



COMMISSIONER
Chris Traylor

June 1, 2011

John O'Brien, Director
Legislative Budget Board
1501 Congress Avenue, 5th Floor
Austin, Texas 78701

Subject: FY 2011 April Monthly Financial Report

Dear Mr. O'Brien:

The following is a summary of budget adjustments processed during April 2011, as well as, budget variances and other key budget issues at this time.

BUDGET ADJUSTMENTS

The Department of Aging and Disability Services (DADS) FY 2011 All Funds (AF) operating budget is projected to increase by \$445.4 million from the original FY 2011 appropriation of \$6,686.8 million to \$7,132.2 million. There was approximately a \$20 million adjustment to the current annual operating budget, as compared to the prior month's submission. The change is related to increasing federal revenue to be more aligned with available GR match for Medicaid. In addition, for FY 2011, there were three significant federal initiatives have affected DADS' operating budget:

- \$116.1 million related to a more favorable Federal FY 2011 federal participation rate (FMAP) than what was appropriated in the FY 2010-11 General Appropriation Act (60.56 percent versus 58.29 percent)
- \$47.7 million related to an extension of American Recovery and Reinvestment Act of 2009 (ARRA) stimulus Tier III rate, 70.94 percent, through December 2010.
- \$184.0 million related to an additional 6 month phase down extension of the ARRA stimulus through June 2011. The phase-down rate will be 68.11 percent from January 2011 through March 2011 and 66.23 percent from April 2011 through June 2011.

The American Recovery and Reinvestment Act of 2009 provided to the State of Texas a temporary increase to the regular federal participation rate (FMAP) for a period of 27 months, October 2008 through December 2010. The amount of the increase was calculated using the sum of three main factors: (1) the Hold Harmless factor, which restored the base FMAP to the FY 2008 percentage of 60.56 percent (constant variable); (2) an across the board increase of 6.2 percent (constant variable); and (3) an unemployment factor (Tier) which are issued in 1.09 percent increments (subject to change). See Figure 1.

Figure 1

Fiscal Year	Hold Harmless	Across the Board	Tier I adjustment	Subtotal, Tier I	Tier II adjustment	Subtotal, Tier II	Tier III adjustment	Subtotal, Tier III
2011	60.56	6.2	2.0	68.76	1.09	69.85	1.09	70.94

The initial state Fiscal Year 2011 appropriated the federal amount for ARRA stimulus fund, \$140.7 million, assumed a no-Tier rate of 66.76 percent, which only included the Hold Harmless plus the Across the Board 6.2 percent increase. However, due to changes in the State of Texas' unemployment, the Federal government increased the stimulus rate for Texas from a no-Tier to a Tier III rate of 70.94 percent. In addition, the effective date of Tier III was extended through December 2010, rather than ending June 2010 as originally expected.

Annual and Biennial Transactions submitted to and awaiting LBB/GOBPP Approval:

The FY 2010-11 operating budget reflects numerous budget adjustments that have been or will be submitted to the Legislative Budget Board (LBB) and the Governor's Office of Budget, Policy, and Planning (GOBPP), as required by various Riders in Senate Bill 1, Eighty-first Legislature, 2009. The following is a list of annual and biennial budget adjustments that have been submitted to the LBB and GOBPP and are pending approval.

- As a result of permanent refinancing of General Revenue Funds - funded Mental Retardation (MR) Community Services as Medicaid funded Home and Community-based Services (HCS), DADS requests approval to transfer \$808,538 in General Revenue Funds from Strategy A.4.2, MR Community Services to Strategy A.3.2, Home and Community-based Services (agency letter requesting approval was sent to the LBB, on February 10, 2010). In addition, to further utilize the GR transfer, DADS requests approval to increase Federal Funds in HCS by \$1,948,155, for a total All Funds increase of \$2,756,693. This additional funding will enable DADS to serve an additional 50 individuals in HCS. This transfer will impact the number of persons served and the annual All Funds expended by the above amounts in FY 2011, as well as, the FY 2012-13 biennium.
- As a result of permanently converting Intermediate Care Facilities/Mental Retardation (ICF/MR) facilities originally funded with General Obligation Bonds to HCS settings, DADS requests approval to transfer \$656,778 in General Revenue Funds and \$1,582,494 in Federal Funds, totaling \$2,239,272 All Funds from Strategy A.7.1, Intermediate Care Facilities-MR to Strategy A.3.2, Home and Community-based Services (agency letter requesting approval was sent to the LBB on February 10, 2010). This additional funding will enable DADS to serve an additional 42 individuals in HCS,

with a corresponding reduction in the number of individuals served in ICF/MRs. This transfer will impact the number of persons served and the annual All Funds expended by the above amounts in FY 2011, as well as, for the FY 2012-13 biennium.

- As a result of the "Money Follows the Person" federal grant, two large ICF/MR facilities have agreed to close permanently. An estimated 163 individuals in these facilities will choose to move to HCS settings. DADS requests approval to transfer \$2,510,516 in General Revenue Funds and \$6,049,032 in Federal Funds totaling \$8,559,548 All Funds from Strategy A.7.1, Intermediate Care Facilities-MR to Strategy A.3.2, Home and Community-based Services (agency letter requesting approval was sent to the LBB on February 10, 2010). This additional funding will enable DADS to serve an additional 163 individuals in HCS, with a corresponding reduction in the number of individuals served in ICF/MRs. This transfer will impact the number of persons served and the annual All Funds expended by the above amounts in FY 2011, as well as, for the FY 2012-13 biennium.
- Senate Bill 1 assumed that beginning January 2010 the case management function for the HCS program would be performed by the Mental Retardation Authorities (MRAs) instead of the HCS providers. However, this change did not occur until June 2010. This transfer will increase the average monthly cost per HCS individual served by \$72.90 for FY 2010. As a result, DADS requests approval to transfer \$4,427,228 in General Revenue Funds and \$10,667,311 in Federal Funds totaling \$15,094,539 All Funds from A.1.1, Intake, Access, and Eligibility to A.3.2, Home and Community-based Services (HCS) (an Agency letter requesting approval was sent to the LBB on February 10, 2010). This transfer will impact FY 2010 only, and will not impact future years.

BUDGET VARIANCES

DADS FY 2011 Operating Budget reflects Senate Bill 1, adjusted to reflect updated caseload and cost forecast, Health and Human Services interagency transfers, LBB approved or requested adjustments, ARRA impacts, and Rider adjustments. Through April 2011, DADS is projected to have a lapse of \$174.1 million in All Funds, of which \$163.1 million is General Revenue funds. The primary reason for the lapse relates to the 6-month phase-down extension of ARRA stimulus from January 2011 through June 2011. Of the lapsed funds, DADS is scheduled to transfer \$153.1 million in General Revenue funds to the Health and Human Service Commission (HHSC). This amount is subject to change as caseload and cost forecast are updated.

There is a substantial variance in the current annual operating budget, as compared to the prior month's amount. The change is related to increasing federal revenue to be more aligned with available GR match for Medicaid.

Projected expenditures for Medicaid entitlement client services are based upon payment data through April 2011.

- **Strategy A.2.2 Community Attendant Services** - This strategy is projected to have a negative variance of \$21.2 million in All Funds, which includes \$7.0 million in General Revenue Funds. This variance is related to the estimated monthly average cost per individual increasing from the appropriated amount of \$788.14 to \$825.70. In addition, the FY 2011 3rd Quarter forecast issued by HHSC indicates a caseload increase of an additional 5,690 individuals served per month above the Senate Bill 1 amount.
- **Strategy A.6.4 Promoting Independence Services** - This strategy is projected to have a negative variance of \$7.2 million in All Funds, which includes \$2.3 million in General Revenue Funds. This variance is related to the estimated monthly average cost per month increasing from the appropriated amount of \$1,507.32 to \$1,576.66. In addition, the updated forecast indicates a caseload increase of an additional 583 individuals served per month above the Senate Bill 1 amount. Even though, the all funds variance did not change from prior month's submission, a cost allocation adjustment was made in April, resulting in a different GR to federal match as compared to March's report.
- **Strategy A.8.1 State Supported Living Centers** - This strategy is projected to have a negative variance of \$13.2 million in All Funds, which includes \$4.3 million in General Revenue Funds. This variance is related to a projected higher than anticipated contracted services cost. In addition, the cost allocation of paid and projected expense was updated with a revised method of finance to be more reflective of current trends.

DADS' variances are based on assumed adjustments that are either awaiting LBB and GOBPP approval (listed above) or future adjustments which are subject to change (see Figure 2) that will be submitted for LBB and GOBPP approval.

Figure 2.

Total Analyst Strategy	GR Match for Medicaid Carry forward		Carry forward of Bond funds between Biennium		Biennial Total	
	Fiscal Year 2010	Fiscal Year 2011	Fiscal Year 2009 to 2010	Fiscal Year 2011 to 2012	Total Fiscal Year 2010	Total Fiscal Year 2011
A.8.1 – State Supported Living Centers	(16,864,803)	16,864,803	-	-	(16,864,803)	16,864,803
A.9.1 – Capital repairs and Renovations	-	-	2,312,170	(14,833,333)	2,312,170	(14,833,333)
Grand Total	(16,864,803)	16,864,803	2,312,170	(14,833,333)	(14,552,633)	2,031,470

OTHER KEY BUDGET ISSUES

For the FY 2010-11 biennium, the following adjustments (as approved by the LBB and GOBPP) are assumed in the adjusted operating budget:

- **FY 2010 5 Percent GR Reduction** *(as approved by the LBB and GOBPP)*

Strategy	FY2010
A.1.1 Intake, Access and Eligibility to Services and Supports	(1,253,360)
A.2.1 Primary Home Care	(400,231)
A.2.2 Community Attendant Services (Formerly Frail Elderly)	(297,065)
A.3.1 Community-Based Alternatives (CBA)	(300,739)
A.4.2 Mental Retardation Community Services	(450,000)
A.8.1 State Supported Living Centers (SSLC)	(79,588)
B.1.1 Facility and Community-Based Regulation	(361,907)
C.1.1 Central Administration	(216,820)
C.1.2 Information Technology Program Support	(83,389)
Total	(3,443,099)

- **GR Transfer to HHSC of additional ARRA Stimulus pursuant to Special Provisions, Section 11** (as approved by the LBB and GOBPP and subject to change as forecast for caseload and cost are updated)

Strategy	FY2010	FY2011	Total
A.2.1 Primary Home Care	(11,229,562)	(3,458,264)	(14,687,826)
A.2.2 Community Attendant Services (Formerly Frail Elderly)	(8,345,022)	(2,584,831)	(10,929,853)
A.2.3 Day Activity and Health Services (DAHS)	(2,281,800)	(698,754)	(2,980,554)
A.3.1 Community-Based Alternatives (CBA)	(9,773,217)	(2,932,871)	(12,706,088)
A.3.2 Home and Community-Based Services (HCS)	(14,822,737)	(5,035,164)	(19,857,901)
A.3.3 Community Living Assistance & Support Services (CLASS)	(3,890,593)	(1,375,111)	(5,265,704)
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)	(148,822)	(44,780)	(193,602)
A.3.5 Medically Dependent Children Program (MDCP)	(995,681)	(311,826)	(1,307,507)
A.3.6 Consolidated Waiver Program	(73,392)	(21,676)	(95,068)
A.3.7 Texas Home Living Waiver	(221,703)	(66,297)	(288,000)
A.5.1 Program of All-inclusive Care for the Elderly (PACE)	(721,968)	(239,682)	(961,650)
A.6.1 Nursing Facility Payments	(42,264,969)	(12,517,995)	(54,782,964)
A.6.2 Medicare Skilled Nursing Facility	(3,322,839)	(1,092,095)	(4,414,934)
A.6.3 Hospice	(4,579,363)	(1,472,999)	(6,052,362)
A.6.4 Promoting Independence Services	(2,372,974)	(786,448)	(3,159,422)
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	(6,651,828)	(1,931,817)	(8,583,645)
A.8.1 State Supported Living Centers (SSLC)	(13,103,460)	(3,863,656)	(16,967,116)
Total	(124,799,930)	(38,434,266)	(163,234,196)

- **GR Transfer to HHSC related to a more favorable FMAP rate in FY2011 pursuant to Special Provisions, Section 7 and Section 11** (as approved by the LBB and GOBPP and subject to change as forecast for caseload and cost are updated)

Strategy	FY2011
A.2.1 Primary Home Care	(4,096,810)
A.2.2 Community Attendant Services (Formerly Frail Elderly)	(3,062,103)
A.2.3 Day Activity and Health Services (DAHS)	(827,775)
A.3.1 Community-Based Alternatives (CBA)	(3,474,407)
A.3.2 Home and Community-Based Services (HCS)	(5,964,874)
A.3.3 Community Living Assistance & Support Services (CLASS)	(1,629,017)
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)	(53,048)
A.3.5 Medically Dependent Children Program (MDCP)	(369,402)
A.3.6 Consolidated Waiver Program	(25,678)
A.3.7 Texas Home Living Waiver	(78,538)
A.5.1 Program of All-inclusive Care for the Elderly (PACE)	(283,938)
A.6.1 Nursing Facility Payments	(14,829,364)
A.6.2 Medicare Skilled Nursing Facility	(1,293,743)
A.6.3 Hospice	(1,744,979)
A.6.4 Promoting Independence Services	(931,661)
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	(2,288,515)
A.8.1 State Supported Living Centers (SSLC)	(4,577,055)
Total	(45,530,907)

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- **GR Transfer to HHSC related to Star Plus transfer effective February 2011**

Strategy	FY2011
A.2.1 Primary Home Care	(11,962,103)
A.2.3 Day Activity and Health Services (DAHS)	(1,192,548)
A.3.1 Community-Based Alternatives (CBA)	(17,712,651)
A.6.4 Promoting Independence Services	(3,102,213)
Total	(33,969,515)

Not shown in the supporting schedules or the tables above, is a future transfer of lapse in General Revenue Funds related to additional ARRA stimulus funds to the Health and Human Service Commission (HHSC). Currently, DADS is projecting to transfer \$153.1 million in General Revenue Funds, but the amount is subject to change as cost and caseload forecast are updated.

Please contact me at 438-3355 if you have any questions or require additional information.

Sincerely,



Gordon Taylor
Chief Financial Officer

GT:rb

Enclosure

cc: Chris Traylor, Commissioner
Tom Suehs, Executive Commissioner HHSC
Greta Rymal, Deputy Executive Commissioner HHSC
Governor's Office of Budget, Planning and Policy

**Department of Aging and Disability Services
FY 2011 Attachment A: Budget Adjustments
Data Through the End of April 2011**

	General Revenue	GR - Dedicated	Federal	Other	Total
Adjustments to the FY 2011 Operating Budget:					
Appropriated Funds	\$2,768,923,630	\$54,564,624	\$3,830,589,936	\$32,688,728	\$6,686,766,918
Art II SP Sec 11, Limitations on Transfer Authority (2010-11 GAA)	(\$104,975,518)	\$0	\$2,090,705	\$0	(\$102,884,813)
Carry forward of Bond Funds within a biennium	\$0	\$0	\$0	\$39,045,405	\$39,045,405
Federal Funds Adjustment	\$0	\$0	\$774,125,679	\$0	\$774,125,679
Five Percent Reduction (2010-11 Biennium)	(\$18,426,473)	\$0	\$0	\$0	(\$18,426,473)
GR Carry Forward to FY2011	\$16,864,803	\$0	\$0	\$0	\$16,864,803
GR Certified Match for Medicaid reclassified to GR	(\$4,539,858)	\$0	\$0	\$0	(\$4,539,858)
GR Certified Match for Medicaid reclassified to GR Match for Medicaid	(\$5,443,549)	\$0	\$0	\$0	(\$5,443,549)
GR Match for Medicaid reclassified from GR	\$2,090,885	\$0	\$0	\$0	\$2,090,885
GR Match for Medicaid reclassified from GR Certified Match for Medicaid	\$5,443,549	\$0	\$0	\$0	\$5,443,549
GR Match for Medicaid reclassified to GR	(\$1,250,000)	\$0	\$0	\$0	(\$1,250,000)
GR reclassified from GR Certified Match for Medicaid	\$4,539,858	\$0	\$0	\$0	\$4,539,858
GR reclassified from GR Match for Medicaid	\$1,250,000	\$0	\$0	\$0	\$1,250,000
GR reclassified to GR Match for Medicaid	(\$2,090,885)	\$0	\$0	\$0	(\$2,090,885)
HB 4586 Section 68 - Transfer to DFPS (SB 643)	(\$1,162,563)	\$0	\$0	\$0	(\$1,162,563)
HHSC Transfer for ICM	\$2,090,885	\$0	\$2,090,885	\$0	\$4,181,770
Lifespan Respite Services Program	\$500,000	\$0	\$0	\$0	\$500,000
Nursing Facility Incentive Program	\$1,250,000	\$0	\$1,250,000	\$0	\$2,500,000
Other Funds Adjustment - MR Medicare Receipts	\$0	\$0	\$0	(\$1,651,058)	(\$1,651,058)
Program Transfer (Rider 9 Medicaid Strategies)	\$1,385,761	\$0	\$0	\$0	\$1,385,761
SB 102 Benefit Replacement Pay (BRP)	(\$140,667,853)	\$0	\$2,187,237	\$117,013	\$3,690,011
Stimulus Reduction of GR	\$0	\$0	\$0	\$0	\$0
Revised Operating Budget, September 2010	\$2,525,782,672	\$54,564,624	\$4,612,334,443	\$70,200,087	\$7,262,881,826
Federal Funds Adjustment	\$0	\$0	(\$7,317,258)	\$0	(\$7,317,258)
Revised Operating Budget, October 2010	\$2,525,782,672	\$54,564,624	\$4,605,017,185	\$70,200,087	\$7,255,564,568
Art II SP Sec 11, Limitations on Transfer Authority (2010-11 GAA)	(\$10,889,621)	\$0	(\$21,155)	\$0	(\$10,910,776)
Federal Funds Adjustment	\$0	\$0	(\$8,769,196)	\$0	(\$8,769,196)
Revised Operating Budget, November 2010	\$2,514,893,051	\$54,564,624	\$4,596,226,833	\$70,200,087	\$7,235,884,596
Additional 2.5% Rate Reduction: Strategy 1.3.2 HCS, 1.3.7 TXHML, 1.6.1 NF, 1.7.1 ICF/MR	(\$15,871,179)	\$0	(\$29,026,065)	\$0	(\$44,897,244)
Federal Funds Adjustment	\$0	\$0	(\$59,930,554)	\$0	(\$59,930,554)
GR Transfer from HHSC - OES Staffing	\$21,158	\$0	\$21,155	\$0	\$42,313
HHSC Transfer for ICM	(\$2,090,885)	\$0	(\$2,090,885)	\$0	(\$4,181,770)
Revised Operating Budget, December 2010	\$2,496,952,145	\$54,564,624	\$4,505,200,485	\$70,200,087	\$7,126,917,341

**Department of Aging and Disability Services
FY 2011 Attachment A: Budget Adjustments
Data Through the End of April 2011**

	General Revenue	GR - Dedicated	Federal	Other	Total
Carry forward of Bond Funds within a biennium	\$0	\$0	\$0	\$2,082	\$2,082
Elimination of Nursing Incentive Program: 1.6.1 NF	(\$2,100,000)	\$0	(\$2,100,000)	\$0	(\$4,200,000)
Federal Funds Adjustment	\$0	\$0	\$22,881,271	\$0	\$22,881,271
GR Match for Medicaid reclassified from GR	\$246,750	\$0	\$0	\$0	\$246,750
GR reclassified to GR Match for Medicaid	(\$246,750)	\$0	\$0	\$0	(\$246,750)
Halting Waiver Interest List rollout: 1.3.1 CBA, 1.3.2 HCS, 1.3.3 CLASS, 1.3.4 DBMD, and 1.3.5 MDCP	(\$13,619,333)	\$0	(\$28,068,245)	\$0	(\$41,687,578)
SB 102 Benefit Replacement Pay (BRP)	\$25,675	\$0	(\$25,675)	\$0	\$0
Revised Operating Budget, January 2011	\$2,481,258,487	\$54,564,624	\$4,497,887,835	\$70,202,169	\$7,103,913,115
Art II SP Sec 11, Limitations on Transfer Authority (2010-11 GAA)	\$115,865,139	\$0	(\$2,069,550)	\$0	\$113,795,589
Federal Funds Adjustment	\$0	\$0	\$70,225,724	\$0	\$70,225,724
GR Transfer from HHSC - Mortality Review (SB 643)	(\$181,128)	\$0	(\$181,128)	\$0	(\$362,256)
GR Transfer from HHSC - Telecommunication Enhancement	\$1,711,383	\$0	\$1,711,384	\$0	\$3,422,767
GR Transfer from HHSC - TIERS Roll-out	\$539,294	\$0	\$539,294	\$0	\$1,078,588
GR Transfer to HHSC - Additional ARRA	(\$38,434,266)	\$0	\$0	\$0	(\$38,434,266)
GR Transfer to HHSC - Art II, SP Sec 7; 81st Legislature - More favorable FMAP	(\$45,530,907)	\$0	\$0	\$0	(\$45,530,907)
GR Transfer to HHSC - Star Plus as of Feb 2011	(\$33,969,515)	\$0	(\$63,495,995)	\$0	(\$97,465,510)
Revised Operating Budget, February 2011	\$2,481,258,487	\$54,564,624	\$4,504,617,565	\$70,202,169	\$7,110,642,845
Federal Funds Adjustment	\$0	\$0	(\$268,525)	\$0	(\$268,525)
GR Match for Medicaid reclassified to GR	(\$239,483)	\$0	\$0	\$0	(\$239,483)
GR reclassified from GR Match for Medicaid	\$239,483	\$0	\$0	\$0	\$239,483
Revised Operating Budget, March 2011	\$2,481,258,487	\$54,564,624	\$4,504,349,039	\$70,202,169	\$7,110,374,319
Federal Funds Adjustment	\$0	\$0	\$21,785,835	\$0	\$21,785,835
Other Funds Adjustment - Appropriated Receipts and IAC	\$0	\$0	\$0	\$20,000	\$20,000
Revised Operating Budget, April 2011	\$2,481,258,487	\$54,564,624	\$4,526,134,874	\$70,222,169	\$7,132,180,154

**Department of Aging and Disability Services
 FY 2011 Monthly Financial Report: Strategy Budget and Variance, All Funds
 Data Through the End of April 2011**

	Appropriated		Adjustments		Notes	Budget		Expend. YTD	Projected	Variance
						Op Bgt.				
A.1.1 Intake, Access and Eligibility to Services and Supports	\$179,221,892		\$16,340,885	A,B,G,H,I,N		\$195,562,777	\$133,969,046	\$195,562,777	\$0	
A.1.2 Guardianship	\$6,995,223		\$25,675 B			\$7,020,898	\$4,518,904	\$6,986,542	\$34,356	
A.2.1 Primary Home Care	\$29,228,332		\$38,966,134	B,H,K		\$568,194,466	\$373,896,880	\$559,952,729	\$8,241,737	
A.2.2 Community Attendant Services (Formerly Frail Elderly)	\$381,531,375		\$53,321,064	B,H,K		\$434,852,439	\$300,154,011	\$456,094,208	(\$21,241,769)	
A.2.3 Day Activity and Health Services (DAHS)	\$114,033,620		\$21,565,534	B,H,K		\$135,599,154	\$76,068,526	\$116,001,440	\$19,597,714	
A.3.1 Community Based Alternatives (CBA)	\$492,463,523		(\$30,398,186)	B,H,K		\$462,065,337	\$303,967,784	\$439,095,840	\$22,969,497	
A.3.2 Home and Community Based Services (HCS)	\$833,201,931		\$16,037,405	B,H,K,J		\$849,239,336	\$526,996,378	\$796,629,962	\$52,609,374	
A.3.3 Community Living Assistance & Support Services (CLASS)	\$230,258,588		(\$14,444,268)	B,H,K		\$215,814,320	\$122,843,934	\$196,896,002	\$18,918,318	
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)	\$7,498,275		\$491,673	B,H,K		\$7,989,948	\$4,958,428	\$7,654,296	\$335,652	
A.3.5 Medically Dependent Children Program (MDCP)	\$52,214,333		(\$4,420,841)	B,H,K		\$47,793,492	\$29,171,460	\$44,461,872	\$3,331,620	
A.3.6 Consolidated Waiver Program	\$3,629,529		\$375,356	B,H,K,S		\$4,004,885	\$2,478,423	\$3,908,679	\$96,206	
A.3.7 Texas Home Living Waiver	\$11,001,177		(\$2,358,836)	B,H,K		\$8,642,341	\$4,065,851	\$6,771,599	\$1,870,742	
A.4.1 Non-Medicaid Services	\$150,583,389		\$447,788	B,L		\$151,031,177	\$98,446,583	\$148,439,764	\$2,591,413	
A.4.2 Mental Retardation Community Services	\$2,739,781		(\$808,538)			\$1,931,243	\$82,433,518	\$102,741,682	\$23,226	
A.4.3 Promoting Independence Plan	\$5,160,901		\$1,496,750	J		\$6,657,651	\$1,895,561	\$3,225,489	\$1,011,042	
A.4.4 In-Home and Family Support	\$5,721,740		\$0			\$5,721,740	\$3,438,687	\$5,160,901	\$0	
A.4.5 Mental Retardation In-Home Services	\$38,281,781		\$0			\$38,281,781	\$4,577,392	\$5,721,740	\$2,406,313	
A.5.1 Program of All-Inclusive Care for the Elderly (PACE)	\$1,993,855,020		\$1,096,291	B,C,K		\$39,378,072	\$1,409,857,963	\$36,971,759	\$7,879,912	
A.6.1 Nursing Facility Payments	\$181,364,820		\$175,195,747	B,H,K,O		\$2,169,050,767	\$100,857,692	\$154,013,009	\$16,575,478	
A.6.2 Medicare Skilled Nursing Facility	\$215,527,931		\$10,776,333	B,H,K		\$170,588,487	\$145,727,906	\$224,817,317	\$4,673,853	
A.6.3 Hospice	\$111,058,987		\$9,624,584	B,H,K		\$120,683,571	\$83,454,253	\$127,201,319	(\$6,517,748)	
A.6.4 Promoting Independence Services	\$323,582,318		\$29,963,243	B,H,K		\$353,545,561	\$227,182,954	\$331,659,546	\$21,886,015	
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	\$571,782,946		\$81,807,578	A,B,C,H,K,P,Q,R,T,U		\$653,590,524	\$453,557,826	\$666,783,311	(\$13,192,788)	
A.8.1 State Supported Living Centers (SSLC)	\$431,830		\$39,047,487	D,F,I		\$39,479,317	\$23,898,939	\$39,477,236	\$2,081	
Subtotal, Goal A: Long Term Services and Supports	\$6,544,942,688		\$436,559,429			\$6,981,502,117	\$4,541,641,943	\$6,807,399,873	\$174,102,244	
B.1.1 Facility and Community-Based Regulation	\$66,372,407		\$2,225,620	A,B		\$68,598,027	\$48,480,508	\$68,598,027	\$0	
B.1.2 Credentialing/Certification	\$1,296,740		(\$15,759)	A,B		\$1,280,981	\$880,468	\$1,280,981	\$0	
B.1.3 Quality Outreach	\$5,571,750		(\$178,384)	A,B		\$5,393,366	\$3,853,228	\$5,393,365	\$0	
Subtotal, Goal B: Regulation, Certification and Outreach	\$73,240,897		\$2,031,477			\$75,272,374	\$53,214,205	\$75,272,374	\$0	
C.1.1 Central Administration	\$31,809,041		\$2,077,273	A,B		\$33,886,314	\$25,707,080	\$33,886,314	\$0	
C.1.2 Information Technology Program Support	\$34,848,809		\$4,600,171	A,B,E		\$39,448,980	\$31,114,071	\$39,448,980	\$0	
C.1.3 Other Support Services	\$1,925,483		\$144,886	A,B		\$2,070,369	\$1,488,683	\$2,070,369	\$0	
Subtotal, Goal C: Indirect Administration	\$68,583,333		\$6,822,330			\$75,405,663	\$58,309,835	\$75,405,663	\$0	
GRAND TOTAL, DADS	\$6,686,766,918		\$445,413,236			\$7,132,180,154	\$4,653,165,983	\$6,958,077,910	\$174,102,244	

Notes:
 A. SB 102 Benefit Replacement Pay (BRP)
 B. Federal Funds Adjustment
 C. GR Carry Forward to FY2011
 D. Carry forward of Bond funds from prior biennium
 E. Art II SP Sec 11, Limitations on Transfer Authority (2010-11 GAA)
 F. Carry forward of Bond Funds within a biennium
 G. HHSC Transfer for ICM
 H. Program Transfer (Rider 9 Medicaid Strategies)
 I. Capital Budget Adjustment
 J. MR Residential Services Funded by General Revenue
 K. Stimulus Reduction of GR
 L. ARRA - Congregate and Home Delivered Meals
 M. ARRA Stimulus - Federal Budget Increases
 N. Lifespan Respite Services Program
 O. Nursing Facility Incentive Program
 P. Department of Justice settlement agreement
 Q. Video Surveillance equipment for SSLC
 R. HB 4586 Section 68 - Transfer to DFPS (SB 643)
 S. SB 705 - Eliminating Consolidated Waiver Program
 T. SECO Payments

Department of Aging and Disability Services
FY Monthly Financial Report: FTE Cap and Filled Positions
Data Through the End of April 2011

	Appropriated	Adjusted Cap	Budgeted	Filled Avg YTD	Filled Monthly
A.1.1 Intake, Access and Eligibility to Services and Supports	1,876.9	0.0	1,876.9	1,802.5	1,784.8
A.1.2 Guardianship	108.0	0.0	108.0	101.2	101.1
A.2.1 Primary Home Care					
A.2.2 Community Attendant Services (Formerly Frail Elderly)					
A.2.3 Day Activity and Health Services (DAHS)					
A.3.1 Community Based Alternatives (CBA)					
A.3.2 Home and Community Based Services (HCS)					
A.3.3 Community Living Assistance & Support Services (CLASS)					
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)					
A.3.5 Medically Dependent Children Program (MDCP)					
A.3.6 Consolidated Waiver Program					
A.3.7 Texas Home Living Waiver					
A.3.8 Other Waivers					
A.4.1 Non-Medicaid Services					
A.4.2 Mental Retardation Community Services					
A.4.3 Promoting Independence Plan					
A.4.4 In-Home and Family Support					
A.4.5 Mental Retardation In-Home Services					
A.5.1 Program of All-inclusive Care for the Elderly (PACE)					
A.6.1 Nursing Facility Payments					
A.6.2 Medicare Skilled Nursing Facility					
A.6.3 Hospice					
A.6.4 Promoting Independence Services					
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	29.0	0.0	29.0	28.1	28.8
A.8.1 State Supported Living Centers (SSLC)	14,251.5	-45.0	14,206.5	13,727.2	13,629.7
A.9.1 Capital Repairs and Renovations					
Subtotal, Goal A: Long Term Services and Supports	16,220.4	0.0	16,220.4	15,659.0	15,544.3
B.1.1 Facility and Community-Based Regulation	1,138.8	0.0	1,138.8	1,072.3	1,070.1
B.1.2 Credentialing/Certification	27.0	0.0	27.0	25.4	25.0
B.1.3 Quality Outreach	74.0	0.0	74.0	65.6	67.4
Subtotal, Goal B: Regulation, Certification and Outreach	1,239.8	0.0	1,239.8	1,163.3	1,162.4
C.1.1 Central Administration	363.3	0.0	363.3	349.2	355.1
C.1.2 Information Technology Program Support	96.4	0.0	96.4	121.5	130.1
C.1.3 Other Support Services	42.0	0.0	42.0	35.2	35.0
Subtotal, Goal C: Indirect Administration	501.7	0.0	501.7	506.0	520.2
GRAND TOTAL, DADS	18,006.9	-45.0	17,961.9	17,328.2	17,226.9

**Department of Aging and Disability Services
 FY 2011 Monthly Financial Report: Agency Budget and Variance, Detailed MOF
 Data Through the End of April 2011**

Method of Finance	ABEST Code/CFDA	Appropriated	Adjustments	Op Budget	Expend YTD	Projected	Variance
General Revenue	0001	195,724,062	6,654,809	202,378,871	145,293,335	196,551,921	5,826,950
GR-Match for Medicaid	0758	2,350,896,603	(279,048,924)	2,071,847,679	1,263,754,494	1,910,270,523	161,577,156
GR for Fed Funds (OAA)	8004	4,282,380	0	4,282,380	0	4,282,380	0
GR Cert Match - Medicaid	8032	218,020,585	(15,271,028)	202,749,557	145,154,136	207,043,638	(4,294,081)
Subtotal, General Revenue		2,768,923,630	(287,665,143)	2,481,258,487	1,554,201,965	2,318,148,462	163,110,025
GR Ded-Tx Capital TF	0543	289,802	0	289,802	210,765	289,802	0
GR Ded-HCSSA	5018	1,948,343	0	1,948,343	1,367,095	1,948,343	0
Special Olympic Lic Plate	5055	5,000	0	5,000	0	5,000	0
GR Ded - QAF	5080	52,321,479	0	52,321,479	35,906,981	52,321,479	0
Subtotal, General Revenue-Dedicated		54,564,624	0	54,564,624	37,484,841	54,564,624	0
Subtotal, GR-Related		2,823,488,254	(287,665,143)	2,535,823,111	1,591,686,806	2,372,713,086	163,110,025
XIX ADM 50%	93.778.003	49,060,676	(1,233,689)	47,826,987	35,002,830	47,782,411	44,577
XIXADM 75%	93.778.004	15,374,535	4,951,662	20,326,197	13,092,260	20,034,652	291,545
XIXADM 90%	93.778.000	0	1,455,913	1,455,913	333,376	1,088,223	367,690
XIX Stimulus	93.778.014	0	406,646,529	406,646,529	268,759,359	404,778,277	1,868,253
XIX FMAP	93.778.005	3,556,978,067	247,391,818	3,804,369,885	2,520,886,402	3,796,022,030	8,347,855
Title XX	93.667.000	85,340,273	2,083,560	87,423,833	65,746,441	87,424,768	(935)
TITLE XVIII	93.777.000	23,691,992	82,419	23,774,411	17,288,426	23,774,411	0
SUR&C-75%	93.777.002	19,635,521	(135,003)	19,500,518	13,883,385	19,500,518	0
81R SUPP: Federal Funds	93.777.003	0	0	0	12,600	0	0
Foster Grandparent Pgm	94.011.000	2,088,893	6,162	2,095,055	1,304,080	1,961,461	133,594
CMS Res, Demo, & Eval	93.779.000	2,568,494	28,219,851	30,788,345	28,874,947	30,788,345	0
Spc Svcs Aging-VII3	93.041.000	377,737	0	377,737	154,100	377,737	0
Spc Svcs Aging-VII2	93.042.000	973,603	0	973,603	507,951	973,603	0
Spc Svcs Aging-IIIID	93.043.000	1,334,413	0	1,334,413	585,939	1,323,996	10,417
Spc Svcs Aging-IIIIB	93.044.000	23,166,327	(13,460)	23,152,867	14,605,487	23,152,867	0
Spc Svcs Aging-IIIIC	93.045.000	29,475,500	(921,406)	28,554,094	23,353,407	28,554,094	0
Spc Svcs Aging-Discretionary	93.048.000	130,245	1,643,090	1,773,335	576,136	1,773,335	0
Alzheimer's Grant	93.051.000	174,844	(174,844)	0	0	0	0
Natl Family Caregiver	93.052.000	9,219,415	377,319	9,596,734	5,017,398	9,596,734	0
Nutrition Svcs Incentive	93.053.000	10,973,872	0	10,973,872	5,849,605	11,059,678	(85,806)
Developmental Disabilities-Basic Supt	93.630.000	25,529	(25,529)	0	0	0	0
ARRA AoA Grant to AAA's	93.725.000	0	998,370	998,370	344,017	998,370	0
Home Delivered Meals-Title IIIIC2	93.705.000	0	58,526	58,526	56,723	56,723	1,803
MIDR AoA	93.071.000	0	125,137	125,137	67,817	125,137	0
MIPPA AoA	93.071.000	0	345,658	345,658	187,325	345,658	0
MIPPA AoA Grants	93.518.000	0	961,677	961,677	47,743	961,677	0
MIPPA AoA Grants	93.518.001	0	825,219	825,219	0	825,219	0
MIPPA CMS	93.779.000	0	1,276,060	1,276,060	333,930	1,276,060	0
MIMSEA CMS	93.779.000	0	183,656	183,656	99,530	183,656	0
Respite AoA	93.072.000	0	348,000	348,000	89,320	348,000	0
Congregate Meals-Title IIIIC1	93.707.000	0	68,242	68,242	57,094	57,094	11,148
Subtotal, Federal Funds		3,830,589,936	695,544,938	4,526,134,874	3,017,117,628	4,515,144,735	10,990,139
Appropriated Receipts	0666	4,094,425	28,037	4,122,462	2,527,645	4,122,462	0
MR Collections	8095	22,469,137	87,916	22,557,053	14,856,946	22,557,053	0
MR Approp Recpts	8096	754,449	4,566	759,015	1,029,165	759,015	0
MR Revolving Fund	8098	82,160	0	82,160	0	82,160	0
Interagency Contracts	0777	3,637,499	16,493	3,653,992	2,362,911	3,653,992	0
Bond Proceeds-7616	0780	0	691,315	691,315	180,371	691,061	254

Department of Aging and Disability Services
FY 2011 Monthly Financial Report: Agency Budget and Variance, Detailed MOF
Data Through the End of April 2011

Method of Finance	ABEST Code/CFDA	Appropriated	Adjustments	Op Budget	Expend YTD	Projected	Variance
Bond Proceeds-7620	0780	0	2,424,616	2,424,616	2,422,789	2,422,789	1,827
Bond Proceeds-7631	0780	0	3,810,647	3,810,647	3,016,762	3,810,647	0
Bond Proceeds-7210	0780	0	5,573,713	5,573,713	4,937,626	5,573,713	0
Bond Proceeds-7644	0780	0	26,547,196	26,547,196	13,027,335	26,547,196	0
Medicare Part D Receipts	8115	1,651,058	(1,651,058)	0	0	0	0
Subtotal, Other Funds		32,688,728	37,533,441	70,222,169	44,361,549	70,220,089	2,081
GRAND TOTAL, ALL FUNDS		6,686,766,918	445,413,236	7,132,180,154	4,653,165,983	6,958,077,910	174,102,244

**Department of Aging and Disability Services
 FY 2011 Monthly Financial Report: Strategy Projections by MOF
 Data Through the End of April 2011**

	GR	GR-D	Federal Funds			Subtotal FF	Other Funds	All Funds
			93-728,000	93-667,000	Other CFDA			
A.1.1 Intake, Access and Eligibility to Services and Supports	\$75,366,972	\$0	\$79,791,955	\$9,245,901	\$29,449,235	\$118,487,091	\$1,708,713	\$195,562,777
A.1.2 Guardianship	\$3,598,657	\$0	\$0	\$3,387,885	\$0	\$3,387,885	\$0	\$6,986,542
A.2.1 Primary Home Care	\$183,759,687	\$0	\$376,193,042	\$0	\$0	\$376,193,042	\$0	\$559,952,729
A.2.2 Community Attendant Services (Formerly Frail Elderly)	\$149,831,508	\$0	\$306,262,700	\$0	\$0	\$306,262,700	\$0	\$456,094,208
A.2.3 Day Activity and Health Services (DAHS)	\$38,119,233	\$0	\$77,882,207	\$0	\$0	\$77,882,207	\$0	\$116,001,440
A.3.1 Community Based Alternatives (CBA)	\$144,409,032	\$0	\$294,686,808	\$0	\$0	\$294,686,808	\$0	\$439,095,840
A.3.2 Home and Community Based Services (HCS)	\$257,536,959	\$0	\$517,843,434	\$0	\$21,249,570	\$539,093,003	\$0	\$796,629,962
A.3.3 Community Living Assistance & Support Services (CLASS)	\$64,680,339	\$0	\$132,215,663	\$0	\$0	\$132,215,663	\$0	\$196,896,002
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)	\$2,543,521	\$0	\$5,110,775	\$0	\$0	\$5,110,775	\$0	\$7,654,296
A.3.5 Medically Dependent Children Program (MDCP)	\$14,645,742	\$0	\$29,816,130	\$0	\$0	\$29,816,130	\$0	\$44,461,872
A.3.6 Consolidated Waiver Program	\$1,292,170	\$0	\$2,616,509	\$0	\$0	\$2,616,509	\$0	\$3,908,679
A.3.7 Texas Home Living Waiver	\$2,249,321	\$0	\$4,522,278	\$0	\$0	\$4,522,278	\$0	\$6,771,599
A.4.1 Non-Medicaid Services	\$18,377,585	\$0	\$0	\$74,090,958	\$55,971,221	\$130,062,179	\$0	\$148,439,764
A.4.2 Mental Retardation Community Services	\$102,736,682	\$5,000	\$0	\$0	\$0	\$102,736,682	\$0	\$102,741,682
A.4.3 Promoting Independence Plan	\$2,321,995	\$0	\$0	\$0	\$246,750	\$246,750	\$0	\$3,225,489
A.4.4 In-Home and Family Support	\$5,160,901	\$0	\$0	\$0	\$0	\$5,160,901	\$0	\$5,160,901
A.4.5 Mental Retardation In-Home Services	\$5,721,740	\$0	\$0	\$0	\$0	\$5,721,740	\$0	\$5,721,740
A.5.1 Program of All-Inclusive Care for the Elderly (PACE)	\$12,110,469	\$0	\$24,861,290	\$0	\$0	\$24,861,290	\$0	\$36,971,759
A.6.1 Nursing Facility Payments	\$710,203,235	\$0	\$1,420,967,620	\$0	\$0	\$1,420,967,620	\$0	\$2,131,170,854
A.6.2 Medicare Skilled Nursing Facility	\$52,426,028	\$0	\$101,586,981	\$0	\$0	\$101,586,981	\$0	\$154,013,009
A.6.3 Hospice	\$76,003,990	\$0	\$148,813,327	\$0	\$0	\$148,813,327	\$0	\$224,817,317
A.6.4 Promoting Independence Services	\$41,198,866	\$0	\$80,357,132	\$0	\$5,645,321	\$86,002,453	\$0	\$127,201,319
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	\$84,168,109	\$26,321,479	\$221,128,196	\$0	\$0	\$221,128,196	\$41,762	\$331,659,546
A.8.1 State Supported Living Centers (SSLC)	\$214,515,590	\$26,000,000	\$399,005,181	\$0	\$1,961,461	\$400,966,642	\$25,301,079	\$666,783,311
A.9.1 Capital Repairs and Renovations	\$142,028	\$289,802	\$0	\$0	\$0	\$142,028	\$39,045,406	\$39,477,236
Subtotal, Goal A: Long Term Services and Supports	\$2,263,120,361	\$52,616,281	\$4,223,661,225	\$86,724,744	\$114,523,558	\$4,424,909,527	\$66,753,704	\$6,807,399,873
B.1.1 Facility and Community-Based Regulation	\$22,644,289	\$1,948,343	\$3,907,881	\$0	\$40,097,515	\$44,005,396	\$0	\$68,598,027
B.1.2 Credentialing/Certification	\$668,341	\$0	\$103,079	\$0	\$311,537	\$414,616	\$198,024	\$1,280,981
B.1.3 Quality Outreach	\$571,035	\$0	\$3,488,539	\$0	\$0	\$3,488,539	\$1,333,791	\$5,393,365
Subtotal, Goal B: Regulation, Certification and Outreach	\$23,883,664	\$1,948,343	\$7,499,499	\$0	\$40,409,052	\$47,908,551	\$1,531,815	\$75,272,374
C.1.1 Central Administration	\$13,335,128	\$0	\$17,805,061	\$341,384	\$1,155,142	\$19,301,587	\$1,249,599	\$33,886,314
C.1.2 Information Technology Program Support	\$16,999,596	\$0	\$19,680,211	\$324,423	\$1,850,160	\$21,854,794	\$594,590	\$39,448,980
C.1.3 Other Support Services	\$809,713	\$0	\$1,059,596	\$34,217	\$76,463	\$1,170,276	\$90,380	\$2,070,369
Subtotal, Goal C: Indirect Administration	\$31,144,437	\$0	\$38,544,868	\$700,024	\$3,081,765	\$42,326,657	\$1,934,569	\$75,405,663
GRAND TOTAL, DADS	\$2,318,148,462	\$54,564,624	\$4,269,705,593	\$87,424,768	\$158,014,375	\$4,515,144,735	\$70,220,089	\$6,958,077,910

**Department of Aging and Disability Services
 FY 2011 Monthly Financial Report: Strategy Variance by MOF
 Data Through the End of April 2011**

	GR	GR-D	Federal Funds		Subtotal, FF	Other Funds	All Funds
			93,778,000	93,667,000			
A.1.1 Intake, Access and Eligibility to Services and Supports	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A.1.2 Guardianship	\$34,356	\$0	\$0	\$0	\$0	\$0	\$34,356
A.2.1 Primary Home Care	\$2,704,691	\$0	\$5,537,046	\$0	\$5,537,046	\$0	\$8,241,737
A.2.2 Community Attendant Services (Formerly Frail Elderly)	(\$6,978,133)	\$0	(\$14,263,636)	\$0	(\$14,263,636)	\$0	(\$21,241,769)
A.2.3 Day Activity and Health Services (DAHS)	\$6,440,005	\$0	\$13,157,709	\$0	\$13,157,709	\$0	\$19,597,714
A.3.1 Community Based Alternatives (CBA)	\$22,969,497	\$0	\$0	\$0	\$0	\$0	\$22,969,497
A.3.2 Home and Community Based Services (HCS)	\$52,609,374	\$0	\$0	\$0	\$0	\$0	\$52,609,374
A.3.3 Community Living Assistance & Support Services (CLASS)	\$18,918,318	\$0	\$0	\$0	\$0	\$0	\$18,918,318
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)	\$335,652	\$0	\$0	\$0	\$0	\$0	\$335,652
A.3.5 Medically Dependent Children Program (MDCP)	\$3,331,620	\$0	\$0	\$0	\$0	\$0	\$3,331,620
A.3.6 Consolidated Waiver Program	\$96,206	\$0	\$0	\$0	\$0	\$0	\$96,206
A.3.7 Texas Home Living Waiver	\$1,870,742	\$0	\$0	\$0	\$0	\$0	\$1,870,742
A.4.1 Non-Medicaid Services	\$2,654,787	\$0	(\$62,439)	(\$935)	(\$63,374)	\$0	\$2,591,413
A.4.2 Mental Retardation Community Services	\$23,226	\$0	\$0	\$0	\$0	\$0	\$23,226
A.4.3 Promoting Independence Plan	\$1,011,042	\$0	\$0	\$0	\$0	\$0	\$1,011,042
A.4.4 In-Home and Family Support	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A.4.5 Mental Retardation In-Home Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A.5.1 Program of All-Inclusive Care for the Elderly (PACE)	\$2,406,313	\$0	\$0	\$0	\$0	\$0	\$2,406,313
A.6.1 Nursing Facility Payments	\$33,047,561	\$0	\$4,832,351	\$0	\$4,832,351	\$0	\$37,879,912
A.6.2 Medicare Skilled Nursing Facility	\$16,575,478	\$0	\$0	\$0	\$0	\$0	\$16,575,478
A.6.3 Hospice	\$4,673,853	\$0	\$0	\$0	\$0	\$0	\$4,673,853
A.6.4 Promoting Independence Services	(\$2,337,600)	\$0	(\$4,180,148)	\$0	(\$4,180,148)	\$0	(\$6,517,748)
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	\$7,017,119	\$0	\$14,868,896	\$0	\$14,868,896	\$0	\$21,886,015
A.8.1 State Supported Living Centers (SSLC)	(\$4,294,081)	\$0	(\$9,032,301)	\$0	(\$8,898,707)	\$0	(\$13,192,788)
A.9.1 Capital Repairs and Renovations	\$0	\$0	\$0	\$0	\$0	\$2,081	\$2,081
Subtotal, Goal A: Long Term Services and Supports	\$163,110,025	\$0	\$10,919,919	(\$935)	\$10,990,138	\$2,081	\$174,102,244
B.1.1 Facility and Community-Based Regulation	\$0	\$0	\$0	\$0	\$0	\$0	\$0
B.1.2 Credentialing/Certification	\$0	\$0	\$0	\$0	\$0	\$0	\$0
B.1.3 Quality Outreach	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Subtotal, Goal B: Regulation, Certification and Outreach	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C.1.1 Central Administration	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C.1.2 Information Technology Program Support	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C.1.3 Other Support Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Subtotal, Goal C: Indirect Administration	\$0	\$0	\$0	\$0	\$0	\$0	\$0
GRAND TOTAL, DADS	\$163,110,025	\$0	\$10,919,919	(\$935)	\$10,990,139	\$2,081	\$174,102,244

**Department of Aging and Disability Services
0543 - Capital Trust Funds
Data Through the End of April 2011**

	Apr 11	FY11 Year to Date as of 04/30/11
Beginning Balance, 04/01/11	0	0
Reductions:		
Expended	0	0
Total Reductions	0	0
Ending Balance, 04/30/11	0	0

**Department of Aging and Disability Services
0543 Unappropriated - Capital Trust Funds
Data Through the End of April 2011**

	Apr. 11	FY11 Year to Date as of 04/30/11
Beginning Balance, 04/01/11	178,876	0
Increases:		
3321 Oil Royaltie	9,347	63,832
3746 Rental of Lan	0	86,215
3747 Rental-Othe	1,068	17,548
3851 Int-State Dep&Treas Inv-Gener	3,533	25,229
Total Increases	13,948	192,824
Reductions:		
Expended	0	0
Total Reductions	0	0
Ending Balance, 04/30/11	192,824	192,824

**Department of Aging and Disability Services
0666 - Appropriated Receipts
Data Through the End of April 2011**

	Apr 11	FY11 Year to Date as of 04/30/11
Beginning Balance, 04/01/11	0	0
Increases:		
3557 Health Care Facilities Fee	59,095	651,432
3560 Medical Exam & Registratio	16,430	147,172
3719 Fees for Copies, Fil Re	356	2,215
3722 Conf/Seminar/Training Reg Fee	0	497
3770 Administrative Penaltie	0	34,130
Total Increases	75,881	835,446
Reductions:		
Expended	75,881	835,446
Total Reductions	75,881	835,446
Ending Balance, 04/30/11	0	0

Department of Aging and Disability Services
5080 - QAF
Data Through the End of April 2011

	<u>Apr 11</u>	<u>FY11 Year to Date as of 04/30/11</u>
Beginning Balance, 04/01/11	0	0
Increases:		
3557 Health Care Facilities Fee	5,127,048	37,908,801
3770 Administrative Penaltie	3,633	6,757
3851 Int-State Dep&Treas Inv-Gener	31,376	225,986
3973 Trnf Cash-Same Fd-Between Agc	3,660,920	25,261,556
Total Increases	<u>8,822,977</u>	<u>63,403,100</u>
Reductions:		
Expended	8,822,977	63,403,100
Total Reductions	<u>8,822,977</u>	<u>63,403,100</u>
Ending Balance, 04/30/11	<u>0</u>	<u>0</u>

**Department of Aging and Disability Services
8091 - EFF Match for Medicaid
Data Through the End of April 2011**

	<u>Apr 11</u>	<u>FY11 Year to Date as of 04/30/11</u>
Beginning Balance, 04/01/11	0	0
Reductions:		
Expended	0	0
Total Reductions	<u>0</u>	<u>0</u>
Ending Balance, 04/30/11	<u><u>0</u></u>	<u><u>0</u></u>

**Department of Aging and Disability Services
8095 - SMT
Data Through the End of April 2011**

	Apr 11	FY11 Year to Date as of 04/30/11
Beginning Balance, 04/01/11	0	0
Increases:		
3606 Support/Maint of Patient	2,461,877	16,273,548
3618 Welfare/MHMR service fee	185	877
Total Increases	2,462,062	16,274,425
Reductions:		
Expended	2,462,062	16,274,425
Total Reductions	2,462,062	16,274,425
Ending Balance, 04/30/11	0	0

**Department of Aging and Disability Services
8096 - MR Appropriated Receipts
Data Through the End of April 2011**

	Apr 11	FY11 Year to Date as of 04/30/11
Beginning Balance, 04/01/11	0	0
Increases:		
3719 Fees for Copies, Fil Re	1,002	2,510
3753 Sale of Surplus Property Fe	191	1,888
3767 Supply, Equip, Service-Fed/Othe	14,957	95,522
3802 Reimbursements- Third Part	1,445	19,867
3806 Rental Of Housing To State Em	20,493	150,139
Total Increases	<u>38,088</u>	<u>269,926</u>
Reductions:		
Expended	38,088	269,926
Total Reductions	<u>38,088</u>	<u>269,926</u>
Ending Balance, 04/30/11	<u><u>0</u></u>	<u><u>0</u></u>

Department of Aging and Disability Services
8098 - MR Revolving Funds
Data Through the End of April 2011

	Apr. 11	FY11 Year to Date as of 04/30/11
Beginning Balance, 04/01/11	0	0
Increases:		
3765 Sales Of Supplies/Equipment/S	600	6,499
3767 Supply, Equip, Service-Fed/Othe	12,434	68,054
Total Increases	13,034	74,553
Reductions:		
Expended	13,034	74,553
Total Reductions	13,034	74,553
Ending Balance, 04/30/11	0	0

**Department of Aging and Disability Services
8115 - Medicare Part D Receipts
Data Through the End of April 2011**

	Apr 11	FY11 Year to Date as of 04/30/11
Beginning Balance, 04/01/11	0	0
Reductions:		
Expended	0	0
Total Reductions	0	0
Ending Balance, 04/30/11	0	0

Department of Aging and Disability Services
Unappropriated - EFF
Data Through the End of April 2011

	Apr 11	FY11 Year to Date as of 04/30/11
Beginning Balance, 04/01/11	4,396,273	0
Increases:		
3702 Federal Receipts-Earned Credi	0	9,969
3851 Int-State Dep&Treas Inv-Gener	21,178	174,648
3965 Cash Transf Btn Fnds/Accts-Me	625,188	4,858,022
Total Increases	646,366	5,042,639
Reductions:		
Expended	0	0
Total Reductions	0	0
Ending Balance, 04/30/11	5,042,639	5,042,639

**Department of Aging and Disability Services
 FY 2011 Monthly Financial Report: Capital Projects
 Data Through the End of April 2011**

	Budget						Variance
	Appropriated	Adjustments	Notes	Op Bgt.	Expend. YTD	Projected	
Capital Projects in Capital Rider							
Data Center Consolidation	\$3,543,960	\$0		\$3,543,960	\$2,308,880	\$3,543,960	\$0
Data Encryption and Security	\$300,000	\$100,000		\$400,000	\$71,772	\$400,000	\$0
Lease of Personal Computers	\$3,508,374	\$274,839		\$3,783,213	\$1,584,483	\$3,783,213	\$0
Licensing/Credentialing	\$0	\$0		\$378,531	\$445,514	\$378,531	\$0
Messaging & Collaboration	\$1,605,939	\$0		\$1,605,939	\$0	\$1,605,939	\$0
Payment of MLPP-Transportation	\$765,813	\$0		\$765,813	\$0	\$765,813	\$0
Payment of MLPP-Utility Savings	\$2,766,922	\$0		\$2,766,922	\$9,607	\$2,766,922	\$0
Repairs & Renovations	\$431,831	\$39,047,487		\$39,479,318	\$15,303,204	\$39,479,318	\$0
SAS/CARE Consolidation	\$6,171,200	\$1,454,120		\$7,246,789	\$192,407	\$7,246,789	\$0
Software Licenses	\$1,701,400	\$296,020		\$1,997,420	\$1,404,820	\$1,997,420	\$0
State School Telecommunication	\$1,430,312	\$1,430,312		\$2,860,624	\$0	\$2,860,624	\$0
GRAND TOTAL	\$22,225,751	\$42,602,778		\$64,828,529	\$21,320,687	\$64,828,529	\$0
Method of Finance:							
General Revenue	\$9,431,332	(\$183,851)		\$9,588,159	\$2,374,775	\$9,588,159	\$0
General Revenue-Dedicated	\$289,803	\$0		\$289,802	\$59,995	\$289,802	\$0
<i>Subtotal, GR-Related</i>	<i>\$9,721,135</i>	<i>(\$183,851)</i>		<i>\$9,877,961</i>	<i>\$2,434,770</i>	<i>\$9,877,961</i>	<i>\$0</i>
Federal Funds	\$12,123,954	\$3,655,598		\$15,438,874	\$3,536,597	\$15,438,874	\$0
Other Funds	\$380,662	\$39,131,032		\$39,511,694	\$15,349,320	\$39,511,694	\$0
TOTAL, All Funds	\$22,225,751	\$42,602,779		\$64,828,529	\$21,320,687	\$64,828,529	\$0

Department of Aging and Disability Services
FY 2011 Monthly Financial Report: Select Performance Measures
Data Through the End of April 2011

Measure	SB 1	FY 2011 YTD Actual	FY 2011 Projected	Variance (SB 1 vs. Projected)
Primary Home Care				
Avg. # of clients served per month	52599	55018	54812	(2213)
Avg. cost per month	\$838.46	\$847.79	\$851.33	(\$12.87)
CAS				
Avg. # of clients served per month	40341	45435	46031	(5690)
Avg. cost per month	\$788.14	\$823.31	\$825.70	(\$37.56)
DAHS				
Avg. # of clients served per month	18031	18068	18123	(92)
Avg. cost per month	\$527.03	\$526.28	\$533.39	(\$6.36)
CBA Waiver				
Average # of CBA clients served per month	26732	23797	22850	3882
Average Monthly Cost of CBA Clients	\$1,535.19	\$1,592.12	\$1,597.00	(\$61.81)
HCS Waiver				
Average Monthly Number of Consumers Served in the HCS Waiver Program	19985	19231	19554	431
Average Monthly Cost Per Consumer Served in the HCS Waiver Program	\$3,474.28	\$3,425.52	\$3,395.00	\$79.28
CLASS Waiver				
Average # of CLASS Waiver clients served per month	5616	4541	4688	928
Average Monthly Cost of CLASS Waiver Clients	\$3,416.71	\$3,381.43	\$3,500.00	(\$83.29)
DBMD Waiver				
Average # of DBMD Waiver clients served per month	158	150	151	7
Average Monthly Cost of DBMD clients	\$3,954.79	\$4,135.47	\$4,224.23	(\$269.44)
MDCP Waiver				
Average # of MDCP clients served per month	3006	2456	2457	549
Average Monthly Cost of MDCP clients	\$1,447.50	\$1,484.70	\$1,508.00	(\$60.50)
Consolidated Waiver Program				
Average # of CWP clients served per month	160	149	157	3
Average Monthly Cost of CWP clients	\$1,890.38	\$2,077.47	\$2,074.67	(\$184.29)
TxHmL Waiver				
Average Monthly Number of Consumers Served in the TxHmL Waiver Program	994	743	836	158
Average Monthly Cost Per Consumer Served in the TxHmL Waiver Program	\$922.30	\$683.91	\$675.00	\$247.30

Department of Aging and Disability Services
FY 2011 Monthly Financial Report: Select Performance Measures
Data Through the End of April 2011

Measure	SB 1	FY 2011 YTD Actual	FY 2011 Projected	Variance (SB 1 vs. Projected)
Non-Medicaid Services - Title XX				
Average number of clients served per month: Non-Medicaid Community Care (XX)	39379	35764	35731	3648
Average monthly cost per client served: Non-Medicaid Community Care (XX)	\$195.78	\$211.34	\$213.66	(\$17.88)
Program of All-Inclusive Care for the Elderly (PACE)				
Average number of recipients per month: Program for All Inclusive Care (PACE)	1202	987	1082	120
Average monthly cost per recipient: Program for All Inclusive Care (PACE)	\$2,654.03	\$2,940.00	\$2,846.39	(\$192.36)
Promoting Independence				
Avg. # of clients served per month	6140	6671	6723	(583)
Avg. cost per month	\$1,507.32	\$1,563.96	\$1,576.66	(\$69.34)
Nursing Facilities				
Average # of persons receiving Medicaid funded Nursing Facility svcs. per mo.	53827	56432	56347	(2520)
Net Nursing Facility cost per Medicaid resident per month	\$3,077.27	\$3,096.30	\$3,119.53	(\$42.26)
Medicare Skilled Nursing Facility				
Average number of clients receiving Copaid/Medicaid nursing facility services per month	7319	6533	6490	829
Net payment per client for co-paid Medicaid nursing facility services per month	\$2,065.00	\$1,931.99	\$1,977.57	\$87.43
Hospice				
Average # of clients receiving Hospice services per month	6370	6624	6691	(321)
Average net payment per client per month for Hospice	\$2,819.57	\$2,750.05	\$2,800.00	\$19.57
ICFs/MR				
Average Monthly Number of Persons in ICF/MR Medicaid Beds, Total	5871	5788	5788	83
Monthly Cost Per ICF/MR Medicaid Eligible Consumer, Total	\$4,592.95	\$4,490.00	\$4,495.57	\$97.38
State School Facilities				
Average Monthly Number of MR Campus Residents	4354	4039	4074	280
Average Monthly Cost per MR Campus Resident	\$10,943.63	\$11,797.12	\$11,695.77	(\$752.14)

**Department of Aging and Disability Services
FY 2011 Monthly Financial Report: Waiver Clients Served
Data Through the End of April 2011**

DADS Programs	Projected Sept 1, 2009 Count	Actual Sept 1, 2009 Client Count	Revised affordable Total number of slots at end of FY 2011	2nd Revision of affordable Total number of slots at end of FY2011	April 2011 Count	Difference	FY 2011 Budgeted (average for the Fiscal Year)	Projected FY 2011 Average
Comm. Based Altern. (CBA)	22,325	22,363	21,123	21,141	20,865	(276)	0	20,790
ICM waiver (Non-Mandatory)	2,319	2,306	2,545	0	0	0	0	1,029
ICM Waiver (Mandatory)	2,168	1,855	2,354	0	2	2	0	1,031
Total CBA/ICM waiver	26,719	26,524	26,022	21,141	20,867	(274)	23,032	22,850
Comm. Living Assist. & Supp. Svcs. (CLASS)	4,199	4,014	5,856	5,210	4,596	(614)	5,254	4,688
Med. Dep. Children Pgm. (MDCP)	2,745	2,764	2,906	2,487	2,347	(140)	2,763	2,457
Deaf-Blind w/Mult. Disab. (DBMD)	172	154	153	156	144	(12)	153	151
Home & Comm. Based Svcs. (HCS)	15,516	15,535	21,690	20,157	19,844	(313)	20,223	19,554

*The 2nd Revision of affordable Total number of slots at end of FY 2011 reflects revisions to the roll-out plan as of December 2010.

The individuals identified as "ICM Waiver (non-mandatory)" and "ICM Waiver (mandatory)" in the February 2011 count are not actually receiving ICM services. They required a February 1, 2011 retroactive Star Plus manual enrollment process due to incorrect addresses or loss of Medicaid. The providers are billing the Managed Care Organizations for payment on each of these as they are resolved.