

ACTUAL PERFORMANCE FOR OUTPUT/EFFICIENCY MEASURES
539 - AGING & DISABILITY SERVICES
FISCAL YEAR
1/17/2006

Actual Performance for Output/Efficiency Measures with Updates
 79th Regular Session, Performance Reporting
 Automated Budget and Evaluation System of Texas (ABEST)

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Output Measures

1-1-1 INTAKE AND ACCESS

5 AVG CONSUMERS: MR ASSESS/COORD

Quarter 1	11,490.00	8,327.00	8,327.00	72.47 % *
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Explanation of Variance: The number of consumers reported as served in Q1 is low due to the timing between the quarter closing and report submission. Centers are allowed 90 days from the last day of the quarter to adjust their numbers.

1-1-2 LTC FUNCTIONAL ELIGIBILITY

1 NUMBER ELIGIBLE: COMMUNITY CARE

Quarter 1	188,218.00	169,127.00	169,127.00	89.86 % *
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Explanation of Variance: The variance is a result of a combination of factors resulting from reductions in the Primary Home Care growth rate as well as zero growth in Community Attendant Services. First quarter data indicate that the Medicaid Estate Recovery program (MERP) may be impacting enrollment in these services. Beginning January 2006, DADS staff are re-contacting those individuals who have declined services, re-explaining MERP, and offering them an opportunity to enroll.

4 # GUARDIANSHIP CLIENTS

Quarter 1	873.00	859.00	859.00	98.40 %
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1-2-1 PRIMARY HOME CARE

1 AVG #: PRIMARY HOME CARE

* Varies by 5% or more from target.

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1 AVG #: PRIMARY HOME CARE

Quarter 1	68,904.00	63,837.00	63,837.00	92.65 % *
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Explanation of Variance: There has been a slowdown in the rate of caseload growth in Primary Home Care as well as a flattening of caseload growth for Community Attendant Services (CAS). This slowdown began around March 2005, which is the month in which the Medicaid Estate Recovery Program (MERP) was implemented. First quarter figures indicate that MERP may be impacting enrollment in services. Beginning January 2006, DADS staff are re-contacting those individuals who have declined services due to MERP, re-explaining MERP, and offering them an opportunity to enroll.

1-2-2 COMMUNITY ATTENDANT SERVICES

1 AVG #: COMMUNITY ATTENDANT SER

Quarter 1	49,206.00	44,861.00	44,861.00	91.17 % *
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Explanation of Variance: Caseloads for CAS have not increased as anticipated in FY 2006. Caseloads have remained relatively flat since March 2005, which is the month in which the Medicaid Estate Recovery Program (MERP) was implemented. First quarter figures indicate that MERP may be impacting enrollment in services.

1-2-3 DAY ACTIVITY & HEALTH SERVICES

1 NUMBER OF CLIENTS: DAY ACTIVITY

Quarter 1	18,937.00	18,575.00	18,575.00	98.09 %
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1-3-1 COMMUNITY-BASED ALTERNATIVES

1 NUMBER OF CLIENTS: CBA WAIVER

* Varies by 5% or more from target.

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1 NUMBER OF CLIENTS: CBA WAIVER

Quarter 1	26,867.00	25,412.00	25,412.00	94.58 % *
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Explanation of Variance: Although staff have contacted a significant number of persons on the interest list for this program during the first quarter of FY 2006, new enrollments have occurred more slowly than anticipated, in part due to the implementation of MERP. Beginning January 2006, DADS staff are re-contacting those individuals who have declined services due to MERP, re-explaining MERP, and offering them an opportunity to enroll.

1-3-2 HOME AND COMMUNITY-BASED SERVICES

1 NUMBER OF CLIENTS: HCS

Quarter 1	9,744.00	9,675.00	9,675.00	99.29 %
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1-3-3 COMMUNITY LIVING ASSISTANCE (CLASS)

1 NUMBER OF CLIENTS: CLASS WAIVER

Quarter 1	2,228.00	1,760.00	1,760.00	78.99 % *
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Explanation of Variance: The FY 2006 appropriations provided for a 22.6% increase above FY 2005 in the monthly average number of persons served in CLASS. Although a significant number of persons on the CLASS interest list were contacted during the first quarter of FY 2006, new enrollments have occurred more slowly than anticipated. DADS is currently reviewing its enrollment processes and procedures.

1-3-4 DEAF-BLIND MULTIPLE DISABILITIES

1 NUMBER OF CLIENTS: DBMD WAIVER

Quarter 1	148.00	136.00	136.00	91.89 % *
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Explanation of Variance: Although a significant number of persons on the DBMD interest list were contacted during the first quarter of FY 2006, new enrollments have occurred more slowly than anticipated. DADS is currently reviewing its enrollment processes and procedures.

1-3-5 MEDICALLY DEPENDENT CHILDREN PGM

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1 NUMBER OF CLIENTS: MDCP WAIVER

Quarter 1	1,320.00	902.00	902.00	68.33 % *
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Explanation of Variance: The FY 2006 appropriations provided for a 34.3% increase above FY 2005 in the monthly average number of persons served in MDCP. Although staff have contacted a significant number of persons on the MDCP interest list during the first quarter of FY 2006, new enrollments have occurred more slowly than anticipated. DADS is currently reviewing its enrollment processes and procedures.

1-3-7 TEXAS HOME LIVING WAIVER

1 AVG #: TX HOME LIVING WAIVER

Quarter 1	2,811.00	1,895.00	1,895.00	67.41 % *
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Explanation of Variance: Enrollments in TxHmL are lower than expected, due to consumers who are coming up on the HCS waiting list and opting out of the program. Further, the rollout of TxHmL slots is occurring at a slower rate than anticipated.

1-4-1 NON-MEDICAID SERVICES-TITLE XX

1 AVG #: NON MEDICAID CC (XX)

Quarter 1	12,952.00	13,418.00	13,418.00	103.60 %
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1-4-3 MR COMMUNITY SERVICES

1 AVG #: MR COMMUNITY SERVICES

Quarter 1	10,137.00	9,794.00	9,794.00	96.62 %
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1-4-4 MR COMMUNITY SERVICES RESIDENTIAL

1 AVG #: NON MEDICAID RESIDENTIA

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1 AVG #: NON MEDICAID RESIDENTIA

Quarter 1	95.00	82.00	82.00	86.32 % *
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Explanation of Variance: The decrease in number of consumers is due to the refinancing of clients into the waiver programs and transfers to other programs.

1-4-6 NUTRITION SERVICES

2 # MEALS: CONGREGATE

Quarter 1	3,963,660.00	756,673.88	756,673.88	19.09 % *
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Explanation of Variance: The number of meals purchased is slightly lower than projected for the first quarter due to limited funding. The majority of fiscal year funds for this program have not been awarded to the state by the Administration on Aging. The Department anticipates the number of meals purchased to increase when additional funding is received.

4 # MEALS: HOME-DELIVERED

Quarter 1	4,173,305.00	891,195.04	891,195.04	21.35 %
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1-4-8 IN-HOME AND FAMILY SUPPORT

1 NUMBER OF CLIENTS: IHFS

Quarter 1	3,364.00	3,597.00	3,597.00	106.93 % *
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Explanation of Variance: The average number of clients served is an estimate. There has been an increase in the average monthly number of clients receiving IHFS due to the lower than anticipated average cost.

1-4-9 MENTAL RETARDATION IN-HOME SERVICES

1 # CONSUMERS: MR RECEIVING IHFS

* Varies by 5% or more from target.

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Output Measures

1 # CONSUMERS: MR RECEIVING IHFS

Quarter 1	2,674.00	1,765.00	1,765.00	66.01 % *
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Explanation of Variance: Each community center is required to develop a plan for the fiscal year that identifies the number of qualified persons to whom MR in-home and family support services will be provided during the year. Centers have until the end of the second quarter to submit these plans. As these plans are being developed some clients are approved to receive services, and at this time their annual grant amount is also determined. Consequently, fewer clients will be served during the first quarter, with the number of clients served continuing to increase throughout the fiscal year.

1-5-1 ALL-INCLUSIVE CARE - ELDERLY (PACE)

1 AVG #: RECEIPIENTS (PACE)

Quarter 1	877.00	910.00	910.00	103.76 %
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1-6-1 NURSING FACILITY PAYMENTS

1 # OF PERSONS: MEDICAID NURSING FAC

Quarter 1	59,764.00	58,800.00	58,800.00	98.39 %
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1-6-2 MEDICARE SKILLED NURSING FACILITY

1 # CLIENTS: NURSING FAC COPAY

Quarter 1	6,486.00	5,604.00	5,604.00	86.40 % *
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Explanation of Variance: Historically, we have experienced seasonality in the number of persons served in this program. We expect the annual average to be within tolerance.

1-6-3 HOSPICE

1 NUMBER OF HOSPICE CLIENTS

* Varies by 5% or more from target.

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Output Measures				
1 NUMBER OF HOSPICE CLIENTS				
Quarter 1	4,916.00	4,869.00	4,869.00	99.04 %
<u>1-6-4 PROMOTING INDEPENDENCE SERVICES</u>				
1 AVG #: PROMOTING INDEPENDENCE				
Quarter 1	4,098.00	4,638.00	4,638.00	113.18 % *
<u>Explanation of Variance:</u> A rapid rate of growth was experienced in this program during FY 2005. By August 2005, the number of persons served (4,292) had already exceeded the target for FY 2006. During the FY 2006-2007 legislative session, the department submitted revised estimates for FY 2006 and FY 2007, but the target values were not revised from earlier projections.				
<u>1-7-1 INTERMEDIATE CARE FACILITIES - MR</u>				
1 AVG #: IN ICF/MR BEDS PER MTH				
Quarter 1	7,308.00	6,736.00	6,736.00	92.17 % *
<u>Explanation of Variance:</u> The number of clients in Community ICF/MR is declining due to facility closures and consumers transferring to HCS.				
<u>1-8-1 MR STATE SCHOOLS SERVICES</u>				
1 AVG MTHLY # MR CAMPUS RESIDENT				
Quarter 1	5,007.00	4,966.00	4,966.00	99.18 %
<u>2-1-1 LTC FACILITY REGULATION</u>				
9 TOTAL AMOUNT COLLECTED FROM FINES				

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Output Measures				
9 TOTAL AMOUNT COLLECTED FROM FINES				
Quarter 1	3,681,452.48	385,377.57	385,377.57	10.47 % *
<u>Explanation of Variance:</u> DADS does not control this measure. Facilities may delay payment of the full penalty by requesting a hearing. In addition, once a hearing is requested, facilities may successfully negotiate payment of a lesser penalty amount or, after a hearing, a judge may order a lesser penalty amount.				
<u>2-1-2 LTC CREDENTIALING</u>				
1 LICENSES ISSUED/YR: NURS FAC ADMINS				
Quarter 1	980.00	194.00	194.00	19.80 % *
<u>Explanation of Variance:</u> The number of licenses issued/renewed is dependent upon the number of individuals having, or continuing, an interest in the field of nursing facility administration. Nationally, the number of people seeking and renewing this license is declining. The state of Texas trends are also reflecting this decline.				
Efficiency Measures				
<u>1-2-1 PRIMARY HOME CARE</u>				
1 AVG COST: PRIMARY HOME CARE				
Quarter 1	642.07	620.84	620.84	96.69 %
<u>1-2-2 COMMUNITY ATTENDANT SERVICES</u>				
1 AVG COST: COMMUNITY ATTENDANT				
Quarter 1	627.41	607.03	607.03	96.75 %
<u>1-2-3 DAY ACTIVITY & HEALTH SERVICES</u>				

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Efficiency Measures				
1 AVG COST: DAHS				
Quarter 1	481.92	481.89	481.89	99.99 %
<u>1-3-1 COMMUNITY-BASED ALTERNATIVES</u>				
1 COST/CLIENT: CBA WAIVER				
Quarter 1	1,387.04	1,280.89	1,280.89	92.35 % *
<u>Explanation of Variance:</u> Historically, we have experienced seasonality in the average cost of this program. We expect the annual average to be within tolerance.				
<u>1-3-2 HOME AND COMMUNITY-BASED SERVICES</u>				
1 COST PER CLIENT: HCS				
Quarter 1	3,500.77	3,209.00	3,209.00	91.67 % *
<u>Explanation of Variance:</u> The average cost is lower because the appropriation included funds for the Quality Assurance Fee (QAF). However the QAF has yet to be approved.				
<u>1-3-3 COMMUNITY LIVING ASSISTANCE (CLASS)</u>				
1 COST/CLIENT: CLASS WAIVER				
Quarter 1	3,293.61	3,077.19	3,077.19	93.43 % *
<u>Explanation of Variance:</u> The target value for this program assumed the implementation of a Quality Assurance Fee (QAF) for CLASS, which has not yet been approved by Federal CMS. Without QAF funding, the target value would have been \$3021.28. We are at 101.9% of what the target would have been excluding QAF.				
<u>1-3-4 DEAF-BLIND MULTIPLE DISABILITIES</u>				

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Efficiency Measures				
1 COST/CLIENT: DBMD				
Quarter 1	3,671.62	3,765.58	3,765.58	102.56 %
<u>1-3-5 MEDICALLY DEPENDENT CHILDREN PGM</u>				
1 COST/CLIENT: MDCP WAIVER				
Quarter 1	1,419.96	1,304.67	1,304.67	91.88 % *
<u>Explanation of Variance:</u> Historically, we have experienced seasonality in the average cost of this program. We expect the annual average to be within tolerance.				
<u>1-3-7 TEXAS HOME LIVING WAIVER</u>				
1 AVG CST: TX HOME LIVING WAIVER				
Quarter 1	586.62	381.00	381.00	64.95 % *
<u>Explanation of Variance:</u> It was initially assumed that Individual Plans of Care would gradually increase as clients began utilizing more services. However, this has yet to occur. The Tx Home Living Program is still a relatively new program so only limited information is available on which to base projections.				
<u>1-4-1 NON-MEDICAID SERVICES-TITLE XX</u>				
1 AVG COST: NON MEDICAID CC (XX)				
Quarter 1	486.30	451.49	451.49	92.84 % *
<u>Explanation of Variance:</u> The service mix of persons served has changed. A higher proportion of clients are receiving low-cost services such as Meals, and Emergency Response Services. Therefore, the average cost per client has decreased. This has allowed us to serve more clients.				
<u>1-4-4 MR COMMUNITY SERVICES RESIDENTIAL</u>				
1 AVG CST: NON MEDICAID RESIDENT				

* Varies by 5% or more from target.

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Efficiency Measures				
1 AVG CST: NON MEDICAID RESIDENT				
Quarter 1	3,431.00	2,942.00	2,942.00	85.75 % *
<u>Explanation of Variance:</u> The decrease in average cost is due to transferring consumers with higher costs out to other programs.				
<u>1-4-8 IN-HOME AND FAMILY SUPPORT</u>				
1 COST PER MONTH: IHFS CLIENT				
Quarter 1	102.19	77.85	77.85	76.18 % *
<u>Explanation of Variance:</u> The average monthly cost per client is lower than anticipated because only a portion of the maximum amount available per client has been claimed in the first quarter. The cost per client is expected to be more on target in the second quarter.				
<u>1-4-9 MENTAL RETARDATION IN-HOME SERVICES</u>				
1 AVG GRANT: PER CONSUMER INFS				
Quarter 1	1,690.19	2,056.28	2,056.28	121.66 % *
<u>Explanation of Variance:</u> At the beginning of the fiscal year, each center is allocated a specific amount of money for MR in-home and family support services. Each center is then required to develop a plan that identifies the number of qualified persons they intend to serve and the anticipated amount of each client's grant. Each of the centers plan must be within their allocated funding amounts. Client grants vary depending on the individual's needs, income and application of a sliding co-pay scale. The maximum grant amount per client is \$2,500 per year.				
<u>1-5-1 ALL-INCLUSIVE CARE - ELDERLY (PACE)</u>				
1 AVG CST: PER RECEIPIENT (PACE)				
Quarter 1	2,334.05	2,342.19	2,342.19	100.35 %
<u>1-6-1 NURSING FACILITY PAYMENTS</u>				

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3 NET PAYMENT: NURSING HOME

Quarter 1	2,869.01	2,261.68	2,261.68	78.83 % *
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Explanation of Variance: The targeted value assumes a rate increase related to implementing a Quality Assurance Fund (QAF) for nursing facilities (NF). The legislation authorizing an NF QAF was vetoed. Without QAF funding, the revised target would have been \$2286.98. We are at 98.9% of the target excluding QAF.

1-6-2 MEDICARE SKILLED NURSING FACILITY

1 NET COPAYMENT: NURSING HOME

Quarter 1	1,623.61	1,562.99	1,562.99	96.27 %
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1-6-3 HOSPICE

1 NET PAYMENT: HOSPICE

Quarter 1	2,419.45	2,143.91	2,143.91	88.61 % *
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Explanation of Variance: The targeted value assumes a rate increase related to implementing a Quality Assurance Fund (QAF) for nursing facilities (NF). The legislation authorizing an NF QAF was vetoed. Without QAF funding, the revised target would have been \$2157.46. We are at 99.4% of the target excluding QAF.

1-6-4 PROMOTING INDEPENDENCE SERVICES

1 AVG COST: PROMOTE INDEPENDENCE

Quarter 1	1,387.04	1,296.17	1,296.17	93.45 % *
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Explanation of Variance: Historically, we have experienced seasonality in the average cost of this program. We expect the annual average to be within tolerance.

1-7-1 INTERMEDIATE CARE FACILITIES - MR

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1 COST: ICF/MR MEDICAID CONSUMER

Quarter 1	4,384.91	4,128.00	4,128.00	94.14 % *
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Explanation of Variance: The average cost per client in Community ICF/MR is declining due to facility closures and consumers transferring to HCS. The resulting client mix yields a lower average cost.

1-8-1 MR STATE SCHOOLS SERVICES

1 AVG MTHLY CST MR CAMPUS RES

Quarter 1	6,502.65	7,166.54	7,166.54	110.21 % *
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Explanation of Variance: The increase in average monthly cost per MR campus resident is attributable to the Legislative salary increase and increasing costs related to inflationary items (i.e. utilities, drugs, etc).

* Varies by 5% or more from target.