In Fiscal Year 2012, HUD is requesting $272 million to fund programs that will directly support the provision of housing and services to improve health outcomes for families nationwide.

The connection of the built environment to health is an important one, and HUD is uniquely poised to affect this relationship to improve health outcomes. Stable housing provides an ideal platform for delivering a wide variety of health and social services to improve economic, health, and broad-based societal outcomes. For some, such stable housing alone is sufficient to ensure healthy outcomes, while others require housing with supportive services to assist with activities of daily living or long-term self-sufficiency, as well as proximity to crucial services. In this regard, HUD remains solidly committed to providing the crucial housing and services required for our nation’s most vulnerable families.

**OFFICE OF HEALTHY HOMES AND LEAD HAZARD CONTROL**

The Office of Healthy Homes and Lead Hazard Control (OHHLHC) provides capital grants, contract support, and technical studies that improve the health and safety of individuals and families by making smart investments that will yield positive health outcomes and has the potential to drastically and permanently change the way housing, energy, and health concerns are addressed in cities across our nation. In particular, these programs strive to achieve the Federal goal of eliminating childhood lead poisoning.

**In Fiscal Year 2012, HUD is requesting $140 million for OHHLHC programs** that will provide direct support in improving health and safety outcomes of families nationwide. This request includes:

- **$96 million in Lead Hazard Reduction Grant Program** to communities for lead hazard reduction in low-income housing, research on improving and reducing the cost of methods for evaluating and controlling lead hazards in housing, and enforcing lead safety regulations which cover older housing.
- **$40 million in Healthy Homes grants and contract support** to fund local programs to correct housing-related hazards, as well as evaluate program effectiveness and build capacity.
- **$4 million in Lead Technical studies and programmatic support** to ensure that HUD’s grantees make the most efficient and innovative use of funding.

Widespread adoption of a comprehensive “healthy homes” approach, including physical interventions and education, can help prevent housing-related injuries and illnesses, and yield reductions in associated healthcare and social services costs, and improvements in the quality of life. By targeting housing improvements at early intervention in communities most likely at risk, substantial returns may be realized.

**INSURED HEALTHCARE FACILITIES**

The Office of Healthcare Programs (OHP) administers the Section 232 Residential Care Facilities Program and Section 242 Hospitals Program, which provide mortgage insurance for loans supporting the construction, renovation, equipping, and/or refinancing of healthcare facilities through HUD’s Federal Housing Administration (FHA). These facilities include nursing homes, assisted living facilities, and board and care facilities, and acute care hospitals ranging from large urban teaching institutions to small rural critical access hospitals. FHA’s healthcare facilities serve an ever-growing needy population of Medicare, Medicaid, and uninsured patients. FHA mortgage insurance decreases healthcare costs by reducing the cost of capital for healthcare facilities and increases accessibility to care by enabling facilities to access financing for much-needed improvements or projects. Both healthcare programs maintain a negative credit subsidy rate and operate at no cost to the American taxpayer.
Healthcare facilities are major economic engines in our nation’s communities. Nationwide, healthcare facilities employ 7.9 million people and support $2.7 trillion in economic activity. Both of FHA’s healthcare programs are significant contributors to increasing economic stimulus and job creation in communities nationwide. Using the widely respected IMPLAN economic model, OHP calculated the economic benefits for all hospitals that received mortgage insurance commitments in 2010. For Fiscal Year 2010, total construction expenditures for all hospital commitments were $1.4 billion, resulting in an estimated 15,465 new jobs and $3.9 billion of overall economic benefit. Following construction, these projects will generate an estimated annual new economic activity of $1.4 billion and 8,464 new jobs.

INTERAGENCY PARTNERSHIPS

HUD has developed close partnerships with a variety of Federal agencies in order to better align housing programs with health and social service programs for families across the country. In one such partnership HUD is working together with the Departments of Health and Human Services (HHS), and Education to link health and social services with housing vouchers in order to further the goal of ending homelessness and help model future partnering opportunities to assist homeless families and individuals. In FY 2012 HUD is requesting **$56.9 million in HUD-HHS vouchers**. With this request, HUD expects to fund 10,000 vouchers, of which 6,000 will be targeted towards chronically homeless, and another 4,000 will assist families with school-aged children.

In another partnership with HHS, HUD is working to help individuals with disabilities by improving alignment of housing programs and health and social service programs. Specifically, this partnership has included:

- **1,000 Non-Elderly Disabled Vouchers** to be released in connection with the Center for Medicare and Medicaid Services’ “Money Follows the Person” Program, to target disabled individuals wishing to transition from institutional settings to the community.
- **Housing Resource Coordinators** to facilitate the linkages between Medicaid services and the resources available through Public Housing Agencies.
- **Capacity Building Effort** to promote collaboration between human service agencies and housing agencies at the federal, state and local levels to improve the support of persons with disabilities.

HUD has also developed a close partnership with the Department of Veterans Affairs (VA) to target assistance to veterans across the country. Veterans Affairs Supportive Housing vouchers (HUD-VASH) provide tenant-based rental assistance, case management and clinical services tailored to veterans and their families. In FY 2012 HUD is requesting **$75 million in Veterans Affairs Supportive Housing (HUD-VASH) vouchers**, which will support an estimated 11,500 veterans nationwide. With this funding, Public Housing Authorities (PHAs) awarded HUD-VASH vouchers develop critical partnerships with VA medical centers to help homeless veterans find permanent supportive housing.

Taken together, through partnerships at the federal, state, and local levels, HUD strives to utilize its housing platform to deliver a wide variety of services to improve the quality of life of its residents and the surrounding community. HUD aims to accomplish this by building formal and informal relationships with public and private healthcare providers and with health education organizations to provide access to healthcare information and services for recipients of HUD assistance. HUD will also encourage management practices that enhance the health of housing residents, and, where possible, HUD will partner with clinical service providers to provide physical space for healthcare service delivery on site at HUD-funded facilities.