



# **Guidelines**

FOR THE

# **Apple Health and Homes Program**

**July 7, 2023**

Version 2.1

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# 1 Apple Health and Homes/Permanent Supportive Housing (AHAH/PSH)

## Overview

1.1 [Engrossed Substitute House Bill 1866](#) (2022) directed the Department of Commerce to create and convene the Office of Apple Health and Homes (AHAH). AHAH will operationalize permanent supportive housing (PSH) for individuals eligible for and enrolled in the Health Care Authority’s Foundational Community Supports supportive housing (FCS-SH) Program. FCS-SH providers will match eligible individuals with project-based or tenant-based housing resources – some of which are capital funded rapid acquisition or construction projects, some are tenant-based or project-based rent assistance specifically for individuals eligible for AHAH.

The Office of Apple Health and Homes/Permanent Supportive Housing (AHAH/PSH) will coordinate resources internally and externally, provide technical assistance and capacity building efforts to coordinate a spectrum of practice efforts related to providing permanent supportive housing, including leading efforts related to every aspect of creating housing, operating housing, and delivering those services to connect people with housing and maintain them in that housing ([RCW 43.330.181](#)). Department of Commerce, the Health Care Authority (HCA) and Department of Social and Health Services (DSHS) will work with a Coordinating Entity contracted through HCA to assure seamless integration.

The concept for the AHAH program is that lack of housing is a social determinant of health and individuals with disabling conditions such as medical, behavioral health, physical impairments may not improve until housing is stable, thus the ‘prescription for housing’ was coined. It is only the concept, no actual prescriptions for housing are being issued.

1.2 The AHAH program seeks to demonstrate that wrapping housing supports with rent assistance and affordable housing stock for individuals who have been determined as needing a prescription of housing is more effective than the individual navigating the multiple funding sources and limited resources to obtain/maintain housing. Since FCS-SH is a Medicaid benefit for individuals with a verifiable medical or behavioral health condition who are also at risk for housing instability including homelessness, it is the cornerstone of the AHAH program.

## Fund Source

AHAH/PSH has several fund sources associated with the initiative.

- Department of Commerce – Operating funds: Through funds appropriated by the Legislature through [ESSB 5187 \(2023\)](#), AHAH/PSH will distribute funds for operations and maintenance costs, project-based vouchers, rental subsidies and provider grants.
- Department of Commerce – Capital funds: Through funds appropriated by the Legislature through [ESSB 5200 \(2023\)](#), Department of Commerce will distribute capital funds through the Housing Trust Fund Multi-family Rental notice of funding

opportunity.

- Health Care Authority – Foundational Community Supports is a targeted Medicaid benefit that is funded through a federal Centers for Medicaid/Medicare Services 1115 transformation demonstration waiver.

### Permanent Supportive Housing (PSH)

- 1.3** [RCW 36.70A.030 \(19\)](#): Defines "Permanent supportive housing" as subsidized, leased housing with no limit on length of stay that prioritizes people who need comprehensive support services to retain tenancy and utilizes admissions practices designed to use lower barriers to entry than would be typical for other subsidized or unsubsidized rental housing, especially related to rental history, criminal history, and personal behaviors. Permanent supportive housing is paired with on-site or off-site voluntary services designed to support a person living with a complex and disabling behavioral health or physical health condition who was experiencing homelessness or was at imminent risk of homelessness prior to moving into housing to retain their housing and be a successful tenant in a housing arrangement, improve the resident's health status, and connect the resident of the housing with community-based health care, treatment, or employment services. Permanent supportive housing is subject to all of the rights and responsibilities defined in chapter 59.18 RCW.

### Evidence-based practice PSH

- 1.4** HCA and DSHS were legislatively directed to implement evidence-based and research-based practices through [SB5732/HB1519](#) (2013). The legislature also directed the Washington State Institute for Public Policy (WSIPP) to create an inventory of practices as a guide for HCA to use which includes the SAMHSA PSH model. When HCA applied to the Centers for Medicaid/Medicare (CMS) for the Foundational Community Supports within the 1115 Medicaid (MTP) waiver, the services were based on utilizing an evidence-based approach. Evaluations and reporting to CMS for the FCS program are dependent upon the consistency of the EBP PSH model. As such, significant investments have been made to implement and create a learning collaborative approach to the principles in the SAMHSA EBP supportive housing model. The 1115 MTP renewal speaks to the State's commitment to the SAMHSA PSH EBP model for the FCS service delivery.

Permanent supportive housing is associated with reductions in higher cost services and resources such as hospitalization, inpatient treatment and incarceration (SAMHSA, 2010). Implementing PSH consistency across the state based on the quality indicators associated requires a fidelity to a standard model that has been rooted in research. The Substance Abuse Mental Health Services Administration (SAMHSA) created a toolkit to implement a permanent supportive housing model that has been thoroughly researched and provides a consistent framework that builds upon a continuous quality improvement approach.

PSH is based upon seven principles. Those principles focus on people having choices in their housing that include flexible supportive services that are separate from the landlord or property management. Housing must be decent, safe and affordable and integrated in the community close to shopping, schools, churches and transportation. Tenants have full tenancy rights under current state and local laws. For more information on the SAMHSA PSH

toolkit click [here](#).

### Housing First

Low barrier and access to housing principles must be operated in accordance with Housing First principles. For detail on Housing First, see the [National Alliance to End Homelessness's webpage](#) on the topic.

- 1.4.1 The Housing First philosophy speaks to providing access to housing without meeting things like treatment needs or adherence to medications, but once in housing, the intent is to wrap services around the individual to support them. The housing is not contingent on service engagement. AHAH housing meets this Housing First principle as an individual does not need to remain enrolled in Foundational Community Supports or on Medicaid to keep their housing.

## 2 AHAH/PSH Responsibilities

### Cross System Coordination

- 2.1 In accordance with [RCW 43.330.181](#), AHAH will be a collaboration between the Department of Commerce, Health Care Authority (HCA), Department of Social and Health Services (DSHS), local governments, the coordinating entity (Amerigroup), and community based organizations. State agencies shall coordinate resources, technical assistance and capacity building efforts to help match eligible individuals with community support services, health care, including behavioral health care and long-term care services and stable housing.  
The AHAH cross system coordination team will meet bi-monthly and HCA and Dept. of Commerce will co-facilitate meetings and provide agendas and meeting materials in advance. Team members will make best efforts to attend all meetings, use a cloud sharing platform to add meeting agenda items and will be responsible for their individual assigned activities and jointly for maintaining the work of team. Work may be required and conducted outside of the meetings.  
Final decisions on all FCS operational matters will be made by the HCA and final decision on all Housing resource matters will be made by Dept. of Commerce. Amerigroup's input as the coordinating entity and third party administrator of the FCS program will be valuable to the discussions although they will be considered a non-voting member as many of the decisions will affect their responsibilities.
- 2.2

### Coordinating Entity Role

The Coordinating Entity will be under contract with HCA to coordinate community support services. There will only be one coordinating entity per regional service area. As of this writing, HCA has identified Amerigroup as the Coordinating Entity. According to [RCW 74.09.886](#) the Coordinating Entity's roles and responsibilities include:

- Assure the availability of access to eligibility determinations services for community support services benefits and permanent supportive housing benefits;

- Verify that persons meet the eligibility standards
- Coordinate enrollment in medical assistance programs for persons who meet the eligibility standards, except for actual enrollment in a medical assistance program; and
- Coordinate with a network of community support services providers to arrange with local housing providers for the placement of an eligible person in permanent supportive housing appropriate to the person's needs and assure that community support services are provided to the person by a community support services provider.

The primary role of the coordinating entity or entities is administrative and operational, while the HCA shall establish the general policy parameters for the work of the coordinating entity or entities.

### **Foundational Community Supports (FCS)**

FCS is a targeted Medicaid benefit authorized through the Federal Centers for  
 2.3 Medicaid/Medicare under an 1115 Medicaid Transformation Program (MTP) demonstration waiver. [WAC 182-559-300](#) defines the eligibility for FCS including the definitions for behavioral health (mental health and substance use) and health conditions. FCS includes supportive housing and supported employment services. Individuals can be enrolled in both benefits but for the purposes of the AHAH initiative, only those individuals eligible for supportive housing are eligible for AHAH.

Under this waiver, HCA is able to pay for targeted services called Community Support Services (CSS). CSS services help individuals who are homeless or unstably housed live with maximum independence in community-integrated housing. Activities are intended to ensure successful community living through the utilization of skills training, cueing, modeling and supervision as identified by the person-centered assessment. For more information about the pre-tenancy and post tenancy services available, please reference the FCS provider manual located on the [Amerigroup website](#).

FCS was created with multiple referral pathways in mind. Individuals can refer themselves through Amerigroup's public access portal at [Amerigroup's FCS participant website](#). Amerigroup will work with administrative data records to validate eligibility. Organizations who serve potentially eligible individuals directly can request authorization to serve individuals by completing an assessment. The FCS assessment tool and provider manual is  
 2.3 available on the [Amerigroup's FCS provider website](#). Medical providers, behavioral health organizations, community based organizations wishing to refer individuals to FCS can use the [FCS Quick Reference Guide](#) and [FCS Referral Form](#).

### **Community Support Services**

CSS can be provided flexibly, including in-person or on behalf of an individual. CSS consist of the following support services to help the individual obtain/maintain housing.

- Pre-tenancy support services determine the person's specific housing needs and assist the individual in identifying permanent supportive housing options that are appropriate and safe for the person.



- Fully incorporate the eligible individual’s available community support services into the case management services provided by the FCS provider and,
- Deliver ongoing tenancy-sustaining services to support the person in maintaining successful tenancy.

### Community Support Service Providers

2.3.2 Because FCS is authorized under an 1115 Medicaid Transformation Program demonstration waiver from the Centers for Medicaid/Medicare, traditional and nontraditional providers are able to provide these services and get reimbursed using Medicaid funds. [WAC 182-559-200](#) describes the eligibility requirements for providers that may become under contract with Amerigroup (HCA’s administrator of the FCS program) to provide CSS services. Providers are required to register and obtain a Provider One registration number as a ‘nonbilling provider’. Nonbilling provider means you are not submitting claims directly to Medicaid but rather are receiving reimbursement through the administrator of the program. Information on registering can be located here - [Enroll as a nonbilling provider | Washington State Health Care Authority](#)

### Housing

- 2.4 The AHAH program has been described as historic and a paradigm shift because it pairs housing and health care services together. In order to implement the strategies to achieve the outcomes described in [RCW 43.330.187](#) and created through [Engrossed Substitute House Bill 1866](#), AHAH intends to:
- Coordinate resources, technical assistance and capacity building efforts to help match eligible individuals with the community support services, health care, behavioral health care and long-term care services and stable housing.
  - Foster the rapid development of capital supportive housing projects by working to streamline the application process within Commerce’s Multifamily Housing Unit.
  - Secure adequate funding to provide a mix of project-based and scattered site housing options to qualifying target population members in order to promote choice in housing through alignment with the permanent supportive housing evidence-based practice model.
  - Establish a clearinghouse of supportive housing vouchers, subsidies and units that are available to the coordinating entity. Such a clearinghouse will enable the coordinating entity, regardless of their geographical location, to see at a glance the availability of project based vouchers, housing subsidies and unit availability in any geographic region of the state.

The intent of AHAH is to leverage as many resources as possible to provide affordable, permanent supportive housing to individuals with disabling conditions. Coordination with public housing authorities, local government, private philanthropic endeavors are highly encouraged.

## Capital Funds Administration

### Pathways for Capital funds distribution

2.4.1 The Department of Commerce has been distributing capital funds to build affordable housing through the state’s Housing Trust Fund since 1986. As the Legislature has increased allocations to the Housing Trust Fund over the years, Commerce has

2.4.1.1 partnered with local governments, philanthropic organizations and the Washington State Housing Finance Commission to create a robust application, contracting and monitoring process. It is this vast experience that we use the Housing Trust Fund guidelines as the foundation for the Apple Health and Homes program with the exceptions that are included in these stated guidelines.

Subject to funds appropriated by the Legislature, the Apple Health and Homes Account ([RCW 43.330.184](#)) will be used to acquire or construct permanent supportive housing units administered by the Office of Apple Health and Homes. Projects will be selected that promote the priorities of this initiative, promote racial equity, leverage other funds and be geographically diverse including in rural areas.

Department of Commerce’s Multifamily Unit (MHU) and Office of Apple Health and Homes/Permanent Supportive Housing (AHAH/PSH) units are collaborating on pathways that will allocate the funding announcements to produce units for the AHAH program. Capital projects funded through the MHU process will follow the [Housing Trust Fund Handbook guidelines](#) for public notice of fund availability, further specificity about the capital allocation, prioritization and capital funding restrictions. The AHAH guidelines are specific to the eligibility and programmatic requirements associated with the initiative.

#### 2.4.1.1.1 Greatest Public Benefit

MHU and the AHAH/PSH units will ensure the resources meet the greatest public benefit by creating the greatest number of units, comparing simultaneous applications for funding from the same geographic region while balancing the opportunities to leverage other funding sources. Dept. Commerce will expedite applications and projects where possible to ensure the date of the completion serves individuals as quickly as possible.

For the AHAH Capital program, Dept. of Commerce will establish regional target allocations based on the Apple Health (Medicaid) 10 integrated managed care/behavioral health care regions, per the AHAH enabling statute ([RCW 43.330.187](#)).

#### 2.4.1.1.2 ‘By and For’ Organizations

MHU and the Office of AHAH/PSH will ensure projects funded under the capital grant funding notices prioritize individuals disproportionately affected by homelessness and behavioral health conditions including black, indigenous, and other people of color,

lesbian, gay, bisexual, queer, transgender, and other gender diverse individuals. A minimum of ten percent of the expenditures will be targeted for organizations that serve and are substantially governed by individuals from marginalized communities.

Dept. of Commerce utilizes this definition of “By and For” organizations:

- Operated by and for the community they serve (including black, indigenous, and other people of color, lesbian, gay, bisexual, queer, transgender, and other gender diverse individuals; and other groups or communities disproportionately impacted by homelessness, housing instability and housing affordability).
- Primary mission and history is serving a specific community.
- Culturally based, directed, and substantially controlled by individuals from the population they serve.
- At the core of their programs, By and For Organizations embody the community’s central cultural values.

The Dept. of Commerce further identifies federally recognized Tribes and Nations and Tribally Designated Housing Entities (TDHE) as qualified for these set-asides without additional documentation.

#### 2.4.2 **Tenant-based rental assistance/Project-based rent assistance Third Party Administrator**

##### 2.4.2.1 **Pathways for Tenant-based rental assistance/Project-based rental assistance distribution**

The Apple Health and Homes Account ([RCW 43.330.184](#)) includes funds that may be used for the purpose of PSH project-based vouchers and rental subsidies but is subject to funds available and as appropriated through the Legislature. Dept. of Commerce embarked on issuing a procurement in 2022 for a single entity to manage the rent assistance program statewide for the AHAH program with the goal of increasing alignment between the FCS program and the rent assistance resources. The eventual goal of this program will be to align project-based vouchers with capital resources through the AHAH capital program.

The goal of the AHAH rent assistance third-party administrator (TPA) is to manage the funds legislatively allocated through the operating budget into the AHAH account for the tenant-based and project-based rental assistance vouchers and work collaboratively with the coordinating entity on behalf of the eligible and enrolled individuals in AHAH program. The organization contracted through Department of Commerce will act as the tenant-based rental assistant/project-based rental assistance (TBRA/PBRA) third party administrator (TPA) and must bill Commerce monthly for reimbursement of allowable costs. Eligible housing costs must be paid directly to landlords/property managers on behalf of the AHAH individual. PBRA/TBRA rent payments may not be made directly to the eligible household. Please note, Commerce expects that, when other short-term subsidies are available for emergency housing, securing housing costs, and move-in

costs, that these subsidies are used before AHAAH PBRA/TBRA Rent funds.

### Capacity grants and technical assistance

2.5 In addition to vouchers and rent assistance, the AHAAH account (subject to funds available) includes provider grants to build the capacity of organizations to provide community support services and permanent supportive housing. These capacity-building grants will further the state's interests of enhancing the ability of community support services providers and housing providers to deliver community support services and permanent supportive housing and assure that an initial infrastructure is established. ([RCW 43.330.181](#) & [RCW 43.330.184](#))

The Health Care Authority and the Department of Social and Health Services have a robust training and technical assistance program to assist provider in implementing FCS. Both organizations have invested significant resources in online curriculums, training staff, online resources, toolkits, platforms and education materials to assist organizations in training staff provide high quality supportive housing services. In addition, training and technical assistance will be provided through several national organizations currently under contract to advance supportive housing projects including those funded through HCA.

The Office of Apple Health and Homes-PSH unit has hired staff that to provide technical assistance on the evidence-based practice of PSH emphasizing the interface of housing and behavioral health. This technical assistance will be provided to the housing industry focusing on housing developers, housing providers, property managers throughout Washington with an understanding of the specific challenges in urban, rural and frontier regions.

#### 2.5.1 FCS technical assistance and training

HCA and DSHS have created robust resources, education, technical assistance and training on the FCS program. Please see the [FCS training calendar](#) available on the [HCA FCS](#)

2.5.2 [resources website](#) as well as the [DSHS supportive housing resources](#).

### Capital funding technical assistance

2.6 Dept. of Commerce through funds appropriated by the Legislature has contracted with a national Community Development Financial Institution (CDFI) to provide training and technical assistance, predevelopment grants on the constructive alignment of yet-to-be secured state or local capital funds, and other services for the construction, acquisition, refurbishment, redevelopment, master leasing of properties for non-congregate housing or conversion of units from nonresidential to residential settings. They will assist organizations analyze the suitability of properties and sites, including existing buildings for supportive housing. They will advise AHAAH as well as other divisions/units within

2.6.1 Department of Commerce on best practices. They are available for community engagement and will provide resources for specialized predevelopment services.

### AHAAH/PSH Management

#### Changes to Guidelines

The Department of Commerce, (Commerce), may revise the guidelines at any time. Revised guidelines will be available on the Department of Commerce website for all

parties including contractors and FCS providers, and housing operators/developers.

### Commerce Monitoring

2.6.2 Commerce's AHAH/PSH unit will monitor the contract for the tenant based rental assistance/project based rental assistance third party administrator (TPA) contract. Commerce MHU will monitor any capital funded projects. HCA and Amerigroup will monitor FCS service providers. Organizations participating in AHAH will be encouraged to participate in EBP PSH fidelity reviews as part of a continuous quality improvement process.

### AHAH Performance Measurements

HCA must submit a report to the Legislature that contains:

- 2.7
- The estimated enrollment,
  - Estimated program costs,
  - Estimated supportive housing unit availability,
  - Funding availability for the program from all sources,
  - Efforts to improve billing and administrative burdens for FCS providers,
  - Efforts to streamline continuity of care and system connection for persons who are potentially eligible for foundational community supports, and
  - Any statutory or budgetary needs to successfully implement the first year of the program.

AHAH must create a public facing dashboard to make key program outcomes available to the public. Key Program outcomes include but are not limited to:

- The number of people served by the program and
- The number of housing units created by the office

2.8 AHAH must also report capital funding progress reports on its website including the total number of applications and amount of funding requested as well as a list and description of the projects approved for funding including state funding, total project cost, number of units and the anticipated date of completion.

### Performance Reporting Requirements

FCS-SH providers are required to provide the data elements related to the services they are contracted for so the elements needed for quality monitoring and oversight may be reported. FCS-SH service providers must follow the contractual requirements from Amerigroup for performance reporting requirements which include establishing a continuous quality improvement program. This includes collecting and reporting data that permits an evaluation of goal achievement on individual-level clinical outcomes, experience-of-care outcomes and quality-of-care outcomes at the population level. ([Provider Manual](#))

The AHAH capital program will only require the annual performance reporting requirements as specified in the Housing Trust Fund Handbook. However, Commerce will be creating a

data 'platform' for housing owner/operator/developer that access AHAH capital funds as well as the TBRA TPA to enter real-time availability of units or resources. Housing owner/operator/developers receiving AHAH capital will be required to submit a profile of their PSH units in the 'platform' and provide real-time availability of units. This platform will be accessed by the AHAH coordinating entity to match and FCS-SH eligible individual with the housing resource. This platform will also inform the public dashboard reporting requirements associated with the initiative.

### 3 Program Eligibility

Amerigroup, the Health Care Authorities third party administrator of the FCS-SH program will act as the 'Coordinating Entity' and determine AHAH eligibility from those individuals currently enrolled in FCS-SH.

#### AHAH/PSH Eligible Populations

- 3.1 Eligibility for FCS-SH community support services and AHAH/PSH include:
- (a) Be 18 years of age or older;
  - (b) (i) Be enrolled in a medical assistance program under this chapter and eligible for community support services;
    - (ii) (A) Have a countable income that is at or below 133 percent of the federal poverty level, adjusted for family size, and determined annually by the federal department of health and human services; and
    - (B) Not be eligible for categorically needy medical assistance, as defined in the social security Title XIX state plan; or
    - (iii) Be assessed as likely eligible for, but not yet enrolled in, a medical assistance program under this chapter due to the severity of behavioral health symptom acuity level which creates barriers to accessing and receiving conventional services;
  - (c) Have been assessed:
    - (i) By a licensed behavioral health agency to have a behavioral health need which is defined as meeting one or both of the following criteria:
      - (A) Having mental health needs, including a need for improvement, stabilization, or prevention of deterioration of functioning resulting from the presence of a mental illness; or
      - (B) Having substance use disorder needs indicating the need for outpatient substance use disorder treatment which may be determined by an assessment using the American society of addiction medicine criteria or a similar assessment tool approved by the authority;
    - (ii) By the department of social and health services as needing either assistance with at least three activities of daily living or hands-on assistance with at least one activity of daily living and have the preliminary determination confirmed by the department of social and health services through an in-person assessment conducted by the department of social and health services; or

- (iii) To be a homeless person with a long-continuing or indefinite physical condition requiring improvement, stabilization, or prevention of deterioration of functioning, including the ability to live independently without support; and
- (d) Have at least one of the following risk factors:
  - (i) (A) Be a homeless person at the time of the eligibility determination for the program and have been homeless for 12 months prior to the eligibility determination; or
    - (B) Have been a homeless person on at least four separate occasions in the three years prior to the eligibility determination for the program, as long as the combined occasions equal at least 12 months;
  - (ii) Have a history of frequent or lengthy institutional contact, including contact at institutional care facilities such as jails, substance use disorder or mental health treatment facilities, hospitals, or skilled nursing facilities; or
  - (iii) Have a history of frequent stays at adult residential care facilities or residential treatment facilities.

### Referrals to AHAH

- 3.2 Referrals for Foundational Community Supports (FCS) program may come from a variety of sources. An FCS quick-reference eligibility guide is available on the third-party administrator (Amerigroup) website. To support effective referrals for the AHAH priority population, individuals must first qualify for FCS. The AHAH eligible population is a subset of the FCS eligible population. The Coordinating Entity (Amerigroup) will determine eligibility for AHAH. Individuals may self-refer using the FCS third-party administrator (Amerigroup) website at <https://www.myamerigroup.com/washington-fcs/home.html>. Organizations, hospitals, treatment facilities, homeless organizations and others can refer to FCS using the [referral form](#).
- 3.3

### AHAH and Coordinated Entry

Coordinated Entry (CE) is aimed at guiding households experiencing a housing crisis through the crisis response system. Prioritization for the limited housing resources may look different in each community. According to the [CE guidelines](#), distinct and separate access points may occur for certain populations such as Housing and Essential Needs (HEN) and Veteran populations. RCW 74.09.888 created the AHAH program to be an intervention for a targeted group individuals who might otherwise not be eligible for current resources or who have difficulty navigating coordinated entry. The AHAH Coordinating Entity's role is to determine eligibility for the AHAH program (RCW 74.09.886) and coordinate with a network of community support services providers to arrange with local housing providers for the placement of an eligible person in permanent supportive housing appropriate to the person's needs and assure that community support services are provided to the person by a community support services provider. Individuals with medical, behavioral health and physical health conditions exiting inpatient settings are often not eligible for resources through CE but are eligible for AHAH.

FCS service providers and Amerigroup, the AHAH Coordinating Entity are encouraged to collaborate with local coordinated entry organizations. In addition, Coordinated Entry organizations are encourage to refer individuals to the FCS program. The AHAH program is an opportunity to create an intervention for a targeted group individuals who might otherwise not be eligible for resources through coordinated entry.

Using administrative data, Amerigroup is able to validate chronic homeless eligibility for FCS enrollment. We know that when FCS service providers have relationships with CE it works really well. We will continue to build capacity for FCS services and further promote relationship development between FCS and CE.

CE was created by HUD to triage and prioritize individuals in the homeless crisis system. Without the AHAH Coordinating Entity eligibility determination [RCW 74.09-886](#) Sec. (3) there are several populations that would not be able to access housing without the AHAH resources. Apple Health and Homes is intended as a benefit that prescribes housing as an intervention that is wrapped around a person with complex conditions. It will take time and relationships to merge, embrace and develop new pathways or identify where opportunities exist to intersect or remain parallel between CE and AHAH. These are growing pains as we implement this ground breaking initiative that we hope to record through lessons learned and share with other states through our evaluation.

### 3.4 **Household Eligibility**

#### 3.4.1 **Eligibility Criteria:**

A household is one or more individuals seeking to obtain or maintain housing together as a unit. A household does not include friends or family that are providing temporary housing. Participants, in consultation with the FCS-SH provider/Coordinating Entity, should decide who is included in the household and who is not.

3.4.2

#### **Documentation of Eligibility**

3.4.3 Documentation will be provided as eligibility is determined through the FCS-SH Coordinating Entity. The TBRA/PBRA TPA must document eligibility for the household.

#### **Documentation of Household Income Eligibility**

3.4.4 The Coordinating Entity and FCS-SH service providers must attempt to document income for all members of the household using the preferred documentation method for submission to the TBRA/PBRA TPA or housing units funded by AHAH capital in Appendix D.

#### **Determination of Income Eligibility**

FCS-SH eligibility requires that individuals meet financial and medical necessity requirements and be eligible for Medicaid. There are many different types of Medicaid. Apple Health is the term used as the 'brand name' for all Washington State medical assistance programs. ([2023 Medicaid Benefits Booklet](#)) Eligibility for most Medicaid



programs use income levels compared to the Federal Poverty Level (FPL).

Classic Medicaid is the federally matched medical aid program under Title XIX of the Social Security Act (and Title XXI of the Social Security Act for Children’s Health Insurance Plan) that covers the Categorically Needy (CN) and Medically Needy (MN) programs.

The Patient Protection and Affordable Care Act (ACA) enacted in 2010 expanded Medicaid eligibility to not only individuals with disabilities but also to individuals whose incomes were far below the federal poverty level. This is also known as Expanded Medicaid.

2023 Federal Poverty Level (FPL)

Family size	2022 income numbers	2023 income numbers
For individuals	\$13,590	\$14,580
For a household of 2	\$18,310	\$19,720
For a household of 3	\$23,030	\$24,860
For a household of 4	\$27,750	\$30,000
For a household of 5	\$32,470	\$35,140
For a household of 6	\$37,190	\$40,280
For a household of 7	\$41,910	\$45,420
For a household of 8	\$46,630	\$50,560
For a household of 9+	Add \$4,720 for each extra person	Add \$5,140 for each extra person

The Coordinating Entity and FCS-SH service providers must attempt to document income using the preferred documentation method for submission to the TBRA/PBRA TPA or housing units funded by AHAH capital in Appendix D.

3.4.4.1

**Annual Eligibility Review**

Annually the individual’s FCS-SH eligibility for CSS will be reviewed through the Coordinating Entity. Supportive Housing services are a specific intervention for people who, but for the availability of services, do not succeed in housing and who, but for housing, do not succeed in services. Annual review of eligibility will replace the homelessness eligibility with an assessment of the likelihood to become homeless in the event that the CSS benefit is terminated.

3.4.5

Annual review of financial eligibility for rent assistance and area median income (AMI) eligibility will occur through the respective housing owner/operator and TPA. The Coordinating Entity will provide poverty eligibility determination as needed/upon request.

**Ineligible at Recertification**

If a household is determined ineligible at recertification due to earned income, the TBRA/PBRA TPA has the option of providing up to six additional months of rental subsidy to support the household to transition to self-sufficiency. The decision to provide

additional rental subsidy of up to 6 months must be noted in the client file and coordinated with the Office of Apple Health and Homes.

#### Medicaid termination or suspension

3.4.5.1 Individuals who lose their FCS-SH eligibility due to Medicaid termination or suspension will not be considered as ineligible so long as they were eligible at time of enrollment in AHAH. Rent assistance and tenancy within housing units funded through AHAH capital funds will not lose their placement so long as their incomes are not exceeding the Area Median Income for the unit.

## 4 AHAH/PSH Capital Program

### Administration

4.1 Revised Code of Washington (RCW) [43.185](#) and [43.185A](#) describes the capital requirements for affordable housing resources. Affordable housing means residential housing for rental occupancy which, as long as the same is occupied by low-income households, requires payment of monthly housing costs, including utilities other than telephone, of no more than thirty percent of the family's income. Since all projects under the AHAH initiative must meet the definition of affordable housing, any projects funded under the capital section of this program must follow the guidelines established under the Housing Trust Fund (HTF).

The HTF handbook provides guidance and policy direction to all affordable housing projects that have been competitively awarded and/or directly appropriated by the Legislature (unless otherwise required in the appropriation proviso). The HTF handbook may be frequently updated or revised and can be located on the Dept. of Commerce website at [www.commerce.wa.gov/htf](http://www.commerce.wa.gov/htf).

4.2 [RCW 43.330.187](#) describes the AHAH rapid PSH acquisition and development program. Funds are subject to availability and are made available through AHAH account ([RCW 43.330.184](#)). Funds are intended to be used by providers to construct permanent supportive housing units or to acquire real property for quick conversion into permanent supportive housing units for individuals eligible for a community support service benefit through the Foundational Community Supports (FCS) [RCW 74.09.886](#).

### Eligible Applicants

4.3 Eligible organizations defined in [RCW 43.185A.040](#) and to public development authorities established under [RCW 35.21.730](#) through [35.21.755](#) may apply for AHAH capital funds. These organizations include nonprofit community organizations or neighborhood-based organizations, federally recognized Indian tribes, regional or statewide nonprofit housing assistance organizations, local counties and cities, public housing authorities and public development authorities.

### Eligible project types

The capital program established under [RCW 43.330.187](#) and appropriated by the Legislature



- The extent the application conveys a commitment to a PSH Philosophy and Program Model, and the organization’s understanding of, and commitment to incorporating FCS into its service model.
- The applicant’s commitment to the principles of Substance Abuse Mental Health Service Administration (SAMHSA) PSH Evidence Based Practices (EBP);
- The applicant’s familiarity to the CSH Dimensions of Quality Supportive Housing guidance; and
- The degree to which the applicant incorporates the voice of people with lived experience into program design and operations;

#### **Demonstrated Partnerships**

4.5 Projects pursuing AHAH funds are encouraged to demonstrate partnerships between healthcare providers, behavioral health service providers, and long-term care services. Providing space within the building for these ancillary services brings much needed services to individuals who may not otherwise seek health care or behavioral health treatment.

### **5 TBRA/PBRA TPA Eligible Activities and Costs**

The primary activity of the tenant-based rent assistance (TBRA)/project-based rent assistance (PBRA) third party administrator (TPA) is payment of a permanent housing rent subsidy to a private for-profit landlord or non-profit landlord or property manager on behalf of an eligible household. A comprehensive guide of eligible activities and costs to support the primary activity is found below.

5.1

#### **Administration and operating costs**

Allowable administrative and operating costs for the TBRA/PBRA TPA are up to 10 percent of total contracted budget for administration and operating costs.

Administrative costs may include the same types of expenses that are listed in program operations (such as IT staff and office supplies), in the case that these costs are benefiting the agency as a whole and are not attributed to a particular program, they are considered administrative. Administrative costs may include, but are not limited to, the following:

- ✓ Executive director salary and benefits.
- ✓ General organization insurance.
- ✓ Organization wide audits.
- ✓ Board expenses.
- ✓ Organization-wide membership fees and dues.
- ✓ General agency facilities costs (including those associated with executive positions) such as rent, depreciation expenses, and operations and maintenance.

All amounts billed to administration must be supported by actual costs, or portions of actual costs. These costs must be charged to grant cost centers by one of the following three methods:

- ✓ Billed directly such as IT services that are billed by the hour.
- ✓ Shared costs that are allocated directly by means of a cost allocation plan.
- ✓ Costs related to executive personnel such that a direct relationship between the cost and the benefit cannot be established must be charged indirectly by use of an indirect cost rate which has been appropriately negotiated with an approved cognizant agency or by use of the 10 percent de-minimus rate.

Operations expenses are directly attributable to a particular program and include:

- ✓ Salaries and benefits for staff costs directly attributable to the program, including but not limited to program staff, information technology (IT) staff, human resources (HR) staff, bookkeeping staff, and accounting staff.
- ✓ Office space, utilities, supplies, equipment (up to \$1,500 per grant period unless approved in advance by Commerce), telephone, internet, and training/conferences/travel and per diem.
- ✓ Data collection and entry.
- ✓ Housing search and placement.
- ✓ Eligibility determination and recertification activities.

#### Reimbursement Back-up Documentation

5.1.1.1 Requests for reimbursement must be accompanied by the [AHAH/PSH TPA Monthly Voucher Detail Report](#) attached to the online invoice. Source documentation such as cancelled checks, purchase orders, or time sheets are not required.

Commerce may require the TPBRA/PBRA TPA to submit additional documentation as needed to approve reimbursement.

5.1.2

#### Regional Target Revisions

The TBRA/PBRA TPA will follow regional targets for rent assistance that align with the Commerce Snapshot report for homelessness across the state and by region. The Snapshot report combines client information from several state agency data systems in order to provide a comprehensive estimate of the homeless and unstably housed population in the state. The Snapshot reports are located on the [Commerce website](#) and are update twice a year. (January and July)

The regions will be aligned with the Health Care Authority Managed Care and Behavioral Health regional maps. The Integrated Managed Care and Behavioral Health Administrative Service Organization maps are located [here](#).

5.1.3

The TBRA/PBRA TPA may move 10 percent of the total between regions as necessary as long as long-term rent assistance for AHAH eligible enrolled participants are covered in the region.

#### Ineligible Use of Funds

The TBRA/PBRA TPA and/or the Coordinating Entity must inform Commerce if AHAH rent assistance funds are spent on ineligible households or expenses. Reasonable attempts must be made to prevent ineligible use of funds.

Individuals who lose their FCS-SH eligibility due to Medicaid termination or suspension will not be considered as ineligible so long as they were eligible at time of enrollment in AHAH.

### Housing Costs

Eligible housing costs must be paid directly to a third party on behalf of the household. Rent payments may not be made directly to the eligible household. Please note, AHAH/PSH unit expects that, when other short-term subsidies are available for emergency housing, securing housing costs, and move-in costs, that these subsidies are encouraged to be used before TBRA/PBRA funds. These programs may include but are not limited to TAP, HARPS or any other transition rent or bridge rent assistance programs.

### Collaboration with other bridge housing rent assistance programs

The **FCS Transition Assistance Program (TAP)** is a program designed to support Foundational Community Supports Supportive Housing (FCS-SH) enrollees. It is a time-limited, flexible funding assistance that covers housing-related fees, including short-term rents, move-in costs, and non-refundable fees. TAP aligns with the Community Behavioral Health Rental Assistance program (CBRA), Section 8 (project-based and Housing Choice Voucher), and other longer-term rental assistance programs such as the AHAH TBRA/PBRA program.

The TAP program is administered by the Coordinating Entity and can be used as housing transition costs associated with emergency housing, securing housing and move-in costs. The TBRA/PBRA funds shall not duplicate these costs but shall leverage these resources in order to extend the longevity of the person in PSH.

**Housing and Recovery through Peer Services (HARPS)** The HARPS program is administered by HCA and subcontracted through regional behavioral health administrative service organizations. The HARPS Program provides short-term, bridge subsidies to assist individuals with costs associated with housing such as application fees, deposits, first/last month's rent etc. Certified peer counselors provide the services to help individuals transition from inpatient or institutional settings and who are at risk of homelessness. The HARPS program may braid or weave their resources with FCS-SH.

### Securing Housing

Costs for securing permanent housing including: application fees, background check fees, credit check fees, and other related costs for securing permanent housing so long as the TAP or other transitional/bridge program is not covering these costs.

### Move-In Costs

- ✓ Security deposits for households moving into new units so long as the TAP or other transition program is not covering these costs.
- ✓ Utility deposits for a household moving into a new unit so long as the TAP or other transition program is not covering these costs.
- ✓ First and Last Months' Rent so long as the TAP or other transition program is not

covering these costs.

#### **Rent and Associated Costs**

- 5.2.4 ✓ Monthly rent. Rent may only be paid one month at a time, although rental arrears, pro-rated rent, and last month's rent may be included with the first month's payment.
- ✓ Master-lease: security deposit and monthly rent is allowable when an organization master-leases a unit, and then sub-leases it to AHAH-eligible households. Tenants must have a sublease with the master lease holder.
- ✓ Utilities which are included in rent.
- ✓ Renter's insurance
- ✓ Costs of parking spaces when connected to a unit.

#### **Other Housing Costs**

- 5.2.5 ✓ Utility payments for households also receiving rental assistance.
- ✓ Other costs as approved by Commerce.

#### **Special Circumstances**

- 5.2.6 ✓ Temporary absence: if a household must be temporarily away from the unit, but is expected to return (such as temporary incarceration, hospitalization, or residential treatment), grantees may pay for the household's rent for up to 60 days and charge the grant for eligible costs. Any temporary absence must be documented in the client file. Extensions to the 60 day limit must be approved by Commerce.

5.3

#### **Ineligible Expenses**

- ☒ Cable television deposits or services.
- ☒ Mortgage assistance and utility assistance for homeowners.
- ☒ Security and janitorial (salaries and benefits associated with providing security, janitorial services).
- ☒ Essential facility equipment and supplies (e.g. common-use toiletries, food served in shelters, bedding, mats, cots, towels, microwave, etc.)
- ☒ Expendable transportation costs directly related to the transportation of eligible households (bus tokens and fuel for a shelter van).
- ☒ On-site and off-site management costs related to the building.
- ☒ Facility-specific insurance and accounting.
- ☒ Replacement or operating reserves.
- ☒ Debt service.
- ☒ Construction or rehabilitation of facilities.
- ☒ Mortgage payment for a facility.

## TBRA/PBRA TPA Requirements

### Lease or Rental Agreements

5.4 A lease or rental agreement between the eligible household and the landlord must be executed at the time of payment of rental assistance. Leases or rental agreements must contain standard lease provisions as shown in [5.3.2.1 Lease or Rental Agreement](#).

5.4.1 The lease or rental agreement and any subsequent leases or rental agreements must be kept in the client file.

### Lease or Rental Agreement Requirements

At a minimum, the lease or rental agreement between the landlord and the eligible household must contain the following:

5.4.1.1

- ✓ Name of tenant
- ✓ Name of landlord
- ✓ Address of rental property
- ✓ Occupancy (who gets to live at the rental)
- ✓ Term of agreement (lease start and end date)
- ✓ Rent rate and date due
- ✓ Deposits (if any and what for/term)
- ✓ Signature of tenant/date
- ✓ Signature of landlord/date

5.4.2

### Master Leasing

FCS-SH service providers can utilize master leasing when providing PSH for a participant. Master leasing is when an organization secures a lease directly with a landlord and then sub-leases the unit to an AHAH eligible household. The master-lease holder must have a sub-lease with the AHAH eligible household to provide the subsidy and coordinate with

5.4.3 the TBRA/PBRA TPA to secure rent assistance prior to lease up.

### Project-based rent assistance

5.4.4 The TBRA/PBRA TPA may work with non-profit housing owners/operators/developers for project-based rent assistance vouchers which are attached to units developed through public funds.

### Determining Rent Limit

5.4.5 The TBRA/PBRA TPA may pay rent amounts up to 130 percent of [HUD's Fair Market Rent](#) (FMR). The rent limit is the maximum rent that can be paid for a unit of a given size. Rent calculations must include the cost of utilities as detailed on utility allowance schedules established by [the local Housing Authority](#).

Payment of rents in excess of 130 percent of FMR requires prior approval by Commerce.

### Determining Rent Subsidy

Consistent with [HUD housing affordability standards](#), each household is responsible for



contributing no more than 30 percent of their income to the cost of their housing<sup>1</sup>. Documentation of subsidy amount and subsidy determination process must be included in the client file.

If the household share creates a burden for the household, the household share may be waived or reduced, at the discretion of the grantee. The circumstances of the waiver must be documented in the client file.

The TBRA/PBRA TPA must review and adjust household rent subsidy amount annually. Documentation of new subsidy determination process and subsidy amount must be included in the client file.

### Habitability

5.4.6 The TBRA/PBRA TPA is responsible for documenting habitability for all housing units into which AHAH eligible households will be moving into, except where a household moves in with friends or family. Housing units must be documented as habitable prior to paying the rent subsidy and following a habitability complaint made by the tenant or a third party. FCS-SH service providers may be able to provide habitability documentation through their community support services.

### Allowable Methods for Unit Habitability Determination

5.4.6.1 Habitability can be documented by the Landlord Habitability Standards Certification Form or inspection. If the housing unit is provided to a different household within 12 months of documented habitability, an additional certification/inspection is not required. One of the following methods must be applied to each subsidized unit:

- The AHAH Landlord Habitability Standards Certification Form references the state Landlord Tenant Act ([RCW 59.18.060](#)) and requires the landlord (as defined in [RCW 59.18.030](#)) to certify that the unit meets the safety and habitability standards detailed in the law. The landlord's failure to comply with the law may result in termination of the rent subsidy.

OR

- Inspections: in lieu of (or in addition to) the above landlord certification, grantees may choose to inspect all or some housing units. Grantees may use the [Commerce Housing Habitability Standards \(HHS\)](#) form or the HUD [Housing Quality Standards \(HQS\) Inspection](#) form.
- 5.4.6.2

Documentation of habitability certification or inspection must be kept in the client file.

### Habitability Recertification

The TBRA/PBRA TPA must document recertification of habitability upon complaint of the habitability condition of the unit by the tenant or a third party. (See [5.3.6.1](#)

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<sup>1</sup>Cost of housing is equal to the tenant's share of the rent plus utilities including electricity, natural gas, propane (if needed for cooking or laundry), water, sewer, and garbage services the tenant must pay.

[Allowable Methods for Unit Habitability Determination](#)). Documentation of habitability recertification must be kept in the client file.

### Habitability Complaint Procedure

Each household must be informed in writing of the habitability complaint process and assured that complaints regarding their housing unit's safety and habitability will not affect the household's program eligibility.

5.4.6.3 Each landlord must be informed in writing of the habitability complaint process and that subsidy payments to landlords may be terminated if landlords fail to resolve habitability issues according to the Washington State Landlord-Tenant Act ([RCW 59.18](#)).

The TBRA/PBRA TPA must have a written procedure describing the response to complaints regarding unit safety and habitability. The procedure must include:

- Mandatory inspection when a complaint is reported using the HHS Form, HQS Inspection Form, or documenting the specific complaint in an alternate format that includes follow-up and resolution.
  - HQS: <https://www.hca.wa.gov/assets/billers-and-providers/foundational-community-supports-housing-quality-standard-checklist.pdf>
  - HHS: <https://www.hca.wa.gov/assets/billers-and-providers/foundational-community-supports-housing-habitability-standards-form.pdf>
- Actions that will be taken to ensure habitability is restored and steps that may lead to termination of payment to a landlord if they fail to restore habitability according to the [Washington Landlord-Tenant Act \(RCW 59.18\)](#).

5.4.7

### Lead Based Paint Assessment

The TBRA/PBRA TPA must ensure that a lead-based paint visual assessment is completed prior to payment of a permanent housing subsidy if a child under the age of six or pregnant woman resides in a unit constructed prior to 1978.

To prevent lead poisoning in young children, grantees must comply with the Lead-Based Paint Poisoning Prevention Act of 1973 and its applicable regulations found at [24 CFR 35, Parts A, B, M, and R](#).

A visual assessment must be conducted upon request from the tenant. Visual assessments must be conducted by a [HUD-Certified Visual Assessor](#) and must be documented on the

5.4.7.1 HQS Inspection Form or HHS Form and maintained in the client file.

For a guide to compliance see [Appendix C: Lead-Based Paint Visual Assessment Requirements](#).

### Exceptions to the Lead-Based Paint Visual Assessment Requirement

Visual assessments are not required under the following circumstances:

- Zero-bedroom or SRO-sized units;
- X-ray or laboratory testing of all painted surfaces by certified personnel has been

conducted in accordance with HUD regulations and the unit is officially certified to not contain lead-based paint;

- The property has had all lead-based paint identified and removed in accordance with HUD regulations;
- The unit has already undergone a visual assessment within the past 12 months – obtained documentation that a visual assessment has been conducted; or
- It meets any of the other exemptions described in 24 CFR Part 35.115(a).

If any of the circumstances outlined above are met, grantees must include the information in the client file.

### Washington Residential Landlord-Tenant Act

5.4.8 Washington State’s Landlord Mitigation Law ([RCW 43.31.605](#)) became effective on June 7, 2018 to provide landlords with an incentive and added security to work with tenants receiving rental assistance. The program offers up to \$1,000 to the landlord in reimbursement for some potentially required move-in upgrades, up to fourteen days’ rent loss and up to \$5,000 in qualifying damages caused by a tenant during tenancy. A move in/move out condition report is required for a landlord to receive reimbursement.

For more information, please visit the Commerce Landlord Mitigation Program [website](#)

The TBRA/PBRA TPA must provide information on the Washington Residential Landlord Tenant Act ([RCW 59.18](#)) to households receiving rent assistance. This can be completed in coordination with the FCS-SH Service Provider.

For more information on this law, visit Washington Law Help, housing page, tenant rights at [www.washingtonlawhelp.com](http://www.washingtonlawhelp.com).

## 6 Requirements for AHAH Capital and TPA Programs

- ✓ Individuals must be enrolled in FCS-SH at entry into rent assistance or dedicated AHAH housing units funded by AHAH resources
- ✓ Participate in real time availability of units/resources (use platform). Enter data into or work with Housing TA staff to enter unit profile into platform
- ✓ Documentation of disabling condition on site (confidential records)
- ✓ Document to AHAH Coordinating Entity when they turn down people referred to the AHAH dedicated unit funded through AHAH capital program
- ✓ If project is funded completely by AHAH capital funds, the project can’t have policies that discriminate people based on conviction history
- ✓ FCS-SH will provide the supportive housing services to individuals determined eligible for AHAH. This can be through a partnership or a housing owner/operator that is also an FCS-SH service contracted organization. Partnerships between Housing Providers and FCS-SH Providers are encouraged (not mandatory to become FCS-SH Provider)
- ✓ Align PSH services, rent assistance and housing units with the principles of PSH

- through the SAMHSA continuous quality improvement fidelity review process.
- ✓ Ensure referral/access to Social Determinants of Health such as transportation, nutrition and income assistance (SDOH) (particularly Supported employment) is in place

### **Referrals and collaboration with HCA’s Coordinating Entity**

6.1 The Coordinating Entity described in the legislation is responsible for seamless integration between the FCS-SH service organizations who are providing community support services with stable housing. The Coordinating Entity will verify that a person has met the eligibility criteria and ensure the individual is receiving supportive housing services from the FCS-SH contracted provider. The Coordinating Entity captures the housing assessment that defines the person’s strengths, environmental conditions, housing preferences and support needs. This assessment determines the pathway for the ‘prescription of housing’ to be filled. The assessment identifies the individual’s preferences for scattered site housing, project based housing, and master leased housing which will be used as the basis for matching the individual to the real time inventory of resources.

Individuals must be enrolled and authorized to receive community support services at entry into any AHAH resources such as TBRA/PBRA or housing units.

### **Platform**

6.2 Commerce will be creating a data ‘platform’ for housing owner/operator/developer that access AHAH capital funds as well as the TBRA/PBRA TPA to enter real-time availability of units or resources. Currently the intent is to only include the AHAH specific units that are developed under the resources associated with the AHAH initiative in the platform.

6.2.1

#### **Participation in real-time inventory availability for AHAH/PSH eligible individuals**

6.2.2 Housing owner/operator/developers receiving AHAH capital for dedicated units will be required to submit a profile of their PSH units in the ‘platform’ and provide real-time availability of units. The TBRA/PBRA TPA will also provide real-time availability of rent assistance availability by region. This platform will be accessed by the AHAH Coordinating Entity to match FCS-SH eligible individuals with housing resources. This platform will also inform the public by reporting dashboard requirements associated with the initiative.

#### **Public Facing Dashboard**

The platform will generate data that will be used for a public-facing dashboard. As required by the bill, key program outcomes include:

- The number of people served by the program and
- The number of housing units created by the office
- The TPA and the Housing units must report on:
  - The number of individuals referred to housing
  - The type of housing
  - The number of referrals received
  - Referrals accepted

- Move-in date
- Exit date

## Evaluation

### Overview

6.3 Fidelity to the principles of evidence-based practice PSH model and performance measures help evaluate the effectiveness of the AHAH program. The current contract period will serve to gather baseline data to inform the development of performance improvement requirements.

6.3.1

The Department of Commerce (Commerce) has contracted with Department of Social and Health Services (DSHS) Research and Data Analysis (RDA) division to conduct an evaluation of most critical performance measures for AHAH. RDA will collect racially disaggregated administrative data from the HCA and Commerce related to the program's effect on providing persons with PSH, moving people into independent housing, long-term housing stability, improving health outcomes for people in the program, and outcomes related to social determinants of health (SDOH). Additional evaluative measurements will analyze outcomes related to individuals enrolled in the AHAH program include:

- ✓ Individuals who are chronically homeless
- ✓ Individuals exiting state psychiatric hospitals and community psychiatric inpatient beds.
- ✓ The increase in percent of exits to or retention of permanent housing

6.3.2

### Housing Outcomes

AHAH must improve housing outcomes by increasing access to or retention of permanent housing.

- The number of housing units created by the office
- The TPA and the Housing units must report on:
  - The number of individuals referred to housing
  - The type of housing
  - The number of referrals received
- Referrals accepted
- Move-in date

6.4

### Disability Documentation

The AHAH Coordinating Entity will provide verification and documentation of the disability prior to program entry. Individuals eligible for the AHAH resources must be enrolled in FCS-SH at entry, the Coordinating Entity is determining the medical necessity and risk factors associated with eligibility. This documentation will be provided to the TBRA/PBRA TPA and/or the Housing Owner/Operator for documentation requirements.

Diagnostic information will not be provided unless consented by the individual.

## **Voluntary Services**

PSH projects and TBRA/PBRA rent assistance funded by AHAH must not terminate or deny services to households based on a household's refusal to participate in supportive services. Supportive services are intensive services aimed at helping a person obtain and maintain housing. Supportive Housing providers work in partnership with various community entities to provide wrap around support, such as mental health services, alcohol and substance abuse services, long term care services, life skills or independent living skills services and vocational services.

In the event the individual loses Medicaid and the authorization for FCS-SH is denied, the TBRA/PBRA rent assistance will not be terminated. Nor can the person be evicted from the PSH units funded by AHAH capital funding solely for losing their Medicaid eligibility or FCS services. All efforts will be made to engage the individual in resolving Medicaid eligibility.

## **Data Collection**

6.6 The AHAH capital funded housing projects will submit aggregate client level data into the WBARS system and a system to be developed/defined by the AHAH unit, in accordance with data entry and quality guidelines as issued by the Department of Commerce.

The TBRA/PBRA TPA will collect client level information and submit into a system to be developed/defined by the AHAH unit, in accordance with data entry and quality guidelines as issued by the Department of Commerce.

### **6.6.1 Data Quality**

Data quality is reviewed quarterly and will be monitored annually. AHAH housing units and the TBRA/PBRA TPA are required to provide quality data to the best of their ability.

## **Declining AHAH/PSH eligible individuals**

6.8 All efforts will be made to match the individual with the housing project. A comprehensive description of the units and screening requirements will be entered into the platform in an effort to reduce declining AHAH eligible participants. Housing projects developed with AHAH capital funds will provide documentation to the coordinating entity when they turn down people referred to the unit including the reason why the person is being declined. Housing projects solely funded by AHAH cannot have policies that discriminate against people with criminal conviction histories.

## **Coordination between FCS-SH service provider and TBRA/PBRA TPA and Housing Operator**

Community Support Services (CSS) provided under the FCS-SH program are intended to ensure successful community living through the utilization of skills training, cueing, modeling and supervision as identified by the person-centered assessment. These services may include any of the following:

- Coaching
- Advocacy

- Information and referral
- Linking and coordinating
- Ongoing supports

CSS is intended to help individuals maximize independence in community-integrated housing. A comprehensive list of pre-tenancy and tenancy sustaining services is available within the [FCS provider manual](#).

The FCS-SH service provider will create a person-centered plan based on the individual’s goals, objectives and timelines. The FCS-SH service provider is expected to coordinate with the landlord, housing operator, TBRA/PBRA TPA on behalf of the individual (if authorized and appropriate) detailing accommodations needed, and addressing components of emergency procedures involving the landlord and/or property manager.

### **Discharge Planning Participation**

- 6.8.1 FCS-SH contracted providers are encouraged to partner with discharge planning staff and participate in discharge planning efforts in partnership with state psychiatric hospitals and community-based psychiatric or substance use inpatient treatment facilities to ensure priority populations are being transitioned from institutional settings. The Centers for Medicare and Medicaid approved FCS-SH service provision within these settings 30 days prior to discharge.

## **6.9 Additional Requirements**

### **6.9.1 Grievance Procedure**

The TBRA/PBRA TPA must have a written grievance procedure for households seeking or receiving subsidies which includes the household’s right to review decisions and present concerns to program staff not involved in the grievance.

This procedure must:

- 6.9.2
- ✓ Clearly describe how households can request a review or report concerns.
  - ✓ Be accessible to all households seeking or receiving subsidies

### **Termination and Denial of Service Policy**

The TBRA/PBRA TPA and Housing operators funded with AHAH capital funds must have a termination and denial policy.

This policy must:

- ✓ Describe the reasons a household would be denied subsidies and/or terminated from the unit.
- ✓ Describe the notification process.
- ✓ Ensure households are made aware of the grievance procedure.

## Records Maintenance and Destruction

The TBRA/PBRA TPA and Housing operators funded with AHAH capital funds must maintain records relating to this grant for a period of six years following the date of final payment.

### 6.9.3 Prohibitions

6.9.3

- ✓ The FCS-SH service provider, TBRA/PBRA TPA and Housing operators funded with AHAH capital funds may not require households to participate in a religious service as a condition of receiving program assistance.

6.9.4

- ✓ If a program serves households with children, the age of a minor child cannot be used as a basis for denying any household's admission to the program.
- ✓ If a program serves households with children, the program must serve all family compositions.

### Nondiscrimination

6.9.5 All FCS-SH service providers, TBRA/PBRA TPA and Housing operators funded with AHAH capital funds must comply with all federal, state, and local nondiscrimination laws, regulations and policies.

FCS-SH service providers, TBRA/PBRA TPA and Housing operators funded with AHAH capital funds must comply with the Washington State Law against Discrimination, [RCW 49.60](#), as it now reads or as it may be amended. [RCW 49.60](#) currently prohibits discrimination or unfair practices because of race, creed, color, national origin, families with children, sex, marital status, sexual orientation, age, honorably discharged veteran or military status, or the presence of any sensory, mental, or physical disability or the use of a trained guide dog or service animal by a person with a disability.

FCS-SH service providers, TBRA/PBRA TPA and Housing operators funded with AHAH capital funds must comply with the [Federal Fair Housing Act](#) and its amendments as it now reads or as it may be amended. The Fair Housing Act currently prohibits discrimination because of race, color, national origin, religion, sex, disability or family status. The Fair Housing Act prohibits enforcing a neutral rule or policy that has a disproportionately adverse effect on a protected class.

Local nondiscrimination laws may include additional protected classes.

7.1

## 7 Appendixes

### Appendix A: TPA Required Policies and Procedures

#### Policies and Procedures



- ✓ Habitability Complaint Procedure ([section 5.4.6](#))
- ✓ Grievance Procedure (section [6.8.1](#))
- ✓ Termination or Denial of Service Policy ([section 6.8.2](#))
- ✓ Nondiscrimination ([section 6.8.5](#))

## Appendix B: Client File Information and Documentation

The following chart summarizes the information and documentation required in each client file. Other documentation may be required based on individual circumstances.

7.2

Forms marked with an asterisk (\*) indicate a specific form required by AHAH to meet the documentation requirement. Required forms may be modified as long as all content is included.

Up-to-date versions of all required and recommended forms can be found on the Commerce Permanent Housing Subsidy [webpage](#).

Required Documentation	
✓	<a href="#">*AHAH TBRA/PBRA Client File Checklist</a>
✓	<a href="#">*AHAH Coordinating Entity referral form checklist</a> Form with applicable documentation attached (section <a href="#">3.2.2</a> )
✓	<a href="#">*AHAH Verification of Recertification</a> with applicable documentation attached, <i>as needed</i> (section <a href="#">3.3.1</a> )
✓	<a href="#">AHAH Income Eligibility Worksheet</a> , <i>as needed for recertification</i> (section <a href="#">3.3.1</a> )
✓	<a href="#">*Landlord Habitability Certification</a> or <a href="#">*HHS</a> or <a href="#">*HQS</a> (section <a href="#">5.5</a> )
✓	Lead-based Paint Assessment, if applicable (section <a href="#">5.3.7</a> , <a href="#">Appendix F</a> )
✓	Executed Lease or Rental Agreement (section <a href="#">5.3.2</a> )
✓	Household Rent subsidy amount / Rent determination process (section <a href="#">5.3.4</a> )
Required Information	
✓	Dates and Circumstances of temporary absence to an institution (section <a href="#">4.3.6</a> )
Other Recommended Forms	
✓	Move in/Move out condition report (section <a href="#">5</a> )

## Appendix C: Lead-Based Paint Visual Assessment Requirements

To prevent lead-poisoning in young children, the rent assistance received from the TBRA/PBRA TPA must comply with the Lead-Based Paint Poisoning Prevention Act of 1973 and its applicable regulations found at [24 CFR 35](#), Parts A, B, M, and R. FCS-SH providers can assist in obtaining this information in collaboration with the TBRA/PBRA TPA.

### 7.3 Disclosure Requirements

For ALL properties constructed prior to 1978, landlords must provide tenants with:

- ✓ Disclosure form for rental properties disclosing the presence of known and unknown lead-based paint;
- ✓ A copy of the “Protect Your Family from Lead in the Home” pamphlet.

Both the disclosure form and pamphlet are available at: <https://www.epa.gov/lead/real-estate-disclosure>

It is recommended that rent assistance providers also share this information with their clients.

#### Determining the Age of the Unit

Grantees should use formal public records, such as tax assessment records, to establish the age of a unit. These records are typically maintained by the state or county and will include the year built or age of the property. To find online, search for your county name with one of the following phrases:

- ✓ “property tax records”
- ✓ “property tax database”
- ✓ “real property sales”

#### Conducting a Visual Assessment

Visual assessments are required when:

- ✓ The leased property was constructed before 1978;  
*AND*
- ✓ A child under the age of six or a pregnant woman will be living in the unit occupied by the household receiving AHAH rent assistance.

A visual assessment must be conducted prior to providing AHAH rent assistance to the unit and on an annual basis thereafter (as long as assistance is provided). Grantees may choose to have their program staff complete the visual assessments or they may procure services from a contractor. Visual assessments must be conducted by a HUD-Certified Visual Assessor.

Anyone may become a HUD-Certified Visual Assessor by successfully completing a 20-minute online training on HUD’s website at:

<http://www.hud.gov/offices/lead/training/visualassessment/h00101.htm>

If a visual assessment reveals problems with paint surfaces, Grantees cannot approve the unit for AHAH assistance until the deteriorating paint has been repaired. Grantees may wait until the repairs are completed or work with the household to locate a different (lead-safe)

unit.

### **Locating a Certified Lead Professional and Further Training**

To locate a certified lead professional in your area:

- ✓ Call your state government (health department, lead poison prevention program, or housing authority).
- ✓ Call the National Lead Information Center at 1-800-424-LEAD (5323).
- ✓ Go to the US Environmental Protection Agency website at <https://www.epa.gov/leadand> and click on "Find a Lead-Safe Certified Firm."
- ✓ Go to Washington State Department of Commerce Lead-Based Paint Program website at <http://www.commerce.wa.gov/building-infrastructure/housing/lead-based-paint/lead-based-paint-program-lbpabatement/> and click on "Find a Certified LBP Firm" under Other Resources.

Information on lead-based programs in Washington State can be found at

[http://www.commerce.wa.gov/building-infrastructure/housing/lead-based-paint/.](http://www.commerce.wa.gov/building-infrastructure/housing/lead-based-paint/)

For more information on the Federal training and certification program for lead professionals, contact the National Lead Information Center (NLIC) at

<https://www.epa.gov/lead/forms/lead-hotline-national-lead-information-center> or 1-800-424-LEAD to speak with an information specialist.

The Lead Safe Housing Rule as well as a HUD training module can be accessed at

[http://portal.hud.gov/hudportal/HUD?src=/program\\_offices/healthy\\_homes/enforcement/lshr](http://portal.hud.gov/hudportal/HUD?src=/program_offices/healthy_homes/enforcement/lshr)

## Appendix D: Income Verification

The Coordinating Entity and FCS-SH service providers must attempt to document income using the preferred documentation method for submission to the TBRA/PBRA TPA or housing units funded by AHAH capital. However, for some types of income, a written or verbal statement from a third party or self-attestation are allowable as long as all attempts to collect the preferred documentation have been exhausted. Please note the following guidance when using one of these methods.

**Written Statement:** Types of income for which written verification is allowable are indicated in the table below with an **X** in the box marked “Written Verification.” A written statement must be from a third party responsible for documenting this type of income information (example: wages and salaries could be documented by a written statement from an employer). The statement should also include the following:

- ✓ Date of statement,
- ✓ Name of client,
- ✓ Name of company or organization,
- ✓ Name of individual writing the statement,
- ✓ Wages or income amount,
- ✓ Hour worked per week (if applicable)
- ✓ Signature.

**Verbal Statement:** Types of income for which verbal verification is allowable are indicated in the table below with an **X** in the box marked “Verbal Verification.” A verbal statement must be collected from a third party responsible for documenting this type of income information (example: TANF/Public assistance could be collected via verbal statement from DSHS). A verbal statement must be documented by a written attestation from a case manager or staff person responsible for collecting the statement. The staff person should record the following:

- ✓ Date of statement,
- ✓ Name of client,
- ✓ Name of company or organization,
- ✓ Name of individual writing the statement,
- ✓ Wages or income amount,
- ✓ Hour worked per week (if applicable)
- ✓ Signature.

**Self-Attestation:** Types of income for which self-attestation is allowable are indicated in the table below with an **X** in the box named “Self-Attestation.” Self-attestation should be used only when all other attempts at collecting other forms of documentation have been exhausted. Self-attestation is documented as a signed and dated written statement by the client that includes:

- ✓ Sources of income
- ✓ Income amount
- ✓ Frequency of income

A case manager or staff person must also provide a written statement documenting attempts

to obtain other forms of verification and justification for using the self-attestation method.

Type of Income	Preferred Documentation	If preferred documentation is not available, the following are acceptable forms of documentation:		
		Written Verification	Verbal Verification	Self-Attestation
No Income		X	X	X
Wages and Salary Income	Copy of most recent pay stub(s).	X		X
Self-Employment and Business Income	Copy of most recent federal and state tax return, profit and loss report from applicant's accounting system, or bank statement.	X		X
Interest and Dividend Income	Copy of most recent interest or dividend income statement <b>OR</b> most recent federal and state tax return.	X		X
Pension/Retirement Income	Copy of most recent payment statement, benefit notice from Social Security, pension provider or other source.	X	X	X
Unemployment and Disability Income	Copy of most recent payment statement or benefit notice	X	X	
TANF/Public Assistance	Copy of most recent payment statement, benefit notice, or Department of Social and Health Services (DSHS) Benefits Verification System (BVS).	X	X	
Alimony, Child Support, Foster Care Payments	Copy of most recent payment statement, notices, or orders.	X	X	X
Armed Forces Income	Copy of pay stubs, payment statement, or other government issued statement indicating income amount.	X	X	X
Student Financial Aid	Copy of student financial assistance award letter or other educational institution issued statement indicating amounts.	X	X	