Office of the Mayor Health and Human Services

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Photo credit: DSS

HASA for All

Agencies: **Department of Social Services (DSS)/Human Resources Administration (HRA)**

Context

Under NYC Local Law 49, HASA provides comprehensive services to individuals with HIV/AIDS and their families to support improved health outcomes by preventing homelessness, providing stable and affordable housing, addressing food insecurity, and ensuring access to treatment for mental health and substance use disorders. Prior to and at the beginning of the Administration, HASA services were available only to Cash Assistance income-eligible individuals diagnosed with clinically symptomatic HIV and AIDS. Since the enactment of the Local Law in the 1990s, treatment protocols have evolved, allowing many more individuals with HIV to remain asymptomatic. Thus, low-income New Yorkers who could benefit from HASA's comprehensive services model but remained asymptomatic were unable to access the services and supports that could help ensure that they maintained their health status.

Response

At the New York State and local level, advocates and legislators pressed for expansion of HASA eligibility for several years. Unlike previous City administrations, this Administration and DSS vigorously supported the change and urged NY State to enact a number of measures, including expansion of HASA eligibility, as part of its effort to "End the Epidemic" (or EtE). In 2016, the former Governor signed an Executive Order allowing asymptomatic individuals diagnosed with HIV in New York City to qualify for State and City-funded HASA benefits. Under the policy change (also known as "HASA for All"), the City made an investment of \$73M annually, primarily in City funds. EtE, implemented in Fiscal Year 2017, expanded services, including rental assistance, enhanced nutrition and transportation benefits, and case management services to a new group of asymptomatic HASA clients.

Results

As of August 2021, HASA served 33,380 cases (34,000 individuals) with HIV or AIDS, of whom 8,100 were asymptomatic cases, newly eligible under the EtE changes. While the overall caseload grew by 4% since the beginning of the expansion, the asymptomatic caseload increased more than threefold between 2017 and 2021, and symptomatic HASA cases declined by 17% during the same period.

HASA provides case management and assistance applying for benefits, including Cash Assistance, Supplemental Security Income (SSI), SNAP, Medicaid, and housing assistance, including supportive and emergency housing and rental assistance. Over 80% of HASA households receive housing assistance, with two-thirds receiving rental assistance for private market units at enhanced rates. As of August 2021, a little more than 24% of HASA cases were asymptomatic clients with 50% receiving rental assistance and 12% in emergency housing. Emergency housing is used by HASA to stabilize clients experiencing homelessness, with the goal of moving them to independent living or supportive housing, depending on their needs. Although the numbers of HASA clients in DHS shelters are small, since the implementation of EtE, there has also been a drop of approximately 30%.

Beneficiary Stories

Elsie Kpor (38) was born in Liberia, became a naturalized U.S. citizen in 2016, and has been living in New York City since 2006. Ms. Kpor works as a home health aide and is employed by Concepts of Independence, Inc. She was accepted into the HASA program in April 2018 under the new rules because she was asymptomatic. At the time, Ms. Kpor was sharing a one-bedroom apartment in Staten Island with family members, including her aging mother and teenage son. HASA helped her to get a three-bedroom apartment for her family in 2018, in which she is still residing.

Next Steps

HASA is conducting a series of pilots to develop new service models to address the changing needs of clients based on the EtE initiative.

Additional Metrics

- As of August 2021, there were more than 8,000 asymptomatic cases on the HASA caseload; these clients make up 24% of the overall caseload and would not have been served by HASA under the prior policy.
- In early 2017 just after the EtE initiative HASA expansion began, 11% of HASA cases were in emergency housing (primarily SROs and transitional settings) compared to 8% today. This improvement is due to increased supportive housing options and continuing HASA efforts to move clients into permanent apartments.

Relevant Publications

• HASA monthly Fact Sheets found here

References

- HRA HASA home page <u>here</u>
- NYC Administrative Code §21-126 Division of AIDS Services <u>here</u>