

PENNSYLVANIA HOUSING FINANCE AGENCY

Health and Housing Summit

April 15th, 2024



Josh Shapiro, Governor

Robin L. Wiessmann, Executive Director & CEO

www.phfa.org

Today's Agenda

- **8:30am – 9:30am** – Registration and Welcome
- **9:30am – 12:00pm** – Session 1: *Affordable Housing Finance and Development Basics for Healthcare Professionals*
- **12:15pm – 1:30pm** – Networking Lunch
- **1:45pm – 4:00pm** – Session 2: *Healthcare System Basics for Affordable Housing Professionals*
- **4:15pm – 4:30pm** – Closing Remarks

Session 2

Healthcare Systems Basics for Affordable Housing Professionals

Kevin Progar, Initiative Director, Center for Community Investment

Daria Devlin, Director of Social Impact, Hamot Health

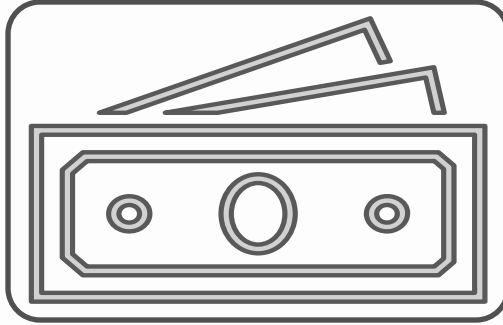
Kathleen Mullin, Director of Housing Initiatives, AmeriHealth Caritas

Panel Moderator: Patricia Hernandez, Director Metro Region, CSH

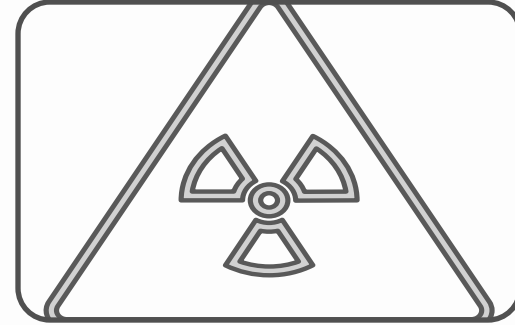
Housing as a Social Determinant of Health



Lack of
Housing



Lack of
Affordable
Housing



Poor
Housing
Conditions

Health as a Social Determinant of Housing

- Behavioral health
- Chronic medical conditions and disabilities
- Hospitalization and shelter
- Lack of medical accommodation in shelters
- Increased demand on families

What Can Healthcare Institutions Offer to Housing Developers?



Land at below-market rate



Support (financial or in-kind)



Influential support on policy or regulation

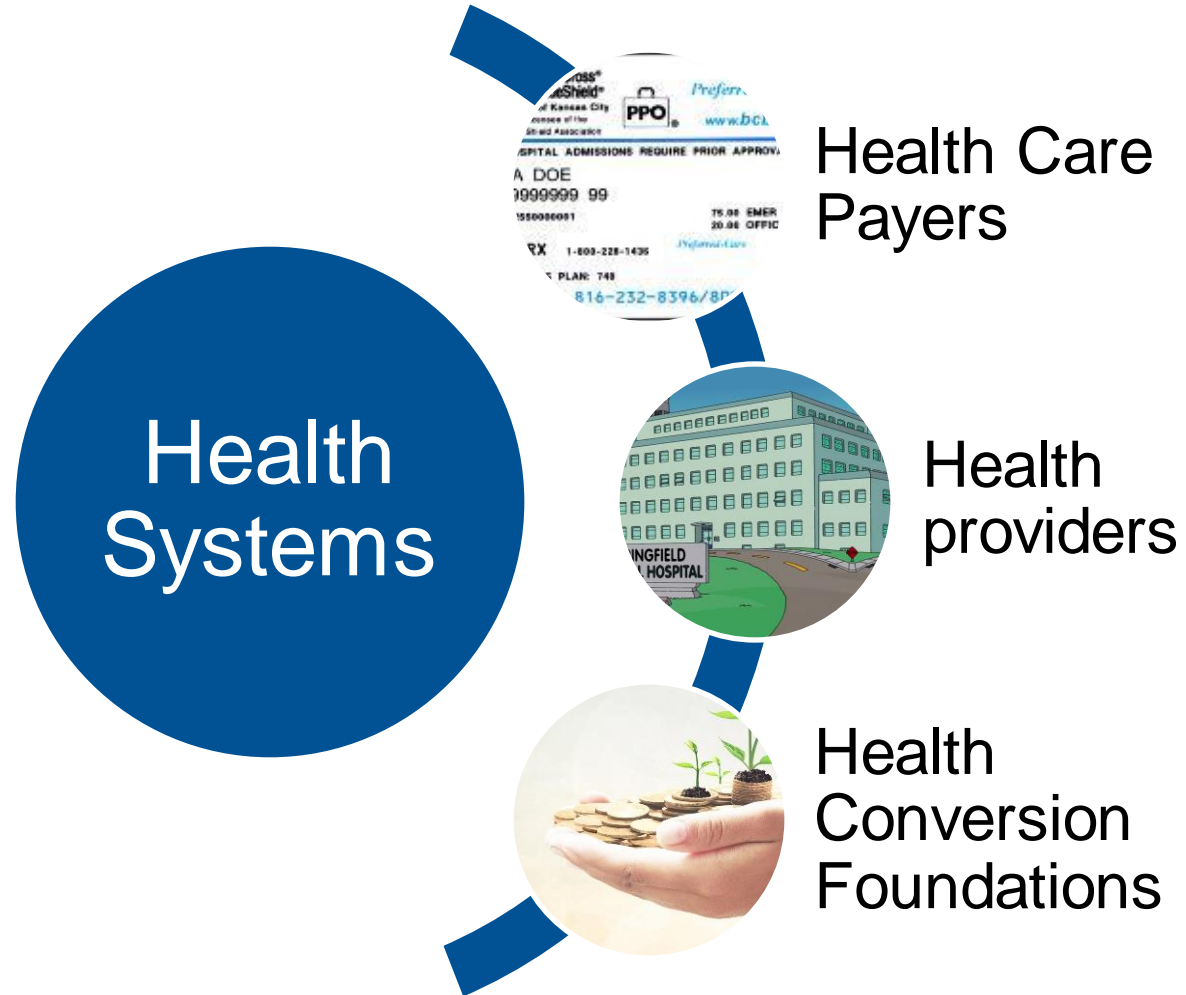


Data on local needs



Financing – predevelopment, equity, guarantee, loan capital

Who is in the Healthcare System?



Hospital Investment in Housing



Financial
Investment/Donation



Donating Underutilized
Hospital Assets



Hospital Community
Benefit

Managed Care Investment in Housing



Capital Investment of
Low-Income Tax
Credits



Pilot projects with
housing and
homeless sector
partners.



1115 Waivers - NOT
WITHOUT state
support FIRST



Value Based Payment
Arrangements



Funding
Subsidies/Subsidy
Pools to sustain
operating/affordability

Why invest in Housing?

Important Healthcare Metrics



Avoidable
Emergency Room
Visits



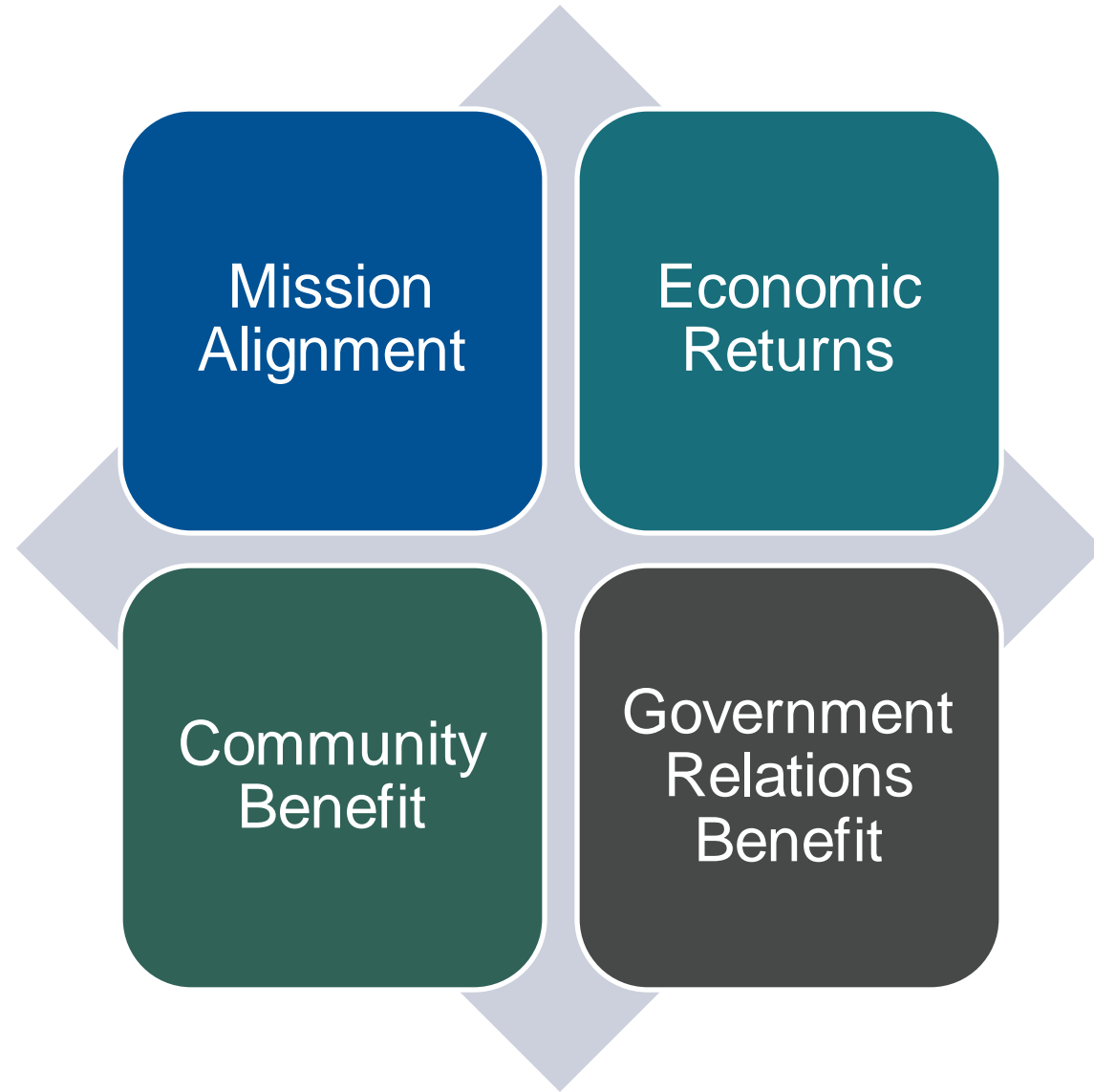
Inpatient
Readmissions



Length of Stay

Why invest in Housing?

ANCHOR Mission



Examples of Financial Investments

Loans

- The Boston Medical Center committed a \$600,000 zero-percent loan to support the development of a 60-unit affordable housing development in Roxbury

Equity

- The health plan UPMC for You made an equity investment of \$20 million of its reserves in a minority-owned real estate fund that invests in gentrifying neighborhoods

Guarantee

- Leveraging its balance sheet, Nationwide Children's Hospital provided a \$1.5 million guarantee to create a loan loss reserve

CASH DEPOSITS

- More than \$500,000 of Common Spirit's community investment allocation is invested in community credit unions.

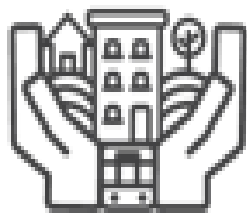
Session 2

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Investing in Community Health



Center for
Community
Investment



Housing and Health Summit

Healthcare Investment Basics

April 15, 2024 | Kevin Progar, Initiative Director



center for
community
investment

Health & Housing



- Adapted from **Health Impact Project** by Pew and RJWF
- <https://www.pewtrusts.org/en/projects/health-impact-project/about>

1. **QUALITY** | Housing that is safe, dry, clean, maintained, adequately ventilated, and free from pests and contaminants, such as lead, radon, and carbon monoxide, can reduce the incidence of negative health outcomes such as injuries, asthma, cancer, neurotoxicity, cardiovascular disease, and poor mental health.
2. **AFFORDABILITY** | Affordable housing enables people to pay for other basic needs such as utilities, food, and medical care, which can reduce the incidence of negative health outcomes such as malnutrition, diabetes, anxiety, and depression.
3. **COMMUNITY** | Neighborhoods free from segregation and concentrated poverty, and in which residents have close and supporting relationships with one another, can improve physical and mental health by reducing stress and exposure to violence and crime as well as improving school performance and civic engagement.
4. **LOCATION** | Easy access to public transportation, parks and recreation, quality schools, good jobs, healthy foods, and medical care can help reduce the incidence of chronic disease, injury, respiratory disease, mortality, and poor mental health.

Health & Housing (continued)

Claims analysis included data on 1,625 individuals across 145 participating study properties found:

1. Total Medicaid expenditures reduced by 12% (~\$1M annually or \$50 PMPM)
2. Primary care utilization increased and unplanned care decreased.
3. These improvements did not come at the of access or quality.
4. Connecting residents to health and social services can amplify benefits.



From CORE and Enterprise Report

<https://www.enterprisecommunity.org/sites/default/files/2021-06/Health%20in%20Housing%20Exploring%20the%20Intersection%20between%20Housing%20and%20Healthcare.pdf>



Health Equity



Means:

Reducing and ultimately eliminating disparities in health and its determinants that adversely affect excluded or marginalized groups. Everyone has a fair and just opportunity to be as healthy as possible.

To achieve health equity:

This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.

[What is Health Equity? A Definition and Discussion Guide - RWJF](#)

Place Matters to Health

Where people live, work, and play shapes their health, their access to opportunity, and their chances to thrive.





National Tools that Measure Health/Racial Disparities

- [Neighborhood Atlas - Home \(wisc.edu\)](https://www.wisc.edu/neighborhood-atlas/)
 - The Neighborhood Atlas website was created in order to freely share measures of neighborhood disadvantage with the public, including educational institutions, health systems, not-for-profit organizations, and government agencies
- [The CDC/ATSDR Social Vulnerability Index](https://www.cdc.gov/atcdr/social-vulnerability-index/)
 - Social vulnerability refers to the potential negative effects on communities caused by external stresses on human health. This tool uses 16 U.S. census variables to help local officials identify communities that may need support before, during, or after disasters.

Hospital Motivations for Investing in Social Determinants

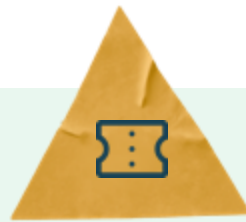
Mission	Reputation	Competitiveness & Compliance	Strategy	Financial Returns
<ul style="list-style-type: none">• Growing recognition that good health depends on many factors besides access to healthcare is leading health systems to intervene in the social, economic, and environmental conditions experienced by their patients, plan members, and neighbors.	<ul style="list-style-type: none">• Some hospitals and health systems seek recognition as innovators and field leaders.• Others Invest in projects that are prioritized by elected officials or the community helps hospitals build relational capital and goodwill.	<ul style="list-style-type: none">• Investing in neighborhoods near hospital facilities can help attract and retain both staff and patients• In some cases, it can help gain support from critical state regulators.	<ul style="list-style-type: none">• As tax-exempt institutions, non-profit hospitals have a legal obligation to serve their communities. Community Investments offer a way to multiple the impact of charitable requirements – and in doing so position themselves as Thought Leaders.	<ul style="list-style-type: none">• These investments can generate economic returns both directly, through interest payments, and indirectly, through savings resulting from fewer unnecessary hospitalizations and lower cost of care. In many markets, it can also help curb employee attrition.

When we talk about upstream community investment in the social determinants, we are not talking about:



MOVING HEALTHCARE OUTSIDE OF THE HEALTH INSTITUTION

Funding mammogram vans or offering health screenings at affordable housing developments may improve preventive care and improve health outcomes, but it is not community investment.



PROVIDING TRANSIT PASSES TO PATIENTS

This addresses the social needs of individuals but does not change the root causes of poor health for the community.



PAYING FOR HOUSING REFERRALS

This gets at the key connection between housing and health, but it is a program that must be paid for with grants, and it does not change the availability of housing in the community.

Hospitals and health systems have an array of assets that can be harnessed to create healthier communities.



**FINANCIAL
RESOURCES**



LAND



EXPERTISE



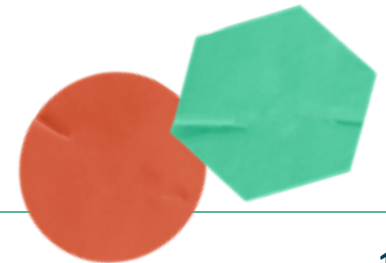
INFLUENCE

Detailed Look at Departments and Influence (1)

Department	Potential Contribution	Impact on Decisions
Mission	Understanding of history and traditions	Explain how investment fulfills the hospital's mission.
Community Health, Community Benefit	Knowledge and data about community needs; relationships with community organizations	Help understand pressing health needs, identify opportunities to intervene, prioritize investments.
Population Health	Strong business incentive to address these issues; often leading value-based clinical care and research initiatives	Make the case for allocating resources and undertaking new initiatives to address social determinants based on data.
Finance and Investment	Access to financial assets as part of an impact investment strategy that seeks both financial and social returns; understanding of how to assess potential risks and returns.	Inform decisions about the amount and type of capital available; help shape investments.

Detailed Look at Departments and Influence (2)

Department	Potential Contribution	Impact on Decisions
Facilities/Real Estate	Land and buildings owned by the health care organization, knowledge of the real estate market	Identify underutilized property; inform development strategy.
Foundation	Donor relations; connections to other foundations; program-related investments from the endowment; grants	Attract donors who might co-invest alongside your hospital.
Government Relations	Political capital and relationships; understanding of the priorities of local elected officials	Advocate for public policies that foster investments in community health.

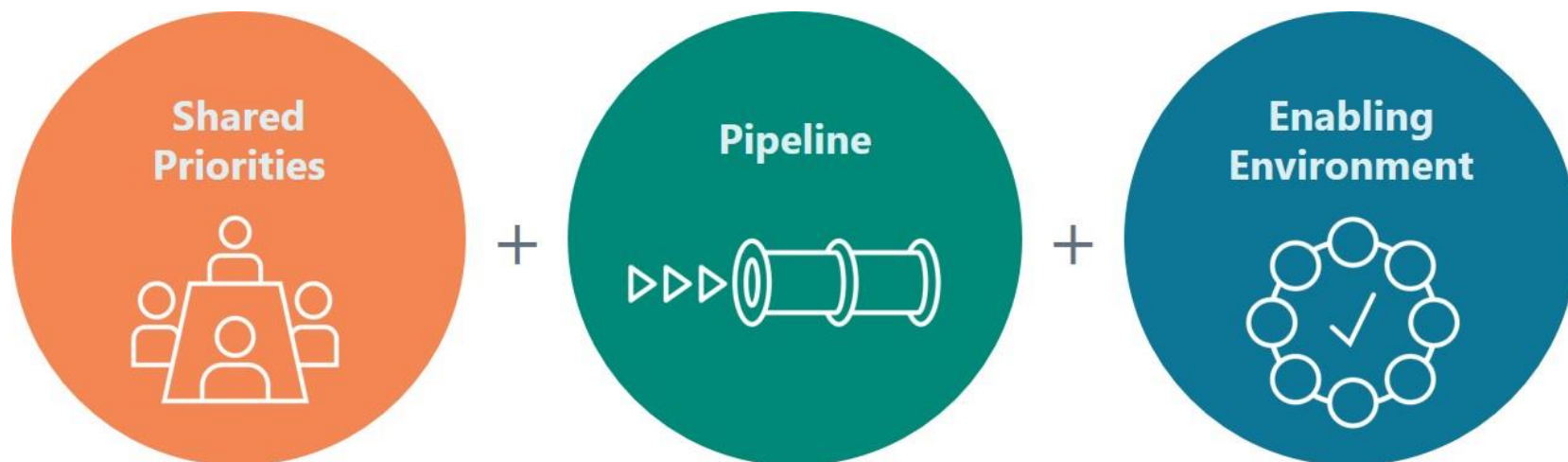


Program Examples for Different Populations and Health Players



1. [Healthy Beginnings at Home](#)
 - *Housing and Supports for Expecting/New Moms*
2. [Permanent Supportive Housing](#)
 - *Addressing the Needs of Individuals with Serious Mental Illness*
3. [Home Repair and Coaching](#)
 - *For Kids with Asthma Triggers in Home*
4. [Support and Services at Home](#)
 - *Positive Impacts of Providing Care to Seniors Where They Live*
5. [Medical Legal Partnerships](#)
 - *Another Way to Meet Health Related Social Needs*

Elements of the Capital Absorption Framework



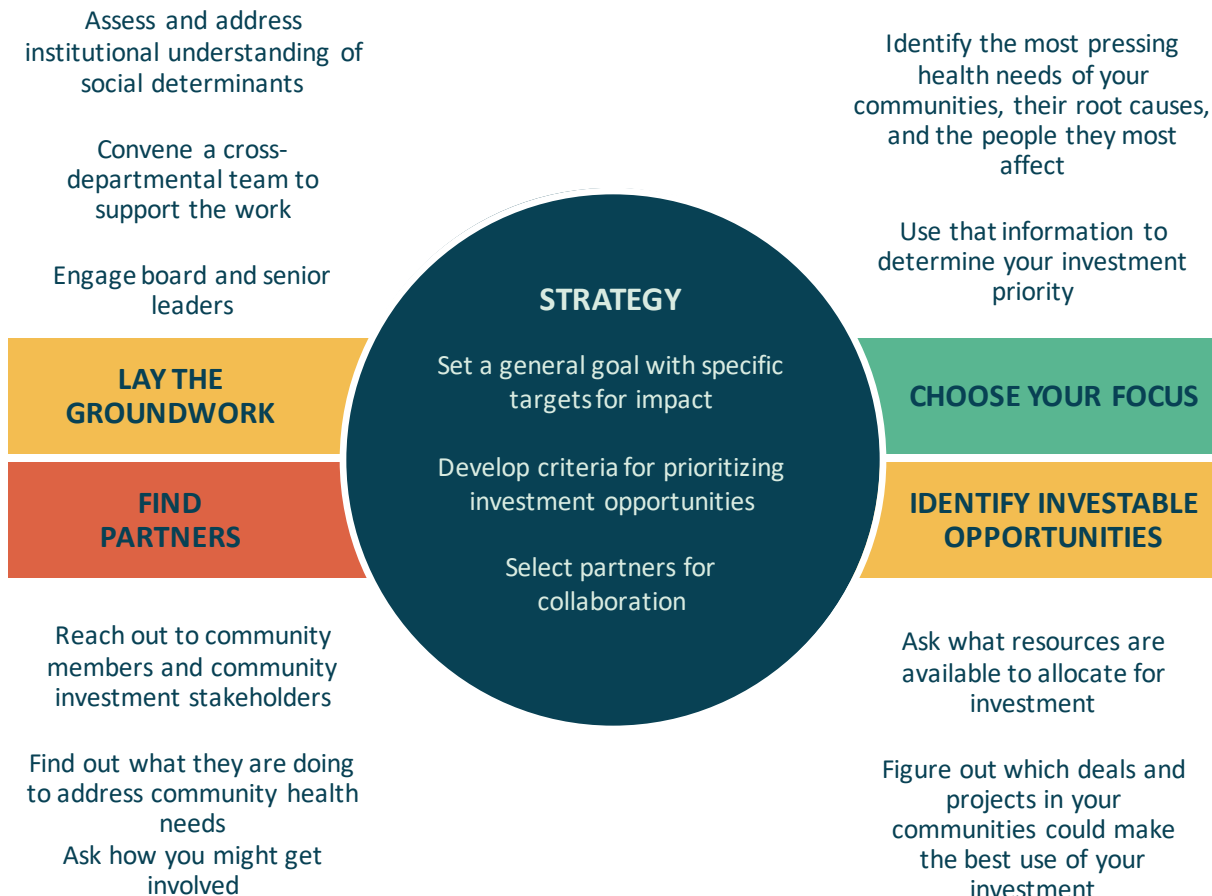
- The Capital Absorption Framework is an approach that leaders can use to activate the visions and navigate the challenges of their specific places—not a model they are expected to replicate regardless of where they are. The three key elements are shown above and highlighted throughout this section. Green hyperlinks take you to more detailed resources on the CCI website.

**Range of
Health Sector
Investments
into
Affordable
Housing,
so far...**

UPMC Health Plan made long-term (10+years), low-interest loans to two CDFIs for affordable housing preservation and development .	Nationwide Children's Hospital provided a \$1.5m guarantee to unlock \$15 million for a fund to preserve affordable rentals.	Boston Medical Center, a safety net hospital, made a 20+ year, 0% non-recourse loan to an intermediary to finance three LIHTC projects .	In addition to 105 community investments totaling \$165 million, CommonSpirit made a loan to small nonprofits developing single family homes for purchase .	Several hospitals have made grants to local Community Land Trusts to acquire land and develop/rehab homes .
Kaiser Permanente has invested over \$200 million in funds to develop and preserve affordable and permanent supportive housing .	United Health Group is buying Low Income Housing Tax Credits, investing in pooled funds, and making grants to develop rental housing and pay for on-site services .	CareSource, a managed care plan, is making loans and grants to CDFIs and developers leveraging its FHLB membership . They've committed \$50 million for lending to CDFIs in 5 states.	UPMC leased surplus land in Pittsburgh at \$1/year to a developer of affordable senior rental housing and donated 3 parcels for LIHTCs in Lancaster as part of multi-phase redevelopment .	SBH Health System donated two properties across from the hospital to a developer who built 75% affordable units , including 95 for homeless families.

Getting Started

There's no one right way to start building an investment strategy.



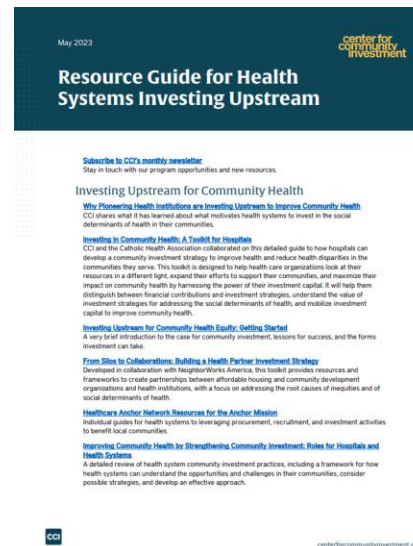
Learn More

Contact:

Kevin Progar

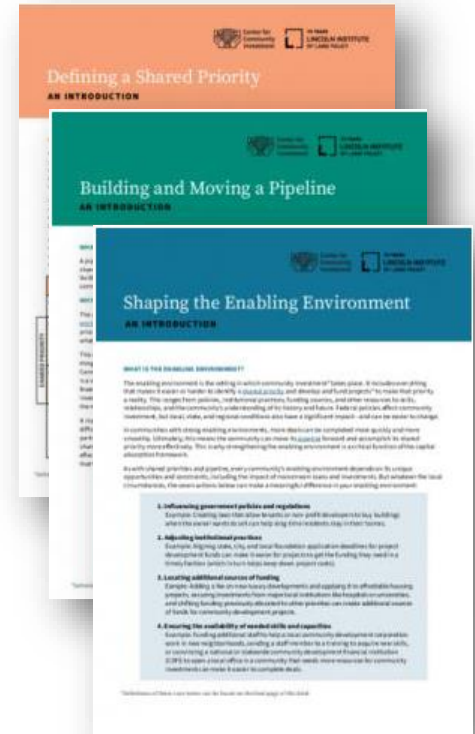
kprogar@centerforcommunityinvestment.org

Access more resources for health and housing work our website: [Investing in Community Health - Center for Community Investment](https://www.centerforcommunityinvestment.org/)



Tap into Our Resource Roundup of:
[Resource-Guide-for-Health-Systems-Investing-Upstream.pdf](https://www.centerforcommunityinvestment.org/resource-guide-for-health-systems-investing-upstream.pdf)

October 2022

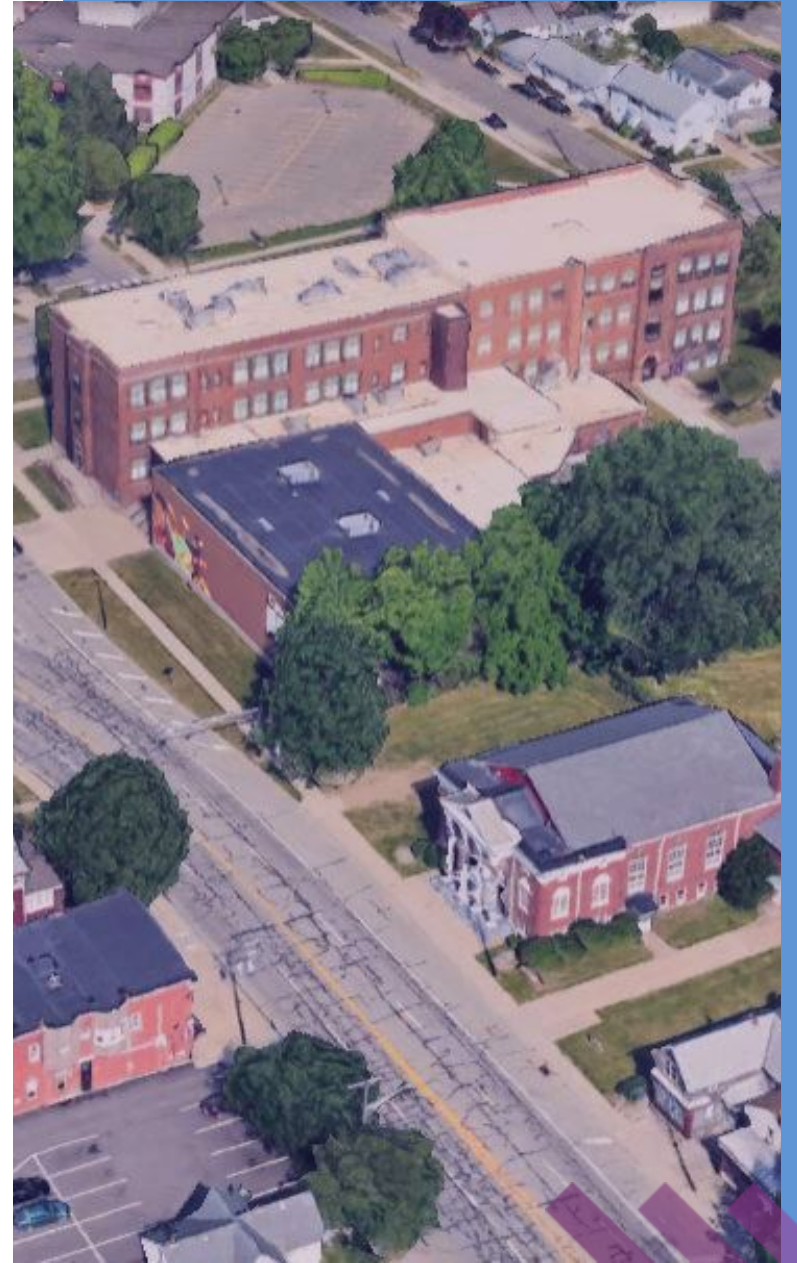


Introductions to Capital Absorption:

- Defining a Shared Priority
- Building and Moving a Pipeline
- Shaping the Enabling Environment

November 2021

Building a Healthier Community



HHF Mission & Vision

Mission: Hamot Health Foundation will lead our community to better health.

Vision: Hamot Health Foundation will transform the health and well-being of our community with an unwavering commitment to our 4 C's:

Clinical
Excellence

Cutting-Edge
Research

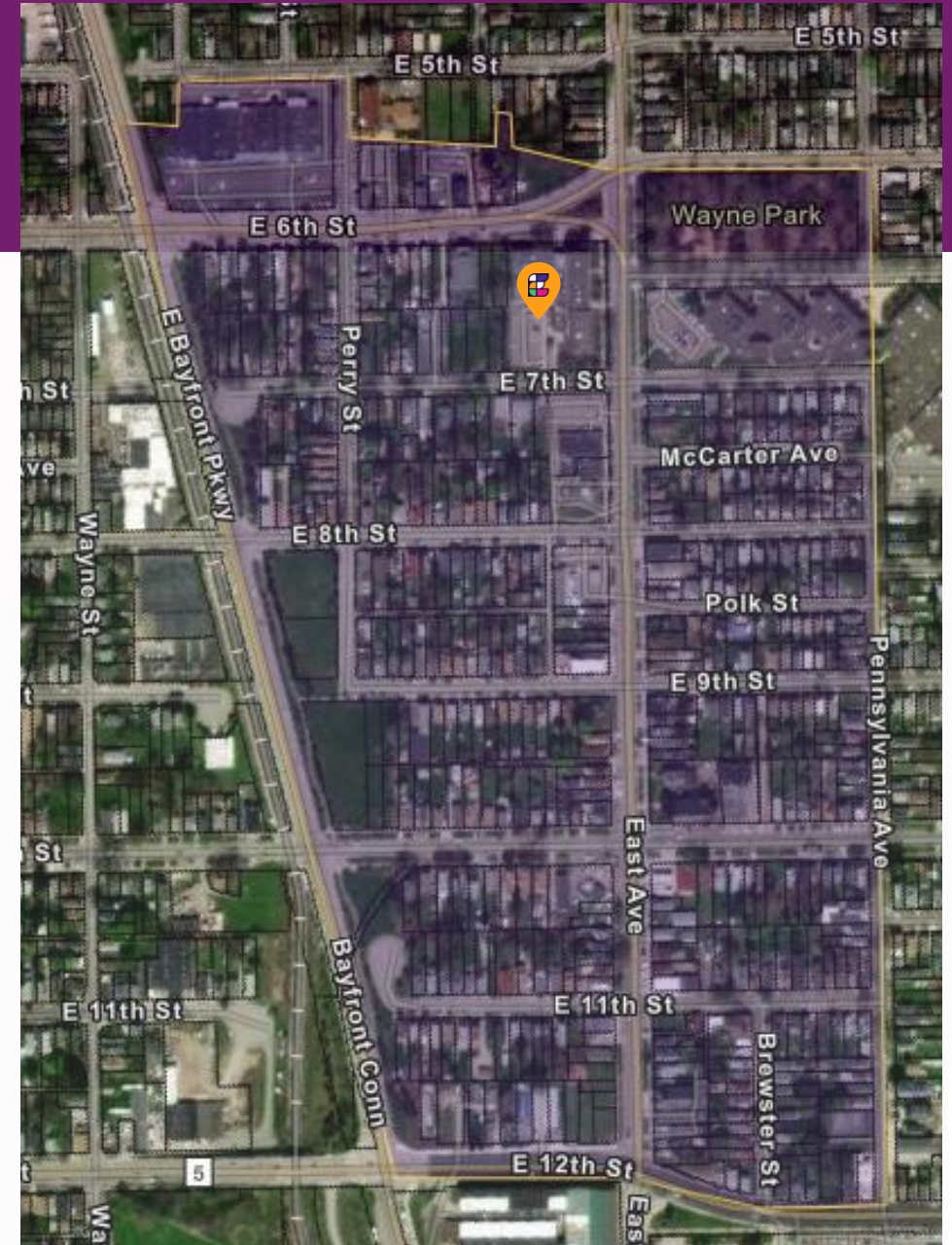
Community
Health

Career
Development

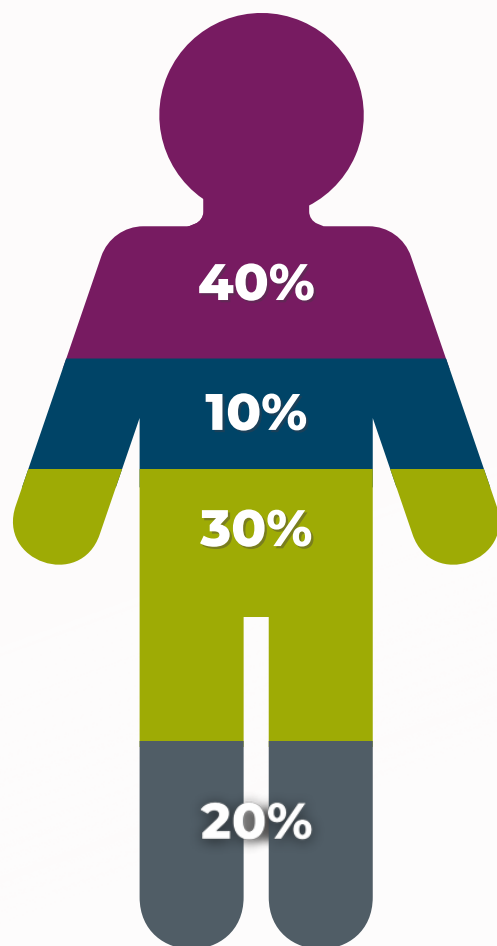
A Place to Start: ECAT and the Wayne Health & Wealth Equity District



In 2021, HHF was the initial funder for ECAT's \$12M Wayne School Reimagined Project to create an 80,000sq ft multipurpose community center in the heart of Erie's most unhealthy neighborhood.



Social Drivers of Health



Socioeconomic Factors



EDUCATION



JOB STATUS



FAMILY SOCIAL
SUPPORT



INCOME



COMMUNITY
SAFETY

Physical Environment



Health Behaviors



TOBACCO
USE



EXERCISE



DIET



ALCOHOL
USE



SEXUAL
ACTIVITY

Health Care

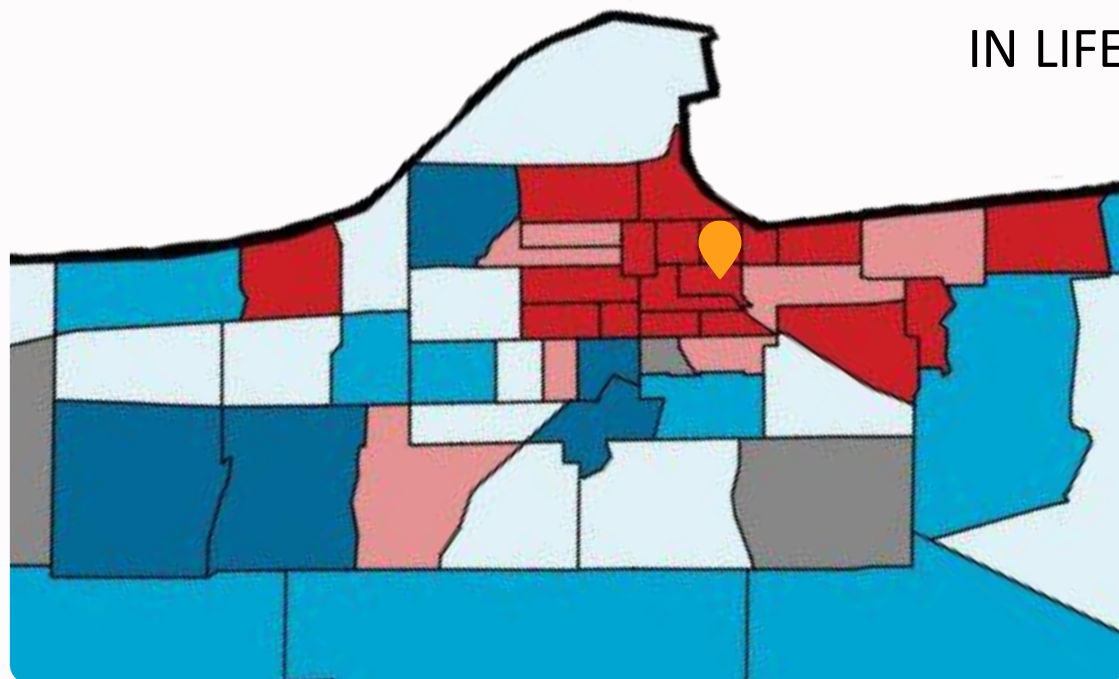


Only 20% occur in a health care environment.

50% can
be traced
back to
your zip
code.

Our “Why”

24 YR GAP
IN LIFE EXPECTANCY



Life Expectancy at birth (Quintiles)

56.9 - 75.1	75.2 - 77.5	77.6 - 79.5	79.6 - 81.6	81.7 - 97.5
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62.3 years



Resides in underserved
areas of Erie County

86.3 years



Resides in more affluent
areas of Erie County

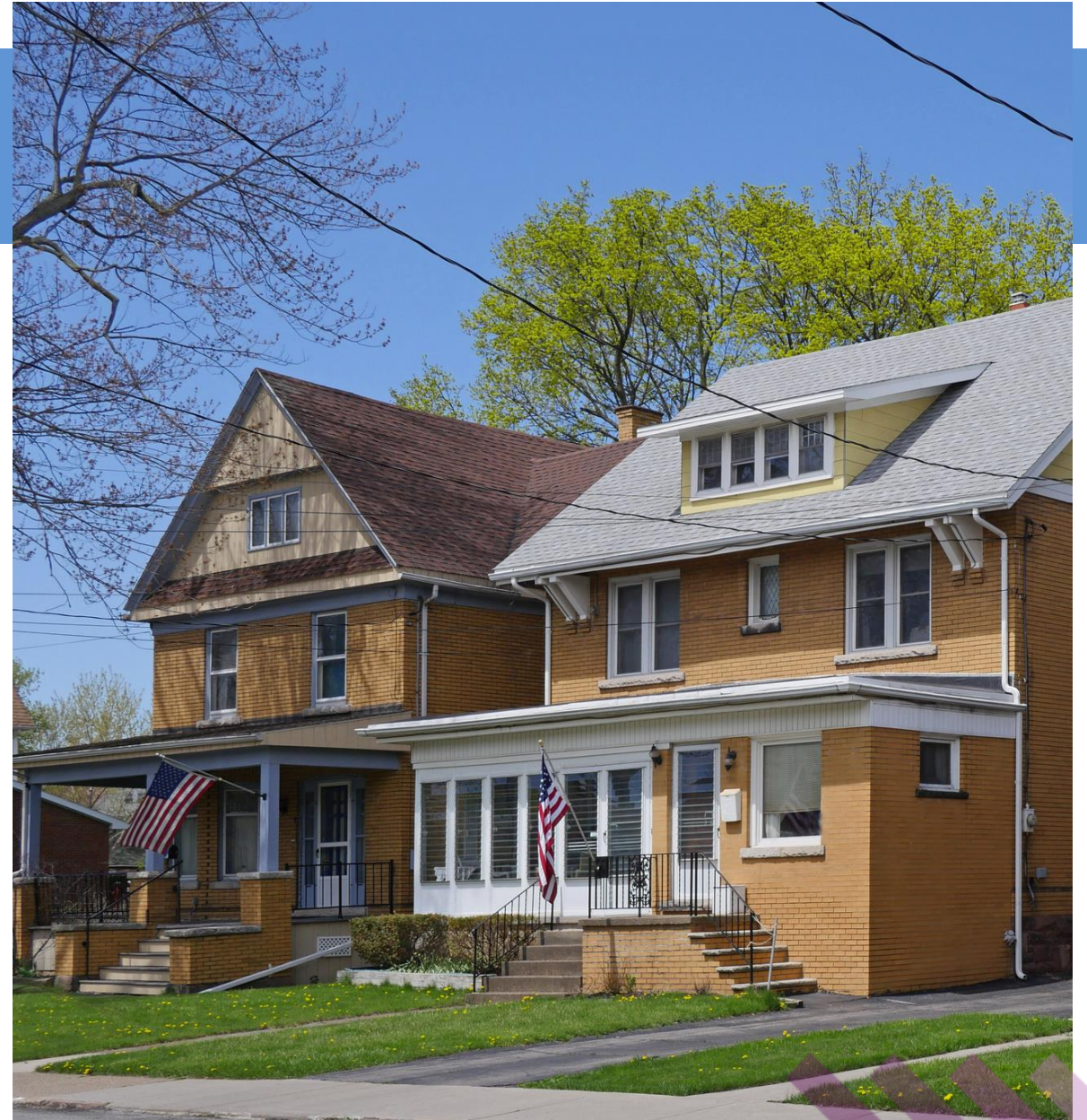
An entire generation.

Phase 1 Projects



HOUSING PILOT

To increase the stability of Erie's housing sector, we will utilize workforce training programs to provide opportunities for residents to attain safe, healthy homes.



THANK YOU



Daria Devlin

Director of Social Impact,
Hamot Health Foundation

Executive Director, BUILD



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Pennsylvania Housing Finance Agency (PHFA)

Health and Housing Summit

Healthcare Motivation for Housing Partnerships

Kathleen Mullin: Director of Housing Initiatives, LTSS

APRIL 15, 2024



**CARE IS THE HEART
OF OUR WORKSM**

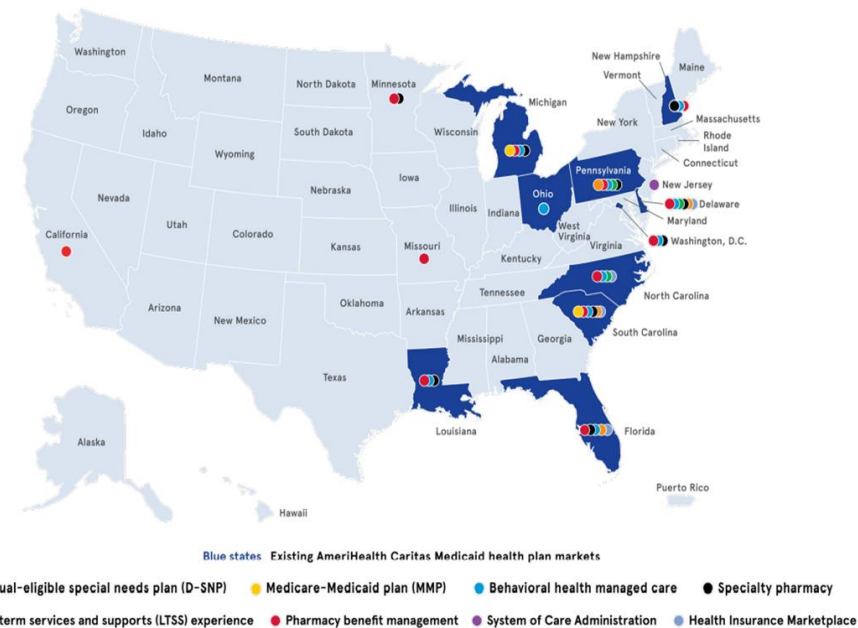
Delivering the Next
Generation
of Health Care

AmeriHealth Caritas: Company Profile



AmeriHealth Caritas is one of the nation's leaders in health care solutions for those most in need. Operating in 13 states and the District of Columbia, AmeriHealth Caritas serves approximately 5 million Medicaid, Medicare, Children's Health Insurance Program (CHIP), and Health Insurance Marketplace members through its integrated managed care products, pharmaceutical benefit management and specialty pharmacy services, and behavioral health services.

Headquartered in Pennsylvania, AmeriHealth Caritas is a mission-driven organization with more than 40 years of experience serving low-income and chronically ill.



<https://www.amerihhealthcaritas.com/assets/pdf/corporate-fact-sheet.pdf>

Membership for the Plans we are Discussing Today

Pennsylvania Membership Totals:

- HealthChoices: Keystone First and AmeriHealth Caritas Pennsylvania (PA) HealthChoices = 1.2M+
- Community HealthChoices (CHC): Keystone First CHC and AmeriHealth Caritas PA CHC = 175,000+
- Medicare Dual Special Needs (DSNP): Keystone First VIP Choice and AmeriHealth Caritas VIP Care = 16,000+

District of Columbia (DC) Membership:

- Medicaid: AmeriHealth Caritas District of Columbia = 117,000+

Sample of Housing/Health Partnerships



Housing Stability Initiative with SeniorLAW Center

Legal services for older Participants, with housing insecurity needs
Community HealthChoices · PA (statewide)

Housing Smart

Cross-sector collaboration to address unmet health & social needs
of unhoused Members
Keystone First (HealthChoices) · Philadelphia County only

Ounce of Care

Targeted outreach to enrollees in affordable housing developments
utilizing Community Health Workers (CHWs)
AmeriHealth Caritas DC · Washington, DC

Housing Stability Initiative (PA Community HealthChoices)

Housing Insecurity is a persistent challenge among older adults.

- 33% of AmeriHealth Caritas PA CHC and Keystone First CHC Participants reported: *I have housing but am worried about losing it.*
- 34% of extremely low-income households across PA are headed by seniors.




Goal: Help residents navigate housing barriers that may impact their ability to live independently in the community, including but not limited to:

- Education (tenant-landlord rights, lease/mortgage obligations, violations, etc.)
- Advocacy (improve poor conditions, increase access)
- Limited representation of SeniorLAW Center (representing client with third parties)

SeniorLAW Center:

- Has dedicated staff and a phone line for PA plans CHC Participants, over age 60.
- Trains Service Coordinators on identifying housing-related needs.
- Does a warm transfer to other legal agencies; integrated care model.

Housing Stability Initiative: Referral Criteria

Renters		Homeowners
	<i>Risk of Losing Home</i> <ul style="list-style-type: none"> • Eviction Notice (Court Date) • Threat of Eviction • Tenant-Landlord Matters • Non-Payment of Rent 	<i>Risk of losing home</i> <ul style="list-style-type: none"> • Mortgage / tax foreclosure risk • Property/tangled titles • Deed transfers • Real estate and inheritance taxes issues
	<i>Unsafe Housing or Repair Needs</i> <ul style="list-style-type: none"> • Pest or rodent issues • Concerns about lead • Other habitability matter (safety, exposure hazard, etc.) - <i>no action by landlord</i> • Mobility Needs / Request for Reasonable Accommodation 	<i>Unsafe Housing or Repair Needs</i> <ul style="list-style-type: none"> • Home Contractor fraud • Property damage / unable to repair • Code violations by local jurisdiction
	<i>Utilities</i> <ul style="list-style-type: none"> • Unlawful disconnection • Dispute with landlord / agency over charges • Shut-off 	<i>Utilities</i> <ul style="list-style-type: none"> • Unlawful disconnection • Dispute with agency over bill / repairs • Shut-off

Housing Smart: Improving Health Outcomes for Unhoused Members (Keystone First)

Cross-sector Collaboration:

Temple Health, 2 PA HealthChoices MCOs (Keystone First and Jefferson Health Plans), and a service provider (Resources for Human Development), with “Housing First” expertise

Goals:

- Reduce Emergency Department (ED) visits and Hospital admissions.
- Stabilize living conditions.
- Engage/re-connect with medical neighborhood (Medicaid benefits, treatment, etc.).



Solution: “Whole Person” Care Model

- Medicaid dollars (pay for services)
- Housing funding (grants, Temple Health)
- Integration of physical/behavioral health information to coordinate care, in stable housing
- Collaboration draws upon expertise of each entity

Preliminary Outcomes (after one year of stable housing):

- 75% **decrease** in ED visits
- 79% **decrease** in inpatient admissions
- 50% **increase** in outpatient appointments

Housing Smart: Improving Health Outcomes for Unhoused Members

	Challenges	Opportunities
Housing	<ul style="list-style-type: none">• Housing funding was limited• Transitioning Housing Smart participants into long-term housing options	<ul style="list-style-type: none">• Program was not constrained by U.S. Department of Housing and Urban Development (HUD) homelessness criteria• Full-time equivalent (FTE) funding allowed service provider to give sole focus to care
Health	<ul style="list-style-type: none">• Years of instability delayed medical care• Difficult to engage Housing Smart participants in health care needs	<ul style="list-style-type: none">• Data access to service provider was unique• Collaborative model embraced “Whole Person” Care

Ounce of Care: Outreaching to Enrollees Residing in Affordable Housing (AmeriHealth Caritas DC)



- AmeriHealth Caritas DC is partnering with Ounce of Care to provide care coordination and support to residents of affordable housing properties.
- Ounce's team of Community Health Leads works with property owners across Washington, DC.
- All services are at no cost.

Thank you



Panel Discussions

PENNSYLVANIA HOUSING FINANCE AGENCY

Health for Housing Investments Program

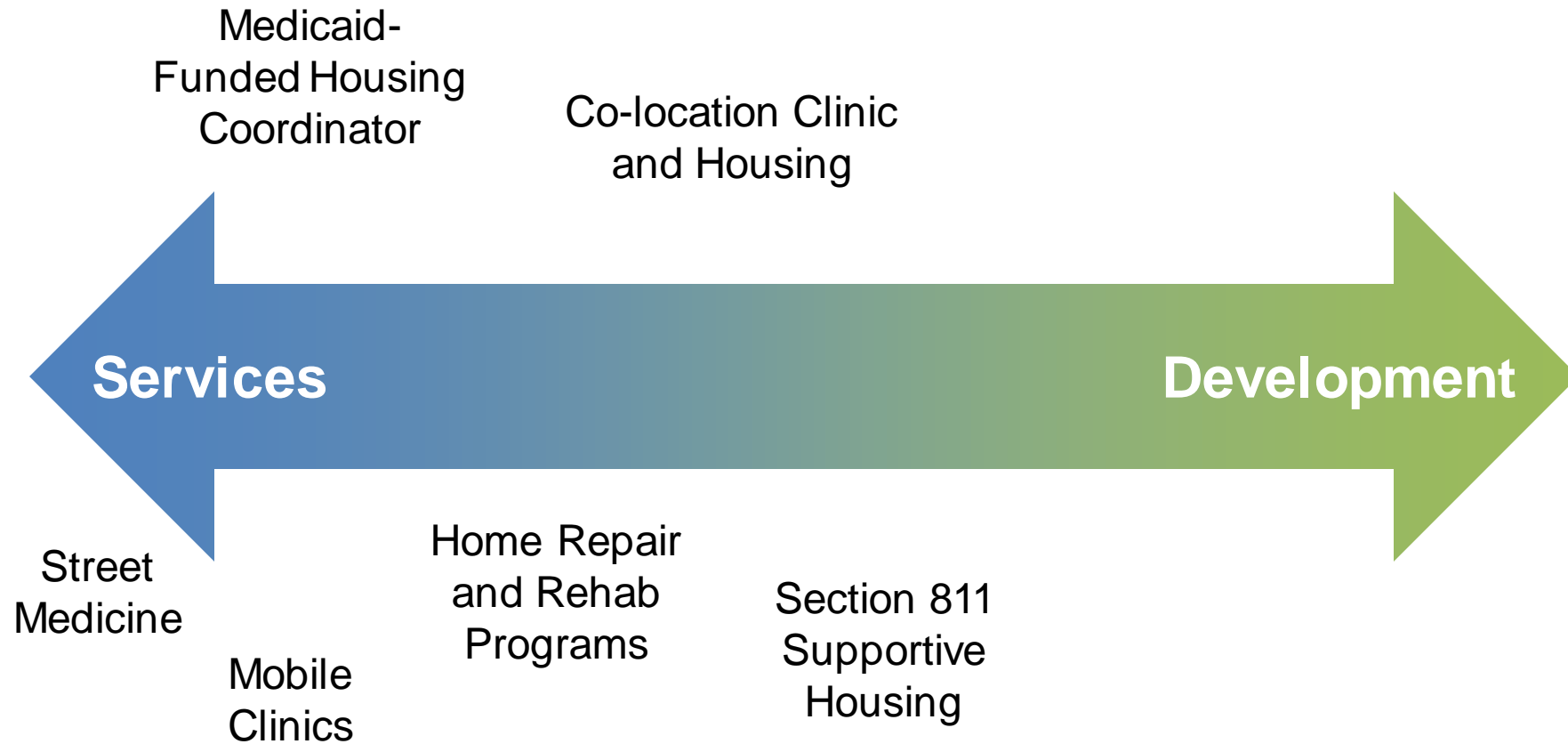


Josh Shapiro, Governor

Robin L. Wiessmann, Executive Director & CEO

www.phfa.org

Health and Housing Continuum Examples



PHFA'S HEALTH FOR HOUSING INVESTMENT

Program began under the **H3C grant** and will be carried on through the **Health for Housing Investment Program** to support the development of partnerships with hospitals, health systems, and other health organizations to expand financing for affordable housing development and preservation.

Health for Housing Investment Planning Grant Work



Held 5 Targeted Listening Sessions



Convened Leaders from Statewide Advocacy Groups



Completed Needs Assessment (publicly available dashboard)

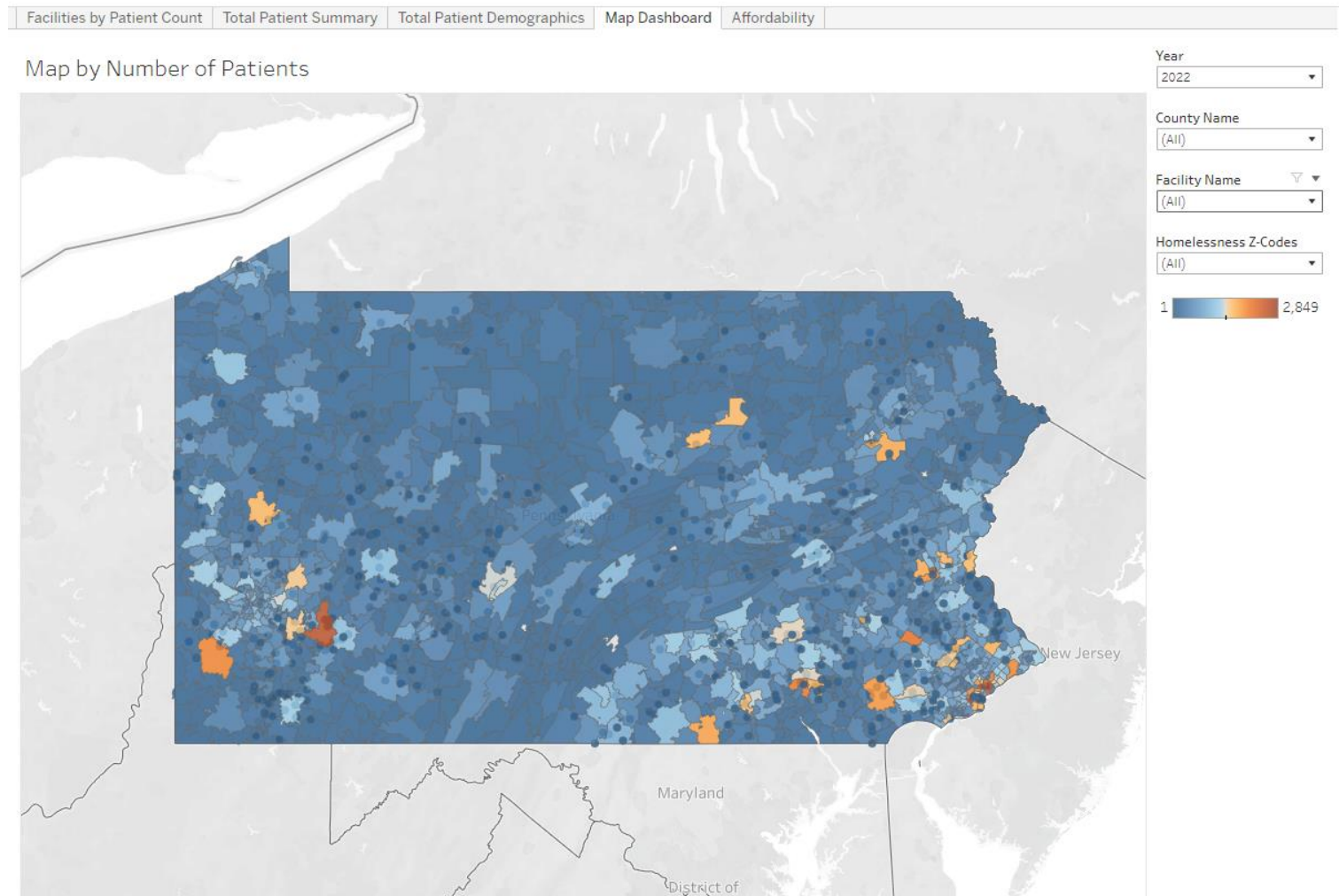


Coordinated Interagency Meetings



Research and Collected Best Practices

Health and Housing Data Dashboard



HHI Strategies

Create Incentives for Health for Housing Projects across PHFA Programs

Coordinate Efforts with Gov Stakeholders/related programs

Convene cross-sector partners to build shared language, learn, and share info.

Develop online hub for statewide health and housing resources/efforts.

Increase PHFA's capacity to build Health for Housing as an area of expertise.

HHI Program Incentives: LIHTC

- Minimum one tax credit reserved - project must include a **capital investment** from a **health care entity**

Capital Contribution	Health Care Entity
<ul style="list-style-type: none">• Grant• Loan• Debt• Contributions of land and/or existing structure	<ul style="list-style-type: none">• Health care payers such as Medicaid managed care organizations and other insurers• Health providers such as hospital systems, and health conversion foundations

- The Agency may match the amount of the health care capital contribution up to a **maximum of \$2M for 9% LIHTC** developments and **\$1.5M for 4% LIHTC** developments.
- Minimum capital contribution: \$100k
- The Agency will match Land Donation of an amount up to 50% of the “as is” appraised value.

HHI Program Incentives: PHARE

- Health for Housing Investments Funding Priority
- Proposals must **include funding contributions from the participating healthcare entity towards the capital financing of the project**, in the form of a grant, loan, debt, or the contribution of land and/or existing structure(s).
- Only **New Construction and Rehab Projects** will be considered under this funding priority.
- The Agency reserves the right to **award additional funds to projects that fall under this prioritization category** as part of its Health for Housing Investment Portfolio.

How to Get Involved?

- **Sign up for our Listserv** to stay up to date on PHFA's Health for Housing Investment
- Begin or continue building **relationships** with health or housing stakeholders – who are your **key contacts**?
- Have a **potential HHI project**? – Reach out to PHFA to discuss program details



Scan for Updates!

QUESTIONS?
