TEXAS DEPARTMENT OF HOUSING AND COMMUNITY AFFAIRS

HOUSING AND HEALTH SERVICES COORDINATION COUNCIL MEETING

Room 4501
Brown Heatly Building
4900 N. Lamar Boulevard
Austin, Texas

September 10, 2012 10:15 a.m.

COUNCIL MEMBERS PRESENT:

TIMOTHY IRVINE, Chair
PAULA MARGESON, Vice Chair
DAVID DANENFELZER
KENNETH DARDEN
BECKY DEMPSEY
MARC GOLD (by STEVE ASHMAN)
MIKE GOODWIN
AMY GRANBERRY
JIM HANOPHY
JEAN LANGENDORF
JONAS SCHWARTZ (by JIMMY PEREZ)
LAURA VANONI (by JENNIFER EDWARDS)

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1	<u>PROCEEDINGS</u>
2	MR. IRVINE: I call this meeting to order.
3	It's 10:15. This is the September 10 meeting of the
4	Housing and Health Services Coordination Council.
5	Let's begin by calling the roll. We have
6	agency appointee Becky Dempsey, a new appointee from the
7	Department of Agriculture.
8	MS. DEMPSEY: Present.
9	MR. IRVINE: Jessica McKay is not attending.
10	David Danenfelzer?
11	MR. DANENFELZER: Yes.
12	MR. IRVINE: Jim Hanophy?
13	MR. HANOPHY: Yes.
14	MR. IRVINE: Steve Ashman is attending for Marc
15	Gold. Jennifer Edwards for Laura Vanoni.
16	MS. EDWARDS: Here.
17	MR. IRVINE: Then we've got Jimmy Perez for
18	Jonas Schwartz.
19	MR. PEREZ: Here.
20	MR. IRVINE: Right there. Let's see, governor
21	appointees, Doni Green is not here. We've got Mike
22	Goodwin.
23	MR. GOODWIN: Here.
24	MR. IRVINE: Amy Granberry?
25	MS. GRANBERRY: Here.

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1	MR. IRVINE: Paula Margeson?
2	MS. MARGESON: Here.
3	MR. IRVINE: Felix Briones is not here.
4	Kenneth Darden is here.
5	MR. DARDEN: Here.
6	MR. IRVINE: And Jean Langendorf is here.
7	MR. IRVINE: WE have a quorum, so we are in
8	order.
9	As is our tradition, the first thing we always
10	do is ask if there's anyone here from the public who would
11	like to say anything to the council.
12	(No response.)
13	MR. IRVINE: Well, no one stepping forward,
14	we'll move on to the next item of business, and I would
15	also like to point out that at any particular item of
16	business, if there's somebody here from the public that
17	wants to comment, feel free. Participation is encouraged.
18	We would like to ask Kate Moore and Ashley
19	Schweickart to provide a report on the HUD Section 811
20	project and what's going on there.
21	MR. IRVINE: Did you want to do the meeting
22	minutes first, or no?
23	MR. IRVINE: Oh, I'm sorry. Meeting minutes.
24	I'd entertain a motion to adopt.
25	MR. GOODWIN: So moved.

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1	MR. HANOPHY: Second.
2	MR. IRVINE: Discussion?
3	MR. ASHMAN: Yes. Marc Gold recused himself
4	from the LAR exception item, sent an email to Ashley, it
5	was after the meeting.
6	MR. IRVINE: We'll let the minutes reflect
7	that.
8	MR. ASHMAN: Thank you.
9	MR. IRVINE: Any other changes?
10	(No response.)
11	MR. IRVINE: All in favor?
12	(A chorus of ayes.)
13	MR. IRVINE: Any opposed?
14	(No response.)
15	MR. IRVINE: The minutes are adopted.
16	Now Section 811.
17	MS. SCHWEICKART: All right. So there is a
18	handout that is in your packets that is a summary of the
19	main features of the State of Texas application for the
20	new HUD Section 811 Project Rental Assistance
21	Demonstration Program, and Kate took the lead, and I did
22	my best to help her out, on writing the application, and
23	so we wanted to just go through briefly with you the key
24	elements of that application, as many of you were
25	involved, both through the 811 team as well as we had many

of you come to the public roundtables that we held at the end of June to get the public's input on the application. So thank you for your participation.

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And just to go through briefly the handout and then we can see if anyone has any questions. So as you know, May 15 is when they released the NOFA and the basic point of the new funding source is to have a state housing or other appropriate housing agency provide project-based rental assistance in the development of supportive housing for extremely low income persons with disabilities.

And to be eligible, we had to create a formal partnership with the state health and human service agency and the state Medicaid agency called the Interagency Partnership Agreement. And there were several members of this council, Steve Ashman and Marc Gold from DADS, Jim Hanophy from DARS, and we also had some representation by Dee Anne Stonerman from DSHS and from DFPS as well. And so those people were integral in meeting and creating the interagency partnership agreement between the state health and human services agencies and TDHCA. And so there's a little bit more about that later in the handout.

But basically, we had to first come up with who our universe of persons were going to be that could be served through the program, and so the first section goes through targeting the funding and figuring out how we can

fill the gap in the existing continuum of assistance for persons with disabilities. So looking at the universe which is that it's a program for non-elderly persons with disabilities that are extremely low income, there were three populations that were targeted through the application.

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First is persons with disabilities exiting nursing facilities or ICFIDs which is persons with intellectual or developmental disabilities, exiting those institutions. The second is persons with serious mental illness. And then the third is youth with disabilities exiting foster care. So basically, the information that goes through page 2 describes a little bit about these populations and the information that we were able to get on the universe of persons that meet these qualifications and why they were targeted.

The second component of the handout that is in the application is about our implementation plan, so that was created through the eleven team meetings and the roundtables, and so basically, we had to come up with how are we going to direct these resources if we receive the funding.

So first is the component of the long-term commitment of services, so there was the health and human service enterprise. They had to commit to continuing the

services that are described in the interagency agreement. These are Medicaid services for persons with disabilities, and so it goes through a little bit here about the Medicaid program and the waivers that are included, the HCBS waivers, 1115, all those things. So that's first the commitment of services by our health and human service partners.

The second thing to look at in the implementation plan was the range, location and potential demand in terms of our properties. So we decided to look at seven geographic areas, and so due to just the sheer scope that we could be looking at, we wanted to narrow down to those specific seven areas which are listed there, and we're looking at metropolitan statistical areas. And then you can see we matched up the persons that are of those three targeted populations that I mentioned earlier into the seven pilot areas. That gives you a rough universe for the number of persons that we could serve.

And then starting on page 5 is the identification of supply of units that could help those persons that we could marry that project rental assistance. So we looked at pipeline units which would be multifamily units that have been funded and are either in pre-development or construction phases but have not received their certificates of occupancy. And then

existing units which are a part of the TDHCA portfolio, so looking at those, I believe we stated that currently we have a total of 19,848, so almost 20,000 units total between pipeline and existing within those seven geographic areas that we're targeting.

So we're looking at being able to go after the maximum amount that you could possibly go after in the NOFA in terms of funding, so we requested the full \$12 million, and on the final page it just says that given the parameters in which we had to calculate how many vouchers we would be able to serve over five years -- which the funding is over a five-year period -- we were able to look at approximately 385 units. So that was what was submitted in our application is that we are requesting the full \$12 million and will be able to serve 385 persons with project-based rental assistance.

So then the final part is the interagency partnership agreement which I kind of already went over, but just it shows in those bullet points what the agreement includes, so identification of the appropriate services, a description of the overall effort of integration and how the services will be provided and how the tenants access those services.

Another component is the identification of the staff that will be managing outreach, referrals and

waiting lists, so that way we can determine and refer prospective tenants and make sure that they are in supportive housing units in an effective and timely manner. Also a description of how the waiting list will be managed over time, also detailing the day-to-day management, coordination of the services for the residents. And then finally, an explanation of how we look to do certain things like dispute resolution, if there is a tenant-landlord dispute and how we address those needs if they do come up. So that's the breakdown of the items that were in the application.

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Kate, I don't know if you want to add anything to what I just said, or if you want to open it up for questions.

MS. MOORE: Let's open it up for questions.

MS. MARGESON: What are the target areas? Can you run them down for me?

MS. MOORE: So mainly they're the urban areas, the big ones, Austin, Dallas, El Paso, Houston, San Antonio, but we also added two communities and we wanted to add something that would give us more of a rural flavor because we're considering this as a pilot, this is a demonstration NOFA from HUD and this also would be a demonstration for us for how it would be implemented, and so we added Brownsville and McAllen into the mix.

1 MS. SCHWEICKART: Other questions? Mike. 2 MR. GOODWIN: The first comment is the people who put the agreement together must have done a Herculean 3 task. Kudos to the people who participated because it's a 4 heck of a deal to get something like that ironed out and 5 committed to writing in such a short time. 6 7 But the next question is: Are either the application and/or the agreement available on the web if 8 9 you wanted to read them? 10 MS. MOORE: No, they're not currently 11 available. We can talk about that. I can request that 12 they be put up. MR. GOODWIN: I'd just like to get a copy and 13 14 go through it on my own. MS. MOORE: You can't find anything wrong with 15 the application. 16 (General laughter.) 17 MR. GOODWIN: From my standpoint on the 18 development side, it would be interesting reading and help 19 20 me understand because I've got a couple of properties that I might try to sneak a couple a vouchers out of, just need 2.1 22 to know how to approach those two properties to get that 23 done. 24 Sure, okay. We can do that. MS. MOORE:

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MR. ASHMAN: I don't think you're going to see

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that level of detail in the application.

MS. MOORE: We're going to have a competitive NOFA and you'll be able to see the screening criteria that we have as a threshold for the properties.

MR. GOODWIN: Well, the other reason is I've been asked by the Southwest Affordable Housing Management Association to talk about the 811 program at their annual convention at the end of October, I think, and I told them that we may not get it, and they said it doesn't matter, people want to know what's happening because there are several active groups in Texas that always apply.

MS. SCHWEICKART: Well, and we understand that there may be future years availability, so if we're not awarded this fiscal year, there's a possibility we could apply.

MS. LANGENDORF: Very competitive.

MS. MOORE: Yes. Two-thirds of states applied, so it's very competitive.

MS. SCHWEICKART: Well, the total amount is \$85 million over five years. They originally said that they were going to award between nine and sixteen applicants. We heard mumblings and grumblings that maybe they'll try to award more if they think that the program designs of more than sixteen are sound enough, but that would probably mean that states would not be getting the amount

that they originally asked for.

So right now all we have is the list of people who applied, that was released by HUD, and it looks like from that list that they haven't actually narrowed down the ones that have met threshold criteria such as having the partnership with the state health and human service and Medicaid agencies. So I think that they're still in the early review stage at this point.

MS. MARGESON: When you said it's over a fiveyear term, that means that we have that amount of time to sign up the 85-, let's say. Right?

MS. MOORE: We put together an implementation schedule and so we estimated some time that it would take us, once we were awarded, to release the competitive NOFA, and then we would have to go into contracts with properties, and then we estimated it would take us nine months to start rolling it out incrementally, and so we knew we can't get them all out on the street in one month, for instance. And so we have a schedule that we submitted to HUD with a timeline of how long that would take. And so it's five years from the time that the contract is signed with the property, and so the contractor signs, they have five years, and then HUD is telling us that they anticipate an annual renewal based on that. And that's their history is they usually honor those commitments

1 because they have to enter into a 20-year use commitment. MS. MARGESON: That was my next question. 2 MR. HANOPHY: So as I understand, there's a 3 4 fixed amount and if they pick more providers, the slice of the pie is smaller, and I assume you guys have created 5 some sort of cost per formula for whatever amount there 6 7 is. MS. MOORE: Yes. The concerns for us, too, 8 9 would be admin, so there's a 5 percent admin, and so the 10 administrative costs don't necessarily decrease a lot. MR. HANOPHY: Right. I was going to say is 11 there a worth it point to you. 12 MR. ASHMAN: That's a good point. 13 MR. HANOPHY: That at some point if a certain 14 15 amount of money is available it's not worth it at this point. Have you guys had that discussion? 16 MR. IRVINE: Yes, we've had that discussion. 17 We actually crossed the worth it point when we decided to 18 19 go forward with the program, but there's worth it and there's worth it. I mean, we will have to subsidize it. 20 21 MS. MOORE: We were subsidizing it anyway, and DADS was subsidizing the administrative side already 22 23 through Money Follows the Person, we're receiving CMS admin funds, and so we calculated using those 24

administrative funds to help us administer the program.

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1 MR. GOODWIN: I'm sure that that helped on the 2 application that state agencies are already kicking in money to support the program. 3 4 MR. HANOPHY: Agreements are nice but nothing talks like money. 5 6 MS. DEMPSEY: Was there a match required? MS. SCHWEICKART: No, there wasn't a match 7 required. We just had to specify very specifically where 8 9 we came up with the admin, and so we say in the 10 application that in terms of the staffing cost, that part 11 of the staffing cost is going to be taken by the CMS admin 12 funding that we received through DADS. MS. MOORE: You could receive points for match, 13 but you had to commit operating costs for 20 years which I 14 15 would be surprised if any state would. That would be interesting. 16 MS. SCHWEICKART: Any other questions? 17 been told that November 15 is the expected date to hear 18 19 back from HUD, so we hope that they will stick to that 20 date, we don't know yet, but that's the time frame we're looking at. 2.1 22 MS. MARGESON: I thought they had to make those 23 allocations by the end of the fiscal year, by September 24 30.

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MS. SCHWEICKART: That isn't what was written

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in the NOFA.

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MS. MARGESON: That's interesting.

MR. HANOPHY: I just want to say you guys did a great job. You really kept everybody focused. We had the easy part, we just showed up at meetings and said a few things, and you guys really did a great job of getting this out.

MR. ASHMAN: It was getting a little tense towards the end getting all these signatures, review and signature.

MR. IRVINE: Anything further on 811?
(No response.)

MR. IRVINE: Well, next we have a status update on the comprehensive analysis of service-enriched housing financing practices. Is that what our call-in is?

MS. SCHWEICKART: Yes. Kevin, Jim, are you on yet?

(No response.)

MS. SCHWEICKART: It is 10:33, I told them to call in at 10:30, so they may be able to get on, but if not, that's okay.

So I just wanted to briefly talk about the contract that we awarded. So as you recall at our last council meeting in May, members voted on a proposal that TDHCA utilize funding allocated towards council activities

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to hire an outside vendor to conduct the comprehensive analysis of service-enriched housing financing practices. Thank you for all of your input on the scope of work.

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We put the RFP out in June. Unfortunately, we didn't receive any proposals in the first go-round, but then we re-released it in July and we had four proposals come in by our August deadline which was great. Then we assembled an RFP review team which included two council representatives, Jim Hanophy and Jonas Schwartz, and I thank both of them very much for their time and putting in to the review and scoring of the applicants.

And so basically, by August 28 we had awarded the contract to the Technical Assistance Collaborative, and I provided just a brief one-pager in your packets that gives an overview of who they are. They're a national nonprofit organization that has done research and consulting for state agencies of this very specific nature for 20 years, and they have worked with many states on service-enriched housing financing policies, recommendations, and so I think that they're going to be a great partner for us.

And we're going to get started fairly soon
here. I've already had several conference calls with
them. Jim Yates is a senior associate there who is going
to be our project manager, and then the supervisor is

Kevin Martone who is the director of behavioral health with TAC.

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So just to break down a couple of the details, as you recall, in the RFP that we put out we asked that they select a minimum of four and a maximum of seven states to look at for the analysis. We included North Carolina, Pennsylvania and Louisiana as states that we wanted, and that was because those states were used as the models for creating the Melville Act and the new Section 811 program, so we thought of them as places that we wanted to start. And then from there TAC added on three more states, so we have a total of six, so we have Illinois, Georgia and New Mexico, as well. So that's the list of organizations that TAC will be contacting, going and going onsite visits with each of them, speaking not only with the state agency staff and the housing and health services world, but also speaking with developers and property managers of properties that are engaged in service-enriched housing. So they'll be doing that.

And if you look down at the summary of work plan deliverables and schedule of performance, this is to give you kind of our time frame breakdown. So there were three main tasks that the RFP outlined. The first was the comprehensive study of nationwide best practices in service-enriched housing financing and development. So

they will have a draft report by month four and then a final report by month five. And if you see on the asterisk, month four draft reports will be submitted to council so you guys can take a look, provide your feedback, give us any input that you want TAC to have and we will submit that to TAC.

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Also, the second item is the production of recommended actions for providing service-enriched housing in Texas, and so their comprehensive analysis and recommendations draft report will be month eight. Again, it will be provided to the council to provide any of your input and feedback on that draft report, and then final report month nine.

And then the third component that is requested is the training materials, so they're going to be providing two sets of training materials. The first set is for state agency to state agency training so that our housing and health services staff can understand each other and be conversant in both. And the second set of training materials is state to local so that we can make sure that we're using all this best practice understanding to train our local providers and participants, and so they'll be providing that in month ten.

Did I hear someone on the call?

MR. MARTONE: Hi, Ashley. It's Kevin Martone

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from TAC.

MS. SCHWEICKART: All right, Kevin. Thank you for joining us. I was actually just giving the council a breakdown of what we're doing, but I'll let you introduce yourself.

MR. MARTONE: Sure. Hi, everybody. Kevin
Martone. I'm the executive director for the Technical
Assistance Collaborative in Boston. I apologize for not
being able to get out there today for the meeting, but
myself and Jim Yates, who is going to be the project
manager for this work, we actually had prior commitments
in other states. He's out in Phoenix today and I'm
actually in North Carolina. Ashley had asked that we join
the call and just do a brief introduction and say hi to
everybody and maybe answer any brief questions if there's
anything out there that you want to talk about.

MS. SCHWEICKART: Great. So basically, for the upcoming activities and maybe Kevin can answer anything about the upcoming activities, but on the second page of your handout if you flip it over, we are going to have our onsite kickoff meeting, so TAC is going to come to TDHCA to have an onsite kickoff meeting, and we're hoping that will be in about two weeks' time. And they're actually going to spend a couple of days here to do interviews with some key informants in Texas so they can better understand

Texas's programs, funding sources, and get an
understanding, both from the state agencies staff but also
from key stakeholders in the community, be they advocates,
developers, service providers.

So there are a couple of things that we would
really like your feedback on as council members. The

really like your feedback on as council members. The first thing is that we really think that there should be a council representative for this project, so someone from the council who can call in to the monthly conference calls, who can be at the kickoff meeting, who can be the council face for the project. So does anyone want to volunteer for that position?

MR. HANOPHY: All in favor of Paula, say aye.

MS. MARGESON: What?

(General laughter.)

MR. HANOPHY: It's a shot in the dark.

MS. MARGESON: I was just going to nominate

you.

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MR. GOODWIN: We've got two people that aren't

20 here.

MR. HANOPHY: Yes. Who's not here?

MR. IRVINE: I tell you what, since it's not posted as an action item but only as a discussion item, if anybody wants to volunteer, just call me or Ashley. How's that?

MS. SCHWEICKART: Yes, that sounds like a great idea. So if you could let us know within the next week, that way we can make sure that you are a part of our kickoff.

Another thing that we really want the council to help us out with at the start of this whole thing as we begin is any recommendations that you have on persons to speak with in Texas to get a good understanding of how our programs work, how our policies are also, to understand what the state legislature has put in place around our programs, or any stakeholders that you think TAC should really reach out to.

I'm assuming, Kevin, that you're going to be reaching out to the council, as well, but I just want to get their perspective on if there's anybody that you guys want TAC to maybe pay attention to or as a suggested person to interview, please also send an email to me and give me those names and contact emails and phone numbers. That way we can pass them along.

MR. IRVINE: And I'll only fit one telephone introduction right here, we have Cameron Dorsey with us. Cameron is our director of multifamily programs, and Cameron, you'd be a great person to interface with TAC.

MS. LANGENDORF: With that being said, I'm looking at the timeline and it looks like we'll have

recommendations next April. How does, and particularly as to the housing agency, TDHCA, figure recommendations will be considered and filtered through your processes?

Because right now you're doing a QAP.

MR. IRVINE: We're doing the 2013 QAP right now.

MS. LANGENDORF: A two-year QAP, as I understand it.

MR. IRVINE: I has the ability to be extended for a second year, but I would anticipate that our QAP is probably a few years off from getting stable enough to be a two-year QAP. So this quite likely will be a one-year QAP. So as recommendations come forward, there's certainly going to be things that we consider.

Also, as always, everybody, our QAP process is a very, very public process. We have online discussion forums, we have roundtables and working groups, and we have a board meeting where people are not shy about coming to the microphone and sharing their ideas. So anybody and everybody that wants to participate in that process, come one, come all.

MS. LANGENDORF: And we do, I mean, we have.

And I guess as you all know from some emails my

frustration, mine and I think other council members, is

we've been appointed to this committee, it was created by

the legislature to address service-enriched housing overall. So we've been at it now for three years and we keep running into this, having other experiences serving on committees to where -- PIAC, Promoting Independence Advisory Committee, that's been around for a long time, but every year there's a plan made and every year those recommendations are considered by the agencies and we get responses back. I mean, I feel like we have an impact with PIAC, or PIAC has had a huge impact.

This committee, on the other hand, I feel like we meet, we make recommendations, and our recommendations are like gone nowhere, nothing has changed, nothing has been considered. We're told to show up at hearings representing the council.

Somehow we need to get a process. I know for myself, personally, I'm not going to serve on this, and the Governor's Office knows this, if we don't start having some responses, because I agreed to serve on this and agreed with the Governor's Office to do this, but it was truly with the idea that our reports would not sit on shelves, which is what I absolutely feel like they've done.

And with this particularly, I have the highest regard for TAC, have watched them for many years. I think they will have very concrete recommendations -- pardon the

pun -- but I need to feel somehow that we're going to be able to impact the Department of Housing, which is what a lot of this is directed towards, Tim. It's frustrating.

MR. IRVINE: Well, I would respectfully refine that view a little bit.

MS. LANGENDORF: Okay.

MR. IRVINE: I view this as a council whose charge is directed towards the process of conveying these findings and recommendations and so forth to the governor and the LBB. I view this as a collaborative source for getting input on all of these issues so that they can go to the people who can make policies and fund them. I do not believe that it's really a council that should be impacting any one of its specific constituent agencies. I think the constituent agencies need to understand and respect each other and certainly collaborate and coordinate and all of those kinds of things, but I do not view this as a council that is specifically charged with providing input to the agency on how it runs its programs.

And I, again, extend the invitation to people who want to participate in this process. I think you're participating from your independent perspective and not necessarily as a member of the council. For example, I'm a member of the council and I can't really take a position of advocating for one approach or another when I'm making

recommendations to my board about the QAP and so forth. The QAP is their rule. I'm conflicted in the whole matter.

We certainly go out of our way to make sure that the board hears the input. We provided the excerpts from the plan and the recommendations and so forth to the board, but beyond that, we're pretty circumscribed.

MS. LANGENDORF: Okay. That helps me.

MS. SCHWEICKART: Are there any comments for Kevin while he's still on the phone, or questions for TAC as they start this project?

(No response.)

MS. SCHWEICKART: Kevin, are you still there?
MR. MARTONE: Yes, I'm still here.

MS. SCHWEICKART: I think that we don't have any other further questions, but I will make sure to pass along any of the recommendations that the council has for stakeholders to interview and who the council representative will be on the project, as well, to you.

MR. MARTONE: Yes, that's great. And we're very much looking forward to helping you all with this project. I mean, I guess if there's one comment I could make in response to the last discussion that happened, I think our goal really would be to give you a comprehensive report, and I think we get that when you're in states and

states, whether they have their own fiscal issues or their own political issues and things like that, we want to be able to give a report that can give some recommendation of things that are not necessarily easy to do but that are very manageable within the current environment, to make changes on to improve things.

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And then some of the recommendations may be a little bit more policy oriented, or sometimes, frankly, they may cost more to implement, but we want to give that report there so that the state or the council or whatever jurisdiction has retained us has sort of a menu of options to work from to implement, so even if it was on the side of doing less, changes still can be made in the system.

And I think just from even before you're even really starting to do any work in Texas right now, from the outside looking in, we know that you guys applied for the 811 application, we know you have some balancing incentive money on the Medicaid side, so there's ingredients there that I think we can work with and hopefully help you guys out with.

MR. IRVINE: Great.

MS. SCHWEICKART: Thank you so much, Kevin.

MR. MARTONE: All right. Looking forward to seeing you guys. Bye.

MR. IRVINE: Looking forward to meeting you.

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Anything further on that item?

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MS. MARGESON: Yes. On the training component of the contract, are we going back to the whole notion of training the state agencies about what each of them does so that the other knows? Is that what we're talking about?

MS. SCHWEICKART: Right. I think that what we hope to do with the training component is to provide an understanding between the housing agencies and the health and human service agencies of the programs that are currently in place in those agencies, how they are serving the targeted population of the council, with the target population be persons who could benefit from service-enriched housing, so how those resources are currently in play in the State of Texas, where they are, how to access them. So that way the state agencies know the current activities of their fellow state agencies in providing assistance and resources to that population.

And hopefully, I think that we can start having a more fruitful collaboration between those state agency players because they're more educated on each other's programs, so the possible connecting of programs or providing that input, that feedback from a different perspective.

MS. MARGESON: So as this curriculum is

developed, then what happens with it? I mean, who presents it? How would it just not lie on a shelf or whatever?

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MS. SCHWEICKART: Well, I think that the implementation of the webinars and power point presentations that TAC provides, I think that that fits very well into this council and I think that it's something that we can undertake. They're giving us the tools, they're giving us the materials and the resources, and I think that we can go forward with implementing the training.

MS. MARGESON: Would it be on a management level, the training, or like the line staff that works with people? How do you envision that?

MR. ASHMAN: Well, I think one of the things that we want to do with it is we get it down to our regional directors and managers, as well as the local authorities that we work with for individuals with intellectual disabilities so that they can learn about housing and the housing options that are available out there. I'm not sure all of our counterparts know much about housing, so we could filter that down to the appropriate staff. I mean, I'm not going to suggest it's going to get to 30,000 people, but I think some of the people that need to know, case managers and people that

are working with our mutual clients ought to know about the types of services that are available on the housing side, as well as our sister organizations, if they don't know that already.

MR. IRVINE: So yes, I would think that the training would go down to the line level staff. That's the only way it will ever really have an impact.

MS. MARGESON: That's right. That's what I was thinking. I don't know how I missed it, that was part of the contract.

MS. SCHWEICKART: We really did want to incorporate that, given that it's one of the statutory obligations of the council is to make sure that there are persons conversant in both housing and health services, and I think that's something that has been on our radar screen and having their expertise in the crafting of the materials, I think will be really helpful in moving it forward.

MS. MARGESON: Well, yes, I know it was on the radar and part of the mandate, but I just thought it was going to be done in-house, I guess.

MR. ASHMAN: And I don't know on the timingwise because it looks like they'll be here the end of September or maybe early October, but with TAC talking to different advisory groups or advocates and consumers, I wonder whether or not drawing some of these committees that we currently have available what we have, would like people coming into the room and maybe they could come in and discuss housing with those folks too to get a broader view.

MS. SCHWEICKART: Absolutely. And it's one thing that's on my to-do list for TAC is to actually see for those who are out of the Austin area, stakeholders, to see what kind of timing they have and if it's possible for them to come in person. If not, then we're going to do conference calls with those individuals. But yes, if there are meetings that are happening the last week of September that we're already aware of, whether it be any cross-agency councils or other organizations that are meeting, please let me know. I would like TAC to be able to sit in on those meetings and possibly ask some people to talk with them for maybe just half an hour after those meetings, something like that. So yes, let me know.

MR. IRVINE: To the extent that coordination is an important part of our charge, does it make sense for them specifically to target the geographic areas that we're targeting in 811 and identify people in each of those regions that they could talk to.

MR. ASHMAN: Yes, that would be a good idea.

And typically, what we do once we get a notice from TDHCA

about a meeting, we'll broadcast it through our website to our list serve too, and hopefully we get some participation that way.

MS. SCHWEICKART: Any other questions or conversation around the comprehensive analysis?

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I'll probably be in deep trouble, MR. GOODWIN: I stay in trouble most of the time anyway, but I want to go back to Jean, as someone really outside of outside. have seen in sitting on the 811 and some of the things that have gone on between the agencies that we have had an impact in the coordination liaison interest that goes on. Take the 2-1-1 project that's going on now that didn't exist before for getting information out on both housing and services on a single site statewide. But you're somebody in this process that I think they ought to talk to because you're on the front line in trying to figure out how to finance and how to bring services and how to beat the dead horse, if you will, because you've been doing this very extensively, and I think you'd have valuable input if you're willing to give it, because, like I say, you fight that on a daily basis and I don't know anybody that probably knows as much about the matter as you do. And you can have all the leftover donuts.

MS. SCHWEICKART: Oh, yes, there's lots of donuts. Do you want me to pass them around? Mike brought

them so nicely.

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MS. MARGESON: Going back to that discussion and what Jean said and then Tim's response, and I know that the original legislation was that we would make recommendations to the legislature and all of that, but where is TDHCA's position in supporting the recommendations that we make?

MR. IRVINE: Well, we certainly have supported service-enriched housing as a significant objective that we consider when we're drafting rules and creating our programs.

Cameron, could you come up to the table and kind of update them on where we are with the current draft of the QAP?

MR. DORSEY: Sure. We have currently done several things to the 2013 QAP. I think most significantly, this is the first year we're going to have specific point incentives that are reserved only for supportive housing.

MS. MARGESON: Supportive or service-enriched?

MR. DORSEY: Supportive housing.

When I reviewed the definition of serviceenriched housing, it is a great overarching conceptual definition, but in terms of how to implement it, I find it difficult to figure out how to implement that definition. A good majority of our housing could argue that their types of transactions meet that definition. You know, when I reviewed the definition I went and also reviewed the actual services that our properties provide just routinely, and arguably, most of our properties could meet that definition.

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I know that that's probably not what the intent is, but having a very clear, objective and measurable definition is really important for the Qualified Allocation Plan because when someone prepares an application, and it costs roughly \$40- to \$50,000 to prepare, without having a clear, measurable, objective definition that they know that they will or will not meet is incredibly important.

So we did not refine the definition of supportive housing for that reason and because I think that definition has an impact on rules outside of just the QAP, for example, under our real estate analysis and underwriting rules. The debt-free language, the requirement that supportive housing not have debt that's imbedded within that definition is an incredibly important component that links in with other sets of rules within the department. So supportive housing receives certain benefits from an underwriting perspective under the underwriting rules because of the debt-free nature of a

supportive housing transaction, and we needed to maintain that linkage.

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That said, we have tried to build in point incentives. Like I said, this is the first we've been able to do this and the first year that we really anticipate more differentiation in the scoring within the QAP such that I think in following years we may be able to make some progress in having some kind of niche incentives that have been very difficult in an environment where the scoring is incredibly flat, and so any point incentive almost becomes a necessity of every single application, and so that's a change where we can have incentives for one or another type of thing where it won't impact every single applicant that is trying to seek funds.

MR. IRVINE: So we really are working to find ways that we can provide more units that serve truly lowest income persons with meaningful services.

MR. DORSEY: Right. The two criteria where supportive housing receives benefits that only are reserved for supportive housing are under our rent levels item where there's a tier for 20 percent of the entire number of low income units are targeted for 30 percent of AMFI, and then in the tenant services portion of the QAP.

MR. GOODWIN: You said something that my brain went into neutral, that supportive housing doesn't support

debt.

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MR. DORSEY: That's right. Over the years we've had an evolution in the definition of supportive housing, and the reason is because it's incredibly difficult -- oftentimes service-enriched housing or supportive housing is an I-know-it-when-I-see-it type of thing. It's really hard to draw very clear, objective, bright lines as to what is and what isn't. And so in years past we've literally had for-profit developers that identified some benefits from an underwriting perspective and so they elect supportive housing, and we've been unable to clearly distinguish that this isn't a supportive housing deal when looking at it I know that it's not a supportive housing deal, so we've had this evolution in the definition.

And supportive housing transactions generally, the ones that we want to incentivize getting done, are sponsored generally by nonprofits that have a goal as their core mission the provision of supportive housing, and thus, provide much more intensive supportive services and voluntarily target much lower income levels than a more conventional tax credit transaction would. And as a result of those voluntarily targeting much lower income levels, they come in with no debt, they are basically a no debt financing structure that enables them to serve a huge

number of 30 percent households.

MR. IRVINE: Effectively, these deals can't serve those very low incomes and support debt, cash flow.

MR. DORSEY: Right. For example, at the 30 percent income level, you know, if you're talking about a more conventional 9 percent transaction, kind of venturing above 10 percent of your units targeted for 30 percent of AMFI, as you ratchet that up and get closer to 15 percent, you start knocking certain areas of the state out and eventually get to a point where they're just not a viable transaction from the perspective of their ability to support debt.

MR. GOODWIN: But isn't our, quote, new 811 program going to kick a leg out from under that? Because we're looking at pipeline properties and existing properties that are not debt-free properties but they're going to be big time supportive for the voucher, at least the voucher. The whole project is not supportive housing but those vouchers are certainly.

MR. DORSEY: Right. The transaction itself isn't really supportive housing, it was structured to work as a conventional tax credit transaction where some units will basically provide a supportive housing type option, but the income to the owner is going to be effectively the same, perhaps even a little bit better than what they

would get under a conventional tax credit property.

That's different than a structure where there is no operating subsidy and they're still voluntarily serving extremely low income folks.

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MR. DANENFELZER: To give everyone some context, I will take the blame for having kicked up the dust a couple of weeks go on this, and the reason it was because when I attended the planning meeting for the multifamily rules and I asked a question about service-enriched and why that definition was not in the rules, it was my understanding at that time that staff had not actually known that we had written a plan or that they had reviewed our plan and incorporated any of those ideas.

And my concern at that time was that, you know, from my perspective -- and I know I'm required to do this with just about everything -- is when plans like this come out, it is my job to make the policies for our corporation for my programs, and I need to know and be aware of the different plans that are out there, I need to read them, and if they have recommendations for our corporation or for any other housing entity that makes sense for us, I try my best to either understand those rules, integrate them and get them incorporated into our policies as best I can. That doesn't always work.

But what I felt at the time was that staff had

not actually even known that there was a plan, and it alarmed me. I communicated with Ashley about that. And I understand the need for us to continue to advocate as a group, but I also feel that this is a very large commitment of time and effort to advocate on a regular basis for these issues. And with all due respect, Tim, I do feel like it is a responsibility of not just the department but all of the agencies at this desk to take the plans that we develop, make sure their staff know that they're there and them make sure that our staff understands and can have a reasonable argument of why or why not we're accepting the recommendations from this committee.

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MR. IRVINE: Actually, Cameron may not have recalled it, but right after the document was created offering the different definition, we did go over it internally and we worked through why we wanted to keep to the current definition and structure, and in fairness, he probably just didn't remember it.

MR. DORSEY: Yes. And I think you'll find that there is actually recommendations built into that. Being on the spot on that dais, when the kind of preeminent issues of the day had been some of the other, the ICP lawsuit and making sure that we incorporate a judge's order and those things into the Qualified Allocation Plan,

so it had been certainly it had been a little bit further in the past.

MR. IRVINE: Several months ago.

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MS. MARGESON: Well, from an advocate's point of view, thinking about supportive housing, and I have to admit it's been a while since I was really working in the housing development related field, but what I remember in the past is that the definition was different than service-enriched housing because it was almost like mandatory, those certain services had to be provided onsite and then the residents had to use those services if they needed a service that was one of the ones provided. Like it kind of took away the freedom of choice, and that was one reason that the housing advocates weren't really -- we haven't been real thrilled with supportive housing.

MR. DORSEY: In our programs, particularly the Housing Tax Credit Program, the services can't actually be mandatory, and generally aren't mandatory, hopefully, so they are voluntary. They are provided onsite, the way we have our tenant services options, they are required to be provided onsite, but that doesn't preclude an individual from receiving offsite services or pursuing offsite services to the exclusion of taking part in onsite. Those are the options that a tenant has available to them.

MS. MARGESON: Jean, help me out with this. What are the other differences that I'm not remembering between supportive housing and service-enriched?

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MS. LANGENDORF: I wish I had that plan, we spent so much time on this. I don't know off the top of my head.

MS. SCHWEICKART: Do you want the definition?

I have the plan in front of me.

MS. LANGENDORF: I mean, we spent a lot of time on this, Ashley.

MS. MARGESON: I know the definition of service-enriched housing, but I mean, the definition we came up with. What I'm asking about is the definition of supportive housing as it relates to this discussion, not the whole ball of wax.

MR. DANENFELZER: Well, and one thing I would like to ask the department, and anyone to look at too, is while I understand where you're coming from from the QAP perspective and how you determine what a supportive housing project is and why it's important to define it in the way you have, I do think it would be beneficial to include also a definition of service-enriched housing into the multifamily rules overall because those rules do affect not only the QAP but all other programs that the department may run.

And if there is an opportunity to create a service-enriched housing program or a program which is not specifically for supportive housing, as the department has defined it, I still think it would be beneficial to go ahead and have that service-enriched definition so that the department can actually encourage those types of programs to be developed outside of the Tax Credit Program.

MR. DORSEY: I guess I would look to this group to help further refine some of the concepts in that definition because, like I said, as the person who's responsible for actually writing the rules and implementing the program, it's difficult for me to tell you how the deals that we fund on a daily basis don't meet this definition already.

MR. IRVINE: And I would say that really the way this ties back to this particular discussion item that's on the floor right now, or table, is that we will come out of this with some recommendations that will have had the benefit of TAC's input based on input from everybody else, and we'll say, hey, these look like best practices and we'll absolutely dial those into our thinking as we develop the next QAP.

MS. SCHWEICKART: If there's no other discussion, we do have some more items and I think we have

some people who have some time constraints here.

MR. IRVINE: Let's go.

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MS. SCHWEICKART: All right. So the next item on our agenda is discussion of state agency legislative appropriations requests. So this is an identical item to two years ago which is that prior to the start of each legislative session each state agency submits an LAR which communicates to the Governor's Office and the legislature baseline funding needed to continue the agency's current operations, and I asked the state agency representatives that are here today just to give a brief update on their legislative appropriations requests and anything that is pertinent to the mission and purpose of the council.

And I know that, Jim, you are going to be talking to the LBB next at 11:30, so why don't I let you go first.

MR. HANOPHY: Okay. Well, I'll just hit a very brief overview. Of course, within DARS we have four main divisions and for our exceptional items request we're focusing on early childhood intervention, the VR program, Centers for Independent Living, and deaf and hard of hearing services. So those are the four major areas that we'll hit upon.

Early childhood intervention, as you'll recall, last legislative session that program underwent some major

changes in the structure. The funding, there was a reduction in the amount, the ARRA funding helped it survive, and so essentially the exceptional items request is to keep up with the additional cost but also to increase based on the forecasted growth based on the eligibility criteria. What occurred last session was narrowing of the eligibility criteria, and for those of you who don't know, the early childhood intervention serves kids zero to three with developmental delays, and we deliver that mostly through contract services.

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Anything I talk about that has federal dollars attached to it, ECI fits under the category of entitlement, but the elephant in the room is sequestration, so we prepared our LAR with no anticipation of that, it was just business as usual, so to speak, but obviously, ECI might be one area impacted by that.

We also run an autism program for folks who are three to eight years old with autism. It's intensive ABA training, applied behavioral analysis training, which is the evidence-based practice for kids with autism, very successful. We deliver that through contract. This is probably our largest percentage of growth but it's still a relatively small program, but we want to add four additional contractors in the state to provide the services, Lower Rio Grande Valley, West Texas, Panhandle

Area, Far West Texas, and then North East Texas to serve another 310 kids a year.

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The largest program within DARS is the Division for Rehab Services and the public VR program which is also sliced into the division for blind services. We're a four-to-one match program. Historically we have always been able to match. Last legislative session our base bill came in considerably lower than what was available for match, however, the legislature funded us to avoid the maintenance of effort penalty. Our MOE is calculated as the amount of GOR from the previous two years, so our request is to not only recoup those dollars with additional GR, part of our formula that we could have gotten but also allow for the grant growth which we anticipate to be about 1.8 percent. In the Rehab Act there's an automatic COLA, cost of living adjustment, for the VR program.

Again, having said all of that, I don't think there's going to be any money because the sequestration estimates are everywhere from 7.8 -- there's three scenarios that are being laid out: 7.8, 8.8, and 13.2.

And some of that or all has to -- that's a weird way of saying it -- that all relates to whatever decisions are made on Department of Defense spending, at least that's my understanding at this point. So we've prepared scenarios

for that.

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I will say that we're kind of in a strange position in that we were fortunate -- who would have thought we were fortunate -- but we were fortunate in that we couldn't match all the dollars available, so a 7.8 or an 8.8 percent cut to our formula funding won't be as painful to us as the states that were 100 percent matched. We won't feel it programmatically but things will still be tight. Thirteen percent will probably push both programs into order of selection.

MS. LANGENDORF: Which we don't want to go.

MR. HANOPHY: It's an incredibly time-consuming and expensive proposition on the order of selection, so we hope not to do that.

And what we plan on using our exceptional items for, if we by some miracle get them, is to increase the level serving transition students, transitioning from high school to work, and really create a pipeline with some of our businesses, accessing some of the newer technology. And then also we operate the Business Enterprise of Texas which is the Randolph Shepherd Program, we have 121 BET facilities, these are facilities operated by owners who are blind, part of our exceptional item request is to fund the refurbishing of six of those centers.

Centers for Independent Living, there's 27 in

Texas, they provide essentially four core services: information referral, independent living, peer counseling, and individual assistance and advocacy. DARS funds 15 of them, most of these centers are either federally funded, DARS funded, or a combination of both. In the past two legislative sessions the legislature with GR has funded five new centers. The State Independent Living Council's plan says it would take 42 just to meet the minimum needs of the population. Our exceptional item is to bring all the centers up to a level of funding, base funding of 275,000, and to add three more centers, and the areas we're targeting, College Station, Wichita Falls, Victoria and Sherman are the areas that we would look at.

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MS. MARGESON: Not Rockwall?

MR. HANOPHY: Pardon me?

MS. MARGESON: Not Rockwall?

MR. HANOPHY: Not Rockwall. Sorry.

Let's see, what else. Deaf and hard of hearing services, we do the certification of interpreters, and two of our exceptional items are twofold as far as that goes. We want to increase the number of interpreters. There are several parts of the state, the Panhandle, Permian Basin, Midland-Odessa, El Paso, things like that where there's just a chronic shortage of interpreters. Across the state there's a lack of Level 3 interpreters or highly skilled

interpreters, and so those folks are missing assignments or canceling assignments. Rio Grande Valley, Laredo, for example, has one interpreter in the whole city. So we want to increase that, plus we need to develop our court interpreter certification exams and also redevelop our general interpreter certification tests. It's a performance-based test and it's validity loses steam over the course of time as people get used to the test and word gets out, so that's one.

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We're also looking to increase our resource specialists. We contract with resource specialists around the state for folks who are deaf and resource specialists for folks who are hard of hearing, and again, we're looking to increase those in areas where there's population growth, Houston, San Antonio, Lower Rio Grande Valley.

So that's essentially our exceptional items requests. Like I said, the elephant in the room in our federal programs is sequestration, but other than that, we're moving forward.

MS. SCHWEICKART: Any questions for Jim?

MS. MARGESON: One quick question. I didn't catch it, were you proposing that the eligibility criteria be restored for ECI?

MR. HANOPHY: For ECI, no. This is just to be

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able to meet the caseload growth expectations under this 1 2 newer criteria. 3 MS. MARGESON: Okay. MS. SCHWEICKART: If there are no other 4 questions, I guess we can go down the line. Becky. 5 MS. DEMPSEY: Well, I'm going to make this very 6 easy because we have no exceptional items or anything in 7 our LAR pertaining to this council. 8 9 MR. ASHMAN: I've got it easier than you. 10 don't know. Marc is not here and I just don't know. 11 did post our budget recently on our web page and our 12 budget folks are preparing for an LBB meeting tomorrow, so I don't have anything. 13 MR. IRVINE: TDHCA lines up with Ag. 14 15 MS. LANGENDORF: Did you all ask for level funding on the Housing Trust Fund? 16 17 MR. IRVINE: Yes. MS. EDWARDS: Well, DSHS will make up the 18 difference. We're all about housing this time, and it's 19 about time, in my personal opinion. 20 MS. SCHWEICKART: Go ahead. 2.1 22 MS. EDWARDS: Well, I brought what Dee Anne 23 Stonerman worked on with Allen pretty intensively, but also, because I've been working with my boss, Lauren 24

Lacefield Lewis, in program services, we're all doing

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housing, and actually, substance abuse is doing housing as well, so let me go into a little bit of what it is.

So this is over and above what we normally receive, this is the total exceptional item. So what we're looking to do is for the side that Lauren and I have been working on, we wanted to come up with some longer term rental and housing assistance. We're looking at roughly \$6.24 million a year, and we're going to request that being ongoing, and what we wanted to do was we did a data analysis of who really is currently homeless.

So we looked at the people who are currently receiving services from local mental health authorities or the North Star Region, and we came up with a total of 600 people per year we would serve, so I think the total was roughly it varied around like 1,500 people at any given time are receiving services from our local mental health authorities or from the value options providers and they are roughly homeless within a given year.

So we costed everything out and we said that maybe about 600 people per year that are currently receiving services, we want to provide rental assistance to them, and then we looked at what the cost of like a one-bedroom apartment would be, and the average cost utilities, so that's what that portion of the exceptional item would target, and that would be, like I said, about

\$6.24 million a year when it's fully funded.

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Then we have a tiny amount that would serve people who, through our data analysis we found really have some unstable housing like when they go and get their assessment done every year, these might be people who might be living with family members just out of convenience, or they move from place to place, so it's really unstable housing that they experience over a long period of time, and so we wanted to serve roughly 271 people a year and give them up to about close to \$2,600 a year for rental assistance.

So those two would basically be helping people who are currently receiving services in the community. And the other one that Dee Anne is doing is sort of like she doesn't really want to call it a waiver but this is the way she describes it: \$5.2 million in general revenue and then they would be able to get \$3.19 million in federal matching Medicaid funds; those would be available to address the needs of very high need and psychiatrically unstable individuals that have extended stays in state hospitals.

So through her data analysis, they found about 106 very high need individuals would be served in an HCBS program, and the dollars would be used to purchase more intensive services such as residential support, support in

employment, peer support and other services to help individuals establish their homes and adapt to stable community living. These projects would serve a select number of longer term and/or recidivistic state facility individuals who could potentially be best served in the community.

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In the mental health world, our supportive employment, supportive housing, peer services, those are not Medicaid reimbursable. They can get Medicaid reimbursement if they provide it as a rehabilitation service but we have a lot of training to do in the field about how you code your services when you deliver them to make sure that that's what you're doing, and so this has really been our push and it's going to be our push for several years to come because we have a lot of learning to do. And our individuals who are served in our communities, they just do not get hardly any housing support, so that's where we're going to put our focus.

The substance abuse side, just from experience in working an exceptional item, they're going to target an Oxford House living situation and that has high regard nationwide and evidence-based practice and everything, so I think they're asking for roughly like \$600,000, and that would be a self-sustaining project.

MS. LANGENDORF: Which we've heard quite a bit

as counsel about Oxford Houses. 1 2 MS. EDWARDS: Good. So they're pushing for it. MS. SCHWEICKART: And I have actually a 3 4 separate question. I know that there has been funding for the last two session for the Outpatient Competency 5 Restoration Pilot, and do you know if you're requesting 6 continued funding for that program? 7 MS. EDWARDS: We are, I believe. The way that 8 9 ours work is sort of unusual because it's almost like we 10 assume that it's going to be rolled into the base, but I'm 11 assuming that we're requesting that be continued. MS. SCHWEICKART: Yes. Because I saw that 12 during the 82nd session they actually added a couple of 13 LMHAs that are sites for that, so I thought that was a 14 15 positive growth. 16 MS. EDWARDS: The way that we got money for that was we originally got \$82 million for crisis services 17 and then the next year we got some money for like 18 transitional services, and they took money out of that 19 20 exceptional item to fund the additional sites for OCRP. So I'm not quite sure, if the transitional got re-funded, 2.1 22 I'd think that the pilots would go along with that. 23 MS. SCHWEICKART: All right. Let's see, last 24 one, Jimmy.

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MR. PEREZ: You know, I should probably take

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the same approach as Steve and say I just don't know. I actually emailed our budget division and asked if there was anything of note for this group. Two things were mentioned. One is the Balancing Incentives Program which I think there's someone else who is going to talk about it, so I'm not going to touch that.

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The other thing is an exceptional item request for \$15.8 million GR, \$39 million all funds, to expand the STAR PLUS Program in the Medicaid rural service areas. This would replace STAR funding and the CBA waiver program by 2015. It would be voluntary for children under 21 and mandatory for Social Security adults, SSI adults. And it would expand managed care to the aged and Medicaid related adults and children populations.

And if you have any questions beyond that, I'll have to get back to you.

MR. IRVINE: I believe that's everybody. Any other questions regarding LARs?

(No response.)

MR. IRVINE: Balancing Incentives Program.

MS. OLAH: For those of you who don't know me,
I'm Tara Olah. I work with DADS, I'm a senior policy
advisor, and I work with Steve and Marc in the Promoting
Independence Division. For those of you who are
unfamiliar with what the Balancing Incentives Program

is -- I'll refer to it as BIP from here on out just to be quick -- it's a federal grant opportunity that provides additional enhanced funding to certain states to help them rebalance their long-term service and support systems to provide more community care versus institutional care.

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It's only available to states that spend less than 50 percent of their Medicaid long-term service and supports expenditures on community-based services. Texas did qualify for that program based on federal fiscal year 2009 numbers which had us at around 46.9 percent on community-based expenditures, however, if we look at more contemporary data, we have already met that criteria which is good because that's one of the outcomes we're held to to participate in the program.

CMS requires participating states to give assurances that they will make certain what they call structural changes to participate in the Balancing Incentives Program, and the structural changes, there are three, include: establishing what they term a no wrong door eligibility and enrollment system, developing core standardized assessment instruments, and ensuring that all of our case management activities are conflict-free. Another criteria that I just mentioned in order to continue receiving the funding is to get closer to that target of 50 percent community-based long-term service

expenditures which, as I mentioned, we're already there.

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About a week ago CMS awarded Texas the grant which is exciting news, and if you look at the award letter and the terms and conditions that go along with it, you'll see a pretty enormous figure attached to it. The grant itself is \$301.5 million, so about a quarter of a billion. That's not an entirely accurate figure because it is based on projected community long-term service and support expenditures, and that includes our LAR exceptional items which, at this point, who knows whether those will be funded. We think a more accurate number on that is around \$288 million which is still sizable.

And we've already identified a number of what we're referring to as mandatory activities to ensure our compliance with those three structural changes, and we know we're going to have to do these things, and if you go back and read the BIP application which is on the DADS BIP website, it's online, if you go back and read it, you'll see that we're already committing to three activities.

One is that spending target of 50 percent, one is ensuring statewide coordinated coverage for eligibility purposes and enrollment, and we're doing that through an expansion of our aging and disability resource centers. So we have 14 online today, I think we're envisioning maybe doubling that over the next few years.

Another mandatory activity is implementing all necessary IT enhancements to achieve that no wrong door system, and very 10,000 foot, it's intended to better coordinate financial and functional eligibility activities. We are in the process of procuring a contractor to do a global enterprise-wide IT evaluation and then get back to us, probably in March or April of next year, with a report that essentially identifies where we are today, where we need to be to achieve minimum

compliance with the BIP, and estimated costs for how to

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get to that point.

There are a number of other activities that we mentioned in the BIP application that I'll just refer to as discretionary activities. They're not activities that we must do to ensure that we have implemented those structural changes, but they're activities that have been identified by leadership at the commission and at DADS and that have been supported by leadership and oversight downtown. And I'll just go through them really quickly. If you want more details, we can get those to you.

But one of them is an electronic life record for individuals with intellectual or developmental disabilities. The goal of that is to help ensure appropriate community placements, especially as individuals move out of state ICS or privately funded ICS

and into the community, and to ensure that we're providing the services that they need and continuing to monitor that service provision to make sure we're not under-providing and at risk of them going back into an institution, for example.

Another one is to establish regional crisis intervention teams. You've probably heard former Commissioner Traylor, now at the commission, talking about this initiative in legislative hearings. And these teams are intended to help individuals who have challenging behaviors in the community and help their family members and other support structures to provide the in-home crisis intervention and triage services to prevent an institutional placement.

Another one is to look at a new assessment instrument. Certainly this corresponds with one of those structural changes which is core standardized assessments, but this is just for individuals with intellectually developmental disabilities.

And finally, we just leave this open as any other initiative at the legislature's discretion to increase access to community services. And I say that just to underscore how political the BIP has been. It's gotten a lot of attention from the Governor's Office and from legislative leadership and oversight offices, the LBB

is very interested in it. We have a hearing tomorrow at 10:00 a.m., in the Reagan Building, to talk about the DADS budget and we have it on good authority that the BIP is going to be a conversational item there. So if you're interested in that, tune in.

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But we've certainly opened the door for any stakeholders, internal and external, to provide recommendations to DADS. And again, if you go to the DADS BIP website, you'll see a link to an online forum to provide project recommendations. There's also an email address that you can click on and email us with your thoughts about the program or how we should spend the money.

We've gotten 35 recommendations so far. We're in the process of finalizing our vetting process to implement those recommendations. It's looking like we will continue receiving them and having periodic stakeholder meetings to encourage people to provide us with their thoughts. We'll internally review those recommendations and submit recommendations to leadership at the commission and DADS, and any recommendations that executive leadership review and approve for further review will then go over the wall to leadership and oversight downtown for their review and approval. Every single project has to be blessed by leadership and oversight

downtown.

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As I mentioned, we've gotten 35 recommendations so far across the gamut. There really isn't a lot on housing at this point. I went back and looked at the list again today just to make sure I hadn't missed anything. A lot of the recommendations are about our IT systems, mental and behavioral health, direct service workforce, but not a lot on housing yet, so I'd encourage you to provide us with any feedback you have on how we could look at leveraging the BIP with some of the housing activities, potentially, that we're doing through the Money Follows the Person demonstration.

And again, I'd just encourage you, if you haven't reviewed the BIP application online, to have a look at it. There are discreet subsections in the application that specifically talk about the challenges with the lack of affordable, accessible and integrated housing and a need for, among other things, a sizable federal contribution to overcome that challenge going forward.

And just one last note that I have here, our stakeholder meetings, we're talking internally about posting for another one in the next month or so, and certainly I'll make sure that this council knows and that our partners at TDHCA know as well so that they can tune

in.

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And that's it. Do you have any questions for me about the BIP?

MS. MARGESON: Too many to ask.

MS. OLAH: Well, certainly, if you think of any other questions, Ashley knows how to reach me through email, by phone.

And this next one is going to be a lot shorter. I know I owe you an update on the Community First Choice Program as well.

This is another federal grant opportunity available to states. It provides participating states with a 6 percent enhanced FMAP in exchange for a state developing a state plan amendment in which the state provides a basic attendant service -- there's a little bit more to it -- attendant services, habilitation services and emergency response systems for any eligible individual who qualifies. And I say that because it's looking like that would be a sizable group of people in Texas, and that crosses all disabilities.

So certainly right now Texas provides Medicaid state plan attendant services to individual with physical disabilities through our Primary Home Care Program and our Community Attendant Service Program, but there is no analogous state plan program for our intellectual and

developmental disability population. So that would result in a whole new population receiving the basic attendant layer services through the state plan, and certainly at a tremendous cost, as well.

We are continuing to gather information to help us evaluate the feasibility of pursuing the Community First Choice Program within the context of a redesigned system that we've been talking about going into next session.

The eligibility requirements for this program are fairly narrow but would still encompass a lot of our populations today. The individuals to qualify for Community First Choice would need to already be eligible for Medicaid under the state plan, so it doesn't cover individuals enrolled in Community Attendant Services. Individuals would have to have an institutional level of care which was a relatively new requirement. In the pending rules, CMS didn't specify that those individuals would have to be in an institutional level of care. And then finally, individuals must basically require a nursing facility or an intermediate care facility level of care but for receiving Community First Choice services. I know that's all a mouthful.

There are a number of states that are pursuing Community First Choice and we're talking with them.

California is one of those, Maryland, Louisiana, Arkansas, and I believe out of all the states that are evaluating the program right now, California is the only one that has been officially approved by CMS, and I think that happened about a week ago.

And that is all I have on Community First Choice. Does anyone have any questions about that program?

MS. EDWARDS: Do they have to be actually living in the institution or could they have lived in one within a certain time frame?

MS. OLAH: It doesn't matter. The program is available to anyone who's eligible and qualified -- that's a little redundant -- but who's eligible and interested in those services. So as long as they're at an institutional level of care, like in our CBA program, I think one of the eligibility criteria is basically a nursing facility level of care. So individuals receiving attendant services through that program or through STAR PLUS, for example, would qualify for CFC.

MR. ASHMAN: Really it sounds like a diversion of keeping somebody out of an institutional setting and maybe giving them some supports until they actually get the full blown waiver for the interest list.

MS. OLAH: And that's kind of the idea of

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Community First Choice. What makes it so appealing is the promise of diverting people from institutions, serving them in lower cost settings in terms of cost sustainability going forward. We're looking at historical data on the Primary Home Care and CAS and STAR PLUS attendant programs and how they've kind of stemmed the growth in nursing facility admissions over the past 20 or more years, and evaluating how applicable that is to Community First Choice and what it promises to bring to the state. So stay tuned on that one.

MS. LANGENDORF: But the hangup here, BIP didn't require the state to come up with any money, CFC does require that.

MS. OLAH: Correct, that's right. So the BIP, we just have to meet those structural changes that I mentioned, and the IT enhancement is really kind of the biggest cost driver there, but even with the Rolls Royce of all IT enhancements, we wouldn't come near expending the grant amount attached to the BIP.

With CFC, just preliminary cost estimates are indicating it would probably cost the state anywhere from \$50- to \$80 million per year in GR to serve the CFC population.

MR. ASHMAN: And it would be interesting because California has been approved and they've had such

65 a budget problem, so they're getting a 6 percent increase 1 in their FMAP, it had to have been cost-positive for them 2 to do this or California wouldn't have done it at all. 3 maybe they did it through settlement of some lawsuits, 4 because they have been sued for the reduction of services. 5 We spoke with California a few weeks 6 MS. OLAH: 7 I've been put on too many projects since then to keep these facts straight, but I want to say that 8 9 California, it was almost a no-brainer for them because 10 they're already providing a basic service to all of their 11 populations. 12 MR. ASHMAN: So it's like Money Follows the 13 Person. MS. OLAH: This is just enhanced funding to 14 15 keep doing what you're doing. MR. ASHMAN: Yes. That's a no-brainer. 16 MS. OLAH: So certainly if you have any 17 additional questions after the council meeting today on 18 19

these two federal opportunities, you can direct them to Ashley and Ashley can find me. Thank you.

MS. SCHWEICKART: Thank you, Tara.

MS. OLAH: Sure thing.

MR. IRVINE: Thanks.

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MS. SCHWEICKART: I think that the only other item that I had was setting the next council meeting date.

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So typically we do September and then December, and we have been doing the first Monday of the month. I wanted to see if the first Monday of December was a workable date for everyone. That's the 3rd.

MR. ASHMAN: Did that work last year?

MS. SCHWEICKART: It did. I don't know if the 3rd jumps out. But you can always email me and let me know if you find out that there's something that's pressing. I just wanted to see if that was a placeholder for us.

MS. MARGESON: Well, just one comment or something that comes to my mind about that is that I'm wondering if our meeting allotment of funds would be better spent during session as opposed to having a meeting just prior to session. Plus, we won't even have the preliminary draft report, the first report from the contractor won't be available by then. I don't want to see us have wasted meeting time.

MR. IRVINE: Okay. So you're thinking of maybe pushing it back then? I mean, you make a good point in terms of the initial draft report that we're looking at from TAC, that would be October, November, December, January, it would probably be late January. I mean, I'm certainly open to the idea, Paula, if you guys want to delay, push it back. Are there any thoughts about that?

1	MS. GRANBERRY: I know that during previous
2	sessions every time we tried to schedule a meeting during
3	session the state employees revolted, so I would find that
4	interesting that we would be able to have two during
5	session because we ended up moving several meetings last
6	session to keep them away from conflicts.
7	MS. DEMPSEY: If you did do meetings during
8	session, I would think erring on early on the session
9	would be much more workable, the middle of January before
10	things really get rolling.
11	MS. SCHWEICKART: Sure. That's true. So I
12	mean, if we were looking at January.
13	MR. IRVINE: Early in the session the budget
14	people will be busy.
15	MR. GOODWIN: Won't we have the draft before
16	the end of December? That's what I've been worried about
17	is what I would call a sober review over the New Year's
18	holiday. If you look at the 28th as the kickoff, then
19	four months is the end of December.
20	MS. SCHWEICKART: What are you saying then
21	about when we should have it?
22	(General discussion.)
23	MS. SCHWEICKART: August 28 is the start date
24	for the contract.

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MR. GOODWIN: So September, October, November

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1	and all of December, so that draft report ought to be
2	showing up around New Year's, and early January would be
3	review.
4	MS. SCHWEICKART: Early January then?
5	MS. MARGESON: Session starts the 13th; that's
6	my birthday, that's how I know.
7	MS. GRANBERRY: I'm going to be in Austin all
8	session anyway.
9	MS. SCHWEICKART: So the first Monday of
10	January is the 7th. Should I write that down as a
11	placeholder, Monday, January 7?
12	MS. MARGESON: I just think we'll have more to
13	talk about then than we might in December, perhaps.
14	MR. GOODWIN: Seems reasonable.
15	MS. SCHWEICKART: All right. I'll put Monday,
16	January 7, and I will make sure that everyone gets an
17	email about that so that way you can let me know if there
18	are any conflicts that come up or you can think of. I
19	know it's kind of far out.
20	But, Paula, you make a great point, and that
21	will one of the main agenda items of that meeting then
22	will be review and feedback on TAC's draft report.
23	MR. IRVINE: Great. That's all I've got.
24	Motion to adjourn?

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MR. GOODWIN: So moved.

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1	MR. ASHMAN: Second.
2	MR. IRVINE: We're adjourned. Thank you.
3	(Whereupon, at 11:53 a.m., the meeting was
4	concluded.)

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MEETING OF: Housing & Health Services Coordination

Council

LOCATION: Austin, Texas

DATE: September 10, 2012

I do hereby certify that the foregoing pages, numbers 1 through 70, inclusive, are the true, accurate, and complete transcript prepared from the verbal recording made by electronic recording by Nancy H. King before the Texas Department of Housing and Community Affairs.

9/15/2012 (Transcriber) (Date)

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