

Expiring Federal Provisions That May Impact Homelessness

Funding, Flexibilities, and Waivers Set to Expire With the COVID PHE (May 11)

This document identifies a non-exhaustive inventory of federal funding, flexibilities, and waivers related to homelessness response and prevention that are set to expire May 11 when the COVID-19 public health emergency (PHE) ends. The status and timelines of these provisions continue to evolve. For questions, contact your <u>USICH senior regional advisor</u>.

Agency / Program	Funding / Flexibility / Waiver	Resources
U.S. Department of Housing and Urban Development (HUD)		
Community Development Block Grant (CDBG) Program	The end of the PHE starts the 18-month clock after which no new activities may use the streamlined urgent need "national objective" documentation. The CARES Act did not suspend the requirement to meet a national objective, so communities must ensure that every activity carried out with CDBG-CV funds will do so. Every CDBG-CV-funded activity must meet the standards for one of the following three	Toolkit: CDBG-CV National Objectives
Community Development Block Grant CARES Act (CDBG-CV) Program	 An activity that benefits low- and moderate-income persons; An activity designed to meet community development needs having a particular urgency. The activity must be designed to alleviate existing conditions that pose a serious and immediate threat to the health or welfare of the community which are of recent origin or which recently became urgent; and the recipient must demonstrate inability to finance the activity on its own and that other sources of funding are not available; or An activity that aids in the prevention or elimination of slums or blight. 	

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Community Development Block Grant (CDBG) Program Community Development Block Grant CARES Act (CDBG-CV) Program	In light of the severity of the COVID-19 pandemic and the urgency of the nation in addressing its impacts, pursuant to 24 CFR 570.208l (entitlements) or 24 CFR 570.483(d) (states), a grantee can certify that the activity is designed to alleviate existing conditions which pose a serious and immediate threat to the health or welfare of the community within 18 months following a date determined by one of the following three methods: • Referral to a U.S. Department of Health and Human Services-issued press release declaring a PHE for the entire United States; • Referral to the president's declaration of the ongoing COVID-19 pandemic as an emergency of sufficient severity and magnitude to warrant an emergency declaration for all states, tribes, territories, and the District of Columbia pursuant to section 501(b) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5121–5207 (the "Stafford Act"). (The president subsequently approved additional major disaster declarations for states); or • Referral to the effective date of a grantee's own local or state emergency declaration.	Toolkit: CDBG-CV National Objectives
Office of Special Needs Assistance Programs: Emergency Solutions Grants Program Under the CARES Act (ESG-CV)	ESG-CV funds may be used to pay for temporary emergency shelter costs, including acquisition, which is not ordinarily permitted under the ESG Program. Additionally, as needed, recipients may convert temporary emergency shelter acquired or improved with ESG-CV funds into emergency shelter as defined at 24 CFR 576.2 without triggering the disposition requirements in 2 CFR 200.311(c). See Section III.E.3.a of Notice CPD-21-08 for additional information. Notice CPD-21-08 defines temporary emergency shelter as: any structure or portion of a structure, which is used during a federal, state, or local emergency declaration, such as for a natural disaster or PHE, <i>and for up to 12 months after that declaration expires</i> , to provide shelter for individuals and families displaced from their normal place of residence or sheltered or unsheltered locations.	Guidance: Waivers and Alternative Requirements for ESG-CV

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U.S. Department of Homeland Security (DHS)		
FEMA: Public Assistance (PA) Program - Category B Non-Congregate Sheltering (NCS)	Eligible emergency protective measures taken to respond to the COVID-19 emergency at the direction or guidance of state, local, tribal, and territorial public health officials may be reimbursed under Category B of FEMA's Public Assistance (PA) program. May 11, 2023, marks the end of the incident period for all COVID-19 PA declarations, the emergency work completion deadline, and the applicable end date for all COVID-19 PA policies. COVID-19-related work conducted, and costs incurred after May 11, 2023, including work related to non-congregate sheltering (as described in the COVID NCS FAQ — see link provided), will no longer be eligible for PA funding. However, in recognition that certain work and costs may be necessary for demobilization, disposition, and disposal activities after the end of the emergency work completion deadline, FEMA is providing a 90-day extension (August 9, 2023) limited specifically for demobilization, disposition, and disposal activities.	Announcement: Following Unprecedented Response to Pandemic, FEMA Announces the Agency Will Close All COVID-19 Disaster Declaration Incident Periods on May 11 Memo: Memorandum to FEMA Regional Administrators Guidance: COVID-19 Pandemic: Public Assistance Programmatic Deadlines (Interim) Version 2 FEMA Policy # 104-22-0002 FAQs: COVID-19 Pandemic: Non-Congregate Sheltering
U.S. Department of Agriculture (USDA)		
Supplemental Nutrition Assistance Program (SNAP): Temporary Suspension of Three- Month Time Limit	During the federal PHE, Congress temporarily suspended the nationwide three-month time limit for non-disabled adults without dependents under age 50 who are not working or in a training program for at least 20 hours per week. This suspension will end on June 30, and the three-month time limit will be reinstated nationwide beginning July 1 .	Notice to State SNAP Agencies: Preparing for Reinstatement of Time Limit for Able-Bodied Adults Without Dependents (ABAWDs)

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Meals and Snacks for Young Adults in Homeless Shelters: Access to Food in Shelters	During the federal PHE, the American Rescue Plan (ARP) Act further expanded the reach of the Child and Adult Care Food Program (CACFP) to the most vulnerable populations experiencing food hardship due to the pandemic, including homeless young adults. A provision in ARP authorized the USDA to reimburse emergency shelters for meals served to children and youth up to age 25. Prior to this change, the USDA would only reimburse shelters for meals served to children under the age 18. This authority under ARP will end on May 11 , and emergency shelters participating in CACFP will return to being reimbursed by USDA for meals served to children and youth under the age of 18.	Press Release: USDA Boosts Food Assistance for Homeless Young Adults Seeking Refuge in Shelters Memo to State Child Nutrition Program Directors: Reimbursement for Meals and Snacks Served at CACFP Emergency Shelters After the PHE Ends
SNAP: College Student SNAP Eligibility	In December 2020, Congress provided USDA with the flexibility to temporarily extend SNAP benefits to college students who would otherwise be ineligible if they are eligible to participate in work study programs or have an expected family contribution of zero in the current academic year. These temporary exemptions will begin to be phased out on June 10.	Notice to State SNAP Agencies: Expiration of Program Flexibilities for the COVID-19 PHE Notice to State SNAP Agencies: Preparing for Changes in Student Eligibility Following the End of the COVID-19 PHE
		FAQs: Students Food and Nutrition Service Memorandum From U.S. Department of Education: End of the PHE and Impact on Student Eligibility for SNAP Notes: The Consolidated Appropriations Act, 2021, (CAA, 21) created two temporary exemptions for students enrolled at least half-time in an institution of higher education. Once the PHE declaration is lifted on
		May 11, 2023, the temporary student exemptions will remain in effect for initial SNAP applications for an additional 30 days. State agencies must continue to apply the temporary exemptions to initial applications filed on or before June 9, 2023. State agencies must process initial applications filed on or after June 10,

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		2023, using only the student exemptions at Section 6(e) of the Food and Nutrition Act of 2008 and 7 CFR 273.5(b).
		The CAA, 21 also specifies that state agencies must stop applying the temporary exemptions at the household's next recertification beginning no earlier than 30 days after the PHE is lifted. Recertification applications submitted through June 30, 2023, must be processed using the temporary exemptions. Recertification applications submitted on or after July 1, 2023, must be processed using only the student exemptions at Section 6(e) of the Food and Nutrition Act of 2008 and 7 CFR 273.5(b).
SNAP: SNAP Administrative Flexibilities	The Families First Coronavirus Response Act provided the Food and Nutrition Service (FNS) with the authority to approve adjustments to program procedures in response to the pandemic, including but not limited to: extending certification periods, waiving interviews, and allowing telephonic signatures. Several administrative waivers approved by FNS under the PHE will end no later than June 30 , and a few will extend beyond.	Notice to State SNAP Agencies: Expiration of Program Flexibilities for the COVID-19 PHE Memorandum to State SNAP Agencies: SNAP Resource Materials and Policy Memos to Support the End of the COVID-19 PHE Memorandum to State SNAP Agencies: SNAP Workload Management Matrix Note: To help ease the transition for states, FNS is offering four administrative waivers to streamline the certification process. FNS can approve these under its authority to approve waivers due to unique, temporary situations or to support more effective and efficient program administration. These include waivers to:

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SNAP: SNAP Administrative Flexibilities		 Streamline the recertification requirements (i.e., use a simplified process to recertify SNAP recipients); Waive the SNAP interview at initial application or recertification; Adjust follow-up procedures when a household's address changes to align with Medicaid; or Expand use of telephonic signatures. These transitional waivers may be approved through June 30, 2024—except the expanded use of telephonic signatures, which may be approved beyond that date to support effective and efficient program administration.
Rural Housing Service: Single Family Housing 502 Direct Program	Currently, 502 direct borrowers can be placed in a moratorium (payments not required) without application or justification. Following the end of the PHE , 502 direct borrowers will have to submit an application along with justification for why they are requesting a payment moratorium (i.e., income loss for example).	Fact Sheet: Rural Home Loans (Direct Program)
Rural Housing Service: Single Family Housing 502 Guaranteed	Currently, 502 guaranteed borrowers can be placed in forbearance (payments not required) without application or justification. Following the end of the PHE, 502 guaranteed borrowers will have to submit an application to the guaranteed lender with justification for why they are requesting a payment moratorium.	Fact Sheet: CARES Act Forbearance Fact Sheet for Borrowers With FHA, VA, or USDA Loans

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Rural Housing Service: Multi-Family Housing Evictions	CARES Act authority requires multi-family housing (MFH) property owners provide at least a 30-day notice to tenants before eviction. Following the end of the PHE , owners will still be required to provide 30-day notice. MFH is currently working on a proposed rule that will require owners to provide at least a 30-day notice to tenants before an eviction. This proposed rule is anticipated to be released in fall 2023.	Fact Sheet: Protections for Renters in Multi-family Housing or Federally Subsidized Housing
U.S. Department of Health and Human Services (HHS)		
Centers for Medicare and Medicaid Services (CMS): Medicaid Enrollment	As a condition of receiving a temporary 6.2 percentage point Federal Medical Assistance Percentage (FMAP) increase under the Families First Coronavirus Response Act, states have been required to maintain enrollment of nearly all Medicaid enrollees. When the continuous coverage requirement expires, states will have up to 12 months to return to normal eligibility and enrollment operations.	Announcement: Unwinding and Returning to Regular Operations After COVID-19 Medicaid Letter to State Health Officials: Letter RE: Medicaid Continuous, Enrollment Condition Changes, Conditions for Receiving the FFCRA Temporary FMAP Increase, Reporting Requirements, and Enforcement Provisions in the Consolidated Appropriations Act, 2023 Notes: States must initiate renewals for all individuals enrolled in Medicaid within 12 months and must complete renewals within 14 months of the beginning of the state's unwinding period. This announcement ends continuous enrollment as a condition for temporary FMAP increase on March 31, 2023. States must work to ensure up-to-date contact information and reach out multiple times through multiple means to individuals for redetermination. As part of the Consolidated Appropriations Act, 2023, the continuous enrollment condition will end on March 31, 2023. The temporary FMAP increase will be gradually reduced

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		and phased down beginning April 1, 2023 (and will end on December 31, 2023).
		Populations Experiencing Homelessness: States are strongly encouraged to implement several strategies to ensure an attempt is made to obtain up-to-date contact information for all beneficiaries, including strategies that target hard-to-reach, homeless, rural, or tribal populations for whom many strategies may be less effective.
CMS: Other Maintenance of Eligibility Provisions	The Families First Coronavirus Response Act authorized a 6.2 percentage point increase in the FMAP (retroactive to January 1, 2020) available if states meet certain "maintenance of eligibility" requirements. The temporary FMAP increase will be gradually reduced and phased down beginning April 1, 2023 (and will end on December 31, 2023).	Letter to State Health Officials: Letter RE: Medicaid Continuous, Enrollment Condition Changes, Conditions for Receiving the FFCRA Temporary FMAP Increase, Reporting Requirements, and Enforcement Provisions in the Consolidated Appropriations Act, 2023
		Notes: States may not claim FMAP increase during a quarter if they impose eligibility standards more restrictive than those from January 1, 2020. States claiming increase may increase the Medicaid premium amount of a given individual and still receive FMAP increase as of April 1, 2023 if the increase is consistent with state's Medicaid premium schedule, do not exceed amounts in effect as of January 1, 2020, and the state complies with re-determination requirements prior to resuming premiums. States may request to delay resuming premiums until a full redetermination is completed for given beneficiary. States must continue to cover, without cost-sharing, COVID testing, services, and treatment until December 31, 2023.

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CMS: Program Administration Flexibility	Rural health clinics (RHCs) and federally qualified health centers (FQHCs) can provide distant site telehealth services to Medicare patients wherever they are located, even in their homes, during the COVID-19 PHE.	Guidance: Rural Health Clinics and Federally Qualified Health Centers Notes: This topic and guidance relates to Medicare only. RHCs and FQHCs may provide and be paid for telehealth services furnished to Medicare patients located at any site, including the patient's home, through December 31, 2024.
U.S. Department of Veterans Affairs (VA)		
Supportive Services for Veteran Families (SSVF): Program Administrations and Cost Flexibility	Section 301 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (P.L. 100-707; 42 U.S.C. § 5141) permitted federal agencies charged with the administration of a federal assistance program may, if so requested by the applicant state or local authorities, modify, or waive for a major disaster, such administrative conditions for assistance as would otherwise prevent the giving of assistance under such programs if the inability to meet such conditions is a result of the major disaster. Additionally, section 20012 of the CARES Act (P.L. 116-136) removes funding limits for financial assistance for SSVF for very low-income veteran families in permanent housing during a public health emergency. Using the authority under the Stafford Act and the CARES Act, VA waived limits on financial assistance provided to SSVF grantees. SSVF grantees were then able to provide assistance to veterans, which included the waiving of time limits on the number of months for rental, utility, and emergency housing assistance.	Guidance: COVID-19 Guidance
VA Medical Centers: Flexible Assistance for Homeless Veterans	Section 4201(a) of the Johnny Isakson and David P. Roe, M.D. Veterans Health Care and Benefits Improvement Act of 2020 (P.L. 116-315) authorizes the VA Secretary, during a covered public health emergency, to use amounts appropriated or otherwise made available to carry out 38 U.S.C. §§ 2011, 2012, 2031, and 2061, to provide to homeless veterans and veterans participating in the U.S. Department of Housing and Urban	Fact Sheet: Flexible Assistance for Homeless Veterans

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	Development-Veterans Affairs Supportive Housing (HUD-VASH) Program, as the Secretary determines is needed, assistance required for safety and survival (such as food, shelter, clothing, blankets, and hygiene items); transportation required to support stability and health (such as appointments with service providers, conducting housing searches, and obtaining food and supplies); communications equipment and services (such as tablets, smartphones, disposable phones, and related service plans) required to support stability and health (such as maintaining contact with service providers, prospective landlords, and family); and other such assistance as the Secretary determines is needed.	
	From May 2021 through March 2023, VA Medical Centers across the U.S. have directly helped over 58,900 Veterans using nearly \$10.6 million in funding through the expanded flexibilities authorized by the Johnny Isakson and David P. Roe, MD Veterans Health Care and Benefits Improvement Act of 2020 (P.L. 116-315). VA Medical Centers have purchased groceries, meals, apartment start-up kits, furniture, Goodwill merchandise vouchers, and laundry vouchers for Veterans experiencing homelessness. This guidance has allowed for the creation of a nationally coordinated rideshare program, which provides support to Veterans who need transportation to meet their health, housing, legal, and employment needs. As of February 2023, this service has provided more than 416,000 rides to over 41,500 Veterans at a value of over \$13.6 million.	
Grant and Per Diem Program (GPD): Program Rates	Section 20013 of the CARES Act (P.L. 116-136 as amended by P.L. 116-315 § 4201(b)) permits the VA to waive limits on GPD payments and allows flexibility on the types of assistance provided to homeless veterans during a public health emergency. Section 4201(b) of P.L. 116-315 set the per diem rate to a maximum of three times the state home rate.	Note: Per diem rates are expected to return to their statutory maximum (115% of the state home for domiciliary care rate) at the end of the COVID-19 public health emergency.