

LAR Analysis - Travis County, Texas

Scope: This document is intended to identify the impact of proposed state agency funding on the health and human services community in Travis County, Texas. This includes impact to both consumers of these services and agencies providing these services. Note that some programs or groups of programs are included that pertain directly to specific TCHHS/VS investments and may be incongruous with the aforementioned criteria. Relatively small proposed changes in funding levels are not included in this analysis, nor are changes in funding in areas of administration, IT, travel, training and other "overhead" costs. Changes to funding levels in these areas can result in loss of service or the diminishing quality of services to clients.

Methodology: Calculations were performed using Legislative Appropriations Requests for the 2016-2017 Biennium. Specifically, schedules 2A and 2F were used.

Note: Some of the impact statements do not correspond to the reductions shown in the biennial change columns. This is because a program group may show an increase overall, while a specific program or sub-program within that group will have been reduced. Sometimes a reduction is shown, but the amount of the reduction does not match what is reflected in the impact column.

Department of Family and Protective Services (DFPS)									
Goal/Objective/Strategy	Affected Programs/Program Groups	estimated/ budgeted Base 2014-15	Base Request 2016-17	Biennial Change \$ of Base Request	Biennial Change % of Base Request	Exceptional Request 2016-17	Federal Funds Loss	Local Funding Recipient/Provider	Local Impact
B.1	Child Protective Services [B.1.1-B.1.11]	\$ 2,613,490,834	\$ 2,674,848,270	\$ 61,357,436	2%	\$ 147,581,461	Loss of Title IV-E monies, possible reductions in discretionary funding caps, TANF balances used last biennium to cover shortfall are not sufficient to cover gaps in 16-17	n/a	Changes in this goal include a decrease in federal funds due to the decline in Title IV-E foster care population ratio as more children are placed with relatives in non-verified foster homes and the continual decline in Title IV-E financial participation. Growing caseloads combined with reduction in federal funds puts increased strain on local and state-funded safety net.
C.1	Prevention and Early Intervention Programs [C.1.1-1.6]	\$ 80,704,876	\$ 91,013,812	\$ 10,308,936	13%	\$ 30,652,446		Any Baby Can LifeWorks	Prevention programs are essential in deterring youth from poor outcomes and for controlling costs related to the effects of abuse and neglect.

Department of State Health Services (DSHS)									
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A.2.2	HIV/STD Prevention	\$ 391,507,107	\$ 382,857,324	\$ (8,649,783)	-2%	\$ 6,124,996		Local ASOs	Fiscal challenges include rising costs of new medications and treatments. More information is needed on changes in Ryan White funding and the impact of ACA implementation. The Travis County rate of persons living with HIV as well as the Travis County rates for Chlamydia, Gonorrhea and Primary and Secondary Syphilis exceed those of both the nation and the state as a whole.
B.1.1	WIC/Famer's Market Nutrition Services	\$ 1,637,819,722	\$ 1,699,587,891	\$ 61,768,169	4%	\$ -			Proposed funding for these services may not be appropriate to address demand. Lack of sufficient services may create more demand for area food banks and other providers of basic needs services. Unsure if there are locally funded farmer's markets under this strategy.
B.1.2	Women and Children's Health Services	\$ 156,890,231	\$ 154,190,150	\$ (2,700,081)	-2%	\$ -		Local clinics	Funded services in area clinics include healthcare for women and children, including breast and cervical screenings, counseling, and referrals to social services such as case management. Critical for our community, as those eligible are low-income persons not eligible for Medicaid.

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B. 1.3	Family Planning Services	\$ 43,150,668	\$ 42,939,981	\$ (210,687)	-0.5%	\$ -		local clinics	Not to be confused with D.2.3 under HHSC, now referred to as the Texas Women's Health Program. Unclear about what exactly this strategy includes. More information is needed on current local state of programming.
B.1.4	Community Primary Care Services	\$ 126,905,777	\$ 126,832,597	\$ (73,180.0)	-0.1%	\$ 20,000,000		Local clinics	This program contracts with community health clinics and non profit organizations to provide a range of services for poor Texans who don't qualify for other state health programs.
B.2.1	Mental Health Services for Adults	\$ 658,225,951	\$ 649,092,843	\$ (9,133,108)	-1%	\$ 41,777,528		ATCIC	Services are an alternative to costly hospitalization or institutionalization. Consider that our state match has to be maintained to receive full federal funding under the Mental Health Block Grant
B.2.2	Mental Health Services for Children	\$ 205,012,225	\$ 211,597,350	\$ 6,585,125	3%	\$ 4,805,604		ATCIC	Services are an alternative to costly hospitalization or institutionalization. Consider that our state match has to be maintained to receive full federal funding under the Mental Health Block Grant
B.2.3	Community Mental Health Crisis Services	\$ 221,871,623	\$ 221,659,435	\$ (212,188)	-0.1%	\$ 50,693,685		ATCIC and others	Population growth and the number of uninsured and underinsured, as well as returning veterans or persons re-entering society from incarceration are often in need of crisis services, frequently to access psychotropic medication they have been prescribed but have lost access to.

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B.2.5	Substance Abuse Prevention /Intervention /Treatment	\$ 307,850,746	\$ 300,022,153	\$ (7,828,593.00)	-2.54%	\$ 43,494,016		ATCIC and others	Local substance abuse planning efforts completed in the last year indicate, as have many other community health assessments completed in recent years, that the current substance abuse treatment capacity is insufficient for the growing demand. Lack of a substantive increase in state funds for these services will mean continuing spill-over into County jail and ERs, which is very costly for counties.
B.3.1	EMS and Trauma Care Systems	\$ 433,879,350	\$ 131,556,537	\$ (302,322,813)	-70%	\$ 4,645,626			Some gaps in these systems include patchwork funding, underfunding, aging of EMS personnel, and financially unstable hospitals competing for funded patients coming through EMS.
B.3.3	County Indigent Health Care Services	\$ 4,353,180	\$ 4,372,889	\$ 19,709	0.5%	\$ -			Lack of a substantive increase in funding will place more strain on local systems to fund care for the uninsured and underinsured. Local health insurance gains are unknown as the effects of the ACA are not clear.

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C.1.3	Mental Health State Hospitals	\$ 853,400,114	\$ 841,984,500	\$ (11,415,614)	-1%	\$ 21,767,845		ASH	Travis County lacks sufficient beds in the Austin State Hospital. Population growth, the increased use of beds by forensic patients and the lack of any substantive increase in the number of publicly funded beds result in civil or voluntary patients are not receiving care in appropriate settings. With inadequate supply of state beds, persons in need access ERs. Others are incarcerated. Some must be transported by law enforcement officials to hospitals with open beds in other areas of the state for treatment. Result is higher costs for local and state government. Local taxpayers also bear a cost burden - they pay for the uninsured patients receiving services in locally-funded public hospitals and they fund the local indigent healthcare programs that provide MH/SA services to Medicaid enrollees who can't access state hospital beds and appropriate community services
C.2.1	Mental Health Community Hospitals	\$ 157,646,977	\$ 159,943,241	\$ 2,296,264	1%	\$ 40,000,000			These facilities are an alternative to persons leaving localities for inpatient treatment at a state hospital. Many are teaching hospitals. More information is needed to understand the local impact of these funds.

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Health and Human Services Commission (HHSC)									
Goal/Objective/Strategy	Affected Programs/Program Groups	estimated/ budgeted Base 2014-15	Base Request 2016-17	Biennial Change \$ of Base Request	Biennial Change % of Base Request	Exceptional Request 2016-17	Federal Funds Loss	Local Funding Recipient/Provider	Local Impact
B.1.1-B.3.1	Medicaid	\$ 47,941,883,859	\$ 54,037,310,850	\$ 6,095,426,991	13%	\$ 3,714,775,436		n/a	Caseloads are growing as a result of implementation of the ACA's Individual Mandate - even though Texas has elected not to expand Medicaid to low-income working age adults. Healthcare costs continue to rise. Exceptional item is the cost of maintaining 2015 service levels for 2016 and 2017.
C.1.1-C.1.4	CHIP	\$ 2,047,022,283	\$ 1,815,748,769	\$ (231,273,514)	-11%	\$ 96,671,140			Exceptional item is the cost of maintaining 2015 service levels for 2016 and 2017.
D.1.1	TANF Grants	\$ 145,055,524	\$ 147,572,543	\$ 2,517,019	2%	\$ -			The cash grant amount has not been increased in more than 10 years. Nearly flat funding for TANF translates locally into increased demand for basic needs.
D.2.3.	Texas Women's Health Program	\$ 69,310,379	\$ 69,310,379	\$ -	0%	\$ -	n/a	more info needed	This is the state replacement program for the now-defunct Women's Health Program which was a Medicaid pilot program. The 16-17 request assumes the funding for this program will remain exclusively from the state.

Texas Department of Housing and Community Affairs (TDHCA)								
Goal/Objective/Strategy	Affected Programs/Program Groups	estimated/ budgeted Base 2014-15	Base Request 2016-17	Biennial Change \$ of Base Request	Biennial Change % of Base Request	Federal Funds Loss	Local Funding Recipient/Provider	Local Impact
A.1.1-1.6	Affordable Housing	\$ 104,500,190	\$ 92,229,646	\$ (12,270,544)	-11.7%	HOME funds decrease		Demand for loan products for low-income individuals remain high due to local market conditions and tightened underwriting guidelines and credit requirements. Any decrease in funds for affordable housing allocation puts greater pressure on local agencies.
C.1.1	Poverty-Related Funds	\$ 90,457,630	\$ 90,408,114	\$ (49,516)	-0.1%			Funds for Housing and Homeless Services provide case management and housing placement and retention services for homeless individuals and families. If sufficient funds are not allocated to these services, we will see an increase in homelessness and near-homelessness, as well as demand for shelter bed nights and homelessness prevention services.
C.2.1	Energy Assistance Programs	\$ 265,941,454	\$ 265,952,416	\$ 10,962	0.004%		Travis County HHS/VS and others	Flat allocation for energy assistance programs can result in mounting debt, increases in foreclosure, poverty rates, homelessness and near-homelessness.

Agency	Goal/Objective/ Strategy	Affected Programs/Program Groups	estimated/ budgeted Base 2014-15	Base Request 2016- 17	Biennial Change \$ of Base Request	Biennial Change % of Base Request	Exceptional Request 2016-17	Federal Funding Loss	Local Funding Recipient/Provider	Local Impact
Texas Veteran's Commission	A.1.1	Claims Representation and Counseling to Veterans and their Families	\$ 12,795,040	\$ 12,910,800	\$ 115,760	1%	\$ 3,420,802	Reductions to claims staff, counseling and services to Veterans and their families reduces the amount of federal funds TVC can draw down to serve Central Texas Veterans		The end of combat in Iraq and a decreased military presence in Afghanistan will continue to contribute to a spike in the number of Veterans who are claiming benefits.
	A.1.2-A.1.5	Other services to Veteran's: Employment, Education, Assistance Grants and Outreach	\$ 24,160,593	\$ 24,946,286	\$ 785,693	3%	\$ 6,464,621	Reductions to claims staff, counseling and services to Veterans and their families reduces the amount of federal funds TVC can draw down to serve Central Texas Veterans	unknown	Cuts to these programs will mean greater unemployment for Veterans and poor outcomes for Veterans and their families who are not able to receive needed services. Unsure of local allocation.
Texas Veteran's Commission	B.1.1-B.1.2	General Assistance Grants to Veterans and Housing for Texas Heroes	\$ 23,621,628	\$ 24,970,600	\$ 1,348,972	6%	\$ -			Mental health and housing services for Veterans. Unsure of local allocation.
General Land Office and Veteran's Land Board	C.1.1-1.3	Veteran's Land Board	\$ 48,169,499	\$ 47,013,807	\$ (1,155,692)	-2%				Funding pays for maintenance of Veteran cemeteries, Veteran loan programs and nursing home care for Veterans.