3.A. STRATEGY REQUEST

80th Regular Session, Agency Submission, Version 1 Automated Budget and Evaluation System of Texas (ABEST) DATE: TIME: 8/18/2006

6:59:51PM

Agency code:	529	Agency name: Health and Human Service	es Commission				
	2	Medicaid			Statewid	le Goal/Benchmark:	3 0
COND.					Service	Categories:	
OBJECTIVE:	3	•			Service:	22 Income: A	A.1 Age: B.1
STRATEGY:	2	Health Steps (EPSDT) Dental					
CODE	DESC	CRIPTION	Exp 2005	Est 2006	Bud 2007	BL 2008	BL 2009
Acres 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			and the state of t				
Output Meast	Output Measures: 1 Average THSteps (EPSDT) Dental Recipient Months Per Month 2 Number of THSteps (EPSDT) Active Dentists Providing Medicaid Services		2,045,080.00	2,031,739.00	2,029,653.00	2,152,821.00	2,247,674.00
Month 2 Numb			1,726.00	1,756.00	1,786.00	1,819.00	1,852.00
Efficiency Measures: 1 Avg Cost Per THSteps (EPSDT) Dental Recipient Months Per Month		14.60	15.59	17.07	15.45	15.45	
Explanatory/	/Input ber of T	Measures: THSteps (EPSDT) Dental Clients Served	1,269,499.00	1,260,879.00	1,261,054.00	1,299,588.00	1,355,895.00
Objects of E			\$0	\$417,976	\$420,729	\$369,921	\$366,848
		AND WAGES	\$5,320	\$12,518	\$10,893	\$11,984	\$11,892
	1002 OTHER PERSONNEL COSTS		\$789	\$5,755,575	\$5,834,683	\$907,114	\$899,935
2001 PROFESSIONAL FEES AND SERVICES		\$3	\$67	\$60	\$61	\$60	
		D LUBRICANTS	\$346	\$3,203	\$2,228	\$2,443	\$2,418
		ABLE SUPPLIES	\$2,017	\$19,236	\$24,119	\$18,487	\$18,311
2004 UTII			\$1	\$5,126	\$5,453	\$2,617	\$2,598
2005 TRA			\$2,834	\$31,284	\$43,899	\$35,537	\$35,170
2006 REN			\$499	\$4,452	\$3,109	\$4,214	\$4,199
		ACHINE AND OTHER	\$5,342	\$56,520	\$37,654	\$40,041	\$39,675
		PERATING EXPENSE	\$361,632,407	\$376,574,350	\$417,291,507	\$399,114,119	\$416,600,782
3001 CLI		ERVICES	\$3,509,928	\$588,272	\$601,834	\$4,850,818	\$4,846,240
4000 GRANTS 5000 CAPITAL EXPENDITURES TOTAL, OBJECT OF EXPENSE		\$587	\$12,097	\$376,387	\$173,017	\$171,477	
		\$365,160,073	\$383,480,676	\$424,652,555	\$405,530,373	\$422,999,605	

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80th Regular Session, Agency Submission, Version 1 Automated Budget and Evaluation System of Texas (ABEST) DATE: TIME: 8/18/2006 6:59:51PM

Agency code:	529	Agency name: Health and Human Service	es Commission		Statewide	e Goal/Benchmark:	3 0
GOAL: OBJECTIVE:	2	Medicaid Special Medicaid Services for Children		<i>5</i>	Service Categories: Service: 22 Income: A.1 Age:		
STRATEGY:	2	Health Steps (EPSDT) Dental	Exp 2005	Est 2006	Bud 2007	BL 2008	BL 2009
PACE STIPE	nancin (ATCH	g: I FOR MEDICAID ENTAL: GR MATCH FOR MEDICAID (GENERAL REVENUE FUNDS)	\$145,142,862 \$0 \$145,142,862	\$153,764,126 \$334,116. \$1 54,098,242	\$169,837,404 \$0 \$169,837,404	\$162,321,442 \$0 \$162,321,442	\$168,475,793 \$0 \$168,475,793
Method of F 555 FED 93.	ERAL	FUNDS 0 Medical Assistance Program	\$220,017,211 \$220,017,211	\$228,866,815 \$228,866,815	\$254,815,151 \$254,815,151	\$243,208,931 \$243,208,931	\$254,523,812 \$254,523,812
CFDA Subto 8059 SUP 93	DIEM	nd 555 ENTAL: FEDERAL FUNDS 00 Medical Assistance Program	\$0 \$0	\$515,619 \$515,619	\$0 \$0	\$0 \$0	\$0 \$0 \$254,523,812
	L, MO	F (FEDERAL FUNDS)	\$220,017,211	\$229,382,434	\$254,815,151	\$243,208,931 \$405,530,373	\$422,999,605
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS) TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS) FULL TIME EQUIVALENT POSITIONS: STRATEGY DESCRIPTION AND JUSTIFICATION:		\$365,160,073 0.0	\$383,480,676 8.4	\$424,652,555	\$405,530,373	\$422,999,605	
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3.A. STRATEGY REQUEST

80th Regular Session, Agency Submission, Version 1 Automated Budget and Evaluation System of Texas (ABEST) DATE:

8/18/2006

TIME: 6:59:51PM

Agency code: 529 Agency name: Health and Human Services Commission

GOAL:

2 Medicaid

OBJECTIVE:

Special Medicaid Services for Children

STRATEGY:

Health Steps (EPSDT) Dental

Statewide Goal/Benchmark:

3 0

Service Categories:

Service: 22

Income: A.1

Age: B.1

CODE DESCRIPTION

Exp 2005

Est 2006

Bud 2007

BL 2008

BL 2009

Federal and State law mandates mandate (Title XIX of the Social Security Act; 42 CFR parts 440-470; Human Resources Code, Title 2, Chapters 22 and 32) the provision of periodic dental services to Medicaid children less than 21 years of age that include diagnosis, prevention, and treatment of dental disease. Both dental and orthodontic services are provided. These medical services are outside of the payments related to risk groups.

The goal of the program is to provide early intervention addressing dental problems before they become chronic, and irreversible damage occurs. Poor dental health is often the most serious health threat to otherwise healthy children. Poor dental hygiene often results in the need for expensive and avoidable treatment and hospitalizations. Children suffering from early childhood caries require expensive and painful dental care that could be managed and prevented with dental education and routine dental care.

Included in this strategy are client service payments to providers as well as the state match for the administrative functions at the Department of State Health Services (DSHS).

Projected 2008-09 expenditures in the base request reflect client service cost reductions to FY2006 levels. A 10% reduction in administrative functions in contracts, staffing, and general operating expenses is reflected.

Projected expenditures for maintaining current 2008-09 cost trends are requested as exceptional items. Provider rate restorations are also requested as exceptional items.

EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

Since services covered under this strategy are mandated under a State administered Medicaid program, the risk of non-compliance and federal financial participation would be jeopardized for failure to reimburse medical providers at a rate that is reasonable and adequate to ensure provider participation.

Providing an adequate level of client outreach is necessary for compliant with the Frew et al v Hawkins et al consent decree.

Congress authorized an adjustment to the calculation of Texas' Medicaid matching rate for the impact of Hurricane Katrina evacuees to the State's per capita income. This adjustment, which is unknown at this time, will impact Texas' (Federal Medical Assistance Percentage) FMAP for a three-year period beginning in FY 2008. The FMAPs for both FY 2008-09 are estimates as the FMAP for FY 2008 will be determined in Fall 2006 and the FMAP for FY 2009 will be determined in Fall 2007.