



## Kentucky Caucus Agenda

Wednesday, Feb. 5, 2025, 9:30am - 3:00pm  
Fahe Office, 319 Oak Street, Berea, KY 40403

**Due to Decades of underinvestment, recent population growth and severe natural disasters, Kentucky has an insufficient housing supply. We can combat this through creating jobs and economic activity by allowing local employers to help create family self-sufficiency. The work of the KY Fahe Caucus is transforming Appalachian communities by developing and preserving quality housing which is an essential ingredient to healthy communities.**

**1) Welcome Members and Recognize Guests** (*Cassie Hudson, Vonda Poynter*)  
Dawn Grace – FHLB-CIN, Adrienne Bush – HHCK; Curtis Stauffer - KHC; Billie Hardin, Lona Brewer, KY EEC; Travis Weber, DLG, Gladstone Sellers, HORNE (Virtual) Farah Ahmad, Partners for Rural Transformation (Virtual)

**2) 9:30 – 10:30 – OEP Stakeholder Meeting – KY Rebate Programs (HER, HEAR)**

**3) Around the Horn – Question from Cassie-** Federal Grant pause – How are we dealing with it and how do we prepare for future interruptions? **30 min**

### **PARTNER TIME**

**4) KHC Updates** – Curtis Stauffer **20 min**

- a. Homebuyer & Home Repair NOFA response
- b. ARPA program(s) status, HOME-ARP with Supportive Housing; HOME ARP rental SHP with LIHTC awards – funding status
- c. Rural Housing Trust Funds – Round 1 & Round 2 Status
- d. HUD PRICE Program Award status

**5) Federal Home Loan Bank Update** **15 min**

- a. Carol M. Peterson – Window opened Feb. 3<sup>rd</sup>
- b. 2024 AHP – Congratulations to Frontier Housing (Scattered site development)
- c. DRP – Reservation process extended to 4 years – Moving well?
- d. Mfg. Home Replacement (pre-1976) Grant Pilot Program – “First 100”
- e. Welcome Home Program **pp. 4-5**

**6) HHCK Updates** - Adrienne Bush **15 min**

- a. Have a Heart for Housing Day – February 4 – report out
- b. KY Legislature Affordable Housing Caucus - status
- c. State Legislative Actions on Housing - status

**7) CDBG Updates – Travis Weber** **15 min**

- a. CD Update – DLG 21 CDBG-DR for WKY & EKY - [Housing Can't Wait](#)
- b. CDBG-DR – apply for duplexes under multi-family rental
- c. 2022 CDBG-DR – Fahe contract for administration pending

**LUNCH – 12:30 pm**

**STRENGTH IN NUMBERS TIME**

## 8) Fahe Membership Business

20 min

- a. Review Previous Minutes and Action Items **pp. 6-11**
  - Board Elections – Angie Allen, Nominating Cmte Representative
- b. Fahe housing Challenge
  - 4 Corner Working Groups – Meetings in March – what do you want to know?
    - Capacity – Tom Manning-Bevin
    - Narrative - Lina
    - People - Maggie
    - Money – Written from Jeneene **pp. 12-13**

## 9) Advocacy - Maggie Riden

30 min

- a. Advocacy Coalition – Kentucky Strategy update Andrew Bates [abates@fahe.org](mailto:abates@fahe.org)
- b. Federal Updates – Josh Stewart and Kylie Milliken
  - Discussion on Appropriations
  - HUD HOME Final Rule – timeline and highlights **pp. 14-18** – Presentation: <https://fahemembers.com/wp-content/uploads/2025-Final-Rule-summary-Fahe-slides.pdf>

## 10) Member Interest – Updates Traviss Witt

20 min

- a. ARC ARISE – Fahe's VITAL Planning Grant progress report
  - Training after Spring Retreat
- b. Energy Opportunities – CCIA applications with OFN and ACC
- c. PRICE Program awarded to Kentucky Dept. for Local Government/KHC

## 11) Fahe Updates

30 min

- a. Board Meeting Report – December 3, 2024 – Scott McReynolds, Seth Long
- b. Membership Updates
  - Reporting – QE 12-31-24 status **p. 19**
  - Upcoming Training Opportunities
    - Feb. 10-14 NWA-NTI, Philadelphia; April 16/17 workforce development
  - Fahe History Project & Survey – Diedre Kendall, Fahe AmeriCorps VISTA
  - Health and Housing – White Paper – Nicholas Bormes **pp. 20-34**
- c. Programs/Disaster Resiliency/Housing Can't Wait – update from Ashton Whitley
- d. Communication Introduction – Lina Page, Kevin Flora – *launch campaign; share stories* **p.35**
- e. Loan Servicing – Services Info **p. 36**
- f. Lending – Federal Pause update, planning ahead
  - Community Lending
  - [JustChoice Lending](#) **pp. 37-38**

## Upcoming Events

- **February 6 –ET – 11 am - Fahe Advocacy Tool Kit – Federal Budget**
- **February 10-14** - NeighborWorks America NTI — Philly
- **March** – Mtn Assn Workshops: **Preparing Your Small Business for Death & Disaster** (info below)

- **March 20 – 11 am ET – Fahe Advocacy Tool Kit – Economic Impact of Fahe Members**
- **April 15-16** – Fahe Spring Retreat, Berea
- **April 16-17:** Workforce Training following Spring Retreat
- **April 17** – FHLB-CIN AHP Workshop @University of Louisville
- **April 24 - 11 am ET: Fahe Advocacy Tool Kit – Rural vs. Urban Housing Challenges**
- **May** – Second workforce training - TBD
- **May 22 – 11 am ET – Fahe Advocacy Tool Kit – Moving the Neighborhood NIMBY to YIMBY**
- **June 18** - KY Caucus Meeting – Highlands Housing
- **June 26 – 11 am ET – Fahe Advocacy Tool Kit – Declining Federal Funding...**
- **August 25-29** - NeighborWorks America NTI – New Orleans
- **September 29-October 2 – Fahe Annual Mtg – MeadowView Conf. Center, Kingsport,TN**
- **November 5** – KY Caucus Meeting – location TBD

Sign up for Fahe's Member Newsletter here: [www.fahemembers.com/signup](http://www.fahemembers.com/signup)

Sign up for Fahe's Blog here: [www.fahe.org/signup](http://www.fahe.org/signup)



### **Preparing Your Small Business for Death & Disaster**

Join us for a workshop focused on preparing your business for the unexpected.

- Wednesday, March 5: Hazard
- Thursday, March 6: London
- Wednesday, March 12: Prestonsburg
- Thursday, March 13: Ashland

Each workshop will run from 10-11:30am followed by an optional Q&A from 11:30-12pm.

In the first half, an attorney will cover critical topics such as planning for the death of a business owner, legal considerations, buy/sell arrangements, key person insurance, and estate planning.

In the next half, you'll learn how to safeguard your business in the face of natural disasters.

Participants will be able to sign up for free one-on-one consulting with an attorney after the training to cover any remaining questions (available to attendees who are based in one of the 54 Appalachian Kentucky counties).

Participants will also leave with a death and disaster workbook that will serve as a foundation to your planning.

The cost is \$10 per attendee. [Register here](#)

Contact Ariel Fugate with questions: [ariel@mtassociation.org](mailto:ariel@mtassociation.org)



# Welcome Home Program

## What is it?

- Offers grants to fund reasonable down payment and closing costs incurred in conjunction with the acquisition or construction of owner-occupied housing by income qualified homebuyers
- Grants are limited to \$20,000 for homebuyers
- Members are subject to an aggregate limit of \$600,000 per calendar year
- All funds are reserved for specific homebuyers purchasing specific homes and cannot be transferred to other homebuyers or to other homes

## When does it start?

- Welcome Home Program funds will be available for reservation on a first-come, first-served basis beginning at 8:00 a.m. ET on March 3, 2025, and will remain available until all funds have been reserved

## What are the program requirements?

- The total income for all occupants must be at or below 80 percent of the Mortgage Revenue Bond (MRB) limit for the county and state where the property is located
- Homebuyers must contribute at least \$500 of their own funds toward down payment and/or closing costs
- Applicants do not have to be first-time homebuyers
- Grant funds are intended only for homebuyers who qualify for the first mortgage based on their own merit
- A minimum grant of \$10,000 must be requested for all households
- Grant funds may be used in conjunction with other local, state and federal funding sources and with the FHLB Cincinnati's Community Investment Cash Advance Programs
- The member who reserves the Welcome Home Program funds must originate the first mortgage, but the loan may close in the name of a third party
- Only second mortgages provided by formal organizations such as community development financial institutions, housing finance agencies, non-profit organizations, etc. are acceptable

# Kentucky Income Limits for WHP

COUNTY	1-2 PERSONS	3+ PERSONS
Adair	\$64,640	\$74,336
Allen	\$68,928	\$80,416
Anderson	\$73,076	\$84,038
Ballard	\$70,752	\$82,544
Barren	\$64,640	\$74,336
Bath	\$77,568	\$90,496
Bell	\$77,568	\$90,496
Boone	\$83,840	\$96,416
Bourbon	\$76,160	\$87,584
Boyd	\$68,448	\$79,856
Boyle	\$71,040	\$82,880
Bracken	\$83,840	\$96,416
Breathitt	\$77,568	\$90,496
Breckinridge	\$67,488	\$78,736
Bullitt	\$77,120	\$88,688
Butler	\$64,640	\$75,152
Caldwell	\$64,640	\$74,928
Calloway	\$72,576	\$84,672
Campbell	\$83,840	\$96,416
Carlisle	\$67,488	\$78,736
Carroll	\$64,640	\$74,336
Carter	\$77,568	\$90,496
Casey	\$77,568	\$90,496
Christian	\$74,228	\$85,362
Clark	\$76,160	\$87,584
Clay	\$77,568	\$90,496
Clinton	\$77,568	\$90,496
Crittenden	\$73,632	\$85,904
Cumberland	\$64,640	\$74,336
Daviess	\$73,860	\$84,939
Edmonson	\$73,412	\$84,424
Elliott	\$77,568	\$90,496
Estill	\$77,568	\$90,496
Fayette	\$76,160	\$87,584
Fleming	\$64,640	\$74,336
Floyd	\$77,568	\$90,496
Franklin	\$73,588	\$84,626
Fulton	\$64,640	\$74,336
Gallatin	\$83,840	\$96,416
Garrard	\$69,696	\$81,312
Grant	\$69,984	\$81,648
Graves	\$67,776	\$79,072

COUNTY	1-2 PERSONS	3+ PERSONS
Grayson	\$64,640	\$74,336
Green	\$64,640	\$74,336
Greenup	\$68,448	\$79,856
Hancock	\$73,860	\$84,939
Hardin	\$74,596	\$85,786
Harlan	\$77,568	\$90,496
Harrison	\$74,496	\$85,859
Hart	\$64,640	\$74,336
Henderson	\$73,796	\$84,866
Henry	\$77,120	\$88,688
Hickman	\$69,984	\$81,648
Hopkins	\$66,240	\$77,280
Jackson	\$77,568	\$90,496
Jefferson	\$77,120	\$88,688
Jessamine	\$76,160	\$87,584
Johnson	\$77,568	\$90,496
Kenton	\$83,840	\$96,416
Knott	\$77,568	\$90,496
Knox	\$77,568	\$90,496
Larue	\$74,596	\$85,786
Laurel	\$64,640	\$74,336
Lawrence	\$77,568	\$90,496
Lee	\$77,568	\$90,496
Leslie	\$77,568	\$90,496
Letcher	\$77,568	\$90,496
Lewis	\$77,568	\$90,496
Lincoln	\$64,640	\$74,336
Livingston	\$68,832	\$80,304
Logan	\$71,040	\$82,880
Lyon	\$73,988	\$85,086
Madison	\$73,636	\$84,682
Magoffin	\$77,568	\$90,496
Marion	\$68,544	\$79,968
Marshall	\$73,924	\$85,013
Martin	\$77,568	\$90,496
Mason	\$66,048	\$77,056
McCracken	\$73,828	\$84,902
McCreary	\$77,568	\$90,496
McLean	\$73,860	\$84,939
Meade	\$72,804	\$83,725
Menifee	\$77,568	\$90,496
Mercer	\$73,684	\$84,737

COUNTY	1-2 PERSONS	3+ PERSONS
Metcalfe	\$77,568	\$90,496
Monroe	\$64,640	\$74,336
Montgomery	\$68,736	\$80,192
Morgan	\$77,568	\$90,496
Muhlenberg	\$69,120	\$80,640
Nelson	\$73,284	\$84,277
Nicholas	\$67,008	\$78,176
Ohio	\$64,640	\$74,336
Oldham	\$77,120	\$88,688
Owen	\$69,120	\$80,640
Owsley	\$77,568	\$90,496
Pendleton	\$83,840	\$96,416
Perry	\$77,568	\$90,496
Pike	\$77,568	\$90,496
Powell	\$77,568	\$90,496
Pulaski	\$64,640	\$74,336
Robertson	\$77,568	\$90,496
Rockcastle	\$77,568	\$90,496
Rowan	\$77,568	\$90,496
Russell	\$65,472	\$76,384
Scott	\$76,160	\$87,584
Shelby	\$80,400	\$92,460
Simpson	\$69,600	\$81,200
Spencer	\$77,120	\$88,688
Taylor	\$67,776	\$79,072
Todd	\$67,776	\$79,072
Trigg	\$74,228	\$85,362
Trimble	\$74,404	\$85,565
Union	\$67,488	\$78,736
Warren	\$73,412	\$84,424
Washington	\$73,796	\$84,866
Wayne	\$77,568	\$90,496
Webster	\$64,992	\$75,824
Whitley	\$77,568	\$90,496
Wolfe	\$77,568	\$90,496
Woodford	\$76,160	\$87,584





**Kentucky Caucus Minutes**  
**Thursday, Nov. 7, 2024, 10:00 am - 3:00 pm**  
**Fahe Office, 319 Oak Street, Berea, KY 40403**

**Attendees:**

Name	Organization	Name	Organization
Amanda Voyles	Beattyville HDC	Travis Weber	Guest - DLG
Charles Lester	Bell-Whitley CAA	Billie Harding	Guest - KY EEC
Ken Stuber	CAP	Dawn Grace	Guest - FHLB-CIN
Preston Jones	COAP	Bridget Ellery	Guest -FHLB-CIN Virtual
	<b>Community Ventures</b>	Antwoine Linton	Guest - KHC
Cassandra Kinney	Frontier Housing	Jessica Shelton	Guest - KHC
Tom Manning-Beavin	Frontier Housing	Tom Carew	Guest - USDA
Jessica Conn	Frontier Housing	Traci Vaught	Guest - USDA
Angie Allen	Highlands Housing	Erika King	Guest - USDA
Tiffany Boston	Highlands Housing	Adrienne Bush	Guest - HHCK
Seth Long	HOMES	Andrew Bates	Fahe
James Caudill	Housing Dev. Alliance	Diedre Kendall	Fahe
Rebekah Vermillion	Housing Dev. Alliance	Jerri Dyer	Fahe
Michael Cassel	Housing Dev. Alliance	Jim King	Fahe
Scott McReynolds	Housing Dev. Alliance	Kevin Flora	Fahe
Beverly Isom	KCEOC	Kylie Milliken	Fahe
Jennifer Smith	KCEOC	Nicholaus Bormes	Fahe
	<b>KHIC</b>	Traviss Witt	Fahe
Rob Dowden	KMHDC	Vonda Poynter	Fahe
Angela Crase	KRCC	April Pritchard	Fahe - Virtual
Robin Fouch	KRCC	Emily Burtleson	Fahe - Virtual
Jimmy Stone	KRFDC	Jackie Weiss	Fahe - Virtual
Cassie Hudson	Partnership Housing	Maggie Riden	Fahe - Virtual
Anne Price	PSHH	Sara Ball	Fahe - Virtual

**14 of 16 Members Represented = 87.5% attendance**

**1) Welcome Members and Recognize Guests** (Cassie Hudson, Vonda Poynter)  
 Dawn Grace – FHLB-CIN, Adrienne Bush – HHCK; Jessica Shelton, Antwoine Linton - KHC; Tom Carew, Erica King, Traci Vaught- USDA-RD; Lona Brewer, Emma Strong, Billie Hardin - KY EEC; Travis Weber, DLG

**2) Around the Horn** – What lessons learned would you like to share with Members working on flood recovery in NE TN & SW VA? OR What is going on right now at your organization?

**PARTNER TIME**

**3) USDA Updates** – Tom Carew, Erica King, Traci Vaught

- a. USDA Federal Allocations/Spending
- b. Rural Housing Assistance Grants (RHAG) status
  - i. Disaster program – #2 in the nation on dollars and numbers of jobs being assisted. 2022 Omnibus bill – reach out to congressional delegation and the state rural development office to support that kind of allocation. Serves families up to 80% of AMI (not the 50% AMI with 504) – grant amount increased.
  - ii. Other pots of money for water/sewer systems.
  - iii. Operating under CR through Dec. 2024. 504 very low funds are plentiful. 6 Not

- many 504 low money (up to 80%).
- iv. Update the 515 program – over 500 in KY – many are maturing at 30-year mark. Erica will be moving up – Blaine will be Fahe contact. Communication very important. Call us if you don't hear from us.
- v. Tom will be leaving mid-December. Tracy will be the interim State Director.
- vi. Erica – 12<sup>th</sup> in the nation for direct loans, 10<sup>th</sup> in the nation on 504 dollars – 2<sup>nd</sup> on all grants. 1<sup>st</sup> in the nation on rural disaster. A substantial list of updates to the handbook – please review. Have plenty of very low 504, Disaster, and Guaranteed loans. 4.375 is the interest rate likely though December. Alex Sutton (London Office) will be more involved.

#### 4) KHC Updates – Jessica Shelton, Antwoine Linton

- a. Upcoming Homebuyer & Home Repair NOFA
- b. ARPA program(s) status, HOME-ARP with Supportive Housing; HOME ARP rental SHP with LIHTC awards – funding status
- c. Rural Housing Trust Funds – Round 1 being expended
- d. Rural Housing Trust Fund – Round 2 status
  - i. Low on WX applications. Will notify developers before they target specific areas.
  - ii. KHC did a great job of lowering PITI – stay the same as first round.
  - iii. SF production – min. energy standards – Energy Efficiency Standards. 180 days from Nov. 28 to get them in place.
  - iv. Applications open Dec. 9, closing on 2-14-24 – not specific to disaster areas.
- e. HOME/AHTF
  - Nov. 18 at 10am. Close on Jan. 17<sup>th</sup>. (check the expenditure requirements).

#### 5) Federal Home Loan Bank Update – Dawn Grace, VP of housing and community investment

- a. Advisory Council Interest? 1
  - Cassie is on the Advisory Council – up to 3 terms of 3 years each. 13 people – 4 from each state and the state ED of the FHA – Winston Miller now, then TN, then OH, then KY. Solicit state representation. You can nominate yourself or be nominated. The form is on the website.
- b. Carol M. Peterson Housing Fund Close out
  - Previously did \$1-\$3 – went fast. Had \$15.9M available; CMPHF is a bank voluntary program. Feb. 1 to June 20 for CMP. Guidelines will be released in January. Suspect that we will continue to do similar to 2024.
- c. 2024 AHP – announcement 2<sup>nd</sup> week of Nov.
  - AHP announcements in Nov. 21<sup>st</sup> pending board approval – more info in Feb.
- d. DRP – Reservation process extended to 4 years – Moving well?
  - Affected by natural disasters. Grant for HO at \$20,000 or \$10,000 for renters wanting to be HO.
- e. Mfg. Home Replacement (pre-1976) Grant Pilot Program – “First 100”
  - i. Have a 5-year retention agreement – sponsor required to make sure the mobile home is decommissioned. 140% of mortgage revenue bonds – tends to be higher than AML; other programs use AML. Homebuyer must contribute \$500. April/May of 2025 for kickoff.
  - ii. Scott – own trailer, rented lot – eligible to transition to HO. Own property and trailer – can rebuild on that land. Decommission and use a new mobile home on permanent foundation – if all costs under \$50,000, not PITI so you could do a 30%

- AMI person. Energy Star and permanent foundation. HERS rating – new construction Energy Star versus new mobile home Energy Star.
- iii. Not-so-tiny homes – if a 500 SF 1 bedroom house at Energy Star standards – Dawn will check.

## 6) HHCK Updates - Adrienne Bush

- a. KY Legislature Affordable Housing Caucus  
Leg. Housing Task Force (East KY – no representation) shortage of housing. Elliott County Judge Executive spoke to this Task Force. Talk about the need for flexible funding – much more to scale than the AHTF and RHTF. Maybe the Affordable Housing Caucus. Permanent statutory housing committee. Issue of Certificate of Need. It is a ten-person committee.
- b. State Legislative Actions on Housing
  - i. Legislative Actions – tragic death of Sen. Turner, Rep. Justice is gone so two replacements. Pineville Mayor will be the Representative for the next 4 years. Republican leadership very representative.
  - ii. **Brandon Smith – good possibility**

## 7) CDBG Updates – Travis Weber

- a. CDBG Update – Travis Weber, DLG 21 CDBG-DR for WKY & EKY - [Housing Can't Wait](#)
  - i. Reg. CDBG – app cycle closes on Jan. 31<sup>st</sup> –working more with DLG on disaster recovery – the CDBG funds are still there and is a possibility for communities – work with city/counties. DLG will work with you to get an application purpose ironed out.
  - ii. Housing Can't Wait – total \$9,376,442 – granted out \$2,679,650. \$6.7M is earmarked for Chestnut Ridge a subdivision in Knott County – 57 homes – to the builders on that property.
- b. CDBG-DR – apply for duplexes under multi-family rental
  - i. 21 CDBG-DR – Housing funds are nearly expended. ED, Infrastructure may be available.
  - ii. 22 CDBG-DR – available. Every housing program is available for rehab, new construction, manufactured – regular CDBG. 515 programs, no per unit restriction cap on a unit.
- c. 2022 CDBG-DR – Fahe contract for administration pending
  - i. Fahe contract for client and case management – any CDBG disaster recovery unit or funds – rental or homeownership. Has a portal – will likely see more information through Housing Can't Wait. Floyd Co, Owsley Co, Perry Co. send your current clients to Fahe for eligibility.
  - ii. Rehab Reconstruction Program for East KY – open to a disaster impacted county. Should be released in 30 days – coordinate with Fahe – as homebuilders, you will have to act of contractors vs. traditional developer model. Still do the work with a contract as a contractor with the state. Not just blight/deteriorated – use regular CDBG. Materials – may have to do documentation on costs.
  - iii. Duplexes (multifamily) are working well in rural and more urban areas. Patio home for HO, duplex for Rental. Single-family unit for home sales. Minimum number of duplexes to apply for is one.
  - iv. 3 different purposes in one application – use regular CDBG or CDBG-DR. Mixed projects are fine. 12 units – 6 HO and 6 rental – can blend in one application.



## 8) Team KY EEC - Lona Brewer, Emma Strong, Billie Hardin

- a. Solar for All  
Approved the Environmental Protection Agency Solar for All Grant - \$62M – one year design phase – welcome input to shape the program.
- b. Rebate Implementer  
Rebate program – program implementor at HORNE, Tray Glascome. \$130M to KY through 2 funding streams – large low income and disadvantaged community focus. Whole home program – highest level of rebate, capped up to 150% AMI, 100% of costs.
- c. Training Funds
  - i. Workforce Development – \$2M for training. Waiting on money to launch in Spring of 2025
  - ii. Developing a website – set up a domain – should go live by the end of November. If questions now or in the future, please reach out. Excited to share \$200M - hoping for Spring 2025 to launch.

## 9) Fahe Membership Business

- a. Review Previous Minutes and Action Items - Tom Manning-Beavin made motion to approve, seconded by Scott McReynolds. Minutes approved.
- b. Jim's Updates
  - i. A Board Elections (*Angie Allen, Nominating Cmte*)
  - ii. Fahe Challenge
    - Change in administration – it is powerful to have framed this challenge and know that we are working on solutions. New administration will need to know that we have a frame and that we are working on solutions.
    - 30K units of housing; want us to address 60K by 2030
  - iii. Dwayne Yost Friend of Fahe award – Named for Dwayne Yost, early pioneer of affordable housing. Awarded today to Jerry Roll, Hazard Perry County Community Ministries; started Housing Development Alliance, East KY Child Care Coalition. Early advocate of the AHTF, founder of the HHCK served as chair for a long time.
- c. 4 Corner Working Groups – (Jackie) – Meetings in November:
  - Capacity – **Nov. 12** @ 10:30am (1<sup>st</sup> Tues. every other month)
  - Narrative – **Nov. 12** @ 3:00pm (recurring day/time TBD at the meeting in Nov.)
  - People – **Nov. 20** @ 3:00pm (3<sup>rd</sup> Wed. every other month)
  - Money - **Nov. 25** @ 2:30 pm ET (4<sup>th</sup> Mon. every other month)

**LUNCH – 12:30 pm**

## **STRENGTH IN NUMBERS TIME - CAUCUS TIME**

## 10) Advocacy - Maggie Riden

- a. KY Caucus Elevator pitch:

**Due to Decades of underinvestment, recent population growth and severe natural disasters, Kentucky has an insufficient housing supply. We can combat this through creating jobs and economic activity by allowing local employers to help create family self-sufficiency. The work of the KY Fahe Caucus is transforming Appalachian communities by developing and preserving quality housing which is an essential ingredient to healthy communities.**
- b. Advocacy Coalition – Kentucky Strategy Retreat – Andrew Bates

[abates@fahe.org](mailto:abates@fahe.org)

- i. Slides from Strategy Workshop on Advocacy – went over in the coalition meeting last week. Audience, Senator Stivers, from Caucus, Urban League, others in West KY, looking at state-wide priorities. Kertis Kreative facilitated.
  - ii. Wordsmith the Recommended Vision Statement – clarification on Audience – who is speaking for clarity.
  - iii. Chairs would run the meetings (one from balance of state, one from Fahe KY Caucus)
  - iv. Creating a Logo? – interested in assisting let Andrew Bates know. The Campaign could still unify us with a logo. There could still be coalition building – providing roles. Campaign and branding a logo – leverages existing items such as “Have a Heart for Housing”.
  - v. The coalition isn’t about getting other coalitions together to unify our asks but it is creating another entity.
- c. Federal Updates & Discussion on Appropriations – Josh Stewart, Kylie Milliken
- i. Any volunteers for appropriation workshops.

## 11) Member Interest – Updates Travis Witt

- a. ARC ARISE – Fahe’s VITAL Planning Grant expectations  
Hired a consultant, had kick-off with the 5 members we are studying workforce development programs. The goal is to have a path to implement by this time next year which would allow us to expand the opportunity to implement workforce development across the Membership.
- b. Energy Opportunities – pending RFP from awardees – Travis  
Applied for \$10M with OFN - Cohn-Reznick – department for federal compliance – they will help us figure out the products and how to stack them. We will have to certify GGR – they will help us there. Talked to USDA and RESNET regarding their ability to take a HERS rating and turn it into a GGR number.
- c. PRICE Awards pending – Travis - Supposed to hear in October, no word yet.
- d. Solar Ready Housing - Seth Long (any interest in training?)
  - i. Solar work in 2019 – hard to marry with affordable housing until after the flood. Have done 5 net-zero housing. Not as hard as we thought it was, didn’t cost as much as we thought it was. With us doing it ourselves – real cost of material and labor is \$11,500.
  - ii. \$200 to modify your house plans to make it a solar ready house – wiring to be run without cutting sheet rock, 10 steps to take. In theory – the install of solar in 3 years, it is easier, more efficient and can be paid for by EPA or another funding source that may not be in place today. Thompson Branch Subdivision, 8 new houses will be net zero. For certain funding, you must commit to net zero housing.

## 12) Fahe Updates

- a. Board Meeting Report – Sept. 20 – Scott McReynolds, Seth Long  
No significant action – did complete Jim's performance.
- b. Membership Updates
  - Reporting – QE 9-30-24 status- Jackie
    - Complete quarterly reporting for the period ending 9/30, had an extension from NeighborWorks.
  - 2024 Training Opportunities – Jackie

- If signed up for free courses in NeighborWorks package, make sure you are completing courses soon.
- Attend Jim King's housing challenge call on 10/31 if interested
- Consider attending NeighborWorks Training Institute in Philadelphia (Feb) or New Orleans
- Fahe History Project & Survey – Diedre Kendall, Fahe AmeriCorps VISTA
  - Provide any historical Fahe photos/documents to Deidre for anniversary project
- Member Disaster Risk Assessment – Jeremy Cornett, Fahe AmeriCorps VISTA
  - AmeriCorps VISTA project completed, resource packets to be distributed
  - 100% participation from Fahe network in providing input
  - Tools and resources available to help develop local mitigation plans
- d. Programs/Disaster Resiliency/Housing Can't Wait – update from Ashton Whitney
- e. Research – REED Cmte, Data Explorer Update – see packet
- f. Communication Introduction – Lina Page, Kevin Flora  
 Fahe recently hired a Digital Marketing Manager, Kevin Flora, who will work alongside Lina Page in the Communications Team. Based out of Corbin, KY, he has run a digital marketing agency. He is chartered with expanding visibility and engagement for Fahe as a whole through our online platforms, and he will be working closely with Lina on the new narrative campaign next year.
- g. Lending – Community Lending and [JustChoice Lending](#)
- h. Partners for Rural Transformation - Sara Ball
  - i. Developing SWIFT tool to share information across partner organizations
  - ii. Second volume of Stories of Rural America story map launched
  - iii. Seeking additional rural stories and voices to feature
  - iv. **[Home - Stories of Rural America](#) – 7 stories,, just recently launched – [SWIFT - Google Drive](#)**
  - v. Send content for the PRT Website to [essence@pfrt.org](mailto:essence@pfrt.org)

### **Upcoming Events**

- **November** - Four Corner Working – see dates above
- **2024 Virginia Housing Conference** – November 13-15, 2024
- **February 10-14** - NeighborWorks America NTI — Philly
- **August 25-29** - NeighborWorks America NTI – New Orleans

Sign up for Fahe's Member Newsletter here: [www.fahemembers.com/signup](http://www.fahemembers.com/signup)

Sign up for Fahe's Blog here: [www.fahe.org/signup](http://www.fahe.org/signup)

## Money 4CWG Report out (general):

The money working group met on the 4<sup>th</sup> Tuesdays of November and January, and were thrilled to welcome several new Members who joined the group following the Annual Meeting. Having more voices in these conversations is adding excellent perspective and energy to the meetings—we welcome others to join anytime, and are especially interested in adding development staffers or other Member staff who may be heading in the direction of managing relationships with, and/or preparing applications/reports to private philanthropy funders (our initial focus for this group).

For these recent two meetings (Nov/Jan), we revisited our three Money Working Group Goals, with a particular emphasis on Goals 2 and 3, described briefly below:

2. **Capacity/Training:** Through survey and discussion, the group identified and prioritized our first Training, which will focus on Organizational Readiness and Foundation Research. The two trainings we expect to offer this FY are slated for March and June. Invitations to the trainings will be sent to all Members with staff who attend 4CWG Meetings (regardless of which corner they are signed up for). IF the trainings are enthusiastically received, we may consider “re-upping” them for future events (e.g. Annual/Spring Meetings) or platforms (Member website in the future).
3. **Fundable Projects/Topical Peer Groups:** Much discussion has been dedicated to how to create infrastructure and incentives for more Member staff (beyond “just” the usual attendees to Fahe events) onto working groups and growing their Network through engagement with other Fahe Members’ staff (again, at all levels, not “just” the usual suspects). Within and beyond the conversations happening at the 4CWG meetings, we are hearing a sincere hunger for more connectivity and opportunities to organize Member staff from all levels (program, executive, direct service, etc.) around shared topics of interest and concern—it is incredibly refreshing to be hearing a LOT of “I have knowledge to share and don’t know who needs it or how to get the information to them!” We **\*know\*** that there are many people who want to share, and many people who want to learn from others. This is **music** to the ears of Fahe staff who facilitate and attend the 4CWG meetings—our best conversations and applications/fundable projects are those which are led by and built around the opportunities and perspectives of Member staff/experts in their communities!!

However, we are struggling with how to organize Members into topical peer groups without “just” adding more meetings to the already full calendars of already busy people already connected with Fahe. In the long term, we hope to support this sort of self-organizing by creating more online infrastructure for connectivity, so that Member staff not already familiar with Fahe grow in their engagement and benefit from connecting directly with fellow Network Members and especially staff in similar roles. But in the short term we will be looking to use our existing ways of connecting (Caucus Meetings, Spring/Annual Meetings, Working

Group Meetings, annual surveys, etc.) to begin building a list of topics around which we might practice organizing and which will likely inform future applications for funding. Figuring this out would both meet the Members request for more/better opportunities to connect with other Fahe Members' staff; and it would help address the FOMO that many Fahe Members periodically express.

### **Request for Caucus Meeting Conversation:**

As we touch on briefly above, we are seeing the need to surface topics around which we might help organize and engage existing content experts from within the Network to help grow a shared understanding of what is needed, how we can go further together, and ultimately lead to the formulation of strategies that can be piloted/explored/scaled together and other shared plans around which applications for funding can be built. We fully expect some of the topics that bubble up to require outside expertise before actionable plans can be assembled (e.g. Broadband, forming multi-sector partnership to address complex problems like SUD Recovery, etc.) but in many instances, the expertise exists within our Network and simply needs to be harnessed and organized towards an achievable outcome (e.g. Solar, disaster recovery, wrap around services in multi-family rental, educational/communication campaigns that elevate the importance of housing in the context of an inspiring performance challenge, endowment campaigns that elevate Member's natural milestones—like 50<sup>th</sup> anniversaries—towards formalizing a donor base, the establishment of online community for Members to connect with each other, etc).

In the short term, we are looking for suggestions, thoughts, examples of best practices, and other generative input that will help with

1. Topic Identification: What topics bubble up?  
Money WG suggested starting with the three obvious housing buckets (Ownership, Rental, Rehab/Retrofit) . . . this might help create a deeper conversation that would naturally lead to the next two pieces . . .
2. Process (how and who):
  - a. What information collection process should we use to develop initial list of topics around which we can practice organizing/applying for funding (surveys? Stand up and "vote" with stickers at the Spring Meeting? Interviews? ) ?
  - b. How do we get input from not only the ED's/typical Fahe meeting attendees, but also others who have insight but are not usually engaged in Fahe conversations?
3. Topic Prioritization: For each of the topics, how does it relate to our work? How will connecting with others around [TBD Topic] be useful to individual Member? To the Network/Region? How will working on this [TBD Topic] advance the region towards the greater prosperity/the outcomes presented in the performance challenge?



**Newly-Granted PJ Flexibilities from the 2025 HOME Final Rule**  
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**ERR and Predevelopment Costs**

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**Smoke and CO Alarms**

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16. Waiting list policies for Small-scale rental units

## CHDOs

### 1. Maximum 1/3<sup>rd</sup> Public Officials rule

HUD states: “...the one-third limitation on public officials only applies to CHDOs that were created by the participating jurisdiction or another governmental entity. For CHDOs not created by a governmental entity, the participating jurisdiction must determine that the CHDO is not a governmental entity and is not controlled by a governmental entity”. **Decision: Do Members want to advocate to PJs how this determination should be made?**

### 2. Minimum 1/3<sup>rd</sup> Low-Income Board Member rule

HUD has changed the wording of “*elected officials of low-income neighborhood organizations*” to “*designees of low-income neighborhood organizations*” as eligible to count towards the 1/3<sup>rd</sup> Low-Income Board minimum. **Decision: Do Members want to advocate to PJs about this change?**

### 3. How “community” is defined

HUD rejected our proposals to make it easier to retain CHDO Board Members who move out of, or whose homes were re-designated out of, low-income census tracts. Instead, they say *‘the Department would like to clarify that the term ‘other low-income community residents’ is already part of the regulation and the term ‘community’ can be considered a multi-county area.’* This is useless, as it relies on PJs defining CHDO “communities” for these purposes as multi-county areas – rather than as census tracts, as they often do. It does however, open up the opportunity to take this HUD statement to PJs to get them to revisit how they define “communities”. **Decision: Do Members want to advocate to PJs about the definition of “community” in relation to Board composition requirements?**

### 4. Capacity building funds for not-yet CHDO organizations

HUD clarifies that organizations wishing to become CHDOs, but who cannot yet demonstrate capacity, “*may receive HOME funds for operating expenses ... in order to develop demonstrated capacity and qualify as a community housing development organization*”. **Decision: Do Members want to advocate to PJs about their ability to offer these funds to potential CHDOs?**

### 5. Wholly-owned subsidiaries may be for-profit

HUD clarifies that a CHDO may qualify as a “sponsor” of rental housing if it “owns” or “develops” that housing via a subsidiary – and that the subsidiary may be for-profit. **Decision: Do Members want to advocate to PJs about the ability for subsidiaries to be for-profit?**

## **CHDOs (continued)**

### [6. Closing costs and rate buy-downs allowable activities](#)

HUD has changed “Downpayment Assistance” to “Homeownership Assistance”, and explicitly expanded the set of activities which may be conducted. Not just DPA, but “...*payment of closing costs, mortgage rate buy-downs, etc.*” **Decision: Do Members want to advocate to PJs about expanding the list of eligible activities further?**

## **ERR and Predevelopment Costs**

### [7. Environmental review and pre-development soft costs are reimbursable](#)

HUD has provided the opportunity for PJs to include environmental and other pre-development soft costs as eligible for reimbursement, if the costs were incurred within 24 months before the commitment. The Final Rule makes it clear that “*the written agreement must explicitly permit the use of the funds for those purposes*”. **Decision: Do Members want to advocate to PJs about including costs in the written agreements?**

## **Smoke and CO Alarms**

### [8. Hardwired smoke detector waivers](#)

HUD is requiring all HOME projects to have hardwired smoke detectors, but is allowing PJs to provide waivers for infeasibility or undue financial burden for Rehabilitation and Homeownership activities (NOT New Construction). Waivers will allow grantees to instead provide standard sealed, nonrechargeable, 10-year battery powered smoke detectors. **Decision: Do Members want to advocate to PJs about what the waiver application process should look like?**

## **Homebuyer**

### [9. Deadlines for property standards in Homebuyer activities](#)

HUD has allowed up to six months after closing to bring a home bought with HOME Homebuyer funds up to property standards, rather than the old Rule which required that the home met those standards prior to closing. HUD has also given PJs the ability to extend that deadline a further 6 months, for a total of 12 months after closing. **Decision: Do Members want to advocate to PJs about this additional six-month extension ability?**

## **Tenant Protections**

### **10. Termination of Tenancy different for Sec. 8 units**

The new Tenant Protections in the HOME Final Rule, particularly with respect to the “Terminations of Tenancy” section, conflict with the regulations for other HUD programs – including Sec. 8 Housing Choice Vouchers, Sec. 202, and Sec. 811. HUD has provided the ability for owners of HOME-assisted rental properties to terminate the tenancy of individuals in units which are supported by that list of programs according to the regulations for those other programs, and not according to the HOME regulations. **Decision: Do Members want to educate PJs about the flexibilities in the termination of tenancy regulation?**

### **11. “Confidentiality and security”**

HUD is requiring the “confidential and secure” handling of personally identifying information of applicants and residents. HUD has not defined these terms, but indicates in the cover text of the Final Rule that they could mean “*through storing files in locked drawers, password protecting their computers, and using basic encryption... (in) email*”. **Decision: Do Members want to advocate to PJs on what should define “confidential and secure” and how we will have to prove that we meet that definition?**

## **Process**

### **12. Implementation, including deadlines**

The effective date of the Final Rule is February 5, of this year. However, PJs may implement the changes as late as to any funds committed after February 6, 2026. Conversely, PJs may cause existing written agreements to be modified to meet many (but not all) of the new requirements. **Decision: Do Members want to advocate to PJs about how the implementation deadline should be structured, and about whether or not existing written agreements should be modified?**

## **Rental Administration**

### 13. Annual income recertifications

HUD is simplifying the annual certification of income process by accepting the results of other programs that also recertify income: if “...*the family is assisted by a form of Federal, State, or local public assistance (e.g., TANF, Medicaid, LIHTC, local rental subsidy programs, etc.) which examines the annual income of the family each year, then a participating jurisdiction may accept a written statement from a Federal or non-Federal entity administering the assistance.*”

**Decision: Do Members want to advocate to PJs about this flexibility, and what such a written statement would contain?**

### 14. HOME Rent Limit exceptions

HUD has provided an exception to HOME Rent Limits (“*the rent limits do not apply*”) for units that are supported by “*rental assistance or subsidy payment provided under a Federal, State, or local rental assistance or subsidy program.*” In other words, HOME rents may exceed HOME Rent Limits for units receiving rental assistance or subsidies. **Decision: Do Members want to advocate to PJs about using this flexibility, and how it should be enacted?**

### 15. Utility Allowances

HUD is allowing PJs to set Utility Allowances for HOME projects based on the Utility Allowances of the local PHA: “*The participating jurisdiction may use any of the following for its maximum monthly allowances: the HUD Utility Schedule Model, the utility allowance established by the applicable local public housing authority, or another method approved by HUD.*” **Decision: Do Members want to advocate to PJs about using this new ability for setting Utility Allowances?**

## **Small-scale Housing**

### 16. Waiting list policies for Small-scale rental units

HUD has defined a new term, “Small-scale housing” to mean “*a rental housing project of no more than four units, or, a homeownership project with no more than three rental units on the same site*”. With this definition comes new flexibilities on inspections, income recertifications, and waiting-lists. PJs, not HUD, will approve the waitlist policies of small-scale housing owners. **Decision: Do Members want to advocate to PJs about what small-scale housing waitlist policies should or should not be?**



## Fahe Updates

### Quarterly Reporting – 9/30/24

ORG INFORMATION	Report/Communication Sent		
	10/10/2024	10/22/2024	10/26/2024
Beattyville Housing and Development (BHD)			
Bell Whitley Community Action Agency (BWCAA)			
Christian Appalachian Project (CAP/SV)			
Christian Outreach with Appalachian People (COAP)			
KY River Foothills Development Council (KRFDC)			
Housing Development Alliance (HDA)			
Housing Oriented Ministries Est. for Services Inc (HOMES)			
KCEOC			
Kentucky Mountain Housing Development (KMHDC)			
KY River Community Care (KRCC)			
People's Self-Help Housing (PSHH)			
Kentucky Highlands Investment Corp. (KHIC)			
Partnership Housing (PH)			

<b>KY Organizations</b>	<b>15</b>	
Turned in by 7/10	3	20.00%
Turned in by 7/15	3	20.00%
Turned in by 7/25	5	33.33%

<b>Total Organizations</b>	<b>55</b>	
Turned in by 10/10	9	16.36%
Turned in by 10/22	9	16.36%
Turned in by 10/25	18	32.73%

### Quarterly Reporting – 12/31/24

Org Name	1/10/2025	1/22/2025	1/28/2025
Beattyville Housing and Development (BHD)			
Bell Whitley Community Action Agency (BWCAA)			
Christian Appalachian Project (CAP/SV)			
Christian Outreach with Appalachian People (COAP)			
KY River Foothills Development Council (KRFDC)			
Housing Development Alliance (HDA)			
Housing Oriented Ministries Est. for Services Inc (HOMES)			
KCEOC			
Kentucky Mountain Housing Development (KMHDC)			
KY River Community Care (KRCC)			
People's Self-Help Housing (PSHH)			
Kentucky Highlands Investment Corp. (KHIC)			
Partnership Housing (PH)			
Highlands Housing Corp (HHC)			

<b>KY Organizations</b>	<b>16</b>	
Turned in by 7/10	4	25.00%
Turned in by 7/15	15	93.75%
Turned in by 7/25	16	100.00%

<b>Total Organizations</b>	<b>56</b>	
Turned in by 7/10	16	28.57%
Turned in by 7/15	46	82.14%
Turned in by 7/25	50	89.29%

# Exploring Health and Housing Partnerships in Appalachia

## Executive Summary

This white paper outlines a strategic approach for rural housing organizations to partner with healthcare providers in Appalachia, using Fahe's partnership with Ballad Health as a model. Housing and health are deeply interconnected; housing stability is essential for improved health outcomes, while access to health resources enhances quality of life and housing retention. However, despite clear mutual benefits, such partnerships are often challenging to establish due to funding, reporting requirements, and healthcare interests in Appalachia.

Fahe's collaboration with Ballad Health represents the potential for replicating such partnerships. This white paper explores strategies for other Appalachian housing organizations to adapt similar models for their service area. This document aims to equip Fahe Members with insights into developing partnerships that elevate both community health and housing stability.

## Introduction

Appalachia faces some of the highest rates of poverty and chronic health issues in the United States, with many areas lacking accessible healthcare and affordable, quality housing. Addressing these social determinants of health is crucial to improving community well-being. Non-profit housing organizations and healthcare institutions can collaborate in tackling these intertwined challenges.

Fahe's partnership with Ballad Health, a nonprofit healthcare provider serving Northeast Tennessee and Southwest Virginia, provides a framework for rural, dual-referral, wellness partnerships. The Ballad Collaboration demonstrates how housing stability can be prioritized within a healthcare organization's community health goals, health blueprint, or strategic plan. Through funding and data sharing Fahe and Ballad Health have advanced health outcomes and improved housing conditions for hundreds of families. This white paper examines this partnership and explores actionable steps for Fahe Members to forge similar connections and investigate both the pros and cons of different approaches to partnerships.

## **The Ballad Health Collaboration Model**

### **Background**

Ballad Health is a non-profit health system operating in Northeast Tennessee and Southwest Virginia. Driven by a state mandate from Tennessee, Ballad Health was required to address social determinants of health through community investments. With backing from both Tennessee and Virginia, Ballad implemented the Unite Us platform, a system that allows health and social service providers to refer patients to additional resources for a holistic care approach.

Housing was initially not a primary focus for Ballad. However, through consistent and collaborative advocacy from Fahe and its Members, housing was introduced as a critical social determinant within Ballad's Accountable Care Community framework via discussion at stakeholder meetings. The identification of housing as a social determinant of health has progressed during the 3-year association of Fahe and Ballad Health.

### **Benefits of Health and Housing Partnerships**

Building on the Ballad model, Fahe envisions a future where housing nonprofits across Appalachia work with healthcare providers to:

- Secure sustained funding for housing projects that directly improve health outcomes.
- Collect and share data that highlights the importance of housing as a foundation for community health and a return investment on population outcomes.
- Advocate for increased recognition of housing within healthcare's scope of social determinants; housing is not only part of a healthy life - it is at the core of overall well-being.

By connecting housing stability with healthcare priorities, these partnerships can address root causes of poor health and housing insecurity in Appalachia.

### **Partnership Structure and Goals** (see Appendix 1)

Fahe's partnership with Ballad Health facilitates grant funding for various projects that track the impact on health outcomes. Fahe Members in Northeast Tennessee and Southwest Virginia receive financial support to implement initiatives that address both housing and health needs, while gathering data to support this work, which is in turn provided to Ballad Health. Fahe provides quarterly reports to Ballad, which use the data to inform public health strategies.

## Framework for Replication

To foster partnerships like the one between Fahe and Ballad Health, it is recommended that Members follow a detailed framework for identifying and collaborating with healthcare entities (case examples detailed in Appendix 2).

### 1. **Service Area**

Partnerships are most effective when the healthcare organization has a clear, established presence within Appalachia, especially in areas overlapping with the housing organization's service territory. Additionally, understanding the demographic of the shared service area ensures that the collaboration targets the most pressing needs of the population, i.e. recent disaster events.

### 2. **Commitment to Community Health**

A successful partnership requires a shared vision. Seek healthcare providers whose philosophy explicitly recognizes and prioritizes social determinants of health, *particularly housing*. Assessing mission statements and regional health strategies can provide insight into their level of commitment.

### 3. **Funding**

Evaluate the funding capacity of potential healthcare partners by considering their access to grants, government funding, or private contributions. Determine how financial responsibilities will be shared between organizations and how funds will be allocated to meet project goals. Clarity in financial planning—including understanding the cost of implementation, administrative funding, if any, and direct service delivery ensures the long-term viability of the collaboration.

### 4. **Political Context**

Research state-level initiatives and policies that encourage the integration of social determinants of health into healthcare, such as Medicaid waivers, community benefit requirements, or dedicated funding streams. Collaborating in a supportive policy environment can unlock additional resources and make disengagement opportunities less defensible. Advocacy for favorable policies and alignment with state and regional priorities can further enhance the partnership's impact.

### 5. **Organizational Capacity**

The administrative strength of each partner is a cornerstone of effective collaboration. Both housing and healthcare organizations must have the capacity to manage key functions such as data collection, analysis, reporting, and project oversight.

## Process and Action Steps

The first step is to identify potential partners using the previous framework. Many of these organizations have mandates or strategic goals tied to addressing social determinants of health. Reaching out to these groups with a compelling case for how stable housing improves health outcomes can open the door to partnerships.

Next is building rapport, much like Fahe Members did with Ballad. Housing organizations need to develop the tools and messaging to demonstrate the connection between housing and health. This includes highlighting evidence-based outcomes, such as *how stable housing reduces healthcare costs, improves quality of life, and supports broader public health goals*. A strong advocacy effort can shift perspectives and encourage healthcare providers to prioritize housing in their community initiatives.

In the same vein, Members can leverage community networks and resources to encourage commitment from healthcare organizations. With decades of experience building relationships, Fahe Members have an intimate understanding of the unique cultural, economic, and social dynamics of Appalachia. This expertise can bridge the gap between Members and health organizations who might otherwise be hesitant to engage.

Securing diverse funding streams is also essential to ensure the sustainability of these collaborations. Beyond traditional housing or healthcare funding sources, exploring philanthropic, corporate, and governmental grants aimed at the intersection of health and housing can reinforce the overall sustainability of a project.

Lastly, fostering spaces for continuous dialogue between stakeholders is vital. Regular convenings, whether in-person or virtual, can help maintain momentum and reinforce strategies and adaptability. Many organizations would expect such a commitment – as should the Member expect from them. Establishing long-term networks, akin to Fahe's approach, ensures that these partnerships are resilient and dynamic over time.

All aspects considered, it is important to note that not every relationship will be a golden egg; that is to say, not every partnership will check every box mentioned here. Expectations are an important part of communication while working to frame a partnership – whether long or short term, big or small in scale. Aiming high but tempering expectations can help to assure a steady footing when needing reorient at square one.



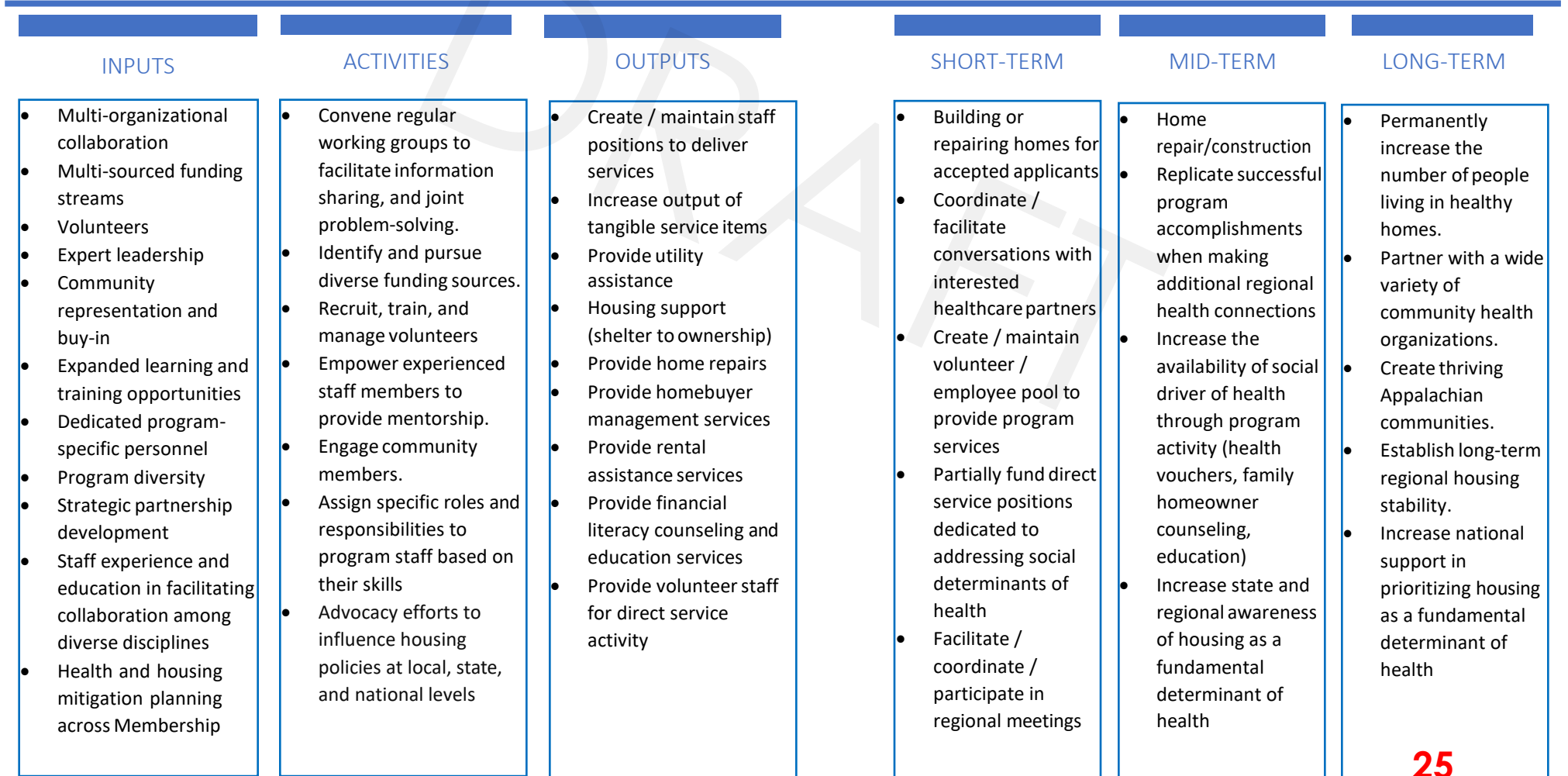
## Challenges to Model Replication

Despite the success of the Ballard partnership, replicating this model across other areas of Appalachia presents several challenges. Through our ongoing collaboration with Ballard, our exploration of other partnership opportunities across the Membership, and research into similar efforts in other parts of the country, a variety of obstacles have emerged. The most noticeable of these challenges are:

- **Funding Requirements:** Fahe's partnership with Ballard Health is heavily dependent on specific funding mandates. This kind of financial backing may not exist in other states or regions, making it difficult to replicate the funding structure needed to sustain such initiatives. Additionally, healthcare providers in other regions may face constraints due to limited budgets or a lack of incentives.
- **Organizational Focus:** Not all healthcare organizations recognize housing as a critical social determinant of health. Some healthcare systems focus narrowly on clinical care and may lack the holistic perspective or institutional commitment to invest in community health initiatives. Resistance to change or a lack of understanding about the long-term benefits of integrating housing and healthcare can further hinder the adoption of such models.
- **Regional Relevance and Capacity:** Appalachia is not monolithic; healthcare and housing needs vary significantly between subregions, influenced by local economies, demographics, and infrastructure. Additionally, the capacity of local organizations to engage in cross-sector partnerships often varies. Smaller organizations may struggle to meet the administrative, reporting, and compliance requirements necessary for partnerships of this scope, further limiting replication potential.
- **Sustainability Concerns:** Even where replication is possible, ensuring the long-term sustainability of such partnerships can be difficult. Funding cycles, leadership changes, or shifting priorities, political or strategic, can jeopardize ongoing efforts, making it challenging to achieve the consistency needed for sustained community impact at the intersection of health and housing.

**Fahe Working Group - Ballad CHI Logic Model**

**Problem Statement:** Access to affordable housing in Appalachia is in crisis due to various intersecting challenges. Rapid urban and metropolitan growth has siphoned resources away from rural areas, exacerbating existing disparities. Rural communities in Appalachia face a housing crisis stemming from low incomes, high energy costs, and dwindling resources, compounded by reduced support for housing subsidies. This crisis is particularly acute in persistent poverty counties, which are predominantly rural, where over 2 million people live. These areas exhibit poverty rates more than twice the national average, with minority poverty rates even higher. Despite relatively low housing costs, affordability remains a significant barrier in over half of these persistent poverty counties. Healthy housing is financially out of reach for many residents. Additionally, inadequate infrastructure is pervasive, with homes lacking proper plumbing at more than double the national rate. Overcrowded living conditions affect over 400,000 individuals, exacerbating quality of life challenges. (CFRA, Fahe, ARC)



## Appendix 2

### **Case Examples of Expansion – KY**

Below are a number of organizations, programs, and potential leads to serve as an example of healthcare connections that are found in Kentucky. This is by no means an exhaustive list and does not imply Fahe's interactions with these programs or institutions directly. This section is meant to showcase potential 'hooks' when researching or identifying opportunities for connection at the intersection of health and housing.

### **Common Spirit Health Care**

Formed in 2019 through the alignment of Catholic Health Initiatives (CHI) and Dignity Health, CommonSpirit is one of the largest nonprofit health systems in the U.S., with more than 1,000 care sites in **21 states coast to coast**, serving 20 million patients in big cities and small towns across America.

### **Community Health Initiatives – Community Health Improvement Grants**

The annual application period opens on July 17, 2023, and extends to September 8.

Collaborating 501(c)3 non-profit organizations apply to receive grant funds from our hospitals to address significant issues in community health needs assessments. These can include improving access to health care, mental health, social services, health education, **safe shelter and housing**, food, violence prevention, and more. The grant program is offered via restricted charitable contributions for defined projects.

### **Better Together: Connected Community Network**

The Connected Community Network (CCN) model is a multi-stakeholder initiative formed to address the social, economic, and environmental determinants of health by leveraging the assets and capacities of community anchor institutions and community-based partners.

Now, the CCN model has expanded to include more community-based organizations (CBOs), other stakeholders, and enhanced mechanisms for sustainability to rightly center health in the communities themselves.

(Better Together: Wellness Through Community Collaboration, n.d.)

No Wrong Door policy, a united referral system, and a network of partners are all shared concepts between Fahe and Common Spirit health CCN.

## Eligibility Guidelines – Program Overview Document

### Key Dates

<b>July - September</b>	<b>Grant application period is open. Applicant organizations can apply online.</b>
<b>November</b>	<b>Applicants are notified of funding decisions.</b>
<b>December</b>	<b>Grant agreements are signed, followed by grant award payments.</b>
<b>January</b>	<b>Grant project period begins.</b>
<b>July</b>	<b>Mid-year project reports due.</b>
<b>December</b>	<b>Grant project period ends.</b>
<b>February</b>	<b>Final project reports due.</b>

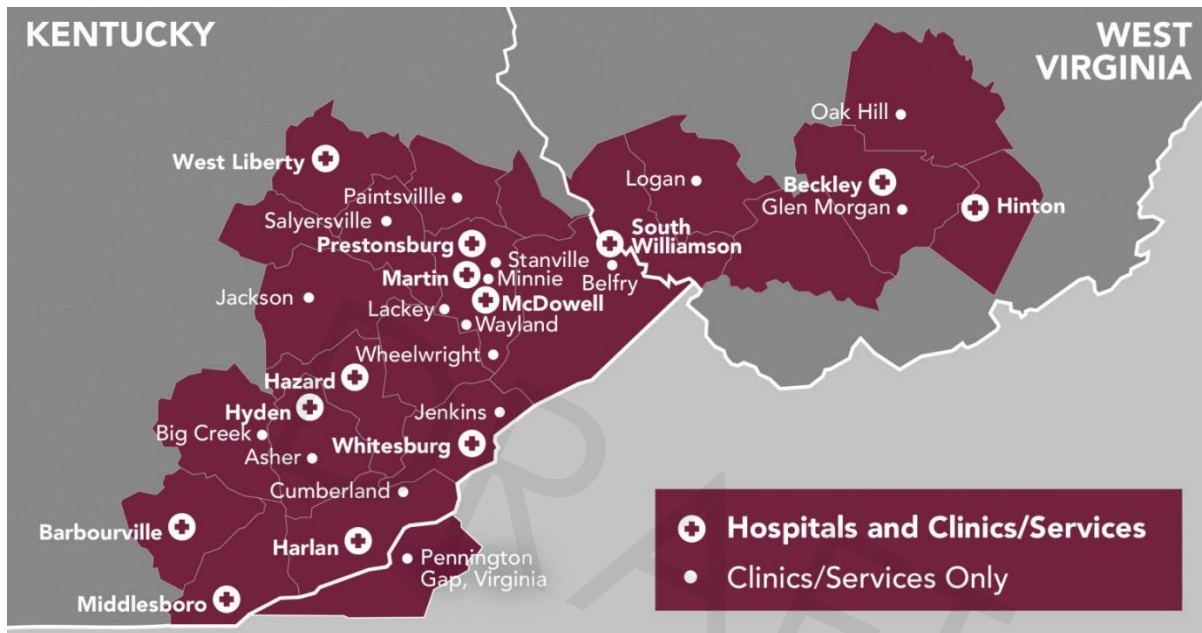
Grants are offered to individual hospitals. Each hospital offers a minimum and maximum grant award, depending on the Number of organizations involved and the size of the project(s). For this reason, a False partnership with multiple participating members within the state may be eligible for meeting or exceeding the maximum award.

<b>Local Grant Leader Contact Information:</b> <a href="mailto:sherri.craig@commonspirit.org">sherri.craig@commonspirit.org</a>		<b>Community Health Needs Assessment:</b> <a href="#">KY CHNA</a>		
<b>State</b>	<b>Hospital</b>	<b>City</b>	<b>Minimum Grant Award</b>	<b>Maximum Grant Award</b>
KY	CHI Saint Joseph Health - Mount Sterling	Mt. Sterling	20,000	32,181
KY	CHI Saint Joseph Health - Flaget Memorial Hospital	Bardstown	10,000	38,354
KY	CHI Saint Joseph Health - London	London	10,000	83,891
KY	CHI Saint Joseph Health - Berea	Berea	20,000	17,828
KY	CHI Saint Joseph Health - Saint Joseph Hospital	Lexington	17,828	100,000
KY	CHI Saint Joseph Health - Saint Joseph East	Lexington	20,000	100,000

<b>Local Grant Leader Contact information:</b> <a href="mailto:Nicole.Brown516@CommonSpirit.org">Nicole.Brown516@CommonSpirit.org</a>		<b>Community Health Needs Assessment:</b> <a href="#">TN CHNA</a>		
<b>State</b>	<b>Hospital</b>	<b>City</b>	<b>Minimum Grant Award</b>	<b>Maximum Grant Award</b>
TN	CHI Memorial Hospital - Chattanooga	Chattanooga	20,000	100,000
TN	CHI Memorial Hospital - Hixson	Hixson	Unlisted	Unlisted

## Appalachian Regional Hospital

Appalachian Regional Healthcare (ARH) is a not-for-profit health system that serves communities in Kentucky and West Virginia through a comprehensive network of healthcare facilities and services. ARH operates 14 hospitals located in **Barbourville, Hazard, Harlan, Hyden, Martin, McDowell, Middlesboro, Paintsville, Prestonsburg, South Williamson, West Liberty, and Whitesburg** in Kentucky, as well as **Beckley** and **Hinton** in West Virginia.



## KY HealthCorps – ARH Partnership

KY HealthCorps, an AmeriCorps program sponsored by Family Scholar House, and ARH will work together to place nursing students in ARH facilities across the state. KY HealthCorps will be paying students' wages and providing scholarships for many of the nursing programs where students are enrolled.

In partnership, potential utilization of KY Health Corps Service Members by housing non-profits to report, maintain, and provide a network may allow for a wider reach of joint project management.

## ARH Foundation for Healthier Communities

ARH FHC Point-of-Contact: **Angela Bailey** - [abailey9@arh.org](mailto:abailey9@arh.org)

ARH Foundation for Healthier Communities is the ARH Community Grant Program. The mission of the grant program is to further healthcare, education and community involvement in Eastern Kentucky and Southern West Virginia through philanthropy and fundraising for Appalachian Regional Healthcare.

Accepts grant applications on a continuing basis from non-profit organizations that are 501(c)(3) and 509(a) **within their service area.**

Organizations (including co-applicants) that have previously received a grant from the ARH FHC program (either as an individual or a collaborative partner) **must wait five years** to reapply after a successful grant disbursement. Only one grant application per year.

**Grants will not exceed \$5,000.**

Grant awards will be made in **April, July, October, and January.**

The project may be a new program, an expansion or modification of an existing program, or be **a collaborative effort of several agencies.** The project for requested funds must address the needs or opportunities to **improve the quality of life of women and children within the service area.**

Grant Approval Process:

- **Fill out the online application completely with requested attachments. Incomplete applications will not be considered.**
- **The Foundation staff will review the application and submit eligible applications to the Foundation Board for review at their quarterly meeting.**
- **Approval is at the sole discretion of the Foundation Staff and Board based on quality of the application and funds currently available**
- **Grant awards will be made in April, July, October, and January.**

- **Sound plan to increase the health and wellbeing of a group or community within the ARH Service Region.**
- **Specific and measurable goals for project evaluation**
- **Desire to promote coordination and collaboration among organizations or institutions to prevent duplication of services**



The project must have a high degree of focus in at least one of the following areas:

- **Education: Activities that promote or strengthen health and healthy lifestyle education.**
- **Health: Activities that improve health outcomes**
- **Human Services: Activities that support public protection, employment/jobs, food and nutrition, agriculture, housing and shelter, public safety, disaster preparedness and relief**

Funding will **NOT** be considered for any of the following areas:

- **Capital or Endowment Campaigns.**
- **Requests for funding to reduce or retire debt of the organization.**
- **Political parties or campaigns**
- **Operating costs not directly related to the proposed project**
- **Event sponsorships, annual appeals, and membership contributions.**
- **Travel expenses for groups or individuals such as bands, sports teams, or classes.**
- **Scholarships or other grants to individuals.**

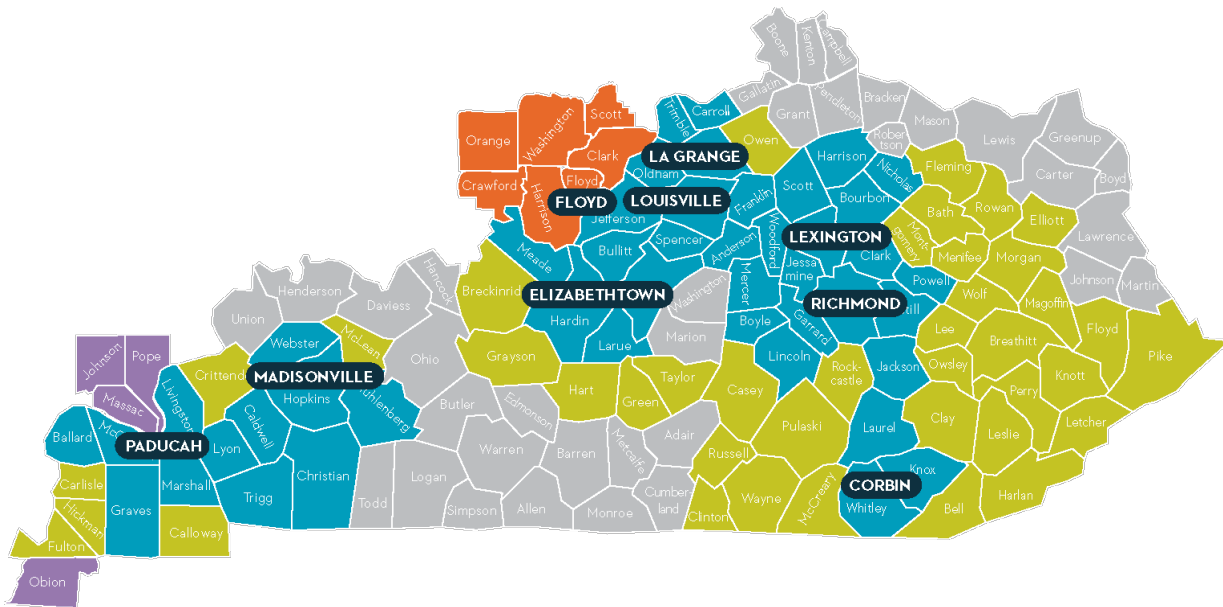
### **Baptist Health**

Baptist Health is a not-for-profit health system of 8 hospitals throughout Kentucky and southern Indiana, including Corbin, Elizabethtown, La Grange, Lexington, Louisville, Paducah, Richmond and New Albany, Indiana. Baptist Health also operates the 410-bed Baptist Health Deaconess Madisonville in Madisonville, Kentucky in a joint venture with Deaconess Health System based in Evansville, Indiana.

### **Baptist Health Foundation**

The Baptist Health Foundation is a 501(c)3 nonprofit organization.

Each local Baptist Health Foundation is built upon two primary principles – that philanthropy raised to support its hospitals creates immediate and meaningful impact; and that major gift fundraising efforts are locally managed, portfolio driven and permission-based relationships with grateful patients, families, and allies.



### Healthier Communities Initiative – Baptist Health Foundation

As a donation foundation, Baptist health Foundation currently only receives donations from the public and other community organizations. Although possibly open to partnership, Baptist Health has not shown a track record of multi-level organizational partnering.

The most recent example of a partnership between Baptist Health and community leaders and organizations is the Healthier Communities Initiative (HCI) of 2018. HCI is a collaboration between Southern Indiana community leaders and Baptist Health Floyd. Funded by the Floyd Memorial Foundation, the HCI strives to create health and well-being to the region by providing screenings, prevention, and education programs to more than 10,000 community residents annually.

As of this writing, the HCI Mini-Grant is listed on the Foundation website for proposal submission. Funding opportunities are considered only if meeting the following criteria:

- **Improve the health of our community as defined in our community health needs assessment.**
- **Improve the lives of people who are medically underserved.**
- **Demonstrate clear, measurable annual goals that benefit the health and well-being of the community.**

The most prominent issue with partnership surrounding Baptist Health and associated outreach programs is the Baptist Health area of service, focusing largely on central Kentucky and Southern Indiana. Programs reaching Eastern Kentucky and parts of Appalachia are rare.

Service area incompatibility coupled with lack of partnership avenues makes Baptist health a low contender for Fahe and Fahe Member partnership. The only course of action is to have a personalized, executive-level conversation with Baptist Health Foundation representatives to see what, if any, partnership opportunities are available.

### **Foundation for a Healthy Kentucky**

Foundation Point-of-Contact: **Heather Bruner**- [hbruner@healthy-ky.org](mailto:hbruner@healthy-ky.org)

The Foundation for a Healthy Kentucky is a nonprofit, nonpartisan organization funded by an endowment. Since it opened its doors in 2001, the Foundation has invested \$29 million in health policy advocacy, research, and demonstration projects across the Commonwealth of Kentucky. The overall goal and mission of Foundation for a Healthy Kentucky is to address the unmet health needs of Kentuckians by developing and influencing policy, improving access to care, **reducing health risks and disparities**, and promoting health equity.

Foundation for a Healthy Kentucky has 12 plus ongoing partnerships with other nonprofit organizations and programs throughout the state.

### **Funding for Recovery Equity and Expansion (FREE)**

The Funding for Recovery Equity and Expansion (FREE) Program aims to expand the capacity of services and programming that raise awareness about substance use disorders. The overall goal of this program is to provide funding to programs and organizations that can work to reduce the overall death rate and improve general states of well-being for **under-resourced and minority communities**.

Applications will be accepted until September and must be submitted in full by midnight for consideration. Selected organizations will be notified of the award before October.

A budget template is available for use by all applicants. Highly recommended but not necessary to include in a full proposal - [Budget Template](#).

Awardees must submit monthly progress reports that capture data related to performance measures identified in their contracts and financial reports detailing project expenditures to allow tracking of funds and measurement of overall impact.

Support is provided in the form of site visitation, monthly meetings with FHKY staff to review financial records and monitor program goals, and monthly collaborative workshops on infrastructure building and program sustainability.

As part of the FREE Program, the Foundation for a Healthy Kentucky will provide grants ranging from \$10,000 - \$50,000 to nonprofit organizations for activities that address the following goals:

- **Overdose prevention / awareness.**
- **Substance Abuse Disorder (SUD) stigma reduction.**
- **Promote access to:**
  - **Substance abuse treatment**
  - **Recovery support**
  - **Harm reduction**
- **Personalized care coordination.**
- **Coalition building among services or organizations that help to meet specialized needs of those in recovery.**

Eligibility requirements to receive grant funding are as follows:

- **Applicant must be a nonprofit organization with 501c status and is in the state of Kentucky.**
- **Applicant provides services in the state of Kentucky to persons that use opioids (e.g., heroin, synthetic opioids such as fentanyl) and/or stimulants (e.g., cocaine, methamphetamine)**
- **Applicant is a community-based organization with established investment and engagement working with communities of color, justice involved individuals, pregnant and parenting women, and/or drug overdose survivors.**

## **Conclusion and Approach**

Nonprofit housing organizations and healthcare institutions have a clear and urgent need to collaborate—something that's been largely missing in discussions about community health. These two sectors intersect in ways that directly impact the lives of people caught in cycles of poor health and low wages.

By forming partnerships, both sectors stand to benefit in ways that go beyond their individual capacities. Data can be leveraged to identify effective strategies for addressing regional healthcare needs, while financial support from healthcare institutions could empower housing organizations to develop sustainable programs. The potential for shared growth and long-term success is immense.

Such partnerships also open doors to untapped funding opportunities allowing organizations to sustain projects that address both housing and healthcare challenges. These efforts address not just immediate solutions but also stronger, more resilient communities for the future.

However, challenges remain—many of which stem from the lingering impacts of the Covid-19 pandemic. Healthcare organizations are still dealing with financial strains and prioritizing their own immediate needs, making it difficult for them to commit to long-term collaborations. The complexity of forming and managing partnerships only adds to their hesitation, as does a broader climate of caution and risk aversion in the post-pandemic landscape.

For some, this uncertain environment can even become an easy rationale to delay or reject new initiatives. While frustrating, this reinforces the importance of persistence and strategic engagement.

Breaking through these barriers will take time and executive-level conversations that highlight the shared value of such collaborations. While the post-pandemic recovery phase is likely to last several years, opportunities will grow as conditions stabilize and trust builds.

By embracing data-driven strategies and maintaining a patient, long-term perspective, we can address systemic issues. Together, we can move beyond temporary fixes to rewrite the story for Appalachia's most vulnerable communities—one rooted in resilience, equity, and support for a stronger future.

## **Fahe Members: Please share your impact stories by February 21!**

There is a housing crisis in Appalachia. Fahe Members are tackling that crisis. However, to double our production and complete 60,000 homes by 2030 we will need an investment of \$3 billion.

Fahe is launching an outreach campaign in 2025 to attract the capital we need from investors, funders, and policymakers.

## **We need your stories for this campaign!**



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Are you in? We are asking for at least one story from every Member. Please share your stories so we can provide examples of success, including:

- Single-Family Lending
- Multifamily Housing Development
- Community-Led Housing Initiatives
- Workforce Housing
- Housing Preservation
- Disaster Recovery and Resiliency
- Veterans' Housing
- Supportive Housing
- Green and Sustainable Housing
- Rural Housing Development
- Mixed Income and Mixed-Use Developments
- Other



Use the QR Code to submit your story online or email us at [CommunicationTeam@Fahe.org](mailto:CommunicationTeam@Fahe.org).

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**Submit your story today!**



## ONE STOP SERVICING SOLUTION

### Why Choose Fahe?

Fahe operates across 20+ states.

Our team is deeply engaged in the communities we serve. We work directly with other non-profits and organizations, actively contributing to efforts that drive positive change in housing.

Our Loan Servicing model extends beyond the Appalachian region, providing organizations with an effective solution for managing their loan portfolios. We help turn portfolios into revenue-generating assets while minimizing costs.

Let us to handle that for you!

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- Payment Processing
- Default Administration
- Client/Investor Reporting
- Escrow Administration
- Customer Service
- Loan Retention
- Bankruptcy
- Loss Mitigation
- Foreclosure



Fahe envisions a future where every individual can reach their full potential through access to quality housing, employment, education, and a higher quality of life.

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For inquiries about loan servicing solutions, please contact

Joy Huffman

Loan Servicing Investor Representative

859-228-2139

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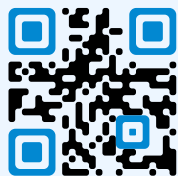
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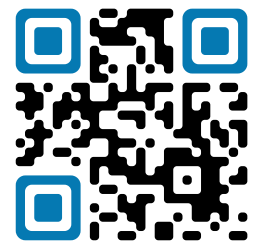
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\*All information contained herein is for informational purposes only. Rates, terms, programs and underwriting policies are subject to change without notice.

This is not an offer to extend credit or a commitment to lend. All loans are subject to underwriting approval. Additional conditions and limitations may apply. Secondary Market, purchase transactions only. Income and purchase restrictions could apply. The Annual Percentage Rate (APR) for the first and second mortgage will not increase after consummation. Your interest rate of the first mortgage is for a secured home loan and may differ based on loan amount, term, and your credit profile. Your interest rate of 5.50% listed for the second mortgage is for a secured home loan. The term (the amount of monthly payments due) of the second mortgage will match the term of the first mortgage.

Payment Example, assumes a 740 Credit Score. Purchase Price: \$200,000 Monthly principal and interest payments for the \$160,000 first mortgage loan at 7% interest rate (7.077% APR) with a term of 30 years would result in 360 monthly payments of \$1,064.48. Monthly principal and interest payments for the \$40,000 second mortgage loan at 5.50% interest rate (5.637% APR) with a term of 30 years would result in 360 monthly payments of \$227.12. Total monthly principal and interest payment for the first and second mortgage with a term of 30 years would result in 360 monthly payments of \$1,291.60. Taxes and insurance not included.

NMLS 52473

