCD is responsible for the use of CDBG in the program, both for services and unit production.
## DAILY OPERATIONS

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<tr>
<th>LA Department of Health</th>
<th>LA Housing Corporation/Housing Authority</th>
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<tbody>
<tr>
<td>• Single State Medicaid agency</td>
<td>• Works to recruit &amp; identify housing providers through Low-Income Housing Tax Credit Program</td>
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<tr>
<td>• Provides/manages services funding, Medicaid &amp; non-Medicaid</td>
<td>• Rental subsidy administrator for Louisiana PSH</td>
</tr>
<tr>
<td>• Works internally &amp; with community partners to identify individuals in need of PSH housing &amp; services</td>
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OUTCOMES
PROGRAM OUTCOMES

- Program Retention: 94 percent
- Housing Retention/Stability: 88 percent
- Reduction in homelessness 2010 to 2016: 68 percent
- Increased Household Income: 59 percent
Studied statistically significant reduction in ER and inpatient utilization for adult tenants post-housing.

2011-2012

24% Initial reduction in acute care costs

2016

Statistically significant reduction in ER and inpatient utilization for adult tenants post-housing
MEDICAID CLAIMS ANALYSIS 2009-2018

(PRE-POST, NO COMPARISON GROUP)

- Study Sample (4,473 individuals, 2,555 households)
  - All past and current residents (2009 – 2018)
    - Missing about 200 households not included in housing database
  - Matched with Medicaid files
  - At least 1 year of Medicaid coverage pre and post move in date

- Pre-post analysis of service use
  - Emergency Room, Inpatient Hospital, Behavioral Health Services
PARTICIPANT CHARACTERISTICS

- 45% were homeless
- More than half of those homeless were chronically homeless
- 10% were living in institutional settings
- 70% had more than one disability and 40% had 3 or more disabilities
- 37% of households had 1 or more members with SUD
- Even prior to Medicaid expansion, 90% of PSH participants were Medicaid eligible
The number of emergency room visits decreased by 26%.
The number of hospitalizations deceased by 12%.
Number of individuals using ER decreased by 17%
Number of individuals hospitalized decreased by 16%
Number of individuals receiving behavioral health services increased by 23%
KEY TAKEAWAYS
(FROM A HEALTH-PERSON’S PERSPECTIVE)

- Designed from outset with Medicaid in mind
- CDBG served as “seed” money for service & provider development
- Braiding
- LIHTC “Set Aside” specifically for La. PSH and referrals from the state Medicaid agency (LDH)
- State-level Housing Authority
- Medicaid agency determination of SSI disability for purposes of Medicaid coverage
Robin is the former Deputy Assistant Secretary for the Louisiana Department of Health (LDH), Office of Aging and Adult Services. She was involved in the development of Louisiana’s Permanent Supportive Housing since planning began in 2005 and oversaw management of the program within LDH until she retired in July of 2021. She now works as an independent consultant, including her work with the National Academy for State Health Policy (NASHP) multi-state Health and Housing Institute.

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