

Background:

A. State Policy Issues

TCDD staff will provide an update regarding recent public policy activities, including a summary of key matters of discussion by the 83rd Legislature that impact people with disabilities.

B. Federal Policy Issues

TCDD Public Policy staff will provide an overview of the status and implementation of various federal legislative initiatives that impact people with developmental disabilities. Additional information is provided in meeting materials.

Public Policy Committee

Agenda Item 10.

Expected Action:

The Committee will receive updates on these items and may make recommendations for consideration by the Council.

Council

Agenda Item 14. B.

Expected Action:

The Council will receive a report from the Public Policy Committee and consider any recommendations offered from the Committee.

Disability Programs Still Vulnerable After 'Fiscal Cliff' Deal

By Michelle Diamant | January 8, 2013

Despite an agreement last week to avert the so-called "fiscal cliff," experts say considerable uncertainty remains regarding the future of the nation's disability programs.

The last-minute deal struck shortly after the new year rang in halted tax increases for many Americans but failed to address a series of sweeping federal budget cuts. Instead, lawmakers opted to put off a process known as sequestration for two months, meaning that deep cuts that were expected to take effect at this beginning of this year for nearly all government programs will be delayed until March.

While offering a temporary reprieve, advocates say that the move leaves the fate of countless programs benefiting people with disabilities in the balance, with further budget negotiations in Washington virtually inevitable to deal with the impending cuts and the nation's debt ceiling.

"Everything is on the table," said Marty Ford, director of public policy for The Arc. "The next three months will make a huge difference in the way our federal government addresses people with disabilities for years to come."

Of utmost concern to Ford is the future of entitlement programs like Medicaid and Social Security. Though not subject to sequestration, advocates say the programs are vulnerable in any big budget deal that lawmakers may try to reach. Changes to these initiatives could be critical for people with disabilities, Ford said, with entitlement programs often making the difference between a person being able to live in the community or having no choice outside of institutional life.

Meanwhile, under sequestration, everything from special education to transportation, housing and health care programs serving people with disabilities are slated to be slashed in March in an effort to trim billions from the federal budget.

The two-month delay of sequestration means that less money will be chopped than was forecast last fall when more than \$100 billion was expected to be cut, but how much is not entirely clear. Regardless, the effect of such significant spending reductions on people with disabilities would be severe, said Lindsay Jones, senior director for policy and advocacy at the Council for Exceptional Children.

"One of the major concerns is that these cuts are indiscriminate and across-the-board," Jones said, noting that disability programs have already sustained significant cutbacks in recent years. "I think we have these two months to re-energize our membership and get them focused on how they can best explain their concerns to Congress."

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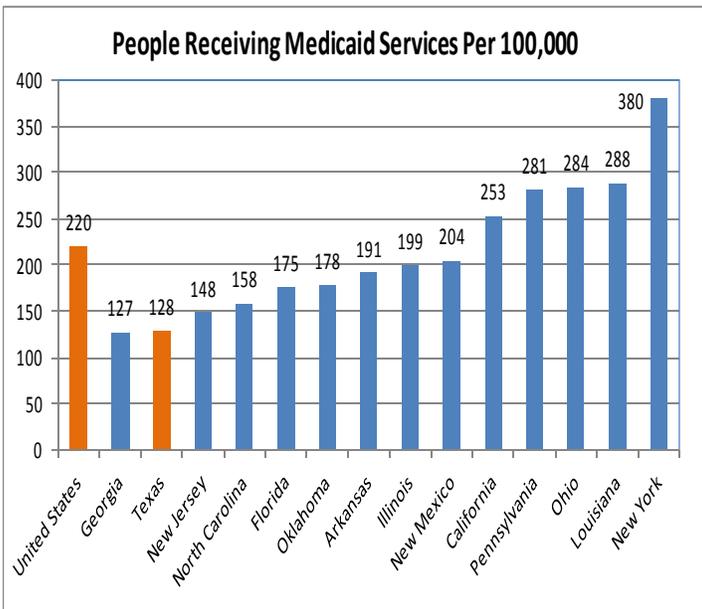
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Texas spends very little on Medicaid developmental disabilities services, and provides services to fewer people than most states.

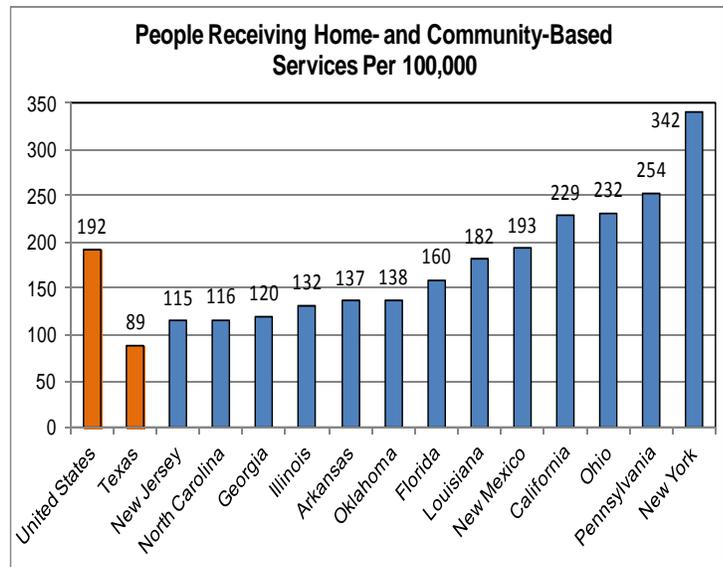


- Texas lags the nation, and nearly all comparison states, in the number of persons who receive Medicaid developmental disabilities services.
- Texas provides Medicaid developmental disabilities services to 128 persons per 100,000, compared to the national average of 220 – or 42.9% below the nationwide average.

Source: Larson, Sheryl, Amanda Ryan, Patricia Salmi, Drew Smith, and Allise Wuorio. "Residential Services and Supports for People with Developmental Disabilities: Status and Trends through 2010." Minneapolis: University of Minnesota, Research and Training Center on Community Living, Institute on Community Integration. 2012:120

- Although Texas has increased the number of home- and community-based recipients by over 15,000 from 2000 to 2010, it has a relatively low utilization rate of 89 per 100,000 of the state population. This compares to the national average of 192 per 100,000.
- Only Michigan*, Mississippi, and Nevada have lower utilization rates of community ICF & HCBS Waiver services than Texas.

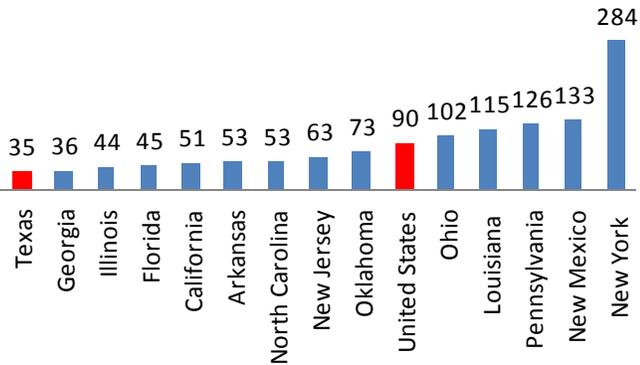
* Community services in Michigan are not ICF or HCBS funded.



Source: Larson, Sheryl, Amanda Ryan, Patricia Salmi, Drew Smith, and Allise Wuorio. "Residential Services and Supports for People with Developmental Disabilities: Status and Trends through 2010." Minneapolis: University of Minnesota, Research and Training Center on Community Living, Institute on Community Integration. 2012:120.

Texas employs its fiscal resources inefficiently in large state-run institutions.

2011 Per Capita HCBS Spending

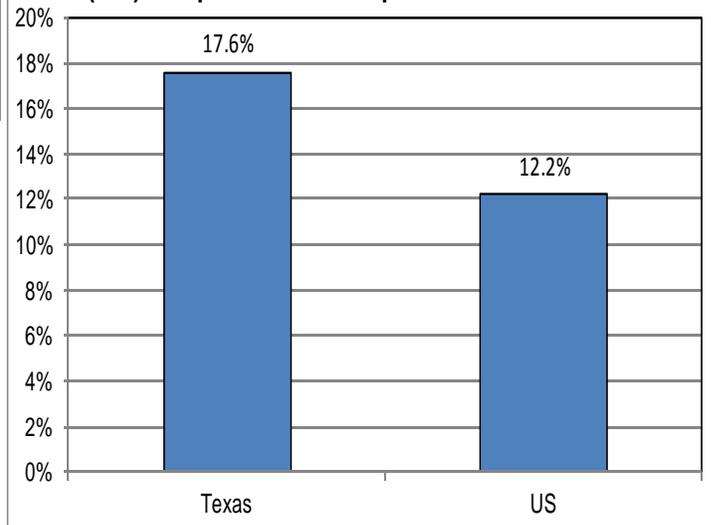


Source: Braddock, David, Richard Hemp, Mary C. Rizzolo, Emily Shea Tanis, Laura Haffer, Amie Lulinski-Norris, and Jiang Wu. State of the States in Developmental Disabilities 2013: The Great Recession and its Aftermath. 2012: 35.

- Texas has a greater proportion of the state population residing in large (16+ individuals) ICFs than the national average.
- Individuals receiving ICF services are similar to those in waivers.

- The Texas system emphasizes the use of more expensive services more frequently than other states.
- Texas expends a greater proportion of its Medicaid dollars on ICFs compared to the national average.

Percentage of Individuals Living in Large Settings (16+) Compared to Total Population Served FY 2010



Source: Larson, Sheryl, Amanda Ryan, Patricia Salmi, Drew Smith, and Allise Wuorio. "Residential Services and Supports for People with Developmental Disabilities: Status and Trends through 2010." Minneapolis: University of Minnesota, Research and Training Center on Community Living, Institute on Community Integration. 2012: 187.

TCDD Recommendations

1. Reduce the number of people served at state supported living centers to no more than the national average utilization rate for state-operated facilities by 2018.
2. Concurrently enhance community services to reduce admissions to state schools/centers, including developing and/or expanding programs for those requiring extensive behavioral supports and those with complex, chronic medical needs.
3. Cease admissions of children to state schools/centers.
4. Develop MFP initiatives to accommodate a stronger transition of people living in ICFs who prefer to receive services in the most integrated setting.
5. Adopt policies to encourage ICFs providers to transition to supporting individuals in the most integrated setting.
6. Increase funding to enroll a minimum of 4,604 additional individuals each year in HCBS waivers for individuals with intellectual and developmental disabilities increasing capacity to approximately 64,085 individuals by 2018.
7. Expand home-based services as the primary tool for addressing service demand, including consideration of expanding the Texas Home Living "supports" waiver.
8. Strengthen the infrastructure to underpin the community service system.
9. Contract for specialized behavioral support services for individuals living at home.