

Background:

Staff will provide an update of recent Public Policy activities of note.

Public Policy Committee

Agenda Item 10.

Expected Action:

The Committee will receive an update regarding recent public policy activities and provide guidance as appropriate. No action is anticipated.

Council

Agenda Item 20. B.

Expected Action:

The Council will receive an update from the Committee on public policy activities. No action is anticipated.

PUBLIC POLICY ACTIVITIES SUMMARY REPORT

August through November 2010

Long-term Services and Supports

- Council member Kris Bissmeyer presented testimony to the Senate Finance Committee on the implementation of budget provisions for the Department of Aging and Disability Services (DADS). *Input archived online at: <http://www.senate.state.tx.us/avarchive/?yr=2010>* Click on the August 18, 2010, Senate Committee on Finance and fast forward to the 3:29:36 mark.
- TCDD staff continue to participate in the Public-Private Provider Workgroup discussing current issues impacting the delivery of long-term services and supports for individuals with developmental disabilities.
- TCDD staff continue to participate in meetings with DADS concerning the status of rollout and enrollment in HCS waiver program and transition of case management to service coordination.
- TCDD staff continue to collaborate with colleague organizations regarding the implementation of the settlement with the Department of Justice concerning Texas state schools.
- TCDD participates on the Long Term Services and Supports subcommittee of the Task Force for Children with Special Needs and has provided input to the Task Force regarding the development of its strategic plan.
- Council member Kristen Cox wrote a Letter to the Editor that was published in the *El Paso Times* on September 16, 2010, regarding potential cuts to the Medicaid program. *Input attached.*
- TCDD staff met with staff from the Governor's office regarding the DADS budget request and long term services and supports.
- Senator Zaffirini's office met with TCDD staff to discuss method of financing issues in certain long term services and supports.
- TCDD staff attended the DADS stakeholder forum regarding improving services for individuals with high behavioral and medical needs in the Home and Community-based Services (HCS) and Community Living Assistance and Support Services (CLASS) Medicaid waivers.

Education

- TCDD staff participated in the NACDD Public Policy Team conference calls and have provided input on various proposed NACDD Position Statements and federal advocacy initiatives.
- TCDD participated in a stakeholder workgroup for the Texas Education Agency regarding the alignment of special education rules with new standards for assessing academic progress.
- TCDD continues to participate in the Early Childhood Detection and Intervention subcommittee of the Task Force for Children with Special Needs and provides guidance regarding the needs and issues surrounding the strategic provision of early intervention services in Texas.
- TCDD continues to monitor and attend meetings of the Early Childhood Intervention Advisory Council and Special Education Continuing Advisory Committee and provides input as needed.
- TCDD staff met with staff from the House Appropriations Committee Article III subcommittee regarding education funding and TCDD appropriations.
- TCDD staff continue to work with members of the Disability Policy Consortium's Education Committee in the development of analysis and input on proposed state education policy.

continued

Healthcare

- TCDD staff continue to participate in the Texas Respite Coalition.
- TCDD participates on the Healthcare subcommittee of the Task Force for Children with Special Needs developing a strategic plan for the state to improve the coordination, quality and efficiency for the delivery of services for children with chronic illnesses and developmental disabilities.
- Staff continue to monitor the impact of health care reform and Medicaid expansion on services for people with development disabilities and the potential to alleviate some of the demand health and human services place on Texas general revenue funds.
- Staff continue to send out consumer advisories as health care reform rolls out.

Housing

- TCDD staff continue to monitor and attend the Promoting Independence Advisory Council.
- TCDD participated in an ad hoc coalition that developed public comment on the Staff Report on the Sunset Review of Texas Department of Housing and Community Affairs. *Input Attached.*
- Staff continue to work with TDHCA staff and attend stakeholder and monthly Disability Advisory Workgroup meetings to advance affordability and availability of integrated housing statewide.
- Staff presented at statewide meeting of Texas Association of Centers for Independent Living on how to advocate.

Mental Health

- TCDD provided public testimony on the DSHS Legislative Appropriations Request (LAR) to the Joint Budget Hearing of the Legislative Budget Board held September 13, 2010. *Input Attached*
- TCDD continues to participate in the Texas Children's Mental Health Forums, developing a policy agenda to advance children's mental health in Texas.
- TCDD continues to participate in adult mental health policy planning through participation in meetings organized by Mental Health America Texas.
- TCDD staff continue to participate in the Mental Health Planning and Advisory Committee for DSHS and the Transformation Workgroup on issues related to continuity of care in community mental health.
- Staff continue to monitor and attend agency and legislative interim hearings, research mental health policy and practice through attending forums and taskforce meetings, and build coalitions and collaborative relationships with different mental health stakeholders, advocates and self-advocates.
- TCDD staff attended and participated in the Advocates Round Table (ART) rally for community services and assisted 12 consumers and family members in a visit to the office of Representative Ellen Cohen, a member of the House Appropriations Committee's subcommittee on Health and Human Services. Each person talked about personal impact that proposed budget cuts would have in their lives.

Transportation

- TCDD assisted TxDOT in reviewing 5310 applications for the transportation project in the Austin district.
- TCDD continues to monitor various metropolitan planning organizations and review changes to the long-range transportation plans.
- Staff met with other transportation stakeholders in regards to implementation a full risk broker medical transportation program as authorized under Rider 55 from the 81st Legislative Session.

- Staff continue to research transportation policy and practice through attending forums and taskforce meetings and building coalitions and collaborative relationships with different transportation stakeholders, advocates and self-advocates.

Employment

- TCDD continues to participate in the Department of Assistive and Rehabilitative Services' (DARS) Medicaid Infrastructure Grant (MIG) committee meetings and work with the various subcommittees regarding the identification of best practices in employment activities across the state.
- TCDD met with the MIG administrator regarding plans for the final year in the grant and discussed possible future directions that the project may take in order to improve employment outcomes for people with developmental disabilities.
- TCDD attended the DARS LAR hearing regarding vocational rehabilitation services. TCDD provided written and public testimony on the LAR. *Input attached.*
- TCDD staff met with staff from the Governor's office regarding the DARS LAR and the vocational rehabilitation program.
- TCDD continues to research employment policy and practice through attending forums and taskforce meetings and building coalitions and collaborative relationships with different employment stakeholders, advocates and self-advocates.

Children and Families

- TCDD attended the Texas Department of Family and Protective Services (DFPS) LAR hearing regarding services for children and families in Texas.
- TCDD staff collaborated with staff from Casey Family Foundation and The Arc of Texas in regards to permanency and placement for children with developmental disabilities.
- TCDD continues to participate in various child protective services meetings and work with various stakeholders, advocates and self-advocates.
- TCDD continues to research child protective services and licensing policy and practice through attending forums and taskforce meetings and building coalitions and collaborative relationships with various stakeholders.

Public Policy Input Documents

This section contains Public Policy Input submitted by Council Members and staff. A brief description of each item is below for your reference.

- Council member Kristen Cox wrote a Letter to the Editor that was published in the *El Paso Times* on September 16, 2010, regarding potential cuts to the Medicaid program.
- TCDD participated in an ad hoc coalition that developed public comment on the Staff Report on the Sunset Review of Texas Department of Housing and Community Affairs.
- TCDD provided public testimony on the DSHS Legislative Appropriations Request (LAR) to the Joint Budget Hearing of the Legislative Budget Board held September 13, 2010.
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http://www.elpasotimes.com/opinion/ci_16084638.

Letters: Medicaid challenge

Posted: 09/16/2010 12:00:00 AM MDT

Medicaid challenge

The State of Texas' budget is a central topic of discussion as the Legislature prepares to go into session in January. Because of an expected and significant deficit, budget cuts that result in cuts in essential services are of particular concern.

Our legislators face a challenging task in determining how to balance the budget, but state leaders must resist temptation to cut programs that have a federal matching share. Moreover, cuts to the Medicaid program should be considered off limits.

Reducing funds for Medicaid would be devastating for individuals with disabilities who need Medicaid assistance to live and work in the community, rather than in institutions. The effects of such cuts would be escalated by the reduction in federal funds that would accompany state cuts.

For every 40 cents Texas invests in Medicaid programs, the state receives 60 cents in matching funds from the federal government.

Conversely, if the state cuts funding by 40 cents, it means that we will lose an additional 60 cents in federal matching funds.

It is therefore paramount that state lawmakers do not make cuts that will result in further revenue loss, particularly when those funds provide critical services that keep individuals in their homes and communities.

Kristen Cox

Texas Council for Developmental Disabilities

Advocacy, Inc.
Association of Rural Communities in Texas
Center on Disability and Development - Texas A&M University
Easter Seals Central Texas
Habitat for Humanity of Texas
Motivation Education & Training, Inc.
Texas Association of Community Development Corporations
Texas Association of Local Housing Finance Agencies
Texas Council for Developmental Disabilities
Texas Center for Disability Studies-UT
Texas Low Income Housing Information Service

September 29, 2010

Ken Levine
Interim Director
Sunset Advisory Commission
PO Box 13066
Austin, TX 78711
sunset@sunset.state.tx.us

VIA EMAIL

Dear Mr. Levine,

The undersigned stakeholders appreciate the research, outreach, and analysis of Sunset staff incorporated into the Texas Department of Housing and Community Affairs (TDHCA) Sunset report, and support many of the recommendations within. We respectfully submit the following comments on the staff report for consideration by the Commission.

Staff Issues:

Staff Issue 1: Lack of State Planning Delays Funding to Hard Hit Texas Communities Recovering from Major Disasters

We concur in principle with staff recommendations that Texas needs a clear and consistent long-term disaster recovery plan that designates a lead agency and requires local communities to add a long-term recovery component to existing emergency management plans. Several members of the stakeholder group intend to comment in more detail on this issue.

Staff Issue 2: Certain Statutory Requirements Impede Texas's Administration of the Housing Tax Credit Program.

We concur that there is too much power in neighborhood associations under the current statutory scoring framework. The breadth and fairness of local participation in many neighborhood associations can be difficult to evaluate, and the current framework for local input fails to ensure the process is not a barrier to furthering the fair housing goals of the state.

Staff Issue 3: The Department’s Processing of Single-Family Loans is Slow and Inefficient, Causing Families to Wait for Needed Assistance

We agree with Staff’s identification of this issue and encourage close legislative oversight on management’s action to create a faster and more efficient system for the Single Family Loan program.

Staff Issue 5: Inconsistencies in the Department’s Enforcement Process Wastes Resources and Contribute to Lingering Compliance Problems

Program non-compliance can directly impact the quality of life of the residents of affordable housing in Texas, and we strongly agree with staff’s identification of this issue, as well as its proposed recommendations. Tolerating multi-year non-compliance is not fair to program residents nor the other program participants that maintain their properties and stay in program compliance.

While we support staff’s recommendation regarding the use of Administrative Law Judges for penalty appeals we also recommend a reform of non-penalty appeals. This is discussed below in our recommendation C.

Staff Issue 6: Using State Employees to Inspect Manufactured Housing Installations Is Inefficient and Does Not Provide Adequate Statewide Coverage.

We strongly support the staff recommendation to require the TDHCA Board, by rule, no later than December 1, 2011 to establish guidelines for the inspection of all manufactured housing installations using third-party inspectors.

Half of all deaths due to tornadoes occurred in manufactured homes: NOAA data shows that of 479 tornado-related deaths from 2002 to 2009, 249, or 52% of the deaths, occurred in mobile homes.¹ For comparison, the 2005 American housing survey found only 6.6% of the housing units in the US were mobile homes. Proper installation and anchoring is an important factor in the ability of a manufactured home to withstand a high-wind event such as a tornado or a hurricane.

In addition to endangering its residents, an improperly installed home may damage other homes, especially in high-density manufactured home parks. The National Hurricane Center reports: “debris from the damaged or destroyed homes will become missiles that have the potential to substantially damage other units...”²

Nevertheless, the Manufactured Housing Division currently completes inspections of less than half of new installations.

After tornadoes killed 6 mobile-home residents in Mississippi last spring, Mississippi moved to a 100% inspection standard for manufactured home installations. Texas should not wait until after the next death to do the same.

1

² “Hurricane Loss Reduction for Residences and Mobile Homes in Florida.” The International Hurricane Center. May 2001. Internet Source: <http://www.ihrc.fiu.edu/lwer/docs/DELIVERABLE7structural.pdf>

Staff Issue 7: Key Elements of the Manufactured Housing Division’s Functions Do Not Conform to the Common Licensing Standard.

We concur with staff’s recommendations on this issue, and strongly urge the commission to adopt its recommendations to make the division effective in its mission to “improve the general welfare and safety of purchasers of manufactured housing in this state.”

A simple, but important, recommendation of commission staff is for the Manufactured Housing Division to make its enforcement actions easily available to the public. In general, we believe the Department should **proactively** use its licensee and complaint information to inform the public about the marketplace.

The department should notify consumers in the promulgated consumer disclosure notice about the public availability of information regarding complaint and enforcement activity against licensees. The department should design its web interface for easier consumer reference by integrating complaint, violation, and enforcement information with the licensing database. This information should not be limited to un-resolved complaints that rise to the level of enforcement actions. The fact that a consumer needed to file a complaint with the department about a particular licensee is relevant, and public, information about consumer experience in the manufactured home market.

Stakeholder Group Issues

In addition to the issues and recommendations identified by Sunset Staff, we recommend the following actions:

A) Create a program category for Texans earning between 0 and 110% of SSI.

Background:

TDHCA presently tracks three categories of low income households: Low Income: those earning 80% AMFI or below; Very Low Income: those earning 50% AMFI or below; and Extremely Low Income: those earning 30% AMFI or below. These categories are used to evaluate the housing needs of households within different income strata. These categories are also used for program targeting. When used for targeting, the income thresholds chosen for the categories are crucial to the actual allocation, as funds targeted at a given income group are typically claimed by the highest income household within a group.

The 2009 Comprehensive Housing Affordability Strategy data from HUD demonstrates that there is significant unmet housing need in households making below 30% AMFI. Many of these households have incomes too low to qualify for or access the TDHCA programs targeted at households close to the 30% threshold. Specifically, those living on Supplemental Security Income (SSI), Social Security Disability Insurance (SSDI), or other government-funded

programs may not qualify for housing programs targeted at 30% AMFI households. While AMFI varies by area, federal SSI benefits are often 15% of AMFI or less.

Those Texans living on SSI can be more difficult to locate, contact, and market to than their higher income counterparts, and programs for such fixed income households must be structured differently than those designed for higher income households. For these reasons, money earmarked for below 30% AMFI largely goes to the population nearest the 30% threshold, leaving a large portion of the state's lowest income housing need unmet.

Recommendation:

Create a program category for Texans earning between 0 and 110% of SSI.

The State should recognize the distinct needs of those living on fixed incomes. We propose that the Texas Department of Housing and Community Affairs, along with other State agencies, develop a target income category of between 0 and 110% of the level of SSI. Setting a threshold below "Extremely Low" will allow the State to monitor, plan for, and allocate resources to a group that is currently slipping through the cracks of our housing and human service programs.

B) Clarify that Housing Trust Fund programs with less than \$3 million are exempt from the Regional Allocation Formula.

Background:

TDHCA does not interpret the Regional Allocation Formula statutory provisions for the Housing Trust Fund as intended. The statute excludes Housing Trust Fund funds less than \$3 million from the RAF and was intended to be interpreted on a program basis. The Agency is interpreting the \$3 million exemption as the total amount in the Housing Trust Fund. The net result is that funding in smaller programs is needlessly delayed in getting allocated as grantees wait for small regional allocations to collapse into useable sums.

Recommendation:

Amend the Housing Trust Fund in 2306 to clarify that Housing Trust Fund programs with less than \$3 million are exempt from the Regional Allocation Formula.

C) TDHCA's appeals process should be separated from scheduled board meetings.

Background:

In addition to setting policy, the TDHCA board both finalizes adoption of staff recommendations regarding the allocation of program funds and oversees appeals of all departmental decisions. While Sunset staff recommendation #5 addresses the compliance appeals process, we also recommend changes for non-penalty appeals.

For example, at the April 23, 2009 meeting the transcript³ shows the board spent the majority of the meeting listening to appeals of staff decisions. One case dealt with enforcement of the application deadline (p. 137) for an applicant who claimed technical difficulties in the application process. An appeal of a missed application deadline is not the optimal use of board time and resources.

Another case that day (p. 116) involved second-guessing the staff's enforcement of the requirement of ceiling fans in tax credit properties and a request for an exemption from that requirement for a specific property. While re-consideration of the general requirement of ceiling fans in participating properties could be considered a policy matter, the specific exemption of a single property is not. Examining individual claims for exemption is not the optimal use of board time and resources.

Recommendation:

Separate the appeals process from the scheduled board meetings.

We recommend the creation of a TDHCA appeals board. One member of the TDHCA board (“the appeals board liaison”) would sit on the TDHCA appeals board. Each TDHCA board member other than the appeals board liaison would appoint one other member of the appeals board. The chair of the appeals board should be an appeals board member other than the appeals board liaison.

This board would provide a mechanism for oversight of staff decisions while allowing the TDHCA board to focus on setting policy for the department. The appeals board can meet on a regular basis, with additional meetings around important dates in the funding cycle of the department. The meetings should be webcast in a similar manner to regular board meetings.

D) Amend the government code to ensure the state complies with all current legal requirements regarding board composition

Background:

Texas local government codes governing housing authorities provides for the appointment of at least one board member who is a recipient of the public housing authority. This is also required by the Quality Housing and Work Responsibility Act of 1998, a federal law which requires that the board of directors of a PHA include at least one member who is directly assisted by the PHA. The Texas Department of Housing and Community Affairs board operates as a public housing authority and consequently a position should be designated in its statute in a manner which ensures the position does not remain empty indefinitely.

Recommendation:

Amend the government code to ensure the PHA board seat does not remain unfilled.

³ April 23, 2009 Board Meeting Transcript. Texas Department of Housing and Community Affairs. Internet source: <http://www.tdhca.state.tx.us/pdf/transcripts/090423-board.pdf>

In addition to the federally-mandated TDHCA public housing authority voucher recipient, individual signatories to this letter believe that TDHCA would benefit from additional diversity on the board, including a designated representative from Rural areas (defined as a city less than 10,000 in population not adjacent to a MSA or an unincorporated area of a county less than 20,000 in population) and people with disabilities.

E) Broadcast all TDHCA and Manufactured Housing Division meetings proceedings via webcast and make the archived webcasts immediately available to the public.

Background:

Transcripts of TDHCA board meetings are not generally made available until at least a week after the meetings are held. Stakeholders who are not in the Austin area or not able to attend meetings have historically had no way of monitoring the proceedings in real or near-real time.

Since March 2010, TDHCA has begun web broadcasting the proceedings of full TDHCA board meetings in Austin. Meetings of the Audit Committee, the Manufactured Housing Division Board, and TDHCA board meetings located outside of Austin have not been broadcast.

Recommendation:

Broadcast all TDHCA and MHD meeting proceedings via webcast and make the archived webcasts immediately available to the public.

While we commend TDHCA for diversifying the location of its meetings, moving the board meeting outside of Austin does not reduce the need for public access to the proceedings. And as an independent board, the activities of the MHD board should be equally accessible to the public.

F) Manufactured Housing Division should regulate lease-purchase transactions at the time of contract execution

Background:

The Manufactured Housing Division regulates the sale of manufactured homes in Texas. Sellers of manufactured homes may structure a sale as a “lease purchase” to avoid the proof of ownership, departmental licensing, and disclosure requirements of a conventional sale. Currently, the department does not provide oversight of lease-purchase transactions at the time the contract is initiated. Consumers may pay years on a home before they discover the seller does not have a Statement of Location (which functions similar to a title in conventional housing) clear of liens and eligible for transfer. At that point, sellers may use eviction under tenant statutes to avoid their obligations under the lease-purchase contract.

Recommendations:

The Department should regulate lease-purchase transactions at the time of contract execution.

The department should apply all licensing and disclosure requirements under the Manufactured Housing Standards Act to lease-purchase contracts at the time of contract execution, including licensing requirements for high-volume sellers, the use of standardized forms and sales disclosures, and proof of a clear statement of location held by the seller. The department should be given authority to review evictions on homes under lease-purchase contract to ensure landlord-tenant law is not being misused to void a valid sales contract.

Conclusion:

The sunset process is an opportunity for the state to improve the ability of TDHCA to meet its mission to help Texans achieve an improved quality of life through the development of better communities. We believe the adoption of the recommendations discussed above will help the state do that, and encourage their incorporation in the Sunset process.

Thank you for the opportunity to provide input on the Sunset staff report on TDHCA.

Sincerely,

Advocacy, Inc.
Association of Rural Communities in Texas
Center on Disability and Development - Texas A&M University
Easter Seals Central Texas
Habitat for Humanity of Texas
Motivation Education & Training, Inc.
Texas Association of Community Development Corporations
Texas Association of Local Housing Finance Agencies
Texas Council for Developmental Disabilities
Texas Center for Disability Studies-UT
Texas Low Income Housing Information Service

Correspondence Contact:

Kevin Jewell
Texas Low Income Housing Information Service
508 Powell St
Austin TX 78703
kevin@texashousing.org

The Department of State Health Services (DSHS) administers the Children with Special Health Care Needs (CSHCN) program, community mental health services, in-patient psychiatric services (state hospitals) and other community health programs that promote healthy lives and prosperity. In the 20th century, life expectancy of Americans increased by 30 years, from 47 to 77, and it is estimated that 25 of those years are attributable to improvements in public health, rather than improvements in drugs, treatment, and medical care. Despite these public health improvements, significant health issues remain, especially for citizens with developmental disabilities and/or co-occurring mental illness.

437,885 Texans have developmental disabilities and/or co-occurring mental illness.

PRIORITY PROGRAMS FOR TCDD

Children with Special Health Care Needs (CSHCN): This program covers children who are not eligible for CHIP or Medicaid and have significant health care needs. It also covers adults with cystic fibrosis. Children are connected to health and related services to keep them healthy and prevent further disability. CSHCN currently provides 5,555 children with case management and 2,248 with medical services. The average cost per client in medical services is \$13,077. There were 1,422 on the waiting list as of July 2010.

Epilepsy Program: This program is growing because of population growth and increased costs for treatment. Children with developmental disabilities are at 4 times greater risk of seizure disorders than children without disabilities. In 2009 about 10,400 individuals with uncontrolled seizures were served.

Community Mental Health Services: There were an estimated 467,226 Texans with serious and persistent mental illness in 2009. DSHS-funded community mental health services served just 150,075 in FY 2009. DSHS contracts with 39 Community Mental Health Centers and NorthSTAR to provide community mental health care to manage or eliminate symptoms and promote recovery for individuals with serious mental illnesses, including schizophrenia and bi-polar disorder. Untreated and under-treated mental illness often sets in motion a cascade of increasing mental instability, academic, social, health and economic losses.

Community MH Crisis Restoration Services: CRS are a combination of services that provide emergency care, urgent care, and crisis follow-up to children, adolescents, or adults in the community. Mobile Crisis Outreach Teams will respond to individuals experiencing a mental health crisis in their homes, schools or other public areas. CRS served about 16,647 in FY 2009.

Mental Health Hospitals: Severe mental illness can require inpatient care. There are eight state hospitals and one psychiatric residential facility for children that are full continuously. State hospitals serve people who are referred by a local mental health authority or are in need of specialized services or require competency restoration for court proceedings. Texas is under lawsuit for failure to provide beds for forensic patient mental health competency restoration.

Community Children's Mental Health: Texas served less than 25% of the children who need mental health services, which are proven to keep children in their family, in school and out of jail – roughly 70% of youth in juvenile justice have mental health disorders. In 2009 an average of 12,664 children per month received mental health services. This number dropped to 12,206 in 2010 and will remain stagnant with the 2012-13 LAR.

An estimated 36% of children with intellectual and developmental disabilities between 4 and 18 could be classified as having severe emotional and behavior disorder.

Base LAR

DSHS LAR base request includes \$40 million in reductions to programs, including the Children with Special Health Care Needs (CSHCN), Community Mental Health Crisis Restoration Services (CRS), Substance Abuse Treatment Services, and State Hospital capacity while the demand for services continues to grow along with the Texas population.

Exceptional Items

EI-1 Restores Current Services Cut in Base Request = \$57.4 million. Includes CSHCN, CRS, mental health, epilepsy and hemophilia, kidney care trauma and primary care critical to Texans with disabilities.

EI-2 Maintains Mental Health Hospitals = \$42.6 million. Maintains 2010-11 daily capacity in state mental hospitals.

EI-4 Builds Mental Health Hospital Capacity = \$24.5 million. Funds 75 additional admissions, expands Peer Support and provides stipends to psychiatrists and nurse practitioner residents to address critical shortages. This item will also reduce the time a local hospital bed is unavailable for the growing forensic population through the creation of a step down program.

EI-9 Expands Community Mental Health = \$21 million. Will expand CRS that provide intensive and emergency mental services that diverts children and adults with serious mental illness from law enforcement and hospital emergency rooms. It will also expand the culturally competent Rural Border Mental Health Initiative.

Proposed 10% Cuts

CSCHN: A \$24 million cut means 837 fewer children with special health care needs would receive critical health and related care.

Epilepsy Program: A \$45 thousand reduction means 966 less receive necessary seizure health care.

Community MH: A \$25 million reduction translates to 5,922 adults with serious and persistent mental illness not receiving services through 39 community MH centers and 5,966 do not receive services through NorthSTAR.

MH Crisis Services: \$7.5 million cut means 3,842 fewer children and adults get crisis MH services and 1,666 do not get crisis transitional services that lessen incarceration, homelessness, substance abuse and hospitalization.

Mental Health Hospitals: \$45.3 million means 1,428 fewer patients served or 193 beds taken offline.

Children's MH: \$9.6 million cut translates into 2,377 children not receiving behavioral health services during a unique window of opportunity to impact the trajectory of their lives.

Conclusion

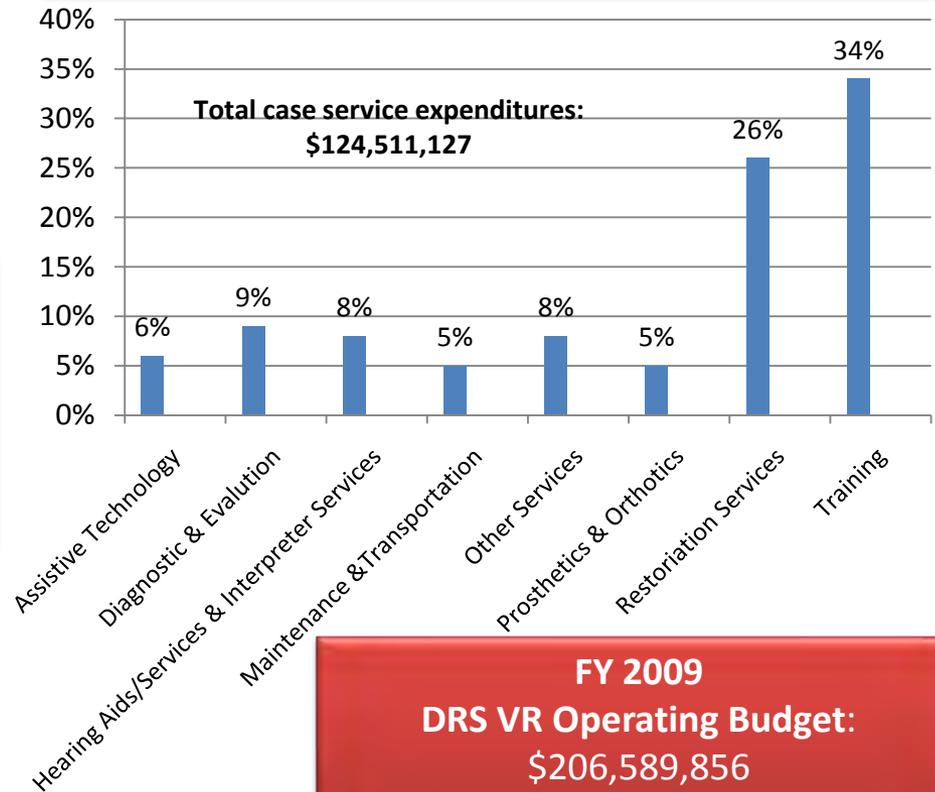
TCDD believes Texas should continue to make smart investments in cost effective public health promotion services by restoring current DSHS services and increasing investment in programs that promote the health and mental health of infants, youth and adults with developmental disabilities.

The Vocational Rehabilitation (VR) Program operated by the Department of Assistive and Rehabilitative Services (DARS) helps people who have physical and mental disabilities prepare for, find or keep employment. The VR program provides services and supports for people with disabilities so they can be productive and independent citizens in Texas.

DARS's **Legislative Appropriations Request (LAR)** reflects the needs of the individuals for VR services during the 2012-2013 biennium. The demand for VR services is growing. Funding for VR services for FY 2009 provided by the 81st Legislature allowed approximately **88,024 individuals to receive services.**

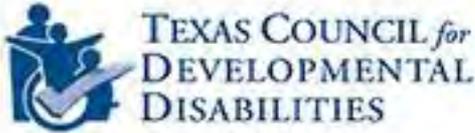
Among all working-age (18-64) people with disabilities, only **21% say that they are employed full or part-time** compared to 59% of working-age people without disabilities. Some individuals looking for work indicate that, because of their disability, they are unable to get the accommodations needed to perform job duties effectively. DARS VR services help people secure needed job accommodations.

DRS Vocational Rehabilitation expenditures by type of service
FY 2009



FY 2009
DRS VR Operating Budget:
\$206,589,856
Average cost per consumer: \$2,402

For every dollar spent on vocational rehabilitation, consumers generate more than \$9 in personal taxable income through the remainder of their work lives. By retirement, the average rehabilitated consumer will have repaid the cost of services at least four times through taxes paid.

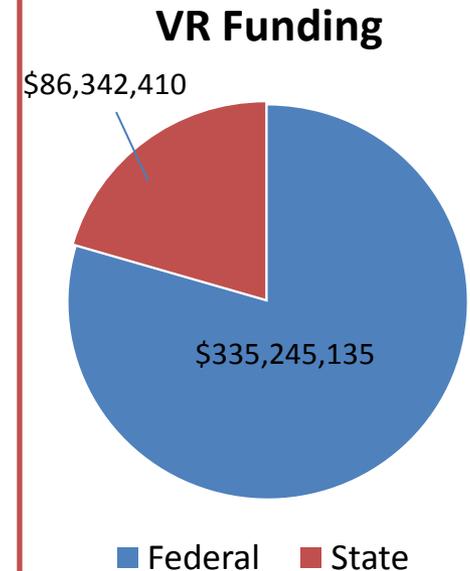


DEPARTMENT OF ASSISTIVE AND REHABILITATIVE SERVICES Joint Budget Hearing

Budget	Base	Base	Exceptional	Exceptional	Total Request	Total Request
2011	2012	2013	2012	2013	2012	2013
\$218,153,775	\$212,315,004	\$210,705,337	\$5,400,051	\$13,415,078	\$217,715,055	\$224,120,415

Occupation	FY 2009	Total Consumers
Construction, Maintenance & Repair		852
Healthcare Related		1,179
Office & Administrative Support		2,160
Production		854
Professional, Managerial & Technical		2,059
Sales & Related		1,005
Services		2,577
Transportation		881
Other		357
Total		11,924

DARS is requesting a **three percent increase base funding**. This increase will allow for the expected growth in federal VR funds. Texas receives \$4 federal for every \$1 state match. **This request would enable DARS to increase employment outcomes by more than 1,000 Texans during for the biennium.**



For more information, please contact Cassie Laws-Fisher, Public Policy Specialist
(512) 437-5430 or Cassie.Laws@tcdd.state.tx.us