

4.A. EXCEPTIONAL ITEM REQUEST SCHEDULE
 79th Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation System of Texas (ABEST)

DATE: 10/7/2004
 TIME: 10:33:11AM

Agency code: 539

Agency name: AGING AND DISABILITY SERVICES

CODE	DESCRIPTION	Excp 2006	Excp 2007
	Item Name: Rate Restoration to FY 2003		
	Item Priority: 6		
	Includes Funding for the Following Strategy or Strategies:		
	01-01-01 Intake and Access to Services and Support		
	01-02-01 Primary Home Care		
	01-02-02 Community Attendant Services (Formerly Frail Elderly)		
	01-02-03 Day Activity and Health Services (DAHS)		
	01-03-01 Community-based Alternatives (CBA)		
	01-03-02 Home and Community-based Services (HCS)		
	01-03-03 Community Living Assistance and Support Services (CLASS)		
	01-03-04 Deaf-Blind Multiple Disabilities (DBMD)		
	01-03-05 Medically Dependent Children Program (MDCP)		
	01-03-06 Consolidated Waiver Program		
	01-03-07 Texas Home Living Waiver		
	01-04-01 Non-Medicaid Services - Title XX		
	01-06-01 Nursing Facility and Hospice Payments		
	01-07-01 Intermediate Care Facilities - Mental Retardation		
OBJECTS OF EXPENSE:			
3001	CLIENT SERVICES	67,609,904	65,883,829
4000	GRANTS	108,102	108,212
	TOTAL, OBJECT OF EXPENSE	\$67,718,006	\$65,992,041
METHOD OF FINANCING:			
1	GENERAL REVENUE FUND	636,448	636,448
555	FEDERAL FUNDS		
93.778.003	XIX 50%	14,158	23,404
93.778.005	XIX FMAP	40,470,894	39,413,850
758	GR MATCH FOR MEDICAID	26,488,404	25,810,127
8032	GR CERTIFIED AS MATCH FOR MEDICAID	108,102	108,212
	TOTAL, METHOD OF FINANCING	\$67,718,006	\$65,992,041

DESCRIPTION / JUSTIFICATION:

0000296

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CODE DESCRIPTION

Excp 2006

Excp 2007

In the FY 2004-2005 Appropriations Act, provider rates for Nursing Facilities and ICF/MRs were reduced by 3.5% below FY 2003 levels, while rates for community service providers were reduced by 2.2% below FY 2003 levels. The subsequent release of one-time Fiscal Relief funding enabled the department to partially restore the rate reductions to 1.75% and 1.1%, respectively.

This Item requests funding to fully restore rates to FY 2003 levels.

EXTERNAL/INTERNAL FACTORS:

The service delivery system encompassed in the Department of Aging and Disability Services (DADS) is impacted by inflationary pressures inherent in the healthcare field. Failure to restore these funds will result in reduced quality or fewer consumers being served.

Because of the one-month deferral for August 2007 Nursing Facility payments, FY 06 represents 12 months of activity while FY 07 represents 11 months.

0000297

4.B. EXCEPTIONAL ITEMS STRATEGY ALLOCATION SCHEDULE
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DATE: 10/6/2004
 TIME: 1:28:51PM

Agency code: 539 Agency name: AGING AND DISABILITY SERVICES

	Excp 2006	Excp 2007
Item Name:	Rate Restoration to FY 2003	
Allocation to Strategy:	1-1-1 Intake and Access to Services and Support	
EFFICIENCY MEASURES:		
3 Avg Mthly Cost Per Consumer MR Receiving Assessment & Svc Coordination	1.80	1.80
OBJECTS OF EXPENSE:		
3001 CLIENT SERVICES	164,814	164,706
4000 GRANTS	108,102	108,212
TOTAL, OBJECT OF EXPENSE	\$272,916	\$272,918
METHOD OF FINANCING:		
555 FEDERAL FUNDS		
93.778.005 XIX FMAP	164,814	164,706
8032 GR CERTIFIED AS MATCH FOR MEDICAID	108,102	108,212
TOTAL, METHOD OF FINANCING	\$272,916	\$272,918

0000298

4.B. EXCEPTIONAL ITEMS STRATEGY ALLOCATION SCHEDULE
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	Excp 2006	Excp 2007
Item Name:		
Rate Restoration to FY 2003		
Allocation to Strategy:	1-2-1	Primary Home Care
EFFICIENCY MEASURES:		
1 Average Monthly Cost Per Client Served: Primary Home Care	7.08	7.08
OBJECTS OF EXPENSE:		
3001 CLIENT SERVICES	5,972,844	6,628,208
TOTAL, OBJECT OF EXPENSE	\$5,972,844	\$6,628,208
METHOD OF FINANCING:		
555 FEDERAL FUNDS		
93.778.005 XIX FMAP	3,604,611	4,000,124
758 GR MATCH FOR MEDICAID	2,368,233	2,628,084
TOTAL, METHOD OF FINANCING	\$5,972,844	\$6,628,208

4.B. EXCEPTIONAL ITEMS STRATEGY ALLOCATION SCHEDULE
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DATE: 10/6/2004
 TIME: 1:28:51PM

Agency code: 539 Agency name: AGING AND DISABILITY SERVICES

	Excp 2006	Excp 2007
Item Name:	Rate Restoration to FY 2003	
Allocation to Strategy:	1-2-2 Community Attendant Services (Formerly Frail Elderly)	
EFFICIENCY MEASURES:		
<u>1</u> Average Monthly Cost Per Client Served: Community Attendant Services	6.92	6.92
OBJECTS OF EXPENSE:		
3001 CLIENT SERVICES	4,139,911	4,597,376
TOTAL, OBJECT OF EXPENSE	\$4,139,911	\$4,597,376
METHOD OF FINANCING:		
555 FEDERAL FUNDS		
93.778.005 XIX FMAP	2,498,436	2,774,516
758 GR MATCH FOR MEDICAID	1,641,475	1,822,860
TOTAL, METHOD OF FINANCING	\$4,139,911	\$4,597,376

0000300

4.B. EXCEPTIONAL ITEMS STRATEGY ALLOCATION SCHEDULE
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Agency code: **539** Agency name: **AGING AND DISABILITY SERVICES**

	Excp 2006	Excp 2007
Item Name:		
Rate Restoration to FY 2003		
Allocation to Strategy:		
1-2-3 Day Activity and Health Services (DAHS)		
EFFICIENCY MEASURES:		
<u>1</u> Avg Monthly Cost Per Client Served: Day Activity and Health Services	5.23	5.23
OBJECTS OF EXPENSE:		
3001 CLIENT SERVICES	1,116,536	1,155,738
TOTAL, OBJECT OF EXPENSE	\$1,116,536	\$1,155,738
METHOD OF FINANCING:		
555 FEDERAL FUNDS		
93.778.005 XIX FMAP	673,829	697,488
758 GR MATCH FOR MEDICAID	442,707	458,250
TOTAL, METHOD OF FINANCING	\$1,116,536	\$1,155,738

0000301

4.B. EXCEPTIONAL ITEMS STRATEGY ALLOCATION SCHEDULE
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Agency code: **539** Agency name: **AGING AND DISABILITY SERVICES**

	Excp 2006	Excp 2007
Item Name: Rate Restoration to FY 2003		
Allocation to Strategy: 1-3-1 Community-based Alternatives (CBA)		
EFFICIENCY MEASURES:		
<u>1</u> Average Monthly Cost Per Client Medicaid CBA Waiver	14.14	14.14
OBJECTS OF EXPENSE:		
3001 CLIENT SERVICES	4,445,582	4,448,667
TOTAL, OBJECT OF EXPENSE	\$4,445,582	\$4,448,667
METHOD OF FINANCING:		
555 FEDERAL FUNDS		
93.778.003 XIX 50%	8,467	10,009
555 FEDERAL FUNDS		
93.778.005 XIX FMAP	2,672,689	2,672,689
758 GR MATCH FOR MEDICAID	1,764,426	1,765,969
TOTAL, METHOD OF FINANCING	\$4,445,582	\$4,448,667

0000302

4.B. EXCEPTIONAL ITEMS STRATEGY ALLOCATION SCHEDULE
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Agency code: **539** Agency name: **AGING AND DISABILITY SERVICES**

	Excp 2006	Excp 2007
Item Name:		
Rate Restoration to FY 2003		
Allocation to Strategy:		
1-3-2 Home and Community-based Services (HCS)		
EFFICIENCY MEASURES:		
<u>1</u> Avg Monthly Cost Per Client Served: Home & Community Based Services	30.53	30.53
OBJECTS OF EXPENSE:		
3001 CLIENT SERVICES	3,286,359	3,286,359
TOTAL, OBJECT OF EXPENSE	\$3,286,359	\$3,286,359
METHOD OF FINANCING:		
555 FEDERAL FUNDS		
93.778.005 XIX FMAP	1,984,632	1,983,318
758 GR MATCH FOR MEDICAID	1,301,727	1,303,041
TOTAL, METHOD OF FINANCING	\$3,286,359	\$3,286,359

4.B. EXCEPTIONAL ITEMS STRATEGY ALLOCATION SCHEDULE

79th Regular Session, Agency Submission, Version 1

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Agency code: 539

Agency name: AGING AND DISABILITY SERVICES

	Excp 2006	Excp 2007
Item Name:	Rate Restoration to FY 2003	
Allocation to Strategy:	1-3-3 Community Living Assistance and Support Services(CLASS)	
EFFICIENCY MEASURES:		
1 Average Monthly Cost Per Client CLASS Waiver	30.96	30.96
OBJECTS OF EXPENSE:		
3001 CLIENT SERVICES	675,052	675,052
TOTAL, OBJECT OF EXPENSE	\$675,052	\$675,052
METHOD OF FINANCING:		
555 FEDERAL FUNDS		
93.778.005 XIX FMAP	407,394	407,394
758 GR MATCH FOR MEDICAID	267,658	267,658
TOTAL, METHOD OF FINANCING	\$675,052	\$675,052

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4.B. EXCEPTIONAL ITEMS STRATEGY ALLOCATION SCHEDULE
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Agency code: 539 Agency name: AGING AND DISABILITY SERVICES

	Excp 2006	Excp 2007
Item Name:		
Rate Restoration to FY 2003		
Allocation to Strategy:		
1-3-4 Deaf-Blind Multiple Disabilities (DBMD)		
EFFICIENCY MEASURES:		
<u>1</u> Average Monthly Cost Per Client: Deaf-Blind Waiver	39.79	39.79
OBJECTS OF EXPENSE:		
3001 CLIENT SERVICES	68,279	68,279
TOTAL, OBJECT OF EXPENSE	\$68,279	\$68,279
METHOD OF FINANCING:		
555 FEDERAL FUNDS		
93.778.005 XIX FMAP	41,206	41,206
758 GR MATCH FOR MEDICAID	27,073	27,073
TOTAL, METHOD OF FINANCING	\$68,279	\$68,279

4.B. EXCEPTIONAL ITEMS STRATEGY ALLOCATION SCHEDULE
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Agency code: 539 Agency name: **AGING AND DISABILITY SERVICES**

	Excp 2006	Excp 2007
Item Name: Rate Restoration to FY 2003		
Allocation to Strategy: 1-3-5 Medically Dependent Children Program (MDCP)		
EFFICIENCY MEASURES:		
<u>1</u> Average Monthly Cost Per Client: MDCP Waiver	15.53	15.53
OBJECTS OF EXPENSE:		
3001 CLIENT SERVICES	183,192	183,192
TOTAL, OBJECT OF EXPENSE	\$183,192	\$183,192
METHOD OF FINANCING:		
555 FEDERAL FUNDS		
93.778.005 XIX FMAP	110,556	110,556
758 GR MATCH FOR MEDICAID	72,636	72,636
TOTAL, METHOD OF FINANCING	\$183,192	\$183,192

4.B. EXCEPTIONAL ITEMS STRATEGY ALLOCATION SCHEDULE
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Agency code: 539 Agency name: AGING AND DISABILITY SERVICES

	Excp 2006	Excp 2007
Item Name: Rate Restoration to FY 2003		
Allocation to Strategy: 1-3-6 Consolidated Waiver Program		
EFFICIENCY MEASURES:		
<u>1</u> Average Monthly Cost Per Client: Consolidated Waiver (CWP)	17.62	17.62
OBJECTS OF EXPENSE:		
3001 CLIENT SERVICES	40,597	40,597
TOTAL, OBJECT OF EXPENSE	\$40,597	\$40,597
METHOD OF FINANCING:		
555 FEDERAL FUNDS		
93.778.005 XIX FMAP	24,500	24,500
758 GR MATCH FOR MEDICAID	16,097	16,097
TOTAL, METHOD OF FINANCING	\$40,597	\$40,597

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4.B. EXCEPTIONAL ITEMS STRATEGY ALLOCATION SCHEDULE
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Agency code: 539 Agency name: AGING AND DISABILITY SERVICES

	Excp 2006	Excp 2007
Item Name:		
Rate Restoration to FY 2003		
Allocation to Strategy:	1-3-7	Texas Home Living Waiver
EFFICIENCY MEASURES:		
1 Average Monthly Cost Per Client Served: Texas Home Living Waiver	7.39	7.39
OBJECTS OF EXPENSE:		
3001 CLIENT SERVICES	252,706	252,706
TOTAL, OBJECT OF EXPENSE	\$252,706	\$252,706
METHOD OF FINANCING:		
555 FEDERAL FUNDS		
93.778.005 XIX FMAP	152,609	152,508
758 GR MATCH FOR MEDICAID	100,097	100,198
TOTAL, METHOD OF FINANCING	\$252,706	\$252,706

0000308

4.B. EXCEPTIONAL ITEMS STRATEGY ALLOCATION SCHEDULE
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	Excp 2006	Excp 2007
Item Name:		
Rate Restoration to FY 2003		
Allocation to Strategy:		
1-4-1 Non-Medicaid Services - Title XX		
EFFICIENCY MEASURES:		
<u>1</u> Avg Monthly Cost Per Client Served: Non-Medicaid Community Care (XX)	4.25	4.25
OBJECTS OF EXPENSE:		
3001 CLIENT SERVICES	636,448	636,448
TOTAL, OBJECT OF EXPENSE	\$636,448	\$636,448
METHOD OF FINANCING:		
1 GENERAL REVENUE FUND	636,448	636,448
TOTAL, METHOD OF FINANCING	\$636,448	\$636,448

4.B. EXCEPTIONAL ITEMS STRATEGY ALLOCATION SCHEDULE
 79th Regular Session, Agency Submission, Version I
 Automated Budget and Evaluation System of Texas (ABEST)

DATE: 10/6/2004
 TIME: 1:28:51PM

Agency code: 539 Agency name: AGING AND DISABILITY SERVICES

	Excp 2006	Excp 2007
Item Name:	Rate Restoration to FY 2003	
Allocation to Strategy:	1-6-1	Nursing Facility and Hospice Payments
EFFICIENCY MEASURES:		
1 Average Daily Nursing Home Rate	1.71	1.71
3 Net Nursing Facility Cost Per Medicaid Resident Per Month	51.95	51.95
6 Average Net Payment Per Client Per Month for Hospice	37.37	37.37
7 Average Monthly Cost Per Client Served: Promoting Independence	14.14	14.14
OBJECTS OF EXPENSE:		
3001 CLIENT SERVICES	39,775,433	36,894,350
TOTAL, OBJECT OF EXPENSE	\$39,775,433	\$36,894,350
METHOD OF FINANCING:		
555 FEDERAL FUNDS		
93.778.003 XIX 50%	5,691	13,395
555 FEDERAL FUNDS		
93.778.005 XIX FMAP	23,997,604	22,249,572
758 GR MATCH FOR MEDICAID	15,772,138	14,631,383
TOTAL, METHOD OF FINANCING	\$39,775,433	\$36,894,350

0000310

4.B. EXCEPTIONAL ITEMS STRATEGY ALLOCATION SCHEDULE
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Agency code: **539** Agency name: **AGING AND DISABILITY SERVICES**

	Excp 2006	Excp 2007
Item Name:		
Rate Restoration to FY 2003		
Allocation to Strategy:	1-7-1	Intermediate Care Facilities - Mental Retardation
EFFICIENCY MEASURES:		
<u>1</u> Monthly Cost Per ICF/MR Medicaid Eligible Consumer	78.14	78.14
OBJECTS OF EXPENSE:		
3001 CLIENT SERVICES	6,852,151	6,852,151
TOTAL, OBJECT OF EXPENSE	\$6,852,151	\$6,852,151
METHOD OF FINANCING:		
555 FEDERAL FUNDS		
93.778.005 XIX FMAP	4,138,014	4,135,273
758 GR MATCH FOR MEDICAID	2,714,137	2,716,878
TOTAL, METHOD OF FINANCING	\$6,852,151	\$6,852,151

FEDERAL FUNDS SUPPORTING SCHEDULE - Exceptional Items

Agency Code: 539		Agency Name: Department of Aging and Disability Services	
Item #6	Rate Restoration to FY 2003	Requested	
CFDA No. & Strategy No.	CFDA Description & Strategy Description	2006	2007
93.778.003	Medical Assistance Program - Title XIX @ 50%		
01-03-01	Community Based Alternatives	8,467	10,009
01-06-01	Nursing Facility & Hospice Payments	5,691	13,395
	Total, All Strategies	14,158	23,404
93.778.005	Medical Assistance Program - Title XIX - FMAP		
01-01-01	Intake & Access	164,814	164,706
01-02-01	Primary Home Care	3,604,611	4,000,124
01-02-02	Community Attendant Services	2,498,436	2,774,516
01-02-03	Day Activity & Health Services	673,829	697,488
01-03-01	Community Based Alternatives	2,672,689	2,672,689
01-03-02	Home & Community Based Services	1,984,632	1,983,318
01-03-03	Community Living Assistance & Support Services	407,394	407,394
01-03-04	Deaf-Blind Multiple Disabilities	41,206	41,206
01-03-05	Medically Dependent Children Program	110,556	110,556
01-03-06	Consolidated Waiver Program	24,500	24,500
01-03-07	Texas Home Living Waiver	152,609	152,508
01-06-01	Nursing Facility & Hospice Payments	23,997,604	22,249,572
01-07-01	Intermediate Care Facilities - Mental Retardation	4,138,014	4,135,273
	Total, All Strategies	40,470,894	39,413,850
	Additional Federal Funds for Employee Benefits	0	0
	TOTAL, Federal Funds	40,485,052	39,437,254
	Additional General Revenue for Employee Benefits	0	0