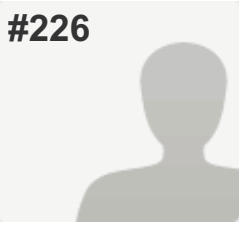


Ending the Epidemic Task Force Recommendation Form

#226



COMPLETE

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Q1: OPTIONAL: This recommendation was submitted by (please provide your first and last name, affiliation, and email address)

First Name	Bryce-Anthoney
Last Name	Dixon
Affiliation	Housing Works, Inc. Second Life Job Training Program
Email Address	b.dixon@housingworks.org

Q2: Title of your recommendation Employment Opportunities and Support

Q3: Please provide a description of your proposed recommendation

HASA client should be eligible for at least one year of continued and full benefits support after finding gainful employment. This initial one-year period should be followed by a second one-year period of gradual benefits reduction i.e., 9% of total budget per month. This would assist individuals who have never worked and or have been out of the workforce for extended periods due to their HIV/AIDS status. While two years of continued benefit support, might seem excessive, please remember that if the individual's starting wage is equal to the New York State's minimum wage of \$8:00 to \$9:00 per hour, then it might take a year or more to get on the job wage increases to be able to meet self-sufficiency needs; i.e., rent, utilities, transportation and other daily living expenses. It might prove helpful to review similar program available to SSI/SSD recipients, which allows individuals to work while still receiving their benefits. Such support might prove even more helpful for those individuals actively engaged in eligible and accredited comprehensive job training programs.

Q4: For which goal outlined in the Governor's plan to end the epidemic in New York State does this recommendation apply? (Select all that apply)

Other (please specify)
entry level employment options

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Q5: This recommendation should be considered by the following Ending the Epidemic Task Force Committee (Select all that apply)

Housing and Supportive Services Committee:
Develop recommendations that strengthen proven interventions enabling optimal engagement and linkage and retention in care for those most in need. This Committee will recommend interventions that effectively address complex and intersecting health and social conditions and reduce health disparities, particularly among New York's low-income and most vulnerable and marginalized residents. These interventions will diminish barriers to care and enhance access to care and treatment leaving no subpopulation behind.

Q6: Does this recommendation require a change to an existing policy or program, or the creation of a new policy or program?

Change to existing policy

Q7: Would implementation of this recommendation be permitted under current laws or would a statutory change be required?

Unknown

Q8: Is this recommendation something that could feasibly be implemented in the short-term (within the next year) or long-term (within the next three to six years)?

Within the next three to six years

Q9: What are the perceived benefits of implementing this recommendation?

Implementing this type of program would give greater and positive incentives for individuals to return to the workforce gradually over the two-year time frame. Over and against the current worker opportunity program (WOP) offered by HRA/HASA.

Q10: Are there any concerns with implementing this recommendation that should be considered?

Will the individual be making enough income to meet their living expenses and not need to go back to receiving benefits just to have a decent place to call home and be able to purchase adequate food for their table.

Q11: What is the estimated cost of implementing this recommendation and how was this estimate calculated?

\$4,512 in cash assistance

\$2,376 in food stamps

\$11,760 in rental assistance

18,648 in annual total assistance for a single individual HASA recipients

Current Est. 150,000 persons receiving benefits per year \$2,797,200,000 * 2:

Compared to having the same individuals receiving benefits indefinitely because it is not practice or financial feasible to return to work on a minimum wage salary

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Q12: What is the estimated return on investment (ROI) for this recommendation and how was the ROI calculated?

ROI should be based on the number of individuals who retain gainful employment for a 5-year period after coming off HASA benefits

Q13: Who are the key individuals/stakeholders who would benefit from this recommendation?

Those living with and affected by HIV/AIDS - the New York State tax payers

Q14: Are there suggested measures to accompany this recommendation that would assist in monitoring its impact?

The Department of Human Resources could keep track of recidivism rates amongst HASA clients, who re-open their cases, within the 5 year period

Q15: This recommendation was submitted by one of the following Advocate