Housing and Services Resource Guide: Federal and State Resources

Prepared for the Housing and Services Partnership Academy

September, 2013

One hundred percent federally funded through a Real Choice Systems Change Grant, a $330,000 grant awarded by the Centers for Medicare and Medicaid Services to Texas through a partnership between TDHCA and the Texas Department of Aging and Disability Services.
# Table of Contents

Introduction to CMS Grant .............................................................................................................. 1
How to Use This Guide .................................................................................................................... 1
Part 1: Introduction to Housing for People with Disabilities ............................................................ 2
Funding for Affordable Housing ..................................................................................................... 3
Federal Housing Resources for Organizations .................................................................................. 4

U.S. Department of Housing and Urban Development ................................................................. 4
  - Community Development Block Grant Program (CDBG) ....................................................... 5
  - HOME Investment Partnerships Program (HOME) .............................................................. 5
  - Emergency Solutions Block Grant (ESG) .................................................................................. 6
  - Housing Opportunities for Persons with AIDS Program (HOPWA) ..................................... 6
  - Section 811 Supportive Housing for People with Disabilities ............................................. 7
Homeless Assistance Programs .................................................................................................... 8

U.S. Department of Agriculture .................................................................................................... 9
U.S. Department of Veterans Affairs (VA) .................................................................................. 9
  - VASH Vouchers ....................................................................................................................... 10

State Housing Resources for Organizations .................................................................................. 10
  - Texas Department of Housing and Community Affairs (TDHCA) ...................................... 10
  - Texas State Affordable Housing Corporation (TSAHC) ......................................................... 12
  - National Housing Trust Fund .................................................................................................. 13
  - Federal Home Loan Bank System .......................................................................................... 13

Housing Resources for Individuals ............................................................................................... 14
  - Public Housing Authority (PHA) ............................................................................................ 14
  - Housing Choice Vouchers ....................................................................................................... 15
  - TDHCA Project Access ............................................................................................................ 16
  - TDHCA Tenant-Based Rental Assistance (TBRA) ................................................................. 17

Additional Voucher Programs ....................................................................................................... 17
  - HUD-VASH ............................................................................................................................ 17
  - Mainstream Vouchers ............................................................................................................. 18
  - Non-Elderly Disabled Vouchers (NED) .................................................................................. 18
  - Family Unification Vouchers (FUP) ......................................................................................... 18
  - Voucher Summary ................................................................................................................. 19
Section 8 Project-Based Rental Assistance ............................................................... 19
Accessibility Modifications .............................................................................................. 20
Homeownership ................................................................................................................... 20
Texas Bootstrap Loan Program ................................................................................ 21
HOMEowner Rehabilitation Assistance (HRA) Program ........................................ 21
HOMEbuyer Assistance (HBA) Program ........................................................................ 21
TDHCA HOME Tenant-Based Rental Assistance .................................................... 22
Vacancy Clearinghouse ..................................................................................................... 22
Important Opportunities for Input – Making a Difference at the Local Level 22
Consolidated Plan (ConPlan) .......................................................................................... 23
PHA Plan .................................................................................................................................. 24
Housing and Health Services Coordination Council (HHSCC) .................................. 24
Disability Advisory Workgroup (DAW) ........................................................................ 25
State Low-Income Housing Plan (SLIHP) .................................................................... 25
Part 2: Introduction to Services for People with Disabilities ................................ 25
Medicaid ....................................................................................................................................... 25
State of Texas Programs ........................................................................................................ 26
Structure of Texas Health and Human Services ......................................................... 27
Texas Health and Human Services Commission (HHSC) ........................................ 27
2-1-1 Texas ........................................................................................................................ 27
Medicaid Funded Behavioral Health Programs ....................................................... 28
Texas Department of Aging and Disability Services (DADS) .................................... 28
Promoting Independence: Outreach, Awareness and Relocation .......... 28
Local Authorities (LAs) ...................................................................................................... 29
Area Agencies on Aging (AAAs) .................................................................................... 29
Aging and Disability Resource Centers (ADRCs) ..................................................... 29
Texas Department of State Health Services (DSHS) .............................................. 29
Community Collaboratives ............................................................................................ 30
Local Mental Health Authorities (LMHAs) ................................................................. 30
Mental Health and Substance Abuse ....................................................................... 31
Texas Resilience and Recovery (TRR, formerly RDM) ........................................... 31
Assertive Community Treatment ACT Services .................................................... 32
Psychosocial Rehabilitation Services (PRS) ............................................................... 32
Youth Empowerment Services (YES) Waiver ......................................................... 32
<table>
<thead>
<tr>
<th>Service Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing Opportunities for Persons with AIDS Program (HOPWA)</td>
<td>33</td>
</tr>
<tr>
<td>Projects for Assistance in Transition from Homelessness (PATH)</td>
<td>34</td>
</tr>
<tr>
<td>Texas Department of Family and Protective Services (DFPS)</td>
<td>35</td>
</tr>
<tr>
<td>Transitional Living Services</td>
<td>35</td>
</tr>
<tr>
<td>Independence Programs</td>
<td>36</td>
</tr>
<tr>
<td>Other Related Information:</td>
<td>38</td>
</tr>
<tr>
<td>Post- Secondary Education</td>
<td>39</td>
</tr>
<tr>
<td>Healthcare Coverage (Handout – Form 1014)</td>
<td>42</td>
</tr>
<tr>
<td>Other Youth/Young Adult Services</td>
<td>43</td>
</tr>
<tr>
<td>Other Related Information</td>
<td>45</td>
</tr>
<tr>
<td>Texas Department of Assistive and Rehabilitative Services (DARS)</td>
<td>48</td>
</tr>
<tr>
<td>Comprehensive Rehabilitation Services Program</td>
<td>48</td>
</tr>
<tr>
<td>Rehabilitation Technology Resource Center</td>
<td>49</td>
</tr>
<tr>
<td>Independent Living Services and Centers</td>
<td>51</td>
</tr>
<tr>
<td>Vocational Rehabilitation Program</td>
<td>53</td>
</tr>
<tr>
<td>DARS Specialized Telecommunications Assistance Programs (STAP)</td>
<td>55</td>
</tr>
<tr>
<td>DARS Division for Blind Services</td>
<td>55</td>
</tr>
<tr>
<td>Texas Councils of Government (COGs)</td>
<td>56</td>
</tr>
<tr>
<td>Community Services and Supports – Medicaid Entitlement</td>
<td>56</td>
</tr>
<tr>
<td>Primary Home Care (PHC)</td>
<td>56</td>
</tr>
<tr>
<td>Community Attendant Services (CAS)</td>
<td>56</td>
</tr>
<tr>
<td>Day Activity and Health Services (DAHS)</td>
<td>56</td>
</tr>
<tr>
<td>Community Services and Supports Medicaid Waivers</td>
<td>57</td>
</tr>
<tr>
<td>Community Based Alternatives</td>
<td>57</td>
</tr>
<tr>
<td>Home and Community-based Services</td>
<td>57</td>
</tr>
<tr>
<td>Community Living Assistance and Support Services</td>
<td>58</td>
</tr>
<tr>
<td>Deaf-Blind with Multiple Disabilities</td>
<td>58</td>
</tr>
<tr>
<td>Medically Dependent Children Program</td>
<td>58</td>
</tr>
<tr>
<td>Texas Home Living</td>
<td>58</td>
</tr>
<tr>
<td>Star+Plus</td>
<td>59</td>
</tr>
<tr>
<td>Community Services and Supports - Non-Medicaid</td>
<td>59</td>
</tr>
<tr>
<td>Adult Foster Care</td>
<td>59</td>
</tr>
<tr>
<td>Client Managed Personal Attendant Services</td>
<td>59</td>
</tr>
<tr>
<td>Emergency Response Services (ERS)</td>
<td>59</td>
</tr>
</tbody>
</table>
Introduction to CMS Grant

The U. S. Department of Health and Human Services, through its Centers for Medicare and Medicaid Services (CMS) awarded the Real Choice Systems Change grant to the Texas Department of Housing and Community Affairs (TDHCA) and the Texas Department of Aging and Disability Services (DADS) to develop long-term strategies to provide permanent and affordable rental housing for people with disabilities, particularly for those receiving Medicaid services. This guide is produced with 100% federal funding from this grant.

The lack of decent, safe, affordable, and integrated housing is one of the most significant barriers to full participation in community life for people with disabilities. Historically, people with disabilities have lacked access to affordable, accessible, integrated housing. Only recently, however, has the number of individuals experiencing this lack of access begun to grow by leaps and bounds. According to one the recent U.S. Department of Housing and Urban Development (HUD) study, between 2007 and 2009, the number of households of persons with disabilities experiencing the most dire or severe forms of housing need increased by 100,000, reaching 1.1 million households. In this time period, the prevalence of worst case needs among very low-income renters with disabilities increased from 38 to 41 percent.

Many of these individuals with disabilities confronting housing challenges reside in Texas. In fact, during this same period, the number of persons with disabilities in Texas grew to more than 24 million. Approximately 1.5 million of those individuals fall between the ages of 21 to 64 years. Also in 2009, the number of working-age people with disabilities receiving Supplemental Security Income payments (SSI) in Texas was 228,100. Thus, roughly one quarter of a million Texans are adults of working age whose incomes fall far below 30% of area median income. For this population, opportunities to reside in integrated, accessible housing are rare, and they are almost never affordable.

Individuals with disabilities receive their housing from one provider and their long-term services and supports (LTSS) from another provider. Housing and LTSS providers use different terminology about the services they each provide. When both housing and disability service providers work together in successful partnerships, the housing and services needs can be more effectively met. This Resource Guide seeks to assist both housing and disability service providers with information that will benefit people receiving these services.

How to Use This Guide

This guide was developed to identify federal and state housing and service resources for people with disabilities. Part 1 of the guide provides an introduction to housing for people with disabilities, followed by specific federal and state housing programs. Part 2 of the guide provides an introduction to services and supports for
people with disabilities. Information about specific programs in Texas is provided. The goal of this guide is to provide information to identify the various types of programs that are available and where to get more detailed material about these programs in Texas.

**Part 1: Introduction to Housing for People with Disabilities**

The housing challenges facing people with disabilities are well documented. Each year, the National Low Income Housing Coalition analyzes data from HUD, the U.S. Census Bureau, the Bureau of Labor Statistics, the Department of Labor, and the Social Security Administration to compare renters’ wages to the cost of housing across the country. The *Out of Reach 2013* report shows that the average hourly wage among renters is $14.32. But the “housing wage” (the estimated hourly wage that a household must earn in order to afford the Fair Market Rent of a two-bedroom unit, without paying more than 30% of their monthly income toward rent and utilities) is $18.79, making affordable housing for low-income renters out of reach.¹

The State of Texas ranks 22nd most expensive out of 52 jurisdictions (50 states plus the District of Columbia and Puerto Rico). Texas’s housing wage is $16.67/hour. That means that a minimum wage worker would need to work 92 hours a week in order to afford a two-bedroom unit at Fair Market Rent.²

Of course, the story for people with disabilities is much more dire. Current Supplemental Security Income (SSI) payments are $710/month for an individual and $1,066/month for a couple.³ While many states supplement federal SSI payments, Texas does not. Accordingly, people with disabilities living on SSI are extremely low-income.

An individual on SSI should pay no more than $213/month on rent and utilities (that amount increases to $320/month for a couple on SSI). But the Fair Market Rent for a two-bedroom unit in Texas is $867/month. Accordingly, a person with a disability living on SSI would need to spend more than their entire monthly income on rent.

The full *Out of Reach 2013* report – including both state and county-level data - can be downloaded here:


---

¹ National Low Income Housing Coalition, *Out of Reach 2013*, page 3.
² Ibid., pages 11-13.
³ Detailed information on SSI payments is available through the Social Security Administration at [www.ssa.gov/pressoffice/factsheets/colafacts2013.htm](http://www.ssa.gov/pressoffice/factsheets/colafacts2013.htm).
In February 2013, HUD issued its annual "Worst Case Housing Needs" report to Congress. The data showed a dramatic increase in worst case housing needs between 2009 and 2011 (the most current time period studied). This increase could primarily be attributed to declining incomes and increasing demand for affordable housing across the country. The report concludes that the need for affordable housing and rental assistance across the country outpaced the ability of the federal, state, and local governments to meet the demand.

People with disabilities are disproportionately represented among renters with worst case needs. In fact, one in six renters with worst case needs included a non-elderly person with disabilities. The number of households with worst case needs that included a non-elderly person with disabilities increased more than 32% between 2009 and 2011 – from 990,000 to 1,310,000 households.

Funding for Affordable Housing

Funding for affordable housing is distributed through a variety of federal agencies, most notably the U.S. Department of Housing and Urban Development (HUD), U.S. Department of Veterans Affairs, and the U.S. Department of Agriculture. Although many federal agencies manage affordable housing programs, HUD administers the largest amount of federal funding for affordable housing.

Funding for affordable housing is complex and often fragmented. There are a multitude of programs, a myriad of agencies, and a long list of acronyms.

5 Ibid., page 2.
Creating housing opportunities – affordable, accessible, and integrated - for people with disabilities takes both patience and persistence. This resource manual is designed to provide an overview of the most pertinent programs that can help both individuals and organizations work toward creating new opportunities in their communities. It provides information on federal and state housing resources, as well as federal and state disability services. For people with disabilities to successfully live in affordable, accessible, and integrated housing, both housing and service resources must be identified and utilized.

Federal Housing Resources for Organizations

U.S. Department of Housing and Urban Development

The U.S. Department of Housing and Urban Development (HUD) was created as a cabinet-level agency in 1965. HUD’s mission is to create strong, sustainable, inclusive communities and quality affordable homes for all. With an annual budget of more than $40 billion, HUD administers a variety of programs through its core departments – Community Planning and Development (CPD), Office of Housing, which oversees the Federal Housing Administration (FHA), Public and Indian Housing (PIH), Fair Housing and Equal Opportunity (FHEO), Policy Development and Research (PDR), and Office of Sustainable Communities.

Primary HUD programs that impact affordable housing and people with disabilities include Community Development Block Grants (CDBG), HOME Investment Partnerships Program (HOME), Emergency Solutions Grant Program (ESG); Section 811; and Public Housing. Each of these programs is discussed below.

HUD CPD distributes funds directly to designated municipalities, including state and local governments, through the following formula grants: CDBG, HOME, ESG, and Housing Opportunities for Persons with AIDS (HOPWA). Most large cities and highly populated counties receive one or more formula grants.

This distinction is important because it can determine the availability of resources to you and your organizations. The localized Community Resource Guide that accompanies this manual will help you to determine which geographic areas receive formula grants. In addition, the Community Resource Guides provide you with contact information for accessing a variety of resources.

---

6 HUD’s discretionary budget authority for FY2012 was $43.4 billion. For a detailed breakdown of HUD’s budget (with a comparison of FY2011-2013), visit http://portal.hud.gov/hudportal/HUD?src=/fy2013budget
Community Development Block Grant Program (CDBG)

Authorized in 1975, CDBG is a formula-based federal grant to states and localities for housing and community development activities that benefit low- and moderate-income households. Eligible activities include:

- Housing rehabilitation loans and grants
- New construction for housing
- Purchasing of land and buildings
- Construction of public facilities
- Construction of neighborhood centers
- Accessibility modifications
- Public services

CDBG funds are distributed by HUD to eligible entitlement communities. A full list of entitlement communities in Texas can be found here:


The Texas Department of Agriculture also administers CDBG funds to communities in Texas that are not entitlement communities. Information on eligibility and the application process can be found online:

http://www.texasagriculture.gov/GrantsServices/RuralEconomicDevelopment/RuralCommunityDevelopmentBlockGrantCDBG.aspx

HOME Investment Partnerships Program (HOME)

Authorized in 1990, HOME is a formula grant to states and local jurisdictions for affordable housing activities that benefit low- and very low-income households. Eligible activities include:

- Rental housing production
- Rehabilitation loans and grants
- First-time homebuyer assistance
- Rehabilitation loans for homeowners
- Tenant-Based Rental Assistance

HOME funds are distributed by HUD to participating jurisdictions. A full list of participating jurisdictions in Texas can be found here:


As a Participating Jurisdiction (PJ), TDHCA also receives HOME funds from the federal government and administers a variety of housing-related activities, including homebuyer assistance, homeowner rehabilitation, housing development, and Tenant Based Rental Assistance (TBRA).
For further information on TDHCA’s HOME program, including eligibility and application process, contact the HOME Program Division at

http://www.tdhca.state.tx.us/home-division/index.htm

**Emergency Solutions Block Grant (ESG)**

Authorized in 1987, ESG is a formula grant to states and localities for emergency shelter, supportive services, and other assistance for the homeless. Eligible activities include:

- Renovation, major rehabilitation, or conversion of buildings for emergency shelter
- Essential services for the homeless (within certain limits)
- Homeless prevention (within certain limits)
- Operating costs (e.g., maintenance, insurance, utilities, rent, etc.)

ESG funds are distributed to urban cities and counties throughout Texas. To learn more, go to:


TDHCA also administers the Emergency Solutions Grant (ESG). Each year, TDHCA issues a Notice of Funding Availability (NOFA) for ESG funds. Eligible applicants include units of general purpose local governments and private nonprofit organizations with a 501(c)(3) tax-exempt status apply to TDHCA through a competitive process. Contact the TDHCA ESG Division at:

http://www.tdhca.state.tx.us/community-affairs/esgp/

**Housing Opportunities for Persons with AIDS Program (HOPWA)**

Authorized in 1990, HUD operates the HOPWA program which includes a federal block grant to certain states and larger metropolitan areas. The formula grant is based on the documented incidence of AIDS in those areas. The program is designed to meet the housing needs of low-income people with AIDS and related diseases. Eligible activities include:

- Housing information and service coordination
- Acquisition, rehabilitation, leasing of property
- Project-based or tenant-based rental assistance
- Homeless prevention activities
- Supportive services
- Housing operating costs
HOPWA funds are distributed to communities throughout Texas. To learn more, go here:


The Department of State Health Services is administers the HOPWA grant at the state level. Contact the HOPWA program at:

http://www.dshs.state.tx.us/hivstd/hopwa/

**Section 811 Supportive Housing for People with Disabilities**

In response to the enormous need for affordable and accessible housing for people with disabilities, the U.S. Department of Housing and Urban Development (HUD) developed a special housing program called Section 811 Supportive Housing for People with Disabilities.

Traditionally, the Section 811 program has provided a dual subsidy to nonprofit sponsors to develop housing for people with disabilities. HUD provides a “capital advance” (non-amortizing, forgivable loan) to nonprofits for new construction or acquisition and rehabilitation of housing. The loan is forgivable after the length of the capital advance (40 years), provided that the nonprofit sponsor maintains the housing as affordable (at or below 50% of the median area income) and for the designated population (e.g., people with disabilities).

In addition to the capital advance, HUD provides an operating subsidy, which is known as a Project Rental Assistance Contract (PRAC). The PRAC ensures that none of the qualified residents pay more than 30% of his/her adjusted gross income toward rent. The PRAC is guaranteed for five years, but is renewable for the length of the capital advance.

In January 2010, Congress passed the Frank Melville Supportive Housing Investment Act, which modernizes and reforms the 20+ year old Section 811 program. The Frank Melville Act focuses on leveraging housing and services dollars to create integrated, affordable, and accessible housing for people with disabilities.

Most significantly, the Frank Melville Act creates a new development option – the Project Rental Assistance (PRA) option. This program transforms Section 811 funding to project rental assistance dollars that are leveraged with development funding from the State’s Housing Finance Agency, or other eligible housing entity, and funding for services from Medicaid and the U.S. Department of Health and Human Services.
In 2012, the only Section 811 funding available was through a Section 811 Project Rental Assistance Demonstration program. The traditional Section 811 Capital Advance program was unfunded.

In February 2013, HUD awarded 13 states more than $97 million in Section 811 PRA Demonstration funds. The State of Texas applied for and was awarded $12 million to create an addition 385 units of affordable, accessible, and integrated housing for very low-income people with disabilities. TDHCA plans to work with existing and pipeline multifamily developments to layer on Section 811 PRA funds, enabling very low-income people with disabilities from identified priority populations to live in affordable, accessible, and integrated housing.

Unlike the traditional Section 811 program, the PRA option targets people with disabilities who have lower incomes (30% MFI versus 50% MFI) and has more stringent integration standards. In any Section 811 PRA Demonstration-funded development, no more than 25% of the units can be set aside for people with disabilities.

TDHCA’s “integrated housing rule” (10 TAC, Chapter 1, Subchapter A, §1.11) actually promotes greater levels of integration than the federal Frank Melville Act. Codified under Title 10 of the Texas Administrative Code, TDHCA’s Integrated Housing Rule, implemented the following policy for all of its housing programs:

- Large housing developments (50 units or more) shall provide no more than 18 percent of the units of the development set-aside exclusively for people with disabilities. The units must be dispersed throughout the development.
- Small housing developments (less than 50 units) shall provide no more than 36 percent of the units of the development set-aside exclusively for people with disabilities. These units must be dispersed throughout the development.

**Homeless Assistance Programs**

Authorized by the McKinney-Vento Homeless Assistance Act, HUD administers a variety of homeless assistance programs. Communities are required to coordinate needs and programs through the development of a Continuum of Care (CoC) system. A Continuum of Care system is designed to address the critical problem of homelessness through a coordinated community-based process of identifying needs and building a system to address those needs.

There are 14 CoC agencies currently operating in the State of Texas. Maps showing the various CoC geographies, as well as the Continuum of Care lead agency community contacts, can be found online through HUD’s Homeless Resource Exchange:

http://www.hudhre.info/index.cfm?do=viewCocContacts&st=TX&cSort=#tl

Continuum of Care Homeless Assistance Programs are awarded annually.
U.S. Department of Agriculture

USDA’s mission is to provide leadership on food, agriculture, natural resources, rural development, nutrition, and related issues based on sound public policy, the best available science, and efficient management. With an annual budget of more than $150 billion, USDA operates a myriad of programs. One of its key activities is providing financing needed to help expand job opportunities and improve housing, utilities and infrastructure in rural America. USDA’s Rural Development is the lead agency ensuring that rural families have access to safe, well-built, affordable homes.

Rural Development offers both direct loans and guaranteed loans for single-family housing (through its Section 502 program) and multifamily housing (through its Section 515 Direct Loan program and Section 538 Guaranteed Loan Program). In 2012, the agency helped more than 145,000 moderate-income families purchase single-family homes under the single-family guaranteed loan program.

In addition, Rural Development administers Section 504, which is a home repair program for very low-income households. Rural Development helped more than 7,000 rural individuals or families repair their existing homes under the USDA home repair loan and grant program.

One of Rural Development’s largest programs is the Section 502 and 521 Rental Assistance Program. In 2012, USDA Rural Development helped more than 270,000 low- and very low-income families, to live in safe, USDA-financed multi-family housing thanks to rental assistance to bring their rents to an affordable level. The annual budget for the rental assistance program is more than $900 million.

For more information on Rural Development in Texas, contact the state office:

http://www.rurdev.usda.gov/Home.html

U.S. Department of Veterans Affairs (VA)

Formerly the Veterans Administration, the U.S. Department of Veterans Affairs (VA) became a cabinet-level department in 1989. The VA is responsible for a variety of programs and initiatives, including both management of the national cemetery system to management of the national VA hospital system. The VA is also tasked with veterans’ health, mental health, and the challenge of rising rates of homelessness among veterans.

The VA offers a variety of home loan guaranty programs for active duty service members, veterans, and National Guard and Reserve members. In addition, the VA offers grants to veterans with service-related disabilities to modify or adapt an existing home to accommodate the veteran’s disabilities.
The Houston Regional Loan Office provides assistance and information regarding VA Home Loans and Specially Adapted Housing Grants. Contact information:

Department of Veterans Affairs
VA Regional Loan Center
6900 Almeda Road
Houston, TX 77030-4200

Phone: 1-888-232-2571

http://www.vba.va.gov/ro/houston/lgy/home.html

In addition, the Texas Veterans Commission administers a variety of programs, including the Fund for Veterans Assistance, which can be used for housing assistance. Contact information is below:

http://www.tvc.state.tx.us/Home.aspx

**VASH Vouchers**

The Department of Housing and Urban Development – VA Supportive Housing (HUD-VASH) Program is a joint effort between HUD and VA to move Veterans and their families out of homelessness and into permanent housing. HUD provides housing assistance through its Housing Choice Voucher Program (Section 8) that allows homeless Veterans to rent privately owned housing. VA offers eligible homeless Veterans clinical and supportive services through its health care system across the 50 states, the District of Columbia, Puerto Rico and Guam.

Since 2008, HUD has awarded more than 37,000 vouchers to local Public Housing Authorities (PHAs) through the VASH program. The PHAs administer the vouchers, and the VA provides dedicated case managers to assist the veterans with securing stable, permanent housing and appropriate support services.

**State Housing Resources for Organizations**

**Texas Department of Housing and Community Affairs (TDHCA)**

The Texas Department of Housing and Community Affairs (TDHCA) is the state agency responsible for promoting and preserving home ownership, financing the development and ensuring the long-term stability of affordable rental housing, supporting community and energy assistance programs, and colonia housing activities.
In 2012, TDHCA administered more than $695 million in state and federal funds for housing and community services. Approximately 98% of TDHCA’s total committed funding in FY2012 came from federal sources, including the following:

- Community Services Block Program (HHS)
- Emergency Solutions Grant Program (HUD)
- HOME Investment Partnerships Program (HUD)
- Housing Trust Fund Program (Texas General Revenue)
- Low Income Home Energy Assistance Program (HHS)
- Low Income Housing Tax Credit Program (Department of Treasury)
- Multifamily Bond Program (Department of Treasury)
- Single Family Bond Program (Department of Treasury)
- Neighborhood Stabilization Program (HUD)
- Section 8 Housing Choice Voucher Program (HUD)
- Weatherization Assistance Program (DOE)

As the state’s Housing Finance Agency, TDHCA is experienced in administering multifamily programs including the Housing Tax Credit Program, Multifamily Bond Program, HOME Program, and Neighborhood Stabilization Program. Since 1990, TDHCA has funded 1,887 projects, with a total of 206,976 apartment units across the State.

As the State’s Housing Finance Agency, TDHCA develops the State’s Qualified Allocation Plan to establish the procedures and requirements relating to an allocation of Housing Tax Credits\(^7\), provide detailed reviews of applications for competitive funding, provide comprehensive financial underwriting, award applicants based on competitive scoring criteria, and provide monitoring and compliance for a diverse and extensive multifamily portfolio.

Through the Housing Tax Credit program alone, TDHCA awards more than $56 million each year to qualified projects throughout the State. Because TDHCA awards tax credits through its Regional Allocation Formula, typically one or two projects are awarded in each of TDHCA’s 13 regions across the State. TDHCA’s Housing Tax Credit program funds approximately 5,000 units of affordable housing in Texas each year.\(^8\) Typically, there are between 10,000 and 12,000 units in the TDHCA pipeline.

From the 2% of the funds that are not federal, TDHCA’s Housing Trust Fund (HTF) provides the Texas Bootstrap Loan Program and the Amy Young Barrier Removal Program. Both of these programs are discussed below.

\(^7\) The Governor approved Texas Qualified Allocation Plan can be found at: [http://www.tdhca.state.tx.us/multifamily/htc](http://www.tdhca.state.tx.us/multifamily/htc)

\(^8\) In 2011, TDHCA funded 50 projects with a total of 4,984 units through the tax credit program.
Texas State Affordable Housing Corporation (TSAHC)

In 1994, the Texas State Legislature created the Texas State Affordable Housing Corporation (TSAHC) as a self-sustaining nonprofit entity. TSAHC’s mission is to serve the housing need of low-, very low-, and extremely low-income Texans (and other underserved populations) who do not have the same housing opportunities through traditional financial channels.

TSAHC issues mortgage revenue bonds and other private activity bonds to finance the creation of affordable housing. Since its inception, TSAHC has utilized $880 million in single-family bonding authority and $169 million in multifamily bonding authority.

TSAHC funds homeownership by issuing Single Family Mortgage Revenue Bonds. TSAHC offers homeownership through three unique programs:

(1) The Professional Educators Home Loan Program (serving Texas teachers, teacher’s aides, school librarians, school nurses and school counselors);
(2) The Homes for Texas Heroes Home Loan Program (serving Texas peace officers, fire fighters, EMS personnel and correctional officers); and
(3) The Home Sweet Texas Loan Program (serving Texas families at or below 80% of the Area Median Family Income (AMFI).

Additional TSAHC programs include Direct Lending, Foreclosure Prevention, Asset Oversight and Compliance, and the Affordable Communities of Texas Program.

TSAHC’s Direct Lending Program offers permanent financing for multifamily rental developments, construction line of credit for single-family homes, and revolving line of credit for acquisition/rehabilitation of single-family homes. TSAHC’s Direct Lending Program has provided more than $13 million in loans to create nearly 2,000 affordable housing units.

TSAHC’s Affordable Communities of Texas program is a land bank and land trust program to help stabilize communities experiencing a high rate of foreclosure. TSAHC works with local partners (nonprofits and local governmental entities) to acquire, rehabilitate, and ultimately sell or rent the properties to qualified low-income families. Through this initiative, TSAHC has acquired nearly 500 properties across the state, with a value of nearly $10 million.

Contact information for TSAHC:

http://www.txhomeprograms.org/program/programdetail.php?id=241
National Housing Trust Fund

The National Housing Trust Fund (NHTF) is a new, dedicated fund that will provide grants to states to build, preserve, and rehabilitate housing for people with the lowest incomes. The NHTF was established by the Housing and Economic Recovery Act of 2008 (P.L. 110-289). Although the program has been authorized, it is currently unfunded due to federal budget constraints. However, many local jurisdictions administer local Housing Trust Funds. Your local housing and community development department would be the best resource for additional information.

Federal Home Loan Bank System

The Federal Home Loan Bank system consists of regional banks, each of which is comprised of member institutions (including commercial banks, savings institutions, credit unions, and insurance companies). For the State of Texas, the regional bank is the Federal Home Loan Bank of Dallas.

FHLB administers a variety of programs to foster affordable housing development and community economic development. The most competitive program is the Affordable Housing Program (AHP). Since 1990, FHLB Dallas has provided more than $213 million to assist 40,000 low-income households in the region.

The AHP provides grants and subsidized loans to assist member institutions in helping to meet their community’s local housing needs. FHLB Dallas provides funding to member institutions to develop affordable housing. Local nonprofits act as the project sponsor. They partner with a membership organization to submit an AHP application.

AHP funds are intended to assist members in financing the purchase, construction, and/or rehabilitation of single-family, rental, transitional, and single-room housing in their community. Funds must be used to benefit households with incomes at or below 80 percent of the median income for the area.

AHP funds may also be used to:

- pay closing costs or down payments;
- buy down principal amounts or interest rates;
- refinance an existing loan (provided that the equity proceeds are used for the development of AHP-eligible housing); or
- assist with rehabilitation or construction costs

In 2012, FHLB Dallas provided $8.3 million in grants to 31 organizations across the region. The grants will help to create (new construction or rehabilitation) more than 1,200 units of affordable housing.
Applications are made available annually and are due on April 1\textsuperscript{st} of each year. For more information on the AHP Program, contact FHLB of Dallas:

https://www.fhlb.com/

**Housing Resources for Individuals**

This section is designed to provide resources that are directly accessible to an individual, as opposed to an organization.

Approximately 37\% of Texas households are renters. That means there are more than 3.2 million renter households in Texas. Federal rental assistance programs, which are administered by a variety of agencies and organizations, enable more than 277,000 low-income Texas households to rent housing at an affordable cost. Approximately 24\% of these renter households are headed by people with disabilities.\textsuperscript{9}

A detailed breakdown of rental assistance programs is provided below.

**Federal Rental Assistance in Texas\textsuperscript{10}**

<table>
<thead>
<tr>
<th>Program</th>
<th>Number of Units</th>
<th>Extremely Low Income</th>
<th>Elderly</th>
<th>Disabled</th>
<th>Families with Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing Choice Vouchers</td>
<td>146,507</td>
<td>68%</td>
<td>17%</td>
<td>26%</td>
<td>48%</td>
</tr>
<tr>
<td>Public Housing</td>
<td>56,040</td>
<td>59%</td>
<td>28%</td>
<td>22%</td>
<td>42%</td>
</tr>
<tr>
<td>Section 8 Project-Based Rental Assistance</td>
<td>51,413</td>
<td>72%</td>
<td>35%</td>
<td>18%</td>
<td>39%</td>
</tr>
<tr>
<td>Section 202/811</td>
<td>7,168</td>
<td>74%</td>
<td>86%</td>
<td>14%</td>
<td>0%</td>
</tr>
<tr>
<td>Other HUD</td>
<td>1,687</td>
<td>95%</td>
<td>3%</td>
<td>95%</td>
<td>1%</td>
</tr>
<tr>
<td>USDA Section 521</td>
<td>14,200</td>
<td>N/A</td>
<td>56%</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>277,015</strong></td>
<td><strong>67%</strong></td>
<td><strong>24%</strong></td>
<td><strong>24%</strong></td>
<td><strong>43%</strong></td>
</tr>
</tbody>
</table>

**Public Housing Authority (PHA)**

Public Housing Authorities (PHAs) are in an important resource for affordable housing within the local community. There are more than 400 PHAs in the State of Texas. Some PHAs own and manage housing units, while others


\textsuperscript{10} Ibid.
administer Section 8 Housing Choice Vouchers (discussed below). Many PHAs do both.

Public housing comes in all sizes and types, from scattered single-family houses to high-rise apartments. PHAs own and manage more than 56,000 affordable housing units in Texas. PHAs are located in rural areas, as well as urban areas. In fact, approximately 20% of public housing units are located outside of metropolitan areas.

Approximately 22% of households living in public housing are headed by a non-elderly (under age 62) person with disabilities. Tenants must be low-income, and typically pay 30 percent of their income for rent. Like Section 8 vouchers, availability is limited and applicants may be on waiting lists for years.

To find more about eligibility and availability, contact your local PHA. There are more than 400 PHAs in the State of Texas. You can find your PHA (and the relevant contact information) by visiting the following website:

http://www.hud.gov/offices/pih/pha/contacts/states/tx.cfm

Housing Choice Vouchers

The Housing Choice Voucher program is the federal government’s major program for assisting very low-income families, the elderly, and people with disabilities to afford decent, safe, and sanitary housing in the private market. Participants choose their own housing, which can range from single-family homes to townhouses to apartments.

The Housing Choice Voucher program was originally created in 1975. It was initially called the Section 8 program, which refers to the part of the federal legislation that created the program. Oftentimes, “Housing Choice Voucher” and “Section 8 voucher” are used interchangeably.

Housing Choice Vouchers are administered locally by Public Housing Authorities (PHAs). The PHAs receive federal funds from the U.S. Department of HUD to administer the voucher program.

A household that is issued a housing voucher is responsible for finding a suitable housing unit of the family’s choice where the owner agrees to rent under the program. Rental units must meet minimum standards of health and safety, as determined by the PHA.

The household pays 30% of its income toward rent and the PHA (through the HUD subsidy) pays the difference between the Fair Market Rent and the tenant's rental contribution. HUD determines the Fair Market Rent each year and is based on local market conditions.
Under certain circumstances, if authorized by the PHA, a family may use its voucher to purchase a modest home.

More than 2.1 million families rely on the Housing Choice Voucher program across the country. In the State of Texas, 140,642 families used the Housing Choice Voucher in 2010 (most current data available). Twenty-six percent of voucher holders were people with disabilities.

A complete listing of Housing Choice Vouchers available in Texas, broken down by the local agency administering the program is available at:

http://www.cbpp.org/cms/index.cfm?fa=view&id=3586

To find more about eligibility and availability, contact your local Public Housing Authority. There are more than 400 PHAs in the State of Texas. You can find your PHA (and the relevant contact information) by visiting the following website:

http://www.hud.gov/offices/pih/pha/contacts/states/tx.cfm

As a Public Housing Authority (PHA), TDHCA administers the Section 8 Housing Choice Voucher Program directly to individuals across the State of Texas in areas that may not have their own PHA. Currently, TDHCA administers approximately 850 vouchers in 22 counties across the state. TDHCA’s program serves households in small cities and rural areas that are not served by other housing voucher programs. Eligible households earn at or below 50% MFI. TDHCA prioritizes 75% of its vouchers for households earning at or below 30% MFI.

For additional information on eligibility and availability, contact TDHCA’s Section 8 Division at (800) 237-6500.

TDHCA Project Access

The Project Access Program utilizes Section 8 Housing Choice Vouchers administered by TDHCA to assist low-income persons with disabilities in transitioning from institutions into the community by providing access to affordable housing.

The program serves those transitioning from nursing facilities, ICF/IDs, and state psychiatric hospitals. When the program began in 2002, Project Access included 35 vouchers. By 2013, Project Access expanded to 140 vouchers. TDHCA

11 Ibid.
works closely with the Department of Aging and Disability Services and the Department of State Health Services to coordinate this program.

For additional information on Project Access, contact the TDHCA Section 8 Division, at:

http://www.tdhca.state.tx.us/section-8/contacts.htm

TDHCA Tenant-Based Rental Assistance (TBRA)

TDHCA’s Tenant Based Rental Assistance (TBRA) program provides funding to local governments, PHAs, and nonprofit organizations for rental subsidies, security deposits (up to two months’ rent), and utility deposits for low-income renters. TBRA funding is available for up to 24 months while the participating household engages in a self-sufficiency program. If available, additional funds may be set aside to provide assistance beyond 24 months for individuals meeting certain program requirements.

TDHCA’s TBRA is funded through the federal HOME program. TDHCA HOME funds are available to non-Participating Jurisdictions, except for the set-aside for people with disabilities. TDHCA has five percent of its HOME funds (including TBRA funds) set aside to serve people with disabilities. The set-aside for people with disabilities can be utilized throughout the State (Participating Jurisdictions and non-Participating Jurisdictions).

For additional information on Tenant Based Rental Assistance (TBRA), contact TDHCA’s HOME Program Division:

http://www.tdhca.state.tx.us/home-division/index.htm

Additional Voucher Programs

HUD-VASH

The HUD-VASH Program is a joint effort between HUD and VA to move veterans and their families out of homelessness and into permanent housing. HUD provides housing assistance through its Housing Choice Voucher Program (Section 8) that allows homeless Veterans to rent privately owned housing. VA offers eligible homeless Veterans clinical and supportive services through its health care system across the 50 states, the District of Columbia, Puerto Rico and Guam.

13 Participating Jurisdictions (PJs) are state or local governments that have been designated by HUD to administer federal HOME Investment Partnership (HOME) funds. Most large cities and urban counties are PJs. HUD has jurisdiction over all PJs. TDHCA provides funding to non-PJs, except in the case of specially designated set asides, in which funding can go to both PJs and non-PJs.
Since 2008, HUD has awarded more than 37,000 vouchers to local Public Housing Authorities through the VASH program. The PHAs administer the vouchers, and the VA provides dedicated case managers to assist the veterans with securing stable, permanent housing and appropriate support services. There are nearly 3,500 VASH vouchers in the State of Texas.

**Mainstream Vouchers**

From 1999 to 2002, nonprofit organizations and PHAs were eligible to apply for Section 811 Mainstream Vouchers. These vouchers were targeted specifically to people with disabilities and designed to enable them to access affordable, accessible, and integrated housing in the community.

The funds for this program were carved out of the traditional Section 811 Capital Advance program. The Mainstream Vouchers were funded in five-year increments and were renewable. Currently, nonprofits and PHAs continue to administer the Mainstream Voucher program. PHAs alone administer 589 vouchers in the State of Texas.

**Non-Elderly Disabled Vouchers (NED)**

This special purpose voucher program was created in 1997 in partnership with HUD and the HHS Centers for Medicare and Medicaid Services (CMS). Category 1 Non-Elderly Disabled (NED) vouchers are specifically for non-elderly people with disabilities to access affordable housing. Category 2 NED vouchers are specifically for non-elderly people with disabilities living in nursing facilities or other health care institutions to transition into the community.

Only Public Housing Agencies (PHAs) are eligible to apply for the NED vouchers. In order to access the NED Category 2 vouchers, PHAs need to partner with the state Medicaid agency or be part of the Money Follows the Person (MFP) Demonstration Program.

There are currently more than 1,500 NED Category 1 and 2 vouchers administered by PHAs in the State of Texas. For more information on NED vouchers, see the HUD website:


**Family Unification Vouchers (FUP)**

The Family Unification Program (FUP) provides targeted vouchers to either (1) families who are at risk of having their children placed in out-of-home care because of lack of decent, safe, and sanitary housing; or (2) youth at least 18 years old and not more than 21 years old who left foster care at age 16 or older and who lack adequate housing. FUP vouchers for families have no time limit; but FUP vouchers for youth are limited to 18 months of rental assistance. Currently, only
Austin Housing Authority and Tarrant County Housing Authority administer FUP vouchers.

**Voucher Summary**

Over the past 15 years, HUD has awarded PHAs more than 70,000 Housing Choice Vouchers that are targeted specifically to people with disabilities. You can also search the Technical Assistance Collaborative (TAC) comprehensive database of housing vouchers that are specifically targeted to people with disabilities:

[http://www.tacinc.org/knowledge-resources/vouchers-database/?state=TX](http://www.tacinc.org/knowledge-resources/vouchers-database/?state=TX)

The database shows the 29 PHAs in the State of Texas that administer specific vouchers targeted to people with disabilities.

In addition, TAC has developed a comprehensive manual of the Housing Choice Voucher/Section 8 program. You can download the manual – “Section 8 Made Simple” from TAC’s website:

[http://www.tacinc.org/media/13093/Section%208%20Made%20Simple.pdf](http://www.tacinc.org/media/13093/Section%208%20Made%20Simple.pdf)

**Section 8 Project-Based Rental Assistance**

Section 8 Project-Based Rental Assistance (PBRA) enables more than 2 million Americans to rent modest units at an affordable price. In Texas, there are more than 50,000 Section 8 PBRA units. Seniors or people with disabilities make up more than two-thirds of the households utilizing Section 8 PBRA.14

Section 8 Project-Based Rental Assistance is different from the Section 8 Housing Choice Voucher. The former is attached to designated rental units, while the latter is “portable” and travels with the voucher holder.

Private owners – both for-profit and nonprofit entities – own and manage the Section 8 PBRA properties. Residents pay no more than 30% of their adjusted gross income toward rent, and multi-year federal rental assistance contracts make up the difference between the tenants’ contribution and the actual cost of owning and operating the project.

To find an inventory of Section 8 Project Based Units in your area, you can search online:


---

Accessibility Modifications

Structural changes needed to make a housing unit accessible may be paid for by the landlord, provided they are reasonable and can be used by future tenants. Landlords, however, are not required to make all modifications.

Local organizations and municipal governments often offer accessibility modifications at reduced rates or no cost. For example, Austin’s Housing Repair Coalition is a collaboration of 12 local organizations that provide critical life safety housing repair. By coordinating and leveraging diverse funding sources and volunteer resources, the AHRC provides both housing repair and accessibility modification to qualified low-income homeowners.

TDHCA’s Amy Young Barrier Removal and Rehabilitation (Amy Young) Program supports accessibility modifications in rental and owner-occupied housing and helps to eliminate hazardous conditions in owner-occupied homes. The program helps finance home modifications that may include the addition of handrails and ramps, widening of doors, adjusting countertops and cabinets to appropriate heights, installation of buzzing or flashing devices for persons with visual or hearing impairments, and installation of accessible showers, toilets, and sinks.

The program provides one-time grants for up to $20,000 per home with at least 75 percent of each home’s total grant to be used for barrier removal. Up to 25 percent of each home’s total grant may be used for health or safety hazard removal, unless otherwise approved by TDHCA. Funds target qualifying individuals who earn no more than 80 percent of the area median family income (MFI).

Nonprofit organizations and local governments apply to TDHCA for Amy Young Program funds. Qualifying organizations process intake applications, verify eligibility, and oversee construction of accessibility modifications. Organizations that currently administer Amy Young Program funds at the local level are found here:

http://www.tdhca.state.tx.us/htf/single-family/amy-young.htm

For questions and information on how to become an Amy Young Program Administrator, please these the Housing Trust Fund Division at TDHCA at: the website above.

Homeownership

TDHCA administers a variety of programs to facilitate homeownership for low- and moderate-income Texans.
My First Texas Home channels low interest rate mortgage money through participating Texas lending institutions to eligible families who are purchasing their first home, or to those who have not owned a home in the past three years. Although income limits may vary with each bond issue, the program is designed to serve very low- to moderate-income (30 to 115 percent of AMFI) Texas families. The program offers more competitive fixed interest and annual percentage rates while providing down payment and closing cost assistance of 5 percent of the mortgage loan.

For further information, contact TDHCA’s Homeownership Division:

http://www.tdhca.state.tx.us/homeownership/fthb/index.htm

**Texas Bootstrap Loan Program**

Texas Bootstrap Loan Program is a self-help construction program to provide very low-income families an opportunity to help themselves through the form of “sweat equity.” Participants under this program are required to provide at least 65 percent of the labor necessary to build or rehabilitate the home. Nonprofit organizations can combine these funds with other sources; however, all combined loans cannot exceed $90,000 per unit. The program is administered through TDHCA’s Colonia Self-help Centers and State Certified Owner-Builder Housing Programs across the state.

For further information, contact TDHCA’s Office of Colonia Initiatives:

http://www.tdhca.state.tx.us/oci/bootstrap.jsp

**HOMEowner Rehabilitation Assistance (HRA) Program**

HOMEowner Rehabilitation Assistance (HRA) Program supports rehabilitation or reconstruction of substandard stick built homes or replacement of manufactured housing units owned and occupied by qualified homeowners. The HRA Program funds Units of General Local Governments, Public Housing Authorities, and nonprofits to provide the rehabilitation services. This program is funded through TDHCA’s federally-funded Texas HOME Program.

**HOMEbuyer Assistance (HBA) Program**

HOMEbuyer Assistance (HBA) Program provides funding to eligible entities which offer down payment and closing cost assistance for homebuyers of single family housing units. This program may include funding for rehabilitation for accessibility modifications. This program is funded through TDHCA’s federally-funded Texas HOME Program.

For further information on either of these programs, contact TDHCA’s HOME Division:

http://www.tdhca.state.tx.us/home-division/index.htm
TDHCA HOME Tenant-Based Rental Assistance

TDHCA’s HOME Tenant-Based Rental Assistance (TBRA) program provides funding to local governments, PHAs, and nonprofit organizations for rental subsidies, security deposits (up to two months’ rent), and utility deposits for low-income renters. TBRA funding is available for up to 24 months while the participating household engages in a self-sufficiency program. If available, additional funds may be set aside to provide assistance beyond 24 months for individuals meeting certain program requirements.

TDHCA’s TBRA is funded through the federal HOME program. TDHCA HOME funds are available to non-Participating Jurisdictions\(^\text{15}\), except for the set-aside for people with disabilities. TDHCA has set aside five percent of its HOME funds (including TBRA funds) to serve people with disabilities. The set-aside for people with disabilities can be utilized throughout the state (participating and non-participating jurisdictions).

For additional information on TBRA, contact TDHCA’s HOME Program Division at:

http://www.tdhca.state.tx.us/home-division/index.htm

Vacancy Clearinghouse

TDHCA maintains a Vacancy Clearinghouse, which is a simple online tool to enable individuals and organizations to access affordable housing options in their area. To use the online database, simply search by city, county, or zip code:

http://hrc-ic.tdhca.state.tx.us/hrc/VacancyClearinghouseSearch.m

The list only includes properties funded by TDHCA, so it is not a comprehensive list of affordable properties in the area. The list includes a breakdown of unit type (by accessible and non-accessible), as well as contact information for each property. It is important to note that these properties are required to accept Section 8/Housing Choice Vouchers.

Important Opportunities for Input – Making a Difference at the Local Level

Fortunately, there are many opportunities for individuals to have their voices heard at the local level. First, it is important to become knowledgeable regarding existing resources in your community, existing priorities, and the existing barriers

\(^{15}\) Participating Jurisdictions (PJs) are state or local governments that have been designated by HUD to administer federal HOME Investment Partnership (HOME) funds. Most large cities and highly populated counties are PJs. HUD has jurisdiction over all PJs. TDHCA provides funding to non-PJs, except in the case of specially designated set asides, in which funding can go to both PJs and non-PJs.
to affordable, accessible, and integrated housing. What is the current stock of affordable housing? What are the needs of the local disability community? What is the best strategy to meet those needs using existing resources? These are all questions that can be addressed by getting informed, involved, and active.

**Consolidated Plan (ConPlan)**

The Consolidated Plan (ConPlan) is a planning document that states and local governments (Participating Jurisdictions) must prepare in order to receive federal funds for a variety of housing and community development activities. Specifically, the ConPlan controls federal resources for the Community Development Block Grant (CDBG) program, HOME program, Emergency Solutions Grant (ESG), and Housing Opportunities for Persons with AIDS (HOPWA). Although each of these programs was discussed in detail previously, it is important to note that the ConPlan is the guiding document (“master plan”) for affordable housing investment in local communities and states.

Federal law requires that HUD approve the community's ConPlan before the locality can receive federal funds. The ConPlan articulates:

1. The community's housing needs;
2. The strategies developed to meet those needs; and
3. The funding priorities for a five-year period

The ConPlan emphasizes the role of citizens and community groups in identifying local needs and recommending actions that local government should take to address those needs. Communities are required to seek public input and participation in the development of the ConPlan. In fact, HUD requires that each jurisdiction adopt a Citizen Participation Plan that spells out the process and opportunities for citizens to provide meaningful input in the preparation of the ConPlan.

Although the ConPlan is a five-year master plan, HUD also requires annual updates, known as Action Plans. The annual Action Plan describes the activities a jurisdiction will undertake to meet the priority needs of the community. The Action Plan describes the resources it expects to be available to meet the community's affordable housing needs. The Action Plan also requires public outreach and participation.

At the end of each fiscal year, Participating Jurisdictions are required to prepare a Consolidated Annual Performance and Evaluation Report (CAPER) to provide information to HUD and citizens about that year’s accomplishments. This information allows HUD, local officials, and the public to evaluate the jurisdiction's performance and determine whether the activities undertaken during the fiscal year helped to meet the community's five-year goals and to address priority needs identified in the Consolidated Plan and the Annual Action Plan.
The most current Consolidated Plans for communities in Texas can be downloaded from HUD’s website:


PHA Plan

In order to receive funding from HUD, Public Housing Agencies (PHAs) are required to develop five-year housing plans. Like the ConPlan, the PHA Plan requires that the community have the opportunity to participate and provide input.

The PHA Plan is a plan that informs HUD, residents, and the public of the PHAs’ mission for serving the needs of low-income and very low-income families and the PHA’s strategy for addressing those needs. PHAs must submit 5-year plans for tenant-based rental assistance and public housing programs. Some PHAs are also required to submit annual plans to supplement the 5-year plans.

To find out more about your PHA’s planning process, and your opportunities for input regarding the needs of people with disabilities, contact your local PHA:

http://www.hud.gov/offices/pih/pha/contacts/states/tx.cfm

In addition, PHA Plans that are received, reviewed, and approved can be found on HUD’s website:


In addition to your community’s Consolidated Plan and the local PHA Plan, there are a number of opportunities for the public to give feedback regarding TDHCA’s programs and priorities specifically serving persons with disabilities:

Housing and Health Services Coordination Council (HHSCC)

The purpose of the Housing and Health Services Coordination Council (HHSCC) is to increase state efforts to expand service-enriched housing for low income people with disabilities of all ages, improve interagency understanding of housing and services, increase the number of staff in state housing and state health services agencies that are conversant in both housing and health care policies, and offer a continuum of home and community-based services that is affordable to the state and the target population.
Disability Advisory Workgroup (DAW)

TDHCA staff meets regularly with the Disability Advisory Workgroup (DAW), which includes disability housing advocates, housing and service providers, and other interested parties. The group advises the Department on policies and programs that affect persons with disabilities.

State Low-Income Housing Plan (SLIHP)

Every year, the Department creates the State Low-Income Housing Plan (SLIHP) that sets the funding priorities for the year for the Department’s programs. The plan has a public comment period that provides an opportunity to provide feedback to the Department on programs and policies.

The State of Texas’s State Low-Income Housing Plan can be found on TDHCA’s website:

http://www.tdhca.state.tx.us/housing-center/pubs-plans.htm#slihp

For additional information on these TDHCA collaborations and publications, contact the Housing Resource Center:

http://www.tdhca.state.tx.us/housing-center/staff.htm

Part 2: Introduction to Services for People with Disabilities

Medicaid

Medicaid was enacted as Title XVIII and Title XIX of the Social Security Act in 1965. Medicaid is a partnership, and jointly funded between the States and the Federal Government. States have flexibility in the design and implementation of Medicaid services, and participation in Medicaid is voluntary; all 50 states, Washington DC, and territories participate. Beneficiaries are low-income families and children, pregnant women, the elderly, people with disabilities, and in some States, other adults.

The federal role in Medicaid is to establish broad guidelines, minimum standards, and qualifications for the Medicaid program. The federal government provides the oversight of the State Medicaid plans and processes State plan amendments and waiver requests. The State’s role in Medicaid is to administer and name the Medicaid program; determine eligibility standards and the beneficiary enrollment process; determining the type, amount, duration, and scope of services; setting the rate of payment for services; and collecting and reporting program information to CMS.
States are mandated to provide coverage for some services that are referred to as “mandatory.” Other services may be provided at the State’s option and will receive Medicaid matching funds. These services are referred to as “optional.” Eligible beneficiaries are “entitled” to all mandatory and optional services the State covers under its regular Medicaid program (the State Plan). These mandatory services include primary and acute care; long-term care; medical supplies; speech, occupational, and physical therapy; prescription drugs; emergency medical services; in-home personal care; mental health and substance abuse services; and day activity services.

Home and Community Based Service (HCBS) Waivers are not an entitlement and have different financial eligibility requirements. Waiver services support a person in the community who would otherwise qualify to be in an institution. The cost of waiver services cannot exceed what the State would have spent in the absence of the waiver program.

The HCBS waivers also allow States to limit services to particular counties or regions of a State and to target services to certain groups; these strategies are not allowed under regular Medicaid programs. Texas maintains interest lists of people waiting for services. The Money Follows the Person and Promoting Independence initiatives allow an individual to bypass the interest list.

There are specific financial eligibility requirements to receive Medicaid services, including receiving payments under Supplement Security Income (SSI). In 2013, that income is $710 per month. For HCBS Waiver services, eligibility is for income of up to 300% of SSI rate, or $2,130 per month. Other financial eligibility rules apply.

**State of Texas Programs**

Many people with disabilities need services to successfully live in the community. The Texas Department of Aging and Disability Services (DADS) administers programs to provide community services for people with disabilities, based on functional and financial eligibility. Community services and supports are also provided through Medicaid, a jointly funded state-federal program administered through the Texas Health and Human Services Commission (HHSC) and CMS. Some Medicaid programs are entitlement programs, meaning that the number of individuals eligible for enrollment cannot be limited if they meet the eligibility criteria. All of these individuals must be served, and all services included in the Medicaid State Plan must be paid for by Medicaid. Much of the material for this section of the Housing and Disability Services Resource Guide is taken from the Texas Department of Aging and Disability Services (DADS) Reference Guide 2013. For a copy of this guide, go to this link:

[DADS Reference Guide](#)
Structure of Texas Health and Human Services

Health and human services are organized into five state agencies, each of which administers service programs for Texans. These agencies, and some of the services administered by the agencies, will be discussed below.

- Texas Health and Human Services Commission (HHSC)  
  http://www.hhsc.state.tx.us/

- Texas Department of Aging and Disability Services (DADS)  
  http://www.dads.state.tx.us/

- Texas Department of State Health Services (DSHS)  
  http://www.dshs.state.tx.us/

- Texas Department of Family and Protective Services (DFPS)  
  http://www.dfps.state.tx.us/

- Texas Department of Assistive and Rehabilitative Services (DARS)  
  http://www.dars.state.tx.us/

Texas Health and Human Services Commission (HHSC)

HHSC oversees the health and human services system as well as direct administration of Medicaid, the Children’s Health Insurance Program (CHIP), food stamps, Temporary Assistance for Needy Families, Medicaid funded Behavioral Health Services, and other assistance programs. Medicaid is explained in detail in the ninth edition of Texas Medicaid and CHIP in Perspective, also known as the “Pink Book” (2013). This book can be downloaded by chapter or in its entirety or by chapter. This document provides an in-depth discussion of Medicaid programs and services. It can be downloaded at this website:

http://www.hhsc.state.tx.us/medicaid/reports/PB9/TOC.shtml

2-1-1 Texas

2-1-1 Texas, a program of the HHSC, is committed to helping Texas citizens connect with the services they need. Accurate, well-organized and easy-to-find information from over 60,000 state and local health and human services programs
is available to individuals by phone by calling 211 from any location in Texas, or by going to

www.211texas.org/211/.

Medicaid Funded Behavioral Health Programs

Mental health services, including counseling, physician, psychologist, or licensed psychological associate services, and substance used disorder treatment services are provided through HHSC. These services are funded by Medicaid and individuals must meet certain eligibility requirements.

Texas Department of Aging and Disability Services (DADS)

DADS provides long-term services and supports to people in Texas with physical disabilities, intellectual and developmental disabilities and related conditions, and people age 60 and older. DADS operates Medicaid and non-Medicaid services, Medicaid waiver programs, and other programs through regional staff in offices around the state and through contracts with local Area Agencies on aging (AAAs), Aging and Disability Resource Centers (ADRCs), and Local authorities (LAs). A directory of these local offices, by county, is found here:

http://www.dads.state.tx.us/contact/DADSServicesByCounty.html

Promoting Independence: Outreach, Awareness and Relocation

The Texas Promoting Independence Plan was developed in response to the U.S. Supreme Court ruling in Olmstead v. L.C. and two Executive Orders, GWB99-2 and RP13. Two activities under the larger Promoting Independence Plan include community outreach and awareness, and relocation services. Community outreach and awareness is a systematic program of public information developed to target groups that are most likely to be involved in decisions regarding long-term services and supports. Relocation services involve assessment and case management to assist nursing facilities residents who choose to relocate to community-based services and supports. It includes funding for Transition to Living in the Community (TLC) services to cover establishing and moving to a community residence. Promoting Independence represents an initiative of the State that promotes the integration of people with disabilities in the community with appropriate services and supports.

Residents of nursing facilities who relocate to the most integrated community setting of their choice require a thorough assessment, intensive case management, housing assistance and funds to set up a community residence. Intensive case management may be needed to help build and implement the service and support systems so they can return to the community. With limited income and resources, individuals in facilities who receive Medicaid may require help, such as security deposits, to set up community households, and assistance to purchase household goods and groceries. Relocation assistance and relocation funding, in
combination or separately, allow more individuals to return to the community. Community outreach activities raise awareness and improve processes for informing decision makers about long-term services and support options.

**Local Authorities (LAs)**

The LAs determine eligibility and assist individuals with intellectual or developmental disabilities to access appropriate services and supports. The Local Authorities determine eligibility and assist individuals with intellectual or developmental disabilities to access appropriate services and supports, and provide a wide array of services to eligible individuals. Medicaid waivers are often administered through the LAs. There are 39 LAs across the state, often combined with Local Mental Health Authorities, which are discussed below.

A directory of the LAs can be found at this link:

http://www.dads.state.tx.us/contact/mra.cfm

**Area Agencies on Aging (AAAs)**

The AAAs assist individuals who are older, their family members or other caregivers by providing information and assistance in accessing service and supports. AAAs provide information, counseling, and assistance to Medicare beneficiaries of any age and/or representatives regarding Medicare, Medicaid, public benefits, entitlements, and other types of health insurance.

For a directory of all of the Texas AAAs, go to this link:

http://www.dads.state.tx.us/contact/aaa.cfm

**Aging and Disability Resource Centers (ADRCs)**

The ADRCs assist in streamlining access to DADS programs and services by promoting better coordination and integration in aging and disability service systems. The ADRCs provide information about and help with state and federal benefits. They assist individuals, family members, professionals, and others learn about local programs and services, and receive information tailored to their needs. There are currently 14 ADRCs across the state.

The ADRC directory can be found at:

http://www.dads.state.tx.us/services/adrc/locations.html

**Texas Department of State Health Services (DSHS)**

DSHS promotes optimal health for people providing effective health, mental health, and substance abuse services. DSHS also administers several programs for people with serious and persistent mental illness.
Community Collaboratives
Senate Bill 58, passed in the 83rd Texas Legislative Session, authorized DSHS to award grants to local governmental entities, nonprofit community organizations, and faith-based community organizations to establish or expand community collaboratives that bring the public and private sections together to provide services to persons experiencing homelessness and mental illness. The DSHS may award a maximum of five grants, which must be made in the most populous municipalities in the state that are located in counties with a population of more than one million. At the time this guide was finalized (July, 2013), DSHS was finalizing the Request for Proposals (RFP).

Communities may search the DSHS website (http://www.dshs.state.tx.us/) for “community collaboratives”, or contact the Texas Center for Disability Studies (penny.seay@austin.utexas.edu) to be notified of this RFP.

Local Mental Health Authorities (LMHAs)
The Local Mental Health Authorities (LMHAs), contracted through DSHS, plan and develop resources for mental health services in the state. The LMHAs determine eligibility of individuals with serious and persistent mental illness and provide individualized services. Crisis intervention as well as ongoing supports and services may be provided through the LMHA.

Supportive Housing can be provided to anyone in a service package. The LMHAs provide both support services and rental assistance when funds are available to do so. Each LMHA has a different housing program unique to their center. DSHS provides technical assistance to LMHAs to ensure they provide comprehensive, evidence-based supportive housing services to the individuals they serve. This legislative session allowed DSHS to gain new funding for rental and utility assistance and that is being provided to certain LMHAs to develop new programs or enhance already existing supportive housing programs. Below are descriptions of Mental Health Substance Abuse (MHSA), the Local Mental Health Authorities (LMHAs), and Texas Resilience and Recovery (TRR).

DSHS has delegated a number of responsibilities to LMHAs. Some of these responsibilities include:
- Policy development
- Coordination
- Resource Allocation
- Resource Development
- Oversight of local services
- Service authorization

The LMHA directory can be found here:

http://www.dshs.state.tx.us/mhsa/lmha-list/
Mental Health and Substance Abuse
This division provides funding, program development, oversight, and training for programs in the areas of substance abuse treatment, intervention, prevention (alcohol, tobacco, and other drugs), and mental health. The division sets the statewide treatment standards for department-funded mental health and substance abuse services as well as for public and private psychiatric hospitals and mental health crisis facilities operated by LMHAs.

Texas Resilience and Recovery (TRR, formerly RDM)
From 2010 to 2012 a group of community stakeholders, providers and advocates reviewed RDM as it had been implemented. Adjustments were made to address the changing needs of Texas and updates to evidence-based practices nationally. It was revised as TRR.

Resilience and Recovery Outcomes:
- Functioning- A percent of all adults served during the fiscal year have acceptable or improving functioning.
- Employment – a percent of all adults who are employed
- Housing - A percent of all adults served during the fiscal year have acceptable or improving housing.
- Co-Occurring Substance Use - a percent of all adults served during the fiscal year have acceptable or improving co-occurring substance use.

Service Packages are provided based on a determination of the Level of Care required by the individual.

Level of Care 1
Description: This Level of Care is designed to meet the needs of persons with very little risk of harm, support and level of functioning, and does not require high levels of care. This includes persons with Major depressive disorder, bipolar disorder, or schizophrenia (and related conditions). This level of care focuses on pharmacological management and case management. Medication training, support services, and engagement activities are also included.

Level of Care 2
Description: This level of care is specifically designed to meet the needs of persons with Major Depressive Disorder. These persons have low risk of harm, support and level of functioning and do not require high levels of care.

The central service of this level of care is Cognitive Behavioral Therapy. Individuals also have access to pharmacological management, case management, medication training and support services.
**Level of Care 3**

Description: This level of care targets persons with moderate to severe level of need, requiring more intensive rehabilitation to increase community tenure, establish support networks, and develop coping strategies to function effectively in the community.

Services provided include Team-based intensive psycho social services, pharmacological management, medication training and support services, individual psychosocial rehabilitation, supported employment services, and supportive housing services. A special emphasis is placed on Supportive Employment and Supportive Housing. **Supported employment** provides individualized services to assist people in choosing, getting and keeping employment. **Supported housing** provides individualized services to assist people in choosing, getting and keeping housing. Support services such as accessing transportation, meal preparation, and budgeting may also be provided through this program.

**Level of Care 4**

Description: This level of care is designed to meet the needs of persons with severe and persistent mental illness and multiple hospitalizations. This level of care provides **Assertive Community Treatment (ACT)** 24/7, response team based, and low consumer to server ratios. It provides the same services as level of care 3, but with greater frequency and intensity. It also includes Supported employment and supported housing.

**Assertive Community Treatment ACT Services:**

ACT is a self-contained program that serves as the fixed point of responsibility for providing treatment, rehabilitation and support services to identify consumers with severe and persistent mental illnesses. Using an integrated services approach, the ACT team merges clinical and rehabilitation staff expertise, e.g., psychiatric, substance abuse, employment, and housing within one mobile service delivery system. Supported employment provides individualized services to assist people in choosing, getting and keeping employment. Supported housing provides individualized services to assist people in choosing, getting and keeping housing. Support services such as accessing transportation, meal preparation, and budgeting may also be provided through this program.

**Psychosocial Rehabilitation Services (PRS)**

PRS provide social, educational, vocational, behavioral, and cognitive interventions including independent living services, coordination services, employment, housing, medication, and crisis related services.

**Youth Empowerment Services (YES) Waiver**

The YES Waiver program allows for more flexibility in the funding of intensive community-based services for children between 3-18 years with severe emotional disturbance and their families. The program is currently offered in Travis and Bexar counties only. Services include respite, community living supports,
family supports, transitional services, adaptive aids and supports, minor home modifications, non-medical transportation, paraprofessional services, professional services, and supportive family based alternatives.

**Housing Opportunities for Persons with AIDS Program (HOPWA)**

The State of Texas HOPWA formula program, first funded in 1992, provides housing assistance and supportive services for income-eligible individuals living with HIV/AIDS and their families to establish or better maintain a stable living environment in housing that is decent, safe, and sanitary, to reduce the risk of homelessness, and to improve access to health care and supportive services.

As of the end of 2011, 69,212 persons were known to be living with HIV/AIDS in Texas; this does not include persons with HIV who have not been diagnosed. The 2008-2010 Texas Statement of Coordinated Need reported oral health care and housing as the two most frequent gaps in services identified by clients in six of the seven HIV Service Delivery Areas (HSDAs) assessed in Texas. The State of Texas HOPWA formula program is administered by the TB/HIV/STD Unit-HIV/STD Prevention and Care Branch and provides the following services:

- **Tenant-Based Rental Assistance (TBRA) program**: The TBRA program provides tenant-based rental assistance to eligible individuals until they are able to secure other affordable and stable housing.

- **Short-Term Rent, Mortgage, and Utilities (STRMU) assistance program**: The STRMU program provides short-term rent, mortgage, and utility payments to eligible individuals for a maximum of 21 weeks of assistance in a 52-week period.

- **Supportive Services program**: The Supportive Services program provides case management, basic telephone service and assistance to purchase smoke detectors to eligible individuals.

- **Permanent Housing Placement Services (PHP)**: The PHP program provides assistance for housing placement costs which may include application fees, related credit checks, and reasonable security deposits necessary to move persons into permanent housing.

**Areas of service coverage within jurisdiction:**

The State of Texas HOPWA Formula program serves all counties in Texas, with the exception of the 26 counties served by five directly-funded Metropolitan Statistical Areas (MSAs): Austin, Dallas, Fort Worth, Houston, and San Antonio. The 26 counties not served by the State of Texas HOPWA program are: Bastrop, Caldwell, Hays, Travis, Williamson, Collin, Dallas, Denton, Ellis, Hunt, Kaufman, Rockwall, Hood, Johnson, Parker, Tarrant, Chambers, Fort Bend, Harris, Liberty, Montgomery, Waller, Bexar, Comal, Guadalupe, and Wilson.
Grant Management:
DSHS selects seven Administrative Agencies (AA) across the state through a combination of competitive Requests for Proposals (RFP) and intergovernmental agency contracts. The AAs act as an administrative arm for DSHS, with DSHS oversight, by administering the HOPWA program locally for a five-year project period. The AAs, in turn, select HOPWA Project Sponsors through local competitive processes. DSHS reserves three percent of the total HOPWA award for the administrative costs of both DSHS and its AAs. Project Sponsors are allowed up to seven percent of their Project Sponsor allocation amount for administrative costs. The HIV/STD Prevention and Care Branch has a team of consultants and managers that are assigned to monitor the contract activities of the AAs. This monitoring involves periodic site and technical assistance visits by the consultants, and the submission of monthly billing reports and quarterly progress reports by the Project Sponsors and AAs. AAs are required to comply with HUD regulations, the DSHS Program Manual and their contractual Statement of Work.

Projects for Assistance in Transition from Homelessness (PATH)
The Projects for Assistance in Transition from Homelessness (PATH) program is authorized under Sec. 521 (290cc-21) of the Public Health Service Act. Funds are distributed on a formula basis by the federal Center for Mental Health Services to the States and Territories.

Services to be Supported by PATH:
Outreach; screening, diagnostic assessment and treatment; habitation and rehabilitation; community mental health services; outpatient alcohol or drug treatment (for clients with serious mental illness); staff training; case management; referrals for primary health services, job training, educational services (including HIV prevention activities), and relevant housing services; assistance in obtaining income support services including SSI and representative payee per appropriate regulations; housing services including planning for housing; technical assistance in applying for housing assistance; and improving coordination of housing and services and the costs of matching individuals with appropriate housing and services.

Service Areas:

Funding Mechanism:
PATH sites are selected based upon poverty and density indices. Additional consideration is given to organizations that have a prior history of providing services through PATH. Funds are awarded based upon historical allocations and geographic areas with the greatest need, in addition to an application process. Additional service sites may be identified. Five major metropolitan areas of the state
have also developed a plan for serving homeless youth by the addition of one outreach worker.

Service organizations currently receiving funds:
- Austin Travis County Integral Care (formerly Austin Travis County Mental Health Mental Retardation Center) (Austin)
- Center for Health Care Services (San Antonio)
- Dallas MetroCare Services (Dallas -through NorthSTAR)
- Gulf Coast Center (Galveston)
- Border Regional MHMR Community Center (Laredo)
- Aliviane, Inc. (El Paso)
- Spindletop MHMR Services (Beaumont)
- Lubbock Regional MHMR Center (Lubbock)
- Mental Health and Mental Retardation Authority of Harris County (Houston)
- Mental Health and Mental Retardation of Tarrant County (Fort Worth)
- Nueces County MHMR Community Center (Corpus Christi)
- Texas Panhandle Mental Health Authority (Amarillo)
- Tropical Texas Center for Mental Health and Mental Retardation (Harlingen)

**Texas Department of Family and Protective Services (DFPS)**

DFPS is charged with protecting children, adults who are aging or who have disabilities living at home or in state facilities, and licensing of certain programs. Many youth with disabilities are in DFPS conservatorship, and often need ongoing services and supports as they age out of the foster care system. Services must be coordinated across agencies to ensure that needed services are in place.

**Transitional Living Services**

- Brief Overview of Services - Transitional Living Services provides a systemic and integrated approach in transition planning, the provision of transitional services, and access to and information about benefits that affect both older youth in foster care and those who have aged out. Transitional Living Services are multipurpose and available to youth ages 14 up to age 23.

**Experiential Life Skills Training for Youth Age 14 and older**

Foster parents and other providers are required to include training in independent living skills through practical activities such as meal preparation, nutrition education, and cooking, use of public transportation when appropriate, financial literacy training to include money management, credit history, and balancing a checkbook and performing basic household tasks for youth age 14 and older. The youth’s experiential learning while in care and the receipt of PAL services should complement one another and are discussed and addressed in each core life skill area within the youth’s service and transition plan.
**Transition Planning/Permanency Planning for Older Youth**

**Transition Plan:** The transition plan identifies services for each youth to accomplish goals to assist them in transitioning from foster care. The plan is used statewide and is incorporated into the youth’s plan of service to ensure consistency of services. Procedures for identifying caring adults for youth and involving them in transition planning help to ensure personal and community connections are incorporated into the transition planning process.

**Circle of Support (COS):** A Circle of Support is a youth driven process based on Family Group Decision Making (FGDM). COS’s are offered to youth beginning at 16 years of age (although they can be offered as early as 14). This is a coordinated and facilitated meeting with participants that a youth identifies as “caring adults” who make up their support system. COS participants can include a youth’s birth family members, substitute care providers, teachers, church members, a mentor and so on. Participants come together to develop and review the youth's transition plan, identifying strengths, hopes and dreams, goals and needs in the areas of education, employment, health/mental health needs, housing, and PAL life skills training components. All participants sign the transition plan to seal their agreements.

[http://www.dfps.state.tx.us/handbooks/CPS/Files/CPS_pg_6270.asp#CPS 6274 1](http://www.dfps.state.tx.us/handbooks/CPS/Files/CPS_pg_6270.asp#CPS 6274 1)

**Independence Programs**

**Preparation for Adult Living (PAL) Services/Benefits:**

The DFPS Preparation for Adult Living (PAL) program assists older youth in foster care prepare for their departure and transition from DFPS care and support. Supportive services and benefits are provided by PAL Staff or PAL Contract Providers to eligible young adults up to age 21 to become self-sufficient and productive. PAL IS Funded by the federal Chafee Foster Care Independence Program, State general revenue funds and/or community match (20%). PAL services include:

- Life skills assessment (Casey Life Skills Assessment) to assess strength and needs in life skills attainment [www.caseylifeskills.org](http://www.caseylifeskills.org) (assessments are conducted before Life skills training);
- Life skills training (age 16 to 18) in the following core areas:
  - Health and Safety;
  - Housing and Transportation;
  - Job Readiness;
  - Financial Management;
  - Life Decisions/Responsibility;
  - Personal/Social Relationships
- Educational/vocational services
- Supportive services (based on need and funding availability) may include:
  - graduation items,
  - counseling.
• tutoring,
• driver’s education fees, or
• mentoring.

• A transitional living allowance of up to $1,000 - distributed in increments of up to $500 per month, for young adults up to age 21 who participated in PAL training, to help with initial start-up costs in adult living.
• Aftercare room and board assistance (ages 18-21) is based on need of up to $500 per month for rent, utilities, utility deposits, food, etc. (not to exceed $3,000 of accumulated payments per young adult).
• Case management to help young adults with self-sufficiency planning and resource coordination.

http://www.dfps.state.tx.us/handbooks/CPS/Files/CPS_pg_x10200.asp#CPS_10200

Contact Regional Preparation for Adult Living Staff for more information about all Transitional Living Services at:

http://www.dfps.state.tx.us/Child_Protection/Preparation_For_Adult_Living/PAL_coordinators.asp

Extended Foster Care Program:

With the implementation of the federal Fostering Connections Act (Title IV-E of the Social Security Act) on 10-1-2010, a young adult who ages out of foster care at age 18 will continue to be eligible for Extended Foster Care provided there is an available placement, the young adult signs a voluntary extended foster care agreement and meets at least one of the following conditions:

18 or up to 22 year olds, and:
• regularly attending high school or enrolled in a program leading toward a high school diploma or school equivalence certificate (GED); or is 18 to 21 years old and;
• regularly attending an institution of higher education or a post-secondary vocational or technical program (minimum six hours per semester); or
• actively participating in a program or activity that promotes, or removes barriers to, employment;
• employed for at least 80 hours per month; or
• incapable of doing any of the above due to a documented medical condition.

For more information about extended foster care, go to:

http://www.dfps.state.tx.us/child_protection/fostering_connections/extended_fostercare.asp
**Supervised Independent Living (SIL) Program:**

The federal Fostering Connections legislation in 2008 established a Supervised Independent Living (SIL) program which is a component of the Extended Foster Care program. The SIL program allows young adults to live independently under a minimally supervised living arrangement provided by a DFPS contracted provider. A young adult in SIL is not supervised 24-hours a day and is allowed increased responsibilities, such as managing their own finances, buying groceries/personal items, and working with a landlord. Living arrangements may include apartments, non-college and college dorm settings, shared housing and host home settings. Individuals are assisted in transitioning to independent living, achieving identified education and employment goals, accessing community resources, engaging in needed life skills trainings, and establishing important relationships.

For more information about SIL go to:

http://www.dfps.state.tx.us/Child_Protection/Fostering_Connections/supervised_independent_living.asp

**Return for Extended Foster Care:**

Young adults who aged out of DFPS conservatorship may return to participate in the Extended Foster Care Program until the age of 21 if the required stipulations are met:

- Is offered an available placement;
- Understand that court jurisdiction will be extended, if the court permits;
- Sign or re-sign a Voluntary Extended Foster Care agreement; and
- Agree to one of the Extended Foster Care activities within 30 days of being placed in Extended Foster Care.

PAL staff pre-screen young adults who want to return for Extended Foster Care and refer to the regional re-entry staff.

**Other Related Information:**

**Trial Independence Period (TI):**

(Effective 9/19/11): A young adult in DFPS conservatorship who turns 18 as well as a young adult enrolled in the Extended Foster Care Program may leave foster care for a "trial independence" period of 6 months (or up to 12 months with a court order). During the TI period, the young adult may be living independently and receiving other transitional living benefits such as PAL, ETV, and Transitional Medicaid. A Young adult that elects to return for Extended Foster Care during the TI period may do so without losing Title IV-E eligibility.

**Extended Court Jurisdiction:**

Young adults that leave foster care at age 18 for a TI period will have court jurisdiction extended for 6 months. Additionally court jurisdiction may be extended
for a 12 month TI period if ordered by the court. If a young adult is in Extended Foster Care, court jurisdiction will continue during this period but will not exceed the month of their 21st birthday. More information is available at:

http://www.dfps.state.tx.us/handbooks/CPS/Files/CPS_pg_5363.asp#CPS_5363

Post-Secondary Education

Education and Training Voucher (ETV) Program:

ETV is a federally-funded (Chafee) and state-administered program. Based on the cost of attendance (as established by higher education), youth in foster care or other eligible young adults ages 16 up to the age of 23 may be eligible to receive up to $5,000 in financial assistance per year to help them reach their postsecondary educational goals if they meet the following criteria:

- Meet college enrollment and be enrolled at least 6 semester hours in an accredited or pre-accredited
  - public or non-profit program that provides a bachelor's degree or not less than a 2 year program that provides credit towards a degree or certification; or
  - a public or non-profit program that provides not less than a one-year program of training to prepare students for gainful employment; or
  - a public or non-profit program, or a private institution that has been in existence for two years and offers training programs to prepare students for gainful employment in a recognized occupation (training may be less than one year).
- Students participating in the ETV Program on their 21st birthday may remain eligible until the month of their 23rd birthday as long as they are enrolled in ETV and making satisfactory academic progress toward completing their postsecondary education or training program as determined by the institution.

Students interested in specific educational programs such as Correspondence Courses, Distance Education Courses, or Continuing Education courses must contact ETV staff for prior approval to ensure accreditation and that courses lead to a degree or recognized certificate program. These courses must apply to a Student’s academic degree or certificate program and calculated at the part of the cost of attendance.

Individuals eligible for ETV include:

- Youth in foster care who are at least 16 and likely to remain in care until 18; or
- Youth who aged out of foster care but have not yet turned 21; or
- Youth who were adopted from DFPS foster care after turning age 16 and are not yet 21; or
- Youth who enter Permanency Care Assistance after age 16; or
• Youth who are in the custody of the Texas Juvenile Justice Department (formerly TJPC) and are in a Title IV-E placement when turning age 18; or
• Tribal youth or young adults in tribal foster care; or
• Students who move out of state to attend school and were originally enrolled in ETV in Texas.

http://www.dfps.state.tx.us/handbooks/CPS/Files/CPS_pg_x10300.asp#CPS_10320

**Note:** Youth or young adults in DFPS paid foster care, enrolled in higher education and eligible for ETV may have certain expenses paid by the ETV program (ex., books, computers, child care, and transportation). ETV will not cover residential housing, personal items and food since this is provided for in the placement.)

**Apply for the ETV Program at:** [http://www.texasetv.com](http://www.texasetv.com) or call toll free 877-268-4063.

**College Tuition and Fee Waiver – Texas Law**

(Sec. 54.366 and 54.367-Texas Education Code (2009): The college tuition and fee waiver provides exemptions from payment of tuition and fees at Texas’ **state supported institutions** of higher education to individuals formerly in Texas state foster care) and adopted youth. To be exempt from the payment of tuition and fees youth or young adults must have been in DFPS conservatorship. Exemptions occur:

• the day before the student’s 18th birthday;
• the day of the student’s 14th birthday, if the youth was eligible for adoption (parental rights being terminated) on or after that day;
• the day the student graduated from high school or received the equivalent of a high school diploma;
• if a youth was adopted and the adoption occurred on or after September 1, 2009;
• if permanent managing conservatorship of the youth was granted to a non-parent on or after September 1, 2009; or
• when a student is enrolled in a dual credit course or other course in which the student may earn joint high school and college credit. **Note:** Youth enrolled in a dual credit course may access ETV funds to cover certain educational expenses related to college attendance.

Youth or young adults must check with each school to ensure that the courses they are enrolling in are exempt from tuition and fees. Some vocational / certificate courses may not be exempt tuition and fees. Young adults must be enrolled as an undergraduate **no later than his or her 25th birthday.**

Adopted youth subject to an adoption assistance agreement that provides monthly payments and Medicaid benefits are also eligible for the college tuition and
fee waiver. For these students there is no age limit to enroll in college in order to take advantage of the tuition and fee waiver.

http://www.dfps.state.tx.us/handbooks/CPS/Files/CPS_pg_x10300.asp#CPS_10311

**DFPS Scholarships:**

**Freshman Success Fund for Foster Youth (est. July 2012):** This is a grant for first time college freshmen formerly in DFPS foster care. Each year there will be 4 one time grants of $1,000 available for young adults enrolling in their freshman year. These grants are to cover basic non-tuition related expenses such as books and supplies, computers and software, tools and uniforms, and transportation. Students must be enrolled in a Texas state-supported college, university, or vocational/technical school that accepts the state college tuition and fee waiver. More information about this scholarship is available at:

http://www.dfps.state.tx.us/txyouth/education/financial.asp

**C. Ed Davis-PAL Scholarship (est. April 2013):**

This scholarship is for basic non-tuition needs for former foster youth who are majoring in government, political science, history, or other pre-law field. Scholarships are for $1,000 per academic year and are available to sophomore, junior, or senior year students. More information about this scholarship is available at:

http://www.dfps.state.tx.us/txyouth/education/financial.asp

**Temporary Housing Assistance Between Academic Terms**

(Effective 9/1/2011): Texas’ institutes of higher education are required to assist full-time students formerly in DFPS conservatorship or who have been legally emancipated in locating temporary housing between academic terms (Christmas and summer holiday breaks). Students must request the housing assistance and are encouraged to inquire at financial aid offices, student affairs offices, admissions offices, or housing/residence life/residential living offices.

**Vaccination Requirements**

**Bacterial Meningitis Vaccine for Students Entering Post-Secondary Education (Effective 1/2/2012):** Students under age 30 entering a Texas institution of higher education must be vaccinated for bacterial meningitis. For DFPS foster youth, payments for doctor’s visits and vaccination costs are covered by Texas Medicaid (STAR Health or Traditional); Medicaid for Transitioning Foster Care Youth (MTFCY); or the Former Foster Care Youth in Higher Education (FFCHE) program. Young adults are encouraged to check college admissions policies for more information about vaccination requirements.
Healthcare Coverage (Handout – Form 1014 - Healthcare Coverage and Help with Benefits for Texans Ages 18-23 Who Were In Foster Care)

Medicaid for Transitioning Foster Care Youth (MTFCY) / STAR Health:
Provides continuous medical coverage to young adults age 18 to 21 that have aged out of foster care and meet the following eligibility criteria:

• Be between 18 and 21 years of age;
• Have been in foster care at age 18;
• Have no other healthcare coverage (private insurance or other category of Medicaid);
• Meet the Texas Department of Human Services (DHS) income and assets guidelines.

Young adults may call the Medicaid Help Desk for replacement MTFCY cards at 1-855-827-3748. To reenroll in MTFCY, the young adult must complete Form 1011 which may be requested by calling 2-1-1 or the form is available at the HHSC website:

http://www.hhsc.state.tx.us/help/healthcare/children.shtml

STAR Health/Health Passport:
For information about STAR Health, to re-enroll in MTFCY and if a young adult wants access to his or hers Health Passport visit www.fostercartx.com. Young adults may contact the regional Well-being specialists as a STAR Health resource contact. More information about STAR Health is available at:

http://www.dfps.state.tx.us/Child_Protection/Medical_Services/guide-star.asp

2-1-1 TEXAS:
To report any changes to an address or other contact information, young adults must contact 2-1-1 and report calling about Medicaid for Transitioning Foster Care Youth (MTFCY). Young adults may also go to https://www.yourtexasbenefits.com to set up an account, update contact information, report changes in his or her case, receive an identification card, or find out about other benefit information. Additionally, 2-1-1 may be contacted for non-medical issues such as applying for food stamps and medical assistance for other members of the family. More information about 2-1-1 may be accessed at

https://www.211texas.org/211/

Former Foster Care in Higher Education (FFCHE) Program
(NOTE – Beginning January 1, 2014, this program will be replaced with the Former Foster Care Children’s (FFCC) Program for Young Adults ages 21-25): Since October 1, 2009, the Health and Human Services Commission has offered a state funded, healthcare benefits program to certain former foster care youth. The following criteria apply:
• Be age 21 year or 22;
• Be enrolled in a college or technical school;
• Have been in DFPS foster care at age 18;
• Have no other healthcare coverage; and
• Meet the DHS income and assets guidelines.

To request a FFCHE application, young adults may contact 2-1-1 and request Form H1868 and Form H1870 to be mailed to them or visit the HHSC website and download the forms at:

http://www.hhsc.state.tx.us/help/healthcare/children.shtml
http://www.dfps.state.tx.us/handbooks/cps/files/cps_PG_X10000.asp#cps_10150

Other Youth/Young Adult Services

Driver License Fee Waiver (Effective May 2012):
Senate Bill 218 (82nd Regular Legislative session) waived driver license fees for youth in DFPS temporary or permanent managing conservatorship and for young adults at least 18 years of age, but younger than age 21, who reside in a DFPS paid foster care placement.

http://www.dfps.state.tx.us/handbooks/CPS/Files/CPS_pg_x10600.asp#CPS_10642

Texas Youth Hotline
Texas Youth Hotline is a resource for young adults who are under 21 years of age, including those who have aged out of the foster care system. Individuals may contact the statewide hotline at 1-800-210-2278 for telephone counseling, information, and referrals. The hotline can help locate services available in local communities.

Texas Youth Connection
Texas Youth Connection is a website designed with input from youth and young adults and is a resource for youth in the Texas foster care system, alumni of foster care, and stakeholders seeking general tips and information. This website offers information and resources in education, finances, records, diversity, health, contacts, job links, food, housing, books, stories, Transition Center information, hotlines and other hot stuff. This website is also the location of the National Youth in Transition Database (NYTD) Youth Survey. Check this resource out at:

www.texasyouthconnection.org

Texas Youth Connection-Facebook Page was launched to provide another source for youth and young adults to find resources, benefits, and other relevant topics such as NYTD updates, accessing current educational and career resources, learning about current trends and fun topics of interest. This page allows DFPS to
stay connected with youth and young adults using a popular social media website. The page is located at

www.facebook.com/TexasYouthConnection.

**Regional and Statewide Youth Leadership Councils (YLC)**

Regional and Statewide Youth Leadership Councils (YLC) are comprised of two elected or appointed youth or young adults (ages 16 to 21) per region. These councils address identified issues and formulate recommendations for improving services to children and youth in foster care. YLC’s review state policies and programs and provide feedback. Regional YLC activity details are located at www.texasyouthconnection.com under "Events". Benefits of youth participation include:

- Opportunities for Community Services and Outreach projects to support foster youth;
- Advocacy training to ensure the voices of foster youth are heard and incorporated into policy and practice;
- Leadership building skills;
- Planning and facilitating events;
- Learn how to strategically share their story; and
- Developing supportive friendships/caring adults.

**Activities and Events for Youth**

- **PAL Peaks Camp** - Two, four-day experiential learning camps held annually for children and youth aimed at increasing self-esteem, improving communications, problem-solving, and having fun. The Texas Network of Youth Services (TNOYS) offers the PEAKS Camp through a partnership with DFPS. ([http://www.tnoys.org/](http://www.tnoys.org/))
- **PAL Statewide Teen Conference** - Annual three day conference held on a college campus offering workshops for youth that lead to self-sufficiency and independence.
- **PAL College Conference** - Texas A&M Commerce host an annual two day (weekend) conference for youth to learn about and prepare for higher education opportunities.
- **Aging-Out Seminars**: These seminars are provided to youth ages 15½ to 18 in two (2) separate tracks before they leave care. Seminars include topic areas identified by youth to reinforce their knowledge and skills about DFPS programs, benefits, resources and other Life Skills topics. These seminars build on information from PAL Life Skills Training classes.
- **Statewide Youth Leadership Councils (Youth Advisory Boards)-Regional Activities** - Some regions may host regional Teen Conferences (based on fund availability) and other activities to help youth/young adults prepare to transition to adulthood and to provide leadership opportunities.
Other Related Information

Transition Centers

Transition Centers provide a central clearinghouse of one stop services to serve the diverse needs of current and former foster youth, homeless youth, or other at-risk youth. Services may include employment assistance, educational support, access and referrals to community partners and resources and various transitional living services such as PAL classes, food and housing assistance, and substance abuse/mental health counseling. Transition Centers also provide co-location opportunities for local partners such as local Workforce Solutions offices, and community colleges and universities to jointly serve the diverse needs of the youth in one location. There are currently 16 Transition Centers which are independently funded, operated and supported by partnerships between DFPS, their Providers, community partners and the Texas Workforce Commission. A list of these Centers with contact information is available at:

http://www.dfps.state.tx.us/txyouth/resources/local/default.asp

Texas Workforce Commission/Local Workforce Boards Partnership:

DFPS regional offices and 28 local Workforce Development Boards have jointly developed and entered into Memoranda of Understandings (MOU) addressing the unique challenges facing current and former foster youth transitioning to independent living, including improving employment outcomes for these youth. The purpose of the MOU relates to:

- Furthering the objectives of the DFPS Preparation for Adult Living (PAL) program;
- Ensuring services are prioritized and targeted to meet the needs of current and former foster youth; and
- Making referrals, where feasible, for short term housing for foster youth who need housing.

DFPS staff, caregivers, and PAL contractors refer youth ages 16 and older to local Workforce Solutions offices for job search and readiness assistance, career exploration, and job placement services. Each Board has designated a point of contact for staff and youth to access for assistance and services. Additionally all youth and young adults are encouraged to register in the state job search system.

www.WorkInTexas.com

National Youth in Transition Data Base (NYTD):

NYTD is a data collection system created to track independent living services and to learn how successful states are in preparing youth to move from state care into adulthood. Texas will survey youth in foster care when they turn age 17 and will conduct follow-up surveys of some of these same youth at age 19 and again at age 21. From October 1, 2012 through September 30, 2013, a follow up survey will be conducted on some of the 19 year olds who were surveyed when they were age 17.
**Youth Specialists**

Youth Specialists (alumni of foster care) are hired as full time DFPS employees in each DFPS region. Youth Specialists and their supervisors play a key role in the development and support of Youth Leadership Councils, ensure that the voices of foster youth are heard, and engage foster youth in advocating activities. Youth specialists also serve to help strengthen and support CPS casework by informing DFPS of initiatives and activities affecting policy and practice. A list of regional Youth Specialists is available at:

http://www.dfps.state.tx.us/txyouth/contacts/youth_specialists.asp

**Employment Preference to Former Foster Youth**

Texas Government Code 672.002 (2009) requires state agencies to give an employment preference to former foster youth who were in the permanent managing conservatorship of DFPS on the day preceding the young adult’s 18\textsuperscript{th} birthday over other applicants for the same position who do not have a greater qualification. An individual is entitled to an employment preference only if the young adult is 25 years of age or younger (day before turning 26). PAL staff provide the employment preference letter to eligible young adults when they turn 18 or upon request.

Provision of Personal Documents to Youth/Young Adults (Ages 16 and 18):

**Age 16**-Youth in DFPS conservatorship on or before they turn age 16 must be provided with a:
- Certified copy of the youth’s birth certificate;
- Social Security card or replacement Social Security card, as appropriate; and
- Personal identification certificate/card issued by the Texas Department of Public Safety (DPS).

**Age 18**-Young Adults discharged from foster care or are legally emancipated will receive:
- A certified copy of his or her birth certificate;
- A Social Security card or a replacement Social Security card;
- A personal state identification certificate/card issued by DPS;
- Immunization records;
- Information contained in the youth’s health passport;
- Proof of enrollment in Medicaid, if appropriate; and
- Medical Power of Attorney Information-Forms 2559 A and B
- Almost 18 Letter and Youth Transition Portfolio

http://www.dfps.state.tx.us/handbooks/CPS/Files/CPS_pg_x10000.jsp#CPS_10130
Texas Transition Center Rosters (As of August, 2012) Information is updated at the Texas Youth Connection Website- [http://www.dfps.state.tx.us/txyouth/](http://www.dfps.state.tx.us/txyouth/)

<table>
<thead>
<tr>
<th>Region 1</th>
<th>Region 2</th>
<th>Region 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>LUBBOCK</td>
<td>ABILENE</td>
<td>DALLAS</td>
</tr>
<tr>
<td>*BCFS-HHS</td>
<td>*BCFS-HHS</td>
<td>Transition Resource Action Center (TRAC)</td>
</tr>
<tr>
<td>125 Chicago Ave.</td>
<td>1290 South Willis, Suite 55</td>
<td>A Program of City Square</td>
</tr>
<tr>
<td>Lubbock, Texas 78416</td>
<td>Abilene Texas 79605</td>
<td>3108 Live Oak Street</td>
</tr>
<tr>
<td>806-792-0526</td>
<td>325-692-0033</td>
<td>Dallas, TX 75204</td>
</tr>
<tr>
<td>806-781-1179 (cell)</td>
<td>Johnny Nguyen – Program Director</td>
<td>Toll Free 866-466-8722</td>
</tr>
<tr>
<td>Kami L. Jackson-Program Director</td>
<td></td>
<td>214-370-9300</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Region 4</th>
<th>Region 5</th>
<th>Region 6</th>
</tr>
</thead>
<tbody>
<tr>
<td>TYLER</td>
<td>BEAUMONT</td>
<td>HOUSTON</td>
</tr>
<tr>
<td>*BCFS-HHS</td>
<td>FYI Center</td>
<td>Houston Alumni and</td>
</tr>
<tr>
<td>200 North Beckham, Tyler, Texas 75702</td>
<td>675 East Virginia St.</td>
<td>Youth (HAY) Center</td>
</tr>
<tr>
<td>903-732-4601 (cell)</td>
<td>Beaumont, TX 77705</td>
<td>1906 Cochran St.</td>
</tr>
<tr>
<td>Yhaun Mitchell – Site Coordinator</td>
<td>409-833-1971</td>
<td>Houston TX 77009</td>
</tr>
<tr>
<td><a href="http://www.dorsyte.org">www.dorsyte.org</a></td>
<td><a href="http://www.fyicenterbeaumont.org">www.fyicenterbeaumont.org</a></td>
<td>713-884-3300, ext. 183</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Region 7</th>
<th>Region 8</th>
<th>Region 9</th>
</tr>
</thead>
<tbody>
<tr>
<td>BELTON, TEMPLE, AND KILLEEN</td>
<td>SAN ANTONIO</td>
<td>SAN ANGELO</td>
</tr>
<tr>
<td>Project Futures Center</td>
<td>*BCFS-HHS</td>
<td>*CONCHO VALLEY HOME</td>
</tr>
<tr>
<td>204 North East Street</td>
<td>San Antonio Transition</td>
<td>FOR GIRLS, INC.</td>
</tr>
<tr>
<td>Belton, Texas 76513</td>
<td>Center</td>
<td>412 Preusser</td>
</tr>
<tr>
<td>254-933-2707-Belton</td>
<td>4415 Piedras Drive West, Ste. 100</td>
<td>San Angelo, TX 76903</td>
</tr>
<tr>
<td>254-634-0117-Kileen</td>
<td>San Antonio TX 78212</td>
<td>325-655-3821</td>
</tr>
<tr>
<td>Kami Diaz-Program Coordinator</td>
<td>Gayle Davis – Associate Executive Director</td>
<td>Sammye Ruppeck - Program Director</td>
</tr>
<tr>
<td>254-217-1982</td>
<td><a href="http://www.bcfs.net/">http://www.bcfs.net/</a></td>
<td>Email: <a href="mailto:sammye@conchokids.org">sammye@conchokids.org</a></td>
</tr>
</tbody>
</table>
Transition Centers provide a central clearinghouse of one-stop services to serve the diverse needs of older foster youth, homeless youth, or other at-risk youth ages 15 ½ to 25. Transition centers are individually operated and supported by partnerships between DFPS and their providers, and the Texas Workforce Commission. Transition Centers are designed to serve as locations for services such as PAL, job readiness/job search assistance, career exploration, college enrollment assistance, mentoring and housing assistance.

BCFS-HHS (Baptist Child and Family Services-Health and Human Services)
*CPS Legislatively Funded Centers

Texas Department of Assistive and Rehabilitative Services (DARS)

DARS works in partnership with people with disabilities and families with children who have developmental delays to improve the quality of their lives and enable full participation in the community. DARS administers a variety of rehabilitation programs.

Comprehensive Rehabilitation Services Program

The Comprehensive Rehabilitation Services program (CRS) helps Texans with spinal cord and brain injuries receive intensive therapies to increase independence
CRS has assisted individuals to leave nursing homes and hospitals and live in their own homes again.

In order to receive services, the consumer must:
- Have a traumatic brain injury, a traumatic spinal cord injury, or both. These injuries must have significantly affected the consumer’s ability to perform daily activities.
- Be at least 15 years old.
- Be a United States citizen or immigrant alien.
- Have lived in Texas for at least six months or have a primary caregiver who has lived in Texas for at least six months.
- Be medically stable enough to participate in rehabilitation activities.
- Agree to participate in the services offered by the DARS CRS program.

Every person in the CRS program receives an individualized treatment plan, based on individual needs. The goal of the CRS program is to help people be more independent in their homes and communities.

Depending on what’s needed, the CRS program pays for one or all of these treatments:

- **In-patient Comprehensive Medical Rehabilitation** - A team of medical experts provides consumers with therapy, medical care, and other help. These services take place in a rehabilitation hospital and typically last 30 days.
- **Outpatient Services** - Experts help consumers increase their ability to do daily activities that were affected by their injury. Consumers may have to go to a hospital or clinic during the day, but will be able to go home after their treatments.
- **Post-Acute Traumatic Brain Injury Services** - These services help consumers deal with mental or thought issues related to their injury like forgetfulness or difficulties in solving problems. These services are offered on a residential (overnight stay) and non-residential basis.

There may be a waiting list for services.

The goal of the CRS program to use this funding is to:
- Serve as many people as possible as soon as possible; and
- Deliver services that will give the most effective help.

**Rehabilitation Technology Resource Center**

The DRS Rehabilitation Technology Resource Center helps keep track of the latest innovations in equipment and engineering services designed to help people with disabilities be more independent.
The latest technology enables people with disabilities to perform jobs once thought of as "off limits" to them. New products do not always reach the people who need them most. Through the RTRC, individuals are assisting in finding equipment, explaining how it is used and how to get it. DRS Rehabilitation Technology Resource Center works in all areas of disabilities, including people with low vision.

Having the right equipment can change a person’s life. It can make the difference between living in an assisted care facility and living and working independently.

**Services Offered by the RTRC**

**Vehicle modifications:** Installation of wheelchair lifts, hand controls, reduced effort steering, and wide range of other adaptive vehicle equipment empowers our consumers to travel independently to achieve work and personal goals. Our staff reviews vehicle modification prescriptions and plans, and can provide the latest information about vehicle adaptations. We work in partnership with Texas Transportation Institute to assure that the modifications we purchase are safe and appropriate to meet our consumers’ needs. For information about our services, please contact the Coordinator for Vehicle Modifications at (512) 424-4155 or the Program Specialist for Rehabilitation Technology at (512) 424-4111.

NOTICE: Please consult with your counselor before purchasing any items on these lists.

[List of Vehicles Approved for Lowered Floor and Rear Entry Conversions – (Updated January 2013)]
[List of commonly installed vehicle assistive devices – Updated April 2012]
[DARS Vehicle Modification Program Frequently Asked Questions]

**Information and Referral:** Providing information and referring people to the right resources is a major service of the RTRC. The staff researches the latest products that are commercially available, giving people choices that can assist them in achieving their goals. This service is for DRS consumers, and, on a time-available basis, for the general public.

**Assessments:** RTRC can provide counselors with information about jobsite and home modifications, as well as computer assessments. The RTRC does not provide assistive technology assessments as this service is made available through qualified professionals such as physical therapist, occupational therapist, or rehabilitation engineers. All assessments for rehabilitation technology are conducted in the individual's customary environment or the environment where the technology will be used, such as the home or worksite. The assessment provides pertinent background information about the individual environment or site that the consumer uses (or will use) the technology. This assessment includes a detailed recommendation of the specifications for a device, system, or service; justification for the purchase (including advantages over other options); maintenance cost,
cost/benefits, and how the equipment addresses the individual’s functional limitations and vocational goals. If a brand or a model is specified, generic equivalents should also be allowed.

**Demonstration and loan of equipment:** The RTRC is located in the DRS Central Office in Austin and has a wide array of assistive equipment including wheelchairs and aids for communication, daily living, deaf and hard of hearing. The RTRC also addresses ergonomic issues. All of the RTRC’s inventory is available for demonstration, and the majority of items are available to loan to consumers for a period of three weeks. Equipment loans enable our consumers to try out devices ensuring that they meet their needs prior to purchase. Equipment is loaned to rehabilitation professionals and to DRS consumers through their counselors. Other individuals or groups may request demonstrations at the RTRC by calling (512) 424-4138 or (512) 424-4111 to schedule an appointment.

Resource link:

[The Center For Disability Studies, Texas Technology Access Program, The University of Texas at Austin](http://tatp.edb.utexas.edu/)

**Independent Living Services and Centers**

The **Independent Living (IL) Services and Centers** concentrate on self-sufficiency and quality of life, even if work potential is limited. Independent Living Centers and Services promote self-sufficiency despite significant disability - providing people with disabilities with improved mobility, communication, personal adjustment and self-direction. Independent Living Centers are operated by and for people with disabilities throughout the state to provide assistance through peer counseling, information and referral, advocacy support and other measures that encourage people to make their own decisions.

Objectives of ILS include but are not limited to:

- living independently;
- decreasing dependence on family members;
- decreasing the need for attendant services;
- decreasing the need for supervision in activities of daily living;
- increasing a self-directed lifestyle;
- improving ability to perform activities of daily living;
- improving mobility;
- improving communication; and
- improving personal/social adjustment.

Services provided in the ILS program may include:

- counseling and guidance;
- training and tutorial services;
- adult basic education;
- rehabilitation facility training;
• telecommunications, sensory and other technological aids for people who are deaf;
• vehicle modification;
• assistive devices such as artificial limbs, braces, wheelchairs and hearing aids to stabilize or improve function; and
• other services as needed to achieve independent living objectives, such as transportation, interpreter services and maintenance.

To be eligible for the ILS program, a person must be certified by a DRS counselor:
• to have a significant disability that results in a substantial impediment to their ability to function independently in the family and/or in the community, and
• there must be a reasonable expectation that ILS assistance will result in the ability to function more independently.

ILS services can be provided to consumers when they meet the basic eligibility requirements.

The DRS counselor provides guidance and counseling and, when possible, coordinates services from organizations offering comparable benefits directed toward achieving the ILS goal. For those ILS services that require DRS funds, consumers are continued on the ILS Waiting List. The timing of DRS-paid services varies depending upon available funding and the current number of consumers receiving or waiting for DRS-funded services.

DRS works very closely with Centers for Independent Living in locations that have a center. The Centers for Independent Living are located in various communities throughout the state. Your DRS counselor can provide information about the closest available center and the area that it serves. Consistent with the primary purpose of the program, the DRS Independent Living services also contribute to the support of persons with disabilities in the community as well as support their movement from nursing homes and institutions to community-based settings.

Services will be determined through informed consumer choice, that is, after providing you with information about your options and alternatives. Please note that consumers can be served by only one DRS program at a time. Some people with significant disabilities face barriers that severely limit their ability to take advantage of the many opportunities most people take for granted, for instance, transportation, living arrangements, social and recreational activities. Some barriers are obvious – a curb with no ramp for people who use wheelchairs, lack of interpreters or captioning for people with hearing impairments, lack of brailed material for people with visual impairments, for example. Less obvious barriers can be even more limiting. Misunderstandings about disability can very often prevent people with disabilities from living lives of independence. That’s where the DRS ILS
program can help. With some assistance, people with disabilities can effectively confront these barriers and achieve lives of personal satisfaction and independence. DRS counselors can help people with disabilities move beyond all kinds of barriers, both at home and in the community.

People with significant disabilities can benefit from the ILS program at DRS. (People who are blind or visually impaired are served by the Division for Blind Services.)

The complete list of Independent Living Center in Texas is located at the following website:

http://www.dars.state.tx.us/drs/directory_cil.shtml

The list of Independent Living Centers funded directly through DARS is found here:

http://www.dars.state.tx.us/drs/directory_drsonly_cil.shtml

Vocational Rehabilitation Program

The Vocational Rehabilitation (VR) program, a state-federal partnership since 1929, helps people with physical or mental disabilities prepare for, find and keep jobs. Gaining skills needed for a career, learning how to prepare for a job interview or getting the accommodations needed to stay employed are just a few of the ways this program helps people with disabilities increase productivity and independence.

Work related services are individualized and may include counseling, training, medical treatment, assistive devices, job placement assistance, and other services. Eligibility criteria for this program include: the presence of a physical or mental disability that results in a substantial impediment to employment, whether the individual is employable after receiving services, and whether services are required to achieve employment outcomes. Our Vocational Rehabilitation (VR) program helps Texans with disabilities prepare for, find and keep employment. This program also helps students with disabilities plan the jump from school to work. Please see our Vocational Rehabilitation Guide to Applicants to learn about the process of applying for VR services.

The Vocational Rehabilitation Program serves people with a wide variety of disabilities, e.g.:

- mental illness,
- hearing impairment,
- impaired functioning of arms or legs,
- back injury,
- alcoholism or drug addiction,
- mental retardation,
- learning disability,
traumatic brain injury and
other physical or mental disabilities that prevent the person from finding and keeping a job.

Services are provided based on individual needs. Some of these services are:
• medical, psychological and vocational evaluation to determine the nature and degree of the disability and the consumer’s job capabilities,
• counseling and guidance to help the consumer and family plan vocational goals and adjust to the working world,
• training to learn job skills in trade school, college, university, on the job or at home,
• hearing examinations, hearing aids and other communication equipment, aural rehabilitation and interpreter services for the deaf and hearing impaired,
• medical treatment and/or therapy to lessen or remove the disability,
• assistive devices such as artificial limbs, braces, and wheelchairs to stabilize or improve functioning on the job or at home,
• rehabilitation technology devices and services to improve job functioning,
• training in appropriate work behaviors and other skills to meet employer expectations,
• job placement assistance to find jobs compatible with the person’s physical and mental ability, and
• follow-up after job placement to ensure job success.

Consistent with the primary purpose of the program, Vocational Rehabilitation services also contribute to the support of persons with disabilities in the community as well as support their movement from nursing homes and institutions to community-based settings.

A person is eligible if:
• the person has a disability which results in substantial problems in obtaining employment;
• vocational rehabilitation services from DRS are required by that person to prepare for, get or keep a job and
• the person is able to get or keep a job after receiving services.

Services will be determined through informed consumer choice, that is, after providing information about options and alternatives. Please note that consumers can be served by only one DRS program at a time.

**Supported Employment** serves consumers of the Vocational Rehabilitation Program who need on-going support to maintain competitive employment. Counselors ensure that consumers in this program have the opportunity and support necessary to work in their communities.
**Transition Planning.** DRS VR counselors provide consultative and technical assistance to public school personnel in planning the move from school to work for students with disabilities. DRS Regional Transition Specialists assist VR counselors in coordination with schools, independent school districts, and regional Educational Service Centers.

The VR program also provides services to eligible persons with disabilities who have been injured on the job and partners with the Office of Injured Employee Counsel (OIEC) when needed. The Office of Injured Employee Counsel (OIEC) is a state agency created by the Texas Legislature to represent the interests of injured employees in the workers' compensation system. OIEC's Mission: To assist, educate, and advocate on behalf of the injured employees of Texas. For further information about the agency and the services provided please visit the OIEC website at www.oiec.state.tx.us.

**DARS Specialized Telecommunications Assistance Programs (STAP)**

STAP is a voucher program that provides financial assistance for the purchase of specialized assistive equipment or services for individuals whose disability interferes with their ability to access the telephone network.

**DARS Division for Blind Services**

The **DARS Division for Blind Services (DBS)** assists blind or visually impaired individuals and their families. Depending upon their goals and needs, DBS offers services to help regain independence or find a job.

DBS staff work in partnership with Texans who are blind or visually impaired to get high quality jobs, live independently, or help a child receive the training needed to be successful in school and beyond. DBS envisions a Texas where people who are blind or visually impaired enjoy the same opportunities as other Texans to pursue independence and employment, and our mission is to work in partnership with Texans who are blind or visually impaired to reach their goals.

DBS services include:

- Vocational Rehabilitation Program for adults whose visual condition limits their ability to begin or continue work;
- Independent Living Rehabilitation Program assists adults who are blind or visually impaired to learn adaptive skills to continue to live independently;
- Transition program assists young people who are blind or visually impaired to make an effective transition from secondary school to adult life and the world of work; and
- Criss Cole Rehabilitation Center, located in Austin, a residential program offering intensive vocational and independent living training to Texans who are blind.
Texas Councils of Government (COGs)

COGs are voluntary associations of, by and for local governments, and are established to assist local governments in planning for common needs, cooperating for mutual benefit, and coordinating for sound regional development. The purpose of the COGs is to strengthen both the individual and collective power of local governments and to help them recognize regional opportunities, eliminate unnecessary duplication, and make joint decisions. In many communities the ADRC, AAA, and other aging and/or disability service programs are co-located within that community’s COG.

The Texas COG directory can be found at http://txdirectory.com/online/abc/detail.php?id=200.

Community Services and Supports – Medicaid Entitlement

Medicaid also provides community entitlement programs for people who are older and those with disabilities so that they can continue to live in the community. The community entitlement programs are Primary Home Care (PHC), Community Attendant Services (CAS), and Day Activity and Health Services (DAHS). Financial eligibility is determined through HHSC, or, if the individual receives Supplemental Security Income (SSI), through the Social Security Administration. Functional eligibility is determined by DADS.

Primary Home Care (PHC)

PHC provides attendant services for those with an approved medical need requiring assistance with activities of daily living, such as bathing, grooming, meal preparation, and housekeeping. People receive, on average, 16.6 hours of assistance per week. As of February, 2011, 38% of individuals receiving PHC services were 18-64 years of age, and 62% were 65 years of age or older (DADS Reference Guide 2013). Additional functional and financial requirements must be met to receive PHC.

Community Attendant Services (CAS)

CAS provides attendant services for those with an approved medical need requiring assistance with activities of daily living, such as bathing, grooming, meal preparation, and housekeeping. People receive, on average, 16.4 hours of assistance per week. As of February, 2011, 31% of individuals receiving PHC services were 18-64 years of age, and 69% were 65 years of age or older. Individuals must not be eligible for Medicaid to receive CAS (DADS Reference Guide 2013). Additional functional and financial requirements must be met to receive CAS.

Day Activity and Health Services (DAHS)

DAHS are provided through contracts with licensed adult day care facilities to individuals living in the community to provide an alternative to placement in a
nursing facility or other institution. Services are designed to address the physical, mental, medical, and social needs of individuals, and include nursing and personal care; meals and snacks; transportation; and social, educational, and residential activities. As of February, 2011, 39% of individuals using CBA were 18-64 years of age, and 61% were 65 years of age or older (DADS Reference Guide 2013). Medicaid eligibility is required to receive DAHS, as well as other financial and functional requirements.

**Community Services and Supports Medicaid Waivers**

Medicaid waiver programs are exceptions to the usual Medicaid requirements and are not entitlement programs. Waiver programs provide community-based services and supports for individuals who qualify for admission to a nursing facility or an intermediate care facility for individuals with intellectual and developmental disabilities, but who have chosen to receive waiver services. The Medicaid waivers are intended to provide services in the home or a community setting and to be cost-effective alternatives to institutional settings. DADS administers six waiver programs; most programs have interest lists. For each of the programs, individuals must qualify for Medicaid and meet all of the functional requirements for the program.

**Community Based Alternatives**

The Community Based Alternative (CBA) program provides services and supports for older individuals and those with disabilities as an alternative to living in a nursing facility. Services include adaptive aids, medical supplies, dental, adult foster care, assisted living/residential care, emergency response, nursing, minor home modifications, occupational therapy, personal assistance services, home delivered meals, physical therapy, respite care, speech pathology, and transition assistance services. Service Coordination is provided by DADS' staff in the regional offices. As of February, 2011, 34% of individuals using CBA were 18-64 years of age, and 66% were 65 years of age or older (DADS Reference Guide 2013).

**Home and Community-based Services**

The Home and Community-based Services (HCS) program provides services and supports for individuals with intellectual and developmental disabilities as an alternative to living in an intermediate care facility for individuals with an intellectual disability or developmental disability (ICF/IID). Individuals may live in their own or family home, in a foster/companion care setting, or in a residence with no more than four others receiving similar services. According to the need of the individual, services may include residential assistance, supported employment, day habilitation, respite, dental treatment, adaptive aids, minor home modifications and/or specialized therapies such as social work, behavioral support, occupational therapy, physical therapy, audiology, speech/language therapy, dietary services, and licensed nursing services. Service Coordination is provided by DADS contracted Local Authorities. As of February, 2011, 6% of those using HCS services were 17
years or younger, 91% were 18 to 64 years of age, and 3% were 65 years of age or older (DADS Reference Guide 2013).

**Community Living Assistance and Support Services**

The Community Living Assistance and Support Services (CLASS) provides services and supports to individuals with related conditions as an alternative to living in an ICF/IID. Individuals receiving CLASS may live in their own or family home. Services include adaptive aids and medical supplies, case management, habilitation, minor home modifications, nursing services, behavioral support services, respite, occupational therapy, physical therapy, speech/language therapy, pre-vocational services, supported employment, support family service, and transition assistance services. As of February, 2011, 41% of those using CLASS services were 17 years or younger, 59% were 18 to 64 years of age, and less than 1% were 65 years of age or older (DADS Reference Guide 2013).

**Deaf-Blind with Multiple Disabilities**

The Deaf Blind with Multiple Disabilities (DBMD) program provides services and supports for individuals with deaf-blindness and one or more other disabilities as an alternative to living in an ICF/IID. Individuals receiving services may reside in their own or family home or in small group homes. Services include adaptive aids and medical supplies; dental services; assisted living; behavior support services; case management; chore services; minor home modifications; residential habilitation; day habilitation; intervener services; nursing services; occupational therapy; physical therapy; orientation and mobility; respite; speech, hearing and language therapy; supported employment; employment assistance; dietary services; and financial management services. As of February, 2011, 98% were 18 to 64 years of age, and 2% were 65 years of age or older (DADS Reference Guide 2013).

**Medically Dependent Children Program**

The Medically Dependent Children (MDCP) program provides a variety of services to support families caring for children who are medically dependent and to encourage the deinstitutionalization of children currently receiving services in nursing facilities. Specific services include adaptive aids, flexible family support services, minor home modifications, respite, financial management services, and transition assistance services. Service Coordination is provided by DADS staff in the regional offices. As of February, 2011, 92% of those using MDCP were 17 years of age or younger, and 8% were 18 to 20 years of age (DADS Reference Guide 2013).

**Texas Home Living**

The Texas Home Living (TxHmL) program provides services and supports for individuals with intellectual disabilities as an alternative to living in an ICF/IID. Individuals must live in their own or family homes. Services include community support, day habilitation, employment assistance, supported employment, respite services, financial management service, skilled nursing, adaptive aids, minor home modification, dental treatment, and specialized services such as occupational therapy, physical therapy, audiology, speech/language pathology, dietary services,
and behavioral support services. Service coordination is included through the local authority. As of February, 2011, 13% of those using TxHmL services were 17 years or younger, 87% were 18 to 64 years of age, and 1% were 65 years of age or older (DADS Reference Guide 2013).

**Star+Plus**

Star+Plus is a Medicaid managed care program in Texas that combines long-term services and supports with health care services. It provides service coordination, adaptive aids, medical supplies, assisted living support, emergency response systems, nursing services, minor home modifications, therapies, respite services, dental care, and personal assistance services. Long-term services and supports often enable an individual to live in the community rather than in an institution or facility.

**Community Services and Supports - Non-Medicaid**

Non-Medicaid services and supports are provided in community settings to enable individuals with disabilities and those who are aging to remain in the community, maintain their independence, and avoid institutionalization. There are functional and financial requirements to be eligible for these services. As of February, 2011, 38% of those using non-Medicaid community services and supports were 18-64 years of age, and 62% were 65 years or older.

**Adult Foster Care**

Adult Foster Care (AFC) provides a 24 hour living arrangement with supervision in an adult foster home for individuals who are unable to continue independent functioning in their own homes. Services may include assistance with activities of daily living activities and provision of or arrangement for transportation. Service recipients pay room and board to the provider.

**Client Managed Personal Attendant Services**

This program provides personal attendant services to people with physical disabilities who are willing and able to supervise the attendant (or have another person who can). Individuals receiving services interview, select, train, supervise, and terminate their attendants.

**Emergency Response Services (ERS)**

ERS provides a 24-hour electronic monitoring system for adults with functional impairments who are living alone or are socially isolated for assistance in emergency situations.

**Family Care**

Family Care provides attendant care services to eligible adults with limitations in performing activities of daily living. Services include assistance with personal care activities, home management tasks, meal preparation, and escort services.
Special Services for Persons with Disabilities

These services are provided in a variety of settings, and are not available in all areas of the state. The services are designed to assist individuals to stay in the community as independently as possible.

Community Supports for Older Americans - Non-Medicaid

The Older Americans Act (OAA) authorizes a wide range of services and supports to individuals over the age of 60, allowing them to lead independent, meaningful, and dignified lives in their own homes for as long as is possible. DADS Access and Intake and the 28 Area Agencies on Aging (AAA) administer a statewide system of supportive and in-home services under the OAA. The service array includes adult day services, in-home caregiver respite care, chore maintenance, emergency response services, disease prevention services, health maintenance services, health screening and monitoring, homemaker services, hospice, personal assistance, residential repair, senior centers, and transportation and home-delivered meals. Contact the local AAA to determine service availability for individuals 60 years of age and older.

PACE: Program of All-Inclusive Care for the Elderly

PACE is an integrated managed care system providing community-based services in El Paso, Amarillo, and Lubbock for individuals 55 years of age or older who qualify for nursing facility admission. PACE uses a comprehensive care approach, providing an array of services for a pre-determined monthly fee. PACE provides all health-related services, in-patient and out-patient medical care, and specialty services (dentistry, podiatry, social services, in-home care, meals, transportation, day activities, and housing assistance). As of February 2011, 9% of individuals using PACE services were 55-64 years of age, and 91% were 65 years and older (DADS Reference Guide 2013).

Non-Medicaid Intellectual Disability Community Services

This array includes services and supports provided by the Local Authorities to those in the DADS intellectual and developmental disability priority population who live in the community. These services are not entitlement and do not include those provided through an ICF/IID or Medicaid waiver program. These services help individuals participate in age-appropriate community activities and services. These services include:

Community Supports

Community supports are individualized activities provided in an individual’s home or at community locations to facilitate the ability to perform functional living skills and other daily living activities.
Day Habilitation Services
Day habilitation services are provided in a group setting away from an individual's home to help in developing and refining skills necessary to live and work in the community.

Eligibility Determination
These assessments are conducted by the local authority to determine if an individual has an intellectual disability or related condition and is a member of the DADS intellectual and developmental disability priority population.

Employment Services
These are support services to help individuals in securing and maintaining community employment.

Respite
Respite services can be provided in or out of an individual's home to temporarily relieve family members or other unpaid primary caregivers of their responsibilities for providing care.

Behavioral Support
These are specialized interventions by professionals with required credentials to assist an individual to increase adaptive behaviors and to replace or modify maladaptive behaviors that prevent or interfere with the individual's inclusion in home and family life or community life.

Therapies
Support services provided by licensed or certified professionals, including psychology, nursing, social work, occupational therapy, speech therapy, physical therapy, dietary services and certain behavioral health services.

In-Home and Family Support Program (IHFSP)
The IHFSP provides individuals with physical disabilities (without a primary diagnosis of intellectual disability) with a means to purchase the support they need in order to remain in the community. Direct grant benefits are provided to eligible individuals with physical disabilities to purchase services that enable them to live in the community. The services include: attendant care, home health services, home health aide services, homemaker services and chore services; medical, surgical, therapeutic, diagnostic and other health services; pre-approved transportation and room and board cost incurred by the individual with a physical disability or his family during evaluation or treatment; purchase or lease of special equipment or architectural modifications of a home to facilitate the care, treatment therapy or general living conditions of an individual with a disability; respite care; and counseling and training programs that help provide proper care of an individual with a disability. The IHFSP provides up to $1,200 per certification year in funds for
eligible individuals. As of February 2011, 1% of individuals using IHFSP services were 17 years old or younger, 38% were 18-64, and 60% were 65 or older (DADS Reference Guide 2013).

**Important Opportunities for Input – Making a Difference at the Local Level**

Fortunately, there are many opportunities for individuals to have their voices heard and make an impact on policies and procedures that affect them and their families. First, it is important to become knowledgeable regarding existing resources in your community, existing priorities, and the existing barriers to services and supports that facilitate living in the community. Each Texas State Agency has multiple Advisory groups, Task Forces, and other opportunities to provide input regarding services and supports. The following is a partial list of some of these legislatively mandated groups. Some of these advisory bodies were recently established in the 83rd Texas Legislative Session, and have not started to meet at this point. Complete information about these groups can be found through the web links provided below.

**Health and Human Services Commission Council**
This group assists the executive commissioner in developing rules and policies for the Commission.

[http://www.hhsc.state.tx.us/about_hhsc/hhsc_council.shtml](http://www.hhsc.state.tx.us/about_hhsc/hhsc_council.shtml)

**Behavioral Health Integration Advisory Committee**
The Behavioral Health Integration Advisory Committee is charged with addressing planning and development needs to integrate Medicaid behavioral health services, including targeted case management, mental health rehabilitative services and physical health services, by September 1, 2014. The committee must seek input from the behavioral health community on these issues and produce formal recommendations to HHSC on how to accomplish integrating behavioral and physical health within Medicaid managed care.

[http://www.hhsc.state.tx.us/about_hhsc/AdvisoryCommittees/bhiac.shtml](http://www.hhsc.state.tx.us/about_hhsc/AdvisoryCommittees/bhiac.shtml)

**Children's Policy Council**
The Children's Policy Council assists health and human services agencies in developing, implementing, and administering family support policies and related long-term care and health programs for children. The Council produces a biennial report with recommendations to the HHSC Executive Commissioner and the Texas Legislature.

[http://www.hhsc.state.tx.us/si/cpc/index.shtml](http://www.hhsc.state.tx.us/si/cpc/index.shtml)
Consumer Direction Workgroup
The Consumer Direction Workgroup (CDW) is established to advise the Health and Human Services Commission (HHSC) about the delivery of services through consumer direction in all programs offering long-term services and support. Consumer-directed services (CDS)—when compared to agency-directed services—offer more freedom, choice, and control to people that use long-term services and supports and mental health services. They have more say in deciding who provides their services and supports and when those services will be delivered.

http://www.hhsc.state.tx.us/about_hhsc/AdvisoryCommittees/cdw/index.shtml

Council on Children and Families
The Council on Children and Families was established to help improve the coordination of state services for children, by providing all children, youth and their families a seamless linkage to coordinated, comprehensive and effective services resulting in stronger families, children and youth.

http://www.hhsc.state.tx.us/about_hhsc/AdvisoryCommittees/Council.shtml

Intellectual and Developmental Disability System Redesign Advisory Committee
The newly formed Intellectual and Developmental Disability (IDD) System Redesign Advisory Committee will advise HHSC and the Department of Aging and Disability Services (DADS) on the implementation of the acute care services and long-term services and supports (LTSS) system redesign for individuals with intellectual and developmental disabilities. The Texas Legislature requires HHSC and DADS to design and implement an acute care services and LTSS system for individuals with IDD that supports goals affecting all areas of the individual’s life.

http://www.hhsc.state.tx.us/about_hhsc/AdvisoryCommittees/iddsrac.shtml

Medicaid and CHIP Regional Advisory Committees
The Texas Health and Human Services Commission (HHSC) is accepting applications for membership to the Medicaid and CHIP Regional Advisory Committees for 13 service delivery areas across the state. The committees will discuss and provide recommendations related to Medicaid and CHIP.

http://www.hhsc.state.tx.us/about_hhsc/AdvisoryCommittees/MedicaidCHIP_RAC.shtml

STAR+PLUS Quality Council
The newly formed STAR+PLUS Quality Council will advise HHSC on the development of policy recommendations to ensure eligible Medicaid consumers receive quality, person-centered, consumer-directed acute care and long-term services and supports in an integrated setting under the STAR+PLUS Medicaid
managed care program. The council is legislatively mandated to annually report to the HHSC executive commissioner an analysis and assessment of the quality of acute care services and long-term services and supports provided by STAR+PLUS, recommendations on how to improve STAR+PLUS services, and recommendations to ensure STAR+PLUS consumers receive person-centered, consumer-directed care in the most integrated setting achievable. The STAR+PLUS Quality Council, in conjunction with HHSC, is also legislatively mandated to report to the legislature every even numbered year the assessments and recommendations contained in the annual reports to the HHSC executive commissioner.

http://www.hhsc.state.tx.us/about_hhsc/AdvisoryCommittees/STARPLUS-qc.shtml

State Medicaid Managed Care Advisory Committee
The newly formed State Medicaid Managed Care Advisory Committee will provide recommendations and ongoing input to HHSC on the statewide implementation and operation of Medicaid managed care. The committee looks at a range of issues, including program design and benefits, systemic concerns from consumers and providers, efficiency and quality of services delivered by Medicaid managed care organizations, contract requirements for Medicaid managed care, provider network adequacy, and trends in claims processing.

The committee also will help HHSC with policies related Medicaid managed care and share information on best practices with the Medicaid Regional Advisory Committees. The State Medicaid Managed Care Advisory Committee serves as the central source for stakeholder input on the implementation and operation of Medicaid managed care.

http://www.hhsc.state.tx.us/about_hhsc/AdvisoryCommittees/smmcac.shtml

Promoting Independence Advisory Committee
The Texas Promoting Independence Initiative began in January 2000, in response to the U.S. Supreme Court ruling in Olmstead v. Zimring. The Court ruled in June 1999 that states must provide community-based services for persons with disabilities who would otherwise be entitled to institutional services, when the state’s treatment professionals determine that such placement is appropriate; the affected persons do not oppose such treatment; and the placement can be reasonably accommodated, taking into account the resources available to the state and the needs of others who are receiving state supported disability services. Texas’ Promoting Independence initiative supports allowing an individual with a disability to live in the most appropriate care setting available. The Promoting Independence Advisory Committee develops an annual report that is submitted to the Commissioner of HHSC.

http://www.dads.state.tx.us/providers/pi/
Traumatic Brain Injury Advisory Council
The Texas Traumatic Brain Injury Advisory Council works to inform state leadership of the needs of people with brain injuries and their families; recommend policies and practices to meet those needs; encourage research into the cause, prevention and treatment of traumatic brain injury and care of people with a traumatic brain injury; promote brain injury prevention and awareness throughout the state; and identify people with traumatic brain injuries, their family members and care-givers and to improve their access to supports and services.


Council on Planning & Advising (CAP) For the Prevention & Treatment of Mental Health & Substance Use Disorders
The CAP, formerly the Mental Health Planning and Advisory Council, serves to review, evaluate and make recommendations regarding the allocation and adequacy of mental and substance use disorder prevention, treatment, recovery and resilience support services in Texas.

www.dshs.state.tx.us/mhsa/cap/

Local Authority Network Advisory Committee
The Local Authority Network Advisory Committee advises on technical and administrative issues that directly affect local mental health authority responsibilities, evaluation and coordination of initiatives, and development of flexible and responsive contracts. Reviews rules related to local mental health authority operations.

www.dshs.state.tx.us/mhcommunity/LANAC/

Texas Aging and Disability Services Council
The Texas Aging and Disability Services Council makes recommendations to the executive commissioner of HHSC and the commissioner of DADS regarding the management and operation of the department, including policies and rules governing the delivery of services to persons who are served by the department and the rights and duties of persons who are served or regulated by the department.

http://www.dads.state.tx.us/news_info/council/index.html#aboutcouncil

Texas Department of Assistive and Rehabilitative Services
The DARS Council helps the DARS commissioner and the Health and Human Services executive commissioner develop rules and policies for the Department. The council is composed of nine members of the public appointed by the Governor. To be eligible for appointment to the council, a person must have demonstrated an interest in and knowledge of problems and available services related to early childhood intervention services or to people with disabilities other than
developmental delay and mental retardation and people who are blind, deaf, or hard of hearing.

http://www.dars.state.tx.us/councils/darscouncil/dc.shtml

**Rehabilitation Council of Texas**
The Rehabilitation Council of Texas (RCT) advises DARS on policy and the scope and effectiveness of vocational rehabilitation services and eligibility requirements. The RCT works with the divisions to develop, agree to, and review state goals and priorities. The council also contributes to the preparation of the state plans for vocational rehabilitation.

http://www.dars.state.tx.us/councils/rct/rct.shtml

**State Independent Living Council**
The State Independent Living Council (SILC) is an equal partner with DARS in the development, approval, and implementation of the State Plan for Independent Living. The Texas SILC leads, promotes, and advances the independent living philosophy and advocates for the rights of individuals with disabilities. The Governor appoints council members, with the majority being individuals with disabilities.

http://www.dars.state.tx.us/councils/silc/silc.shtml
The Housing and Services Partnership Academy is paid for with 100% federal funding from the Real Choice Systems Change Grant awarded to the State of Texas by the Centers for Medicare and Medicaid Services.

The Real Choice Systems Change Grant is a partnership between the Texas Department of Aging and Disability Services and the Texas Department of Housing and Community Affairs. This grant is awarded through September 29, 2013.