Trinity Health is one of the largest multi-institutional Catholic health integrated care delivery systems in the nation, serving diverse communities that include more than 30 million people across 22 states. We are building a health system that puts the people we serve at the center of every behavior, action and decision. This brings to life our commitment to be a compassionate, transforming and healing presence in our communities. We advocate for public policies that support better health, better care and lower costs to ensure affordable, high quality, people-centered care for all.

Building Healthy Communities by Addressing Social Influencers of Health
Improving the health of individuals and communities is at the core of Trinity Health's mission. This includes leveraging resources and partnerships; focusing on those who are poor and vulnerable; and addressing social influencers of health (SIOH). SIOH are conditions in the environments in which people are born, live, learn, work, play, worship and age that affect a wide range of health, functioning and quality-of-life outcomes and risks. Trinity Health supports safe, affordable housing as a foundation for healthy, vibrant communities and inclusive growth.

Evidence Shows Access to Housing Impacts Health
Housing interventions for low-income individuals improve health outcomes and decrease health care costs. Access to affordable housing has been shown to decrease Medicaid expenditures by 12 percent, decrease emergency department visits by 18 percent and increase primary care utilization by 20 percent. The economic impact of medical respite programs—which provide temporary medical care and a safe place to recuperate for homeless individuals who do not need to be in a hospital—found the programs reduced emergency department visits by 45 percent and readmissions by 35 percent for a savings of $1.81 for every dollar spent. Studies have shown that providing supportive housing for high-needs individuals leads to 23 percent fewer days in the hospital, 33 percent reduction in emergency department visits and an average savings of $6,000 in health care costs per person.

What Can Policymakers Do?
Expand Access to Safe, Affordable Housing

Recommendations:
- Strengthen and expand tax incentives that support private investment in the production and preservation of affordable rental housing (i.e. Low-Income Housing Tax Credits).
- Support tax incentives for community development and economic growth in distressed communities (i.e. New Markets Tax Credits).
- Support grants to state and local governments to address community development needs, including affordable housing.
- Support funding to state and local governments to build, buy and rehabilitate affordable housing for rent or homeownership, including incentives that promote mixed-income housing.
- Provide rental assistance to low-income individuals through programs like housing choice vouchers; expand support provided to public housing authorities to market utilization of housing choice vouchers in communities.
- Support housing trust funds that provide dedicated, ongoing funding for affordable housing.
- Promote inclusionary zoning requirements that ensure any new development includes affordable units, and redevelopment does not decrease availability of affordable housing; promote multi-unit infill in high demand, single-family zoned communities.
- Create incentives for landlords to rent to low-income individuals and to individuals who have previously been evicted.
- Support landlord-tenant policies and tenancy preservation programs to help individuals avoid eviction.
- Encourage updates to public housing policies to allow those re-entering community from incarceration to utilize public housing assistance.
- Promote evidence-based programs intended to reduce in-home health and safety hazards.
Housing for Health

Support Respite and Transitional Housing for the Homeless

Recommendations:
- Provide funding for resources to address homelessness by local governments and locally managed homeless systems.
- Encourage states to use existing state options under Medicaid to support medical respite programs that include supportive services.
- Support the development and utilization of street medicine programs that provide health and social services to individuals experiencing unsheltered homelessness.

Encourage Expansion of Supportive Housing Programs

Recommendations:
- Support state Medicaid waivers to align Medicaid and affordable housing resources that expand supportive housing capacity.
- Provide training and outreach to encourage supportive housing providers to bill Medicaid where it is appropriate.
- Develop incentives to create supportive housing and expand transition services for high-risk populations (i.e. veterans, victims of human trafficking and people exiting prisons).
- Expand supportive housing resources and enhance services for aging seniors to improve quality of life; provide best-fit housing options and barrier-free construction.
- Promote replication of evidence-based supportive housing models like the Frequent Users System Engagement (FUSE) initiative.

Address Whole Person Needs

Recommendations:
- Support community health workers and care teams, crisis intervention teams and high-utilizer programs that include services for social needs such as housing and food.
- Support the collection and analysis of social needs data to inform evidence-based interventions.
- Test new payment and delivery models to support community health transformation by creating linkages between health systems, providers and community-based services, and encourage care coordination to optimize access and delivery of wrap-around support services.
- Create incentives to expand the use of community-based services and in-home care to facilitate transitions across settings and coordination between acute and community-based providers and services.

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