

ACTUAL PERFORMANCE FOR OUTPUT/EFFICIENCY MEASURES
539 - AGING & DISABILITY SERVICES
FISCAL YEAR
1/12/2007

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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Agency code: 539

Agency name: AGING & DISABILITY SERVICES

Type/Strategy/Measure	2007 Target	2007 Actual	2007 YTD	Percent of Annual Target	Target Range
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Output Measures

1-1-1 INTAKE AND ACCESS

5 AVG CONSUMERS: MR ASSESS/COORD

Quarter 1	11,490.00	10,915.00	10,915.00	95.00 % *	10,915.50 - 12,064.50
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Explanation of Variance: Number of consumers served in Q1 is usually low due to timing between quarter closed and final submission. The centers are allowed 90 days from last day of quarter closed to adjust number of consumers.

1-1-2 LTC FUNCTIONAL ELIGIBILITY

1 NUMBER ELIGIBLE: COMMUNITY CARE

Quarter 1	202,744.00	173,929.00	173,929.00	85.79 % *	192,606.80 - 212,881.20
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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 decline in caseload for Community Attendant Services (CAS). This slowdown/decline began around March 2005, which is the month in which the Medicaid Estate Recovery Program (MERP) was implemented.

4 # GUARDIANSHIP CLIENTS

Quarter 1	1,187.00	1,019.00	1,019.00	85.85 % *	1,127.65 - 1,246.35
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Explanation of Variance: The numbers for Guardianship are trending up. Program is monitoring achievement of this target for the year. Program is looking for anomalies within the data.

1-2-1 PRIMARY HOME CARE

1 AVG #: PRIMARY HOME CARE

Quarter 1	74,749.00	65,160.00	65,160.00	87.17 % *	71,011.55 - 78,486.45
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Explanation of Variance: There has been a slowdown in the rate of caseload growth in Primary Home Care. This slowdown began around March 2005, which is the month in which the Medicaid Estate Recovery Program (MERP) was implemented.

* Varies by 5% or more from target.

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Output Measures					
<u>1-2-2 COMMUNITY ATTENDANT SERVICES</u>					
1 AVG #: COMMUNITY ATTENDANT SER					
Quarter 1	53,156.00	42,166.00	42,166.00	79.33 % *	50,498.20 - 55,813.80
<u>Explanation of Variance:</u> Caseloads for CAS have not increased as anticipated in FY 2007. Caseloads have actually declined since March 2005, which is the month in which the Medicaid Estate Recovery Program (MERP) was implemented. Data to date indicate that MERP may be impacting enrollment in services.					
<u>1-2-3 DAY ACTIVITY & HEALTH SERVICES</u>					
1 NUMBER OF CLIENTS: DAY ACTIVITY					
Quarter 1	19,969.00	18,863.00	18,863.00	94.46 % *	18,970.55 - 20,967.45
<u>Explanation of Variance:</u> The caseload trends are down slightly for this service.					
<u>1-3-1 COMMUNITY-BASED ALTERNATIVES</u>					
1 NUMBER OF CLIENTS: CBA WAIVER					
Quarter 1	28,401.00	29,502.00	29,502.00	103.88 %	26,980.95 - 29,821.05
<u>1-3-2 HOME AND COMMUNITY-BASED SERVICES</u>					
1 NUMBER OF CLIENTS: HCS					
Quarter 1	11,194.00	11,392.00	11,392.00	101.77 %	10,634.30 - 11,753.70
<u>1-3-3 COMMUNITY LIVING ASSISTANCE (CLASS)</u>					
1 NUMBER OF CLIENTS: CLASS WAIVER					

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Output Measures

1 NUMBER OF CLIENTS: CLASS WAIVER

Quarter 1	3,049.00	2,746.00	2,746.00	90.06 % *	2,896.55 - 3,201.45
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Explanation of Variance: The FY 2007 appropriations provided for a 36.8% increase above FY 2006 in the monthly average number of persons served in CLASS. The appropriations assumed that the new enrollments would occur gradually during the year. Based upon enrollments to date, the department is on track to achieve this target.

1-3-4 DEAF-BLIND MULTIPLE DISABILITIES

1 NUMBER OF CLIENTS: DBMD WAIVER

Quarter 1	156.00	130.00	130.00	83.33 % *	148.20 - 163.80
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Explanation of Variance: Although a significant number of persons on the DBMD interest list were contacted during the first half 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

1 NUMBER OF CLIENTS: MDCP WAIVER

Quarter 1	1,993.00	1,127.00	1,127.00	56.55 % *	1,893.35 - 2,092.65
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Explanation of Variance: The FY 2007 appropriations provided for a 102.7% 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, 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

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Output Measures					
1 AVG #: TX HOME LIVING WAIVER					
Quarter 1	2,823.00	1,865.00	1,865.00	66.06 % *	2,681.85 - 2,964.15
<u>Explanation of Variance:</u> 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.					
<u>1-4-1 NON-MEDICAID SERVICES-TITLE XX</u>					
1 AVG #: NON MEDICAID CC (XX)					
Quarter 1	12,952.00	14,477.00	14,477.00	111.77 % *	12,304.40 - 13,599.60
<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 DADS to serve more clients.					
<u>1-4-3 MR COMMUNITY SERVICES</u>					
1 AVG #: MR COMMUNITY SERVICES					
Quarter 1	10,137.00	10,344.00	10,344.00	102.04 %	9,630.15 - 10,643.85
<u>1-4-4 MR COMMUNITY SERVICES RESIDENTIAL</u>					
1 AVG #: NON MEDICAID RESIDENTIA					
Quarter 1	95.00	80.00	80.00	84.21 % *	90.25 - 99.75
<u>Explanation of Variance:</u> The decrease in number of consumers was due to refinancing into the waiver programs and transfers to other programs.					
<u>1-4-6 NUTRITION SERVICES</u>					
2 # MEALS: CONGREGATE					

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Output Measures					
2 # MEALS: CONGREGATE					
Quarter 1	3,941,792.00	796,682.41	796,682.41	20.21 %	788,358.40 - 1,182,537.60
4 # MEALS: HOME-DELIVERED					
Quarter 1	4,169,197.00	921,408.00	921,408.00	22.10 %	833,839.40 - 1,250,759.10
<u>1-4-8 IN-HOME AND FAMILY SUPPORT</u>					
1 NUMBER OF CLIENTS: IHFS					
Quarter 1	3,364.00	4,169.00	4,169.00	123.93 % *	3,195.80 - 3,532.20
<u>Explanation of Variance:</u> More clients are being served than projected due to additional funds received to serve clients on the interest lists.					
<u>1-4-9 MENTAL RETARDATION IN-HOME SERVICES</u>					
1 # CONSUMERS: MR RECEIVING IHFS					
Quarter 1	2,674.00	1,759.00	1,759.00	65.78 % *	2,540.30 - 2,807.70
<u>Explanation of Variance:</u> Each community center is required to develop a plan for number of qualified consumers and cost for this program. The plan will be submitted to DADS by end of Q2.					
<u>1-5-1 ALL-INCLUSIVE CARE - ELDERLY (PACE)</u>					
1 AVG #: RECEIPIENTS (PACE)					
Quarter 1	877.00	915.00	915.00	104.33 %	833.15 - 920.85
<u>1-6-1 NURSING FACILITY PAYMENTS</u>					

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Output Measures					
1 # OF PERSONS: MEDICAID NURSING FAC					
Quarter 1	60,172.00	57,984.00	57,984.00	96.36 %	57,163.40 - 63,180.60
<u>1-6-2 MEDICARE SKILLED NURSING FACILITY</u>					
1 # CLIENTS: NURSING FAC COPAY					
Quarter 1	6,831.00	6,122.00	6,122.00	89.62 % *	6,489.45 - 7,172.55
<u>Explanation of Variance:</u> Updated caseload trends indicate that the demand for this service has slowed.					
<u>1-6-3 HOSPICE</u>					
1 NUMBER OF HOSPICE CLIENTS					
Quarter 1	5,203.00	5,551.00	5,551.00	106.69 % *	4,942.85 - 5,463.15
<u>Explanation of Variance:</u> Updated caseload trends indicate that the demand for this service has increased.					
<u>1-6-4 PROMOTING INDEPENDENCE SERVICES</u>					
1 AVG #: PROMOTING INDEPENDENCE					
Quarter 1	4,756.00	5,156.00	5,156.00	108.41 % *	4,518.20 - 4,993.80
<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					

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Output Measures					
1 AVG #: IN ICF/MR BEDS PER MTH					
Quarter 1	7,308.00	6,845.00	6,845.00	93.66 % *	6,942.60 - 7,673.40
<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	5,011.00	4,916.00	4,916.00	98.10 %	4,760.45 - 5,261.55
<u>2-1-1 LTC FACILITY REGULATION</u>					
9 TOTAL AMOUNT COLLECTED FROM FINES					
Quarter 1	3,681,452.48	424,429.83	424,429.83	11.53 % *	736,290.50 - 1,104,435.74
<u>Explanation of Variance:</u> DADS does not control this measure. The facility may delay payment of the full penalty by requesting a hearing. In addition, once a hearing is requested, the facility 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	1,220.00	278.00	278.00	22.79 %	244.00 - 366.00

Efficiency Measures

1-2-1 PRIMARY HOME CARE

1 AVG COST: PRIMARY HOME CARE

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Efficiency Measures					
1 AVG COST: PRIMARY HOME CARE					
Quarter 1	649.06	628.74	628.74	96.87 %	616.61 - 681.51
<u>1-2-2 COMMUNITY ATTENDANT SERVICES</u>					
1 AVG COST: COMMUNITY ATTENDANT					
Quarter 1	634.25	614.87	614.87	96.94 %	602.54 - 665.96
<u>1-2-3 DAY ACTIVITY & HEALTH SERVICES</u>					
1 AVG COST: DAHS					
Quarter 1	491.61	480.37	480.37	97.71 %	467.03 - 516.19
<u>1-3-1 COMMUNITY-BASED ALTERNATIVES</u>					
1 COST/CLIENT: CBA WAIVER					
Quarter 1	1,430.82	1,308.46	1,308.46	91.45 % *	1,359.28 - 1,502.36
<p><u>Explanation of Variance:</u> Historically, CBA has experienced an upward trend in the average cost per client which was primarily the result of increased usage of Personal Assistance Service hours. The average cost per client increased by 5.6% in FY 2003 (over FY 2002) and by 3.8% in FY 2004. For the FY 2006-2007 appropriations, the cost trend for FY 2005 was estimated to be 3.1%, and this trend was assumed to continue through FY 2006-2007. However, the actual increase in FY 2005 was only 1.0%, and the experience for FY 2006 as well as FY 2007 to date shows a reduction in the average cost per client from FY 2005.</p>					
<u>1-3-2 HOME AND COMMUNITY-BASED SERVICES</u>					
1 COST PER CLIENT: HCS					

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1 COST PER CLIENT: HCS					
Quarter 1	3,501.50	3,205.00	3,205.00	91.53 % *	3,326.43 - 3,676.58
<u>Explanation of Variance:</u> The appropriated amount of \$3,501.50 assumed funding of the QAF in the waiver. This has not materialized.					
<u>1-3-3 COMMUNITY LIVING ASSISTANCE (CLASS)</u>					
1 COST/CLIENT: CLASS WAIVER					
Quarter 1	3,394.47	2,717.82	2,717.82	80.07 % *	3,224.75 - 3,564.19
<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 \$3122.05. This revised target assumed a 3.3% annual increase in cost per client as the result of changes in patient care mix. We are only at 87.1% of what the target would have been excluding QAF. The expected increase in cost per client has not materialized. In fact, the average cost per client has trended downward.					
<u>1-3-4 DEAF-BLIND MULTIPLE DISABILITIES</u>					
1 COST/CLIENT: DBMD					
Quarter 1	3,671.62	3,738.56	3,738.56	101.82 %	3,488.04 - 3,855.20
<u>1-3-5 MEDICALLY DEPENDENT CHILDREN PGM</u>					
1 COST/CLIENT: MDCP WAIVER					
Quarter 1	1,419.96	1,239.58	1,239.58	87.30 % *	1,348.96 - 1,490.96
<u>Explanation of Variance:</u> Historically, the average cost per MDCP client has remained fairly constant from year to year. However, beginning in FY 2005 we began to see a downward trend in the average cost per client which was continued through the FY 2006-2007 biennium. Staff are currently analyzing data to determine possible reasons for this phenomenon.					

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Efficiency Measures

1-3-7 TEXAS HOME LIVING WAIVER

1 AVG CST: TX HOME LIVING WAIVER

Quarter 1	586.62	449.00	449.00	76.54 % *	557.29 - 615.95
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Explanation of Variance: Average cost per client in TxHmL is proving to be lower than initially projected. The anticipation of increasing average cost has yet to occur.

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

1 AVG COST: NON MEDICAID CC (XX)

Quarter 1	486.30	451.78	451.78	92.90 % *	461.99 - 510.62
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Explanation of Variance: 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 DADS to serve more clients.

1-4-4 MR COMMUNITY SERVICES RESIDENTIAL

1 AVG CST: NON MEDICAID RESIDENT

Quarter 1	3,431.00	3,401.00	3,401.00	99.13 %	3,259.45 - 3,602.55
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1-4-8 IN-HOME AND FAMILY SUPPORT

1 COST PER MONTH: IHFS CLIENT

Quarter 1	102.19	71.90	71.90	70.36 % *	97.08 - 107.30
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Explanation of Variance: The average monthly cost per client is significantly lower than projected. Payments for subsidies are made after the client submits a request for payment. Clients may submit payment requests at any time, a facet of the program over which DADS has no control.

1-4-9 MENTAL RETARDATION IN-HOME SERVICES

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Efficiency Measures					
1 AVG GRANT: PER CONSUMER INFS					
Quarter 1	1,690.19	2,038.40	2,038.40	120.60 % *	1,605.68 - 1,774.70
<u>Explanation of Variance:</u> Each community center is required to develop a plan for number of qualified consumers and cost for this program. The plan will be submitted to DADS by end of Q2.					
<u>1-5-1 ALL-INCLUSIVE CARE - ELDERLY (PACE)</u>					
1 AVG CST: PER RECEIPIENT (PACE)					
Quarter 1	2,334.05	2,340.40	2,340.40	100.27 %	2,217.35 - 2,450.75
<u>1-6-1 NURSING FACILITY PAYMENTS</u>					
3 NET PAYMENT: NURSING HOME					
Quarter 1	2,869.68	2,566.79	2,566.79	89.45 % *	2,726.20 - 3,013.16
<u>Explanation of Variance:</u> 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 \$2268.12. We are at 113.2.% of the target excluding QAF. This variance reflects the fact that we gave an 11.75% rate increase to Medicaid nursing facilities effective January 1, 2006.					
<u>1-6-2 MEDICARE SKILLED NURSING FACILITY</u>					
1 NET COPAYMENT: NURSING HOME					
Quarter 1	1,701.44	1,674.53	1,674.53	98.42 %	1,616.37 - 1,786.51
<u>1-6-3 HOSPICE</u>					
1 NET PAYMENT: HOSPICE					

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1 NET PAYMENT: HOSPICE					
Quarter 1	2,443.11	2,367.83	2,367.83	96.92 %	2,320.95 - 2,565.27
<u>1-6-4 PROMOTING INDEPENDENCE SERVICES</u>					
1 AVG COST: PROMOTE INDEPENDENCE					
Quarter 1	1,430.82	1,317.52	1,317.52	92.08 % *	1,359.28 - 1,502.36
<u>Explanation of Variance:</u> Clients in this program are primarily receiving CBA services. Historically, CBA has experienced an upward trend in the average cost per client which was primarily the result of increased usage of Personal Assistance Service hours. The average cost per client increased by 5.6% in FY 2003 (over FY 2002) and by 3.8% in FY 2004. For the FY 2006-2007 appropriations, the cost trend for FY 2005 was estimated to be 3.1%, and this trend was assumed to continue through FY 2006-2007. However, the actual increase in FY 2005 was only 1.0%, and the experience for FY 2006 as well as FY 2007 to date shows a slight reduction in costs from FY 2005.					
<u>1-7-1 INTERMEDIATE CARE FACILITIES - MR</u>					
1 COST: ICF/MR MEDICAID CONSUMER					
Quarter 1	4,384.91	4,173.00	4,173.00	95.17 %	4,165.66 - 4,604.16
<u>1-8-1 MR STATE SCHOOLS SERVICES</u>					
1 AVG MTHLY CST MR CAMPUS RES					
Quarter 1	6,530.70	7,969.07	7,969.07	122.02 % *	6,204.17 - 6,857.24
<u>Explanation of Variance:</u> The increase in average monthly cost per MR campus resident is attributable to the Legislative salary increase and increasing cost related to inflationary items (i.e.utilities, drugs, etc).					

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