



Housing Choice Voucher Program: A Critically Important Resource Ensuring Community Integration for People with Disabilities

Millions of People with Disabilities Have Extremely Low Incomes and Need Housing Assistance to Live in the Community: Approximately 4.6 million non-elderly adults with significant disabilities are extremely poor because they rely on government Supplemental Security Income (SSI) payments to meet all their basic needs, including housing. Others receive disability benefits from Social Security, the Veterans Administration, or work for very low wages. In 2012, SSI provided an average annual income of only \$8,712 – approximately 20 percent below the poverty line and equal to only 19 percent of Area Median Income nationally.¹ In 2012, the average HUD Fair Market Rent for a one bedroom unit was 104 percent of monthly SSI. Without the permanent rental subsidy that a Housing Choice Voucher provides, extremely low-income people with disabilities often live in segregated institutional settings such as public institutions for people with mental disabilities, nursing homes, and adult care homes/board and care facilities, or become homeless.

Successful Housing Choice Voucher Outcomes for People with Disabilities: The critical rental subsidy provided by the Housing Choice Voucher program helps people with disabilities live successfully in permanent housing in the community – a major reason their participation in the HCV program has doubled over the past 15 years. In 2012, 626,825 non-elderly households with disabilities were using vouchers – making up 29 percent of the 2.1 million households assisted.

While most of these households have a “plain vanilla” voucher, Congress has long recognized the acute housing needs of people with disabilities through numerous appropriations that created a total of 50,000 Non-Elderly Disabled (NED) vouchers targeted to people with disabilities. NED vouchers have been deployed by HUD to address urgent disability housing needs including: (1) assisting people with disabilities adversely affected when PHAs and owners of HUD assisted housing designate their properties as “elderly only”; (2) targeting NED vouchers to assist people with disabilities transitioning from nursing homes to affordable housing in the community under Project Access; and (3) an innovative HUD partnership with the U.S. Department of Health and Human Services to target NED vouchers to people moving from institutional settings into the community under the federal Money Follows the Person Demonstration. Over the past two years, HUD has also developed new guidance to assist states and PHAs collaborate to provide Housing Choice Vouchers to people covered by the U.S. Supreme Court’s *Olmstead* decision.

The Housing Choice Voucher program can also help prevent and end homelessness among people with disabilities. According to HUD, people experiencing homelessness tend to have much higher rates of disabilities than the general population. Housing Choice Vouchers, combined with support services, can be effective in helping homeless people with disabilities maintain stable housing. This intervention can also achieve savings in other areas, such as health care, corrections, and emergency

¹ Technical Assistance Collaborative and CCD Housing Task Force, *Priced Out in 2012*. Reflects 2012 SSI payments for individuals with disabilities living independently in the community, made up of the federal SSI payment plus the optional state-funded supplement provided by 21 states to all SSI recipients who live independently in the community.

shelter systems, which could partially (or in some cases completely) offset the cost of rental assistance.²

The Housing Choice Voucher Program: An Essential Tool to Assist States to Comply with *Olmstead* Mandates: *Olmstead v. L.C.*, 527 U.S. 581 (1999), is the landmark U.S. Supreme Court decision which affirmed that the unjustified segregation of individuals with disabilities – in settings such as nursing homes, public institutions, privately owned Board and Care facilities etc. – violates the Americans with Disabilities Act. At least 13 states have *Olmstead* Settlement Agreements negotiated with the U.S. Department of Justice or private litigation, and *Olmstead* activities are underway in other states. Recognizing this critical need, HUD has urged PHAs to assist states implementing *Olmstead*. Yet the voucher program is under significant strain: 70,000 vouchers were lost due to sequestration in 2013, and some PHAs have extremely low turnover rates. As a result, very few vouchers are available to assist with important *Olmstead*-related activities.

Restoring Housing Choice Vouchers Cut by Sequestration Would Help Target Housing Choice Vouchers for *Olmstead* and People with Disabilities Experiencing Homelessness.

\$320 million will restore the vouchers cut by sequestration. As part of this restoration goal:

- \$240 million would provide 30,000 Housing Choice Vouchers for homeless households and vulnerable families with children in foster care. Many of those targeted have disabilities. These vouchers, combined with support services, could help homeless households with disabilities maintain stable housing and reduce use of emergency services such as emergency rooms, jails, and emergency shelters, and enable children to live with their families rather than in expensive foster care settings.
- \$40 million in funding would provide 5,000 Housing Choice Vouchers to be made available to PHAs in states required by *Olmstead*-related legal action to expand housing options with voluntary community-based services and reduce reliance on segregated institutional or other residential settings for adults with disabilities.

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² Michael Nardone, Richard Cho, and Kathy Moses, “Medicaid-Financed Services in Supportive Housing for High-Need Homeless Beneficiaries: The Business Case,” Center for Health Care Strategies, Inc., June 2012, <http://www.rwjf.org/files/research/74485.business.case.pdf>; Mary E. Larimer *et al.*, “Health Care and Public Service Use and Costs Before and After Provision of Housing for Chronically Homeless Persons with Severe Alcohol Problems,” *Journal of the American Medical Association*, 301:1349-1357, 2009; Dennis P. Culhane, Stephen Metraux, and Trevor Hadley, “Public Service Reductions Associated with Placement of Homeless Persons with Severe Mental Illness in Supportive Housing,” *Housing Policy Debate*, volume 13, issue 1, 2002.