

Supplemental Beneficiary Guidance for Community Enhancement Fund

In addition to the currently accepted low-to-moderate income beneficiary documentation, Texas Community Development Program will accept annual Medicaid rate data for existing health care facilities that propose a substantial expansion of a facility or service utilizing the Community Enhancement Fund (CEF).

Per § 570.506(b) [emphasis added]:

“Where information on income by family size is required, the recipient may substitute evidence establishing that **the person assisted qualifies under another program having income qualification criteria at least as restrictive as that used in the definitions of “low and moderate income person” and “low and moderate income household”**”

For example, Armstrong County proposes to purchase a telemedicine unit for the general practice of medicine, to serve a population that does not currently have access to a health clinic.

1. Determine the service area for proposed project. In this example, the service area will be limited to an area within Armstrong County. In evaluating the service area, it is imperative to also consider the nature of the proposed project’s beneficiaries.
2. Compare the county’s 80% Annual Median Family Income (this information may be found on TDA’s website) to the annual household income limits for Medicaid

Armstrong County		Medicaid Eligibility	
Family Size	80% Annual Median Family Income (AMFI)	Household Size	Maximum Income Level (Per Year)
1	\$36,600	1	\$23,879
2	\$41,800	2	\$32,155
3	\$47,050	3	\$40,432
4	\$52,250	4	\$48,708

If the hospital’s annual Medicaid patient rate is at least 51.00% of the total patient population AND the Medicaid income limits are LESS than the AMFI for the county, up to a family size of four (4), then the county may qualify this project using the documentation of the hospital’s annual Medicaid patient rate.

NOTE: The preceding project would have a benefit for at least 51% of low-to-moderate income persons utilizing the new telemedicine unit, as the equipment is of a nature that all persons have reasonable access to the unit. Equipment or facilities having a narrower scope (e.g. dialysis equipment), would serve a limited population and would need to use an alternative method of beneficiary documentation.