



Independent Living Services Program Annual Report

**As Required by the
2022-23 General Appropriations Act,
Senate Bill 1, 87th Legislature, Regular
Session, 2021 (Article II, Health and
Human Services Commission, Rider 83)**

**Texas Health and Human Services
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Executive Summary

In accordance with the [2022-23 General Appropriations Act, Senate Bill \(S.B.\) 1, 87th Legislature, Regular Session, 2021](#) (Article II, Health and Human Services Commission, Rider 83), the Texas Health and Human Services Commission (HHSC) is required to submit an annual report on the Independent Living Services (ILS) program.

The annual report includes data from fiscal year 2021 and fiscal year 2022 on the use of funds, appropriated in Strategy F.2.1, Independent Living Services of the General Appropriations Act, by the Centers for Independent Living (CILs), including: the number of individuals served, breakdown of services provided, performance targets, and other information necessary to ensure accounting of the use of funds. Data for fiscal years 2017 to 2020 may be found in the 2021 report.¹

The ILS Program at HHSC oversees the purchased services grant for the procurement of goods and services needed for individuals to live more independently. HHSC also provides oversight of the base grant for information and referral services, independent living skills training, advocacy, peer counseling, and transition services. As the designated state entity to receive federal funds from the United States (U.S.) Department of Health and Human Services (DHHS) Administration for Community Living, HHSC provides a passthrough grant to the State Independent Living Council (SILC), which develops the State Plan for Independent Living (SPIL) and implements various independent living projects across the state. Information found in this report includes ILS data regarding:

- Individuals seeking services.
- Individuals who received services.
- Individuals who achieved an independent living (IL) outcome.
- Demographic data of individuals receiving services from the purchased services contracts.
- Funds awarded and expended each year.

The report demonstrates a downward trend in the number of services provided to individuals, the number of individuals who met their independent living goals, and the number of referrals received by service providers. These trends, which began in

¹ Independent Living Services Program Annual Report, December 2021.
<https://www.hhs.texas.gov/sites/default/files/documents/ils-legislative-report-dec-2021.pdf>

fiscal year 2019, continued through fiscal year 2021. The report shows that the number of individuals served² peaked in fiscal year 2019 due to a carry forward of existing cases not served in previous fiscal years. Although the number of services was highest in fiscal year 2019, this number was representative of previous fiscal years before the downward trend began.

HHSC ILS staff have worked to address these trends through contract oversight and monitoring, and by providing training and technical assistance to CIL providers. HHSC will continue to support capacity building of ILS by continuing these initiatives, as well as soliciting feedback from individuals on personal experiences with ILS. HHSC will use the results of the comprehensive review of the program, as required by Rider 83, to inform future improvements of the program.

Fiscal year 2022 data demonstrates that efforts by the HHSC ILS program have led to improvements in service delivery. The number of individuals receiving services, successful closures, new referrals, items purchased for individuals, and funds spent on individuals with disabilities all increased from fiscal year 2021.

There are still areas where improvement can occur. Although the fiscal year 2022 numbers did exceed those of the previous year, they were well below the numbers seen in fiscal years 2018 and 2019. Declines in veterans served and total individuals served have continued. Funds designated for purchased services are still being lapsed by CILs. Because these funds cannot be carried forward, this has led to fewer individuals receiving services in a given year and longer waiting times. The issues noted above cannot be solely attributed to the impact of COVID-19. In each year from fiscal year 2020 to 2022, several CILs spent 90 percent or more of their purchased services funds. In fiscal years 2020 and 2021, 45 percent of CILs expended 90 percent of funds, and in fiscal year 2022, 55 percent of CILs did so. Additionally, the Administration for Community Living directed CILs to have policies in place by May 31, 2020, to be able to provide services whether virtually or in person³ to ensure services were available during the pandemic.

² Served refers to an individual who has an active Independent Living Plan. The individual may or may not receive services in a given fiscal year.

³ <https://www.hhs.gov/guidance/document/faqs-cil-covid-19-aid-relief-and-economic-security-act-2020-cares-act-funding>

1. Introduction

This report provides an overview of data from each of the HHSC ILS program's three components:

Purchased Services Grant

- Available services
- Services received
- Goals met
- Referrals to the CILs
- Numbers served by disability type
- Age and ethnicity breakdowns of individuals served
- Veterans served
- Financial data

Base Grant

- Available services
- Individuals served
- Information and referral provided
- Number of individuals with an active plan
- Financial data

SILC

- Overview of SILC duties
- Financial data

A majority of the data included is from fiscal years 2021 and 2022. In some instances, the numbers go back multiple years to demonstrate trends in the data. Conclusions are drawn based on the available data. In areas where the CILs need to improve, potential reasons and HHSC actions to address these areas are provided. Although the program has been impacted by COVID-19, it appears to have had a more profound effect on CILs who were underperforming prior to the pandemic. CILs who had been performing well largely continued to find ways to

serve individuals despite significant obstacles with supply chains issues, social distancing, and vendor shutdowns.

Rider 83 directed the program to submit this annual report to detail the number of individuals served, a breakdown of services provided, performance targets and other information deemed necessary to account for how the funds were spent.

2. Background

The purpose of the HHSC ILS program is to facilitate the provision of services to support individuals with significant⁴ disabilities to achieve greater independence in their home and community. Any person with a significant disability in the state of Texas is eligible for services. HHSC awards contracts to CILs and other organizations or persons skilled in the delivery of independent living services to carry out the purpose of this program in specific service areas.

ILS transferred to HHSC from the legacy Department of Assistive and Rehabilitative Services as part of the Health and Human Services Transformation directed by S.B. 200, 84th Legislature, Regular Session, 2015. The program was subsequently outsourced to CILs on September 1, 2016, as required by House Bill (H.B.) 2463, 84th Legislature, Regular Session, 2015. HHSC continues to oversee ILS, with the exception of Independent Living Services for Older Individuals who are Blind, which transferred to the Texas Workforce Commission as required by S.B. 208, 84th Legislature, Regular Session, 2015.

As part of the oversight responsibilities of ILS, HHSC contracts with the SILC and serves as the designated state entity of federal funds authorized by Chapter 1, Title VII of the Rehabilitation Act of 1973, as amended, and administered by the federal partner, Administration for Community Living. The Rehabilitation Act requires each state to contribute toward the cost of independent living services. In addition to the federal funds, referred to as Part B, ILS receives state general revenue funds and Social Security Administration Vocational Rehabilitation funds through an interagency agreement with the Texas Workforce Commission.

ILS has three components: purchased services contracts, base operational contracts, and a contract with the SILC to develop, monitor and report on the SPIL.

The purchased services contracts allow for the purchase of goods or services necessary to reduce limitations resulting from individuals' disabilities impacting independence. Individuals must be able to benefit from the goods and services purchased to achieve an independent living outcome. As part of the purchased services contracts, individuals contribute towards the cost of independent living goods or services. The percentage contributed is on a sliding scale based on

⁴ A severe physical, mental, cognitive, or sensory impairment that substantially limits an individual's ability to function independently in the family or community and for which the delivery of IL services would improve the ability to function, continue functioning, or move toward functioning independently in the family, community or in an employment setting.

income. Although it is often less than one percent of the total of the goods or services purchased, the individual contributes to their services and the process of increasing their independence. The funds collected are added to the purchased services dollars available to the CIL, allowing more individuals to be served.

The base operational contracts provide CILs with funds to serve individuals with significant disabilities and are aligned with the federal Rehabilitation Act. Unlike the purchased services contracts, all services through the base operational contracts are provided or arranged by CIL staff.

The SILC is a nonprofit council whose members are appointed by the governor. The primary function of the SILC is to develop and monitor the SPIL in partnership with the CILs and HHSC, as directed by Section 704 of the Rehabilitation Act. The SPIL defines the provision of independent living services and identifies statewide priorities.

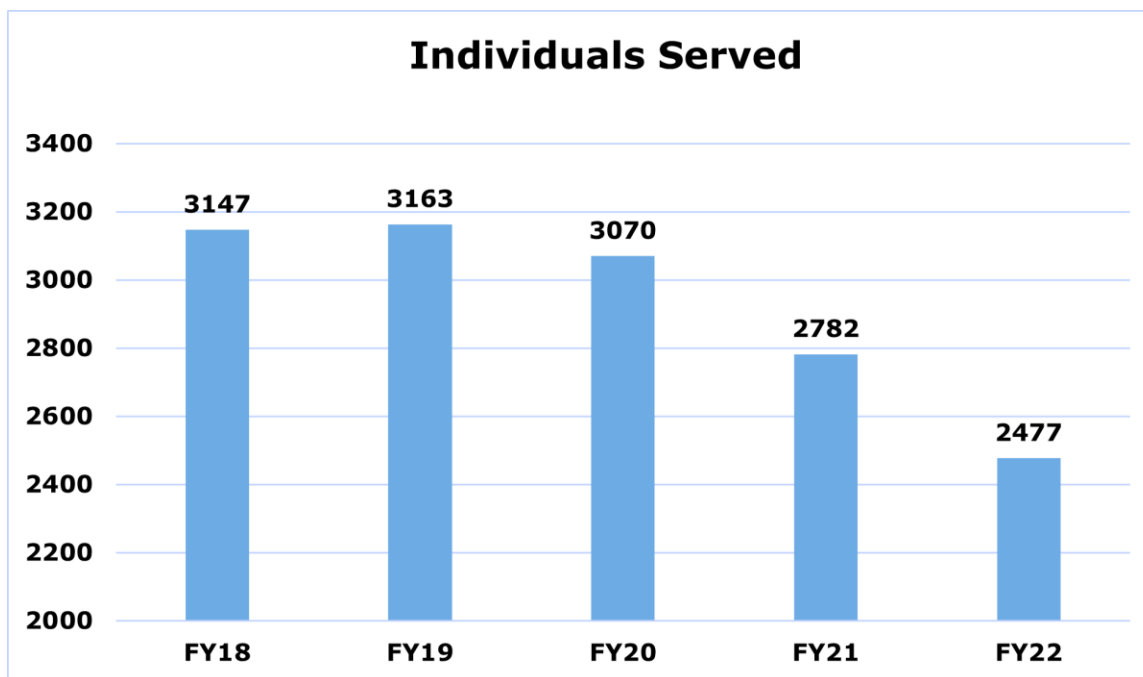
Under the current independent living model, HHSC is required to contract with CILs to provide services that are not available from any other community resources, insurance, or state waiver programs. HHSC provides oversight and monitoring of these contracts with CILs and the contract with the SILC. A team of trainers, technical assistance specialists, and compliance specialists work closely with the CILs to build CIL capacity, identify gaps in services, improve service delivery, and efficiently use program resources. HHSC activities include, but are not limited to, individualized CIL technical assistance and training, monthly CIL webinars, routine meetings with CIL staff, desk monitoring reviews, on-site monitoring reviews, and other oversight activities.

3. Purchased Services Contracts

On September 1, 2016, all purchased services were outsourced to CILs as directed by H.B. 2463. The individuals supported by the purchased services contracts were transferred to the CIL assigned as the service provider of the county where the individual was residing. On September 1, 2016, CILs began serving individuals who were transferred and began receiving new referrals to the program. Some of the steps involved in serving individuals include completing applications for services, determining eligibility, developing independent living plans (ILPs), obtaining assessments to identify appropriate goods or services, and purchasing goods and services identified in the ILP. Other responsibilities outsourced to the CILs were developing a pool of vendors from which to purchase evaluations, goods, or services, and outreach to referral sources to provide awareness of the availability of ILS.

Figure 1 (below) shows the number of individuals served by the purchased services contracts since fiscal year 2021. Data on individuals served is obtained from the ILS Data Reporting System (DRS), which is the HHSC ILS system CILs use to report and track data for the purchased services contracts. The definition of “served” is any individual who has been determined eligible and has an ILP; however, served individuals may not have received an actual good or service. Individuals who had a plan in one fiscal year and whose cases were not closed will transition to the following fiscal year and be counted again as part of the new fiscal year served count. There was a decline in the number of individuals served in fiscal year 2022. Additional numbers of cases closed were reported for fiscal year 2022 and there was no significant increase in number of referrals, which may partly explain the decline. However, the CILs are required to conduct outreach, especially in underserved areas and to underserved populations.

Figure 1. Annual number of individuals served by the purchased services contracts since fiscal year 2018.



Source: Independent Living Services Data Reporting System

Services Received

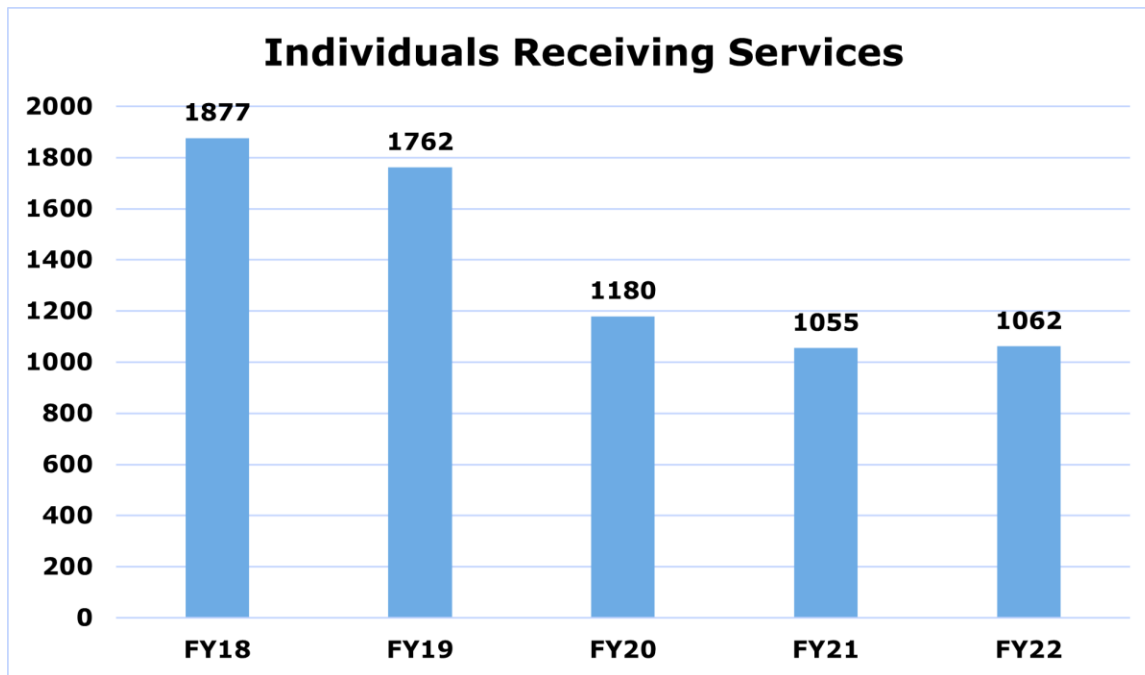
An individual may begin receiving goods or services purchased with ILS funds once an ILP is in place. Some goods or services are considered complex purchases, requiring multiple assessments or approval from HHSC prior to the purchase. An individual may receive one or more goods or services depending upon the independent living needs. In comparison to the number of individuals who have an ILP and are counted as served, there are fewer individuals who received a purchased service. This indicates many individuals have an ILP but have not yet received the goods or services listed in their plan.

The number of individuals who received purchased goods or services peaked in fiscal year 2018. This was the result of outreach activities by the CILs and the purchases for individuals who transferred from legacy Department of Assistive and Rehabilitative Services prior to the receipt of services. In fiscal year 2019, individuals who received a purchased good or service began to decline. This decline continued into fiscal year 2020 and 2021. The decline in outreach activities and service delivery occurred as the result of different factors for each CIL, including changes in CIL staff, changes to service delivery area, or a shift in focus from the purchased service contract. The CILs reported that the reduction in services was

further impacted by the COVID-19 pandemic in fiscal year 2020 when CILs adjusted methods of both delivering services and working with vendors. The decline continued into fiscal year 2021. Fiscal year 2022 saw an increase in the number of individuals who received a service, despite substantially more spending by the CILs for purchased services. This indicates that the amount spent on each individual is increasing. In fiscal year 2022, the number of individuals who received at least one service is down 43 percent since fiscal year 2018.

In response to the decline, HHSC ILS staff provided individual training to CILs on strategies for outreach and options for serving individuals remotely. To reinforce the focus on serving individuals, beginning in fiscal year 2019 HHSC began requiring each CIL to project which individuals would be served when requesting budget revisions. After continued decline in individual services, beginning in fiscal year 2020 the CILs were required to provide quarterly service projections when requesting funding from HHSC. Figure 2 includes the total number of individuals who received a purchased good or service per year. Individuals may receive more than one service.

Figure 2. The number of individuals who received services since fiscal year 2018



Source: Independent Living Services Data Reporting System

Changes in contracts have occurred since fiscal year 2021.

- HHSC terminated the Heart of Central Texas Independent Living (HOCTIL) contract in the second quarter of fiscal year 2021.
- Resource, Information, Support and Empowerment (RISE) withdrew from their contract with HHSC in the second quarter of fiscal year 2021.
- San Antonio Independent Living Services (SAILS) expanded to include the remaining central Texas HOCTIL service delivery area in fiscal year 2021.
- Houston Center for Independent Living (HCIL) expanded in fiscal year 2021 to cover the area formerly served by RISE.

Table 1 includes the number of individuals who received a purchased good or service per fiscal year by CIL.

Table 1. The number of individuals who received a purchased good or service per fiscal year by Center for Independent Living⁵.

CIL	FY21	FY22
Able Center for Independent Living (ABLE)	40	42
Austin Resource Center for Independent Living (ARCIL)	122	204
Coastal Bend Center for Independent Living (CBCIL)	29	24
Crockett Resource Center for Independent Living (CRCIL)	100	108
Disability in Action (DIA)	38	38
Houston Center for Independent Living (HCIL)	147	116
Heart of Central Texas Independent Living (HOCTIL)	21	N/A
Lifetime Independence for Everyone (LIFE)	126	88
Panhandle Independent Living Center (PILC)	47	95
Resource, Information, Support, and Empowerment (RISE)	6	N/A
San Antonio Independent Living Services (SAILS)	68	91
Valley Association for Independent Living (VAIL)	175	160
Volar Center for Independent Living (VOLAR)	136	96
Total	1,055	1,062

Goals Met

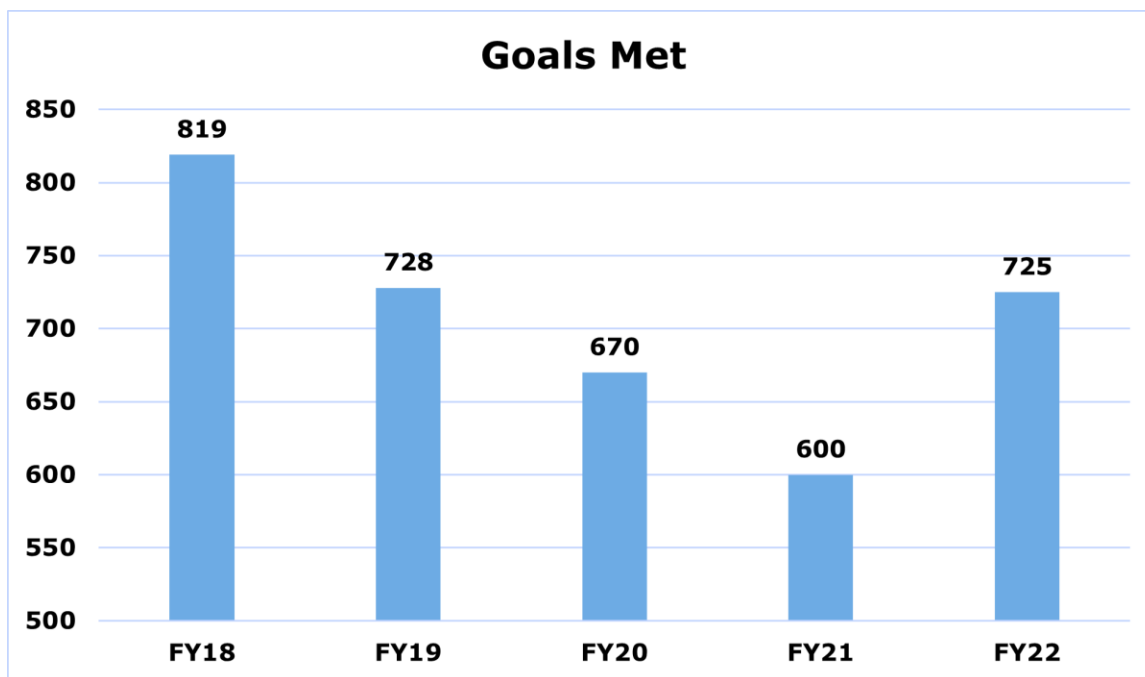
Individuals who achieve at least one independent living goal listed in the ILP due to the provision of goods or services purchased with independent living funds may have their case closed with a status of "goals met." These are called "goals-met

⁵ For a full list of Centers for Independent Living and acronyms, see the List of Acronyms on page 41. A Center for Independent Living is an individual-controlled, community-based, cross-disability nonresidential private nonprofit agency for individuals with significant disabilities, according to the Rehabilitation Act of 1973, as amended.

closures.” Individuals can have multiple goals listed in the ILP. Prior to closure of an ILS case, all goals must have been met or cancelled. Possible reasons a goal may have been cancelled are the good or service was provided by another program or comparable benefit, or the goal is no longer appropriate.

Fiscal year 2022 saw goals-met closures rise for the first time since fiscal year 2018. Figure 3 represents the total number of individuals who achieved a goals-met outcome. Table 2 provides data on the number of individuals who achieved an independent living goal per CIL.

Figure 3. The number of individuals with a case closed as IL Goals Met per fiscal year since 2018.



Source: Independent Living Services Data Reporting System

Table 2. The number of individuals with a case closed as IL Goals Met per CIL, per fiscal year.

CIL	FY21	FY22
ABLE	36	30
ARCIL	113	173
CBCIL	27	23
CRCIL	13	22
DIA	12	4
HOCTIL	30	N/A
HCIL	70	83
LIFE	34	60
PILC	22	43
RISE	11	N/A
SAILS	35	100
VAIL	134	100
VOLAR	63	87
Total	600	725

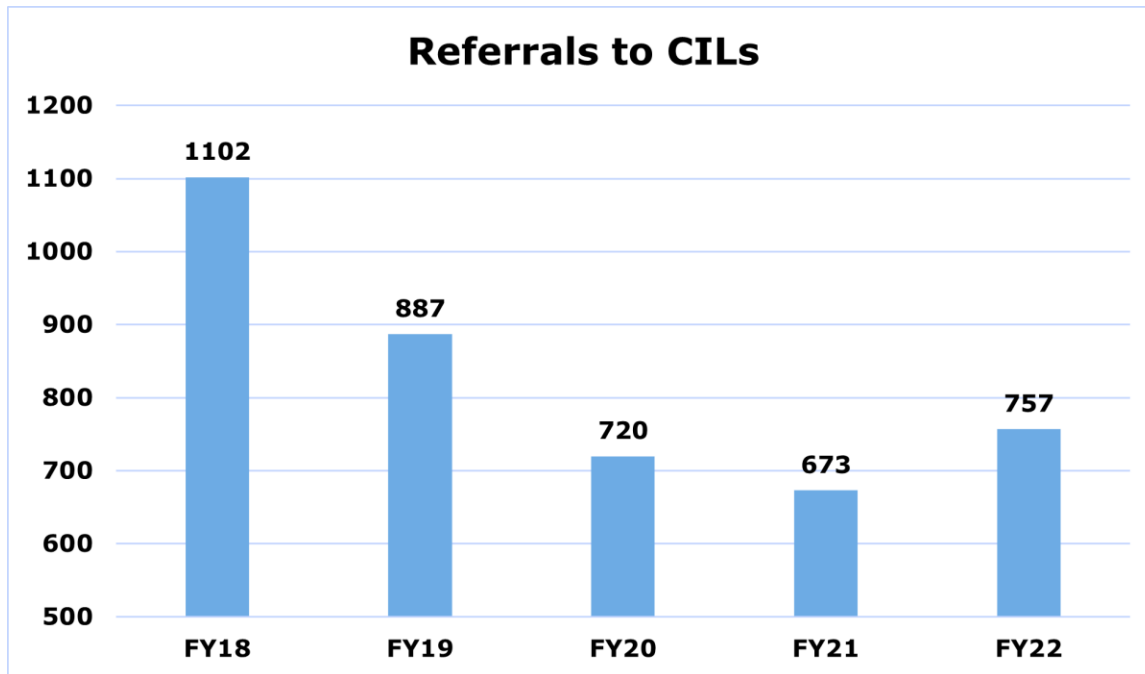
Referrals

Outreach by CILs to potential referral sources of underserved populations is a contractual requirement. Additionally, CIL assurances outlined in section 725(c)(10) of the Rehabilitation Act include, “aggressive outreach regarding services provided through the center will be conducted in an effort to reach populations of individuals with significant disabilities that are unserved or underserved by programs under this title, especially minority groups and urban and rural populations.”

Fiscal year 2022 saw an increase in referrals to CILs from the previous year. According to the most recent United States Census data, the proportion of Texans living with disabilities has remained fairly consistent from 2015 to 2021, ranging from 11.5 to 12 percent. There are an estimated 3,505,112 Texans living with disabilities as of 2021⁶. Based on this data, there is significant opportunity for the number of referrals to continue to grow with consistent outreach activities. Figure 4 (below) provides an annual total number of referrals received since fiscal year 2021. Table 3 provides the annual total number of referrals received and referral source.

⁶ U.S. Census Bureau. Types of Disabilities.
<https://data.census.gov/cedsci/table?q=Texas%20disabilities>

Figure 4. Total number of referrals received by the purchased services contracts since fiscal year 2018.



Source: Independent Living Services Data Reporting System

Table 3. Annual total number of referrals received and referral source.

Referral Source	FY2021	FY2022
Assisted Living	1	2
Educational Institution (Elementary, Secondary)	0	0
Educational Institution (Post-Secondary)	0	0
Eye Care Provider (Ophthalmologist, Optometrist)	4	7
Faith-Based Organization	2	2
Family Member or Friend	96	90
Government or Social Service Agency	65	65
Other CIL	94	47
Nursing Home or Long-Term Care Facility	2	0
One-Stop Employment or Training Centers	0	0
Other	92	87
Physician or Medical Provider	148	214
Self-Referral	161	222
Senior Program	1	5
State Vocational Rehabilitation Agency	7	15

Referral Source	FY2021	FY2022
Veterans Administration	0	1
Total	673	757

Individual Data

The ILS DRS is the HHSC ILS system used to report and track data related to the individuals in the purchased services contracts. Each CIL is required to enter data in the ILS DRS for each individual seeking goods or services under the grant. One purpose of this data is to identify populations that may be considered underserved. Through compilation of the data in the ILS DRS, reports can be generated based on specific demographics and compared to historical data of individuals served by ILS or the population of the service delivery area of the CIL. Outreach to underserved populations by CILs is a requirement of ILS.

Data tracked from the ILS DRS includes individuals served by primary disability type, date of birth, race or ethnicity, services requested, independent living goals, goods or services purchased including funds spent, and individual participation fees collected or waived.

Disability Type

Individuals may have more than one disability and may receive services for more than one disability. The data reported below is based on the primary disability reported by the individual. Since an individual may have more than one disability, the primary disability is the disability for which independent living services are needed or the disability that has a more substantial impact on living independently.

The number of individuals counted as served in the purchased services contracts peaked in fiscal year 2019. Individuals with a primary disability of vision impairment show a marked decline in numbers served. The most recent census data indicates the estimated population of Texans living with a visual impairment is 785,288.⁷ Based on ILS data, the number of individuals under the age of 54 with a visual impairment who are being served declined from 313 in fiscal year 2017 to 116 in fiscal year 2022. HHSC ILS would anticipate a higher number of individuals receiving vision-related services from the CILs based on the population data and historical ILS performance. Individuals with a hearing impairment is consistently one of the larger populations served in the purchased services contract, most often through the purchase of a hearing aid or other assistive device. Currently, there are

⁷ U.S. Census Bureau. Types of Disabilities.
<https://data.census.gov/cedsci/table?q=Texas%20disabilities>

an estimated 952,270 Texans with a hearing difficulty, according to United States census data.⁸ There are a limited number of state and federal programs providing affordable hearing aids, one of which is ILS. While the number of people with a hearing difficulty has remained steady, the number of people with a hearing disability receiving ILS services has declined by 24 percent since fiscal year 2021. Table 4 compares the total number of individuals served annually based on primary disability for the last two fiscal years.

Table 4. Individuals served annually by purchased services contracts by primary disability type since fiscal year 2021.

Primary Disability	FY21	FY22
Cognitive	37	40
Mental/Emotional	10	13
Physical	1,544	1,485
Hearing	1,041	792
Vision	119	116
DeafBlind	14	8
Other	17	23
Total	2,782	2,477

As of December 2022, there are 11 CILs throughout the state contracting with HHSC to provide purchased services. The service delivery area of each CIL differs in geographic size, population, and location. Therefore, the individual count between CILs is not expected to be similar. Tables 5 and 6 provide a breakdown of CILs and the individuals served based on reported primary disability type for fiscal years 2021 and 2022 respectively.

Table 5. Individuals served by purchased services contracts per CIL by primary disability type in fiscal year 2021.

CIL	Cognitive	Mental/Emotional	Physical	Hearing	Vision	DeafBlind	Other	Total
ABLE	3	0	60	27	2	0	0	92
ARCIL	6	4	300	121	30	3	2	466
CBCIL	1	1	16	23	1	1	0	43
CRCIL	6	1	152	85	9	0	0	253
DIA	0	0	49	48	0	0	0	97
HCIL	6	0	141	80	20	4	4	255
HOCTIL	0	0	52	120	4	1	1	178
LIFE	4	1	239	54	18	1	0	317
PILC	1	0	76	42	1	0	6	126
RISE	0	0	6	37	1	2	0	46
SAILS	0	1	59	142	11	1	2	216

⁸ U.S. Census Bureau. Disability Characteristics. <https://data.census.gov/cedsci/table?q=Texas%20disabilities&tid=ACSST1Y2019.S1810>.

CIL	Cognitive	Mental/ Emotional	Physical	Hearing	Vision	DeafBlind	Other	Total
VAIL	6	0	249	188	17	1	1	462
VOLAR	4	2	145	74	5	0	1	231
Total	37	10	1,544	1,041	119	14	17	2,782

Table 6. Individuals served by purchased services contracts per CIL by primary disability type in fiscal year 2022.

CIL	Cognitive	Mental/ Emotional	Physical	Hearing	Vision	DeafBlind	Other	Total
ABLE	3	0	53	25	1	0	0	82
ARCIL	4	3	339	140	37	3	2	528
CBCIL	0	0	24	14	1	0	1	40
CRCIL	5	2	163	90	14	0	1	275
DIA	0	0	47	70	0	0	0	117
HCIL	5	0	97	57	19	3	5	186
LIFE	6	2	226	60	14	1	0	309
PILC	4	2	69	47	2	0	9	133
SAILS	0	1	57	102	7	1	3	171
VAIL	8	2	278	128	19	0	2	437
VOLAR	5	1	132	59	2	0	0	199
Total	40	13	1,485	792	116	8	23	2,477

Age Range

There is no age requirement for individuals served by the purchased services contracts. The largest population of ILS individuals by age is those who are age 55 and older. Table 7 provides a breakdown of individuals served in the purchased services contracts by age. Tables 8 and 9 provide a breakdown of CILs and the individuals served based on age range for fiscal year 2021 and 2022, respectively.

Table 7. Individuals served annually by purchased services contracts by age range since fiscal year 2021.

Age	FY21	FY22
0-18	42	42
19-54	606	572
55 and older	2,134	1,863
Total	2,782	2,477

Table 8. Individuals served according to age range by purchased services contracts in fiscal year 2021.

CIL	Age 0-18 Years	Age 19-54 Years	Age 55 Years and Older	Total
ABLE	1	15	76	92
ARCIL	11	128	327	466
CBCIL	0	7	36	43
CRCIL	3	50	200	253
DIA	0	18	79	97
HCIL	0	65	190	255
HOCTIL	2	24	152	178
LIFE	6	65	246	317
PILC	1	38	87	126
RISE	0	3	43	46
SAILS	2	33	181	216
VAIL	15	99	348	462
VOLAR	1	61	169	231
Total	42	606	2,134	2,782

Table 9. Individuals served according to age range by purchased services contracts in fiscal year 2022.

CIL	Age 0-18 Years	Age 19-54 Years	Age 55 Years and Older	Total
ABLE	1	23	58	82
ARCIL	12	136	380	528
CBCIL	1	9	30	40
CRCIL	5	58	212	275
DIA	0	16	101	117
HCIL	0	43	143	186
LIFE	5	67	237	309
PILC	1	27	105	133
SAILS	1	31	139	171
VAIL	14	113	310	437
VOLAR	2	49	138	199
Total	42	572	1,863	2,477

Ethnicity and Race of ILS Individuals

Individuals' ethnicity or race, as reported, is also entered in the ILS DRS by the CIL. This information provides additional opportunities to identify populations that may be considered underserved when compared to historical data or census data for the service delivery area. Outreach activities to those populations can increase awareness of the purchased services contracts and generate referrals. The categorical breakdown of individuals served annually according to reported ethnicity

or race since fiscal year 2021 is captured in Table 10. The information per CIL is included for fiscal years 2021 and 2022 in Tables 11 and 12.

Table 10. Individuals served by purchased services contracts, based on reported race or ethnicity.

Fiscal Year	American Indian/Alaskan Native	Asian	Black or African American	Hispanic or Latino	Native Hawaiian or Pacific Islander	White	Total
FY2021	18	29	445	1,208	7	1,515	3,222
FY2022	15	25	405	1,112	7	1,220	2,784

Note: More than one category of race or ethnicity may be selected by an individual, resulting in a higher total than individuals reported as served.

Table 11. Individuals served by purchased services contracts, based on reported race or ethnicity per CIL for fiscal year 2021.

CIL	American Indian/Alaskan Native	Asian	Black or African American	Hispanic or Latino	Native Hawaiian or Pacific Islander	White	Total
ABLE	0	0	12	47	0	34	93
ARCIL	5	14	137	103	2	226	487
CBCIL	0	0	5	25	0	13	43
CRCIL	0	1	76	18	1	158	254
DIA	0	0	6	12	0	79	97
HCIL	4	5	103	56	0	92	260
HOCTIL	1	2	31	41	1	104	180
LIFE	4	2	13	138	0	158	315
PILC	1	1	13	29	2	81	127
RISE	0	0	16	4	0	26	46
SAILS	2	3	30	81	1	102	219
VAIL	0	0	0	440	0	228	668
VOLAR	1	1	3	214	0	214	433
Total	18	29	445	1,208	7	1,515	3,222

Table 12. Individuals served by purchased services contracts, based on reported race or ethnicity per CIL for fiscal year 2022.

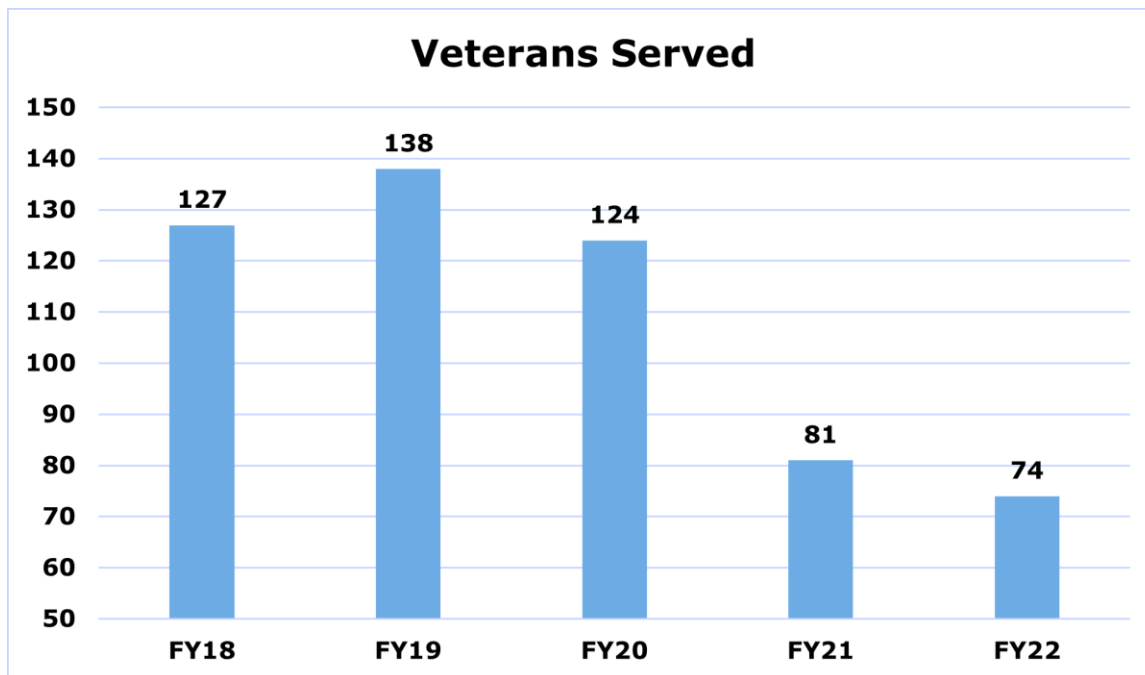
CIL	American Indian/Alaskan Native	Asian	Black or African American	Hispanic or Latino	Native Hawaiian or Pacific Islander	White	Total
ABLE	0	1	6	49	0	27	83
ARCIL	5	12	138	137	3	246	541
CBCIL	0	0	1	27	0	12	40
CRCIL	0	1	87	21	1	166	276
DIA	0	0	5	22	0	90	117
HCIL	1	5	85	32	0	64	187
LIFE	5	2	41	135	0	144	327
PILC	2	1	12	31	2	87	135
SAILS	2	2	21	63	1	82	171
VAIL	0	0	0	418	0	126	544
VOLAR	0	1	9	177	0	176	363
Total	15	25	405	1,112	7	1,220	2,784

Veterans

Collecting data on the veteran status of individuals is required by the purchased services contracts. This data gives CILs an opportunity to provide information to veterans about other programs and resources available to them and allows CILs to pursue or coordinate services with other programs available to veterans.

Additionally, outreach to organizations that serve veterans results in a higher number of referrals of veterans to ILS. The number of veterans served has declined each fiscal year since 2019. Figure 5 and Table 13 provide an annual total of veterans served by the purchased services contracts and by CIL since fiscal year 2021.

Figure 5. Total number of veterans served by purchased services contracts per year.



Source: Independent Living Services Data Reporting System

Table 13. Total number of veterans served by purchased services contracts per CIL for each fiscal year.

CIL	FY21	FY22
ABLE	2	1
ARCIL	17	24
CBCIL	0	0
CRCIL	13	15
DIA	2	3
HCIL	5	5
HOCTIL	6	N/A
LIFE	12	8
PILC	4	3
SAILS	5	2
VAIL	8	7
VOLAR	7	6
Total	81	74

Individuals Served with ILPs

An individual is counted as served once they are determined eligible for the program and an ILP is in place. The ILP includes the independent living goals of the

individual, goods, or services to be purchased or provided using ILS funds, and the anticipated duration of services.

With an ILP in place, allowable goods or services included in the ILP, and necessary to achieve the independent living goal or goals, can be purchased with ILS funds.

Performance targets for the number served in Table 14 were included in contract renewals for fiscal year 2019. As amendments and changes to service areas occurred, the targets were reviewed but not necessarily revised, taking individual CIL circumstances into consideration. All contracts for fiscal year 2023 include performance targets that are based on historical data and the service delivery area. Individuals who are counted as served carry forward into the next year if an active case is in the ILS DRS. This means an individual may be counted as served in multiple years but is still awaiting goods or services needed for independent living. More data will be available in future annual reports to compare CIL performance to established internal targets.

The numbers in Tables 15 and 16 include the overall number of individuals with a signed or waived ILP and who are considered served with performance targets for applicable years. Sixty-four percent of CILs met their performance targets in fiscal year 2022. The ILS program will review current performance targets for numbers of individuals served and add performance targets for goals-met closures in its fiscal year 2024 contracts. Performance targets will be examined for all CILs to provide numbers that are challenging but achievable based on historical data for each region of the state. The addition of performance targets for goals-met closures will encourage outreach and is anticipated to reduce the number of individuals carrying forward without services each year.

Table 14. Individuals served with an ILP in comparison to annual performance targets.

Fiscal Year	Signed ILP or Signature Waived ILP	Performance Target
FY21	2,782	2,746
FY22	2,477	2,312

Table 15. Individuals served and performance target for each CIL in fiscal year 2021.

CIL	Signed ILP or Signature Waived ILP	Performance Target
ABLE	92	87
ARCIL	466	165
CBCIL	43	40
CRCIL	253	144
DIA	97	97
HCIL	255	398
HOCTIL	178	888
LIFE	317	248
PILC	126	171
RISE	46	74
SAILS	216	147
VAIL	462	178
VOLAR	231	109
Total	2,782	2,746

Table 16. Individuals served and performance target by each CIL in fiscal year 2022.

CIL	Signed ILP or Signature Waived ILP	Performance Target
ABLE	82	87
ARCIL	528	450
CBCIL	40	40
CRCIL	275	250
DIA	117	97
HCIL	186	388
LIFE	309	248
PILC	133	171
SAILS	171	300
VAIL	437	178
VOLAR	199	109
Total	2,477	2,318

Demographics of Services

A wide array of goods or services may be purchased with ILS funds to meet the unique independent living needs of individuals. Based on the needs of an individual, purchases may occur in one or more categories as listed in the ILP. Consistently, the largest categories of goods and services purchased for individuals are assistive technology, hearing aids and rehabilitation goods. One example of assistive technology that may not fall into another service category are environmental

controls such as automatic door openers, voice-operated thermostat controls, and remote-control lighting. Examples of rehabilitation goods and services are durable medical equipment (DME), such as manual wheelchairs, lift and recline chairs, and shower chairs. Many goods or services require specific assessments or a recommendation by a physician or other medical professional. Examples of goods or services that require additional assessments or authorization are orientation and mobility training, hearing aids, prosthetic devices, DME, and vehicle modifications.

Services Received by Disability Type

Individuals who have physical disabilities and significant hearing impairments are the largest number of individuals who are served based on primary disability type. Individuals who have a vision impairment or who are deafblind are considered more vulnerable populations due to the significant challenges experienced by a person with a sensory or dual sensory disability. In fiscal year 2022, only 67 of 1,331 (five percent) purchased goods or services went to an individual with a primary visual disability. Those 67 purchased goods and services only represented 1.1 percent of all purchased services funds spent. Significantly fewer services have been received by these individuals than would be anticipated based on the census disability data and historical data prior to outsourcing the program. The 2021 census data estimates that there are 785,288 individuals in Texas with a vision difficulty, which is about 22 percent of all individuals with a disability. There is no available census estimate for the number of individuals who have both a vision and hearing disability.

Due to the lower number of individuals served from these populations, HHSC ILS staff provided multiple training sessions to all CILs related to serving those with vision loss in fiscal years 2017, 2018, and 2019 with supplemental training to individual CILs in fiscal years 2019, 2020, and 2021. There are additional training sessions scheduled for fiscal year 2023. CILs have received guidance and training from HHSC ILS staff on developing outreach strategies to increase services to individuals with vision loss.

Purchases may be made for an individual from one or multiple categories. As a result, the number of purchases per category does not necessarily reflect the number of individuals who received a service. Table 17 provides information on the types of services purchased for individuals who have an ILP based on the primary disability for fiscal year 2021. Table 18 is a breakdown for fiscal year 2022.

Table 17. Categories of services purchased for individuals with an ILP based on primary disability for fiscal year 2021.

Category	Cognitive	Mental/ Emotional	Physical	Hearing	Vision	DeafBlind	Other	Total
Assistive Technology	1	0	20	5	9	0	0	35
Communication Devices and Services	1	0	1	20	0	0	1	23
Computer Hardware, Software, Accessories	0	0	3	0	0	0	0	3
Counseling and Therapies	0	1	12	0	1	1	0	15
Deaf Blind Equipment and Supplies	0	0	0	1	4	0	0	5
Diagnostic and Evaluations	2	0	53	77	6	0	0	138
Health Services	0	0	1	1	1	0	0	3
Hearing Aids and Services	3	2	25	285	6	0	0	321
Orientation and Mobility Training	0	0	0	0	6	1	1	8
Orthotics	3	1	11	0	0	0	0	15
Power Wheelchairs and Scooters	0	0	81	5	1	0	0	87
Prosthetic Devices	0	0	55	1	0	0	0	56
Rehabilitation Equipment Goods and Supplies	1	1	219	19	5	0	3	248
Residential Modification	2	2	118	8	2	0	1	133
Vehicle Modification	1	0	53	0	0	0	1	55
Total	14	7	652	422	41	2	7	1,145

Table 18. Categories of services purchased for individuals with an ILP based on primary disability for fiscal year 2022.

Category	Cognitive	Mental/ Emotional	Physical	Hearing	Vision	DeafBlind	Other	Total
Assistive Technology	0	0	27	4	11	2	2	46
Communication Devices and Services	1	0	0	24	0	0	0	25
Computer Hardware, Software, Accessories	0	0	0	0	1	0	0	1
Counseling and Therapies	0	0	8	2	0	1	0	11
DeafBlind Equipment and Supplies	0	0	0	2	4	0	0	6
Diagnostic and Evaluations	0	0	59	106	9	1	0	175
Health Services	1	0	1	0	0	0	0	2
Hearing Aids and Services	4	1	34	305	6	1	0	351
Orientation and Mobility Training	1	0	0	1	14	0	0	16
Orthotics	1	0	18	1	0	0	0	20
Power Wheelchairs and Scooters	1	0	113	1	1	0	0	116
Prosthetic Devices	0	0	77	0	1	0	2	80
Rehabilitation Equipment Goods and Supplies	6	2	225	24	16	1	5	279
Residential Modification	7	0	116	9	3	0	1	136
Vehicle Modification	2	0	57	0	0	0	1	60
Total	24	3	735	479	66	6	11	1,324

Services Received by Category

Although there are broad categories of goods or services purchased, the data below allows for more specific services to be reviewed. The purchased services contracts require HHSC pre-approval for the purchase of some complex goods and services. The requirement for approval is based on complexity and cost of the good or service.

Of the complex services categories, hearing aids are some of the most frequently purchased goods. Hearing aids reduce barriers and limitations to individuals with significant hearing impairments allowing for increased awareness of environmental sounds for safety and independence when communicating with medical providers, families, and others.

The complex service category of home modifications allows ILS funds to be used for the installation of devices or goods in the home to increase safety and independence when performing activities of daily living or accessing locations in the home. Examples of allowable modifications are installation of grab bars, ceiling track lifts, or ramps.

Mobility in the community or home is often impacted by physical disabilities, and power wheelchairs or scooters can reduce those limitations.

Vehicle modifications allow for equipment to be installed on a vehicle for individuals who can safely operate a vehicle or to transport an individual who is unable to drive. These services are provided when an individual does not have or cannot access public or para-transit transportation.

Prosthetic devices also allow for increased mobility in the home or community or allow for increased independence in mobility of other activities of daily living such as self-care.

There is a wide range of other goods or services not classified as complex by HHSC. This category includes services for individuals who are blind or have a severe visual impairment, such as magnification equipment, independent living skills training, diabetes education, and orientation and mobility training. Goods that are DME consist of equipment typically requiring a medical provider's recommendation, such as manual wheelchairs and patient lifts. Other purchased goods or services may include counseling services aimed at achieving increased independence, or a lift and recline chair.

Tables 19 and 20 capture the number of services that include complex rehabilitation, services for individuals who are blind or severely visually impaired, and other DME for fiscal years 2021 and 2022 by CIL.

Table 19. The number of purchased goods and services received by category for fiscal year 2021.

	Hearing Aids	Home Mods	Power Wheelchairs and Scooters	Vehicle Mods	Prosthetic Devices	Blind Services	Other	Total
ABLE	14	4	3	0	5	0	18	44
ARCIL	50	25	35	17	14	7	65	213
CBCIL	16	0	2	1	3	0	6	28
CRCIL	39	21	6	2	2	4	36	110
DIA	27	9	2	1	1	0	23	63
HCIL	61	15	9	19	10	12	32	158
HOCTIL	6	5	0	0	2	1	7	21
LIFE	21	13	6	3	0	6	70	119
PILC	16	3	3	1	2	0	9	34
RISE	3	0	1	0	0	0	1	5
SAILS	50	13	4	2	1	2	6	78
VAIL	55	23	9	8	6	1	79	181
VOLAR	39	2	7	1	10	0	32	91
Total	397	133	87	55	56	33	384	1,145

Table 20. The number of purchased goods and services by category for fiscal year 2022.

	Hearing Aids	Home Mods	Power Wheelchairs and Scooters	Vehicle Mods	Prosthetic Devices	Blind Services	Other	Total
ABLE	25	6	2	0	8	0	11	52
ARCIL	79	27	32	21	28	14	83	284
CBCIL	10	1	3	4	3	0	9	30
CRCIL	78	37	14	4	11	6	29	179
DIA	26	11	3	2	2	0	17	61
HCIL	99	18	10	38	11	20	38	234
LIFE	43	18	15	7	5	1	155	244
PILC	95	26	11	0	5	0	34	171
SAILS	42	26	4	4	14	0	14	105
VAIL	29	18	12	15	8	8	107	197
VOLAR	100	2	15	2	8	0	30	157
Total	626	190	121	97	103	50	527	1,714

Financial Data

Since 2017, the total funds available for the purchased services contracts have remained consistent. During the last five fiscal years, funds have been reallocated to CILs that have expanded their service area due to contracts that were not renewed or were terminated. Fiscal year 2017 was the first year the contracts were outsourced by HHSC, and funds were slow to be spent on individual services. In fiscal year 2019, HHSC received additional federal Part B funds and distributed those funds equally among the CILs contracted at the time. Table 21 lists the total purchased services contract funds available and expended for fiscal years 2021 and 2022 as well as the amount of unused funds. Funds have been lapsed each fiscal year. To address this issue, HHSC has required CILs to submit quarterly projections for services to individuals and provided monthly follow up to ensure services are moving forward. Advance payment invoices from the CILs were not processed until a sufficient plan was submitted for how they projected to serve individuals in the upcoming quarter. Additionally, targeted individualized and group training has been provided to increase CIL capacity to utilize all funds available. These efforts significantly reduced the amount of lapsed funds in fiscal year 2022. The goal is for CILs to be able to complete these functions without the additional support of HHSC ILS program staff.

Table 21. Total purchased services contract funds available, expended and remaining per year since fiscal year 2021.

Fiscal Year	Available	Expended	Total Remaining
FY21	\$8,942,529.01	\$7,334,153.58	\$1,608,375.43
FY22	\$8,942,529.01	\$8,487,503.95	\$455,025.06

Contract Amounts

For each CIL with a purchased services contract, funds are distributed for administrative expenses and for individual purchases. The amount of the administrative distribution was requested by each CIL in the initial contracts at the time of the transition of the program to HHSC. There have been proportional administrative funding changes when a CIL has added a new service area. A CIL can request administrative funds be reassigned to serve individuals; however, funds to serve individuals cannot be reassigned for administrative expenses. Table 22 represents the funds available for administrative expenses, those spent, and the total remaining for each fiscal year. This is followed by Table 23 representing the

budget available to serve individuals, amount spent on goods and services for individuals, and total remaining per fiscal year.

Table 22. Total administrative funds available, expended and remaining per fiscal year.

Fiscal Year	Available	Expended	Total Remaining
FY21	\$4,179,934.46	\$3,797,413.21	\$382,521.25
FY22	\$4,081,765.53	\$3,930,206.50	\$151,559.03

Table 23. Total funds available, spent and remaining to serve individuals.

Fiscal Year	Available	Expended	Total Remaining
FY21	\$4,760,861.51	\$3,536,740.37	\$1,224,121.14
FY22	\$4,860,763.48	\$4,546,172.24	\$314,591.24

CIL Contract Amounts

The award amount for each CIL is dependent upon the service delivery area, population, and historical data of ILS service provision.

At the time of transition from legacy Department of Assistive and Rehabilitative Services to HHSC, CILs requested the amount of funds they felt they needed for administrative expenses. Because the need of each CIL differs based on staffing, location and facility, the funds allocated for administrative expenses varied among each CIL. The outsourced model operates on the expectation that additional funding opportunities will be sought out by each CIL to supplement funds needed for administrative costs. In turn, CILs would then reduce the administrative charges under the HHSC contracts and shift more grant funding to services to individuals. However, the data demonstrates that CILs have not reduced budgets allocated for administrative expenses, nor reported significant efforts to supplement funds for these costs, therefore CIL administrative costs remain high.

For the funds allocated to serve individuals, expenses vary based on the type of goods or services being purchased. The populations served by each CIL may vary due to location or other resources available in the service delivery area. Just as the populations for each service delivery area vary, the cost of services for individuals can range from a small amount of \$20 for bump dots to mark appliances of someone with a visual impairment, to \$3,000 for hearing aids, to \$35,000 for vehicle modifications. Through strategies outlined in this report, HHSC ILS

continues to work individually with CILs to increase the number of individuals who are receiving services and to responsibly fully expend the grant funds allocated to them for services to individuals.

A breakdown of the award per CIL, allocations for administrative expenses and for services to individuals, and individuals served for fiscal year 2021 is listed in Table 24. Table 25 is the same breakdown for fiscal year 2022.

Table 24. Total award; administrative funds awarded and spent; and funds assigned to individual services, awarded, and spent, for fiscal year 2021. The number of individuals served per CIL with funds is also included.

CIL	Total Award	Administrative Funds Available	Administrative Funds Expended	Individual Services Funds Available	Individual Funds Expended	Served
ABLE	\$192,311.29	\$122,377.29	\$122,377.29	\$69,934.00	\$69,859.47	92
ARCIL	\$2,149,462.14	\$985,850.10	\$822,228.86	\$1,163,612.04	\$929,847.50	466
CBCIL	\$154,454.99	\$77,698.99	\$77,698.99	\$76,756.00	\$76,755.56	43
CRCIL	\$815,340.20	\$342,442.88	\$327,374.91	\$472,897.32	\$371,644.28	253
DIA	\$245,737.73	\$112,940.45	\$95,881.28	\$132,797.28	\$60,787.00	97
HCIL	\$1,365,695.88	\$642,079.62	\$555,832.92	\$723,616.26	\$618,105.31	255
HOCTIL	\$345,060.72	\$138,024.29	\$44,100.73	\$207,036.43	\$51,759.11	178
LIFE	\$762,709.61	\$320,338.04	\$295,048.63	\$442,371.57	\$159,944.73	317
PILC	\$773,382.15	\$386,161.22	\$355,417.86	\$387,220.93	\$102,638.66	126
RISE	\$45,062.51	\$35,515.15	\$35,515.15	\$9,547.36	\$9,547.36	46
SAILS	\$1,037,114.35	\$546,564.15	\$516,356.79	\$490,550.20	\$348,885.47	216
VAIL	\$816,549.21	\$383,049.63	\$380,709.23	\$433,499.58	\$430,831.98	462
VOLAR	\$491,805.10	\$180,816.21	\$168,870.57	\$310,988.89	\$310,822.97	231
Total	\$ 9,194,685.88	\$4,273,858.02	\$3,797,413.21	\$4,920,827.86	\$3,541,429.40	2,782

Table 25. Total award; administrative funds awarded and spent; and funds assigned to individual services, awarded, and spent, for fiscal year 2022. The number of individuals served per CIL with funds is also included.

CIL	Total Award	Administrative Funds Available	Administrative Funds Expended	Individual Services Funds Available	Individual Funds Expended	Served
ABLE	\$192,311.29	\$122,377.29	\$110,735.33	\$69,934.00	\$69,549.42	82
ARCIL	\$2,149,462.14	\$985,850.10	\$893,721.07	\$1,163,612.04	\$1,142,572.37	528
CBCIL	\$154,454.99	\$77,698.99	\$68,506.14	\$76,756.00	\$66,137.53	40
CRCIL	\$815,340.20	\$342,442.88	\$339,813.13	\$472,897.32	\$408,899.43	275
DIA	\$245,737.73	\$112,940.45	\$102,751.97	\$132,797.28	\$87,021.08	117
HCIL	\$1,422,058.87	\$624,790.61	\$621,567.00	\$797,268.26	\$774,797.32	186
LIFE	\$762,709.61	\$320,338.04	\$305,299.44	\$442,371.57	\$442,371.57	309
PILC	\$773,382.15	\$386,161.22	\$383,975.16	\$387,220.93	\$297,975.26	133
SAILS	\$1,118,717.72	\$579,205.50	\$579,151.43	\$539,512.22	\$478,454.40	171
VAIL	\$816,549.21	\$372,929.63	\$370,438.38	\$443,619.58	\$443,619.58	437
VOLAR	\$491,805.10	\$157,030.82	\$154,247.45	\$334,774.28	\$334,774.28	199
Total	\$ 8,942,529.01	\$4,081,765.53	\$3,930,206.50	\$4,860,763.48	\$4,546,172.24	2,477

CILs apply individual participation funds collected during the fiscal year toward the cost of individual services or they must return lapsed funds to HHSC. The amounts of individual participation funds collected or applied are not reflected in Table 24 or Table 25.

Expenditures per Individual Service Category

CILs are required to utilize other resources to assist with services, as appropriate, to maximize ILS grant funds and prevent duplication of services. ILS is considered the payor of last resort. Comparable benefits or services from other programs, within and outside of HHSC, are often available for those within certain populations, such as veterans, children with severe visual impairments, and individuals with significant hearing loss.

Below is a financial breakdown of funds used to serve individuals. Services in fiscal year 2022 for individuals with visual disabilities (Blind Services) was the lowest since the program was outsourced in fiscal year 2017. It represented an 85.7 percent decline from the highest spending year, fiscal year 2019, when \$358,031.76 was spent. Despite individuals with visual disabilities estimated to represent 22.4 percent of all persons with disabilities in Texas as of 2021⁹, in fiscal year 2022 the CILs only spent 1.1 percent on services related to blindness. It should be noted the hearing aids, home modifications, power wheelchairs, vehicle

⁹ U.S. Census Bureau. Types of Disabilities.
<https://data.census.gov/cedsci/table?q=Texas%20disabilities>

modifications, prosthetic devices, and other purchased services categories did see improvements in spending from fiscal year 2021.

Table 26. Funds spent on individual services by category, including services for those who are blind or have a significant visual impairment.

Service Category	FY21	FY22
Hearing Aids	\$1,073,326.13	\$1,239,749.37
Home Modifications	\$357,833.75	\$371,236.08
Power Wheelchairs and Scooters	\$508,706.97	\$550,572.38
Vehicle Modifications	\$371,183.33	\$668,844.60
Prosthetic Devices	\$491,527.56	\$852,642.55
Blind Services	\$154,996.87	\$51,220.10
Other	\$579,165.76	\$889,673.07
Total	\$3,536,740.37	\$4,623,938.15

Individual Participation Fees

As part of the purchased services contracts, individual recipients contribute towards the cost of independent goods or services received. Individuals are not required to pay toward the cost of diagnostic evaluations, assessments, or other types of evaluations. Once an ILP is in place and the services are to be purchased, individuals pay a percentage based on calculations that include reference to the current federal poverty level. Most individuals contribute between 0.5 percent and 1 percent toward each good or service received each month. If certain criteria are met, individual participation fees can be waived. Figure 6 shows the overall amounts of individual participation funds collected and waived since fiscal year 2021. The amount collected for fiscal year 2022 represented an increase from fiscal year 2021 but was still the second lowest amount since the program was outsourced in fiscal year 2017. Table 27 has the CIL breakdown of individual participation fees collected and waived for fiscal years 2021 and 2022.

Figure 6. Annual amount of individual participation fees collected and waived in the purchased services contracts since fiscal year 2021.

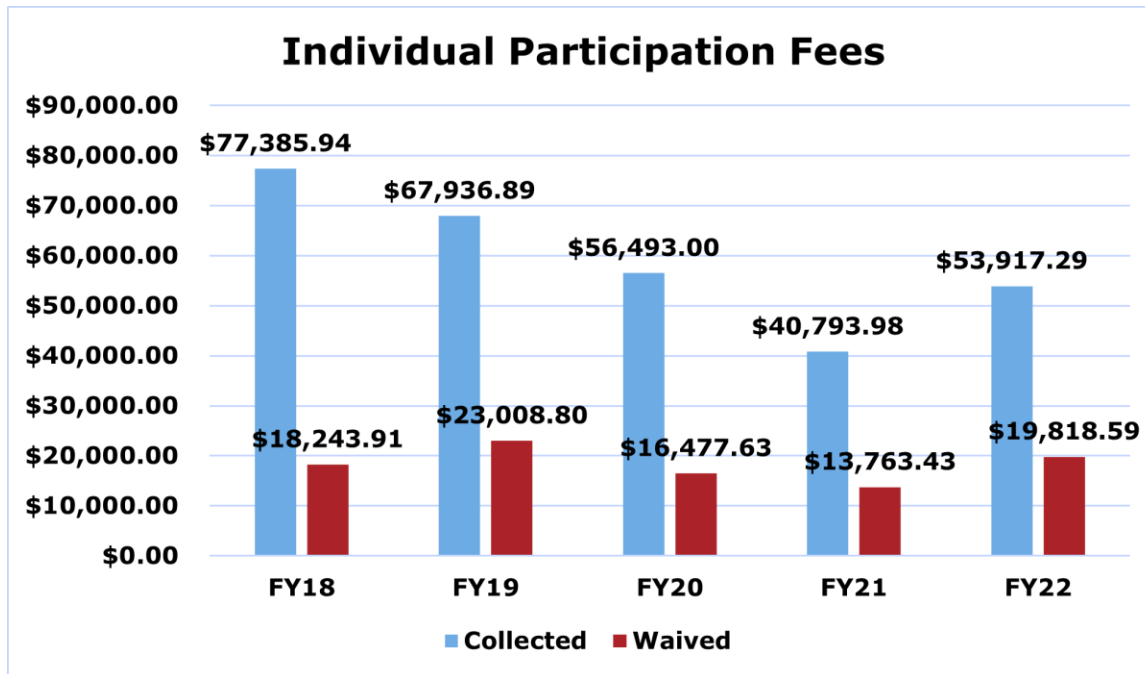


Table 27. Individual participation fees collected and waived for the purchased services contracts per CIL for fiscal years 2021 and 2022.

CIL	FY21 Collected	FY21 Waived	FY22 Collected	FY22 Waived
ABLE	\$993.40	\$69.39	\$1,277.36	\$38.43
ARCIL	\$10,591.31	\$2,994.96	\$13,624.47	\$1.73
CBCIL	\$508.09	\$798.44	\$398.57	\$1,168.97
CRCIL	\$268.85	\$4,837.98	\$124.37	\$4,987.21
DIA	\$4,599.28	\$0.00	\$2,848.81	\$0.00
HCIL	\$2,070.85	\$1,129.42	\$1,930.58	\$10,250.22
HOCTIL	\$99.95	\$1,194.21	N/A	N/A
LIFE	\$1,877.55	\$212.35	\$6,422.28	\$1,546.24
PILC	\$1,646.00	\$0.00	\$7,492.00	\$0.00
RISE	\$0.00	\$281.40	N/A	N/A
SAILS	\$8,980.70	\$1,964.00	\$9,930.58	\$1,752.12
VAIL	\$5,855.91	\$1.45	\$5,931.53	\$18.26
VOLAR	\$3,302.01	\$279.83	\$3,936.74	\$55.41
Total	\$40,793.90	\$13,763.43	\$53,917.29	\$19,818.59

4. Base Operational Contracts

The base operational contracts provide CILs with funds to provide required core services to individuals who have significant disabilities. Unlike the purchased services contracts, all services through the base operational contracts are provided or arranged by CIL staff. The funds CILs receive from HHSC ILS support the operation of the CIL to provide services required in section 725 of the Rehabilitation Act. There are currently 15 CILs contracted with HHSC for the base operational contracts. They include ARCIL; CRCIL; DIA; Disability Connections; HCIL; LIFE; Mounting Horizons Inc. (MHI); PILC; Resource for Education, Advocacy, Communication and Housing (REACH) Fort Worth; REACH Part B; REACH Plano; SAILS; VAIL Rio Grande Valley (VAIL RGV); VAIL South Texas (VAIL ST); and VOLAR.

The base operational contracts provide five core services to individuals as defined in Title VII of the Rehabilitation Act:

- Information and referral
- Independent living skills training
- Peer counseling (including cross-disability counseling)
- Individual and systems advocacy
- Transition services

Individuals Served

Individuals served by the base operational contracts receive core services as required by the Rehabilitation Act. Information and referral is one of the core services of the base operational contracts, and an ILP is not required to receive this service. For any other core or additional service arranged or provided by the base operational contract or in coordination with another CIL grant, a signed ILP or ILP with the signature waived by the individual is necessary. As with the purchased services contracts, the ILP includes independent living goals, services to be provided, and duration of services. Based on data received from the CILs, there was a 40 percent decline in individuals served by the base operational contracts from fiscal year 2018 to fiscal year 2021. Although the fiscal year 2022 numbers were higher than the previous year, they still reflect a drop of 36,480 individuals served from 2020. Findings identified in HHSC monitoring reviews related to insufficient or missing outreach logs indicate the drop in individuals served by the

base operational contracts could be the result of decreased efforts in outreach by the CILs. Table 28 provides a total of individuals served annually since fiscal year 2021, based on information and referral as well as services requiring an ILP. Tables 29 and 30 are additional breakdowns by CIL during fiscal years 2021 and 2022.

Table 28. Base operational services provided by CILs throughout the state since fiscal year 2021.

Services	FY21	FY22
Information and Referral	59,858	66,300
ILP or Waived ILP Services	3,575	3,759
Total	63,433	70,059

Table 29. Base operational services provided by CILs throughout the state in Fiscal Year 2021.

CIL	Information and Referral	ILP or Waived ILP Services	Total
ARCIL	364	406	770
CRCIL	3,966	101	4,067
Disability Connections	7,147	203	7,350
DIA	15,706	195	15,901
HCIL	1,701	598	2,299
LIFE	11,824	568	12,392
MHI	2,357	196	2,553
PILC	70	59	129
REACH Fort Worth	2,577	450	3,027
REACH Plano	616	35	651
SAILS	3,819	343	4,162
VAIL RGV	6,392	109	6,501
VAIL ST	414	70	484
VOLAR	2,905	242	3,147
Total	59,858	3,575	63,433

Table 30. Base operational services provided by CILs throughout the state in fiscal year 2022.

CIL	Information and Referral	ILP or Waived ILP Services	Total
ARCIL	314	410	724
CRCIL	9,867	105	9,972
Disability Connections	8,627	240	8,867
DIA	10,766	226	10,992
HCIL	1,321	126	1,447
LIFE	10,195	554	10,749
MHI	9,455	226	9,681
PILC	54	108	162
REACH Fort Worth	2,985	676	3,661
REACH Plano	748	158	906
SAILS	5,038	359	5,397
VAIL RGV	5,383	141	5,524
VAIL ST	1,036	113	1,149
VOLAR	511	317	828
Total	66,300	3,759	70,059

Contract Amounts

Total amounts for the base operational contracts have not changed since fiscal year 2017. As an operational grant, expenses for services to individuals are often supplemented with other funding sources, which may differ annually. Table 31 provides the amounts expended and remaining per fiscal year. Tables 32 and 33 provides the contract value and amounts expended per CIL for fiscal years 2021 and 2022.

Table 31. Total funds available and expended for the base operational contracts since fiscal year 2021.

Fiscal Year	Available	Expended	Total Remaining
FY21	\$2,700,483.00	\$2,428,261.65	\$272,221.35
FY22	\$2,700,483.00	\$2,598,507.99	\$101,975.01

Table 32. Total funds available and expended for the base operational contracts in fiscal year 2021.

CIL	Available	Expended	Total Remaining
ARCIL	\$74,660.00	\$48,939.97	\$25,720.03
CRCIL	\$105,569.00	\$105,569.00	\$0.00
Disability Connections	\$250,000.00	\$184,091.52	\$65,908.48
DIA	\$250,000.00	\$235,306.77	\$14,693.23
HCIL	\$74,660.00	\$74,660.00	\$0.00
LIFE	\$199,900.00	\$187,740.33	\$12,159.67
MHI	\$250,000.00	\$217,560.38	\$32,439.62
PILC	\$105,569.00	\$98,744.94	\$6,824.06
REACH Fort Worth	\$262,280.00	\$262,280.00	\$0.00
REACH Fort Worth Part B	\$11,200.00	\$11,200.00	\$0.00
REACH Plano	\$262,279.00	\$227,971.00	\$34,308.00
SAILS	\$202,223.00	\$194,441.00	\$7,782.00
VAIL RGV	\$199,900.00	\$174,824.10	\$25,075.90
VAIL ST	\$250,000.00	\$220,431.82	\$29,568.18
VOLAR	\$202,233.00	\$184,500.82	\$17,732.18
Total	\$2,700,473.00	\$2,428,261.65	\$272,211.35

Table 33. Total funds available and expended for the base operational contracts in fiscal year 2022.

CIL	Available	Expended	Total Remaining
ARCIL	\$74,660.00	\$69,203.30	\$5,456.70
CRCIL	\$105,569.00	\$101,624.00	\$3,945.00
Disability Connections	\$250,000.00	\$247,732.10	\$2,267.90
DIA	\$250,000.00	\$227,967.80	\$22,032.20
HCIL	\$74,660.00	\$74,660.00	\$0.00
LIFE	\$199,900.00	\$196,607.30	\$3,292.70
MHI	\$250,000.00	\$237,288.50	\$12,711.50
PILC	\$105,569.00	\$105,569.00	\$0.00
REACH Fort Worth	\$262,280.00	\$262,280.00	\$0.00
REACH Fort Worth Part B	\$11,200.00	\$11,200.00	\$0.00
REACH Plano	\$262,279.00	\$253,197.00	\$9,082.00
SAILS	\$202,223.00	\$201,706.00	\$517.00
VAIL RGV	\$199,900.00	\$177,849.40	\$22,050.60
VAIL ST	\$250,000.00	\$230,518.83	\$19,481.17
VOLAR	\$202,233.00	\$201,104.76	\$1,128.24
Total	\$2,700,473.00	\$2,598,507.99	\$101,925.01

5. State Independent Living Council

The council currently consists of nine voting members, along with ex-officio members from HHSC, TWC, and the Texas Department of Transportation. Voting members are appointed by the governor's office and serve terms of three to five years, depending on their role. According to the Rehabilitation Act, a majority of the council must be made up of individuals with significant disabilities.

As required in section 705 of the Rehabilitation Act, the State Independent Living Council (SILC) has several responsibilities related to the SPIL. These duties include:

- Developing the state plan as provided in Section 704(a)(2) of the Rehabilitation Act.
- Monitoring, reviewing, and evaluating the implementation of the SPIL.
- Meeting regularly and to ensure that such meetings of the council are open to the public and sufficient advance notice of such meetings is provided.
- Submitting to the Administrator¹⁰ such periodic reports as the Administrator may reasonably request, and keep such records, and afford such access to such records, as the Administrator finds necessary to verify the information in such reports.
- As appropriate, coordinating activities with other entities in the state that provide services similar to or complementary to independent living services, such as entities that facilitate the provision of or provide long-term community-based services and supports.

As the recipient of federal Part B funds, HHSC ILS serves as the designated state entity. A criterion to receive Part B funds is the maintenance of the SILC. HHSC ILS is an active partner with the SILC and in the CIL network. Table 34 lists the contract award totals and funds expended by the SILC for fiscal years 2021 and 2022.

¹⁰ The term "administrator" refers to the administrator of the Administration for Community Living of the U.S. Department of Health and Human Services.

Table 34. Contract award totals and funds expended by the SILC for fiscal years 2021 and 2022.

Category	FY21 Award	FY21 Expended	FY22 Award	FY22 Expended
Salary and Wages	\$240,000.00	\$239,996.47	\$256,908.00	\$256,597.45
Fringe Benefits	\$58,100.00	\$58,100.00	\$69,276.00	\$69,032.69
Travel	\$15,400.00	\$15,277.96	\$2,097.00	\$2,053.48
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Supplies	\$23,064.00	\$21,549.02	\$1,942.00	\$1,642.88
Contractual	\$73,000.00	\$70,473.77	\$79,341.00	\$79,285.53
Other	\$0.00	\$0.00	\$0.00	\$0.00
Indirect	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$409,564.00	\$405,397.22	\$409,564.00	\$408,612.03

6. Conclusion

Each year, the services provided by the purchased services, base grant, and SILC directly impact thousands of individuals to live more independently in the state. People are connected to resources they were not aware of or are provided with goods and services they would not be able to afford otherwise. Combined, the CILs annually record hundreds of narratives highlighting the many ILS success stories. Without the ILS program, some individuals would require a higher level of care and could no longer be able to live at home.

The information provided in this report reflects data for the ILS program for fiscal years 2021 and 2022 with some historical data for context. Services provided peaked in fiscal year 2018 and began declining annually in fiscal years 2019 through fiscal year 2021. Some increases in key categories were noted in fiscal year 2022, but there continues to be areas to improve.

The proportion of Texans living with disabilities has remained consistent from 2015 to 2021 based on data from the U.S. Census Bureau. Despite this, some CILs have lapsed purchased services funds that could have been used to provide needed services available through the program. Current contracts between HHSC and the CILs include performance targets for number of individuals served, and additional targets will be included in the fiscal year 2024 CIL contracts to further emphasize this objective and help CILs meet this goal.

HHSC ILS has acquired customer satisfaction surveys for feedback on individual experiences and a report on the comprehensive study of the program. Resulting recommendations for improvement are posted on the HHSC reports page¹¹ in accordance with Rider 83.

HHSC will continue to work closely with CILs both individually and collectively to provide training to target areas for improvement, such as increasing outreach, partnerships with veterans' organizations, serving more individuals with visual disabilities, identifying potential comparable benefits, and strengthening community partnerships. Further emphasis will be placed on limiting the amount of funds lapsed in purchased services categories. HHSC will continue to emphasize the importance of serving as many individuals as possible to allow more Texans to live independently.

¹¹ <https://www.hhs.texas.gov/sites/default/files/documents/independent-living-services-study-report-2022.pdf>

List of Acronyms

Acronym	Full Name
ABLE	ABLE Center for Independent Living
BVCIL	Brazos Valley Center for Independent Living
CBCIL	Coastal Bend Center for Independent Living
CIL	Center for Independent Living
CILs	Centers for Independent Living
CRCIL	Crockett Center for Independent Living
DIA	Disability in Action
DME	Durable Medical Equipment
DRS	Data Reporting System
ETCIL	East Texas Center for Independent Living
FY	Fiscal Year
HCIL	Houston Center for Independent Living
HHS	Health and Human Services
HHSC	Health and Human Services Commission
HOCTIL	Heart of Central Texas Independent Living
IL	Independent Living
ILP	Independent Living Plan
ILS	Independent Living Services
LIFE	Lifetime Independence for Everyone
MHI	Mounting Horizons, Inc.
PILC	Panhandle Independent Living Center
REACH	Resource for Education, Advocacy, Communication and Housing
RISE	Resource, Information, Support and Empowerment
SAILS	San Antonio Independent Living Services
SILC	State Independent Living Council
SPIL	State Plan for Independent Living
U.S.	United States
VAIL	Valley Association for Independent Living
VAIL RGV	Valley Association for Independent Living Rio Grande Valley
VAIL ST	Valley Association for Independent Living South Texas
VOLAR	VOLAR Center for Independent Living