



Housing Services

Service Definition

Ryan White Part B housing services program assists clients with locating, paying for, and maintaining safe and affordable housing. Housing services provide transitional or short-term housing assistance to enable a client or client and their family to enter or remain in HIV care or treatment and achieve positive medical outcomes. This includes temporary assistance necessary to prevent homelessness and to gain or maintain access to medical care.

Wisconsin Communicable Disease Harm Reduction (CDHR) Section housing services are based on a "Housing First" model. The U.S. Department of Housing and Urban Development (HUD) defines Housing First as "an approach to quickly and successfully connect individuals and families experiencing homelessness to permanent housing without preconditions and barriers to entry, such as sobriety, treatment or service participation requirements."¹ Housing First is based on the theory that client choice is valuable in housing selection and supportive service participation, and that exercising that choice is likely to make a client more successful in remaining housed and improving their life.²

Subrecipients must operate on the following Housing First principles:

- People experiencing homelessness or temporary or unstable housing³ have the right to self-determination and should be treated with dignity and respect.
- Clients are eligible for housing assistance regardless of the subrecipient from which they do or do not receive other services.

The following services can be provided using Ryan White Part B housing services funds:

- Full or partial monthly rent payments, including back-owed rent, to a landlord, property management company, boarding house, or transitional living facility for up to 12 consecutive months or 12 nonconsecutive months in a 24-month period (24 months with justification and approval of Wisconsin CDHR Program).
- Housing case management, with or without full or partial monthly rent payments, for up to 60 months.
- Assistance with housing searches, visiting potential housing units, referrals to legal housing services, working one-on-one with clients on housing education, supporting clients with referrals to employment resources, helping with moving expenses, application fees, utility bills, and back-owed rent, and working with clients' referring provider to coordinate care.

Subrecipients providing housing services are expected to comply with the Universal Standards of Care, as well as these additional standards:

¹ U.S. Department of Housing and Urban Development. "Housing First in Permanent Supportive Housing."

² National Alliance to End Homelessness. "Housing First." www.endhomelessness.org/resource/housing-first/

³ www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/housing-instability

Standard 1: Housing services providers ensure services are delivered in accordance with the [Wisconsin Ryan White Part B Eligibility and Recertification Policy and Procedures](#).

Providers are responsible to determine eligibility at enrollment and to confirm eligibility annually.

Documentation

Client records must document that the client is living with HIV, resides in Wisconsin, and has household income under 500 percent FPL at initial enrollment. Client records must document that the client is a Wisconsin resident and has household income under 500 percent FPL in accordance with the Wisconsin Ryan White Part B Eligibility Policy.

Standard 2: Subrecipients providing housing services must have mechanisms in place to assess and document the housing status and housing service needs of new clients, and at least annually for existing clients.

Subrecipients providing of housing services must assess and document the housing status and housing service needs of newly identified Ryan White Part B clients.

Documentation

The client record for newly identified clients must document client's housing status and needs for housing services.

Standard 3: Subrecipients providing housing services must inform the Wisconsin CDHR Section of changes to program status and/or availability of housing services.

Subrecipients providing of housing services must inform the Wisconsin CDHR Section of changes to program status and/or availability of housing services.

Documentation

Subrecipients must keep record of a communication via email sent to the HIV Care Services Coordinator within the Wisconsin CDHR Section informing of any program status changes and/or changes in availability of housing services.

Standard 4: Evidence of tenancy or residency must be demonstrated before providing financial housing services, like payments for rent.

The client must demonstrate that they are either the named tenant on a lease, are legally residing in the unit, or have a responsibility to pay rent before the subrecipient moves forward with providing rent assistance.

Documentation

The client record must include a copy of lease, rental agreement, or other evidence that they legally reside in the unit or have a responsibility to pay rent.

Standard 5: Within 30 days of intake for housing services, clients must be assessed for housing needs.

Subrecipients providing housing services must assess every client receiving housing assistance within 30 days of intake, and at least annually, to determine the need for new or additional housing services.⁴

The assessment must include:

- The client's need for housing assistance.
- Barriers that prevent the client from identifying, relocating, or maintaining a long-term, stable living situation.
- A plan for next steps to address barriers.

Documentation

The housing needs assessment must be included in the client record. If a waitlist exists for housing assistance, the client records shows that the client was added to the waitlist.

Standard 6: Within 30 days of intake for housing services, each client has an individualized housing plan.

Housing services must include the development of an individualized housing plan, updated within 30 days of intake, and at least annually, to guide the client's linkage to permanent housing.⁵

This housing plan must be led by the client, and/or created in partnership with the client's provider.

Documentation

A housing plan updated within the 12 months prior to the most recent instance of housing services provided must be in the client's file. The housing plan must:

- Be individualized to meet the client's needs and is based on the assessment of housing need,
- Cover the entire time that assistance is provided, and
- Include strategies to encourage and assist the client in accessing long-term, stable housing (such as options for more stable living situations, resources for relocation, capacity to maintain stable housing, and/or barriers faced by the client and her/his family in meeting their housing needs).

When housing services are subcontracted out or the client was referred to housing services from another Part B funded agency, there must be documentation of collaboration and/or communication with the client's referring provider regarding the housing plan.

When housing services are subcontracted out or the client was referred to housing services from another Part B funded agency the creator of the housing plan must note that they discussed the plan with the referring provider in a progress note or on the housing plan itself, along with the date the conversation occurred.

Subrecipients must provide the Wisconsin CDHR section with a copy of the individualized written housing plan upon request.⁶

⁴ HAB Policy 16-02, p. 18

⁵ HAB Policy 16-02, p. 17

⁶ HAB Policy 16-02, p. 18

Standard 7: Optional referral services are provided based on client need.

Housing services also can include housing referral services: assessment, search, placement, and advocacy services; as well as fees associated with these services.⁷

Documentation

Client records must document if referral services are provided, with associated costs.

Standard 8: Providers of housing services deliver high quality, client-centered services.

Expectations for providers of housing services include:

- Promptly responding to client contacts within seven calendar days of contact.
- Working one-on-one with clients to increase housing literacy; provide education on topics that include what to look for in a lease, what is an affordable rent for a specified income, rights for tenants, and how to assess potential housing units for safety and livability; offer to link clients to other Ryan White and community services at the time of application, and/or while the client is enrolled in the housing program.
- Actively assisting clients with housing searches by identifying potential units and contacting property managers.
- Visiting potential housing units with clients.
- Offering assistance with employment resources and supporting clients who are referred to these services as the clients work to address income instability.
- Working in partnership with the client's case manager or linkage to care specialist, if the client has one.

Documentation

The client record must document housing services providers are responding to client or referring provider communications within seven days.

The client record must document that any housing plans developed by housing service providers are developed in partnership with, communicated to, and agreed to by the client's referring provider, regardless of the organization at which the referring provider is located.

Communication and agreement with the referring provider must be documented as a housing service provider's note in the client's housing records that describes the outcome of the communication and includes the date of the communication.

Standard 9: Delivery of housing services must be consistent with the Housing First model.

Subrecipients cannot require clients to repay housing services. Subrecipients can require that clients pay a portion of their income towards rent, not to exceed 30 percent of the client's gross income.

Subrecipients cannot add nuisance ordinances or clauses to a client's living conditions beyond those put in place by the rental or lease agreement.

⁷ HAB Policy 16-02, p. 17

Subrecipients cannot require clients to undergo treatment or medical procedures or to have medical tests as a condition of receiving housing services.

Subrecipients cannot use a client's viral load, CD4 counts, or any medical information beyond the client's HIV status to determine whether the client is eligible for assistance.

Subrecipients cannot require clients to participate in employment or vocational training, medical or non-medical case management services other than housing case management provided by housing program staff, or other social services as a condition of receiving housing services. Offering to refer clients to these services and making these services available to clients is acceptable and encouraged.

If a subrecipient requires housing services clients to complete formal check-ins or appointments with housing service providers, clients cannot be warned, taken off a waitlist for housing, or removed from the program for failing to complete check-ins that occur more frequently than once a month. This does not apply to all communication between housing assistance providers and clients, only to formal check-ins. The subrecipient can contact the client more frequently if warranted, but the client cannot be punished for non-compliance or non-response if check-ins or contacts occur more frequently than once per month.

If a subrecipient contracts with another agency to provide housing services, the contracted agency is expected to meet the same requirements as if it were a subrecipient organization.

Documentation

A review of subrecipient policies and procedures must show consistency with Housing First criteria.

Standard 10: Housing services may include core medical and support services.

Examples of housing that include core or support services are residential substance use disorder or mental health services, residential foster care, and assisted living residential services.

Documentation

The client record must include documentation of any core or support services that the client receives through Ryan White Part B Housing Services.

Standard 11: Ryan White housing services are provided as a last resort.

Housing services providers must make reasonable efforts to secure non-Ryan White housing funds for clients whenever possible.

It is understood that housing funds are scarce, programs often have strict requirements that exclude people needing housing assistance, and the need for housing assistance can emerge quickly. Therefore, while subrecipients must make reasonable efforts to secure other sources of housing assistance, clients and/or subrecipients are not required to document that they have exhausted all other sources of housing assistance before receiving assistance from the Ryan White Part B housing assistance program.

Documentation

The client record must document reasonable efforts to secure non-Ryan White funds for clients.

Standard 12: Payments for housing services meet allowable cost requirements.

Payments made for Ryan White Part B Housing Services must meet the following allowable cost requirements:

- Equal to or less than "Fair Market Rent"⁸: The total rent being charged for a unit must be reasonable in relation to rents currently being charged for comparable units in the private unassisted market and must not be more than rents currently being charged by the property owner for comparable unassisted units.
- No cash payments to clients or families: Providers must utilize a mechanism through which payments can be made on behalf of the client, with internal controls in place to prevent direct payments to clients, family, or household members.
- No unallowable costs: Subrecipients must utilize a mechanism through which payments can be made on behalf of the client, with internal controls in place to prevent the following unallowable expenditures:
 - Mortgage payments
 - Property tax payments
 - Foreclosure-related costs
- No rental or security deposits: Rental deposits that could be refunded to clients directly or withheld due to property damage are not allowable.

Documentation

Evidence that subrecipients did not pay more than the Fair Market Rent in assistance must be documented in the client file.

Accounting records must include copies of checks paid to vendors, traceable back to specific cases. Each cost should be documented as to date, amount, type, and allowability, and will be available for inspection by the Wisconsin CDHR section during site visits. Sufficient documentation of the type of allowable cost will be made available upon request.

The client record must also document the duration of services, type of housing provided, amount of each payment, and any housing referral services provided.

Standard 13: Partial or full rent subsidies must not be combined with any other housing assistance that will result in over 100 percent of housing and/or rental costs.

Client must agree to report any additional assistance that would result in assistance over 100 percent of housing/rent costs.

⁸ www.huduser.gov/portal/datasets/fmr.html

Documentation

The housing record must include evidence that the client agrees that they will report any other subsidy or voucher they are eligible for from another program to their housing services provider that would result in assistance over 100 percent of housing/rent costs.

Standard 14: Housing payments made on a client's behalf are limited to 12 consecutive months unless a 12-month extension is documented in the client's record.

Full or partial rent payments on a client's behalf can be made for 12 consecutive months or 12 nonconsecutive months in a 24-month period.

If, when nearing the end of the 12-month period, the provider or referring provider feels the client requires additional rent assistance to remain in care, clients can receive up to 12 months additional assistance with the agreement of the Wisconsin CDHR Section if there is a justification for the extension.

Housing services, with or without housing payments, are limited to 60 months.

Documentation

The client record must document the number of months in which a client received rent assistance. If a client received rent assistance for more than 12 months, there must be documentation of a reason for a 12-month extension in the client record and documentation that the Wisconsin CDHR Section was consulted.

After 60 months, there must be documentation of discharge from housing services.

Standard 15: At the conclusion of the delivery of housing services, the client discharge must occur in accordance with established protocols.

To discharge a client, one of the following criteria must be documented in the client record:

- The client successfully completed the tasks in the housing plan and has transitioned to stable housing,
- The maximum duration of assistance was reached,
- The client's household income rose above Ryan White Part B eligibility the limits,
- For Partial Rent Subsidy, the client demonstrates a pattern of not paying the tenant portion of the rent,*
- An "at-fault" eviction occurred while receiving assistance,
- The client failed to notify the subrecipient of changes in Ryan White Part B eligibility factors, including income, family composition, continued occupancy of the unit, or rent amount,*
- The client moved out of the region/jurisdiction,
- The client sub-let or otherwise earned income on the unit;*
- The client submitted false or misleading information to the subrecipient,*
- The client experienced changes in health status that made the unit unsuitable for their needs (for example, physical disability made two-story unit unusable),
- The client was otherwise unwilling to abide by the requirements of the subrecipient,* **or**
- The client died.

*This item requires a warning and 30-day notice. See guidelines in Standard 17.

Documentation

The client record must include documentation of discharge criteria. Where transition has occurred, a description of the transition should be included in the client record.

Standard 16: If a client vacates a unit without informing the subrecipient, discharge occurs if conditions are met.⁹

If a client vacates a rental unit without informing the subrecipient, provider or referring provider, the provider or referring provider must complete the following steps before they can discharge the client and can stop payments on the rental unit:

1. Attempt to contact the client through any available means that are allowable by subrecipient policy, including phone, text, social media, and collaboration with the client's provider, if the client has one.
2. Complete a home visit to verify that the client is no longer in the unit.
3. Inform the client's referring provider (if the client has one) that the client has vacated the unit.

Documentation

The circumstances of the client vacating the unit and attempts to contact must be documented in the client record.

Standard 17: If clients are discharged for behavioral reasons or for violations of policies, there is due warning and a 30-day notice.

Removing clients from housing services for behavioral reasons or for violation of housing services policies must be used as a last resort.

Clients cannot be removed from housing services for missing appointments or being out of medical care.

Prior to discharge, clients must receive a warning from the housing services provider, which involves the following steps:

1. Document that the client has a clear pattern of violation of housing services policies.
2. Notice that if they do not change this behavior, they may be removed from housing services. This notice must be given verbally either in person or through a real-time phone conversation and offered in writing including specific information on what behavior the client is expected to change.
3. Notice to the referring providers at any subrecipient (either over the phone or in person) that the client is in danger of losing their housing services. This cannot be done through an email or voicemail—the housing provider must speak directly to the client's referring provider.¹⁰
4. Inform the Wisconsin CDHR Section that a client is in danger of being disenrolled and summarize the reason for the decision to disenroll the client.

⁹ Clients must be informed upon entering the housing assistance program that vacating their unit without notice will result in removal from the program.

¹⁰ If the client does not have a case manager, the subrecipient organization must attempt to ensure that the client is linked to a medical case manager or linkage to care specialist at this point.

If the pattern of behavior continues, continue to document this information. After issuing this warning, the subrecipient organization must wait at least 30 days before proceeding to giving the client 30-day notice as described below.

Prior to discharge, a client must receive a 30-day notice from the housing services provider, which involves the following steps:

1. The housing services provider must inform the client that their housing assistance will end 30 days from the date the client is informed. The housing services provider must inform the client through a face-to-face meeting or a real-time phone conversation and give the client a written document explaining they will be removed from the program.
2. The housing provider must inform the client's referring provider either over the phone or in person that the client's housing services will be discontinued in 30 days. This cannot be done through an email or voicemail—the housing services provider must speak directly to the client's referring provider.
3. The housing services provider must inform the Wisconsin CDHR Section that the client is being disenrolled and summarize the reason for the decision to disenroll the client, including written confirmation from the client's referring provider that they received this information.

Documentation

Documentation of each of the above steps must be included in the client record. If the client refuses written documentation of the notice, the provider must document this.

Did you know?

Ninety-five percent of Ryan White Part B clients accessing housing services in Wisconsin have income at or below 200 percent of the federal poverty level—which is especially important as housing costs rise.

Source: RSR 2020

Health inequities are strongly associated with housing inequities among people living with HIV. Research demonstrates that unstable or inadequate housing and homelessness are associated with differential utilization of HIV care and reduced treatment effectiveness. Improved housing appears to improve access and retention in care and clinical and other outcomes. Evidence supports considering housing status as a contextual factor that influences consistent, appropriate HIV medical care, adherent antiretroviral medication use, and sustained viral suppression. Interventions addressing housing needs potentially will improve health outcomes for people living with HIV, reduce transmission, reduce HIV-related health disparities, and move us closer to ending new cases of HIV.

Source: Aidala, A, Wilson, M, et al. Housing Status, Medical Care, and Health Outcomes Among People Living With HIV/AIDS: A Systematic Review, January 2016, Vol 106, No. 1 AJPH

Although overcrowding in Wisconsin decreased from 2000 to 2010–2012 by 0.7 percentage points overall, it still exists predominantly in communities of color.

In 2010–2012, almost 11 percent of people who identify as either Hispanic or Latinx or Asian American or Pacific Islander experienced overcrowding, whereas only 1 percent of white, non-Hispanic or Latinx people experienced overcrowding.

Source: State of Wisconsin Fair Housing Plan, 2019, www.doa.wi.gov/DECHR/Fair%20Housing%20Plan.pdf

Black, Brown, Indigenous and other People of Color (BBIPOC) in Wisconsin must contend with segregation when seeking stable housing.

A common measure for BBIPOC segregation is a “Dissimilarity Index” that measures the degree to which the community of color is distributed differently than white people across census tracts. They range from 0 (complete integration) to 100 (complete segregation) where the value indicates the percentage of the community of color that needs to move to be distributed exactly like white people. A value of 60 (or above) is considered very high and values of 40 or 50 are considered a moderate.

For the state of Wisconsin, the Dissimilarity Index for Black or African American people was extremely high, at 78. Dissimilarity Indexes for Hispanic or Latinx people and Asian American or Pacific Islander people was moderately high at 53 for each group.

Source: State of Wisconsin Fair Housing Plan, 2019.
