



RIVER EDGE

BEHAVIORAL HEALTH CENTER

We Make Life Better™

Serving predominantly Georgia's
Baldwin, Bibb, Jones, Monroe, Putnam, Twiggs and Wilkinson Counties



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AVAILABLE SUPPORTIVE HOUSING RESOURCES



Critical Element	Source	Examples
Capital	<ul style="list-style-type: none"> • DCA • HUD • County or City Govt. • Private Foundation 	<ul style="list-style-type: none"> • Low Income Housing Tax Credits (LIHTC) • HOME • CDBG • NSP 1,2, & 3 • Bonds / Trust Funds • Foundation Funds
Rental Subsidies	<ul style="list-style-type: none"> • HUD 	<ul style="list-style-type: none"> • Section 811 PRA • S+C PBA • Section 8 PBV • HOPWA • TBRA • VASH
Support Services	<ul style="list-style-type: none"> • State Medicaid Agency • DBHDD • Community Service Boards (CSB) • Private Service Providers 	<ul style="list-style-type: none"> • Money Follows Person • State Services Funds • Home and Community-Based Waiver Services • Case Management • Rehab Option

BRIEF HISTORY

HUD SECTION 811/202



- œ HUD's first supportive housing program provided **Capital Advance Grants** and **Project Rental Assistance Contract (PRAC)** to non-profits to develop housing & services for persons with severe disabilities
- œ In mid-1990s, Section 811 produced 3,000+ units per year
- œ Some of the Problems:
 - œ Declining production-new project took 5-7 years to complete
 - œ Only 600 units created annually between 2007-2010
 - œ Outdated statute and program models
 - œ No linkages to state affordable housing/disability policy
 - œ Excessive HUD bureaucracy

SECTION 811 REFORMED



- œ Frank Melville Supportive Housing Investment Act of 2010
 - œ State-driven strategies to expand Supportive Housing
 - œ Administered by State Housing Agencies in partnership with the State Human Service/Medicaid agency
 - œ Commits Section 811 PRA to either new or existing units
 - œ No capital funding available for development activities
 - œ DBHDD/Medicaid made service commitments
 - œ No more than 25 percent of the units in any property can be set-aside as supportive housing
- œ Section 811 PRA for persons at or below 30% AMI

PROVISION OF SUPPORTIVE SERVICES



- œ Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) through contract with Community Service Boards (CSBs) provide services to distinct populations:
 - œ People with intellectual and Developmental Disabilities (DD)
 - œ People with mental illness and addictive diseases (called Behavioral Health, or BH)
- œ Service delivery systems are unique to each population
 - œ A distinct provider network
 - œ Financing Services through:
 - œ Payer Source (Medicaid)
 - œ Income (Personal, SSI, other...)
 - œ No Income (Subsidies, S+C, TBRA, HOPWA...)

PAYMENT RESTRUCTURING



- œ Transitioning most Adult Core MH, & SA services from Grant In Aid funding to Fee-for-Service beginning July 1, 2015
- œ This will affect how supportive services are delivered in support of the Section 811 PRA as it relates to case management
- œ Case Management assumes different forms depending on the population being served
 - œ Fee based case management services
 - œ Payment depends on number of Clients served
 - œ Pursuing the most cost-effective way to deliver services

PARTNERSHIPS CHALLENGES



- ❧ Creating an early collaborative relationship between housing developers, service providers, and Medicaid
- ❧ Support from local stakeholders to lay the groundwork for local capacity to administer the 811 PRA vouchers
- ❧ Methods of outreach and referral to guarantee Supportive Housing units are occupied by the target population in a timely manner
- ❧ Educating Limited Partners on 811 subsidy to ensure positive Net Operating Income (NOI) throughout “Compliance Period”



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