# 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 Services Commission

GOAL:

Medicaid 2

Statewide Goal/Benchmark:

3 1

OBJECTIVE:

Medicaid Support

Service Categories:

Income: A.1

Age:

B.3

STRATEGY:

State Medicaid Office

Service: 30

CODE DESCRIPTION	Exp 2005	Est 2006	Bud 2007	BL 2008	BL 2009
Output Measures:  1 Medicaid Acute Care Recipient Months Per Month: Managed Care	1,191,139.00	1,838,039.00	1,898,994.00	2,066,245.00	2,154,134.00
Objects of Expense:				** ***	4.014.470
1001 SALARIES AND WAGES	\$828,486	\$809,674	\$1,180,931	\$1,010,916	\$1,013,350
1002 OTHER PERSONNEL COSTS	\$30,241	\$24,474	\$32,532	\$32,202	\$32,268
2001 PROFESSIONAL FEES AND SERVICES	\$9,963,192	\$12,003,168	\$12,450,043	\$12,224,723	\$12,225,920
2002 FUELS AND LUBRICANTS	\$5	\$147	\$148	\$142	\$142
2003 CONSUMABLE SUPPLIES	\$820	\$7,012	\$5,517	\$5,464	\$5,465
2004 UTILITIES	\$10,264	\$22,369	\$36,862	\$23,841	\$23,843
2005 TRAVEL	\$10,887	\$15,553	\$37,429	\$18,557	\$18,572
2006 RENT - BUILDING	\$6,026	\$68,521	\$108,695	\$82,593	\$82,593
2007 RENT - MACHINE AND OTHER	\$1,158	\$9,752	\$7,699	\$9,795	\$9,860
2009 OTHER OPERATING EXPENSE	\$32,646	\$61,041	\$82,154	\$58,094	\$58,126
3001 CLIENT SERVICES	\$0	\$0	\$0	\$0	\$0
4000 GRANTS	\$12,823	\$0	\$0	\$0	\$0
5000 CAPITAL EXPENDITURES	\$1,286	\$2,895	\$4,675	\$1,814	\$1,679
TOTAL, OBJECT OF EXPENSE	\$10,897,834	\$13,024,606	\$13,946,685	\$13,468,141	\$13,471,818
Method of Financing:					
1 GENERAL REVENUE FUND	\$0	\$0	- \$0	\$0	\$0
758 GR MATCH FOR MEDICAID	\$945,695	\$542,518	\$583,636	\$523,335	\$524,709
888 EARNED FEDERAL FUNDS	\$0	\$152,847	\$589,670	\$413,464	\$413,464
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)	\$945,695	\$695,365	\$1,173,306	\$936,799	\$938,173

Method of Financing:

## 3.A. STRATEGY REQUEST

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

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

GOAL: 2 Medicaid Statewide Goal/Benchmark: 3
OBJECTIVE: 4 Medicaid Support Service Categories:

STRATEGY: 1 State Medicaid Office Service: 30 Income: A.1 Age: B.3

CODE DESCRIPTION	Ехр 2005	Est 2006	Bud 2007	BL 2008	BL 2009
555 FEDERAL FUNDS 93.778.000 Medical Assistance Program	\$9.952.139	\$12,329,241	\$12,773,379	\$12,531,342	\$12,533,645
CFDA Subtotal, Fund 555	\$9,952,139	\$12,329,241	\$12,773,379	\$12,531,342	\$12,533,645
SUBTOTAL, MOF (FEDERAL FUNDS)	\$9,952,139	\$12,329,241	\$12,773,379	\$12,531,342	\$12,533,645
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)				\$13,468,141	\$13,471,818
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)	\$10,897,834	\$13,024,606	\$13,946,685	\$13,468,141	\$13,471,818
FULL TIME EQUIVALENT POSITIONS:	14.4	20.3	21.9	19.1	19.2

### STRATEGY DESCRIPTION AND JUSTIFICATION:

According to federal regulations (42 CFR 431.10) the Medicaid program must be administered by a single state agency that has final policy-making authority for the program. HHSC, as the single state agency, (Sec 531.021, Government Code) directs the program, administers and supervises the Medicaid State Plan, and is the final approval on program rules. The Medicaid Office has oversight of the Children's Health Insurance Program.

### EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

For FY06 and FY07, the indirect allocation of Medicaid and CHIP program support is determined by the ratio of Medicaid and CHIP caseloads. Changes in either case load, or federal approval of the methodology will change this ratio and the method of finance.