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January 27, 2023

Delegate Kumar Barve, Chair
House Environment & Transportation Committee
House Office Building, Room 251
Annapolis, Maryland 21401

Re: **SUPPORT** – HB79 – Housing and Community Development – Whole Home Repairs Act of 2023

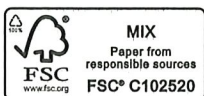
Dear Chairman Barve and Members of the Committee:

On behalf of the Green & Healthy Homes Initiative (GHHI), I offer this testimony in support of HB79 that will transform low income housing service delivery in Maryland. GHHI is a member of Energy Efficient Maryland and I represent GHHI as a member of the EPA Children's Health Protection Advisory Committee, the CDC Lead Exposure and Prevention Advisory Committee, the Maryland Public Health Association Advisory Committee and as Chair of the Maryland Lead Poisoning Prevention Commission. GHHI is dedicated to addressing the social determinants of health and advancing racial and health equity through the creation of healthy, safe and energy efficient homes. GHHI has been at the frontline of holistic healthy housing for three decades.

GHHI created the holistic health, housing and energy efficiency service delivery model that is implemented in our nationally recognized, Maryland-based direct services program in Baltimore City. In addition, GHHI has helped to elevate Maryland as a national leader in healthy housing by helping reduce childhood lead poisoning by 99% in the state and helping support over 45 pieces of healthy housing legislation that have become law in the State of Maryland and local jurisdictions. By delivering a standard of excellence, GHHI aims to eradicate the negative health impacts of unhealthy housing and unjust policies to ensure better health, economic, and social outcomes for children, seniors and families with an emphasis on communities of color.

Whole Home Program Model

In 2010, in partnership with HUD, CDC, the Council on Foundations and the White House Office of Recovery Implementation, GHHI developed and launched a multi-city national initiative to integrate and leverage lead hazard reduction, healthy homes and weatherization housing intervention services through an innovative whole house model. GHHI's holistic housing intervention approach is now recognized and promoted by the U.S. Department of Housing and Urban Development across the country as a model for effective coordination of federal and local lead, healthy homes and weatherization program resources. Through HB79, Maryland would join Pennsylvania as national leaders in addressing substandard conditions in low income communities through an innovative, holistic model in its state housing programs. By coordinating housing, energy and health program resources, low income families and seniors will have improved service delivery, reduced deferral rates from weatherization and lead remediation



Program services they would be eligible to receive, and see improved health outcomes, reduced energy costs and increased housing stability.

Existing programs funded through the state can be impactful, but they are not well coordinated across agencies and programs, and insufficiently address the multiple health, safety, energy and housing rehabilitation needs that exist in occupied, low income housing in the state. Housing is a major social determinant of health and one of the most important ways that communities build wealth. Lead poisoning affects children's developing brains and nervous systems, causing reduced IQ, learning disabilities, and behavioral problems with impacts lasting into adulthood. Pests, mold and poor indoor air quality can trigger asthma episodes which nationally is the most widespread chronic health issue affecting children and is responsible for 14.4 million missed days of school and 14.2 million missed days of work. Over 500,000 children and adults in Maryland have been diagnosed with asthma. Other hazards such as asbestos, radon, household safety and injury risks and lack of heating or cooling prevent residents from staying healthy, create unaffordable energy burdens for households, and reduce property values.

Many Marylanders lack the resources to address these conditions in their homes without financial assistance. With the age and deteriorated condition of significant parts of Maryland's low income housing stock, the need for housing interventions often exceeds the capacity of a single program. Funding available through federal housing programs such as the Weatherization Assistance Program (WAP) have limited funding to address the health and safety issues (lead paint, mold, asbestos or roofing repair) that are commonly found in the oldest and highest-need housing. As result, homes are often deferred from weatherization services and remain energy inefficient. The state's efforts to implement electrification and decarbonization measures will also be thwarted by homes that are deferred due to structural repairs, water infiltration or lead hazards. Low income communities of color are disproportionately exposed to the harms of inadequate housing at higher rates due to a history of disinvestment in minority communities as well as larger inequalities in resources that often lead to deferred maintenance of homes.

Comprehensive programs that integrate resources through a coordinated process as proposed in HB79 can dramatically change the life trajectory of children and create safe and stable housing for families and seniors in disinvested neighborhoods. This program can raise the quality of life state-wide by reducing the need to address health, energy, and economic crises that result from living in substandard housing. By integrating funding sources and increasing funding to address gaps in the existing state-wide programs, the Whole Home Program can be utilized at a scale to make an incredible impact on the lives of residents. At the Green & Health Homes Initiative, we have developed and advocated for the whole-home model and have found great success in partnership with Baltimore City DHCD in addressing housing issues comprehensively in our current programs in Baltimore. Doing so reduces the burdens on households as well as programs through cross trained assessors and contractors. As a result, more homes are served with a higher quality of intervention and with fewer contractors and disruptions for the client.

The creation of the Whole Home Repair Fund will enable Maryland DHCD to braid cross sector funding sources while more effectively pursuing the numerous opportunities that exist to substantially increase federal, philanthropic and private sector investments in the state and its housing stock. By utilizing the Whole Home Repair Program model and obtaining new funding for the Repair Fund, DHCD and partnering agencies will coordinate funding more efficiently and dedicate additional resources to eliminating the barriers limiting the impact of the existing home repair efforts. The Whole Home Repair Program will set the state on a path to sustainability for housing, energy and the environment as well as socially with improvements in the health, education and financial stability of families.

Other Jurisdictions Passing Whole Home Legislation/Implementing Whole Home Models

- In 2022, the State of Pennsylvania passed the Whole Home Repairs Act that established a holistic Whole Home Repair Program model for housing intervention services in Pennsylvania and allocated \$125 million in funding to address gaps and to conduct holistic interventions.
- In New Jersey, the Governor’s Office and the New Jersey Board of Public Utilities, with technical support from GHHI, have launched a Whole House Pilot Program to align energy efficiency, lead hazard reduction and healthy homes services through a comprehensive process.

Benefits of Whole Home Model

From our own work and through research on evidence-based practices nationally, GHHI has found that a healthy and energy efficient home yields a multitude of energy and non-energy benefits for residents, particularly low income residents who can benefit the most from hazard remediation and energy efficiency improvements in terms of economic mobility, housing stability and wealth retention over the long-term. Benefits of the Maryland Whole Home Model:

Health, Housing, Energy and Social Outcomes

- Reductions in asthma related hospitalizations and emergency department visits
- Reductions in asthma related missed school days and improved school performance
- Reductions in asthma related missed work days and increased income for parents/adults
- Reductions in childhood lead poisoning and health disparities
- Reductions in household injuries for children and trip and fall injuries for seniors
- Increased mobility and accessibility in the home for older adults who are able to Age in Place in the homes and communities where they choose to live
- Reductions in greenhouse gas emissions

Cost savings and System Change

- Improved service delivery to low income households and reductions in deferral rates from housing program services that clients are otherwise eligible to receive
- Program and government cost savings from efficiencies in implementing comprehensive assessment and housing intervention models utilizing cross-trained assessors and contractors

- Government innovation through the utilization of an integrated, comprehensive housing intervention model by state agencies that attracts new federal and philanthropic investment
- Reductions in medical costs including Medicaid costs
- Reductions in energy consumption and energy costs
- Reductions in housing maintenance costs

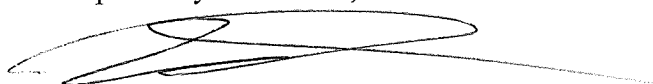
GHHI HB79 Amendments

GHHI offers the following friendly amendments for consideration by the Committee:

1. Revise “affordable units” income definition (page 2, line 24) and the grant eligibility income criteria (page 6, line 6) to $\leq 80\%$ AMI.
2. Reduce the period for small landlords to qualify for the forgivable loan from 15 years to 5 years. (Page 2, line 21)
3. Add clarifying language that the \$50,000 per unit cap on grant funding does not include projects involving substantial housing rehabilitation funding as part of the braided funding mechanism so that homes with more substantial housing defects can receive the full housing services needed. (Pages 6, line 27)
4. Insert a description of additional critical elements of the Whole Home Repairs Program model that need to be implemented by DHCD in order to be an effective Program (Page 4, line 2):
 - Provide a single portal client intake process and enhanced application assistance
 - Conduct a comprehensive environmental assessment and energy audit of every home
 - Complete comprehensive housing interventions through an integrated process
5. Include priorities for funding by the Whole Home Program to properties where children with elevated blood lead levels or children with diagnosed asthma reside. (Page 6, line 28)
6. Include energy and health outcomes metrics in the Program’s annual report: (Page 7, line 2)
 - Reductions in energy consumption and energy costs for units pre and post intervention
 - Improvements in health outcomes for occupants pre and post intervention (lead poisoning, asthma episodes, household injury)

GHHI is deeply committed to advancing racial and health equity, economic mobility and climate resiliency through improved housing standards for low income housing. HB79 will improve health outcomes, reduce energy burdens and improve housing service delivery for Maryland’s low income residents. Maryland’s children, families, seniors and workers will all substantially benefit from more effective and coordinated housing intervention programs. Lastly, in order to support our state’s new, ambitious climate goals through electrification and renewable energy technologies in homes, we have to prepare and repair our housing stock through the use of this comprehensive housing model. We request a favorable report on HB79.

Respectfully Submitted,



Ruth Ann Norton
President and CEO