

The National Care Coordination System in Affordable Housing



From Service Coordination to Resident Stability Infrastructure

Overview

Across the United States, affordable housing providers are experiencing a structural shift in their role. What were once primarily housing organizations are increasingly functioning as stability platforms supporting aging populations, medically complex residents, and socially vulnerable individuals. At the center of this evolution is a largely under recognized workforce: service coordinators and care navigators embedded within affordable housing communities, often serving as the primary point of coordination for residents with complex needs.

Over the past three decades, these professionals have helped residents access healthcare, secure benefits, navigate social services, manage chronic conditions, and remain safely housed. Research has demonstrated that the presence of service coordinators is associated with lower acute healthcare utilization and slower Medicare spending growth among residents.

Yet the environment surrounding service coordination is changing rapidly. Housing providers now face increasing expectations to support residents with complex health and social needs while operating within systems that were never designed to function as a care coordination infrastructure.

This shift is not isolated. It is being driven by multiple systemic forces across healthcare, demographics, and social services, including:

- Rapid aging of affordable housing residents
- Increasing prevalence of chronic disease
- Rising behavioral health needs
- Healthcare system emphasizes social determinants of health
- Expansion of value-based care models
- Workforce shortages in social services and provider access
- Growing demand for measurable outcomes



Together, these trends are reshaping service coordination from a supportive program into essential infrastructure supporting:

- Resident stability
- Healthcare cost containment
- Aging in community
- Health equity advancement

However, the infrastructure supporting this system has not evolved at the same pace as expectations. Many housing providers continue to rely on fragmented tools, manual processes, and disconnected data systems. The next phase of this evolution will require three major shifts:

- Recognition of service coordination as national stability infrastructure
- Expansion of workforce capacity and partnership models
- Deployment of coordinated technology platforms

As this transition unfolds, platforms designed to support proactive coordination, such as CareAegis (powered by CareAxis), are emerging to play an enabling role by providing the digital infrastructure necessary to scale coordination capacity and support healthcare delivery integration.

The future of affordable housing will not be defined solely by the quality of buildings. It will increasingly be defined by the strength of the systems supporting the residents who live within them.



The Changing Resident Reality



Affordable housing providers today serve a population whose needs increasingly resemble those of community healthcare populations rather than traditional housing populations. Residents are no longer simply housing tenants. They increasingly resemble community-based care populations. Residents are:

- Older
- Medically complex
- Socially vulnerable
- Increasingly isolated

Research shows that residents in HUD-assisted housing are aging in place and entering housing older ages, often with multiple chronic conditions and functional limitations. In addition, there are often missed opportunities to diagnose behavioral health conditions and social needs.

This transformation reflects several structural forces:

- The aging of the Baby Boomer generation
- Increased longevity of individuals with chronic disease
- Economic insecurity among older adults
- Healthcare advances that allow aging outside institutions

The Rise of Medical Complexity in Affordable Housing

Many residents now live with multiple chronic conditions such as:

- Cardiovascular disease
- Diabetes
- COPD
- Mobility limitations
- Cognitive impairment

Research indicates that many dual-eligible residents in HUD housing live with five or more chronic conditions. This complexity creates several coordination challenges:

- Medication management
- Healthcare navigation
- Appointment coordination
- Benefit eligibility
- Functional support needs



Without coordination support, these factors can increase hospitalization risk and housing instability.

Behavioral Health and Social Vulnerability

Housing providers increasingly report residents experiencing:

- Depression
- Anxiety
- Substance use challenges
- Trauma histories
- Cognitive decline

These challenges are often compounded by:

- Low income
- Limited family support
- Low health literacy
- Transportation barriers
- Language barriers

Nearly 1 in 4 adults living in HUD-assisted housing report serious psychological distress — significantly higher than the general population.

Source: U.S. Department of Housing & Urban Development

Service coordinators increasingly serve as the bridge between these challenges and support systems.

The Hidden National Coordination Workforce



The United States has developed a largely invisible national coordination workforce embedded within affordable housing. This workforce likely includes tens of thousands of individuals performing coordination roles across housing settings nationwide.

Despite its scale, this workforce operates without the infrastructure, visibility, or investment typically associated with healthcare delivery systems.

These professionals function as:

- HUD housing
- LIHTC housing
- Nonprofit housing
- Public housing
- Faith-based housing

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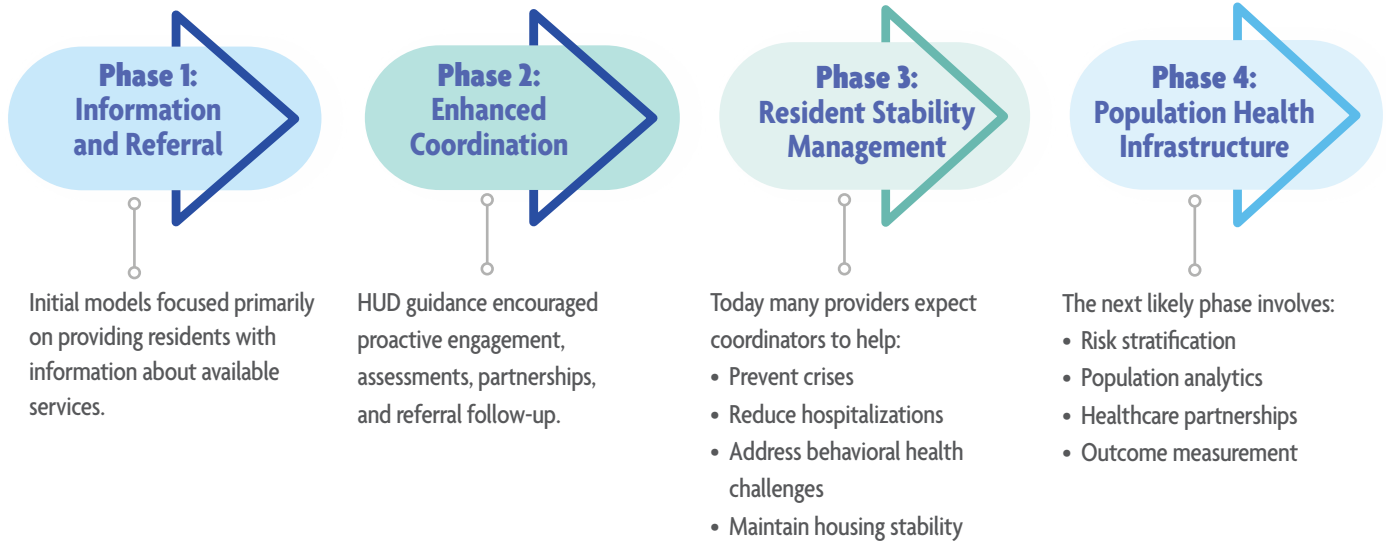
- Care navigators
- Benefits specialists
- Service connectors
- Crisis prevention resources
- Housing stability facilitators

Despite their impact, this workforce often lacks standardized infrastructure and sufficient technology support.

Yet healthcare systems increasingly recognize their importance as a primary point of contact in the community.

Behavioral Health and Social Vulnerability

Service coordination has progressed through several stages of maturity.



This evolution positions housing providers as key participants in community-based care ecosystems.



The National Coordination Crisis

Despite expanding expectations, the service coordination system faces structural constraints. This is not a gradual gap. It is a rapidly widening capacity crisis. Key pressures include:

- Increasing resident acuity
- Workforce shortages
- Low compensation relative to responsibility
- Training variability
- Technology limitations

HUD has suggested one coordinator per 50-100 residents as a baseline, yet many properties operate below this level. At the same time, the complexity of resident needs continues to grow. This creates a widening gap between expectations and capacity.

Without new infrastructure, this gap will likely continue to expand.

The Coordination Infrastructure Gap

One of the most significant limitations facing the sector is the lack of coordination infrastructure. Despite the complexity of resident needs, most coordination systems remain operationally basic. Many organizations still rely on:

- Spreadsheets
- Email
- Manual notes
- Basic databases

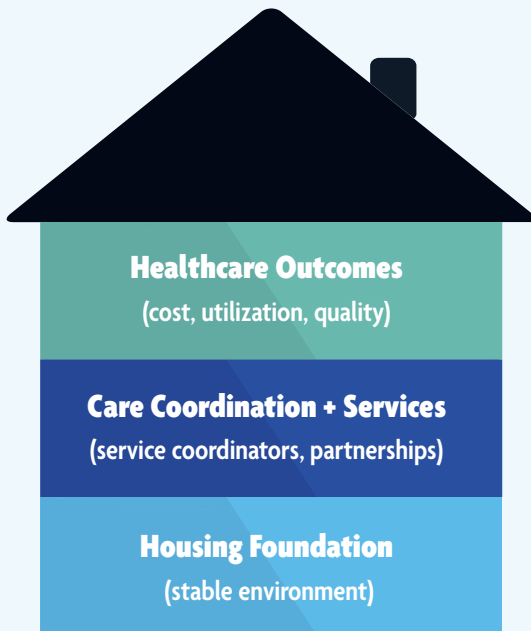
Research emphasizes the need for user-friendly databases capable of tracking service plans, follow-ups, and outcomes. However, many systems lack:

- Risk identification tools
- Workflow management
- Closed-loop referral tracking
- Population dashboards
- Outcome measurement



This gap represents one of the most significant opportunities for sector transformation.

Housing as Healthcare Infrastructure



Healthcare organizations increasingly recognize housing as critical infrastructure affecting health outcomes. Unlike traditional healthcare settings, affordable housing provides continuous, community-based visibility into resident needs including:

- Stable environments
- Trusted relationships
- Early warning signals
- Access to high-risk populations

Service coordinators may help reduce healthcare utilization and support aging in place.

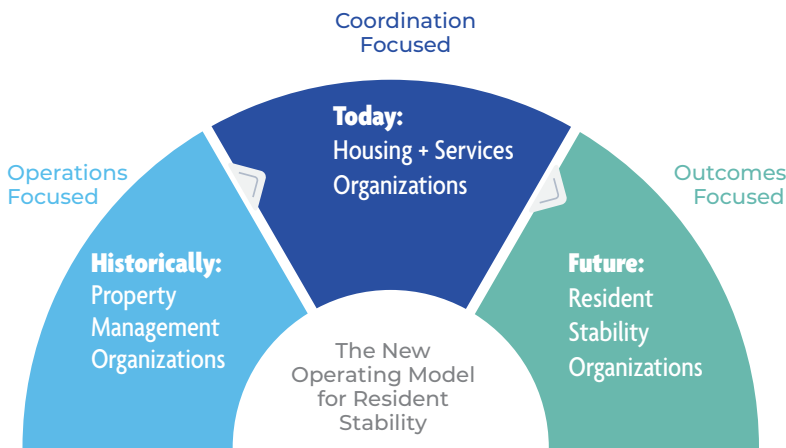
Healthcare organizations are increasingly exploring partnerships through:

- Medicare Advantage
- ACO models
- Medicaid waivers
- Community health programs

These partnerships require housing providers to demonstrate coordination capacity and measurable outcomes.

The New Operating Model for Affordable Housing Providers

The affordable housing sector is evolving toward a new operating model.



This model integrates:

- Housing operations
- Service coordination
- Healthcare partnerships
- Population management

Organizations adopting this model may be best positioned to participate in future healthcare collaborations.

The Technology Imperative



As service coordination evolves, technology becomes essential infrastructure. Future coordination platforms must support:

- Resident risk identification
- Workflow management
- Service tracking
- Outcome reporting
- Healthcare integration
- Population analytics

Technology should enhance, not replace, the human coordination workforce.

The goal is:

- Greater efficiency
- Better prioritization
- Reduced administrative burden
- Improved outcomes

This mirrors the evolution of care management technology within healthcare.

The Future Coordination Model (2026–2035)



Future service coordination models will likely include:

- Standardized assessments
- Digital coordination platforms
- Risk scoring
- Functional Assessment
- Vendor tracking & communication
- Healthcare data exchange
- Outcome measurement

Funding may increasingly come from:

- Healthcare partnerships
- Value-based care programs
- Medicaid programs
- Medicare Advantage

This evolution may transform service coordination into recognized infrastructure supporting national aging and healthcare priorities.

How the CareAegis Platform Helps Transform This Sector

As the affordable housing sector evolves toward a more proactive and data-driven coordination model, purpose-built platforms are defining a new category of infrastructure for housing-based care coordination.

Platforms such as CareAegis are designed to support this transition by providing the coordination infrastructure needed to scale proactive, data-driven service delivery.

These platforms are not intended to replace service coordinators, but to strengthen their effectiveness by enabling better prioritization, coordination, and follow-through.

Supporting proactive coordination

Platforms such as CareAegis enable organizations to identify resident risks earlier, prioritize interventions, and track follow-up activities.

This may allow coordinators to shift from reactive responses toward preventive engagement.

Enabling healthcare partnerships

Healthcare organizations increasingly require data demonstrating coordination capacity and outcomes.

Coordination platforms may help housing providers generate:

- Population insights
- Outcome reports
- Service utilization trends

Enabling housing-healthcare integration

Coordination platforms may serve as bridges connecting housing and healthcare through:

- Data exchange
- Coordination documentation
- Outcome reporting



Expanding workforce capacity

Workflow tools and standardized processes may allow coordinators to manage larger caseloads more effectively.

Potential benefits include:

- Reduced administrative burden
- Improved organization
- Better continuity of care

Providing missing coordination infrastructure

Many housing providers currently lack digital coordination tools.

Platforms like CareAegis provide:

- Closed-loop referral tracking
- Population dashboards
- Coordination records
- Outcome measurement

Supporting workforce sustainability

Reducing administrative burden may improve coordinator retention and reduce burnout.

Conclusion

This is no longer a future state. It is an active transition already underway.

Affordable housing service coordination is entering a new phase of strategic importance. What began as a supportive housing function is becoming essential infrastructure for aging populations, healthcare sustainability, and housing stability.

The sector now faces a clear choice:

Continue operating with fragmented coordination systems, or invest in the infrastructure required to support the next phase of coordination.

Platforms such as CareAegis can help enable this transition by providing the coordination infrastructure needed to scale proactive, effective service delivery.

The future of affordable housing will not be defined solely by buildings. It will be defined by the strength of the systems supporting the residents who live within them. Organizations that invest early in these systems will be best positioned to meet the demands of the coming decade.

Explore the impact of coordination infrastructure on portfolio performance at [CareAxis.net](https://www.careaxis.net)



Turning Coordination into Infrastructure Advantage



For housing operators navigating increasing resident complexity, coordination infrastructure is becoming a strategic requirement.

CareAegis supports organizations in building this capability with tools designed for real-world coordination environments.

 **CareAegis**
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