# Supportive Services for Community Living

## FY 2018 Community Impact Report

Travis County Health and Human Services

Research & Planning Division

JANUARY 2019

# Supportive Services for Community Living

## FY 2018 Community Impact Report

Travis County Health and Human Services
Research & Planning Division


**County Executive**
Sherri E. Fleming

**Project Leads**
Courtney Bissonnet Lucas
Rochelle Olivares

**Lead Writer**
Korey Darling

**Research & Planning Division**
Lawrence Lyman, Division Director
Korey Darling, Planning Manager
Tara Carmean
Rachel Coff
Anna Lisa Conlin
Courtney Bissonnet Lucas
Rochelle Olivares
Octavio Ulloa


**Questions or Comments?**

For questions or for more information, please contact the Research & Planning Division at HHS_R&P@traviscountytx.gov.

# TRAVIS COUNTY
# HEALTH and HUMAN SERVICES

## PURPOSE

### Who we are:

A Department of Travis County that serves the community under the guidance of the Commissioner's Court

### What we do:

Address community needs through internal and external investments and services

### What we strive to accomplish:

Maximize quality of life for all people in Travis County

- Protect vulnerable populations
- Invest in social and economic well-being
- Promote healthy living: physical, behavioral, and environmental
- Build a shared understanding of our community

## VALUES

### We value helping people.

- We provide accessible, person-centered services with respect and care.
- We work to empower people through our service to them, always honoring the strengths and differences of the individuals and families of Travis County.

### We value the accountability and integrity of our staff.

- We value the diversity of our staff and the experience each of us brings to HHS.
- We honor our collective service to the public, including the careful stewardship of public funds.
- We value the quality services we provide to the community in a spirit of shared responsibility.

### We value cooperation and collaboration in the community at large and within HHS.

- We are interdependent and connected.
- We treat one another with respect and value effective communication and teamwork.
- We honor our partners in the community and engage with them to more efficiently and effectively serve our clients.

# Table of Contents


Introduction . . . . . 5

Investment Overview . . . . . 7

Any Baby Can of Austin, Inc.: CARE . . . . . 16

Any Baby Can of Austin, Inc.: Early Childhood Intervention Services . . . . . 18

Easter Seals Central Texas: Clinical Services . . . . . 20

Easter Seals Central Texas: Day Habilitation Program at Vaughn House . . . . . 22

Easter Seals Central Texas: Early Childhood Intervention . . . . . 24

Family Eldercare: Money Management . . . . . 26

Goodwill Industries of Central Texas: Supported Training & Employment Program 28

Helping the Aging, Needy, and Disabled, Inc.: In-Home Care . . . . . 30

Meals on Wheels and More, Inc.: Congregate Meals . . . . . 32

Meals on Wheels and More, Inc.: Meals on Wheels . . . . . 34

The Arc of the Capital Area: Case Management and Advocacy Services . . . . . 36

The Arc of the Capital Area: Guardianship Case Management Services . . . . . 38

Appendix . . . . . 40

Endnotes . . . . . 41

# Introduction

The Travis County Commissioners Court, through the Travis County Health and Human Services Department (HHS), annually invests over $19.5 million in community-based social service programs. These Department investments align with and supplement our direct services to meet the needs of local residents. Community-based organizations are frequently geographically and culturally embedded in the communities they serve and are often best positioned to provide needed services.

## Purpose of Report

The annual Community Impact Report provides an overview of HHS investments in health and human services. The *FY 2018 Community Impact Report* offers community context most pertinent to the services purchased, and details investment, programmatic, and performance information on the Department's social service contracts. This information allows policy makers, program managers, and others to better understand these investments, recognize accomplishments, identify areas for improvement, disseminate lessons learned, and highlight areas warranting further research.

## Organization of Report

This report addresses nine issue areas—Access to Basic Supports, Behavioral Health, Child and Youth Development, Housing Continuum, Planning and Evaluation, Public Health, Safety Intervention Services, Supportive Services for Community Living, and Workforce Development—as well as a pilot project under Holistic Family Services. The Investment Overview summarizes information from all nine issue areas and the pilot project. Each issue area section begins with community context and then provides performance highlights. Each program is classified into the issue area most closely aligned to its goals and objectives.

Although this report provides community context for individual issue areas separately, each issue area must be considered in a broader context. Community conditions related to a single issue area may have similar or related root causes and broad-level consequences. Current economic conditions also have a global impact on the community.

This report provides detailed information about each program covered by an issue area, including an overview of program goals, services provided, eligibility criteria, and funding. Also captured are each program's performance results, compared to its contractual performance goals, and explanations of notable variance (+/- 10%) between the performance results and goals.

## Notes on Methodology

Community context discussed in this report reflects the most recent information available at the time of writing. The majority of the social service contracts included in the report followed a fiscal year calendar (October 1, 2017 through September 30, 2018) unless otherwise noted. Program and performance highlights are drawn from contracts and reports provided by contracted service providers. Estimates from the American Community Survey have been tested at a 90% confidence level for reliability. In some cases, all noted, estimates were unreliable due to small sample sizes.

## Considerations When Reading This Report

Performance results provide only a starting point for understanding the impact of these programs. These summary statistics are not necessarily an indication of the programs' overall performance, but rather a snapshot of their performance over a one-year period. Within these reports, service providers offer explanations for variance in performance, which provides context and meaning to summary results.

Performance results do not reflect programs' full value to and impact on the community. Therefore, it is important to keep the following considerations in mind when reviewing program performance.

Readers should use caution when comparing output and outcome results across programs, as participant characteristics can significantly influence a given program's performance goals and results. For example, performance results may be lower for programs with clients who face considerable challenges (e.g., serious mental illness or addiction issues) and have little social support.

Factors beyond the program's control may also impact the program's performance. For example, the relative scarcity or abundance of jobs in the local economy will impact client employment rates for a workforce development program, regardless of the quality of training and support provided. Without controlling for these factors, the true impact or efficacy of the program on outcomes cannot be discerned.

Readers should also use caution when examining outcome results for programs with less than 30 clients, in which the outcome of just a few clients can greatly affect the program's total outcome result. In these instances, examining percentages may be less helpful than examining raw numbers.

Finally, this report captures a selection of performance measures, which may not reflect the program's full impact on participants and their families, peers, and neighborhood. Performance measures may not all be equal in importance or value to the community.

# Investment Overview

## Community Context

Older adults who have experienced an age-related decrease in mobility or cognitive functioning and people with disabilities often need support with life's daily activities and with maximizing their quality of life and engagement with the community. Federal and state policies, systems, and programs exist to address their fundamental needs and support the inclusion of older adults and people with disabilities in their communities. Despite the existence of these resources, there are barriers to full inclusion and gaps in systems and services. Local providers act as the service provision arm of state and federally funded programs, fill gaps, address barriers, and play a vital role in supporting older adults and people with disabilities to remain in their homes and engage in their communities. Exploring relevant data related to these populations can support planning to ensure programs and services are in place.

### Long-Term Services and Supports

Nationally, in 2014, about 13 million people age 18 and older needed assistance to perform daily activities (such as eating, bathing, dressing, managing medication, and doing housework).[1] Unpaid caregivers (relatives and friends) provide the majority of this type of care in the United States.[2] Those who are unable to depend on a family member or friend for help, or who need care beyond what a relative or friend can provide, rely on long-term services and supports (LTSS). These services may be provided in a home or community-based setting or in an institution such as a nursing home or intermediate care facility for individuals with intellectual and developmental disabilities.[3] Individual preference and federal policies[a] have facilitated the shift of long-term services and supports to home and community-based settings rather than institutions.[4]

Nationally, public funding (Medicaid, Medicare, and other sources[b]) covers the majority (70%) of LTSS spending, and private sources (out-of-pocket spending, private insurance, and other sources including philanthropic contributions) cover about one-third (30%) of spending.[5] Medicaid, the largest funding source for LTSS,[6] is a jointly funded state-federal program, implemented at the state level.[7] In Texas, the Texas Health and Human Services Commission (HHSC) implements Medicaid LTSS waiver programs for older adults and people with disabilities. The term "waivers" means certain traditional Medicaid requirements do not apply and allows states to use Medicaid funds for long-term home and community-based services.[8] Prior to the creation of waivers, Medicaid would only pay for these services for people

[a] The Americans with Disabilities Act (ADA) spurred the transition to community care in 1990 and the Supreme Court's *Olmstead* decision in 1999 reinforced the transition.

[b] Other sources include Veteran's Health Administration (VHA) and Children's Health Insurance Program (CHIP).

living in institutions such as nursing facilities or intermediate care facilities for persons with an intellectual disability or related condition (ICF/IDD).[9] There are seven Texas Medicaid Waiver programs. Specific eligibility varies by program and at minimum includes an income and resource limit component and a medical necessity, disability, functional limitation and/or diagnosis component.[10] Service array also varies by program but often includes personal assistance services, nursing services, therapies, adaptive aids, home modification, supported employment, and/or other services.[11]

Medicaid waiver long-term services and supports are a major part of the long-term care safety net for low-income older adults and people with disabilities; however, service gaps and limitations exist.

- **Interest lists**: Demand for community-based Medicaid wavier services greatly outweighs available resources, and individuals sign up on an interest list until services are available. As of May 2018, 140,769 unduplicated individuals were on an interest list for one or more Texas Medicaid community service waivers.[12] The number of individuals on each program's interest list and the duration of the wait vary by program. Many programs, particularly for individuals with intellectual and developmental disabilities, have years long lists (45% or more of the individuals on three of the program interest lists have had to wait five years or longer for services).[13]
- **Cost**: Eligibility for Medicaid long-term care services considers both functional eligibility and income limits. For those who do not qualify for Medicaid services, the cost of long-term care is significant. For example, in the Austin area, the private pay annual cost of nursing home care is $88,330 (private room). Home health aide services costs about $22 per hour; at this rate, the annual cost for full-time in-home care (44 hours per week) would be $50,336.[14]
- **Implementation**: Access to and quality of long-term care services varies across the states. According to the Long Term Services & Supports Scorecard, Texas ranks relatively highly, 7th nationally, for the percent of Medicaid and state-funded long-term services and support spending going to home and community-based services as opposed to institutional care for older adults and people with physical disabilities.[c,15] However, Texas ranks in the bottom third overall (35th) across the broader range of indicators that measure state performance toward creating a high-quality system of care for older adults and people with physical disabilities and their caregivers.[16] The United Cerebral Palsy's Case for Inclusion ranks Texas 50th out of 51 (50 states and District of Columbia) in terms of how well state Medicaid programs serve those with IDD.[17] Texas is one of 19 states that does not meet the 80/80 community standard, which requires that at least 80 percent of all individuals with IDD are served in the community and 80 percent of all resources spent on those with IDD are for community support.[18]

Despite the existence of federal and state programs (most significantly, but not limited to Medicaid waiver programs), many older adults and people with disabilities have outstanding needs or require additional supports. Community providers, including the area agencies on aging, local mental health authorities, and nonprofit organizations, play a vital role in implementing, supplementing, and filling gaps in state administered programs with local resources and programs.[19] For many individuals with

[c] This data point is one of multiple indicators comprising the Choice of Setting and Provider ranking available at www.longtermscorecard.org.

disabilities and older adults with chronic care needs, support from family caregivers is critical in order to remain in their homes and communities.[20]

## Quality of Life and Engagement

Quality of life and engagement with the community may look different based on individual goals, interests, preferences, and life stage. Ensuring inclusion for older adults and people with disabilities requires that, at the federal, state, and local community levels, there are policies, practices, supports, and services that address barriers and promote access.

- **Infants and toddlers**: Young children with developmental delays, disabilities, or medical diagnoses that affect development benefit from early intervention services that support the child's developmental path and improve outcomes for the child and family.[21] Intervention is likely to be more effective when provided early in life when the brain is most adaptable.[22] Early Childhood Intervention (ECI) is a federal-state program that contracts with community organizations to provide services.
- **School age children**: Children with disabilities may need extra support at school. The Individuals with Disabilities Act (IDEA) is a federal law that ensures all students with disabilities receive a Free Appropriate Public Education (FAPE).[23] Local school districts must provide: evaluation for a learning difference, intellectual disability, or other disability that might affect learning; general and specialized education services; and, if needed, behavioral supports.[24] Education services must be provided in the Least Restricted Environment[d] possible.[25]
- **Working age adults**: Work provides opportunities to engage in meaningful activity, interact with others, and achieve economic self-sufficiency. People with disabilities experience barriers to employment, resulting in consistently lower employment rates. According to the Bureau of Labor Statistics, for the population age 16 to 64, the 2017 employment-population ratio for persons with a disability was 29.3% compared with 73.5% for persons without a disability.[26] Increasing opportunities for people with disabilities requires developing policies, practices and tools that foster a more inclusive workforce.[27] For individuals who need additional support, supported employment programs can help provide accommodations and support with services like assessments, job search assistance, and on-the-job mentoring.[28]
- **Older adults**: Older adults are more susceptible to isolation, including being disconnected from family, friends, and community.[29] Isolation is often the result of multiple causes including poor health, poorly designed communities, and major life events such as loss and retirement.[30] Risk factors include limited access to transportation, physical impairments or poor mental health, life transitions like leaving the workforce or loss of partner, societal barriers like ageism, and lack of access and inequality for marginalized groups.[31] Solutions include specific programs (e.g. volunteer ride programs, senior centers, and falls prevention), policy changes (e.g. policies that support an older workforce), and community-wide initiatives (e.g. age-friendly community initiatives).[e,32]

[d] Least restrictive environment means that students with disabilities should be educated with students without disabilities to the maximum appropriate extent.

e Age-friendly communities are those where community members and leaders have made the commitment to actively work toward making their town, city or county a great place for people of all ages.

## Demographic Trends

An estimated 99,231 residents or about 8.7% of the Travis County population has one or more disabilities.[33] The rate of disability increases with age—1 in 3 older adults in Travis County has one or more disabilities.[34] The following table provides additional detail regarding the type of disability by age group.[f]

**Disability Status, Number and Type by Age**

Civilian Noninstitutionalized Population Age 5 and Over*, Travis County, 2012-2016

| | *Population 5 to 17 years n=185,462* | | *Population 18 to 64 years n=781,778* | | *Population 65 years and over n=94,700* | |
|---|---|---|---|---|---|---|
| ***Disability Status*** | ***Estimate*** | ***Rate*** | ***Estimate*** | ***Rate*** | ***Estimate*** | ***Rate*** |
| With a disability | 9,594 | 5% | 62,659 | 6% | 33,644 | 32% |
| ***Disability Type*** | | | | | | |
| With an ambulatory difficulty | 1,068 | 1% | 25,844 | 3% | 20,048 | 21% |
| With a cognitive difficulty | 7,385 | 4% | 23,819 | 3% | 8,695 | 9% |
| With a hearing difficulty | 1,007* | 1%* | 12,524 | 2% | 13,279 | 14% |
| With an independent living difficulty | | | 17,541 | 2% | 13,477 | 14% |
| With a self-care difficulty | 1,828 | 1% | 9,563 | 1% | 6,796 | 7% |
| With a vision difficulty | 1,181* | 1%* | 11,397 | 2% | 6,179 | 7% |

*For children under 5, data is only collected on hearing and vision difficulty; questions related to other disability types are not asked because developmentally it is difficult to determine those types of disabilities in children that young. For simplicity of data analysis and display, this table only includes the population age 5 years and over.
*Not reliable at the 90% confidence level

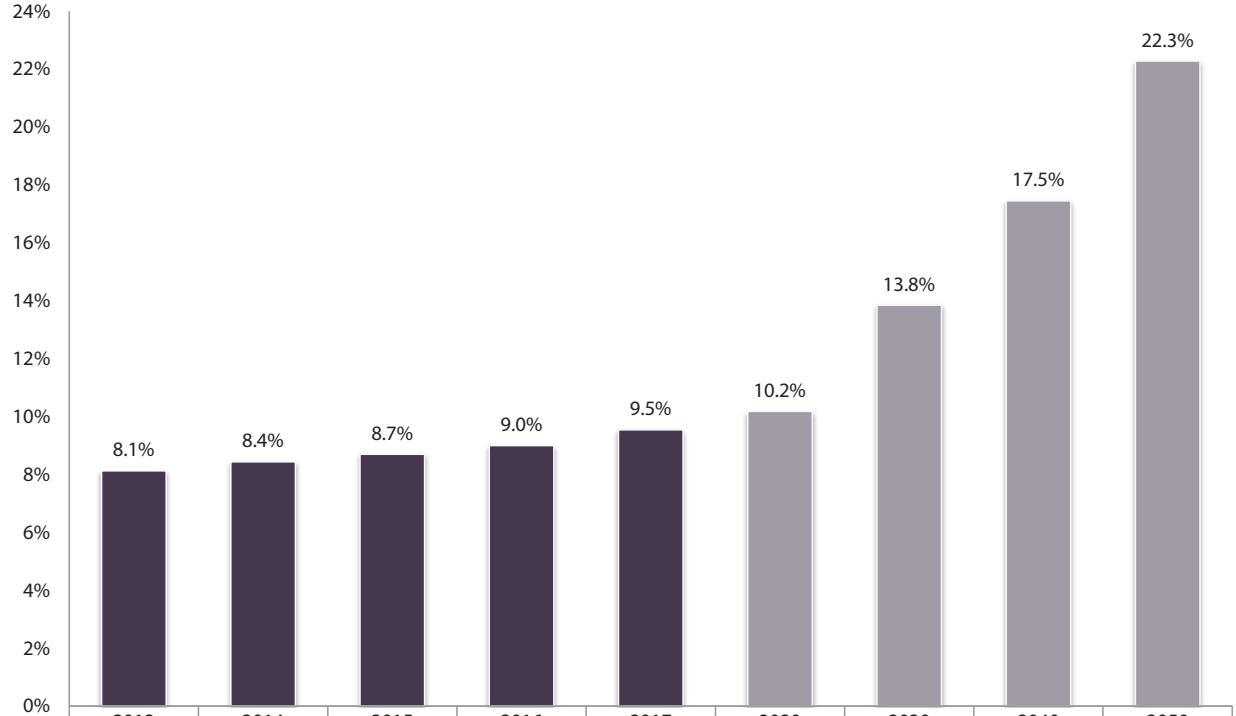
Created by: Travis County HHS Research & Planning Division, 2018
Source data: 2012-2016 American Community Survey 5-Year Estimates,S1810

Because the rate of disability increases with age, as the population grows older, the number of people living with a disability who may need services or supports will also likely increase. The older adult population in Travis County continues to increase in number and share and is projected to comprise a growing percentage of the total population in the coming decades.

f For definitions of the types of disabilities, please see the 2016 American Community Survey Subject Definitions: https://www2.census.gov/programs-surveys/acs/tech_docs/subject_definitions/2016_ACSSubjectDefinitions.pdf

## Adults Age 65 and Over as a Percent of the Population

Travis County, 2013-2017 and Future Projections



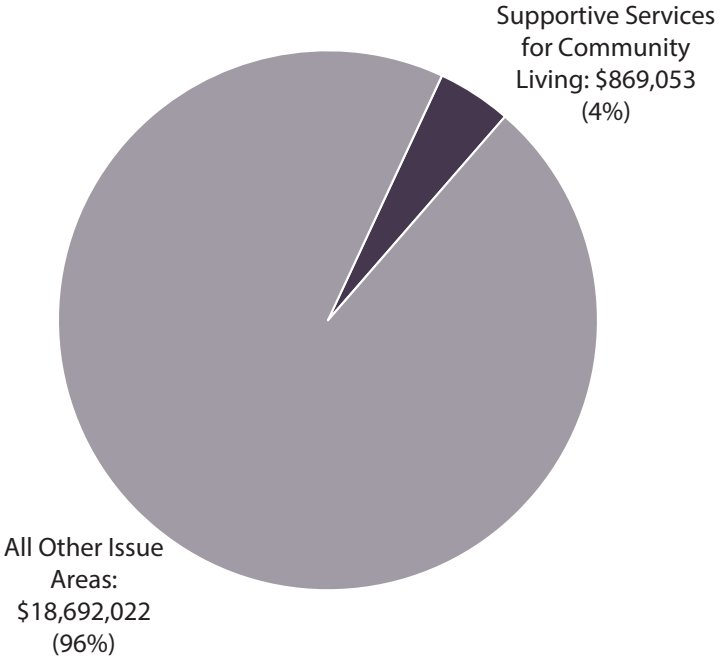

| | 2013 | 2014 | 2015 | 2016 | 2017 | 2020 | 2030 | 2040 | 2050 |
|---|---|---|---|---|---|---|---|---|---|
| Pct. 65+ | 8.1% | 8.4% | 8.7% | 9.0% | 9.5% | 10.2% | 13.8% | 17.5% | 22.3% |
| Num. 65+ | 91,108 | 97,149 | 102,577 | 108,427 | 117,088 | 131,474 | 213,323 | 309,447 | 439,817 |

Created by: Travis County HHS, Research & Planning Division, 2018
Source data: U.S. Census Bureau, 2013-2017 American Community Survey 1-Year Estimates, B01001; 2018 Texas State Data Center Population Projections

# Goals and Services

Programs and Services within this issue area work to promote the independence and well-being of older adults and people with disabilities. Toward this end, they support living in the home while ensuring safety of person and environment and empower individuals to maximize quality of life and community engagement. Services may include: in-home care services, independent living support, money management, case management, supported employment services, day habilitation, guardianship assistance, home delivered meals, congregate meals, early childhood intervention services, volunteer engagement, individual advocacy and systems navigation, and clinical therapies such as occupational, physical, speech, and hearing therapies.

# Investment in Supportive Services for Community Living and Other Issue Areas, FY 2018



# Funding Summary

The FY 2018 Funding Amount reflects 12–month funding (October 1, 2017 through September 30, 2018) unless otherwise noted.

| Agency Name | Program Name | FY 2018 Funding Amount |
|---|---|---|
| Any Baby Can of Austin, Inc. | CARE | $50,000 |
| Any Baby Can of Austin, Inc. | Early Childhood Intervention Services | $51,170 |
| Easter Seals Central Texas, Inc. | Clinical Services | $81,306 |
| Easter Seals Central Texas, Inc. | Day Habilitation Program at Vaughn House | $50,000 |
| Easter Seals Central Texas, Inc. | Early Childhood Intervention | $11,747 |
| Family Eldercare | Money Management | $50,000 |
| Goodwill Industries of Central Texas | Goodwill Supported Training & Employment Program | $75,097 |
| Helping the Aging, Needy and Disabled | In-Home Care | $54,198 |
| Meals on Wheels Central Texas | Congregate Senior Centers Meal Program | $143,059 |
| Meals on Wheels Central Texas | Meals on Wheels | $167,376 |
| The Arc of the Capital Area | Case Management and Advocacy Services | $120,100 |
| The Arc of the Capital Area | Guardianship Case Management Services | $15,000 |

# Supportive Services for Community Living Client Demographics

The table below summarizes the demographics for clients served across Supportive Services for Community Living service providers. Note that clients participating in more than one supportive services for community living program are counted multiple times.

| Gender | Num. | Pct. |
|---|---|---|
| Female | 3,866 | 46% |
| Male | 4,584 | 54% |
| Transgender | 4 | 0.05% |
| Other or Not Specified | 0 | 0.00% |
| Unknown | 3 | 0.04% |
| *Total* | *8,457* | *100%* |

| Ethnicity | | |
|---|---|---|
| Hispanic or Latino | 3,082 | 36% |
| Not Hispanic or Latino | 5,184 | 61% |
| Unknown | 191 | 2% |
| *Total* | *8,457* | *100%* |

| Race | | |
|---|---|---|
| American Indian and Alaska Native | 32 | 0% |
| Asian | 368 | 4% |
| Black or African American | 1,766 | 21% |
| Native Hawaiian and Other Pacific Islander | 9 | 0.1% |
| White | 5,796 | 69% |
| Some other race | 294 | 3% |
| Two or more races | 17 | 0% |
| Unknown | 175 | 2% |
| *Total* | *8,457* | *100%* |

| Age | Num. | Pct. |
|---|---|---|
| Under 5 | 2,075 | 25% |
| 5 to 11 | 183 | 2% |
| 12 to 14 | 67 | 1% |
| 15 to 17 | 62 | 1% |
| 18 to 24 | 81 | 1% |
| 25 to 39 | 207 | 2% |
| 40 to 54 | 555 | 7% |
| 55 to 64 | 1,309 | 15% |
| 65 to 74 | 1,684 | 20% |
| 75 and over | 2,233 | 26% |
| Unknown | 1 | 0.0% |
| *Total* | *8,457* | *100%* |

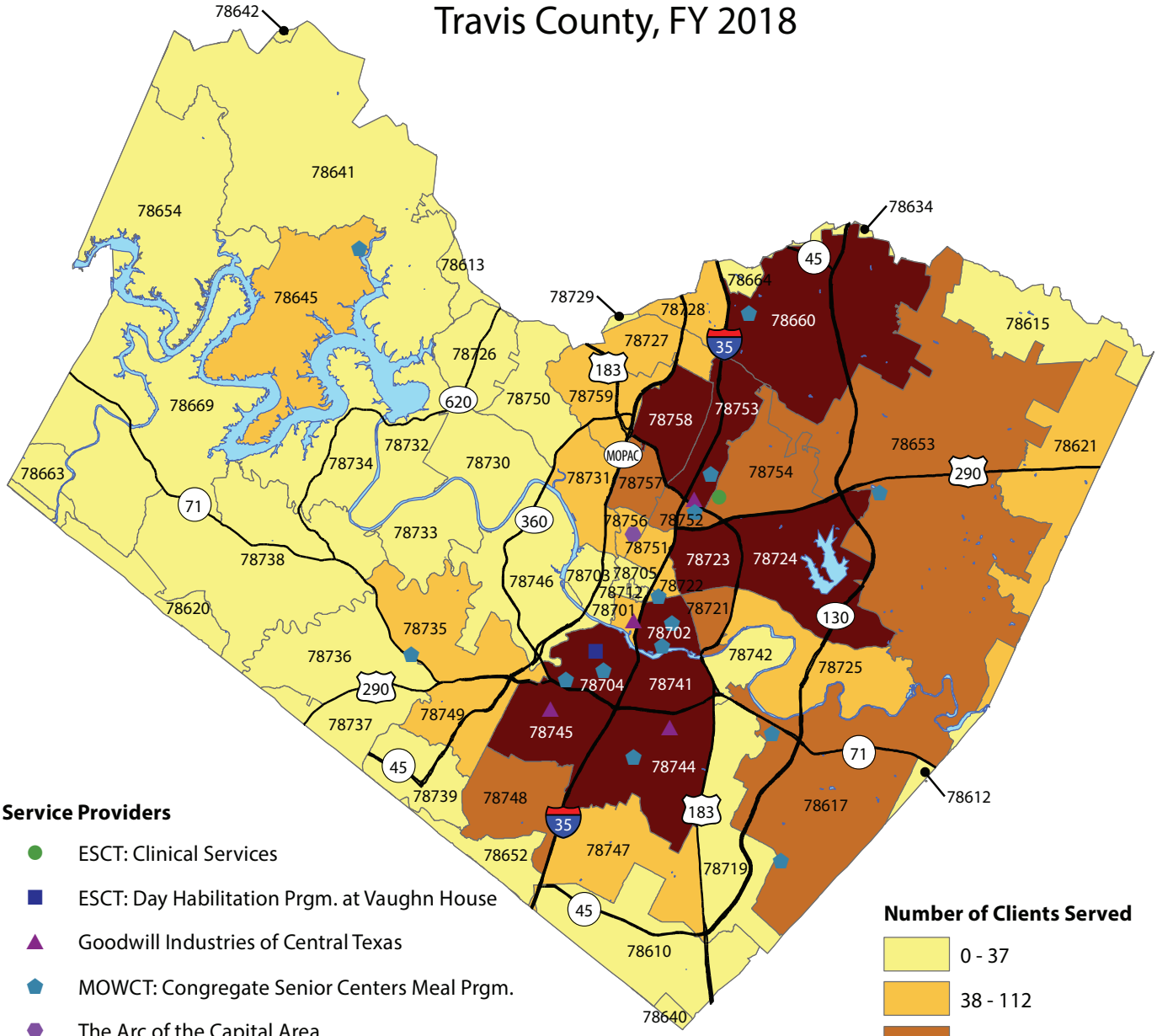
| Income | | |
|---|---|---|
| <50% of FPIG | 1,282 | 15% |
| 50% to 100% | 2,821 | 33% |
| 101% to 150% | 1,448 | 17% |
| 151% to 200% | 1,642 | 19% |
| >200% | 1,022 | 12% |
| Unknown | 242 | 3% |
| *Total* | *8,457* | *100%* |

Note: Percentages may not total to 100% due to rounding.

See Appendix for specific income guideline levels.

# Supportive Services for Community Living

## Service Provision Locations and Clients Served by ZIP Code
## Travis County, FY 2018




**Service Providers**

- ESCT: Clinical Services
- ESCT: Day Habilitation Prgm. at Vaughn House
- Goodwill Industries of Central Texas
- MOWCT: Congregate Senior Centers Meal Prgm.
- The Arc of the Capital Area

**Number of Clients Served**

- 0 - 37
- 38 - 112
- 113 - 314
- 315 - 634

Service provision locations are not included for Any Baby Can of Austin, Easter Seals Central Texas: Early Childhood Intervention, Family Eldercare, Helping the Aging, Needy and Disabled, or Meals on Wheels Central Texas: Meals on Wheels as services can be accessed anywhere the client is located.

Notes: This map shows 7,930 clients by ZIP code. 527 clients (6% of the total) from all service providers were not included because their ZIP codes were unknown or outside of Travis County boundaries or they were homeless.

Source data: Contracted service providers, FY 2018.
This map was created using ArcGIS Online shapefiles.
Created by: Travis County HHS, Research & Planning Division, 2018.

N
0 2.5 5 Miles

# Any Baby Can of Austin, Inc.

## CARE

### Program Description

Any Baby Can's Comprehensive Advocacy and Resources for Empowerment (CARE) program provides in-home comprehensive case management services on behalf of eligible children and youth with special healthcare needs such as cancer, physical disabilities, and chronic illness. Any Baby Can's case management, which is provided by bilingual, bicultural Bachelor and Master's Level Social Workers, ensures that at-risk children, from families with limited resources, maximize their physical and emotional health by accessing primary care, specialist services, and supportive resources such as mental health services and basic needs assistance.

### Funding

The total HHS investment in the CARE program from October 1, 2017 through September 30, 2018 was $50,000. This investment comprised 8.7% of their total program budget. HHS also funds the Early Childhood Intervention Services and Professional Early Childhood Services programs, which are described later in this report and in the Child and Youth Development issue area report, respectively.

### Eligibility Criteria

The CARE program serves children between the ages of birth to 21 years old who have a chronic illness, physical or developmental disability, mental health diagnoses, or medical diagnosis associated with cancer treatment. The program serves low-income families with incomes at or below 200% of the Federal Poverty Income Guideline (FPIG) level and reside in Travis, Williamson, Bastrop, and Hays Counties.

# Any Baby Can of Austin, Inc.: CARE



The CARE program met or exceed most of the performance goals for this year. According to staff, the program was not fully staffed until the middle of the fiscal year and clients requested over-the-phone service coordination due to a variety of reasons (see second output). Staff reported that low survey completion rate was due to overlapping processes for agency surveys and state surveys (see second outcome). Staff report that the survey methodology will change for the next fiscal year to improve survey completion rates.

| Performance Measure | Total Program Performance Results | Total Program Performance Goals | Total Program Performance Goal Achieved |
|---|---|---|---|
| ***Outputs*** | | | |
| Number of unduplicated clients served | 212 | 175 | 121% |
| Number of direct client contracts | 1,048 | 1,500 | 70% |
| ***Outcomes*** | | | |
| Percentage of unduplicated client children completing medical case management who achieve 75% of their service plan goals | 99% (85/86) | 85% (46/55) | 118% |
| Percentage of unduplicated client families who report they get the help they need to coordinate their child's care | 96% (50/52) | 90% (157/175) | 107% |

# Any Baby Can of Austin, Inc.

## Early Childhood Intervention Services

### Program Description

Any Baby Can's Early Childhood Intervention (ECI) Services program aims to increase the functioning of children birth to age three who have developmental delays and/or a medical condition through educational and specialized skill training. Any Baby Can also provides community-based support such as support groups, parent education, and family literacy.

### Funding

The total HHS investment in the ECI Services program from October 1, 2017 through September 30, 2018 was $51,170. This investment comprised 1.7% of their total program budget. HHS also funds the CARE and Professional Early Childhood Services programs, which are described earlier in this report and in the Child and Youth Development issue area report, respectively.

### Eligibility Criteria

Clients receiving services supported by Travis County must be residents of Travis County and have a family income no greater than 200% of the Federal Poverty Income Guidelines (FPIG). ECI services provided to families who do not meet these criteria are supported by other grants, contracts, and/or donations.

Eligibility criteria for ECI services: Children from birth to 36 months with documentation of a medically diagnosed condition that has a high probability of resulting in developmental delay, an auditory or visual impairment as defined by the Texas Education Agency, or a developmental delay based on a standardized tool designated by the Texas Health and Human Services Commission (the Battle Developmental Inventory–2) indicating a delay of at least 25% in any of the developmental areas.

Families must live in Travis County in the following zip codes: 78610, 78612, 78617, 78702, 78704, 78719, 78721, 78725, 78741, 78744, or 78747.

# Any Baby Can of Austin, Inc.: Early Childhood Intervention Services



The ECI program exceeded all of their performance goals for this year. Staff report that they were able to serve more children in Travis County than anticipated because of the strong relationship with referral sources (see first output). Staff also report that they were able to hire more direct service providers and were able to implement effective strategies to ensure every child that needs services receives services (see second output and first outcome).

| Performance Measure | Total Program Performance Results | Total Program Performance Goals | Total Program Performance Goal Achieved |
|---|---|---|---|
| ***Outputs*** | | | |
| Number of unduplicated clients served through ECI services | 540 | 500 | 108% |
| Number of ECI service hours delivered | 12,162 | 12,000 | 101% |
| ***Outcomes*** | | | |
| Percentage of unduplicated children completing ECI services who achieve at least 50% of their Service Plan goals | 93% (170/183) | 90% (135/150) | 103% |

# Easter Seals Central Texas

## Clinical Services

### Program Description

The Clinical Services program provides a continuum of care for individuals with disabilities in the areas of health, independent functioning, and clinical rehabilitation. The program provides comprehensive service coordination and occupational therapy, physical therapy, speech therapy and/or audiological services to individuals with significant disabilities to live within the community and promote improved functioning.

### Funding

The total HHS investment in the Developmental and Clinical Services program from October 1, 2017 through September 30, 2018 was $81,306. This investment comprised 40.8% of their total program budget. HHS also funds the Day Habilitation Program at Vaughn House and the Early Childhood Intervention program described later in this report.

### Eligibility Criteria

The Clinical Services program serves predominately low-income (no greater than 200% of FPIG) individuals with disabilities, over age three through adulthood with a documented physical, neurological, intellectual, developmental disability or delay with the goals to maintain or increase level of functioning or independence, desire to improve quality of life, and commitment to participate in a client-center plan of care.

# Easter Seals Central Texas: Clinical Services



The Clinical Services program exceeded most of their performance goals for the year. Staff report that the clinical and administrative staffing transition effected overall enrollment within the program (see first output). In addition, the hiring and training of new clinical staff led to a decrease in the total number of clients being re-assessed (see second outcome). Staff report that the increase in service delivery hours is due to the increase availability from Audio and Rehab providers as well as the addition of new staff (see second output).

| Performance Measure | Total Program Performance Results | Total Program Performance Goals | Total Program Performance Goal Achieved |
|---|---|---|---|
| ***Outputs*** | | | |
| Number of unduplicated clients | 268 | 340 | 79% |
| Number of hours of service delivered | 9,003 | 4,800 | 188% |
| ***Outcomes*** | | | |
| Percentage of clients reporting satisfaction with progress in therapy | 97% (223/230) | 95% (180/190) | 102% |
| Percentage of clients re-assessed who achieved/ maintained goals on their individualized plans of care | 92% (246/268) | 80% (272/340) | 115% |

# Easter Seals Central Texas

## Day Habilitation Program at Vaughn House

### Program Description

The Day Habilitation Program at Vaughn House provides a support system for eligible adults who are deaf/hard of hearing, and also have intellectual and developmental disabilities. The program supports clients in experiencing engaging and fulfilling daytime activities, as well as to support their quality of life, safety, and well-being. The goal of the program is to provide a safe and nurturing environment in the form of structured activities, peer interactions and community outings.

### Funding

The total HHS investment in the Day Habilitation Program at Vaughn House program from October 1, 2017 through September 30, 2018 was $50,000. This investment comprised 28.3% of their total program budget. HHS also funds the Clinical Solutions and the Early Childhood Intervention program described in this report.

### Eligibility Criteria

The Program targets adults age 18 and older who are: deaf/hard of hearing; and who have developmental disabilities in Travis County. The Program targets low-income individuals, although there is no eligibility screening for income. In order to be eligible for service clients must reside in Travis County, be age 18 or older, and be deaf/ hard of hearing and have a developmental disability.

# Easter Seals Central Texas: Day Habilitation Program at Vaughn House



The Day Habilitation Program at the Vaughn House exceeded most of their performance goals for the year. Staff reported that the primary reason for low client enrollment is due to their location stating that most individuals that expressed interest in the program lived in North Austin area (see first output). Staff report enthusiasm for developing more outings for clients since more clients were interested in attending community outings than originally anticipated (see second output and first outcome). Staff report dedication to clients understanding individual goals and assisting clients to achieve goals set (see second outcome).

| Performance Measure | Total Program Performance Results | Total Program Performance Goals | Total Program Performance Goal Achieved |
|---|---|---|---|
| ***Outputs*** | | | |
| Number of unduplicated clients served | 16 | 22 | 73% |
| Number of Day Habilitation community outings | 77 | 60 | 128% |
| ***Outcomes*** | | | |
| Percentage of clients who participated in at least 6 community outings per quarter | 92% (14/15) | 77% (17/22) | 119% |
| Percentage of clients who made progress with behavior plan goals | 95% (15/15) | 73% (16/22) | 131% |

# Easter Seals Central Texas

## Early Childhood Intervention

### Program Description

The goal of the Early Childhood Intervention (ECI) program is to provide a continuum of care for children 0-3 years of age with disabilities and/or developmental delays. ECI services provide comprehensive service coordination, wrap around services, training, and support services to children with significant disabilities to live within the community, and promote improved functioning. Licensed therapists and professionals provide one-on-one, and occasionally group, treatment for ECI clients focusing on teaching skills or compensatory techniques that enable a client to reach his/her maximum functional level. Treatment strategies directly relate to client-centered goals and the comprehensive Individual Family Service Plan.

### Funding

The total HHS investment in the Early Childhood Intervention program from October 1, 2016 through September 30, 2017 was $11,747. This investment comprised 0.3% of their total program budget. HHS also funds the Clinical Services and the Day Habilitation Program at Vaughn House described earlier in this report.

### Eligibility Criteria

To be eligible for services, children must be age birth to 36 months, residents of Travis County, and have a documented physical, neurological, intellectual, or developmental disability or delay. At least one-half of clients must have incomes at or below 100% of the Federal Poverty Income Guidelines (FPIG), and the remainder can have incomes up to 200% of FPIG.

# Easter Seals Central Texas: Early Childhood Intervention



The Early Childhood Intervention program met or exceeded all of their performance goals for this year. Staff report that more families were able to participate in services (see second output).

| Performance Measure | Total Program Performance Results | Total Program Performance Goals | Total Program Performance Goal Achieved |
|---|---|---|---|
| ***Outputs*** | | | |
| Number of unduplicated clients served | 1,463 | 1,500 | 98% |
| Number of hours of services delivered | 45,191 | 22,000 | 205% |
| ***Outcomes*** | | | |
| Percentage of clients reporting satisfaction with services received | 99% (362/367) | 90% (297/330) | 110% |
| Percentage of clients showing either improved functional outcomes or quality of life | 96% (344/357) | 90% (276/306) | 107% |

# Family Eldercare

## Money Management

### Program Description

The Money Management program provides 'wrap around' case management, bill payer, representative payee, and Veterans' Affairs fiduciary services to seniors, older adults, and at-risk veterans unable to manage their own finances. Services provide a safety net to those at risk of homelessness or for premature institutionalization. The program services can prolong independent living by securing housing and ensuring that basic needs are met and prevents financial exploitation among seniors and adults with disabilities. The money management and wrap around case management guarantees that the rent is paid and that clients remain housed.

### Funding

The total HHS investment in the Money Management program from October 1, 2017 through September 30, 2018 was $50,000. This investment comprised 5.8% of their total program budget.

### Eligibility Criteria

The Money Management Program targets adults with disabilities age 18 and older, seniors age 60 and older, and qualifying at-risk veterans who are unable to manage their own finances and are at risk for financial exploitation, self-neglect, homelessness, and premature institutionalization. To be eligible for services, clients must be residents of Travis or Williamson County, have some sort of income, and be an adult age 18 and older with a disability or a senior age 60 and older.

# Family Eldercare: Money Management



The Money Management program met or exceeded most of their performance goals for the year. Staff attribute the strength of their community partnerships and marketing efforts to the increase of referrals and clients served in the program (see first output). Staff reported difficulty in collecting surveys from clients for a variety of reasons and will improve questionnaire to be more client focused and comprehensive (see third outcome).

| Performance Measure | Total Program Performance Results | Total Program Performance Goals | Total Program Performance Goal Achieved |
|---|---|---|---|
| ***Outputs*** | | | |
| Number of unduplicated clients served | 647 | 550 | 118% |
| Number of direct client contacts--face to face meetings | 5,385 | 5,500 | 98% |
| ***Outcomes*** | | | |
| Percentage of clients whose benefits are managed that maintained or improved housing stability in the previous six months | 99% (407/412) | 95% (394/415) | 104% |
| Percentage of clients who have no new incidents of abuse, neglect, or financial exploitation | 100% (644/647) | 95% (522/550) | 105% |
| Percentage of clients who report services help them access and maintain benefits, resources and/or services | 81% (206/255) | 95% (261/275) | 85% |

# Goodwill Industries of Central Texas

## Goodwill Supported Training & Employment Program

### Program Description

The Goodwill Supported Training & Employment (STEP) Program serves clients through a supported employment model that incorporates intensive case management, job readiness training and skills development, wrap-around support, and post-placement job retention services to ensure client successfully obtain and retain meaningful employment. In some instances, the program offers occupational training in a high-demand, high-growth field through the Goodwill Career and Technical Academy.

### Funding

The total HHS investment in the Supported Training and Employment Program from October 1, 2017 through September 30, 2018 was $75,097. This investment comprised 64.4% of their total program budget. HHS also funds Career Launch program, which is described in the Child and Youth Development report.

### Eligibility Criteria

The program targets people with physical or cognitive disabilities including, but not limited to: blindness or vision impairment, deafness or hearing impairment, mobility impairment, mental health disabilities, intellectual and developmental disabilities. To be eligible for services clients must be residents of Travis County, identify as having a disability that impairs their ability to secure employment, and have income at or below 200% of the Federal Poverty Guideline.

# Goodwill Industries of Central Texas: STEP Program



The STEP program had varied performance this year. Staff reported that due to a delay in the contacting process, the program started late in the fiscal year (see second output). Staff reported that clients that were recruited into the program have significant barriers to participation in trainings such as transportation, conflicting schedules, and different interests and challenges to passing test to qualify for the studies (see first outcome). Career Case Managers will continue to navigate the interests and abilities of the clients to pair them with the appropriate training. Staff report that due to the late start, clients have been mostly engaged with case management and navigating their immediate and basic needs. The program reports that the Career Case Managers will work closely with Business Solutions to identify resources and opportunities for employment that accommodates clients' needs (see second outcome).

| Performance Measure | Total Program Performance Results | Total Program Performance Goals | Total Program Performance Goal Achieved |
|---|---|---|---|
| ***Outputs*** | | | |
| Number of unduplicated clients served | 37 | 35 | 106% |
| Number of unduplicated clients enrolled in a training program | 3 | 18 | 17% |
| ***Outcomes*** | | | |
| Percentage of clients successfully completing a training program | 100% (2/2) | 61% (11/18) | 164% |
| Percentage of clients securing employment in an integrated setting | 35% (13/37) | 60% (21/35) | 59% |
| Percentage of clients retaining employment for 90 days or more following placement | 63% (5/8) | 62% (13/21) | 101% |

# Helping the Aging, Needy, and Disabled, Inc.

## In-Home Care

### Program Description

The In-Home Care program provides assistance with activities of daily living to help eligible low-income, homebound individuals continue living independently in their own homes. Under this contract, the program provides services to individuals who do not qualify for Medicaid benefits or who are awaiting approval for assistance through Medicaid. Services are offered at drastically reduced or not cost to the client, based on a sliding scale fee as determined by client income.

### Funding

The total HHS investment in the Homemaker Services/Personal Attendant program from October 1, 2017 through September 30, 2018 was $54,198. This investment comprised 33.2% of their total program budget.

### Eligibility Criteria

This program serves individuals age 18 and older with disabilities and those over age 60 with conditions that limit their ability to perform necessary activities of daily living. To be eligible for services, clients must reside in Travis, Williamson, Bastrop, or Hays County; provide current identification; must need a minimum of at least two hours of in-home care per week.

# Helping the Aging, Needy, and Disabled, Inc: In-Home Care



The In-Home Care program met or exceeded their performance goals for the year. Staff attribute the increase of clients served to the improvement of service delivery and community outreach, which resulted in an increase in referrals to the program (see first output). Staff report that more clients than previously anticipated completed and returned surveys (see first outcome).

| Performance Measure | Total Program Performance Results | Total Program Performance Goals | Total Program Performance Goal Achieved |
|---|---|---|---|
| ***Outputs*** | | | |
| Number of unduplicated clients served | 283 | 185 | 153% |
| Total number of in-home visits (unique encounters) | 7,864 | 8,000 | 98% |
| ***Outcomes*** | | | |
| Percentage of clients who report that services have helped them to remain in their own home | 90% (129/143) | 80% (62/78) | 113% |
| Percentage of clients able to continue to live independently in the home | 94% (265/283) | 80% (148/185) | 117% |

# Meals on Wheels and More, Inc.

## Congregate Meals

### Program Description

The primary goal of the Congregate Meals program is to keep participants in their home by helping them maintain their highest level of cognitive and physical functioning through good nutritional choices in an inviting, active social setting. To achieve this, the program prepares and delivers prepackaged meals to the 13 individual congregate meal sites. In addition to the meal, the program also emphasizes social recreation and educational opportunities for participants. A wide variety of activities are planned with input from the community center committees and senior participants.

### Funding

The total HHS investment in the Congregate Meals program from October 1, 2017 through September 30, 2018 was $143,059. This investment comprised 13.9% of their total program budget. HHS also funds the Meals on Wheels program, which is described later in this report.

### Eligibility Criteria

The Congregate Meals program serves individuals who are 60 years of age or older, or are the significant other or partner of an age-qualifying participant.

# Meals on Wheels and more, Inc.: Congregate Meals

Performance Goals and Results

The Congregate Meals program met or exceeded all of their program goals for the year. Staff report that the programming and outreach has attracted strong participation program wide (see second output). Staff attribute the higher cost of living to the increase of participants seeking daily meal service (see third output). Staff report that through their strong relationships with partner organizations they were able to offer a variety of classes and events that appeal to clients at locations system wide (see fifth and sixth outputs). Staff recognize that social isolation is a significant issue within their client population and report working hard to create programming that attracts and retains participants and provides them with opportunities to grow their relationships (see second outcome).

| Performance Measure | Total Program Performance Results | Total Program Performance Goals | Total Program Performance Goal Achieved |
|---|---|---|---|
| ***Outputs*** | | | |
| Number of unduplicated participants served | 1,527 | 1,500 | 102% |
| Number of unduplicated Participants served at Travis County Community Center Sites Only | 358 | 300 | 119% |
| Number of Meals Provided | 110,538 | 90,000 | 123% |
| Number of Meals Provided at Travis County Community Center Sites Only | 19,329 | 20,000 | 97% |
| Total Number of Events at Travis County Community Center Sites Only | 966 | 300 | 322% |
| Total Number of Educational Programs at Travis County Community Center Sites Only | 84 | 65 | 129% |
| ***Outcomes*** | | | |
| Percentage of participants that report the congregate meal program is an important source of food for them during the week | 85% (801/942) | 80% (500/625) | 106% |
| Percentage of participants that report that the congregate meal program is an important place to meet and make friends | 95% (894/942) | 85% (531/625) | 112% |

# Meals on Wheels and More, Inc.

## Meals on Wheels

### Program Description

The goal of the Meals on Wheels program is to help seniors and persons with disabilities "age in place" in the community and avoid premature or unnecessary institutionalization. The program delivers nutritious meals to ensure that clients are receiving the nutrition they need to stay healthy and out of hospitals or nursing homes longer. The program also provides a safety net for homebound, often frail, elders and younger people with disabilities. Depending on the self-selected meal delivery schedule chosen by the clients, the program volunteer or staff person provides a welfare check of homebound individuals. The program provides case management that offers assistance to clients who need help finding and enrolling in additional programs in the community or providing knowledge and resources offered by the program with twelve other supportive programs.

### Funding

The total HHS investment in the Meals on Wheels program from October 1, 2017 through September 30, 2018 was $167,376. This investment comprised 3.6% of their total program budget. HHS also funds the Congregate Meals program, which is described later in this report.

### Eligibility Criteria

In order to be eligible, clients must have difficulty preparing an adequate meal for oneself, based on a functional assessments. The client must be primarily homebound, lack consistent help with noon-day meal arrangement, and be home to receive meals during normal delivery.

# Meals on Wheels and More, Inc.: Meals on Wheels



The Meals on Wheels program met or exceeded all of their performance goals for the year. Staff attribute the achievement of performance goals to the higher than anticipated number of calls for meal service and case managers were able to complete more home visits and assessments of clients.

| Performance Measure | Total Program Performance Results | Total Program Performance Goals | Total Program Performance Goal Achieved |
|---|---|---|---|
| ***Outputs*** | | | |
| Number of unduplicated clients served | 3,331 | 2,900 | 115% |
| Number of lunch meals prepared for clients | 642,802 | 520,000 | 124% |
| ***Outcomes*** | | | |
| Percentage of clients who indicate that daily meals satisfy an essential part of their daily nutritional needs | 95% (935/988) | 90% (495/550) | 105% |
| Percentage of nutritionally at risk meal clients who have improved or maintained their nutritional status while on meals for six months or longer | 68% (1,434/2,120) | 75% (1,020/1,360) | 90% |
| Percentage of clients who indicate their situation is better because of their case manager's help | 90% (873/970) | 85% (468/550) | 106% |

# The Arc of the Capital Area

## Case Management and Advocacy Services

### Program Description

The Case Management and Advocacy Services program aims to prevent institutionalization of individuals with intellectual and/or developmental disabilities and promote and support independent and home living, while ensuring the health and safety of the individual and to identify factors that influence quality of life and to determine appropriate interventions, by way of linking and referring to community integration, person-centered planning, access to healthcare supports that help clients navigate community support systems.

The Program has two components: Adult Case Management Services and the Juvenile Justice Services, which both focus on keeping clients out of institutional setting and in their home environments by providing supports and resources to the client and their families so that clients maintain a healthy quality of life of their choosing.

### Funding

The total HHS investment in the Case Management and Advocacy Services program from October 1, 2017 through September 30, 2018 was $120,100. This investment comprised 57% of their total program budget. HHS also funds the Guardianship Case Management Services program, which is described later in this report.

### Eligibility Criteria

In order to be eligible for the Adult Case Management services, clients must be age 18 and older with an intellectual and/or developmental disability residing in Travis County. For Juvenile Justice Services, eligible clients must be age 11-19 with an intellectual and/or developmental disability who are either justice-involved or at risk of becoming justice-involved, be enrolled in special education, and reside in Travis County.

# The Arc of the Capital Area: Case Management and Advocacy Services



The Case Manage and Advocacy Services program met some of their performance goals for the year. Staff report that the low number of clients served was due to staff turnover (see first, second, third, fourth, and sixth outputs). In addition to turnover within the organization, staff report that the Individualized Service Plans did not take into account smaller steps or objectives that were completed for long term goals (see third outcome). Staff report case managers will be trained to write and review objectives that better serve this outcome moving forward. Staff found that many clients were not able to complete the Quality of Life Assessment due to its length and complexity (see fourth outcome). Staff report revising this tool to be more client friendly and hopes that future performance reporting provides a clearer depiction of this outcome.

| Performance Measure | Total Program Performance Results | Total Program Performance Goals | Total Program Performance Goal Achieved |
|---|---|---|---|
| ***Outputs*** | | | |
| Number of unduplicated clients served | 109 | 135 | 81% |
| Total number of unduplicated juvenile clients served | 36 | 46 | 74% |
| Total number of unduplicated adult clients served | 75 | 89 | 84% |
| Total number of Special Education/Admissions, Review, Dismissal meetings and/or juvenile court appearances attended by staff | 59 | 92 | 64% |
| Total number of case management service hours completed for adult clients | 1,694 | 1,848 | 92% |
| Total number of direct juvenile client visits | 82 | 135 | 61% |
| Total number of direct adult client visits | 786 | 756 | 104% |
| ***Outcomes*** | | | |
| Percentage of juvenile clients who remained in school or working while receiving services | 73% (18/24) | 78% (36/46) | 93% |
| Percentage of juvenile clients who did not offend/ reoffend while receiving services | 81% (20/24) | 78% (36/46) | 104% |
| Percentage of adult clients completing objectives towards their goals from their Individualized Service Plan | 30% (17/55) | 83% (74/89) | 62% |
| Percentage of adult clients with maintained or improved quality of life due to services, individual goals and service plans | 26% (14/55) | 83% (74/89) | 31% |

# The Arc of the Capital Area

## Guardianship Case Management Services

### Program Description

The goal of the Guardianship Case Management Services program is to assist families of individuals with intellectual and developmental disabilities with applying for legal guardianship or alternatives to guardianship options, such as Supported Decision Making Agreements. Supported Decision Making Agreements offer "a less restrictive substitute for guardianship for adults with disabilities who need assistance with decisions regarding daily living but who are not considered incapacitated persons for purposes of establishing guardianship." The program also assists with future care planning for individuals with intellectual or developmental disabilities.

### Funding

The total HHS investment in the Guardianship Case Management Services program from October 1, 2017 through September 30, 2018 was $15,000. This investment comprised 61.7% of the total program budget. HHS also funds the Case Management and Advocacy Services program, which is described earlier in this report.

### Eligibility Criteria

The Guardianship Case Management Services Program provides case management services to family members and/or caregivers of an individual with an intellectual or developmental disability. To be eligible for services, clients must reside in Travis County, have a diagnosis of an intellectual or developmental disability, be age 18 or older by the end of the program, and must be at 200% or below the current FPIG to receive zero court cost or between 200-250% of the FPIG to receive a $420 court cost.

# The Arc of the Capital Area: Guardianship Case Management Services



The Guardianship Case Management Services met most of their performance goals for the year within 10 percent variance. Staff report low turnout of clients served is due to clients not attending sessions or completing applications after initial sign-up (see first, second, and third outputs).

| Performance Measure | Total Program Performance Results | Total Program Performance Goals | Total Program Performance Goal Achieved |
|---|---|---|---|
| ***Outputs*** | | | |
| Number of unduplicated clients served | 24 | 30 | 80% |
| Number of unduplicated clients who choose guardianship | 18 | 20 | 90% |
| Number of unduplicated clients who choose Supported Decision Making Alternatives | 6 | 10 | 60% |
| ***Outcomes*** | | | |
| Percentage of clients receiving guardianship awards from the court | 83% (15/18) | 90% (18/20) | 93% |
| Percentage of clients who report having a better understanding of the guardianship responsibilities after participating in the program | 89% (16/18) | 90% (18/20) | 99% |
| Percentage of clients who report feeling better prepared to use Supported Decision Making Alternatives in their life | 100% (6/6) | 90% (9/10) | 111% |

# Appendix

## 2018 Federal Poverty Income Guidelines

Most HHS contracts require programs to serve participants with household incomes at or below 200% of the Federal Poverty Income Guideline (FPIG) level. Some programs have chosen to follow a more stringent threshold. The following table presents the federal poverty thresholds by household size and income.

| Household Size | Income Limits by Household Size | | | | |
|---|---|---|---|---|---|
| | 50% | 100% | 125% | 150% | 200% |
| 1 person | $6,070 | $12,140 | $15,175 | $18,210 | $24,280 |
| 2 persons | $8,230 | $16,460 | $20,575 | $24,690 | $32,920 |
| 3 persons | $10,390 | $20,780 | $25,975 | $31,170 | $41,560 |
| 4 persons | $12,550 | $25,100 | $31,375 | $37,650 | $50,200 |
| 5 persons | $14,710 | $29,420 | $36,775 | $44,130 | $58,840 |
| 6 persons | $16,870 | $33,740 | $42,175 | $50,610 | $67,480 |
| 7 persons | $19,030 | $38,060 | $47,575 | $57,090 | $76,120 |
| 8 persons | $21,190 | $42,380 | $52,975 | $63,570 | $84,760 |
| ***For families/households with more than 8 persons, add $4,320 for each additional person.*** | | | | | |

Data source: "2018 Poverty Guidelines for the 48 Contiguous States and the District of Columbia," Office of The Assistant Secretary for Planning and Evaluation, U.S. Department of Health & Human Services, January 13, 2018, https://aspe.hhs.gov/poverty-guidelines.

## 2018 Austin Median Family Income Guidelines

Some programs may also use Austin MFI guidelines when measuring client incomes. The following table presents the median family income limits established by the U.S. Department of Housing and Urban Development (HUD) for the Austin-Round Rock, TX Metropolitan Statistical Area (MSA).

| Household Size | Income Limits by Household Size | | |
|---|---|---|---|
| | Extremely Low* | Very Low (50%) | Low (80%) |
| 1 person | $18,100 | $30,100 | $48,200 |
| 2 persons | $20,650 | $34,400 | $55,050 |
| 3 persons | $23,250 | $38,700 | $61,950 |
| 4 persons | $25,800 | $43,000 | $68,800 |
| 5 persons | $29,420 | $46,450 | $74,350 |
| 6 persons | $33,740 | $49,900 | $79,850 |
| 7 persons | $38,060 | $53,350 | $85,350 |
| 8 persons | $42,380 | $56,800 | $90,850 |

*The FY 2014 Consolidated Appropriations Act changed the definition of extremely low-income to be the greater of 30/50$^{ths}$ (60%) of the Section 8 very low-income limit or the poverty guideline as established by the Department of Health and Human Services, provided that this amount is not greater than the Section 8 50% very low-income limit.

Data source: "Austin-Round Rock, TX MSA FY 2018 Income Limits Summary," U.S. Department of Housing and Urban Development, https://www.huduser.gov/portal/datasets/il/il2018/2018summary.odn.

# Endnotes


1 Vivian Nguyen, "Fact Sheet: Long Term Support and Services," AARP Policy Institute, March 2017, https://www.aarp.org/content/dam/aarp/ppi/2017-01/Fact%20Sheet%20Long-Term%20Support%20and%20Services.pdf.
2 Ibid.
3 Ibid.
4 Olmstead v. L.C., 527 U.S. 581, (1999), https://www.law.cornell.edu/supct/html/98-536.ZS.html.
5 Kirsten J. Colello, "Who Pays For Long-Term Services And Supports? A Fact Sheet," Congressional Research Service, August 2018, https://fas.org/sgp/crs/misc/IF10343.pdf.
6 Ibid.
7 Kathi Montalbano, "Overview Of Texas Medicaid Waivers," Texas Health And Human Service Commission, December 2016, https://hhs.texas.gov/sites/default/files/documents/about-hhs/leadership/advisory-committees/tccd-docs/120616/4.pdf.
8 Navigate Life Texas: A Project of Texas Health and Human Services,"Waivers," accessed November 2018, https://www.navigatelifetexas.org/en/insurance-financial-help/texas-medicaid-waiver-programs-for-children-with-disabilities
9 Ibid.
10 Kathi Montalbano.
11 Ibid.
12 Texas Health and Human Services, "Interest List Reduction," last modified May 2018, https://hhs.texas.gov/about-hhs/records-statistics/interest-list-reduction.
13 Ibid.
14 Genworth, "Cost of Care Survey 2018," June 2018, https://www.genworth.com/aging-and-you/finances/cost-of-care.html.
15 AARP, The Commonwealth Fund, & The Scan Foundation, "Long-term services & supports state scorecard," AARP, The Commonwealth Fund and The Scan Foundation, accessed November 21, 2018, http://www.longtermscorecard.org.
16 Ibid.
17 United Cerebral Palsy, "The Case for Inclusion 2016," http://cfi.ucp.org/wp-content/uploads/2014/03/Case-for-Inclusion-2016-FINAL.pdf.
18 Ibid.
19 Ibid.
20 Susan C. Reinhard, Lynn Friss Feinberg, Rita Choula and Ari Houser, "Valuing the Invaluable: 2015 Update, Undeniable Progress, but Big Gaps Remain," AARP Public Policy Institute, July 2015, http://www.aarp.org/content/dam/aarp/ppi/2015/valuing-the-invaluable-2015-update-new.pdf
21 Center for Disease Control and Prevention, "Why Act Early if You're Concerned about Development?" last modified May 11, 2018, https://www.cdc.gov/ncbddd/actearly/whyActEarly.html.
22 Ibid.
23 Navigate Life Texas: A project of Texas Health and Human Services, "Your Child's Right to a Public Education," accessed November 29, 2018, https://www.navigatelifetexas.org/en/education-schools/your-childs-right-to-a-public-education
24 Ibid.
25 Ibid.
26 Bureau of Labor Statistics, "Persons with a Disability: Labor Force Characteristics-2017," June 21, 2018, https://www.bls.gov/news.release/pdf/disabl.pdf.
27 U.S. Department of Labor, "About ODEP," accessed November 30, 2018, https://www.dol.gov/odep/about/
28 Navigate Life Texas: A project of Texas Health and Human Services, "Careers for People with Disabilities," accessed November 30, 2018, https://www.navigatelifetexas.org/en/transition-to-adulthood/careers-for-people-with-disabilities
29 "Connect2affect: powered by AARP Foundation, "About Isolation," accessed November 29, 2018, https://connect2affect.org/about-isolation/.
30 Ibid.
31 Ibid.
32 Ibid.
33 U.S. Census Bureau, 2012-2016 American Community Survey 5-Year Estimates, S1810, http://factfinder2.census.gov.
34 Ibid.