



Family Support Subsidy Annual Report

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Family Support Subsidy Program

History

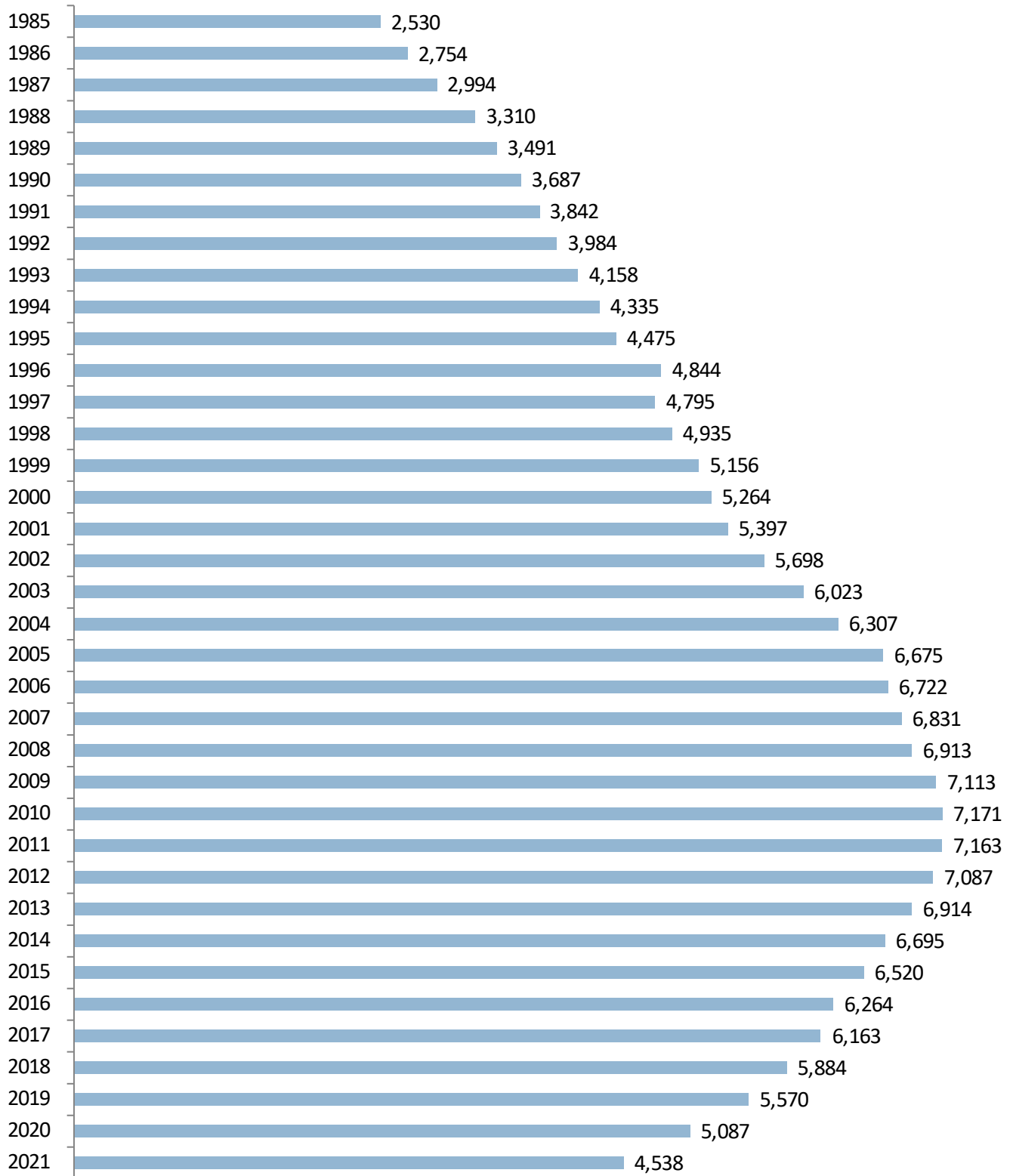
Supporting families is a priority of Michigan's public mental health system, as evidenced by the Family Support Subsidy Program (FSSP). Michigan's philosophy is that children with intellectual and developmental disabilities, like all children, need loving and enduring family relationships. The policy of the Michigan Department of Health and Human Services (MDHHS) is that children should be supported to live with their families. If an out-of-home placement becomes necessary, it should be temporary and time-limited with a goal of family reunification whenever possible or, for some children, adoption. Permanency planning practices within Michigan's public mental health system have supported this guiding principle by enabling families to keep their children out of institutional settings and other out-of-home placements.

The Family Support Subsidy Act, Public Act 249 of 1983, was the beginning of a major shift of Michigan's mental health resources and services toward supporting, maintaining, and establishing permanent family relationships for children with severe intellectual and developmental disabilities. The FSSP provides vital monetary support for families of children with intellectual and developmental disabilities to assist with the extraordinary expenses associated with raising them.

Children with severe intellectual and developmental disabilities often need lifetime support for daily activities such as walking, feeding or dressing. Often, they have both mental and physical impairments and require 24-hour care. As a result, the families of children with severe intellectual and developmental disabilities incur many expenses that other families do not. The FSSP recognizes that these families have unique needs; it empowers them to decide what is needed to support their child's care, and it allows children to stay at home and out of residential placements.

On the next page, Figure 1 shows the number of children enrolled in the program over time. While program enrollment has increased markedly since 1985, there has been a downward trend since 2011.

Figure 1. Enrollment peaked in 2010 at 7,171 families.



Eligibility Requirements

Families may be eligible for this program if 1) their Michigan taxable income does not exceed \$60,000, as shown on their most recent state of Michigan tax return, 2) their child lives in Michigan with a birth parent, adoptive parent or legal guardian, 3) their child is under age 18, and 4) their child has been recommended by a public school district's Multidisciplinary Evaluation Team (MET) as meeting the requirements for the special education categories of cognitive impairment, severe multiple impairments or autism spectrum disorder. Children with an eligibility category of cognitive impairment may be eligible if their development is in the severe range of functioning as determined by the local or intermediate school district. Children with autism spectrum disorder must be receiving special education services in a program designed for students with autism spectrum disorder or in a program designed for students with severe cognitive impairment or severe multiple impairments.

I don't know what we would have done without it. I'm a single mom and raising 3 kids with autism and it is not easy. Without the subsidy we would probably go hungry towards the end of the month.

~Parent from Ottawa County

The program is advertised on the MDHHS website. <https://www.michigan.gov/mdhhs/keep-mi-healthy/mentalhealth/mentalhealth/childrenandfamilies/fssp> . Michigan's community mental health services programs (CMHSPs) also perform outreach activities to advertise the program within their geographic locations. CMHSPs target their efforts to local public-school systems, CMHSP access centers, Early On[®], local MDHHS offices, public health agencies, physician offices, hospitals, and more.

The application process was designed to be simple, logical and include documents already available to families. The application form must be substantiated by a copy of the child's birth certificate to verify age, a copy of the family's most recent Michigan income tax return to verify taxable income, and verification from the local school district of an eligible special educational category. Although it is not a requirement for eligibility, it is strongly encouraged that the family provides the child's Social Security number. Upon receipt of the completed application, the CMHSP verifies the family's eligibility. Coverage in the program begins the month following the CMHSP's receipt of the completed application and supporting documentation. Each year, in the birth month of their child, the family is required to complete an annual renewal to re-verify eligibility for the program.

Subsidy Payments

The subsidy is paid to the parent or legal guardian on behalf of the child. Checks are disbursed to families monthly. The subsidy income is not taxable, and families may use the subsidy for any purpose that helps them care for their child. Payments were \$229.31 per month in Fiscal Year 2021¹. The original payment in Fiscal Year 1985 was \$225.54. The MDHHS may decrease the amount after notifying the Governor and the House and Senate Appropriations Committees those available revenues are insufficient to cover the program's obligations. The department is not permitted to reduce the amount of the monthly payment by more than an aggregate of 25 percent in one fiscal year without the written approval of the House and Senate Appropriations Committees. FSSP is now funded entirely with federal dollars through the Temporary Assistance for Needy Families (TANF) program.

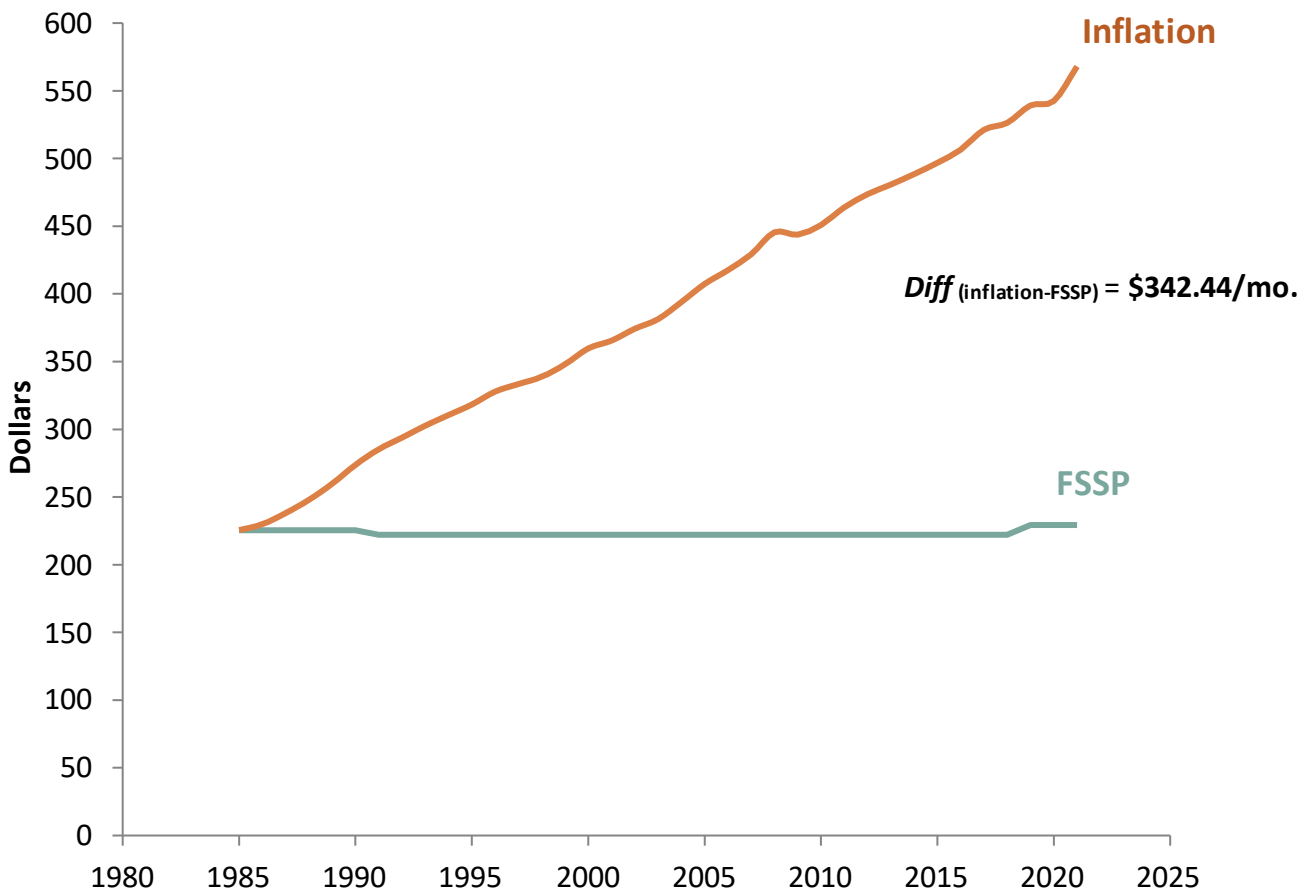
There were times that without the subsidy we would not have been able to get to the store to purchase clothing or food needed at the time.

~Parent from Sanilac County

¹ Rate increase effective 10/01/2022 to \$300.36.

In Fiscal Year 1991, payments were decreased to \$215.66 due to budget restrictions and then increased to \$222.11 per month, where it remained for 27 years. The Senate Appropriation subcommittee for Community Health/ Human Services increased the FSS amount by \$7.20, bringing the monthly payment to \$229.31 for FY2019. The overall purchasing power of these dollars has declined over time (see Figure 2). In 2021, \$567.98 was needed to have the same buying power as \$225.54 in 1985. The rate may be increased annually by legislative appropriation to match the Supplemental Security Income (SSI) rate for an adult living in the household of another (\$560.67 in 2021).

Figure 2. Family Support Subsidy amount has not kept pace with inflation.



Note: Inflation based on original subsidy amount of \$225.54 in 1985

Program Evaluation

Data Sources

Each year, the department gathers information from four sources to satisfy the reporting requirements of the Family Support Subsidy Act: (1) outreach activities as reported by CMHSPs; (2) follow-up reports on children leaving the subsidy program due to out-of-home placements; (3) enrollment information from the department’s FSSP database; and (4) a family questionnaire sent to parents annually.

Who Receives the Subsidy?

In Fiscal Year 2021, 4,538 families received the subsidy in Michigan. Demographic characteristics of subsidy families are reported in Table 1. The majority of children receiving the subsidy were white (56.3 percent), male (74.9 percent), from the lowest income level (70.1 percent), and had autism spectrum disorder (77.2 percent).

There has been noticeable growth in the proportion of children diagnosed with autism spectrum disorder by the public schools multidisciplinary evaluation team (MET), mirroring the increase in this diagnosis in the United States. However, according to the Michigan Department of Education, the number of students enrolled in Michigan schools who met eligibility as a student with autism spectrum disorder between the 2019-2020 school year (22,455) and the 2020-2021 school year (22,165), slightly decreased for the first time in decades.² This decrease in enrollment may be attributed to factors related to COVID-19

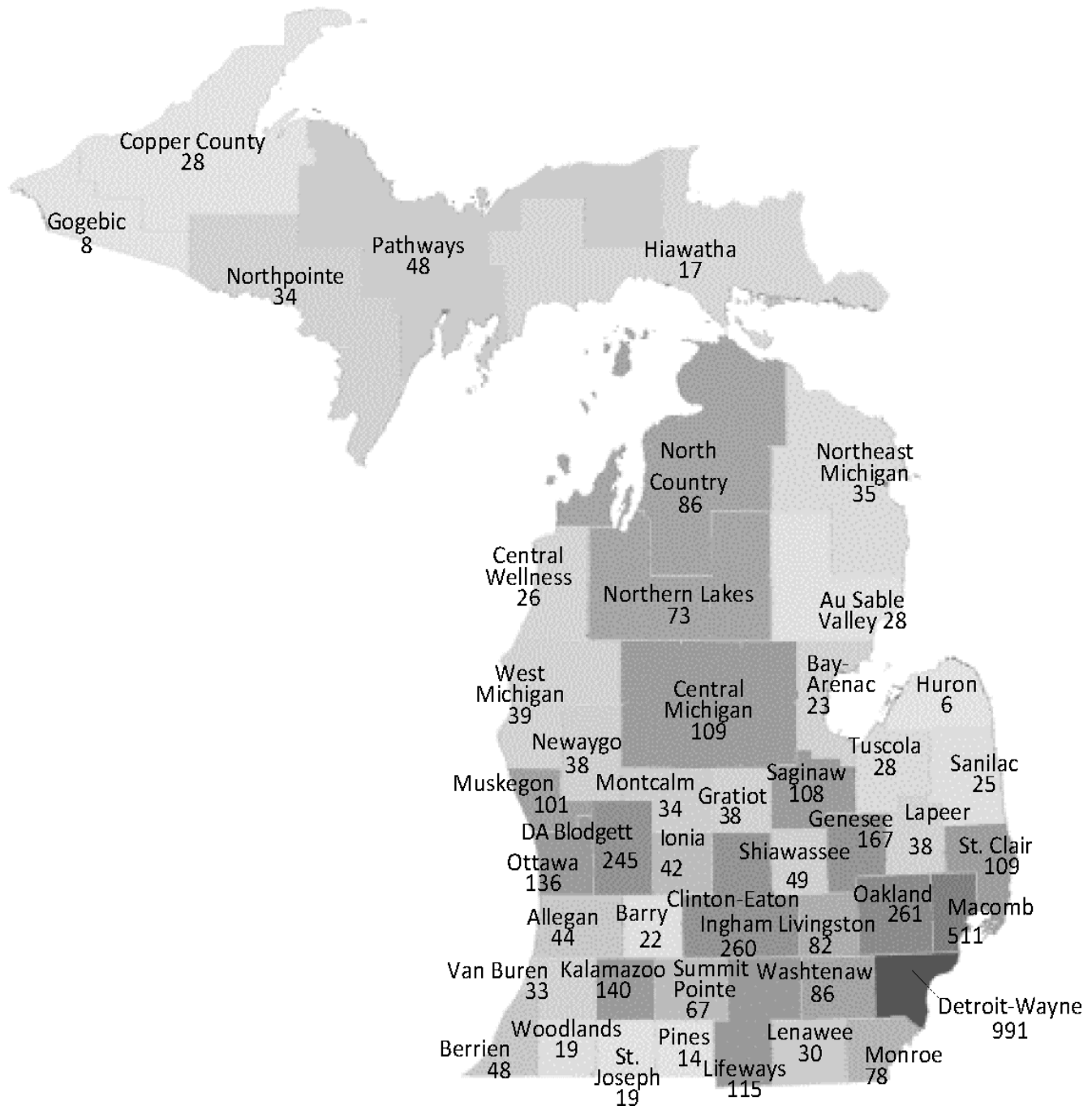
mandates in schools, such as sensory sensitivities to wearing a mask. Figure 3 shows the geographic distribution of these families across the state, by CMHSP.

Table 1. Subsidy recipients predominantly white, male, autistic, and low income

| Demographics | % Enrolled Families |
|-------------------------------------|---------------------|
| Educational Eligibility Category | |
| Autism Spectrum Disorder | 77.2 |
| Severe Multiple Impairments | 16.7 |
| Cognitive Impairment | 6.1 |
| Taxable Income Level | |
| \$19,999 or less | 70.1 |
| \$20,000-\$44,999 | 24.2 |
| \$45,000-\$60,000 | 5.7 |
| Gender | |
| Male | 74.9 |
| Female | 24.6 |
| Unknown | 0.5 |
| Age | |
| 0-3 years | 8.3 |
| 4-6 years | 19.5 |
| 7-9 years | 22.9 |
| 10-12 years | 19.9 |
| 13-15 years | 19.8 |
| 16-18 years | 9.5 |
| Race | |
| White | 56.3 |
| Black or African American | 23.7 |
| Asian | 2.1 |
| American Indian or Alaska Native | 0.6 |
| Native Hawaiian or Pacific Islander | 0.1 |
| Other | 3.9 |
| Unknown | 13.3 |

² For additional information go to: <https://www.mischooldata.org/historical-special-education-enrollment/>

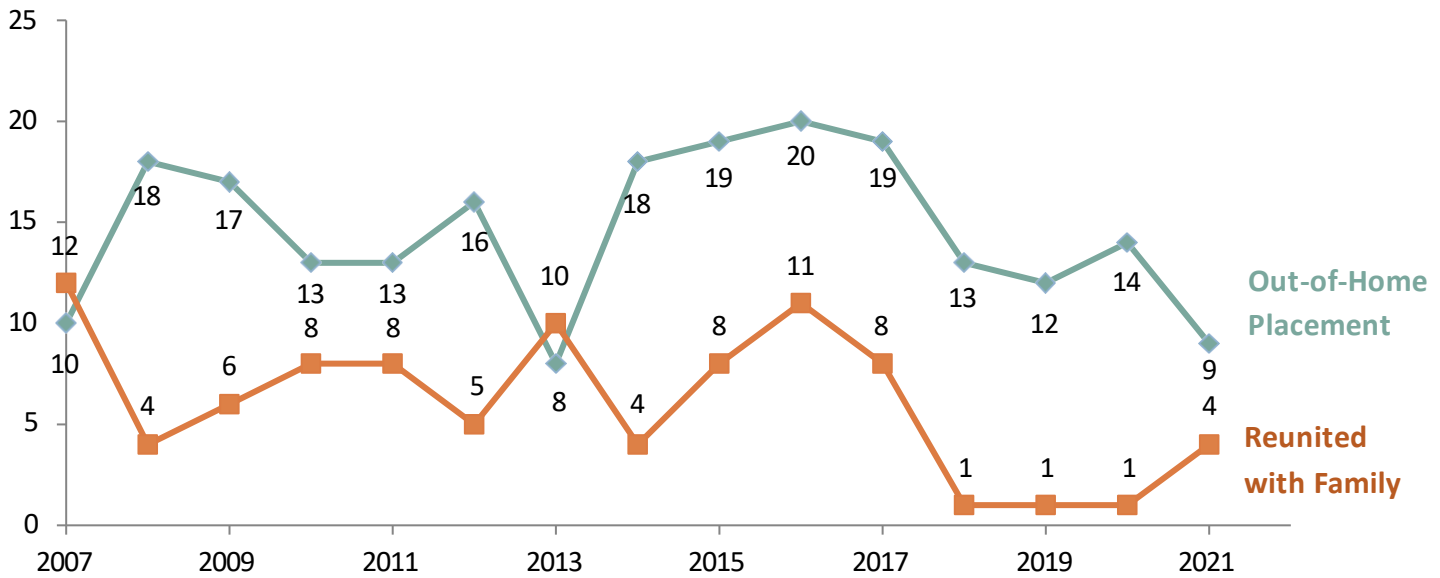
Figure 3. Total number of families (FSSP) by Community Mental Health Services Program (CMHSP)



Program Impact: Reducing Out-of-Home Placements

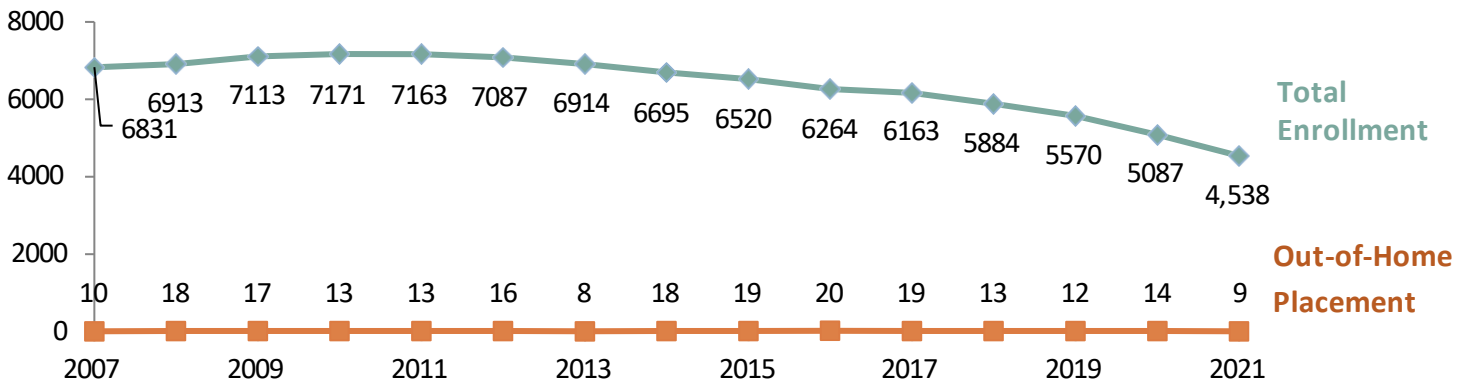
Follow-up at the end of the fiscal year indicated that nine children (less than 0.3 percent of all children in the program) were placed out-of-home during Fiscal Year 2021. The number of children enrolled in the subsidy program who have been placed out-of-home has dropped from a high of 45 in Fiscal Year 1986. No families qualified for the one-time double subsidy payment (provided to assist in a child’s return to home from placement). No children were adopted after having been enrolled in the subsidy program and then placed out-of-home. Figure 4 presents the number of children placed out of the home and those reunited with their families since 2007.

Figure 4. Out-of-home placements and reunifications since 2007



For perspective, Figure 5 shows these same numbers compared to total enrollment, illustrating the very small percentage (less than 0.3 percent of all children in the program) impacted by out-of-home placement. This reflects the success of the program in keeping children at home with their families.

Figure 5. Out-of-home placements are very low compared to total enrollment.



What Families Say About the Subsidy

Each year, families have the opportunity to provide feedback on the family support subsidy program. In Fiscal Year 2021, 836 families responded to the annual family survey (18.4 percent response rate compared to last year’s 16.4 percent response rate). Demographic characteristics of survey respondents were comparable to all subsidy families (see Table 2).

Families respond to a series of questions about their satisfaction with various aspects of the subsidy program. Figure 6 shows the levels of satisfaction with various aspects of the program. Satisfaction rates are lowest for the amount of the subsidy with only 29.0 percent “Very Satisfied.”³ Families do report being “Very Satisfied” with the application process (71.2 percent), information they received about the program (60.2 percent), and their overall experiences with the program (32.4 percent). Families were also asked a series of questions about the impact of the subsidy on various aspects of their lives. As illustrated in Figure 7, parents reported that the subsidy had the most profound impact in helping them meet their child’s special needs (65.6 percent), meet their family’s needs (50.8 percent), and be able to care for their child (61.3 percent). Parallel to lower satisfaction rates with subsidy amount, families report the least impact of the subsidy on easing financial worries (50.8 percent) and reducing stress (56.5 percent).⁴

Table 2. Survey respondents had similar demographics compared to all FSSP families.

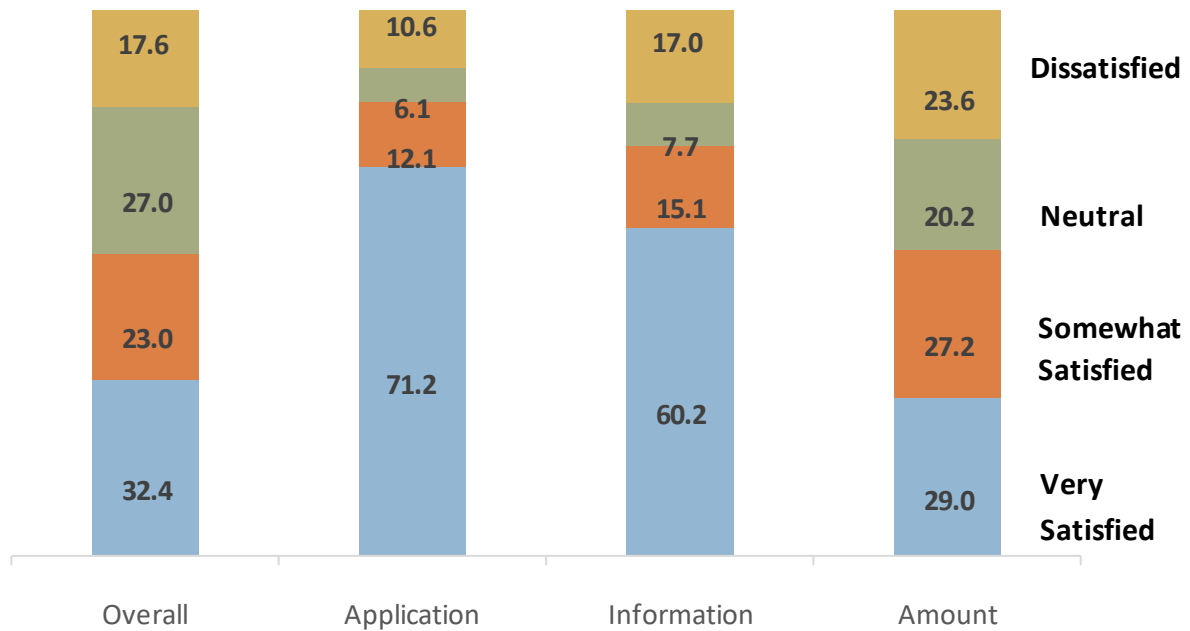
| Demographics | % Survey Respondents |
|--------------------------------------|----------------------|
| Educational Eligibility Category | |
| Autism Spectrum Disorder | 62.8 |
| Severe Multiple Impairments | 30.8 |
| Cognitive Impairment | 6.4 |
| Time in Program | |
| 1-12 months | 17.7 |
| 13-24 months | 17.7 |
| More than 24 months | 64.5 |
| Unreported | 0.1 |
| Gender | |
| Male | 65.0 |
| Female | 27.0 |
| Non-binary | 0.0 |
| Unreported | 8.0 |
| Taxable Income Level | |
| \$19,999 or less | 63.0 |
| \$20,000-\$44,999 | 26.0 |
| \$45,000-\$60,000 | 11.0 |
| Race/ Ethnicity | |
| White | 58.8 |
| Black or African American | 22.2 |
| Asian | 5.6 |
| Indigenous American or Alaska Native | 1.1 |
| Native Hawaiian or Pacific Islander | 1.1 |
| Other | 2.2 |
| Unknown | 9.0 |

³ Figure 6 reports valid percent (not including % missing). Ns range from 826-835.

⁴ Figure 7 reports valid percent (not including % missing). Ns range from 825-826.

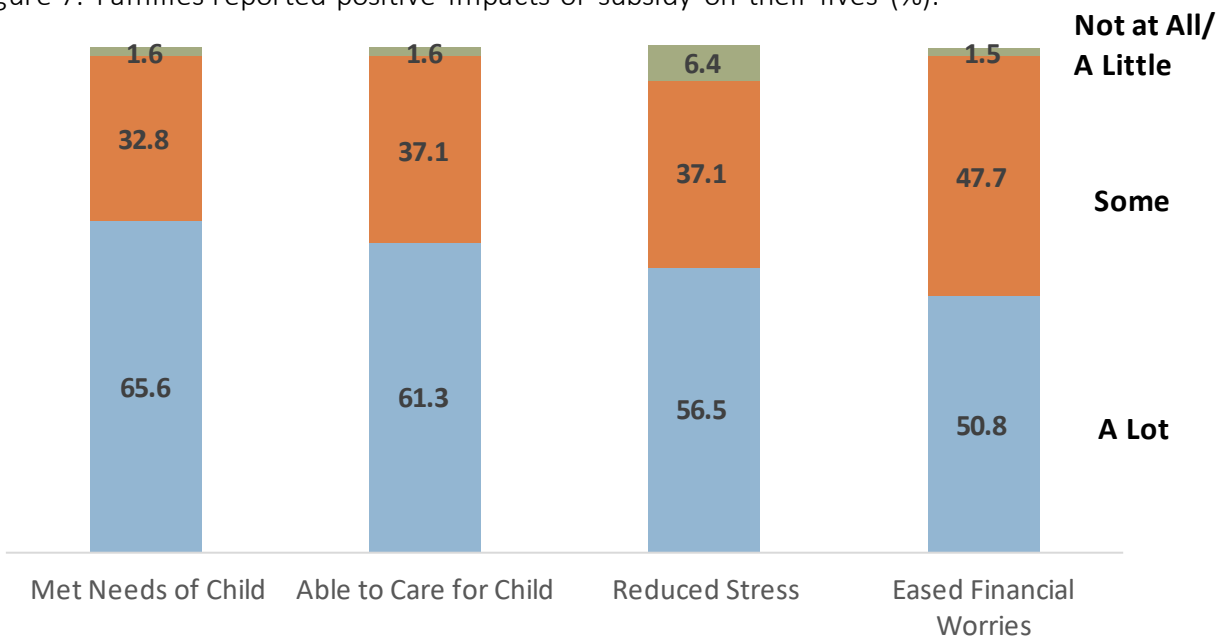
One family indicated that their child returned home from an out-of-home placement within the year. However, the subsidy did not influence that decision.

Figure 6. Families are least satisfied with the amount of the subsidy (%).

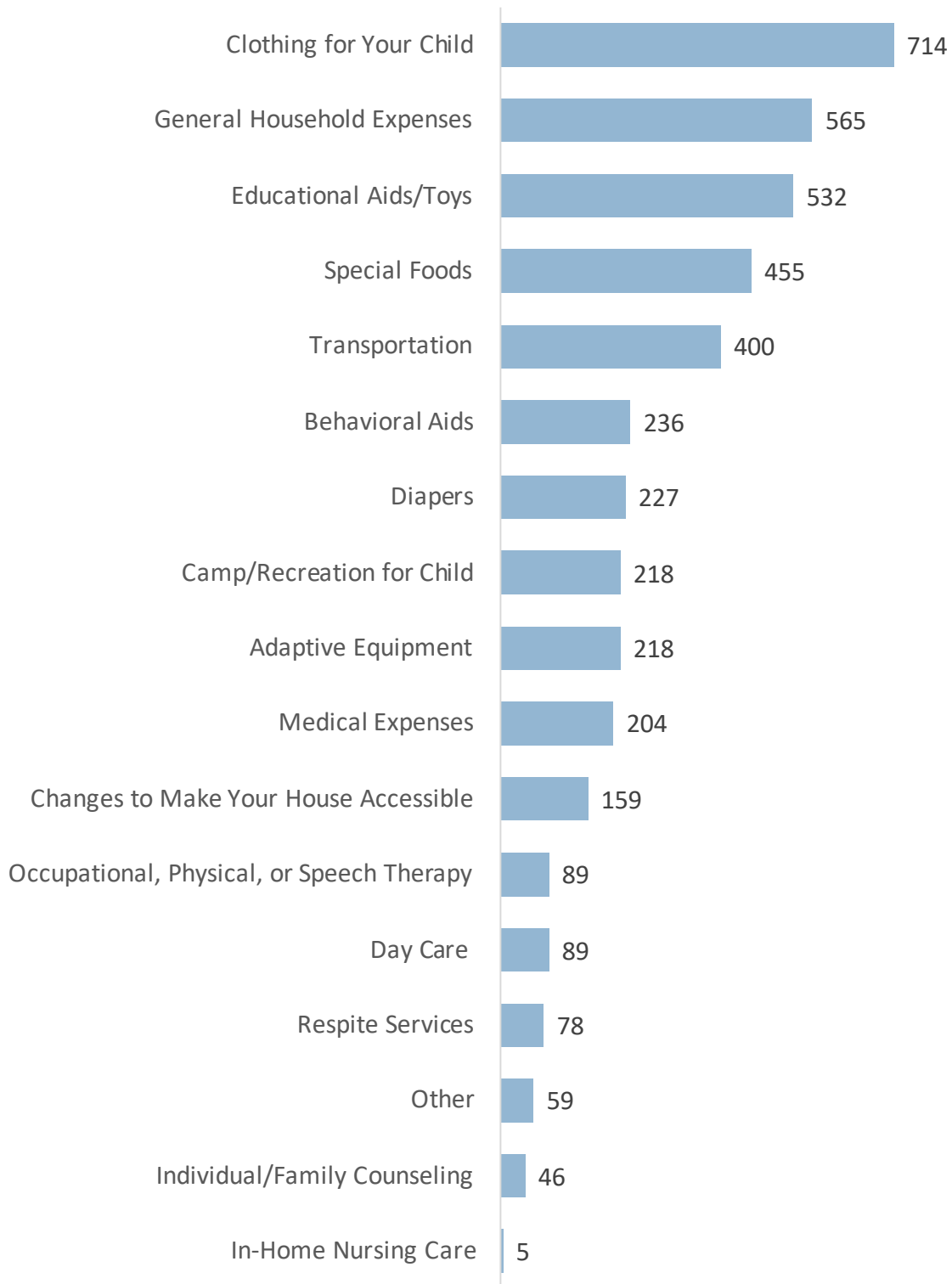


The subsidy had a moderate impact on achieving a better quality of life, reducing overall stress, or easing financial worries. Average satisfaction and impact scores were calculated and used to compare ratings across different family demographic characteristics. Average satisfaction and impact scores did not significantly vary across race, income, or diagnosis groups.

Figure 7. Families reported positive impacts of subsidy on their lives (%).



Over the past year, families reported many uses of the subsidy (see Figure 8). A few families reported using as many as 13 different services. However, on average, families accessed five different services. Some families reported not using the subsidy to access services.



Given the growing number of subsidy children diagnosed with autism spectrum disorder (see Table 1, page 9), it is interesting to note that depending on their child’s diagnosis, these families report significantly different rates of use of several service categories (see Table 3).

Only those services found to be significantly different by group are reported.⁵ Children with autism spectrum disorder were more in need of a wider range of services, including behavioral aids, adaptive equipment, and special foods. Alternatively, families with children with severe multiple impairments or cognitive impairment were more likely to need family and physical supports such as creating a more accessible home (highlighted in bold in Table 3 for each diagnosis).

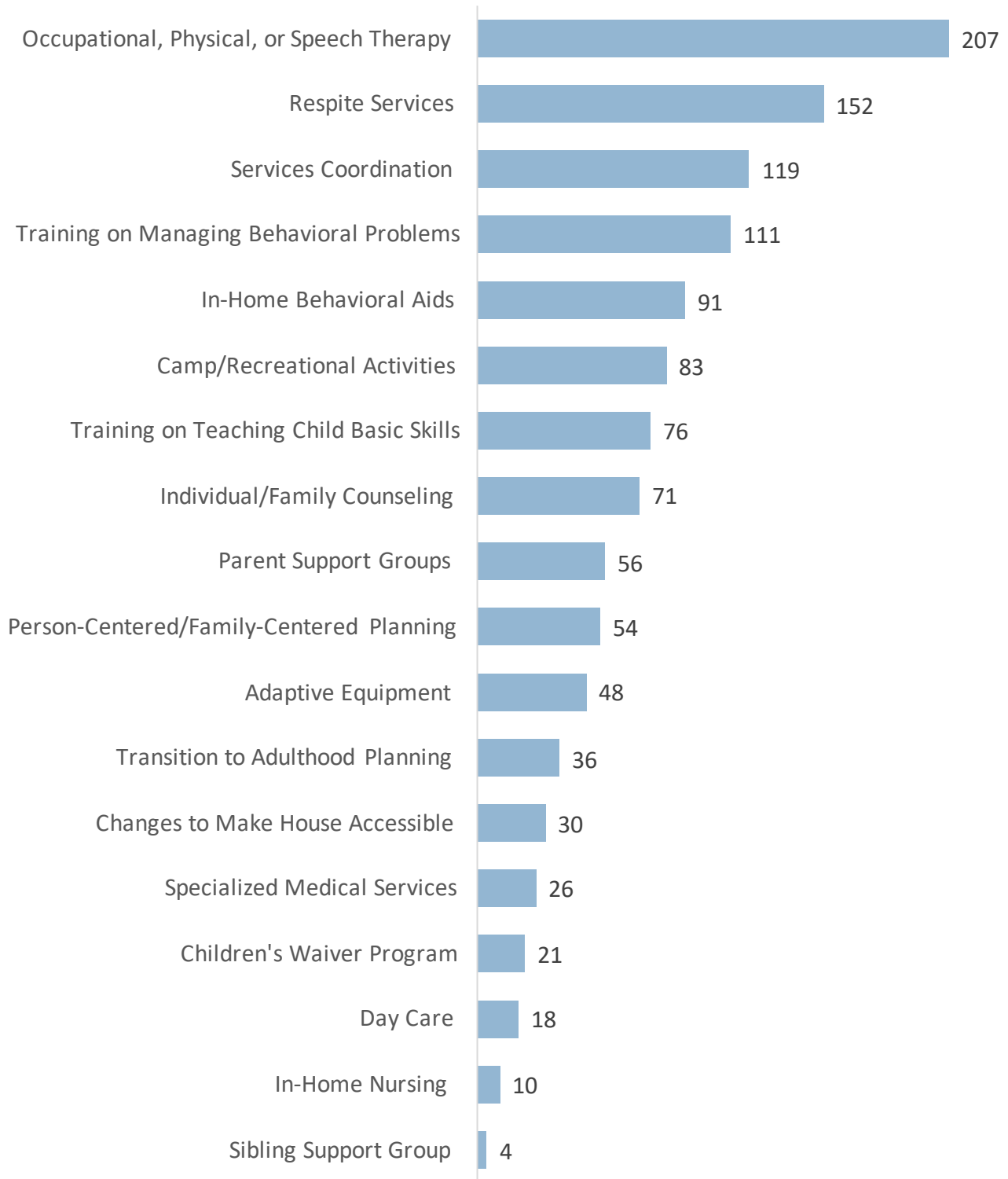
Table 3. Families use the subsidy for different services by diagnosis.

| Service | Autism Spectrum Disorder | Severe Multiple Impairments or Cognitive Impairment |
|----------------------------|--------------------------|---|
| Adaptive equipment | 28.1% | 25.0% |
| Behavioral aides | 21.0% | 12.5% |
| Make house more accessible | 10.5% | 18.7% |
| Special foods | 33.3% | 28.1% |

Questions regarding services not purchased with the subsidy were also given to families. First, families were asked about other services received from their CMHSP in the past 12 months to support their child with disabilities. From a list of 18 services, therapies (occupational, physical, or speech), respite services, coordination of services, and behavioral management were most frequently reported (see Figure 9). Next, families were shown a list of the services that they had not checked and asked to select the top three services they were most interested in receiving that they did not already list as receiving. Occupational, physical, or speech therapy (66.0 percent of families), day care for children with disabilities (59.2 percent of families), respite services (45.8 percent of families), and planning for transition to adult services (45.6) were listed as the top four unmet needs. However, overall, few families (less than 1 percent) designated anything as an unmet need suggesting that families were accessing the services they needed.

⁵ Chi-square tests were used. Seventeen tests were performed and the p-values for statistical significance was set at .003 in order to correct for the number of tests conducted.

Figure 9. Services received from CMHSP not paid for with the subsidy



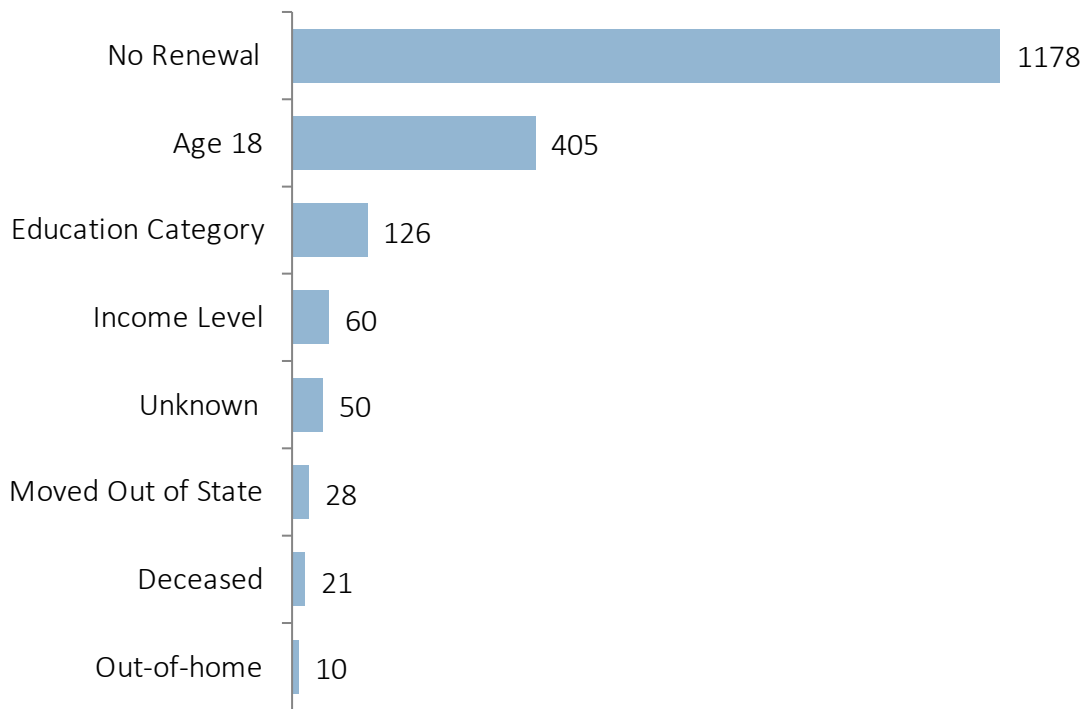
Finally, families were asked to provide feedback about the program which focused on four main themes (specific parent comments organized around these themes are available on page 21):

- 1) Deep gratitude and appreciation for the program
- 2) Examples of how the money was used to enrich their child’s life and alleviate stress
- 3) Comments observing that the needs are greater than the amount the subsidy covers

Families Leaving the Program

In Fiscal Year 2021, 1,878 families left the subsidy program. Children leave the subsidy program for several reasons (see Figure 10). Families not renewing was the most frequent reason for leaving the program (62.7 percent), followed by children turning 18 years old (21.6 percent).

Figure 10. 1,878 families left the program in 2021.



CMHSP Outreach Efforts

Outreach efforts to encourage program participation were reported by all 46 CMHSPs for Fiscal Year 2021. Agencies reached out to an average of 5.3 organizations (range from 1 to 12). The majority (87 percent) direct efforts to local schools (see Figure 11, on page 19). Most comments about program issues concerned confusion by parents regarding FSSP eligibility through their public school district, especially during the COVID-19 pandemic. Examples include children with autism spectrum disorder receiving applied behavioral analysis (ABA) therapy instead of educational programming through their public school district and children being diagnosed by a psychologist or physician outside of the school system. Children are eligible for FSSP if recommended by their public-school district’s MET only (see page 6 section on *Eligibility Requirements* for more

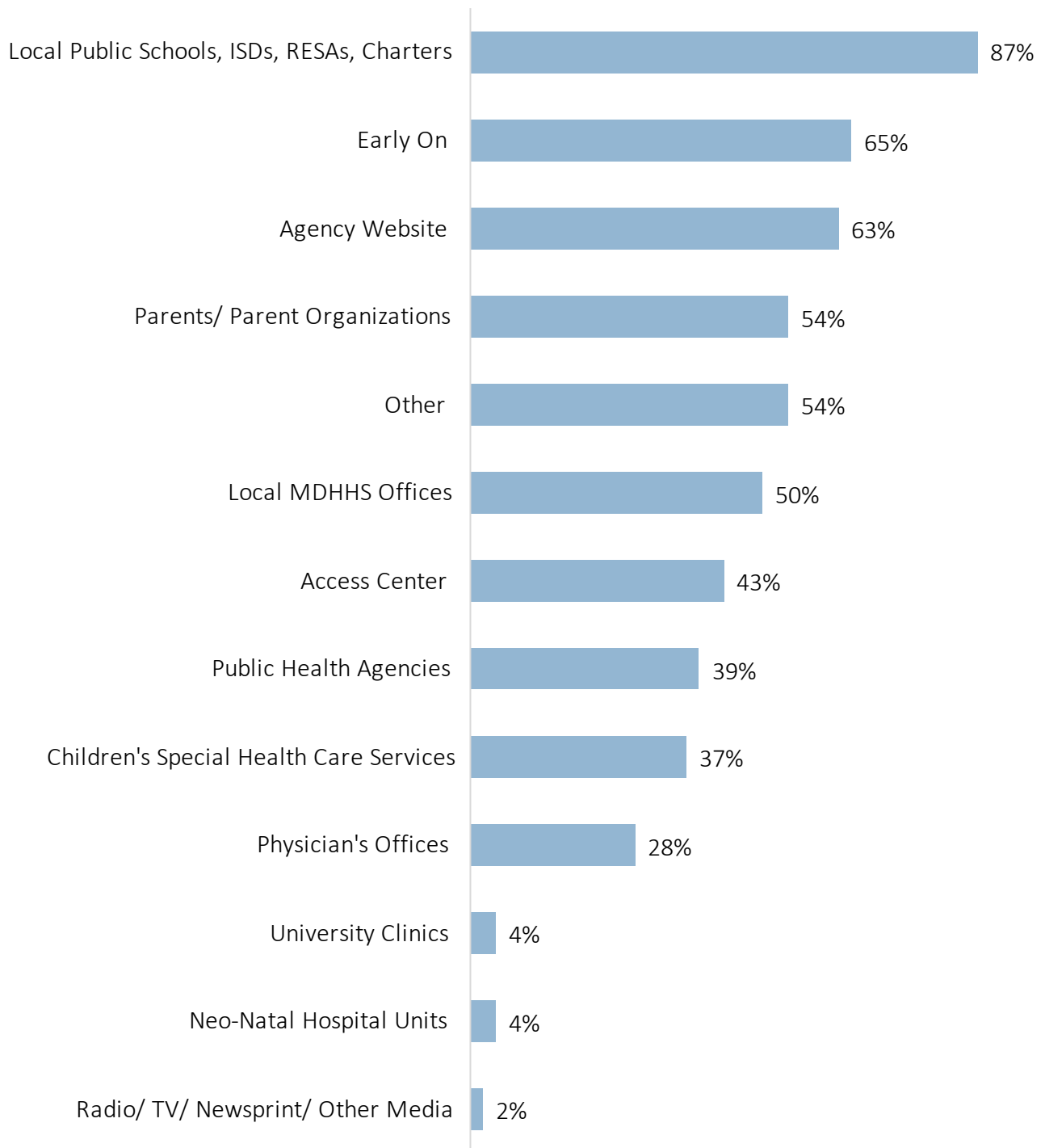
information). Although the former is an issue that has been consistently reported over the last six years, it is of note that in the past it was due to a gap in communication between local school district and CMHSPs working in the respective region. However, a gap in communication is not the only factor. Families think they are being forced to choose between the subsidy and what they think is the most beneficial therapy for their child.

The biggest concern my families have mentioned as a barrier to being approved for the program is that once they choose ABA therapy instead of Special Education Services through their public school districts, then they are not eligible for the program. Many insist ABA is more beneficial to their children's development and feel they shouldn't be penalized for opting for what they consider a better option for their children.

- CMHSP

CMHSPs must receive documentation to process FSS applications. However, the process is typically delayed due to not having reliable contacts within schools. Additionally, because the applications contain private information, such as Social Security numbers, most outside agencies send the applications through the US Postal Service, which has significantly delayed approval of applications. This in turn can significantly delay the initial FSS payment to families, which can negatively impact the dynamics between CMHSPs and families applying for the FSS (for direct parent quotes, see the Additional Parent Comments section on page 21).

Figure 11. CMHSPs reach out to many different types of organizations.



Conclusions

The main purpose of the FSSP is to provide financial support to assist families who have a child with intellectual and developmental disabilities in keeping their children at home and provide them with the additional supports and services they need. Results of the evaluation validate several conclusions about the efficacy of the program.

- The program is successfully helping to reduce the number of out-of-home placements for children with severe impairments. The number of children affected by out-of-home placements represents less than 0.5 percent of all subsidy children.
- Families report high satisfaction with the subsidy overall. Families are satisfied with the application process (71.2 percent), information they received about the program (60.2 percent), and their overall experiences with the program (32.4 percent). Most families reported that the subsidy supported their quality of life, ability to care for their child, and assisted them in meeting their child's needs.
- Families use the subsidy for a wide range of services. Families reported using an average of five different services last year with their subsidy. The top five services across all families were: clothing, general household expenses, educational aides or toys, special foods, and transportation. Families with children with autism spectrum disorder are more likely to use their subsidy for behavioral supports while families with children with severe multiple impairments or cognitive impairment are more likely to use the subsidy for physical supports.
- The subsidy payment has not kept up with inflation; therefore, it does not cover as many services as it once did nor is the amount enough to meet families' real needs. The subsidy payment increased from \$222.11 to 229.31 in FY2019, an increase that has not occurred since 1991. If the original payment of \$225.54 in Fiscal Year 1985 had kept up with inflation, families would be receiving \$567.98 in 2021 to cover the same expenses. Families report lowest satisfaction levels with the amount of the subsidy, with more than 50 percent of families reporting the subsidy helps ease financial worries or reduces stress substantially. It should be noted that 70.6 percent of families receiving the subsidy have a taxable income of \$19,999 or less.

Additional Parent Comments

Deep Gratitude and Appreciation

We are so thankful and grateful for the subsidy each month as it allows us to do fun activities as a family while at the same time our child is getting their physical therapy for the day. It makes therapy more fun. *Midland County*

As a single mother, caring for my child during COVID-19, this subsidy has been extremely helpful with making ends meet. *Allegan County*

It has been a very hard year for many of us. This subsidy has provided a little bit of security in these uncertain times. It is appreciated. *Allegan County*

This year, after COVID-19 (March), I am still working to pay our rent without benefits, but the subsidy helps us with each month to pay our rent a little bit. Before COVID-19, it helped us to buy clothes, food, etc. *Washtenaw County*

It has helped us in many ways. I have used it many times for household and food expenses to get us through until I get my Social Security check. [He] has been able to attend art and sports programs and life skills programs at the Autism Support & Resource Center. It has helped with those program fees. Thank you! *Genesee County*

This family support subsidy has been nothing short of a blessing to my son and I. I have been able to make sure he has everything he needs at home and educationally. *Wayne County*

It has saved us from running out of wipes, making it to appointments and helped with expenses. *Wexford County*

Allowed for me to be home to participate in daily activities, school, field trips and medical care. *Wayne County*

I often have to work less hours because of my son's situation and this subsidy helps to pick up the slack. *Wayne County*

Specific Examples of How the Money Was Used

It's just a nice little check each month, but now that I am working it goes directly to *Emmet County* my babysitter.

I was able to buy extra things around the house during this pandemic, food, tissue, *Genesee County* Lysol, etc.

I have been able to use the subsidy to provide my son with more activities. I was *Wayne County* able to purchase diapers, wipes, specific clothing.

During COVID-19 Mom has not worked in five months. Dad is down to 40 hours. We *Unlisted* bought food and paid bills with it.

This year a lot of the money was spent on educational toys since school was shut *St Clair* down. Most of the money was spent on education and special foods [my child] loves.

My child sees a natural doctor, and our insurance does not cover the cost so *Monroe County* we use his subsidy to help pay the bill and pay for his vitamins and supplements his body requires.

This helps pay for my son's ABA - the only therapy that has ever helped him. As a *Jackson County* single mom, this helps! Thank you!

The subsidy helps my child by taking him shopping and having him tell me what he *Monroe County* wants with his speech. Also, having him pay for it helps him learn about money.

He got an Amtryke bike and is now able to ride and strengthen his muscles and *Delta County* enjoy the outdoors more.

The Michigan Department of Health and Human Services will not exclude from participation in, deny benefits of, or discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, partisan considerations, or a disability or genetic information that is unrelated to the person's eligibility.