

- SUBJECT:** Coordinating area agencies on aging
- COMMITTEE:** Human Services — committee substitute recommended
- VOTE:** 9 ayes — Hilderbran, Naishtat, Davila, Denny, J. Jones, Krusee, Maxey, Park, Wohlgemuth
0 nays
- WITNESSES:** For — Al S. Notzen, Alamo Area Council of Governments; Bill Lofland, Texas Association of Regional Councils; Paul Edwards, Middle Rio Grande Development Authority; Brad Helber, Abilene; Jim Ray, Texas Association of Regional Councils (Councils of Governments).

Against — Jose Camacho, Austin

On — Anita Bradberry, Texas Association of Home Care
- BACKGROUND:** The Texas Department of Aging (TDOA) administers federal funding provided by the Older Americans Act. In most parts of Texas the 28 area agencies on aging (AAA) operate as part of one of the 24 regional councils of government (COGs), using Older Americans Act funds administered by TDOA.

In 1991, when state human services agencies were reorganized under the umbrella of the Health and Human Services Commission (HHSC), 11 health and human services regions were established. While TDOA was represented, the 28 AAAs are not specifically organized to function within the 11 regions.
- DIGEST:** CSHB 2660 would require the largest area agencies on aging (AAAs) in each of the 11 health and human services regions to aggregate plans and data on services to the elderly for submission to TDOA for incorporation into the department's strategic plan. TDOA would be prohibited from allocating additional funds to the AAAs to carry out this task. TDOA would be required to adopt rules relating to the submission of this information.

Unless otherwise authorized by the Legislature, the Legislative Budget Board or the commissioner of HHSC, TDOA would be required to decentralize its services through the AAAs designated by TDOA as of January 1, 1995, with AAA boundaries maintained consistent with the planning areas of the council of governments.

CSHB 2660 would hold AAAs within each HHSC region jointly responsible for coordinating their own services within the region.

The bill would take effect immediately if approved by two-thirds of the membership of each house.

SUPPORTERS SAY: HB 2660 would provide the AAAs with a specified role in the planning of health and human services delivery, permitting aggregation of data and coordination of services for the elderly at the local level.

CSHB 2660 recognizes that regional boundaries may need to reflect changes in federal law if block grants or other similar revisions occur at the federal level.

OPPONENTS SAY: The bill would do nothing that could not already be done by the commissioner of HHSC. CSHB 2660 could also increase the burden on AAAs by requiring that they aggregate plans and data on services to the elderly without additional funding.

NOTES: The committee substitute requires AAAs to prepare data relating to service delivery for submission to TDOA; the original bill required TDOA employ a person to aggregate the information. The committee substitute recognizes regional boundaries and allows the LLB and HHSC to change boundaries as necessary.