



STATE OF CONNECTICUT
DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES
A Healthcare Service Agency

NED LAMONT
GOVERNOR

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COMMISSIONER

EFFECTIVE DATE: January 24, 2022 REVISED: March 18, 2022

Connecticut Block Grant Recovery Program
Assistance with Security Deposit and Utilities

The DMHAS CT Block Grant Recovery Program grant provides funding to assist clients involved with select DMHAS funded provider, in accessing assistance with security deposits and utility payments. Advanced Behavioral Health, Inc., the DMHAS administrative services agency, will process requests and, if approved, issue payment directly to property owners and utility vendors.

1. Who is eligible for assistance with security deposit and utilities?

Effective March 18, 2022, persons experiencing homelessness, at-risk of experiencing homelessness, or those being discharged from a hospital or Local Mental Health Authority with no identified housing at the time of discharge, who are involved with any DMHAS funded provider are eligible to apply for assistance with security deposits and/or utilities through their provider. Adult applicants may have a psychiatric, co-occurring psychiatric and substance use, or substance use disorder.

2. What is the amount of security deposit and utilities can be requested?

There is a \$5,000 cap on funding requests. Security will be considered up to the maximum monthly HUD Fair Market Rate for the applicant's region. Security will be paid directly to property owner and may be returned to residents when they move-out. Utilities will be paid directly to the utility service provider and arrearages back to March 20, 2020, will be considered.

The attached client request forms contain additional eligibility details for the security and utility payments.

3. How does one apply for security deposit and utilities?

DMHAS funded provider staff will submit a request with the client applicant. Each application needs to have a completed request form. Requests for Security Deposits should include a completed CT BOS CoC Homelessness Verification Form – DOC (available at <https://www.ctbos.org/resources/#tools>) OR a letter from the referral source verifying that the individual is unstably housed or at risk of homelessness). Requests for Utilities should include a copy of a bill in the applicant's name OR a notification of termination of utility services. The attached client forms contain additional details on what is required to issue a payment.

4. How will requests be processed and paid?

Providers will fax a request form to ABH, Inc. The request form must include all material required to complete payment as identified on the application. The attached request form(s) contain additional details including the fax number for submission.

A review committee, including DMHAS staff, will make a determination on every request and will notify the requestor in writing within 30 days of receipt.

***If you have any questions regarding this Alert, please contact
The CT Block Grant Recovery Program at ABH (860) 638-5333***