

3.A. STRATEGY REQUEST
 79th Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation System of Texas (ABEST)

DATE: 10/7/2004
 TIME: 10:25:35AM

Agency code: **539** Agency name: **AGING AND DISABILITY SERVICES**

GOAL: 1 Long-term Care Continuum
 OBJECTIVE: 4 Community Care - State
 STRATEGY: 2 Non-Medicaid Services - General Revenue

Statewide Goal/Benchmark: 3 3
 Service Categories:
 Service: 26 Income: A.1 Age: B.3

CODE	DESCRIPTION	Exp 2003	Est 2004	Bud 2005	BL 2006	BL 2007
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)		\$8,700,139	\$1,086,644	\$1,120,959	\$1,120,959	\$1,120,959
Method of Financing:						
555 FEDERAL FUNDS						
	93.667.000 Social Svcs Block Grants	\$0	\$187,119	\$197,169	\$197,169	\$197,169
	93.778.000 Medical Assistance Program	\$0	\$0	\$117,393	\$117,393	\$117,393
	93.778.003 XIX 50%	\$1,067,691	\$1,062,216	\$1,120,960	\$1,120,960	\$1,120,960
CFDA Subtotal, Fund	555	\$1,067,691	\$1,249,335	\$1,435,522	\$1,435,522	\$1,435,522
SUBTOTAL, MOF (FEDERAL FUNDS)		\$1,067,691	\$1,249,335	\$1,435,522	\$1,435,522	\$1,435,522
Method of Financing:						
666 APPROPRIATED RECEIPTS						
		\$0	\$0	\$0	\$0	\$0
SUBTOTAL, MOF (OTHER FUNDS)		\$0	\$0	\$0	\$0	\$0
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)					\$2,556,481	\$2,556,481
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)		\$9,767,830	\$2,335,979	\$2,556,481	\$2,556,481	\$2,556,481
FULL TIME EQUIVALENT POSITIONS:		43.7	45.0	47.2	47.2	47.2

STRATEGY DESCRIPTION AND JUSTIFICATION:

This strategy includes staff who directly support the management of the following services: Primary Home Care, Community Attendant Services, Day Activity and Health Services, Community Based Alternatives, Community Living Assistance and Support Services, Medically Dependent Children's Waiver, Deaf-Blind Multiple Disabilities Waiver, Consolidated Waiver, and non-Medicaid services-Title XX.

Statutory Authority: Texas Human Resource Code §22.001

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STRATEGY:	2	Non-Medicaid Services - General Revenue	Service: 26	Income: A.1	Age: B.3

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EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

Achieving efficiencies in a large health care system without compromising the quality of services requires careful consideration by executive management. Care must be exercised to ensure that essential functions are appropriately staffed and compensated so that there is not a decline in the quality of services provided to our consumers.

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