DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT COMMUNITY PLANNING AND DEVELOPMENT

HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS (HOPWA)

2020 Summary of Resources

(Dollars in Thousands)

	Enacted/ Requested	Carryover	Supplemental/ Rescission	Total Resources	Obligations	Outlays
2018 Appropriation	375,000	292,380	-	667,380	494,721	351,535
2019 Annualized CR	375,000	172,659	-	547,659	398,012	361,301
2020 Request	330,000	149,647	-	479,647	349,313	379,682
Change from 2019	(45,000)	(23,012)	-	(68,012)	(48,699)	18,381

1. Program Purpose and Budget Overview

The 2020 President's Budget requests \$330 million for HOPWA, which is \$45 million less than the 2019 Annualized Continuing Resolution (CR) level.

The HOPWA program provides housing assistance and supportive services to low-income persons living with Human Immunodeficiency Virus (HIV)/Acquired Immune Deficiency Syndrome (AIDS) via authorization per the AIDS Housing Opportunity Act (42 U.S.C. 12901-12912). HOPWA funding helps ensure that the most vulnerable people living with HIV/AIDS have housing and access to medical and other supports needed to manage their HIV. Communities are provided with funding that they can use for rental assistance; operating costs for housing facilities; short-term rent, mortgage, and utility payments (STRMU); permanent housing placement; housing information services; and supportive services and case management.

2. Request

At \$330 million, communities will be able to continue their efforts to prevent homelessness and sustain housing stability for approximately 47,867 economically vulnerable households living with HIV infection.

The requested budget level for HOPWA would provide:

- 24,264 Permanent Supportive Housing households: The budget allows for continued support and sustaining of these households with tenant-based rental assistance and facility-based housing, the latter of whom face significant health and life challenges that impede their ability to live independently.
- <u>23,603 Transitional/Short-Term Supportive Housing households</u>: Continual support and sustaining of these households with homeless prevention efforts through the provision of STRMU assistance and transitional/short-term housing facilities in coordination with local homeless Continuum of Care efforts to prevent and end homelessness.
- 3,492 Permanent Housing Placement households: One-time support for first month rent and deposits to secure permanent housing.
- <u>50,000 Supportive Services and Case Management households</u>: These additional households will receive supportive services through the HOPWA program; these households may be on the local HOPWA waitlist in their community or placed in other non-HOPWA housing (for example, Section 8 or a shelter), but need supportive services to stabilize them wherever they may be housed.

3. Justification

Key HOPWA Program and Beneficiaries Outcomes for the 2017 performance period (most recent available full year data):

<u>Prevent Homelessness</u>: The number of households assisted varies between permanent supportive housing and transitional, short-term housing assistance activities, depending upon funding level, attrition levels, and grantees' programs.

Annually, 90 percent of the HOPWA appropriation is allocated to qualifying states and metropolitan areas under a statutory formula based on living HIV cases, poverty rates, and local housing costs. The remaining ten percent is awarded as competitive grants to support innovative model projects that address special issues or populations through the award of Special Projects of National Significance.

The delivery of supportive housing requires a partnership between HOPWA grantees and project sponsors consisting of local networks of non-profit, faith-based, and housing and homeless organizations that link beneficiaries to medical services and other related services. Supportive services include critical supports such as housing case management, mental health services, substance abuse treatment, or employment training, that sustain housing stability, promote better health outcomes, and increase quality of life. These critical supports promote self-sufficiency efforts for those able to transition to the unsubsidized private housing market or other affordable housing which does not include necessary supportive services, including placement in public housing.

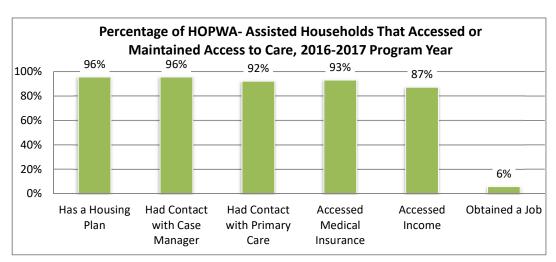
<u>Housing Stability</u>: Housing stabilization can lead to reduced risk behavior and reduced HIV transmission, a significant consideration for federal HIV prevention efforts. HOPWA demonstrates improved program beneficiary outcomes with respect to access to care and support, resulting in a foundation for increased housing stability and better health outcomes.

In 2017:

- 95 percent of households receiving long-term HOPWA assistance achieved housing stability.
- 68 percent of client households receiving transitional housing support maintained their housing stability or had reduced risk of homelessness.
- 95 percent of clients receiving tenant-based rental assistance achieved housing stability.
- 94 percent placed in a permanent housing facility achieved housing stability.
- 68 percent of clients receiving transitional or short-term housing facilities assistance achieved housing stability.
- 47 percent receiving STRMU assistance achieved housing stability.

Access to Care: HOPWA data shows high levels of connection to care, with 92 percent of households served during 2017, compared to 86 percent during 2014, having contact with primary health care.

The HOPWA statute provides unique authority to allow projects to target housing interventions to a special needs population and to serve as a bridge in coordinating access to other mainstream support, such as HIV services provided under the Ryan White HIV/AIDS program and other human services programs.



Evidence-based Research: Multiple studies have

found the lack of stable housing to be one of the most significant factors limiting the use of antiretrovirals (ARVs), regardless of insurance, substance abuse, and other factors. Housing interventions improve stability and connection to care, providing the essential foundation for participating in ARV treatment and achieving an undetectable viral load, which prevents the spread of HIV.

The HUD-CDC joint housing and health study was a multi-site randomized trial undertaken to examine the health, housing, and economic impacts of providing HOPWA assistance to homeless and unstably housed persons living with HIV/AIDS. As published in peer-reviewed journals, findings from the study demonstrated that HOPWA housing assistance serves as an efficient and effective platform for improving the health outcomes of persons living with HIV/AIDS and their families. The housing and health study of HOPWA and other supportive housing programs for persons living with HIV/AIDS found that housing was associated with 41 percent fewer visits to emergency departments, a 23 percent reduction in detectable viral loads, and a 19 percent reduction in unprotected sex with partners whose HIV status was negative or unknown.¹

Stable housing equals cost-benefit savings. Stable housing is one of the most cost-effective strategies for driving down national HIV/AIDS costs. The number of persons living with HIV in the United States continues to grow annually. Estimates put the annual direct costs of HIV medications at between \$17,000 and \$41,000 per person per year, depending on the severity of an individual's infection.² Lifetime treatment costs per person are estimated to be \$415,000.³ Homeless or unstably housed persons living with HIV/AIDS have been shown to be more likely to demonstrate frequent and prolonged use of high-cost, hospital-based emergency or inpatient services, as compared to persons living with HIV/AIDS who are stably housed. Research conducted in Chicago has shown that homeless persons living with HIV/AIDS had significantly improved medication adherence, health outcomes, and viral loads when provided with HOPWA housing assistance, as compared to persons who remained homeless or unstably housed. Moreover, substantial cost savings were achieved by reducing emergency care and nursing services for this population.⁴ HOPWA assistance is a simple way to safeguard the national investment in HIV care.

Stakeholders: The Office of HIV/AIDS Housing is involved in multi-year collaboration projects with the Health Resources and Services Administration (HRSA) HIV/AIDS Bureau, with investment of resources from the Secretary's Minority AIDS Initiative Fund (SMAIF). One of these collaborative projects seeks to improve service coordination, housing stability, and health outcomes for persons living with HIV/AIDS via integrated data systems between Ryan White HIV/AIDS program recipients and HOPWA providers. Another collaborative project focuses on

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¹ Kidder, Daniel. (2009). The Housing and Health Study: Background, Methods, and Outcomes. Presentation at National AIDS Housing Coalition Conference.

² Schackman, B.R., Gebo, K.A., Walensky, R.P., Losina, E., Muccio, T., Sax, P.E., Weinstein, M.C., Seage, G.R.III, Moore, R.D., Freedberg, K.A. (2006). *The lifetime cost of current human immunodeficiency virus care in the United States*. Med Care, 44, 990-997, updated to 2009 dollars.

³ Ibid.

⁴ Sadowski, L., Kee, R., VanderWeele, T., Buchman, D. (2009). Effect of a housing and case management program on emergency department visits and hospitalization among chronically ill homeless adults. Journal of the American Medical Association (JAMA), 301(17), 1771-1778.

operationalizing the Getting to Work employment training curriculum to support the design, implementation, and evaluation of innovative interventions that coordinate HIV primary care, housing services, and employment services in communities to improve health outcomes for people living with HIV.

The Office of HIV/AIDS housing continues to work with 35 communities that are highly impacted by HOPWA formula modernization, including grantees, advocates, and stakeholders, in addressing implementation issues at the local level. This technical assistance effort is a long-term initiative that will cover the complete span of the HOPWA Modernization five-year stop-loss period and is a combination of onsite and remote technical assistance, with an assessment of the current situation in each of the identified communities, as well as tools and products, guidance and support to successfully manage their HOPWA grants and programs. The technical assistance is targeted to assist impacted communities in developing strategies to prevent homelessness and to use HOPWA funding efficiently, based on local needs. As products and tools addressing modernization are developed, they will be made available online to all HOPWA formula grantees through the HUD exchange.

Operational Improvements

The HOPWA program is working collaboratively on initiatives across all Community Planning and Development (CPD) program offices to streamline processes including grantee risk analysis, monitoring, grant making, and tracking.

Additionally, through the proposed appropriations language, the Department is requesting removal of the requirement to give competitive grantees funding priority in the renewal of permanent supportive housing activity. Removal of the priority renewal provision in the account language would benefit the HOPWA program by:

- Allowing new delivery models to be implemented;
- Aligning the permanent supportive housing definition with that used in the formula program; and
- Infusing the program with high-performing capacity grantees.

Beginning in 2001, a provision was added to the HOPWA appropriations language that required HOPWA competitive funding (10 percent of the appropriation) to be prioritized for the renewal of expiring permanent supportive housing grants. As an unforeseen consequence of the appropriations language, in subsequent years (2002 through 2010) each newly funded permanent supportive housing grant that received an award under a new Notice of Funding Availability (NOFA) became eligible for the renewal priority. This placed a burden on the amount of competitive funding available to fund new competitions after funding the renewal of expiring permanent supportive housing grants. To address

this issue, in 2011 Congress added language to the renewal provision in HOPWA appropriations language to limit eligibility of renewal to those grantees that were originally awarded funding prior to 2010. The current appropriations language states:

"...the Secretary shall renew all expiring contracts for permanent supportive housing that initially were funded under section 854(c)(5) of such Act from funds made available under this heading in fiscal year 2010 and prior fiscal years that meet all program requirements before awarding funds for new contracts under such section..."

The current provision requires the program to renew all eligible, expiring permanent housing competitive grants funded in 2010 and prior before holding a new competition.

- Competitive grants have a three-year period of performance.
- Approximately one-third are eligible for renewal each year.
- A statutory eligibility requirement is that 51 percent of the grant supports permanent supportive housing activities.
- Performance eligibility requirements in effect at the time of grant awards also included no citizen complaints, no monitoring findings, and with respect to eligible permanent supportive housing (competitive grants only) could include Short-Term Rent Mortgage and Utility (STRMU) as it keeps people in their own housing units.
- Although the only renewal requirement imposed by Congress relates to permanent supportive housing activities, HUD program counsel has declared that renewals must be of existing grant activities/design from time of original award which was based on competition with other applicants (i.e., criteria in effect at time of original rank and rating per applicable Notice of Funding Availability, as a different delivery model or mix of activities may not have been funded).

Currently 82 HOPWA competitive grants remain eligible for priority renewal.

- Of these 82 grants, 28 (at approximately \$28 million) are expected to renew in 2019, another 32 (at approximately \$38 million) are expected to renew in 2020, and 22 (at approximately \$25 million) are expected to renew in 2021.
- These 82 grants have continued to serve the population to the extent possible, but many have not been able to keep up with HIV/AIDS needs in their communities because their scope and model cannot be altered or expanded beyond the approved activities in their original, competitive grant application.

The current situation limits competition, as the appropriation levels generally do not allow enough funding for a traditional competition after the priority renewals, and it prevents grantees from modernizing their programs to address current community needs.

To operationalize the proposed language change, the Department would continue to offer priority renewal for the eligible 2020 grantees and would provide advance notice of the coming change immediately after the enactment of a bill that removes the priority renewal language. The operational improvement would come into effect the following funding year (with the 2021 eligible grantees). The one year of advance notice will allow all competitive renewal grantees and their communities time to plan for a full competition.

Other Legislative Proposals and Programmatic Improvements

The 2020 Budget supports the following legislative changes that will result in programmatic improvements. HUD will seek the changes through the authorization process rather than the appropriations process.

Regarding HOPWA's provision of short-term housing, HUD will seek to expand the provision of short-term housing from 21 weeks to a maximum of 24 months, with a requirement for on-going needs assessments, to give communities greater latitude in addressing housing needs for those living with HIV who are homeless or at severe risk of homelessness. The provision would allow grantees flexibilities with the time limits of their HOPWA short-term assistance.

- The current limit for STRMU activity is 21 weeks during a 52-week period, with no mention of assessment or planning.
- The current short-term housing program also cannot assist individuals who are homeless.
- The proposed provision would allow grantees to use short-term and medium-term assistance for rent, mortgage, or utilities payments to eligible persons who are homeless or in need of housing assistance to prevent homelessness for rent, mortgage, or utilities costs accruing over a period of no more than 24 months, provided that after receiving three months of assistance, the person's housing and supportive services needs are assessed on an ongoing monthly basis.
- Grantees have reported that 21 weeks is often too limited for establishing housing stability for high risk households living with HIV. In addition, the provision would match more closely with other HUD rapid rehousing programs.

Impact of Formula Modernization with the 2020 Budget: The modernization of the HOPWA formula by the Housing Opportunity Through Modernization Act (HOTMA) of 2016, Public Law 114-201, continues to advance the program's ability to target funding to the areas of highest need. The fourth year of the five-year stop loss/gain provision (in which no award is 5 percent less or 10 percent more than the share of the total

available formula funds that the grantee received in the preceding fiscal year) is 2020. The chart below reflects estimated distribution of funds to HOPWA formula grantees.

		2018	2018 2019	
STATE	Name	Formula Actual	CR Formula Estimate	Formula Estimate
AL	Birmingham	\$1,244,128	\$1,302,954	\$1,166,918
AL	Alabama	\$1,975,929	\$2,129,993	\$1,907,610
AR	Little Rock	\$438,569	\$472,764	\$423,405
AR	Arkansas	\$721,555	\$777,815	\$696,607
AZ	Phoenix	\$2,378,741	\$2,564,212	\$2,296,494
AZ	Tucson	\$589,416	\$635,373	\$569,037
AZ	Arizona	\$309,509	\$333,642	\$298,808
CA	Bakersfield	\$496,350	\$535,051	\$479,189
CA	Fresno	\$499,903	\$538,881	\$482,619
CA	Anaheim	\$1,988,481	\$2,143,523	\$1,919,727
CA	Los Angeles	\$17,618,957	\$17,871,385	\$16,005,513
CA	Riverside	\$2,587,369	\$2,789,107	\$2,497,909
CA	Sacramento	\$1,177,649	\$1,269,471	\$1,136,931
CA	San Diego	\$3,686,397	\$3,973,826	\$3,558,936
CA	Oakland	\$2,835,545	\$2,818,887	\$2,524,580
CA	San Francisco	\$7,162,248	\$6,804,136	\$5,894,266
CA	San Jose	\$1,131,945	\$1,220,203	\$1,092,807
CA	Santa Rosa	\$433,139	\$417,762	\$374,145
CA	California	\$3,355,813	\$3,561,911	\$3,190,028
CO	Denver	\$2,017,134	\$2,174,410	\$1,947,390
CO	Colorado	\$567,866	\$612,143	\$548,232
CT	Bridgeport	\$958,450	\$910,528	\$815,464
CT	Hartford	\$1,147,501	\$1,110,988	\$994,995

		2018 2019		2020
STATE	Name	Formula Actual	CR Formula Estimate	Formula Estimate
CT	New Haven	\$1,076,899	\$1,042,015	\$933,223
CT	Connecticut	\$246,668	\$251,202	\$224,975
	District of			
DC	Columbia	\$11,221,025	\$10,659,974	\$9,235,879
DE	Wilmington	\$772,728	\$753,070	\$674,445
DE	Delaware	\$270,436	\$286,301	\$256,410
FL	Cape Coral	\$537,792	\$579,724	\$519,198
FL	Deltona	\$494,929	\$527,712	\$472,616
FL	Jacksonville	\$2,645,991	\$2,513,691	\$2,149,300
FL	Lakeland	\$655,670	\$645,606	\$578,201
FL	Ft Lauderdale	\$7,209,708	\$6,849,223	\$5,870,307
FL	Miami	\$11,680,308	\$11,096,293	\$9,822,917
FL	West Palm Beach	\$3,257,585	\$3,094,706	\$2,674,240
FL	Sarasota	\$580,347	\$580,265	\$519,682
FL	Orlando	\$3,841,118	\$3,873,337	\$3,468,939
FL	Palm Bay	\$433,389	\$423,213	\$379,027
FL	Port St Lucie	\$667,025	\$651,822	\$583,768
FL	Tampa	\$3,864,852	\$3,802,970	\$3,405,919
FL	Florida	\$4,037,467	\$3,985,524	\$3,569,413
GA	Atlanta	\$23,101,950	\$21,946,853	\$18,347,569
	Augusta-Richmond			
GA	County	\$1,059,712	\$1,006,726	\$841,623
GA	Georgia	\$3,040,147	\$3,277,188	\$2,935,031
HI	Honolulu	\$567,630	\$606,119	\$542,837
HI	Hawaii	\$258,770	\$254,043	\$227,519
IA	Iowa	\$561,946	\$605,761	\$542,516

		2018	2018 2019	
STATE	Name	Formula Actual	CR Formula Estimate	Formula Estimate
IL	Chicago	\$9,009,631	\$9,578,871	\$8,578,784
IL	Illinois	\$1,535,465	\$1,655,186	\$1,482,375
IN	Indianapolis	\$1,253,901	\$1,351,668	\$1,210,546
IN	Indiana	\$1,250,586	\$1,348,095	\$1,207,346
KS	Kansas	\$512,927	\$546,352	\$489,310
KY	Louisville	\$757,786	\$816,871	\$731,585
KY	Kentucky	\$700,717	\$755,352	\$676,489
LA	Baton Rouge	\$2,577,040	\$2,448,188	\$2,046,685
LA	New Orleans	\$3,891,572	\$3,696,993	\$3,090,686
LA	Louisiana	\$1,743,146	\$1,879,060	\$1,682,876
MA	Boston	\$2,588,781	\$2,761,922	\$2,473,562
MA	Lowell	\$1,416,588	\$1,527,040	\$1,367,609
MA	Springfield	\$585,390	\$631,033	\$565,150
MA	Worcester	\$587,285	\$605,916	\$542,655
MA	Massachusetts	\$274,934	\$296,371	\$265,428
MD	Baltimore	\$8,417,340	\$7,996,473	\$6,685,051
MD	Frederick	\$1,462,887	\$1,448,625	\$1,297,381
MD	Maryland	\$519,457	\$493,826	\$442,268
MI	Detroit	\$2,723,332	\$2,696,438	\$2,414,915
MI	Warren	\$683,903	\$737,227	\$660,256
MI	Michigan	\$1,408,774	\$1,518,616	\$1,360,064
MN	Minneapolis	\$1,361,885	\$1,468,072	\$1,314,797
MN	Minnesota	\$198,445	\$213,918	\$191,584
MO	Kansas City	\$1,419,904	\$1,530,614	\$1,370,809
MO	St Louis	\$1,824,610	\$1,966,875	\$1,761,522

		2018	2019	2020
STATE	Name	Formula Actual	CR Formula Estimate	Formula Estimate
MO	Missouri	\$701,900	\$756,627	\$677,631
MS	Jackson	\$1,453,290	\$1,380,626	\$1,190,726
MS	Mississippi	\$1,313,577	\$1,415,997	\$1,268,159
NC	Charlotte	\$2,529,408	\$2,600,814	\$2,329,275
NC	Durham	\$379,840	\$409,456	\$366,707
NC	Greensboro	\$419,625	\$452,343	\$405,116
NC	Wake County	\$716,346	\$772,200	\$691,578
NC	North Carolina	\$2,836,965	\$3,058,164	\$2,738,875
NE	Nebraska	\$478,117	\$515,396	\$461,586
NJ	Newark	\$5,867,175	\$5,573,816	\$4,766,738
NJ	Camden	\$925,922	\$998,116	\$893,907
NJ	Paterson	\$1,608,136	\$1,605,804	\$1,438,149
NJ	Jersey City	\$2,422,186	\$2,301,077	\$1,956,542
NJ	New Jersey	\$1,474,771	\$1,512,087	\$1,354,217
NM	Albuquerque	\$433,596	\$466,702	\$417,976
NM	New Mexico	\$374,630	\$403,840	\$361,677
NV	Las Vegas	\$1,516,285	\$1,634,510	\$1,463,858
NV	Nevada	\$327,032	\$352,531	\$315,725
NY	Albany	\$637,488	\$648,848	\$581,105
NY	Buffalo	\$720,135	\$762,179	\$682,603
NY	Brookhaven Town	\$2,088,333	\$2,024,177	\$1,812,842
NY	New York City	\$44,228,148	\$42,016,733	\$36,609,731
NY	Rochester	\$890,163	\$914,567	\$819,081
NY	Syracuse	\$378,183	\$371,499	\$332,712
NY	New York	\$2,620,159	\$2,509,946	\$2,247,894

		2018 2019		2020
STATE	Name	Formula Actual	CR Formula Estimate	Formula Estimate
ОН	Cincinnati	\$896,793	\$966,716	\$865,785
ОН	Cleveland	\$1,241,586	\$1,338,393	\$1,198,657
ОН	Columbus	\$1,109,448	\$1,195,952	\$1,071,088
ОН	Dayton	\$379,368	\$408,947	\$366,251
ОН	Ohio	\$1,287,527	\$1,387,916	\$1,243,010
OK	Oklahoma City	\$702,611	\$757,394	\$678,318
OK	Tulsa	\$466,513	\$502,887	\$450,383
OK	Oklahoma	\$327,506	\$353,042	\$316,182
OR	Portland	\$1,409,247	\$1,519,126	\$1,360,521
OR	Oregon	\$500,140	\$531,569	\$476,070
PA	Allentown	\$382,682	\$412,520	\$369,451
PA	Harrisburg	\$382,447	\$412,266	\$369,223
	Bensalem			
PA	Township	\$676,562	\$728,123	\$652,103
PA	Philadelphia	\$7,375,786	\$7,006,997	\$6,245,218
PA	Pittsburgh	\$948,891	\$1,022,876	\$916,082
PA	Pennsylvania	\$1,698,390	\$1,830,814	\$1,639,667
PR	San Juan Municipio	\$6,234,828	\$5,923,087	\$4,967,300
PR	Puerto Rico	\$2,034,912	\$2,069,174	\$1,853,141
RI	Providence	\$1,133,603	\$1,126,316	\$1,008,722
SC	Charleston	\$641,987	\$692,043	\$619,790
SC	Columbia	\$1,406,384	\$1,407,827	\$1,260,842
SC	Greenville	\$475,984	\$513,097	\$459,527
SC	South Carolina	\$1,824,610	\$1,966,875	\$1,761,522
TN	Memphis	\$3,547,703	\$3,370,318	\$2,817,586

		2018	2019	2020
STATE	Name	Formula Actual	CR Formula Estimate	Formula Estimate
TN	Nashville-Davidson	\$1,216,011	\$1,310,824	\$1,173,967
TN	Tennessee	\$1,243,245	\$1,340,181	\$1,200,259
TX	Austin	\$1,469,160	\$1,583,711	\$1,418,363
TX	Dallas	\$6,645,116	\$6,735,393	\$6,032,181
TX	Fort Worth	\$1,332,758	\$1,436,674	\$1,286,677
TX	El Paso	\$492,798	\$531,222	\$475,759
TX	Houston	\$9,738,444	\$9,429,462	\$8,444,974
TX	San Antonio	\$1,606,272	\$1,731,513	\$1,550,733
TX	Texas	\$3,914,680	\$4,219,909	\$3,779,327
UT	Salt Lake City	\$472,196	\$509,013	\$455,869
UT	Utah	\$197,972	\$213,408	\$191,127
VA	Richmond	\$1,050,009	\$1,131,878	\$1,013,704
VA	Virginia Beach	\$1,524,127	\$1,642,964	\$1,471,429
VA	Virginia	\$962,389	\$1,037,427	\$929,114
WA	Seattle	\$2,302,251	\$2,481,758	\$2,222,649
WA	Washington	\$955,996	\$1,030,535	\$922,941
WI	Milwaukee	\$768,917	\$828,870	\$742,331
WI	Wisconsin	\$614,044	\$661,921	\$592,813
WV	West Virginia	\$453,725	\$489,102	\$438,037
Total Fo	rmula	\$337,500,000	\$337,500,000	\$297,000,000
Total Co	mpetitive	\$37,500,000	\$37,500,000	\$33,000,000
Total HO)PWA	\$375,000,000	\$375,000,000	\$330,000,000

COMMUNITY PLANNING AND DEVELOPMENT HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS (HOPWA)

Summary of Resources by Program

(Dollars in Thousands)

Budget Activity	2018 Budget Authority	2017 Carryover Into 2018	2018 Total Resources	2018 Obligations	2019 Annualized CR	2018 Carryover Into 2019	2019 Total Resources	2020 Request
Formula Grants	337,500	255,277	592,777	441,360	337,500	151,417	488,917	297,000
Competitive	27 500	27 102	74 602	F2 261	27 500	24 242	50.743	22.000
Grants	37,500	37,103	74,603	53,361	37,500	21,242	58,742	33,000
Total	375,000	292,380	667,380	494,721	375,000	172,659	547,659	330,000

COMMUNITY PLANNING AND DEVELOPMENT HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS

Appropriations Language

The 2020 President's Budget includes the appropriation language listed below:

For carrying out the Housing Opportunities for Persons with AIDS program, as authorized by the AIDS Housing Opportunity Act (42 U.S.C. 12901 et seq.), \$330,000,000, to remain available until September 30, 2021, except that amounts allocated pursuant to section 854(c)(5) of such Act shall remain available until September 30, 2022.

Note.—A full-year 2019 appropriation for this account was not enacted at the time the budget was prepared; therefore, the budget assumes this account is operating under the Continuing Appropriations Act, 2019 (Division C of P.L. 115-245, as amended). The amounts included for 2019 reflect the annualized level provided by the continuing resolution.