

FY 2008-2009 Key Measures List

| Reference | Measure |
|------------------|---|
| 1.1 oc 4 | Percent of long-term care clients served in community settings |
| 1.1.1 op 5 | Average monthly number of consumers with MR receiving assessment and service coordination |
| 1.2 oc 1 | Average number of clients served per month: Medicaid Non-waiver Community Services and Supports |
| 1.2.1 ef 1 | Average monthly cost per client served: Primary Home Care |
| 1.2.1 op 1 | Average number of clients served per month: Primary Home Care |
| 1.2.2 ef 1 | Average monthly cost per client served: Community Attendant Services |
| 1.2.2 op 1 | Average number of clients served per month: Community Attendant Services |
| 1.2.3 ef 1 | Average monthly cost per client served: Day Activity & Health Services |
| 1.2.3 op 1 | Average number of clients served per month: Day Activity & Health Services |
| 1.3.1 ef 1 | Average monthly cost per client served: Medicaid Community-based Alternatives (CBA) Waiver |
| 1.3.1 op 1 | Average number of clients served per month: Medicaid Community-based Alternatives (CBA) Waiver |
| 1.3.2 ef 1 | Average monthly cost per client served: Home & Community Based Services (HCS) Waiver |
| 1.3.2 op 1 | Average number of clients served per month: Home & Community Based Services (HCS) Waiver |
| 1.3.3 ef 1 | Average monthly cost per client served: Community Living Assistance & Support (CLASS) Waiver |
| 1.3.3 op 1 | Average number of clients served per month: Community Living Assistance & Support (CLASS) Waiver |
| 1.3.4 ef 1 | Average monthly cost per client served: Medicaid Deaf-blind with Multiple Disabilities Waiver |
| 1.3.4 op 1 | Average number of clients served per month: Medicaid Deaf-blind with Multiple Disabilities Waiver |
| 1.3.5 ef 1 | Average monthly cost per client served: Medically Dependent Children Program (MDCP) |
| 1.3.5 op 1 | Average number of clients served per month: Medically Dependent Children Program (MDCP) |
| 1.3.7 ef 1 | Average monthly cost per client served: Texas Home Living Waiver |
| 1.3.7 op 1 | Average number of clients served per month: Texas Home Living Waiver |
| 1.4.2 ef 1 | Average monthly cost per non-Medicaid customer with MR receiving community residential services |
| 1.4.2 op 2 | Average monthly number of consumers with MR receiving community services |
| 1.4.4 ef 1 | Average monthly cost of In-Home & Family Support per client (IHFS) |
| 1.4.4 op 1 | Average number of clients per month receiving In-home Family Support Services |
| 1.4.5 ef 1 | Average annual grant per consumer with MR receiving In-Home & Family Support per year |
| 1.4.5 op 1 | Number of consumers with MR receiving In-Home and Family Support per year |
| 1.5.1 ef 1 | Average monthly cost per recipient: Program for All Inclusive Care (PACE) |
| 1.5.1 op 1 | Average number of recipients per month: Program for All Inclusive Care (PACE) |
| 1.6.1 ef 3 | Net nursing facility cost per Medicaid resident per month |
| 1.6.1 op 1 | Average number of clients receiving Medicaid-funded nursing facility services per month |
| 1.6.2 ef 1 | Net payment per client for copaid Medicaid/Medicare nursing facility services per month |
| 1.6.2 op 1 | Average number of clients receiving Copaid Medicaid/Medicare nursing facility services per month |
| 1.6.3 ef 1 | Average net payment per client per month for Hospice |
| 1.6.3 op 1 | Average number of clients receiving Hospice services per month |
| 1.6.4 ef 1 | Average monthly cost per client served: Promoting Independence |
| 1.6.4 op 1 | Average number of Promoting Independence clients served per month |
| 1.7.1 ef 1 | Monthly cost per ICF/MR Medicaid eligible consumer: total |
| 1.7.1 op 1 | Average number of persons in ICF/MR Medicaid beds per month: total |
| 1.8.1 ef 1 | Average monthly cost per MR campus resident |
| 1.8.1 op 1 | Average monthly number of MR campus residents |
| 2.1 oc 1 | Percent of facilities complying with standards at time of inspection for licensure and/or Medicare/Medicaid certification |
| 2.1.1 op 9 | Total dollar amount collected from fines |
| 2.1.2 op 1 | Number of licenses issued or renewed per year: Nursing Facility Administrators |