

Joint Budget Hearing

FY 2010-2011 Legislative Appropriations Request

September 11, 2008

Health and Human Services Commission

"The mission of the health and human service agencies in Texas is to develop and administer an accessible, effective, and efficient health and human services delivery system that is beneficial and responsive to the people of Texas."

FY 2008-09 Actions and Accomplishments

Medicaid and CHIP

- Implementation of STARHealth for children in Foster Care February 2008
- Implementation of Integrated Care Model in the D/FW area January 2008
- Implementation of FY 2008-09 rate increases in excess of \$1.0 billion All Funds
- Implementation of House Bill 109 changes to CHIP
- Submitted Medicaid Reform Waiver June 2008. LAR assumes no impact of Medicaid Reform

Eligibility and Enrollment Improvements:

- Increased Eligibility Determination Staffing with Enhanced Compensation
- Increased Training and Mentoring for Staff Using TIERS
- Efforts to Improve Timeliness
- Take back of TIERS and Eligibility Supporting Technologies
- Interim Contracts for Eligibility Support and CHIP

Enterprise Progress and Improvements:

Conversion of HHSAS Version 8.8 Upgrade – February 2008

HHSC LAR Policy Guidance and Resulting Actions

- Instructions allowed GR-Entitlement growth for Medicaid caseloads only. Requested Entitlement GR increased \$2.3 billion over the 2008-09 biennium.
- Non-Entitlement GR for the base request was submitted lower than allowed because of the increased costs to Medicaid for not assuming a CHIP Perinatal Program.

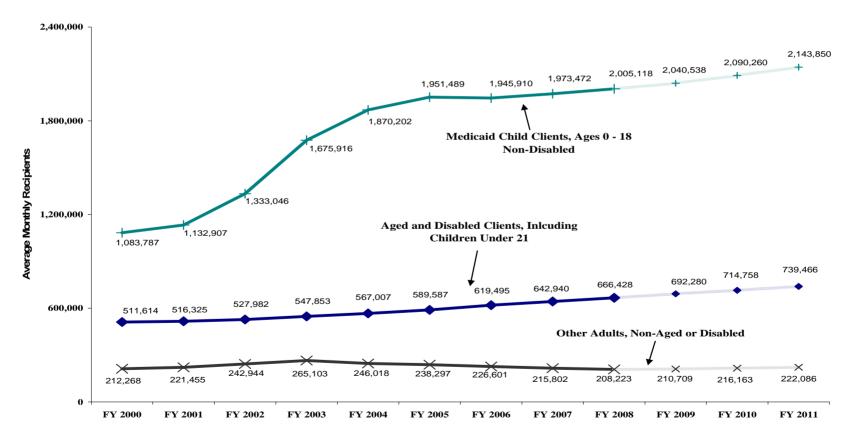
| Biennial Comparison of General Revenue | | | | | | | | |
|--|------------------|----------------------------|---------------------|--|--|--|--|--|
| | FY 2008-09 Total | FY 2010-11 Base Request | Biennial Difference | | | | | |
| GR Entitlement | \$ 11.6 | \$ 13.9 | \$ 2.3 | | | | | |
| GR Non-Entitlement | 1.8 | 1.7 | (0.1) | | | | | |
| Total, GR | \$ 13.4 | \$ 15.6 | \$ 2.2 | | | | | |
| Total, All Funds | \$ 34.6 | \$ 37.8 | \$ 3.2 | | | | | |

FY 2010-11 Base Request Assumptions

- Medicaid
 - Average monthly caseloads are projected to increase from 2.94 million in FY 2009 to 3.06 million in FY 2010 and 3.14 million in FY 2011, and includes children who would have been eligible for CHIP Perinatal coverage.
 - Costs for hospitals, physicians, and other providers are maintained at FY 2009 levels for the 2010-2011 biennium.
- Children's Health Insurance Program (CHIP)
 - Without the Perinate Program, CHIP caseloads are projected to decrease from 543,086 in FY 2009 to 483,358 in FY 2010 and increase to 485,706 in FY 2011.
 - Costs for hospitals, physicians, and other providers are at projected CHIP costs for the 2010-11 biennium.
- Temporary Assistance for Needy Families (TANF)
 - TANF caseloads should stabilize during the 2010-11 biennium after declining for several years. The FY 2009 average monthly caseload of 110,277 is projected to decrease to a monthly caseload of 110,134 in FY 2010-11.

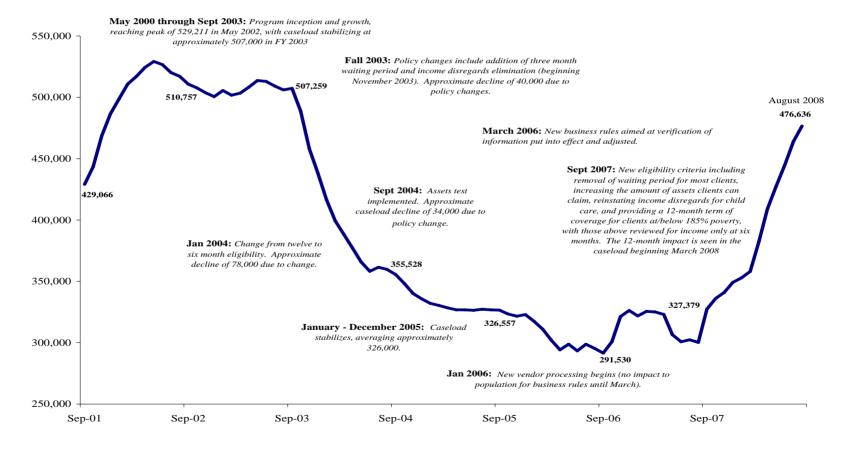
Medicaid Caseload

Medicaid Caseload by Group: Fiscal Year 2000 to 2011 (projected)



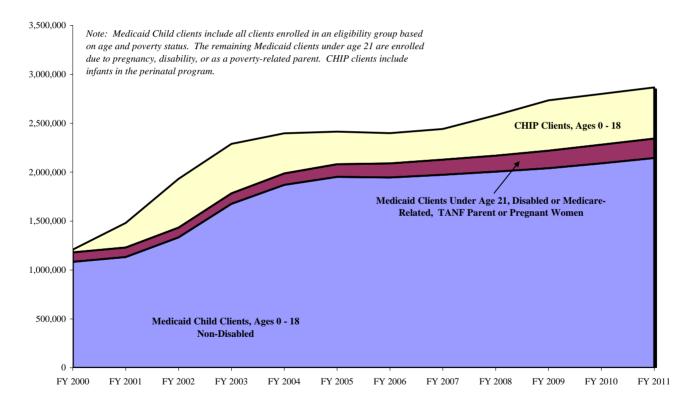
Children's Health Insurance Program (CHIP) Caseloads

CHIP Enrollment and Policy Changes, September 2001 - August 2008



Children Served

Medicaid and CHIP Clients Under Age 21: Fiscal Years 2000 - 2011 (projected)



FY 2008-2009 Budget Issues in the LAR

- Net Supplemental Funding Need \$1.27 billion GR
 - ⋟ \$823 million GR for Medicaid costs and caseloads
 - > \$132 million GR for increasing state share for FFY 09 FMAP decline
 - > \$317 million GR for federal Medicare "Giveback" payments
- Federal Funding Issues
 - Extended lengths of time for review of state plan amendments and waivers that would provide additional federal reimbursement.
 - Federal deferrals and disallowances have increased federal cash flow issues.
 - Consolidation has greatly increased the complexity of financing and funding streams that support HHSC administrative operations.

HHSC FY 2010-2011 Key Budget Issues

- Maintaining CHIP and Medicaid Current Services
 - Cost Trends
 - Restoring CHIP Perinatal Program
 - Compliance with Frew Court Order
- Eligibility and Enrollment
 - Maintaining current operations
 - Increased staff, contract, postage and other operating expense for caseload growth in Food Stamps, Medicaid and CHIP
 - Rollout of TIERS and maintenance of SAVERR
 - Improve timeliness and performance
- Maintaining Operating Levels in Regions
 - Maintaining FY 2009 local office space, utilities, and services associated with HHS staff growth during 2008-09 biennium.

HHSC FY 2010-2011 Key Program Issues

- Future Major Procurements
 - Medicaid Claims Administrator/ Vendor Drugs
 - Eligibility Support and Document Processing Services
 - TIERS and Eligibility Supporting Technologies
 - ➢ HHS Data Warehouse
- Supporting an Increasing HHS Enterprise
- Maintaining IT and Other Infrastructure Supports
 - Increased DCS Costs and related agency costs for network and program remediation and transformation
 - Implementing HHS Telecommunications seat management approach to address aging infrastructure
 - Improving IT system functionality and information security benefiting clients, providers, and employees

HHSC LAR Summary Request

| | | FY 2008-2009 | FY 2010-2011 | FY 2010-2011 | FY 2010-2011 |
|-----------|-----------------------------------|-------------------|-------------------|-------------------|-------------------|
| | GOAL | Expend/Budgeted | Base Request | Exceptional Items | Total Request |
| Goal A | HHS Enterprise Oversight & Policy | \$ 1,715,981,258 | \$ 1,618,910,611 | \$ 392,973,929 | \$ 2,011,884,540 |
| Goal B | Medicaid | 29,892,120,479 | 33,617,147,634 | 2,897,031,860 | 36,514,179,494 |
| Goal C | CHIP Services | 2,108,260,837 | 1,651,508,372 | 822,401,955 | 2,473,910,327 |
| Goal D | Encourage Self Sufficiency | 422,918,044 | 341,428,052 | 5,190,053 | 346,618,105 |
| Goal E | Program Support | 308,336,338 | 318,999,163 | 30,882,547 | 349,881,710 |
| Goal F | Information Technology Projects | 74,034,063 | 124,957,504 | - | 124,957,504 |
| Goal G | Office of Inspector General | 100,209,058 | 102,593,280 | 16,960,845 | 119,554,125 |
| Goal H | Enterprise Exceptional Items | - | - | 642,713,861 | \$ 642,713,861 |
| Riders | Unexpended Balance | | 6,571,430 | | |
| | Total, Agency Request | \$ 34,621,860,077 | \$ 37,782,116,046 | \$ 4,808,155,050 | \$ 42,583,699,666 |
| Method of | Financing: | | | | |
| | General Revenue | \$ 13,402,824,108 | \$ 15,553,036,059 | \$ 2,097,908,557 | \$ 17,650,944,616 |
| | General Revenue - Dedicated | | - | 77,242 | 77,242 |
| | Federal Funds | 20,477,145,330 | 21,519,760,286 | 2,709,981,837 | 24,229,742,123 |
| | Other Funds | 741,890,639 | 709,319,701 | 187,414 | 709,507,115 |
| | Total, Method of Financing | \$ 34,621,860,077 | \$ 37,782,116,046 | \$ 4,808,155,050 | \$ 42,590,271,096 |

Comparison of Key Performance Measures

| Measure Name | Estimated FY 2008 | Budgeted FY 2009 | Base Request FY 2010 | Base Request FY 2011 |
|---|----------------------|---------------------|-------------------------|-------------------------|
| Average Medicaid Acute Care Recipient Months per Month | 2,879,770 | 2,943,527 | 3,056,383 | 3,141,452 |
| Number of Medicaid Prescriptions Incurred | 27,552,647 | 28,224,800 | 29,276,245 | 30,118,507 |
| Average Medicaid Acute Cost per Recipient Month | \$230.51 | \$256.99 | \$266.05 | \$267.71 |
| Average Cost per Medicaid Prescription | \$72.14 | \$79.01 | \$78.97 | \$79.15 |
| | | | | |
| Average CHIP Programs Recipient Months per Month | 443,267 | 543,086 | 483,358 | 485,706 |
| Average CHIP Programs Benefit Cost without Prescription Benefit | \$154.13 | \$155.04 | \$111.03 | \$116.58 |
| Average CHIP Programs Benefit Cost with Prescription Benefit | \$175.49 | \$177.43 | \$137.48 | \$144.23 |
| | | | | |
| Average Number of TANF Recipients per Month | 120,779 | 110,277 | 110,134 | 110,134 |
| Average Number of State 2-Parent Cash Assistance Recipients | 4,701 | 4,469 | 4,210 | 4,210 |
| Average Monthly Grant: TANF | \$66.22 | \$68.47 | \$70.53 | \$72.66 |
| Average Monthly Grant: State 2-Parent Cash Assistance | \$65.31 | \$67.83 | \$69.68 | \$71.65 |
| | | | | |
| Number Served by Family Violence Programs/Shelters | 72,807 | 77,583 | 76,063 | 73,848 |
| Number of Participating Family Violence Programs/Shelters | 88 | 88 | 88 | 88 |

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Appendix

• Summary of Exceptional Item Requests

Summary Table of Exceptional Items

| EXCEPTIONAL ITEM | FY | 2010 | | FY 201 | 1 | | BIENNIA | L TO | TAL | FY 2010 | FY 2011 |
|--|---------------------|------|----------------|------------------------|----------------|-----|----------------|------|----------------|----------|----------|
| | GR | | All Funds | GR | All Funds | | GR All Funds | | All Funds | FTEs | FTEs |
| Base Request Non-Entitlement | 842,812,712 | | 2,429,298,784 | 854,645,373 | 2,472,746,229 |) | 1,697,458,085 | | 4,902,045,013 | 11,683.3 | 11,683.3 |
| Base Request Entitlement | 6,776,209,449 | | 16,174,632,595 | 7,079,368,525 | 16,705,438,438 | | 13,855,577,974 | | 32,880,071,033 | - | - |
| Total Base Request | \$ 7,619,022,161 | \$ | 18,603,931,379 | \$ 7,934,013,898 \$ | 19,178,184,667 | '\$ | 15,553,036,059 | \$ | 37,782,116,046 | 11,683.3 | 11,683.3 |
| Exceptional Items: | | | | | | | | | | | |
| Maintain Essential Services for Clients | | | | | | | | | | | |
| 1. Maintain Medicaid Cost Trends | \$ 404,599,676 | \$ | 947,611,986 | \$ 858,835,326 \$ | 2,001,276,070 | \$ | 1,263,435,002 | \$ | 2,948,888,056 | - | - |
| 2. Maintain Funding for Frew Corrective Action Orders | 12,502,276 | | 24,943,763 | 12,497,724 | 24,943,764 | | 25,000,000 | | 49,887,527 | 6.1 | 6.1 |
| 3. Maintain Frew Strategic Initiative Funding | 74,633,266 | | 146,282,359 | 75,366,734 | 147,556,323 | | 150,000,000 | | 293,838,682 | - | - |
| 4. Maintain Current Operating Levels for HHSC Programs and Se | 78,424,108 | | 148,742,108 | 72,927,016 | 139,036,485 | 5 | 151,351,124 | | 287,778,593 | 489.4 | 489.5 |
| 5. Maintain CHIP Perinatal Program | (32,186,754) | | 42,478,404 | (35,948,786) | 40,505,668 | | (68,135,540) | | 82,984,072 | - | - |
| 6. Maintain IT Services for HHS Provided by the Department of In | 21,714,972 | | 25,854,902 | 17,040,427 | 21,058,403 | | 38,755,399 | | 46,913,305 | 14.0 | 14.0 |
| 7. Maintain Transportation Infrastructure of HHS Facilities, Wareh | 5,030,861 | | 5,030,861 | 6,269,209 | 6,269,209 |) | 11,300,070 | | 11,300,070 | - | - |
| Critical Services | | | | | | | | | | | |
| 8. Increase Capacity of HHS-Funded Community Services | 64,396,036 | | 127,344,766 | 159,653,630 | 347,070,515 | ; | 224,049,666 | | 474,415,281 | 96.3 | 170.5 |
| 9. Increase Eligibility Resources for Caseload and Workload Grow | 26,873,047 | | 59,362,078 | 29,816,118 | 65,563,921 | | 56,689,165 | | 124,925,999 | 650.6 | 824.4 |
| 10 Improve Staffing and Supports for the Office of Inspector Gener | 4,241,531 | | 8,737,998 | 3,902,351 | 8,154,959 |) | 8,143,882 | | 16,892,957 | 90.5 | 90.5 |
| 11. Maintain and Improve Critical HHS Technological Systems | 24,075,028 | | 33,140,356 | 8,803,349 | 11,990,814 | | 32,878,377 | | 45,131,170 | 20.8 | 20.8 |
| 12. Increase Family Violence Services Funding | 1,251,382 | | 1,251,382 | 1,231,277 | 1,231,277 | | 2,482,659 | | 2,482,659 | 3.1 | 3.1 |
| 13. Increase State Assistance to 2-1-1 Information Centers | 491,000 | | 1,000,000 | 491,000 | 1,000,000 |) | 982,000 | | 2,000,000 | - | - |
| 14. Increase Support of Critical Health and Family Services | 3,508,414 | | 3,508,414 | 3,954,801 | 3,954,801 | | 7,463,215 | | 7,463,215 | 8.3 | 8.3 |
| 15. Establish Medicaid Buy-In for Children | 214,294 | | 428,588 | 22,499,256 | 45,498,182 | 2 | 22,713,550 | | 45,926,770 | 3.3 | 19.5 |
| 16. Increase Retention and Recruitment of Targeted HHS Staff | 22,905,159 | | 33,417,093 | 22,972,071 | 33,417,093 | | 45,877,230 | | 66,834,186 | - | - |
| System Improvements | | | | | | | | | | | |
| 17. Increase State Support of Children Hospital Upper Payment Lin | 12,500,000 | | 30,237,059 | 12,500,000 | 29,861,443 | | 25,000,000 | | 60,098,502 | - | - |
| 18. Restore a State-Supported Graduate Medical Education Progra | 50,000,000 | | 120,948,234 | 50,000,000 | 119,445,772 | 2 | 100,000,000 | | 240,394,006 | - | - |
| Total Exceptional Items | \$ 775,174,296 | \$ | 1,760,320,351 | \$ 1,322,811,503 \$ | 3,047,834,699 | \$ | 2,097,985,799 | \$ | 4,808,155,050 | 1,382.4 | 1,646.7 |
| Grand Total Base Request and Exceptional Items | \$ 8,394,196,457 | \$ | 20,364,251,730 | \$ 9,256,825,401 \$ | 22,226,019,366 | \$ | 17,651,021,858 | \$ | 42,590,271,096 | 13,065.7 | 13,330.0 |
| FY 2008-2009 Estimated Expenditures | \$ 6,173,727,914 | \$ | 16,183,651,835 | \$ 7,229,096,194 \$ | 18,438,208,242 | 2 | 13,402,824,108 | | 34,621,860,077 | 11,457.8 | 11,682.3 |
| FY 2008-09 Non-Entitlement | \$ 856,574,959 | \$ | 2,770,270,892 | \$ 955,068,071 \$ | 3,169,670,101 | | 1,811,643,030 | | 5,939,940,993 | 11,457.8 | 11,682.3 |
| FY 2008-09 Entitlement | \$ 5,317,152,955 | \$ | 13,413,380,943 | 6,274,028,123 \$ | 15,268,538,141 | | 11,591,181,078 | | 28,681,919,084 | - | - |

Maintain Medicaid Cost Trends

| Funding Request | FY 2010 | | FY 2011 | Biennium | |
|----------------------|-------------------|----|------------------|---------------|--|
| Total (All Funds) | \$ 947,611,986 | \$ | 2,001,276,070 \$ | 2,948,888,056 | |
| Method of Financing: | | | | | |
| General Revenue | 404,599,676 | | 858,835,326 | 1,263,435,002 | |
| Other Funds | | | | | |
| Federal Funds | 543,012,310 | | 1,142,440,744 | 1,685,453,054 | |
| Number of FTEs | - | | - | | |

Number of FTEs

This request represents cost and utilization increases forecasted for fiscal years 2010-11 in the Medicaid program that were not allowed in the base request. Caseload growth is assumed to be in the base request at fiscal year 2009 cost levels, and FMAP rates of 58.59 percent for fiscal year 2010 and 58.10 percent for fiscal year 2011.

| Program Impact | FY 2010 | FY 2011 |
|--|---------|---------|
| Average Medicaid Acute Care Cost Per Recipient Month | \$8.20 | \$18.45 |
| Average Medicaid Acute Cost per Recipient Month | \$7.19 | \$15.35 |
| | | |
| | | |

Maintain Funding for Frew Corrective Action Orders

| Funding Request | FY 2010 FY 2011 | | FY 2011 | Biennium | | |
|----------------------|------------------|----|------------|----------|------------|--|
| Total (All Funds) | \$ 24,943,763 | \$ | 24,943,764 | \$ | 49,887,527 | |
| Method of Financing: | | | | | | |
| General Revenue | 12,502,276 | | 12,497,724 | | 25,000,000 | |
| Other Funds | | | | | | |
| Federal Funds | 12,441,487 | | 12,446,040 | | 24,887,527 | |
| Number of FTEs | 6.1 | | 6.1 | | | |

Number of FTEs

This request would represent funding necessary to maintain the Frew Corrective Action Orders that was not able to be requested in the base request. The corrective action orders contain requirements spread over the next five years for new approaches to provide access to services, as well as a number of independent studies to identify additional changes that could improve access to care for class members. The corrective action orders address functional areas including: Outreach and Informing, Check Ups, Check Up Reports and Plans for Lagging Counties, Adequate Supply of Health Care Providers, Managed Care, Toll-free Numbers, Transportation Program, Health Care Provider Training, Health Outcome Measures and Dental Assessment, Case Management, and Prescription and Non-prescription Medications and Medical Equipment and Supplies. The request also includes six (6) full-time employees for the Department of State Health Services.

| Program Impact | FY 2010 | FY 2011 |
|----------------|---------|---------|
| | | |
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| | | |

Maintain Frew Strategic Initiative Funding

| Funding Request | FY 2010 | FY 2011 | Biennium | |
|----------------------|----------------------|-------------|----------------|--|
| Total (All Funds) | \$ 146,282,359 \$ | 147,556,323 | \$ 293,838,682 | |
| Method of Financing: | | | | |
| General Revenue | 74,633,266 | 75,366,734 | 150,000,000 | |
| Other Funds | | | | |
| Federal Funds | 71,649,093 | 72,189,589 | 143,838,682 | |
| Number of FTEs | - | - | | |

Number of FTEs

This request would continue those Frew Strategic Initiatives initiated during the current biennium as well as provide funding for new initiatives. The Agreement's corrective action order related to the Adequate Supply of Health Care Providers requires the Health and Human Service Commission to apply \$150 million to strategic initiatives to improve access to Medicaid services for FREW class members. Matching federal Medicaid funds may be available for most initiatives.

| Program Impact | FY 2010 | FY 2011 | | |
|----------------|---------|---------|--|--|
| | | | | |
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Maintain Current Operating Levels for HHSC Programs and Services

| Funding Request | FY 2010 | | FY 2011 | Biennium | | |
|----------------------|---------|-------------|---------|-------------|----|-------------|
| Total (All Funds) | \$ | 148,742,108 | \$ | 139,036,485 | \$ | 287,778,593 |
| Method of Financing: | | | | | | |
| General Revenue | | 78,424,108 | | 72,927,016 | | 151,351,124 |
| Other Funds | | | | | | |
| Federal Funds | | 70,318,000 | | 66,109,469 | | 136,427,469 |
| Number of FTEs | | 489.4 | | 489.5 | | |

Number of FTEs

During the 2008-09 biennium, Health and Human Service Commission (HHSC) implemented or increased several programs and initiatives where staffing and expenditure levels do not represent 24 months of expenditures that can be sustained for a full 24 months for 2010-11 biennium. To maintain the number of local and regional HHS offices in place at the end of August 2009, \$29.7 million general revenue and \$40.7 million all funds is requested for increased costs in leases, utilities, janitorial and other facility services. This general revenue amount also includes the GR share that would be billed to other Health and Human Service agencies but would eventually be Interagency Contracts in HHSC's method of finance.

For the Office of Eligibility Services, \$113.1 million general revenue and \$239.4 million all funds is needed to maintain the 7,889 budgeted fiscal year 2009 eligibility determination full time employees and associated contracted eligibility support and overhead. It also includes funding for the enhanced compensation plan implemented in June 2008. The Nurse-Family Partnership Program and Healthy Marriage programs which were implemented during fiscal year 2008 would also be maintained.

| Program Impact | FY 2010 | FY 2011 |
|--|------------|------------|
| Average Cost per Eligibility Determination | \$186.26 | \$173.85 |
| Average Number of Eligibility Determination per Staff Person per Month | (4) | (4) |
| Average Cost per Healthy Marriage Grant | \$3,562.00 | \$3,026.00 |
| | | |
| | | |

Maintain CHIP Perinatal Program

| Funding Request | FY 2010 FY 2011 | |)11 | Biennium | |
|----------------------|------------------|------|-------------|----------|--------------|
| Total (All Funds) | \$ 42,478,404 | \$ 4 | 10,505,668 | \$ | 82,984,072 |
| Method of Financing: | | | | | |
| General Revenue | (32,186,754) | (3 | 35,948,786) | | (68,135,540) |
| Other Funds | | | | | |
| Federal Funds | 74,665,158 | 7 | 76,454,454 | | 151,119,612 |
| Number of FTEs | | | | | |

Number of FTEs

This funding request would restore the Children's Health Insurance Program (CHIP) Perinate Program and represents the net difference between Medicaid and CHIP. In the Medicaid base request, these children would be assumed to be in Medicaid. Restoring the Perinate programs saves general revenue but costs more federal funding due to CHIP's more generous federal match rate compared to Medicaid. The biennial cost of Perinates in CHIP totals \$237.0 million general revenue and \$813.9 million all funds and the same costs in Medicaid totals \$302.5 million general revenue and \$727.1 million all funds.

| Program Impact | FY 2010 | FY 2011 | |
|--|----------|----------|--|
| Average Medicaid Acute Care Recipient Months per Month | (35,202) | (36,051) | |
| Average Perinate Recipient Months per Month | 65,504 | 66,045 | |
| Average Perinate Benefit Cost per Recipient Month | \$518.30 | \$531.48 | |
| | | | |
| | | | |

Exceptional Item 6

Maintain IT Services for HHS Provided by the Department of Information Resources

| Funding Request | FY 2010 FY 2011 | | FY 2011 | Biennium |
|----------------------|------------------|----|---------------|------------|
| Total (All Funds) | \$ 25,854,902 | \$ | 21,058,403 \$ | 46,913,305 |
| Method of Financing: | | | | |
| General Revenue | 21,714,972 | | 17,040,427 | 38,755,399 |
| Other Funds | | | | |
| Federal Funds | 4,139,930 | | 4,017,976 | 8,157,906 |
| Number of FTEs | 14.0 | | 14.0 | |

Number of FTEs

This request would provide funding to all five HHS agencies in support of the Data Center Services consolidation managed by the Department of Information Resources (DIR). Funding would cover increased billings from DIR as well as internal agency costs to remediate existing systems to be supported by DIR and other connectivity and network costs. Part of the request, \$25.5 million GR and \$31.2 million All Funds, would support increased payments to DIR, and the other share, \$13.3 million general revenue and \$15.8 million all funds, would be for internal Health and Human Services agency costs to support networks, remediate programs to platforms and software versions supported by the DIR contractor, program transformation, and staff for contract monitoring.

Cost by agency totals \$1.4 million GR and \$2.9 million All Funds at Department of Aging and Disability Services, \$5.3 million GR & All Funds at Department of State Health Services, \$2.1 million GR & \$3.7 million all funds at HHSC, \$1.6 million GR & All Funds at Department of Assistive and Rehabilitative Services, and Department of Family and Protective Services with \$15.1 million GR & \$17.6 million All Funds.

| Program Impact | FY 2010 | FY 2011 |
|----------------|---------|---------|
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| | | |

Exceptional Item 7

Maintain Transportation Infrastructure of HHS Facilities, Warehouses, and Offices

| Funding Request | FY 2010 FY 2011 | | FY 2011 | 1 Biennium | | |
|----------------------|-----------------|----|-----------|------------|------------|--|
| Total (All Funds) | \$ 5,030,861 | \$ | 6,269,209 | \$ | 11,300,070 | |
| Method of Financing: | | | | | | |
| General Revenue | 5,030,861 | | 6,269,209 | | 11,300,070 | |
| Other Funds | | | | | | |
| Federal Funds | | | | | - | |
| Number of FTEs | _ | | - | | | |

Number of FTEs

This request would provide funding to replace and purchase new vehicles across the HHS enterprise – State Schools, State Hospitals, and agency programs. Replacement is based upon a 10-year plan.

The funds would replace 336 vehicles and add 101 new vehicles to HHS fleet. Cost by agency totals \$7.5 million general revenue and all funds at DADS, \$3.6 million GR and All Funds at DSHS, and \$0.2 million GR and All Funds at DARS.

| Program Impact | FY 2010 | FY 2011 | | |
|----------------|---------|---------|--|--|
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Exceptional Item 8

Increase Capacity of HHS-Funded Community Services

| Funding Request | FY 2010 FY 2011 | | FY 2011 | Biennium | |
|----------------------|-------------------|----|-------------|----------|-------------|
| Total (All Funds) | \$ 127,344,766 | \$ | 347,070,515 | \$ | 474,415,281 |
| Method of Financing: | | | | | |
| General Revenue | 64,396,036 | | 159,653,630 | | 224,049,666 |
| Other Funds | | | | | |
| Federal Funds | 62,948,730 | | 187,416,885 | | 250,365,615 |
| Number of FTEs | 96.3 | | 170.5 | | |

Number of FTEs

This funding would increase the capacity of HHS community services as part of a continuing effort to reduce and/or eliminate programs with waiting or interest lists at the Department of Aging and Disability Services (DADS), the Department of Assistive and Rehabilitative Services (DARS), and the Department of State Health Services (DSHS).

DADS – \$152.0 million GR and \$352.8 million All Funds for Home and Community Care Waivers, Non-Medicaid services, and In-Home & Family Support (IHFS). Waiver programs include Community Based Alternatives (CBA), Community Living Assistance and Support Services (CLASS), Medically Dependent Children's Program (MDCP), Consolidated Waiver Program (CWP), Deaf-Blind with Multiple Disabilities (DBMD), Home and Community Based Services (HCS) and Texas Home Living (TxHml). HHSC would also incur acute Medicaid costs of \$35.7 million GR and \$85.2 million All Funds for some clients served by DADS.

DARS - \$8.3 million GR and All Funds for Independent Living Service (ILS) and Comprehensive Rehabilitative Services (CRS).

DSHS - \$28.1 million GR and All Funds for Child and Adolescent Community Mental Health (CACMH) and Children with Special Health Care Needs (CSHCN).

| Program Impact | FY 2010 | FY 2011 |
|--|---------|---------|
| Average individuals Served per Month in CLASS (DADS) | 472 | 1,417 |
| Average individuals Served per Month in HCS (DADS) | 1,280 | 3,840 |
| ILS Clients Served per Year (DARS) | 533 | 569 |
| CSHCN Clients Served at End of Year (DSHS) | 400 | 400 |

Increase Eligibility Resources for Caseload and Workload Growth

| Funding Request | FY 2010 FY 2011 | | FY 2011 | Biennium | | |
|----------------------|------------------|----|---------------|-------------|--|--|
| Total (All Funds) | \$ 59,362,078 | \$ | 65,563,921 \$ | 124,925,999 | | |
| Method of Financing: | | | | | | |
| General Revenue | 26,873,047 | | 29,816,118 | 56,689,165 | | |
| Other Funds | 6,444 | | 5,173 | 11,617 | | |
| Federal Funds | 32,482,587 | | 35,742,630 | 68,225,217 | | |
| Number of FTEs | 650.6 | | 824.4 | | | |

Number of FTEs

This request for funding would support additional eligibility staff and administrative staff associated with the caseload forecasts for Medicaid, TANF, Food Stamps and CHIP. In FY 2010, requested funding would allow HHSC to "catch up" with FY 2009 and FY 2010 forecasted program growth. In FY 2011, requested funding would maintain the FY 2010 level as well as add staff and resources for the forecasted FY 2011 program growth.

The funding would Include eligibility determination staff, trainers, EBT contracted expense, enrollment broker contracted expense, postage and presorting, telephony, data broker and other eligibility support, ombudsman, and TIERS onsite support staff.

| Program Impact | FY 2010 | FY 2011 | | |
|--|---------|---------|--|--|
| Average Cost per Eligibility Determination | \$33.27 | \$43.51 | | |
| Average Number of Eligibility Determination per Staff Person per Month | -3 | -5 | | |
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Improve Staffing and Supports for the Office of Inspector General

| Funding Request | FY 2010 | | 2011 | Biennium | |
|----------------------|-----------------|----|--------------|------------|--|
| Total (All Funds) | \$ 8,737,998 | \$ | 8,154,959 \$ | 16,892,957 | |
| Method of Financing: | | | | | |
| General Revenue | 4,241,531 | | 3,902,351 | 8,143,882 | |
| Other Funds | 719 | | 516 | 1,235 | |
| Federal Funds | 4,495,748 | | 4,252,092 | 8,747,840 | |
| Number of FTEs | 90.5 | | 90.5 | | |

Number of FTEs

This funding request would increase the staff for the OIG by 82 positions each year, adding investigators, auditors, attorneys, and other analysts and support positions to address the increasing workload of the Office and five (5) staff supporting criminal history checks. There would also be additional staff positions that would provide support to the Office of Inspector General. It would also provide an upgrade to the server supporting the Medicaid Fraud and Abuse System. The GR amount also includes the GR share that would be billed to other HHS agencies but would eventuate as Interagency Contracts in HHSC's method of finance.

| Program Impact | FY 2010 | FY 2011 | | |
|---|---------|---------|--|--|
| | | | | |
| Number of Provider & Recipient Investigations | 5,335 | 5,335 | | |
| Number of Audits Performed | 442 | 442 | | |
| Average \$ Recovered & Saved per Completed Investigation, Review or Audit | \$3,174 | \$3,174 | | |
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Exceptional Item 11

Maintain and Improve Critical HHS Technological Systems

| Funding Request | FY 2010 | | FY 2011 | Biennium | |
|----------------------|-----------|---------|------------|---------------|--|
| Total (All Funds) | \$ 33,140 | ,356 \$ | 11,990,814 | \$ 45,131,170 | |
| Method of Financing: | | | | | |
| General Revenue | 24,075 | ,028 | 8,803,349 | 32,878,377 | |
| Other Funds | 67 | ,792 | 53,490 | 121,282 | |
| Federal Funds | 8,997 | ,536 | 3,133,975 | 12,131,511 | |
| Number of FTEs | | 20.8 | 20.8 | | |

Number of FTEs

This request represents all enterprise IT funding supporting existing initiatives, such as data warehouse (\$1.8 million AF), identity management (\$4.1 million AF), and improving security (\$3.6 million AF), as well as other new IT initiatives that cross over all five agencies.

New activities would include PeopleSoft HRMS Upgrade \$9.5 million AF), telecommunications seat management maintenance (\$15.4 million AF), updating systems supporting State Schools and Hospitals (\$6.7 million AF), and implementing financial modules for inventory management (\$2.4 million AF) and accounts receivables (\$1.7 million AF).

This funding would allow HHS agencies and programs to improve and maintain services to clients, providers, and employees as well as update obsolete systems and processes supporting HHS programs.

| Program Impact | FY 2010 | FY 2011 |
|----------------|---------|---------|
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Increase Family Violence Services Funding

| Funding Request | FY 2010 | | FY 2011 | | Biennium | |
|----------------------|-----------------|----|-----------|----|-----------|--|
| Total (All Funds) | \$ 1,251,382 | \$ | 1,231,277 | \$ | 2,482,659 | |
| Method of Financing: | | | | | | |
| General Revenue | 1,251,382 | | 1,231,277 | | 2,482,659 | |
| GR - Dedicated | | | | | - | |
| Other Funds | | | | | | |
| Federal Funds | | | | | - | |
| Number of FTEs | 3.1 | | 3.1 | | | |

Number of FTEs

This request would provide additional funding to improve family violence services in underserved areas of the state and help the Family Violence Program achieve its goal of promoting self-sufficiency, safety, and long-term independence from family violence.

The funding would help establish two new programs or shelters serving over 3,300 women and children. The addition of two (2) FTE would enable HHSC contract management staff to increase contract oversight, manage workloads, and increase the amount of programmatic and fiscal technical assistance given to providers. FVP would be able to conduct more frequent monitoring of the FVP contracts especially of those identified as high risk.

| Program Impact | FY 2010 | FY 2011 |
|-------------------------------------|---------|---------|
| | | |
| Number of Women and Children Served | 3,359 | 3,359 |
| Number of Programs and/or Shelters | 2 | 2 |
| | | |
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Exceptional Item 13

Increase State Assistance to 2-1-1 Information Centers

| Funding Request | FY 2010 | FY 2011 | Biennium |
|----------------------|--------------------|-----------|--------------|
| Total (All Funds) | \$ 1,000,000 \$ | 1,000,000 | \$ 2,000,000 |
| Method of Financing: | | | |
| General Revenue | 491,000 | 491,000 | 982,000 |
| Other Funds | | | |
| Federal Funds | 509,000 | 509,000 | 1,018,000 |
| Number of FTEs | - | - | |

Number of FTEs

Requested funding would increase support of 2-1-1 contractors for increased call volume. In 2006 2-1-1 handled 1,287,603 to 1,979,702 in 2007, an increase of 692,099 calls. Call volume is projected to increase to 2.5 million calls handled in 2011 (an increase of 520,298 calls). A lack of adequate funding to effectively respond to this increase in call volume may result in understaffing in many of the 2-1-1 Area Information Centers (AIC) and quality standards being put in jeopardy.

| Program Impact | FY 2010 | FY 2011 |
|----------------|---------|---------|
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Exceptional Item 14

Increase Support of Critical Health and Family Services

| Funding Request | FY 2010 | | FY 2011 | | Biennium | |
|----------------------|-----------------|----|-----------|----|-----------|--|
| Total (All Funds) | \$ 3,508,414 | \$ | 3,954,801 | \$ | 7,463,215 | |
| Method of Financing: | | | | | | |
| General Revenue | 3,508,414 | | 3,954,801 | | 7,463,215 | |
| Other Funds | | | | | | |
| Federal Funds | | | | | - | |
| Number of FTEs | 8.3 | | 8.3 | | | |

Number of FTEs

This request would increase funding to certain state-funded health initiatives. Funding would add four (4) Texas Integrated Funding Initiative sites (\$ 0.6 million), provide grant funding for Community Resource Coordination Groups (\$3.0 million and 2 FTEs), and increase funding for Alternatives to Abortion contractors (\$1.5 million). One FTE would support the Raising Texas Initiative to facilitate replication of state level Early Childhood Comprehensive Systems activities at the local level (\$0.2 million and one (1) FTE). The Office for the Elimination of Health Disparities (OEHD) coordinates statewide efforts in HHS agencies to target health disparities. Culturally and Linguistically Appropriate Services (CLAS) standards address quality health and human services for African-American and Hispanic/Latino Texans crucial to reducing disability, mortality, morbidity, and healthcare/social services costs. CLAS standards are required for HHS agencies receiving federal funds to ensure that Texans receive equitable and effective treatment. The requested funding supports five (5) statewide OEHD funded sites (\$2.0 million and five (5) FTEs).

| Program Impact | FY 2010 | FY 2011 |
|----------------|---------|---------|
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Exceptional Item 15

Establish Medicaid Buy-In for Children

| Funding Request | F | Y 2010 | FY 2011 | Biennium |
|----------------------|----|------------|------------|---------------|
| Total (All Funds) | \$ | 428,588 \$ | 45,498,182 | \$ 45,926,770 |
| Method of Financing: | | | | |
| General Revenue | | 214,294 | 22,499,256 | 22,713,550 |
| Other Funds | | | | |
| Federal Funds | | 214,294 | 22,998,926 | 23,213,220 |
| Number of FTEs | | 3.3 | 19.5 | |

Number of FTEs

This request would create a new program for families of children with significant health concerns to buy into Medicaid health coverage. Families could have incomes above the financial standards for SSI of up to 300 percent of the federal poverty level. This request assumes outreach and automation programming in FY 2010 and implementation in FY 2011. Funding would also provide additional eligibility determination staff for this program expansion.

| Program Impact | FY 2010 | FY 2011 |
|---|---------|---------|
| | | |
| | | |
| Average Disabled and Blind Recipient Months per Month | C | 2,412 |
| | | |
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| | | |

Increase Retention and Recruitment of Targeted HHS Staff

| Funding Request | FY 2010 | | FY 2011 | | Biennium | |
|----------------------|------------------|----|------------|----|------------|--|
| Total (All Funds) | \$ 33,417,093 | \$ | 33,417,093 | \$ | 66,834,186 | |
| Method of Financing: | | | | | | |
| General Revenue | 22,905,159 | | 22,972,071 | | 45,877,230 | |
| Other Funds | 26,640 | | 26,640 | | 53,280 | |
| Federal Funds | 10,485,294 | | 10,418,382 | | 20,903,676 | |
| Number of FTEs | | | | | | |

Number of FTEs

This item is requested on behalf of DSHS, DADS, HHSC, and DFPS to improve retention and recruitment of nurses (RNs and LVNs), physicians and psychiatrists throughout the HHS system. High turnover rates in excess of 25% for nurses and 21% for doctors continue to challenge HHS agencies to maintain an adequate workforce of health care professionals. Funding would benefit over 4,000 medical HHS professionals by increasing salaries of psychiatrist and direct-care nurse positions by 15 percent and salaries of physician and non-direct care administrative nurse positions by ten (10) percent.

Cost by agency totals \$18.1 million GR and \$37.7 million All Funds at DADS, \$27.4 million GR and \$28.1 million All Funds at DSHS, \$0.2 million GR and \$1.0 million All Funds at HHSC, and DFPS with \$0.1 million GR and All Funds.

| Program Impact | FY 2010 | FY 2011 | | |
|----------------|---------|---------|--|--|
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Exceptional Item 17

Increase State Support of Children Hospital Upper Payment Limit Programs

| Funding Request | FY 2010 | FY 2011 | Biennium |
|----------------------|------------------|------------------|------------------|
| Total (All Funds) | \$ 30,237,059 | \$ 29,861,443 | \$ 60,098,502 |
| Method of Financing: | | | |
| General Revenue | 12,500,000 | 12,500,000 | 25,000,000 |
| Other Funds | | | |
| Federal Funds | 17,737,059 | 17,361,443 | 35,098,502 |
| Number of FTEs | - | - | |

Number of FTEs

This request would increase funding for the additional payments to children hospitals authorized in the Upper Payment Limit Program. This funding would be a 100 percent increase over the current UPL payments made to Children's Hospitals. The Medicaid Upper Payment Limit is defined in Federal regulations as the difference between what Medicaid actually paid for a service and what Medicare would have paid for the same service.

| Program Impact | FY 2010 | FY 2011 | |
|----------------|---------|---------|--|
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Restore a State-Supported Graduate Medical Education Program

| Funding Request | FY 2010 | FY 2011 | Biennium |
|----------------------|-------------------|-------------------|-------------------|
| Total (All Funds) | \$ 120,948,234 | \$ 119,445,772 | \$ 240,394,006 |
| Method of Financing: | | | |
| General Revenue | 50,000,000 | 50,000,000 | 100,000,000 |
| Other Funds | | | |
| Federal Funds | 70,948,234 | 69,445,772 | 140,394,006 |
| Number of FTEs | - | - | |

Number of FTEs

This funding request would support a state-funded Graduate Medical Education (GME) Program for Medicaid in teaching hospitals which operate approved medical residency training programs. These teaching hospitals provide physician training, care for the uninsured, conduct medical research, provide highly specialized services, and educate other medical students, nurses and other healthcare professionals. Medicaid GME payments recognize the higher cost incurred by teaching hospitals.

| Program Impact | FY 2010 | FY 2011 | |
|----------------|---------|---------|--|
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