

**Alameda County Local Application Process
For the 2018 HUD Continuum of Care NOFA
FREQUENTLY ASKED QUESTIONS
7/28/2018 - 8/2/2018**

Questions submitted via email:

- 1) In the application form, under the section titled “**2018 CoC RENEWAL LOCAL APPLICATION ADDITIONAL DOCUMENTATION RESUBMISSION**” applicants are instructed to submit and use “Annual Performance Report (or equivalent report for non-HMIS providers) from date range: 10/1/2017 – Present”. However, in the instructions for manually calculating outcomes applicants are instructed to use “10/1/2016 -9/30/2017 APR”. Could you please clarify which date range we should use?

A: Thank you for pointing out this typo. Please use date range “10/1/17-Present” as indicated in the Resubmission Form. Appendix C – Manual Calculations for Performance Outcomes A-D was updated 8/2/2018 on the EveryOne Home website to reflect this correction.

- 2) The calculation for determining Outcome C: Non-Cash Mainstream Benefits is as follows: Adults Who Obtain/Maintain Non-Cash Mainstream Benefits % of adults with non-cash mainstream benefits = $(A + B + C + D + E + F) / (G + H - I - J)$

“G” is the total number of adults, and “H” is the total clients served. “G” is a subset of “H” but is added to “H” to end up with a number that is larger than our total client population, thus artificially lowering the resulting percentage. Should we eliminate “G” and just use the total clients served?

A: The denominator uses the formula $(G + H - I - J)$ to account for the fact that the numerator $(A+B+C+D+E+F)$ double-counts clients who are in both Table 20b (Non-Cash Benefit Sources) and Table 21 (Health Insurance). Therefore, the denominator is formulated by adding both populations (Total Adults for Table 20b, Non-Cash Benefits; Total Clients for Table 21, Health Insurance).