



Today's Presenters

- Lindsay Miller, Executive Director, New York Association on Independent Living
- Valerie Brennan, Program Manager, Olmstead Housing Subsidy

New York Association on Independent Living (NYAIL)

- Statewide, not-for-profit membership association of Independent Living Centers
- ILCs are unique disability-led, cross-disability, locally administered not-for-profit organizations, providing advocacy and supports to assist people with disabilities of all ages to live independently and fully integrated in their communities
- ILCs have been transitioning and diverting people from institutions for more than 20 years

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MRT Supportive Housing Workgroup

- Over \$641 million in funding invested in increasing housing options for people with disabilities and older adults:
 - State agency housing and service subsidies
 - Creation of new supportive housing units
 - Capital funding
 - New pilot programs

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Olmstead Housing Subsidy (OHS)

- A project of the MRT Supportive Housing WG
- Olmstead refers to Governor Cuomo's 2012 Olmstead Initiative
- The Olmstead Housing Subsidy (OHS) is:
 - Funded as a two year pilot beginning August 1, 2016, now extended through 2020
 - \$5 million annual allocation
 - Administered by the New York Association on Independent Living (NYAIL)

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Olmstead Housing Subsidy: What do we do?

- The Olmstead Housing Subsidy program seeks to support those nursing home residents who can safely live in the community by assisting with the cost of rent, and by providing assistance with locating and obtaining housing. OHS is designed to mirror Section 8 Housing Choice Voucher programs.
- Rental subsidy is intended to help seniors and people with disabilities leaving nursing homes.
- Provide monetary assistance for start up of security deposit, rent, household goods, household furniture
- Linkages for services in the community
- Assigned housing specialist in their local area

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OHS Structure

- 9 Regional Lead ILCs and 14 Auxiliary ILCs
 - Staffing over 27 Housing Specialists statewide, serving all counties of the State
- Fiscal Intermediary
 - Resource Center for Independent Living handles payments to landlords for rent and security deposit

OHS Eligibility for the Program:

- 120- consecutive days in a nursing home (skilled nursing facility) in the most recent 24 months,
 - Hospitals, prison/jail, rehab, psychiatric institutions do not count for the 120 days
- Medicaid Eligible,
- Unstably housed or homeless (no where to go),
- 18 and older with a documented chronic disability OR 55 and older,
- Able to live safely in the community,
- If coming from a community setting: Nursing home level of care as determined by Uniform Assessment System (UAS 5 or higher).

OHS: Information Needed to Determine Eligibility for the Program

- Referral form
- Participant consent and ROI
- Proof of identity and age
- Verification of current Medicaid Enrollment
- Income documentation
- Verification participants name was run through state and federal sex offender registries
- Verification participants name was run through NYS Inmate Population Information Search
- Written description of why a participant needs the subsidy
- Nursing home discharge plan/attestation by other community organization of unstably or homelessness
- Evidence participant may be safely served in the community
- Nursing home discharge plan/UAS outcome report with a referral recommendation to the community.
- If under age 55, verification of chronic disability
- A doctor's letter/ proof of participants receipt of SSDI
- Diversions: If being referred from the community Uniform Assessment System (UAS) showing Level of Care score (5 or greater)

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OHS: Where do Referrals Come From

- Transition Specialist
- Peers
- Family
- Nursing Home staff
- Homeless shelters
- Landlords
- NHTD/TBI
- Self- Referral
- Referral forms on our website at www.ilny.org

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What is the role of a Housing Specialist?

- Housing specialist receives a referral, complete an intake with participant, collects documents for eligibility
- Housing specialist will assist in finding a unit must be FMR (HUD Fair Market Rate)
- Assist an individual with a budget for rent (participant pays 30% of income towards rent and utilities)
- Determines income meets Extremely Low Income as determined by HUD Annually
- Assist with distribution of Community Transition Services (CTS) available to pay for furniture, essential household furnishing, small e-mods(up to \$5,000 total/participant)
- Works with community service providers to get needed services/supports in place for discharge

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OHS Housing Specialist Role

- Assist with solving barriers
- Linkages within the community for services
- Provide outreach for the program (nursing homes/rental agents/landlords)
- Resource for landlords

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HS to Locate and Secure Housing

- Housing Specialist to go out and secure housing for the participant based on their needs.
- Housing Specialist will develop rapport with landlords, provide information to the landlords about the program, assist participant in choosing a location.
- If participant cannot leave NH to get to the unit, HS can provide pictures of the unit to the participant.
- Participant has ultimate choice of unit.

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OHS: Housing Search and Criteria

- Unit to meet the needs of participant
 - 1 or 2 bedroom (live-in aide, children, roommate)
 - Housing Specialists locate housing to meet the needs
- Unit within HUD FMR (Fair Market Rent)
 - With utilities included
- Landlord able to work with Medicaid
 - OHS FI runs landlord W-9
 - Relationships/connection

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OHS Housing Subsidy Unit Information

- Unit must be Fair Market Rate
- Individual required to pay 30% of their income and utilities (if not included)
- Supply required documentation
- Sign annual lease with landlord
- Sign OHS participant agreement
- Maintain monthly contact with HS
- Apply for and accept Section 8 when available

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Community Transition Service Dollars:

- \$5000 per participant for lifetime
- Security deposit
- Household items and essential Furnishings
- Utility deposit
- Small E-Mods
- Mover's fees
- Back rent (if rent is backed up due to NH admission)

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What else does OHS provide?

- Monthly support
 - Contacts participant monthly, ensures participant is doing well, provides resources/linkages to community providers/support
- Landlord mediation
 - Can assist when an issue arises with landlords, i.e participant didn't pay their portion of rent/repairs needed
- Annual unit inspection
 - Housing specialist completes an annual inspection on the unit prior to lease renewal
- Moving assistance
 - After 1 year in the program, moving assistance can be used should a participant want to leave their unit and found a different unit.

One-Time Assistance: (CTS)

- For participants who are working with Housing Specialists to locate units, and find subsidized housing:
- OHS can help those who need One-Time Assistance:
 - 1st month rent/Security within FMR (Fair Market Rate)
 - Household items/Furniture
- Eligibility for One-Time Assistance:
 - Must meet all OHS eligibility and have documentation in place
 - A letter in place stating the need for the One-Time Assistance
 - Proof of lease
 - If participant needs rent/security- W-9 from a landlord

Discharge Of OHS Participants

- Voluntary housing subsidy
- Loss of participant eligibility
- Lose Medicaid eligibility
- Re-institutionalized for more than 3 months
- Begin to receive another subsidy
- Violate OHS program rules

Discharge of OHS Participants

- Do not supply required annual documentation
- Fail to complete any aspect of lease process
- Fail to pay rent or utilities
- Fail to meet the participation agreement
- Does not maintain monthly contact with HS
- **HS will work with the individual to ensure a safe discharge**

Working with Open Doors MFP Transition Center

- Major referral source
- Participants not already connected to Open Doors can be referred for transition assistance
- Assign a Transition Specialist
- Offer Peer Support services
- Work as a team towards successful transition
- Open Doors focus is on services (MLTC, NHTD, TBI)

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Working Together with NHTD/TBI Waivers

- Participants who meet OHS eligibility can be referred
- Housing Specialist and Service Coordinator work together to house individuals
 - Constant communication/meetings/emails
 - Work on timeline for service plans and housing time frames (lease signing)
- CTS available from NHTD/TBI should be used prior to any CTS from OHS.
 - With the exception to Diversions, which are not allowed to utilize the CTS from NHTD.

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Working with MLTC/MMC Managed Long Term Care/Medicaid Managed Care

- Services can be set up to assist with successful transition
- Developing relationships with plans
- Assist with scheduling conflict free assessments
- HS can be present during evaluation to ensure all needs are addressed
- Works to coordinate care start date with lease dates
- https://www.health.ny.gov/health_care/managed_care/mmc_counties/

Common Barriers

- Working with Landlords
- Setting up aides
- Transportation
- Working with family members
- Nursing Home vs MLTC plans

OHS Program Impact

As of 5/29:

Status	Total	Downstate	Upstate
Admission	163	75	88
Closed	631	288	342
Discharged	31	5	26
Intake	590	426	163
One-Time Assist	31	5	26
Referral	276	213	62

Additional OHS Information

- Referral forms and Regional Contacts on NYAIL website:
- <http://www.ilny.org/programs/ohs>
- Or contact:
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