

## U.S. Department of Housing and Urban Development

Public and Indian Housing

Mainstream Voucher Program

Lubbock Texas

Mainstream Voucher Program

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#### Policy Priorities

This PROGRAM adopts the following policy priorities:

1. Leverage coordination with state Medicaid agencies, health and human services agencies, homelessness assistance providers, including Continuums of Care, in the identification and prioritization of eligible families;
2. Mobilize vouchers in alignment with other state and local priorities to advance *Olmstead* compliance; to successfully integrate non-elderly persons with disabilities who are in institutional or other segregated settings or are at risk of institutionalization into communities; and/or to prevent and end homelessness among non-elderly persons with disabilities.

#### Partnerships

Although PHAs may provide vouchers to any eligible non-elderly person with a disability, the PROGRAM review process awards more points to those PHAs that set up partnerships and preferences for eligible persons that are transitioning out of institutional or other segregated settings, at serious risk of institutionalization, currently experiencing homelessness, previously experienced homelessness and currently a client in a permanent supportive housing or rapid rehousing project, or those at risk of experiencing homelessness. Partnerships are encouraged but not required.

Applicants are encouraged to establish formal partnerships with multiple health and human service agencies or organizations with a demonstrated capacity to coordinate voluntary services and supports to enable individuals to live independently in the community. PHA partnerships with organizations that administer the community's Coordinated Entry System is also encouraged. These partnerships should assist the PHA to use these vouchers by providing referrals, assisting with a timely transition to a unit, providing the opportunity to access any supportive services and supports, and helping with the housing search and leasing process. Demonstrated capacity may refer to previous experience and a well-developed plan to provide referrals, services, and supports, such as organizations participating in a state-wide *Olmstead*

plan to assist obtaining integrated housing throughout the community, in the [Money Follows the Person](#) demonstration to assist transitions from institutional to community settings, or in implementing a state or local plan to prevent and end homelessness.

A well-developed plan would align with any existing state *Olmstead* plan, the community's plan to prevent and end homelessness, and any other existing state plans for housing/community living for persons with disabilities, and detail how the partnerships will function to provide outreach and referrals, transition services, tenancy support, and other services and supports. Applicants with no significant previous experience with these types of partnerships may also meet these requirements by detailing the specified plan above and documented efforts and intention to establish these types of partnerships.

In addition to receiving referrals from partner agencies, the PHA must allow non-elderly persons with disabilities to apply directly to the program without going through a partner agency. There is no limit to the number of agencies a PHA may partner with for referrals and supportive services.

### **1. Program Definitions.**

*Eligible family:* A family composed of one or more non-elderly person with disabilities, which may include additional members who are not non-elderly persons with disabilities. A family where the sole member is an emancipated minor is not an eligible family.

The terms "disability" and "person with disabilities" are used in two contexts - for civil rights protections, and for program eligibility purposes. Each use has specific definitions. When used in the context of application of Federal civil rights laws and requirements, including the prohibition against discrimination, the civil rights related definitions apply. When used in the context of eligibility under this PROGRAM, the program eligibility definitions apply.

*Non-elderly person with disabilities (for purposes of determining eligibility):* A person 18 years of age or older and less than 62 years of age, and who:

- Has a disability, as defined in 42 U.S.C. 423;
- Is determined, pursuant to HUD regulations, to have a physical, mental, or emotional impairment that:
- Is expected to be of long-continued and indefinite duration;
- Substantially impedes his or her ability to live independently, and
- Is of such a nature that the ability to live independently could be improved by more suitable housing conditions; or
- Has a developmental disability as defined in 42 U.S.C. 6001.

*Person with disabilities (for purposes of civil rights):* see 24 CFR § 8.3; as amended by the

ADA Amendments Act of 2008; 24 CFR § 100.201; 28 CFR §§ 35.104, 108).

*Continuum of Care (CoC)* means the group organized to carry out the responsibilities required under the CoC Program interim rule and that is composed of representatives of organizations, including nonprofit homeless providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, organizations that serve homeless and formerly homeless veterans, and homeless and formerly homeless persons to the extent these groups are represented within the geographic area and are available to participate.

*Rapid rehousing* means time-limited housing assistance in which supportive services are provided to assist homeless persons rapidly connect to and maintain permanent housing.

**The following definitions are provided as a guide for the purposes of this PROGRAM, however, PHAs may use applicable local or state definitions if available as long as individuals who fall under these definitions are still eligible.**

*Institutional or other segregated settings* include, but are not limited to: (1) congregate settings populated exclusively or primarily with individuals with disabilities; (2) congregate settings characterized by regimentation in daily activities, lack of privacy or autonomy, policies limiting visitors, or limits on individuals' ability to engage freely in community activities and to manage their own activities of daily living; or (3) settings that provide for daytime activities primarily with other individuals with disabilities.

*At serious risk of institutionalization:* Includes an individual with a disability who as a result of a public entity's failure to provide community services or its cut to such services will likely cause a decline in health, safety, or welfare that would lead to the individual's eventual placement in an institution. This includes individuals experiencing lack of access to supportive services for independent living, long waiting lists for or lack of access to housing combined with community-based services, individuals currently living under poor housing conditions or homeless with barriers to geographic mobility, and/or currently living alone but requiring supportive services for independent living. A person cannot be considered at serious risk of institutionalization unless the person has a disability. An individual may be designated as at serious risk of institutionalization either by a health and human services agency, by a community-based organization, or by self-identification.

*Persons currently experiencing homelessness* means:

(1) An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:

- An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
- An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, State, or local government programs for low-income individuals); or
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- An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

(2) An individual or family who will imminently lose their primary nighttime residence, provided that:

- The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;
- No subsequent residence has been identified; and
- The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing;

(3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:

- Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)), or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a);
- Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;
- Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and
- Can be expected to continue in such status for an extended period of time because of chronic disabilities; chronic physical health or mental health conditions; substance addiction; histories of domestic violence or childhood abuse (including neglect); the presence of a child or youth with a disability; or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment; or

(4) Any individual or family who:

- Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;
- Has no other residence; and
- Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing.
- *At risk of experiencing homeless:* An individual or family who:

(i) Does not have sufficient resources or support networks, e.g., family, friends, faith-based or other social networks, immediately [available](#) to prevent them from moving to an [emergency shelter](#) or another place described in paragraph (1) of the “Homeless” definition in this section; and

(ii) Meets one of the following conditions:

- Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homelessness prevention assistance;
- Is living in the home of another because of economic hardship;
- Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 21 days of the date of application for assistance;
- Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or by federal, [State](#), or local government programs for low-income individuals;
- Lives in a single-room occupancy or efficiency apartment unit in which there reside more than two persons, or lives in a larger housing unit in which there reside more than 1.5 people per room, as defined by the U.S. Census Bureau;
- Is exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, foster care or other youth facility, or correction program or institution); or
- Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness.

*Permanent supportive housing* means permanent housing in which voluntary supportive services are provided to assist homeless persons with a disability to live independently.

## **2. Web Resources.**

- [Affirmatively Furthering Fair Housing Regulations](#)
- [Code of Conduct list](#)
- [Do Not Pay](#)
- [Dun & Bradstreet](#)
- [Equal Participation of Faith-Based Organizations](#)
- [Federal Awardee Performance and Integrity Information System](#)
- [FFATA Subaward Reporting System](#)
- [Grants.gov](#)
- [Healthy Homes Strategic Plan](#)
- [Healthy Housing Reference Manual](#)
- [HUD Funding Opportunities](#)
- [HUD’s Strategic Plan](#)
- [HUD Grants](#)
- [Limited English Proficiency](#)

- [PROGRAM webcasts](#)
- [Opportunity Zone](#)
- [Procurement of recovered materials](#)
- [Section 3 Business Registry](#)
- [State Point of Contact List](#)
- [System for Award Management \(SAM\)](#)
- [Uniform Relocation Act – Real Property Acquisition and Relocation Requirements](#)
- [USA Spending](#)

**B. Authority.**

The statutory authority for the Mainstream Voucher Program is the Cranston-Gonzalez National Affordable Housing Act, 42 U.S.C. 8013 (Public Law 101-625) as amended by the Frank Melville Supportive Housing Act of 2010 (Public Law 111-374), the Consolidated Appropriations Act, 2018 (Public Law 115-141) and the Consolidated Appropriations Act, 2019 (Public Law 116-6, approved February 15, 2019).

**II. Award Information.**

**A. Available Funds.**

Funding of up to **\$175,872** is available through this PROGRAM.

Additional funds may become available for award under this PROGRAM, because of HUD's efforts to recapture unused funds, use carryover funds, or because of the availability of additional appropriated funds. Use of these funds is subject to statutory constraints. All awards are subject to the applicable funding restrictions contained in this PROGRAM.

**D. Period of Performance.**

Estimated Project Start Date:	02/01/2020
Estimated Project End Date:	01/31/2021
Length of Project Periods:	12-month project period and budget

period

Length of Project Periods Explanation of Other:

**E. Type of Funding Instrument.**

Funding Instrument Type:

Grant

**F. Supplementation.**

**III. Eligibility.**

**F. Program-Specific Requirements Affecting Eligibility.**

**Housing Choice Voucher (HCV) Program Requirements.** HCVs awarded under this PROGRAM will be subject to all program requirements, including those at 24 CFR part 982, or part 983 if vouchers are project-based. Moving to Work (MTW) agencies may administer these vouchers under their MTW agreements, unless an MTW provision (or provisions) is inconsistent with Appropriations Act requirements or the requirements of this PROGRAM. If a conflict occurs, the Appropriations Act and/or this funding notice govern.

**Recapture and Reallocation of Funds.** Funds awarded may be recaptured and reallocated and units awarded may be reduced if the PHA does not comply with the requirements of the PROGRAM or fails to achieve a utilization rate of 80% for the PHA's Mainstream vouchers within 1 year of the new award's effective date. Funds may be reallocated for the following purposes: to cover a spending shortfall within the Mainstream Voucher Program, to increase the renewal proration rate, or to fund new units. PHAs should consider their ability to achieve this utilization rate within the first year when determining the maximum number of vouchers requested.

**Nondiscrimination Requirements for Partnerships.** Establishing a network of referrals and supports through PHA partnerships with service agencies should help ensure voucher utilization, especially among individuals transitioning from institutional and other segregated settings and individuals at serious risk of institutionalization. While HUD does not require a particular structure for partner agreements, HUD encourages PHAs to develop partnerships with several agencies at both the state and local level. This may be accomplished by formalizing agreements with several community-based organizations committing to provide supports and referrals, or alternatively, by formalizing agreements with primary partner agencies that in turn have demonstrated commitments to work with various identified community-based organizations. This commitment may be demonstrated by identifying the various local organizations the PHA and primary partner agencies will work with through this network. This may include, for example, organizations assisting with discharge/transition planning and case management; supported employment providers; state Medicaid agencies (SMAs); Centers for Independent Living (CILs); fair housing organizations; state Aging and Disability Resource Centers (ADRCs); Area Agencies on Aging (AAA); State Protection and Advocacy Agencies (P&A's); Community Mental Health Centers and/or Long-Term Care Ombudsmen; Accountable Care Organizations; health and human service agencies; CoCs; other State agencies; and other various entities.

Such partnerships, however, cannot result in eligibility requirements which may violate nondiscrimination requirements under any applicable Federal civil rights statutes and

requirements, including Section 504 of the Rehabilitation Act (Section 504), titles II or III of the Americans with Disabilities (ADA), and the Fair Housing Act and their implementing regulations at 24 CFR part 8; 28 CFR parts 35 and 36; 24 CFR part 100. PHAs cannot restrict the vouchers to those referred or approved by a single state or local agency or to persons with specific disabilities or diagnoses unless through a HUD-approved remedial action. See HUD's Statement on the Role of Housing in Accomplishing the Goals of *Olmstead*, <https://www.hud.gov/sites/documents/OLMSTEADGUIDNC060413.PDF>. For example, PHAs cannot exclusively partner with a local organization that solely provides services to individuals with a specific type of disability, or with a state Medicaid agency whose programs do not provide service options for individuals with certain disabilities; such partnerships would result in referrals being limited to individuals with a limited range of disabilities who qualify for specific service programs and exclude individuals with other types of disabilities who otherwise would qualify for participation in the voucher program.

**Voluntary Supportive Services.** PHAs (including MTW agencies) or partner agencies/organizations must not require participants to utilize supportive services as a condition for participation. Moreover, individuals with disabilities are not required to accept any services as a condition of housing assistance. Individuals may receive services from a different provider of their choosing or choose not to participate in any services.

**Option to Apply Directly.** PHAs must allow qualifying persons with disabilities that are transitioning out of institutional or other segregated settings, at serious risk of institutionalization, currently or experiencing homelessness, previously experienced homelessness and currently a client in a permanent supportive housing or rapid rehousing project, or at risk of experiencing homeless to apply directly to the PHA for the program.

**Program Evaluation.** As a condition of the receipt of financial assistance under this PROGRAM, all Grantees will be required to cooperate with HUD, Department of Health and Human Services (HHS), and Centers for Medicare & Medicaid Services (CMS), or any contractors affiliated with HUD, HHS, and CMS in evaluating this program. HUD may pursue the option to fund a rigorous independent evaluation of this program, or HUD may choose to utilize existing administrative data and data submitted by grantees as part of quarterly and annual reports to assess the effectiveness of the program. As stated in PIH Notice 2010-25 (HA) and the HUD- 50058 Instruction Booklet, PHAs must submit a HUD-50058 (or HUD-50058 MTW) for the appropriate actions completed. For research and evaluation, the following action codes are particularly important: Voucher Issuance (action type 10), Voucher Expiration (action type 11), and End of Participation (action type 6).

**Effective Communication.** All notices and communications must be provided in a manner that is effective for persons with hearing, visual, and other communication-related disabilities consistent with Section 504 of the Rehabilitation Act and HUD's Section 504 regulation, and Titles II or III of the ADA and implementing regulations. Recipients must provide appropriate auxiliary aids and services necessary to ensure effective communication, which includes ensuring that information is provided in appropriate accessible formats as needed, e.g., Braille, audio, large type, assistive listening devices, and sign language interpreters, accessible websites and other electronic communications (See 24 CFR 8.6; 28 CFR 35.160, 36.303).



## **G. Criteria for Beneficiaries.**

Voucher recipient families must include a person that meets the definition of a non-elderly person with disabilities.

## **IV.**

### **C. Reporting.**

HUD requires recipients to submit performance and financial reports under OMB guidance and program instructions.

**1. Reporting Requirements and Frequency of Reporting.** Applicants should be aware that if the total Federal share of your Federal award includes more than \$ 500,000 over the period of performance, you may be subject to post award reporting requirements reflected in Appendix XII to Part 200-Award Term and Condition for Recipient Integrity and Performance Matters.

**2. Performance Reporting.** All HUD-funded programs, including this program, require recipients to submit, not less than annually, a report documenting achievement of outcomes under the purpose of the program and the work plan in the award agreement.

**3. Race, Ethnicity and Other Data Reporting.** HUD requires recipients that provide HUD-funded program benefits to individuals or families to report data on the race, color, religion, sex, national origin, age, disability, and family characteristics of persons and households who are applicants for, participants in, or beneficiaries or potential beneficiaries of HUD programs in order to carry out the Department's responsibilities under the Fair Housing Act, Executive Order 11063, Title VI of the Civil Rights Act of 1964, and Section 562 of the Housing and Community Development Act of 1987. PROGRAMs may specify the data collection and reporting requirements. Many programs use the Race and Ethnic Data Reporting Form HUD-27061, U.S. Department of Housing OMB Approval No. 2535-0113.

### **D. Debriefing.**

For a period of at least 120 days, beginning 30 days after the public announcement of awards under this PROGRAM, HUD will provide a debriefing related to their application to requesting applicants. A request for debriefing must be made in writing or by email by the authorized official whose signature appears on the SF424 or by his or her successor in office and be submitted to the point of contact in Section VII Agency Contact(s), below. Information provided during a debriefing may include the final score the applicant received for each rating factor, final evaluator comments for each rating factor, and the final assessment indicating the basis upon which funding was approved or denied.

## **VII.**

note that HUD staff cannot assist applicants in preparing their applications.

## **VIII.**

## **Eligible Individuals and Families**

A. In order to be eligible for use of an LHA HCV in LOD PSH, individuals and families must meet all of the following criteria:

1. Through the Coordinated Entry Assessment tool(s), be determined to need the assistance of a permanent supportive housing program in order to obtain and/or maintain permanent housing;
2. Meet HUD's definition of chronic homelessness on the date of their enrollment in case management for permanent supportive housing;
3. Meet all of the eligibility criteria for the Section 8 program; and,
4. Be enrolled in the supportive services component of a permanent supportive housing program.

## **4. Lubbock Open Door Roles and Responsibilities**

A. Lubbock Open Door will coordinate outreach and referrals for eligible individuals and families to Lubbock Housing Authority for this program by submitting complete referral/application packets and all required documentation.

B. LOD will designate one case manager to serve as the primary liaison to the Lubbock Housing Authority for this program.

C. LOD will accompany all referred individuals to provide assistance throughout the application process.

D. LOD will assist persons with disabilities to apply to and obtain acceptance in this program, find housing, and secure home modifications and/or disability-related modifications.

E. LOD will provide outreach to recruit landlords to participate in the Housing Choice Voucher and Mainstream Voucher Programs.

F. LOD will provide supportive services to help program participants obtain and maintain their housing. LOD integrates case management, primary healthcare services, and a variety of housing and supportive services to help chronically homeless individuals obtain and retain permanent housing. LOD is responsible for helping individuals or families in the program:

1. Enroll, engage, and remain engaged in services;
2. Obtain permanent housing as quickly as possible, with the goal of moving into housing within 30 days of enrollment in case management;
3. Remain housed for at least 12 months or leave the program for other stable and affordable housing situations;
4. Improve their health and wellness, an indication of which can be a reduction in the unnecessary utilization of emergency and acute health services;
5. Improve their self-sufficiency by obtaining and retaining sufficient resources to meet their basic needs;
6. Obtain and retain stable income;
7. Receive appropriate medical and behavioral health services; and,
8. Meet the goals that they set for themselves with respect to self-sufficiency, employment, and quality of life.

G. LOD is responsible for:

1. Outreach, Enrollment, Assessment, and Planning
  - a. Locating each potential client, establishing trust and rapport and enrolling the individual (or family) into the program;
  - b. Conducting assessments to identify needs, eligibility for entitlement programs (e.g., General Assistance) and self-sufficiency needs;
  - c. Maintaining appropriate levels of engagement and sustaining clients' belief in recovery; and,
  - d. Developing client-centered service plans to obtain and retain housing, improve health conditions, improve daily living activities, increase meaningful daily activities, and to achieve long-term stability.
2. Housing Attainment and Retention
  - a. Assist clients to obtain and maintain permanent housing, including physically accessible units where appropriate, by assisting with rental application process (and re-certifications);
  - b. Initial lease agreements must be one year and only terminable for cause;
  - c. Helping clients understand the lease provisions and property requirements;
  - d. Assisting clients with their move-ins including coordinating furniture and household goods;
  - e. Providing clients with the skills and knowledge to be successful tenants;
  - f. Helping to resolve disputes between the participant, property management and/or other residents;
  - g. Helping individuals respond effectively and appropriately to lease violations;
  - h. Responding to crises identified by the client, the property management, or other persons (as appropriate) within one business day;
  - i. Helping clients relocate to other permanent housing when it is in the best interest of the client; and,
  - j. Performing wellness checks when needed.
3. Treatment and Services. All services are voluntary, connected to a treatment or services plan, responsive to the participant's needs/diagnosis, and geared toward helping them manage symptoms. LOD:
  - a. Provides or helps clients access primary care, specialty care, dental care, and behavioral health services, including substance abuse counseling, individual and family counseling, crisis intervention/support, and medication management/education;
  - b. Coordinates health services or supports health care providers in their efforts to coordinate health services;
  - c. Assists clients in applying for assistance programs including, but not limited to, Supplemental Security Income, General Assistance, and utilities assistance;
  - d. Helps clients access employment services, job training, and/or volunteering opportunities;
  - e. Identifies, encourages, and helps clients connect to social networks, peer support, and leisure activities; and,
  - f. Assists clients with other basic needs such as transportation, food/nutrition, life skills, and basic hygiene.
4. Administrative Activities. LOD is responsible for documenting services for

assessment, care planning, clinical, billing, program assessment, and reporting purposes. This includes the use of the Homeless Management Information System (HMIS).

## **5. Lubbock Housing Authority Roles and Responsibilities**

A. Lubbock Housing Authority will designate one manager to serve as the primary liaison to Lubbock Open Door for this program.

B. LHA will allocate 3 Housing Choice Vouchers and 25 Mainstream Vouchers for use by LOD PSH. In connection to such vouchers, LHA will perform the following activities:

1. Perform initial eligibility screening as well as the initial and ongoing income certifications for program participant referrals from LOD for qualification of housing and continued eligibility in the program.
2. Conduct initial and ongoing Housing Quality Standards (HQS) inspections in accordance with applicable regulations.
3. Once a voucher is issued, LHA will provide the appropriate rental subsidy (HCV) until such time as the voucher holder exits from the program or is terminated in accordance with the LHA's Administrative Plan.
  - a. In accordance with the Continuum of Care Program regulations, no minimum tenant rent payments may be required. For example, if a tenant's total income from all sources is \$0, then the tenant portion of the rent (30%) must also be \$0.
4. LHA shall make every effort to issue vouchers to eligible participants within (10) business days after receiving all necessary documents. Issuing vouchers in a timely manner is critical to enabling clients to be successful in their housing search.
5. LHA will notify LOD of any changes to Housing Assistance Payment contracts related to LOD PSH.
6. To the extent necessary to administer the program and to coordinate supportive housing services, and with the appropriately signed Consent Forms and/or Releases of Information, LHA will take the necessary and appropriate steps to share voucher holder's personal information with LOD.
7. Lubbock Housing Authority will provide Lubbock Open Door with the financial and administrative data that is necessary for LOD to effectively manage and improve the LOD permanent supportive housing program. Use of the data may include, but not be limited to, determining the full costs of the programs and reporting on match requirements for grants. At minimum, for each voucher holder, LHA will inform LOD of: 1) the date that the tenant is housed under the program and has permanently left the program; 2) the dates when the housing assistance payments ended and/or restarted due to move-outs or move-ins; and 3) the amount of housing assistance payments.

To ensure accuracy of information among the Parties, LHA will also provide LOD with quarterly summary reports for all participants in LOD PSH receiving a Housing Choice Voucher or Mainstream Voucher. The quarterly summary reports will include tenant identification, the date that the tenant is housed under the program or has permanently left the program, the current amount of housing assistance payments for each tenant, and the dates when the housing assistance payments ended and/or restarted due to move-outs or move-ins.

## **6. Vouchers as HUD CoC Match**

A. The Parties agree that vouchers allocated in relation to this Memorandum of Understanding may be used as in-kind match. The use of vouchers as match to U.S. Department of Housing and Urban Development (HUD) Continuum of Care (CoC) Program grants is described below:

1. Lubbock Open Door is a recipient of a grant, known as the “Lubbock Open Door PSH”, grant number TX0471L6T071801, from HUD through its CoC Program, through which LOD must serve at least 39 chronically homeless individuals in a permanent supportive housing program. This grant has a 1-year term and is renewable on an annual basis for additional 1-year terms.
2. 3 Housing Choice Vouchers and 25 Mainstream Vouchers will be dedicated as in-kind match for the Lubbock Open Door PSH grant.
3. These HCVs will provide rental assistance to the households served by the Lubbock Open Door PSH grant.
4. The average per unit cost (PUC) per month for HCVs administered by LHA was \$493 as of September 3, 2019. Based on the PUC, the estimated amount of rental assistance that will be paid and available as in-kind match for this project is \$165,648 per year. The actual amount of rental assistance will be determined on a client-by-client basis and reported at the end of the grant year.
5. LHA agrees to maintain and make available for inspection the records documenting the rental assistance provided on behalf of the participants for any grant year in which vouchers are used as in-kind match.
6. Upon LOD’s request, LHA will provide an annual report of the total amount of rental assistance payments provided on behalf of the clients served under the LOD PSH