



# Healthcare Financing of Healthy Homes: The Outlook for 2025 and Beyond

# But wait!

I'm not a(n)...

...healthcare provider

...managed care plan

...economist



NOVEMBER 15TH, 2016

# Post-Election Analysis: Healthcare Financing for Healthy Homes Services Still Hard, Still Possible, Still Important

*by Amanda Reddy*

Two days after the recent presidential election I had to make a decision. I was supposed to be getting on a plane to California so that I could give a talk about opportunities to finance healthy homes services through the healthcare sector. This is a presentation I have given many times. I think and talk about this subject every day (yes, even weekends, #PublicHealthNerd). But I found myself at a loss for what to say. My hesitation wasn't even a commentary on the outcome of the election but rather a reaction to the plain fact that, regardless of whether the idea thrilled or repulsed me, our healthcare system might be about to undergo another radical transformation.

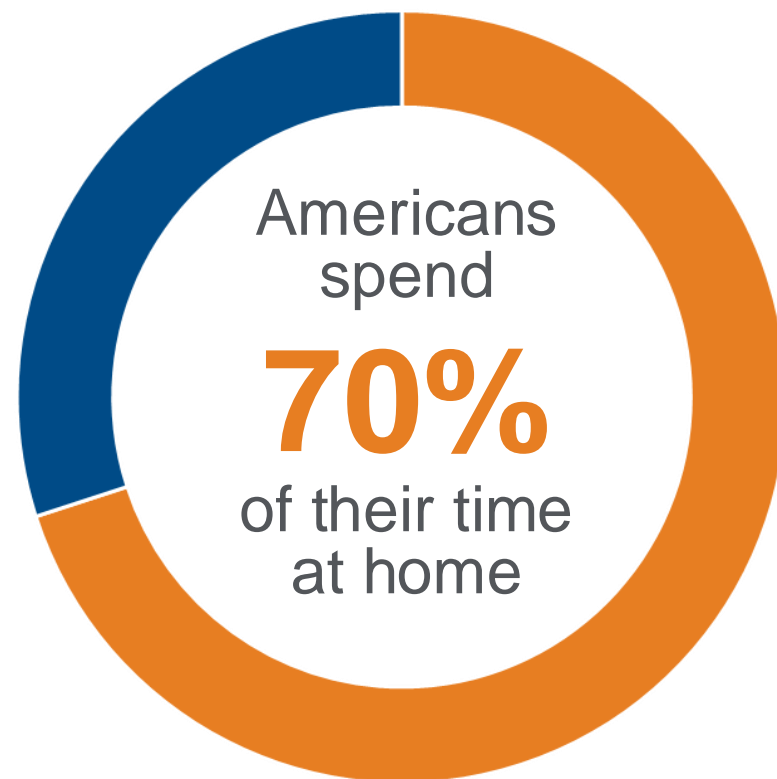
The word "might" in that sentence is important. Because it is the uncertainty of what the scale and nature of that transformation could look like that made me wonder why I should fly across the country to stand in front of a room full of people and pretend that I had any answers about how to navigate this new reality. About how we would continue our work to ensure and expand access to critical public health services like home-based asthma and lead poisoning follow-up services.

But then I remembered. I remembered three things.

# Three truths... no lies

- We don't know yet what might happen at the federal level.
- Even if there are radical shifts in Medicaid, there are still significant opportunities at the local level.
- We can use this time to lay the groundwork for more expansive plans to partner with the healthcare sector later on.

# Why housing is healthcare



*National Human Activity Pattern Survey*

# Why housing is healthcare

Housing affects health in multiple ways:

## Location

Physical neighborhood attributes affect health by facilitating (or impairing) walkability/bikeability, proximity to traffic, outdoor air quality, and access to public transportation, parks and fresh fruits and vegetables.

## Affordability

Unaffordable housing costs affect health by reducing the income that a household has available for nutritious food and necessary health care expenses, as well by causing stress, residential instability, and crowding.

## Demographics

Social and community attributes, such as social cohesion, segregation and the concentration of poverty, also have an impact on health.

## Quality

Housing quality can impact physiological health (e.g., lead, radon, mold, extreme temperatures), psychological health (e.g., noise, inadequate light), and safety (e.g., falls, fires).

# Housing conditions and health



Fire safety



Radon



Pests



Ventilation



Lead



Temp/humidity



Mold/moisture



ETS



Other contaminants



Carbon monoxide



Structural issues



Cleaning and clutter

# Housing conditions and health

- Asthma, allergies, and other respiratory
- Lead poisoning
- Cognitive/behavioral impairment
- Falls/injuries (including falls, fire injuries)
- Cancer
- Cardiovascular events
- Poisonings
- Death
- Mental health
- Infectious disease
- (and many other quality-of-life outcomes)



# 40%

## of U.S. homes

have at least one health or safety hazard

**These risks are not equally distributed.**

# Economic Benefits

## Making the case for investing in housing quality



### ASTHMA HOME INTERVENTIONS

Minor- to moderate-intensity interventions provide good value for the money invested. For every dollar invested:

Societal perspective (Community Guide): \$5.30-\$14.00:\$1.00  
Payer perspective (NYS HNP): \$2.03-3.58

[www.thecommunityguide.org/asthma/supportingmaterials/Asthma%20Econ.pdf](http://www.thecommunityguide.org/asthma/supportingmaterials/Asthma%20Econ.pdf)  
[nchh.org/research/nys-hnp-a-cost-benefit-analysis-of-a-state-funded-healthy-homes-program-for-residents-with-asthma/](http://nchh.org/research/nys-hnp-a-cost-benefit-analysis-of-a-state-funded-healthy-homes-program-for-residents-with-asthma/)

CO

### CARBON MONOXIDE

The benefit of using CO detectors in homes to prevent unintentional non-fire-related carbon monoxide poisoning can considerably exceed the costs of installation. **The benefit-cost ratio can be as high as 7.2 to 1.**

Am J Emerg Med. 2018 Mar;36(3):414-419  
<https://pubmed.ncbi.nlm.nih.gov/28888530/>



### SMOKE-FREE HOUSING

Prohibiting smoking in subsidized housing would yield **annual cost savings of \$496.82 million**, including \$310.48 million in secondhand smoke-related health care, \$133.77 million in renovation expenses, and \$52.57 million in smoking attributable fire losses.

King BA, Peck RM, Babb SD. *Prev Chronic Dis* 2014;11:140222.

Pb

### LEAD HAZARD CONTROL

Eradicating lead paint hazards from older homes of children from low-income families would provide a benefit/return of **\$1.39 per dollar invested**.

[www.pewtrusts.org/en/research-and-analysis/reports/2017/08/10/policies-to-prevent-and-respond-to-childhood-lead-exposure](http://www.pewtrusts.org/en/research-and-analysis/reports/2017/08/10/policies-to-prevent-and-respond-to-childhood-lead-exposure)

[www.valueofleadprevention.org](http://www.valueofleadprevention.org)



# Examples

Decreasing energy usage that also improve health



**Coinvesting in climate and health not only helps those endpoints but can also help jobs, home values, energy bills, and more...**

National Center for  
**HEALTHY HOUSING**

<https://nchh.org/research/clear-win/>

<https://nchh.org/research/stove-iaq/>

<https://rmi.org/insight/gas-stoves-pollution-health/>

**So... is this all just  
theoretical?**

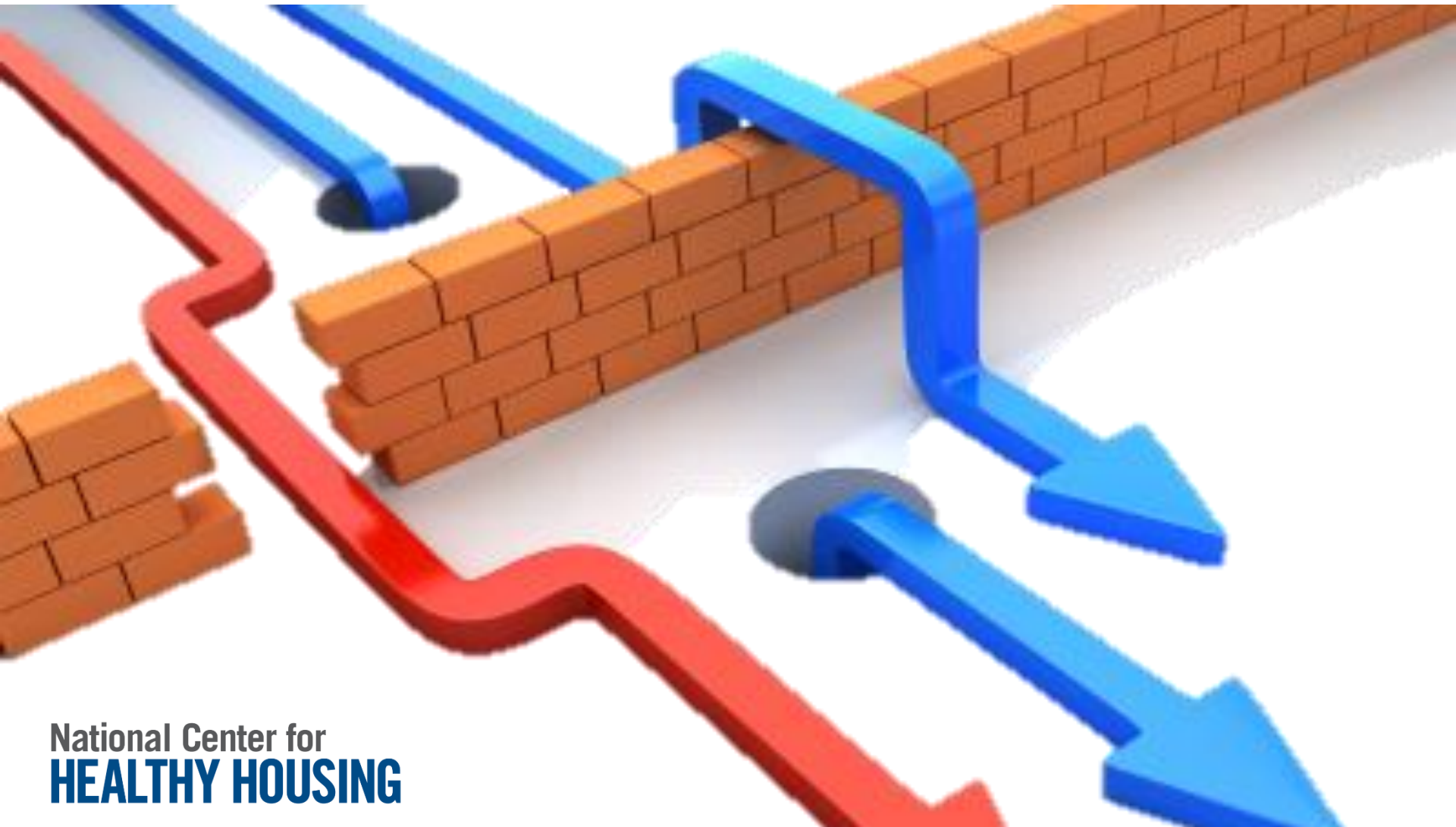
More than a decade ago, an NCHH survey of all 50 states found that **a total of 27 states (54%) had some Medicaid reimbursement policy in place** for either home-based asthma services or follow-up services for children with lead exposure.

# Many pathways have been identified

- **Medicaid Managed Care contracts or incentives**
  - *EXAMPLE: [As part of a state-led quality improvement project for Medicaid MCOs, The Monroe Plan for Managed Care developed a disease management program for children with asthma that included home environmental assessments and supplies](#)*
- **Administrative expenses (individual MCOs)**
  - *EXAMPLE: [Three managed care plans in CA \(Alameda Alliance for Health, Asthma Start Program, Inland Empire Health Plan, Health Navigator Program and L.A. Care Health Plan, L.A. Cares About Asthma\)](#)*
- **Reimbursement for direct services**
  - *EXAMPLE: [The Texas Childhood Lead Poisoning Prevention Program obtained a provider number and was able to receive reimbursements for environmental lead investigations.](#)*
- **Medicaid Administrative Claiming**
  - *EXAMPLE: [Texas lead program received reimbursement for services administrative and other functions that benefitted the efficient administration of the state Medicaid and EPSDT programs.](#)*
- **Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefit**
  - *EXAMPLE: [In 2014, 11 states reported to NCHH that lead follow-up services were covered under EPSDT.](#)*
- **1115 Waivers**
  - *EXAMPLE: [MassHealth Pediatric Asthma Bundled Payment Pilot](#) and [NYS DSRIP Incentive Program](#)*
- **State Plan Amendments**
  - *EXAMPLE: [Health Service Initiatives](#) like those in [Michigan](#) and [Maryland](#)*
- **In Lieu of Services**
  - *EXAMPLE: [California Environmental Asthma Trigger Remediation](#)*
- **Hospital Community Benefits**
  - *EXAMPLE: [Boston Children's Hospital's Community Asthma Initiative](#) conducted home environmental assessment and provides education, materials, and supplies to reduce triggers, including HEPA vacuums*

# Other Sustainable Financing

(complement/alternative to healthcare financing)





# EXAMPLES

## Other Sustainable Financing

- **State General Fund**
  - [New York Healthy Neighborhoods Program](#)
- **MA Prevention and Wellness Trust**
  - [Part of state healthcare reform, funded by tax on hospitals](#)
- **Settlement Agreements**
  - [Montana Tobacco Master Settlement Agreement](#)
- **Home Delivered Meals Programs**
  - [Meals on Wheels In-Home Safety Initiative](#)
- **Community Paramedicine**
  - [New Hampshire Mobile Integrated Healthcare](#)
- **Partnership with Energy or Other Home Visiting Programs**
  - [Home Rx: The Health Benefits of Home Performance](#)
- **Home Repair Programs**
  - [Rebuilding Together](#) or [Habitat for Humanity](#)
  - [Expanding local home repair programs](#)

# Spotlight on Hospital Community Benefits

Nonprofit hospital organizations (which make up about 60% of all U.S. hospitals) are required by federal tax law to spend some of their surplus on “community benefits,” which are goods and services that address a community need. They must report this spending to the Internal Revenue Service (IRS) on Form 990-H each year in order to maintain their exemption from paying federal income taxes. The allowable purposes of community benefits have included improving access to care, enhancing community health, advancing medical knowledge, and reducing government burden. To meet the IRS requirement, many hospitals have traditionally provided free or low-cost clinical care to low-income patients and paid for hospital-centered outreach activities.

No nonprofit hospital? No worries. Some recent analyses suggest that for-profits may give as much, or maybe even slightly more, financial assistance than their nonprofit counterparts.

# Community Building Activities

- Physical improvements and housing
- Economic development
- Community support
- Environmental improvements
- Leadership development and training for community members
- Coalition building
- Community health improvement/advocacy
- Workforce development
- Other community building activities or programs

## FROM THE ARTICLE:

Hospitals can take action to alleviate housing instability and improve housing quality in a variety of ways, including the following:

- Screening patients for housing insecurity and connecting them to community organizations that can help
- Improving the quality of existing housing stock, particularly for low-income households
- Building up the supply of quality housing, whether temporary or permanent, that meets the needs of underserved community members
- Supporting patients by offering rental assistance and supportive services
- Investing in efforts to advocate for policies that strengthen and stabilize housing

National Center for  
**HEALTHY HOUSING**

REPORT | FEB 26, 2025

### Nonprofit Hospitals Can Improve Community Health Through Housing Investments

Nonprofit hospitals have an obligation to provide community benefits; as part of this, they should do more to support the housing needs of the communities they serve.

AUTHORS

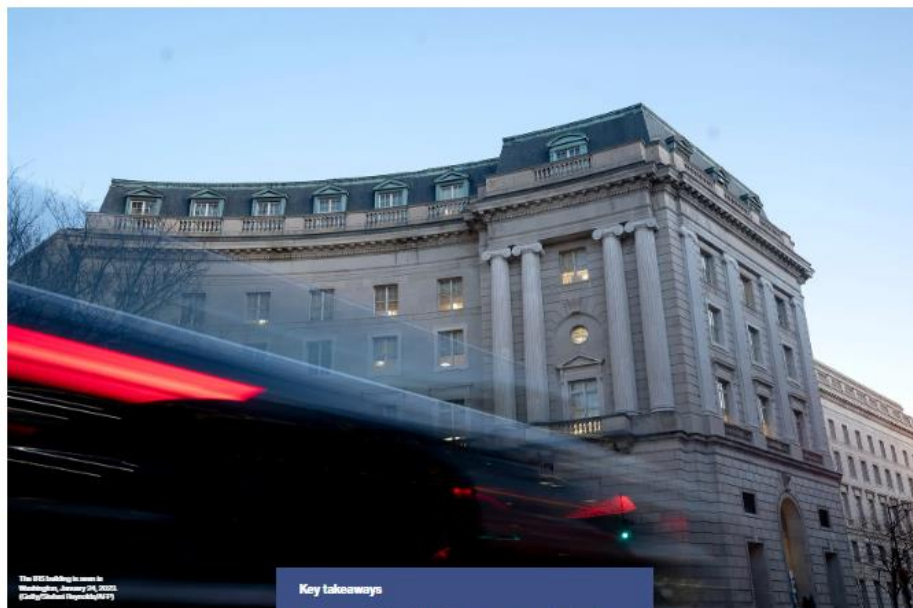


Margulisa Johns



Nicole Rapfogel

Strengthening Health, Affordable Housing, Health, +3 More



The HUD Center is based in Washington, January 24, 2025 (Credit: Michael Reynolds/ISTOCK)

IN THIS ARTICLE

Introduction and summary

Housing is a precursor to achieving optimal health

Nonprofit hospitals can be valuable partners in improving housing and community health

Policy recommendations

Conclusion

Acknowledgments

#### Key takeaways

- Creating gaps in affordable, quality housing options can have harmful health consequences and deepen health disparities. Given housing's integral role as a social determinant of health and nonprofit hospitals' obligation to provide community benefits in exchange for significant tax exemptions, hospitals should address housing needs within their communities.
- Nonprofit hospitals can consider different strategies for investing in housing, including: screening for housing insecurity and referring patients to resources; improving the quality of existing housing stock; building up the supply of quality, affordable housing; offering rental assistance and supportive services; and advocating for federal and state policies that strengthen and stabilize housing. When pursuing these strategies, hospitals should partner with communities in developing and implementing efforts and take steps to avoid unintended results such as accelerated displacement of vulnerable communities.
- State and federal policymakers must monitor and revise the community benefit standards that govern hospitals' nonprofit designation. Policy changes to clarify the standard, promote high-impact community benefit provisions within it, and increase accountability and oversight would encourage more hospital investment in social determinants of health, notably housing.

MEDIA CONTACT

Sarah Nadeau  
Associate Director, Media Relations  
sna@amERICANPROGRESS.ORG

GOVERNMENT AFFAIRS

Madeline Shepherd  
Senior Director, Government Affairs  
mshepherd@AMERICANPROGRESS.ORG

<https://www.americanprogress.org/article/nonprofit-hospitals-can-improve-community-health-through-housing-investments/>

# Example: Mercy Medical Center, Linn County, IA

- In 2013, supported the Children's Homes Asthma Management Program (CHAMP) administered through Linn County Healthy Homes. The program includes a healthy homes assessment, education about asthma triggers, and how to reduce asthma triggers in the home. The program provided infection control practitioners from Mercy Medical Center to perform an assessment (air sampling, particle counts, moisture reading in walls and cultures) in the homes of children newly diagnosed with asthma.

# Example: Boston Children's Community Asthma Initiative

- Boston Children's Hospital Community Asthma Initiative is a home-visiting program for asthma that provides a full spectrum of case management including family/patient education, asthma self-management and environmental remediation supports.
- Has been supported for a decade or more.

# Example: Penn Medicine Lancaster General

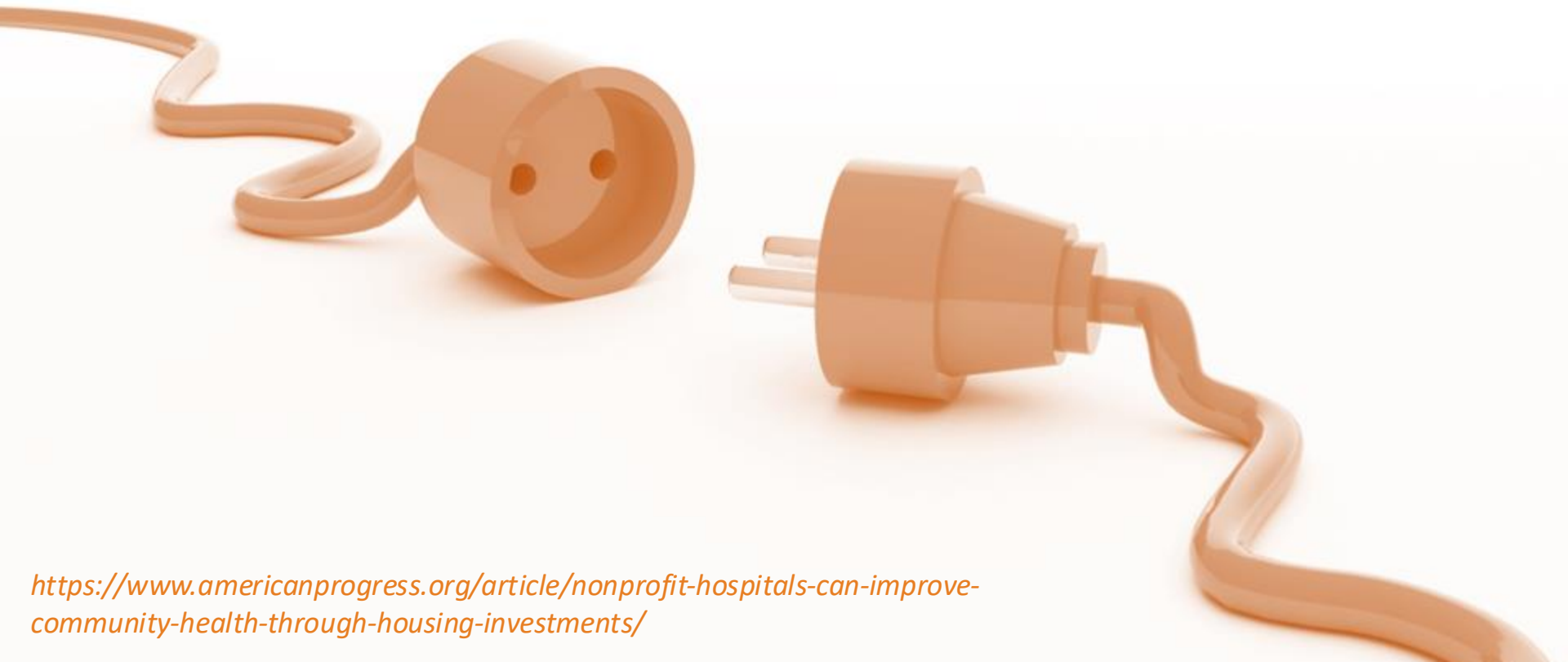
- \$50 million over 10 years for lead remediation in Lancaster County, PA.
- Launched in August of 2021 with a 10-year goal of eliminating lead from 2,800 homes in the county.
- Serves families living below 400% of the federal poverty line and rental owners for either free or significantly reduced remediation costs.

# Climate Connection

As the intensity, frequency, and duration of climate-related events increases, so does the urgency of ensuring that all residents have affordable, safe, and resilient places to shelter... before, during, and after these events.



Despite the enormous potential that could stem from investing in housing and other social determinants of health, a 2009 analysis found that only 5% of community benefit dollars were being spent on direct community health improvements.



# Tips for Getting Started

- **Learn what community benefits the hospital already supports:** Read the most recent CHNA, which should be posted on the hospital's website and may be available from the state agency. Review the implementation plan. If the plan is not on the hospital's website, obtain the hospital's 990--H form to view the implementation plan and see what the hospital told IRS about its process. If the 990-H form is not on the hospital's website, check [www.guidestar.org](http://www.guidestar.org) or a state agency listed above.
- **Reach out to and build a relationship with the hospital's community benefit manager** (or ask who in the organization leads their community-based health benefits initiatives). Learn what community benefits the hospital is considering or already supports. Introduce your program and articulate how your program addresses their CHNA.
- **Review the hospital's most recent CHNA and consider the following questions:** What process did the hospital use to collect information for the CHNA? Does your organization have data that could help inform future CHNAs? What were the top priorities identified in the plan? What services do you have to offer that could help respond to those priorities?
- **Identify services and activities that can reduce hospital readmissions**, which is a federal policy priority and therefore important to hospitals. Find out what's driving repeat hospitalizations and emergency department visits. You can also alert community benefit managers to evidence linking housing-related illness, like asthma, to readmissions.
- **Get involved with local needs assessment and implementation planning efforts.** Offer to provide data or linkage to data that will surface housing as a need. Frame discussions around identified community needs and how a specific, **shovel-ready** healthy housing program could address those needs. Link with other organizations that are taking part in these assessment and planning activities. Comment on the most recent CHNA and implementation plan.
- **Ask for help!** You don't have to reinvent the wheel.

# Healthcare Financing TA Tools

- CMS Guidance on Health Service Initiatives and Lead Abatement: <https://www.medicaid.gov/federal-policy-guidance/downloads/faq11217.pdf>
- <https://www.shvs.org/wp-content/uploads/2017/01/SHVS-Manatt-Leveraging-CHIP-to-Protect-Low-Income-Children-from-Lead-January-2017.pdf>
  - NCHH has findings from a study of Michigan's experience utilizing Medicaid funds, HUD lead hazard reduction grants, and state general funds
- Building Systems to Sustain Home-Based Asthma Services: <https://nchh.org/tools-and-data/financing-and-funding/building-systems-to-sustain-home-based-asthma-services/>
- Healthcare Financing of Healthy Homes Services Case Studies: <https://nchh.org/who-we-are/nchh-publications/case-studies/healthcare-financing-of-hh-services-case-studies/>
- Strategies for Continuing Healthy Homes Services While Social Distancing: <https://nchh.org/who-we-are/nchh-publications/nchh-tools-for-technical-assistance/strategies-for-continuing-healthy-homes-activities-while-social-distancing-series/>
- Unlocking the Power of Home-Based Asthma Services: Model Health Benefit Packages: <https://nchh.org/tools-and-data/financing-and-funding/building-systems-to-sustain-home-based-asthma-services/unlocking-the-power-of-home-based-asthma-services/>
- Innovations in Asthma Home Visiting Services: Virtual Visits: [https://nchh.org/2022/12/innovations-in-asthma-home-visiting-services\\_virtual-visits/](https://nchh.org/2022/12/innovations-in-asthma-home-visiting-services_virtual-visits/)
- More: <https://nchh.org/tools-and-data/financing-and-funding/healthcare-financing/> or contact Laura at [lfudala@nchh.org](mailto:lfudala@nchh.org) to set up a time to discuss your questions with the team.

# Climate Co-Benefits TA Tools

- Weatherization Plus Health Resources: <https://nascsp.org/wap/waptac/wap-resources/weatherization-plus-health/wx-plus-health-research-resources/>
- Using Weatherization and Energy Assistance Programs to Provide Cooling Assistance: <https://nchh.org/resource-library/technical-assistance-using-weatherization-and-energy-assistance-programs-to-provide-cooling-assistance.pdf>
- Evidence base for co-benefits:
  - NCHH studies: <https://nchh.org/information-and-evidence/research/green-building-energy-efficiency-and-weatherization/>
  - **Summary reports:** <https://nchh.org/research/occupant-health-benefits-of-residential-energy-efficiency/> and <https://nchh.org/research/home-rx/>

# Home Repair TA Tools...

## Other financing and funding and home repair programs

- Local Funding/Incentive Programs:  
<https://nchh.org/resources/financing-and-funding/local-funding-incentive-programs/>
- Sustainable Financing Mechanisms Case Studies:  
<https://nchh.org/who-we-are/nchh-publications/case-studies/sustainable-financing-mechanisms-case-studies/>
- Establishing and Running a Local Home Repair Program:  
<https://nchh.org/resource-library/establishing-and-running-a-local-home-repair-program.pdf>
- Financial Help for Home Repairs:  
<https://nchh.org/resources/financing-and-funding/financial-help-for-home-repairs/>
- More: <https://nchh.org/resources/financing-and-funding/>



## ***Examples of TA include working with an expert to:***

- **Access a team of thought partners to assess your local landscape**
- **Clarify your unique needs/goals**
- Identify next steps and ensure progress toward completing/achieving identified goals/“assignments”
- Get **answers to your questions** as needed
- Talk through development of a compelling “elevator pitch”
- Review a PowerPoint, draft bill language, or meeting request
- Prepare for a meeting with your state Medicaid agency, nonprofit hospital, or other key partner
- **Think through a specific challenge** related to workforce development
- Take a critical look at potential gaps in capacity, partnerships, or resources
- Get advice or feedback on your evaluation plan



# AMANDA REDDY

Executive Director

[areddy@nchh.org](mailto:areddy@nchh.org)

(copy [lfudala@nchh.org](mailto:lfudala@nchh.org) on follow-up requests related to this presentation)

[www.nchh.org](http://www.nchh.org)

X: @NCHH ♦ FB: [facebook.com/HealthyHousing](https://facebook.com/HealthyHousing) ♦ IG: @nchhorg ♦ YT: @healthyhousing  
LI: [www.linkedin.com/company/national-center-for-healthy-housing/](http://www.linkedin.com/company/national-center-for-healthy-housing/)

National Center for  
**HEALTHY HOUSING**