



February 6, 2012

John O'Brien, Director Legislative Budget Board P.O. Box 12666 Austin, TX 78711-2666

Subject: FY2012 December Monthly Financial Report

Dear Mr. O'Brien:

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

#### BUDGET ADJUSTMENTS

In total, the Department of Aging and Disability Services (DADS) FY2012 Operating budget is \$6,236.9 million in All Funds (\$2,583.2 million in GR/GRD Funds), which is \$18.4 million in All Funds (AF) above the FY2012 appropriation of \$6,218.5 million in AF, as stated in the Eighty-second Legislature, Conference Committee, Stage 12, 2012-13 Biennium, dated May 22, 2011. The increase is mainly related to aligning Federal Funds with available General Revenue Funds and the carry-forward of the unexpended balance authority for SAS/CARE Consolidation Project. Pursuant to Rider 42, House Bill 1, 82<sup>nd</sup> Legislature, 2012-13 General Appropriations Act (GAA), DADS submitted a letter dated October 3, 2011, requesting approval to carry forward the unexpended balance of the SAS/CARE Consolidation Project (\$6.6 million in All Funds and \$0.7 million in GR). The letter has since been approved by the Legislative Budget Board (LBB) and the Governor's Office of Budget, Planning and Policy (GOBPP) and the FY2012 Operating Budget reflects the adjustment.

#### BUDGET VARIANCES

As of December 31, 2011, DADS is projecting an FY2012 deficit of \$243.0 million in All Funds (\$96.1 million in General Revenue Funds). Projected expenditures for Medicaid entitlement client services are based upon caseload forecasts prepared by HHSC in October 2011 and payment data through November 2011.

As a result of updated forecast, there was a significant change from September's annual projections to December's annual projections. The key differences are:

Current projections assumes a cost trend growth in strategies A.2.1 Primary Home Care (PHC);
 A.2.2 Community Attendant Services (CAS); 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); and A.6.1 Nursing Facility (NF), based upon expenditure data collected through November 2011. The September 2011 estimate only assumed cost growth for NFs.
- For CBA, since no additional slots were funded, a higher proportion of slots are being used by children aging out of the Medically Dependent Children Program (MDCP) waiver as well as the Comprehensive Care program. This population has higher costs than the average CBA population. For HCS, all of the new slots as well as the vast majority of replacement slots are being filled by individuals relocating out of ICFs or SSLCs. The bulk of these individuals go into residential settings, which are the higher cost settings.
- The waiver slots for Deaf-Blind Multiple Disabilities (DBMD) have been increased by eight above appropriated in order to meet maintenance-of effort requirements. The number of individuals served in Community Living Assistance & Support (CLASS) is projected to exceed appropriated level. The appropriated level was based upon the number of individuals being served in February 2011; however, for CLASS there were still many individuals "still in the pipeline" in February 2011.

#### VARIANCES DETAILED BY STRATEGIES

- Strategy A.2.1, Primary Home Care This strategy is now projected to have a positive variance of \$9.5 million in All Funds which includes \$4.0 million in General Revenue Funds. The variance relates to a decrease in the number of individuals served per month from 31,240, as found in HB 1, to the current forecast of 29,773, a difference of 1,467. This is partially offset by an increase in the average monthly cost per individual served from \$830.90 to the current forecast of \$842.46, a difference of \$11.56.
- Strategy A.2.2, Community Attendant Services This strategy is now projected to have a negative variance of \$4.8 million in All Funds which includes \$2.0 million in General Revenue Funds. The variance relates to the average monthly cost per individual served which increased from \$834.21 per month, as found in HB 1, to the current forecast of \$874.45, a difference of \$40.24. This is partially offset by a decrease in the average number of individuals served per month from 48,617 to the current forecast of 46,848, a difference of 1,769.
- Strategy A.2.3, Day Activity and Health Services This strategy is now projected to have a negative variance of \$2.0 million in All Funds, which includes \$0.8 million in General Revenue Funds. The variance relates to the average monthly cost per individual served which increased from \$526.50 per month as found in HB 1, to the current forecast of \$544.75, a difference of \$18.25. This is partially offset by a decrease in the average number of individuals served per month from 9,716 to 9,660, a difference of 56.

- Strategy A.3.1, Community Based Alternatives This strategy is projected to have a negative variance of \$24.6 million in All Funds which includes \$10.5 million in General Revenue Funds. The variance relates to the average monthly cost per individual served which increased from \$1,320.19 per month as found in HB 1, to the current forecast of \$1,456.00, a difference of \$135.81. The average number of individuals served per month remained the same at 14,616.
- Strategy A.3.2, Home and Community Based Services This strategy is projected to have a negative variance of \$27.2 million in All Funds which includes \$11.9 million in General Revenue Funds. The variance relates to the average monthly cost per individual served which increased from \$3,280.22 as found in HB 1, to the current forecast of \$3,414.55, a difference of \$134.33. The average monthly number of consumers served remained the same at 20,123.
- Strategy A.3.3, Community Living Assistance Support Services This strategy is projected to have a negative variance of \$14.9 million in All Funds which includes \$6.2 million in General Revenue Funds. The variance relates to the average monthly cost per individual served which increased from \$3,232.17 as found in HB 1, to the current forecast of \$3,345.15, a difference of \$112.98. The average monthly number of individuals served increased from 4,619 to 4,834, a difference of 215.
- Strategy A.3.7, Texas Home Living Waiver This strategy is projected to have a negative variance of \$1.7 million in All Funds which includes \$0.7 million in General Revenue Funds. The variance relates to the average monthly cost per individual served which increased from \$652.25 as found in HB 1, to the current forecast of \$678.07, a difference of \$25.82. The average monthly number of individuals served remained the same at 5,738.
- Strategy A.6.1, Nursing Facility Payments This strategy is projected to have a negative variance of \$174.2 million in All Funds which includes \$71.9 million in General Revenue Funds. The variance relates to the net nursing facility cost per Medicaid resident per month served which increased from \$2,981.92 per month as found in HB 1, to the current forecast of \$3,178.81, a difference of \$196.89. The average number of individuals served per month increased from 56,213 to 56,598, a difference of 385.
- Strategy A.6.2, Medicare Skilled Nursing Facility This strategy is projected to have a positive variance of \$11.5 million in All Funds which includes \$4.8 million in General Revenue Funds. The variance relates to the net payment per individual for co-paid Medicaid/Medicare nursing facility services per month which decreased from \$2,055.93 per month as found in HB 1, to the current forecast of \$2,029.26, a difference of \$26.67. The average number of individuals served per month decreased from 6,767 to 6,370, a difference of 397.

- Strategy A.6.3, Hospice This strategy is projected to have a positive variance of \$6.7 million in All Funds which includes \$2.8 million in General Revenue Funds. The variance relates to the average net payment for individuals serviced per month which increased from \$2,739.58 per month as found in HB 1, to the current forecast of \$2,773.05, a difference of \$33.47. The average number of individuals served per month decreased from 7,039 to 6,773, a difference of 266.
- Strategy A.6.4, Promoting Independence Services This strategy is projected to have a positive variance of \$2.8 million in All Funds which includes \$1.0 million in General Revenue Funds. The variance relates to the average monthly cost per individual served which decreased from \$1,487.75 per month as found in HB 1, to the current forecast of \$1,471.31, a difference of \$16.44. The average number of individuals served per month decreased from 6,318 to 6,301, a difference of 17.
- Strategy A.7.1, Intermediate Care Facilities (ICFs) This strategy is projected to have a negative variance of \$4.5 million in All Funds which includes \$1.7 million in General Revenue Funds. The variance relates to the monthly cost per ICF Medicaid eligible consumer served which decreased from \$4,360.27 per month as found in HB 1, to the current forecast of \$4,345.66, a difference of \$14.61. The average number of individuals served per month increased from 5,602 to 5,613, a difference of 11.
- Strategy A.8.1, State Supported Living Centers This strategy is projected to have a negative variance of \$13.5 million in All Funds which includes \$4.8 million in General Revenue Funds. The average monthly cost per ID campus resident served remained the same at \$14,107.11 per month as found in HB 1. The average monthly number of residents served per month remained the same at 3,831.

#### OTHER KEY BUDGET ISSUES

The following items have not been included in the current forecast, but may impact future projections:

- We did not reduce the cost containment savings estimate for the 90<sup>th</sup> percentile service cap (75<sup>th</sup> percentile for CLASS specialized therapies), although the ability of individuals to obtain health and safety exceptions may significantly reduce the amount of savings realized.
- No estimate of savings from Electronic Voice Verification has been included.
- The Social Security cost-of-living adjustment of 3.6 % in January 2012 will increase the amount of applied income, which will reduce the NF projections slightly. In addition, the actual Medicare SNF coinsurance rate for FY2012 rate was set at \$144.50 per day, compared to an estimated \$145.50 per day assumed for this estimate.

As already noted in the September MFR for FY2013, the DADS' Medicaid Entitlement programs are funded at 28 percent of the anticipated demand. The biennial budget deficit is now projected to be \$3.0 billion in All Funds which includes \$1.2 billion in General Revenue Funds. This current estimated shortfall does not include the amount related to House Bill 1, 82<sup>nd</sup> Legislature, 2012-13 General Appropriations Act (GAA), Art IX, Section 18.12, Additional Funding for Medicaid of \$112.9 million in GR, or the additional Federal revenue amount of \$45.2 million, as the result of the more favorable FMAP rate for FY2013, based on current House Bill 1 appropriations.

#### DADS will be requesting approval for the following:

- Request Budget and FTE transfer authority from the Department of Assistive and Rehabilitative Services (DARS) to DADS in accordance with Article II, Special Provisions, Section 10-Limitations on Transfer Authority related to health and human services (HHS) media service for DADS' strategy C.1.1 Central Administration.
- Request Budget transfer authority relating to the elimination of the Consolidated Waiver Program (Rider 35-Elimination of Consolidated Waiver Programs, Rider 9-Medicaid Transfer Authority, and Rider 34-Limits for waivers and Other Programs).
- Request transfer authority between strategies in FY2012 to offset deficit in client service within
  the existing appropriations (Rider 9-Medicaid Transfer Authority and Rider 34-Limits for
  waivers and Other Programs) estimated at \$32.0 million in All Funds (\$13.2 million in General
  Revenue Funds), for Strategies A.2.1 Primary Home Care (PHC); A.3.5 Medically Dependent
  Children Program (MDCP); A.6.2 Medicare Skilled Nursing Facility; A.6.3 Hospice; and A.6.4
  Promoting Independence Services.
- Request to carry-back funds from FY2013 to FY2012 to cover budget shortfalls in FY2012 and exemption from the \$50 million transfer limit (Rider 11-Appropriation Transfer between Fiscal Years, Rider 9-Medicaid Transfer Authority, and Rider 34-Limits for waivers and Other Programs) estimated at \$243.0 million in All Funds (\$96.1 million in General Revenue Funds). (See schedule 1).
- Request authority to exceed the appropriation in all waiver programs based on the latest forecast with the exception of Medically Dependent Children Program (MDCP) in order to maintain the performance level targets (Rider 34-Limits for waivers and Other Programs).

Mr. John O'Brien February 6, 2012 Page 6

Please let me know if you have any questions or need additional information. I will serve as the lead staff on this matter and can be reached by phone at (512) 438-3355 or by e-mail at gordon.taylor@dads.state.tx.us.

Sincerely,

Gordon Taylor

Chief Financial Officer

GT:rb

#### Enclosure

cc:

Chris Traylor, Commissioner

Tom Suehs, Executive Commissioner HHSC

Greta Rymal, Deputy Executive Commissioner HHSC

Jonathan Hurst, Director, Governor's Office of Budget, Planning and Policy

#### Department of Aging and Disability Services FY 2012 Attachment A: Budget Adjustments Data Through the End of December 2011

	General Revenue	GR - Dedicated	Federal	Other	Total
Adjustments to the FY 2012 Operating Budget:					
Appropriated Funds	\$2,518,949,139	\$62,061,125	\$3,613,620,416	\$23,889,249	\$6,218,519,929
Carry forward of SAS/CARE Capital authority from 2010-11	\$661,702	\$0	\$5,955,320	\$0	\$6,617,022
Federal Funds Adjustment	\$0	\$0	\$483,584	\$0	\$483,584
Federal Funds Adjustment - Relating to Program Transfers (1.8.1 to 2.1.1)	\$0	\$0	(\$2,208,189)	\$0	(\$2,208,189)
GR Certified Match for Medicaid reclassified to GR Match for Medicaid	(\$710,034)	\$0	\$0	\$0	(\$710,034)
GR Match for Medicaid reclassified from GR Certified Match for Medicaid	\$710,034	\$0	\$0	\$0	\$710,034
Program Transfer (Art. IX between Strategies not included in Rider 9)	\$0	\$0	\$0	\$0	\$0
Reductions from Appropriations for DCS	(\$145,837)	\$0	(\$205,155)	(\$9,813)	(\$360,805)
SB 102 Benefit Replacement Pay (BRP)	\$1,491,697	\$0	\$2,185,123	\$13,179	\$3,689,999
SB 223 - Relating to licensing, regulation HCSSA and Admin providing penalites	\$142,378	\$0	\$40,765	\$0	\$183,143
Revised Operating Budget, September 2011	\$2,521,099,079	\$62,061,125	\$3,619,871,865	\$23,892,615	\$6,226,924,684
Federal Funds Adjustment	\$0	\$0	(\$260,637)	\$0	(\$260,637)
Revised Operating Budget, October 2011	\$2,521,099,079	\$62,061,125	\$3,619,611,228	\$23,892,615	\$6,226,664,047
Federal Funds Adjustment	\$0	\$0	\$9,329,007	\$0	\$9,329,007
GR Certified Match for Medicaid reclassified to GR Match for Medicaid	\$710,034	\$0	\$0	\$0	\$710,034
GR Match for Medicaid reclassified from GR Certified Match for Medicaid	(\$710,034)	\$0	\$0	\$0	(\$710,034)
Program Transfer (Art. IX between Strategies not included in Rider 9)	\$0	\$0	\$0	\$0	\$0
Revised Operating Budget, November 2011	\$2,521,099,079	\$62,061,125	\$3,628,940,235	\$23,892,615	\$6,235,993,054
Federal Funds Adjustment	\$0	\$0	\$906,038	\$0	\$906,038
GR Match for Medicaid reclassified to GR	(\$527,494)	\$0	\$0	\$0	(\$527,494)
GR reclassified from GR Match for Medicaid	\$527,494	\$0	\$0	\$0	\$527,494
Revised Operating Budget, December 2011	\$2,521,099,079	\$62,061,125	\$3,629,846,273	\$23,892,615	\$6,236,899,092

ATTACHMENT A 7

### Department of Aging and Disability Services FY 2012 Monthly Financial Report: Strategy Budget and Variance, All Funds Data Through the End of December 2011

	Budget						
	Appropriated	Adjustments	Notes	Op Bgt.	Expend. YTD	Projected	Variance
A.1.1 Intake, Access and Eligibility to Services and Supports	\$184,877,580	(\$1,783,362)	A,B,F	\$183,094,218	\$55,844,334	\$183,094,218	\$0
A.1.2 Guardianship	\$6,995,223	\$25,675		\$7,020,898	\$2,324,024	\$7,020,898	\$0
A.2.1 Primary Home Care	\$311,484,070	(\$939,279)	В	\$310,544,791	\$172,612,214	\$301,000,985	\$9,543,806
A.2.2 Community Attendant Services (Formerly Frail Elderly)	\$486,682,976	\$135,757	В	\$486,818,733	\$160,789,621	\$491,608,960	(\$4,790,227)
A.2.3 Day Activity and Health Services (DAHS)	\$61,384,145	(\$244,003)	В	\$61,140,142	\$38,396,712	\$63,146,798	(\$2,006,656)
A.3.1 Community Based Alternatives (CBA)	\$231,542,467	(\$469,635)	В	\$231,072,832	\$120,345,163	\$256,224,298	(\$25,151,466)
A.3.2 Home and Community Based Services (HCS)	\$792,081,944	\$6,957,481	В	\$799,039,425	\$268,316,488	\$824,531,876	(\$25,492,451)
A.3.3 Community Living Assistance & Support Services (CLASS)	\$179,152,968	\$37,402		\$179,190,370	\$64,966,803	\$194,047,085	(\$14,856,715)
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)	\$7,371,823	\$1,453	В	\$7,373,276	\$2,400,353	\$7,920,513	(\$547,237)
A.3.5 Medically Dependent Children Program (MDCP)	\$41,946,865	\$8,433	В	\$41,955,298	\$13,616,506	\$41,599,962	\$355,336
A.3.6 Consolidated Waiver Program	\$3,780,346	\$746		\$3,781,092	\$1,004,523	\$3,998,939	(\$217,847)
A.3.7 Texas Home Living Waiver	\$44,911,397	\$8,853	В	\$44,920,250	\$9,361,620	\$46,689,156	(\$1,768,906)
A.4.1 Non-Medicaid Services	\$145,516,181	\$0		\$145,516,181	\$48,424,104	\$149,018,223	(\$3,502,042)
A.4.2 Mental Retardation Community Services	\$75,000,000	\$0		\$75,000,000	\$50,710,905	\$72,886,544	\$2,113,456
A.4.3 Promoting Independence Plan	\$4,818,281	(\$301,006)	В	\$4,517,275	\$1,019,299	\$4,517,275	\$0
A.4.4 In-Home and Family Support	\$4,989,907	\$0		\$4,989,907	\$1,580,233	\$4,989,907	\$0
A.5.1 Program of All-inclusive Care for the Elderly (PACE)	\$37,550,176	\$9,559		\$37,559,735	\$11,644,790	\$37,535,814	\$23,921
A.6.1 Nursing Facility Payments	\$2,011,480,976	\$1,719,008	B,E	\$2,013,199,984	\$734,120,435	\$2,194,937,238	(\$181,737,254)
A.6.2 Medicare Skilled Nursing Facility	\$166,956,355	\$66,690		\$167,023,045	\$47,325,436	\$154,557,185	\$12,465,860
A.6.3 Hospice	\$231,407,223	\$55,507		\$231,462,730	\$73,145,107	\$224,663,837	\$6,798,893
A.6.4 Promoting Independence Services	\$112,790,001	\$1,276,937		\$114,066,938	\$38,251,353	\$111,250,315	\$2,816,623
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	\$293,123,363	(\$2,838,090)		\$290,285,273	\$97,855,736	\$292,516,981	(\$2,231,707)
A.8.1 State Supported Living Centers (SSLC)	\$648,574,310	\$1,476,228	A,B	\$650,050,538	\$215,810,712	\$664,908,078	(\$14,857,540)
A.9.1 Capital Repairs and Renovations	\$352,186	\$0		\$352,186	\$156,308	\$352,186	\$0
Subtotal, Goal A: Long Term Services and Supports	\$6,084,770,763	\$5,204,353		\$6,089,975,116	\$2,230,022,779	\$6,333,017,271	(\$243,042,155)
B.1.1 Facility and Community-Based Regulation	\$62,510,903	\$9,281,508		\$71,792,411	\$26,269,741	\$71,792,411	\$0
B.1.2 Credentialing/Certification	\$1,274,532	(\$5,007)		\$1,269,525	\$380,562	\$1,269,525	\$0
B.1.3 Quality Outreach	\$5,080,203	\$625,676	A,B	\$5,705,879	\$2,093,774	\$5,705,880	\$0
Subtotal, Goal B: Regulation, Certification and Outreach	\$68,865,638	\$9,902,177		\$78,767,815	\$28,744,077	\$78,767,816	(\$1)
C.1.1 Central Administration	\$29,904,976	\$1,764,217	A,B	\$31,669,193	\$11,463,124	\$31,669,193	\$0
C.1.2 Information Technology Program Support	\$34,978,552	\$1,508,416	A,B,D	\$36,486,968	\$14,059,772	\$36,486,968	\$0
Subtotal, Goal C: Indirect Administration	\$64,883,528	\$3,272,632		\$68,156,160	\$25,522,897	\$68,156,161	\$0
GRAND TOTAL, DADS	\$6,218,519,929	\$18,379,163		\$6,236,899,092	\$2,284,289,753	\$6,479,941,247	(\$243,042,156)
Method of Finance:							
General Revenue	\$2,518,949,139	\$2,149,940		\$2,521,099,079	\$952,748,007	\$2,617,209,338	(\$96,110,259)
General Revenue-Dedicated	\$62,061,125	\$2,149,540		\$62,061,125	\$5,351,851	\$62,061,125	¢Ω.
Subtotal, GR-Related	\$2,581,010,264	\$2,149,940		\$2,583,160,204	\$958,099,858	\$2,679,270,463	(\$96,110,259)
Federal Funds	\$3,613,620,416	\$16,225,857		\$3,629,846,273	\$1,317,578,375	\$3,776,778,169	(\$146,931,896)
Other Funds	\$23,889,249	\$3,366		\$23,892,615	\$8,611,519	\$23,892,615	\$0
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TOTAL, ALL Funds	\$6,218,519,929	\$18,379,163		\$6,236,899,092	\$2,284,289,753	\$6,479,941,247	(\$243,042,156)

#### Notes:

A. SB 102 Benefit Replacement Pay (BRP)

B. Federal Funds Adjustment

C. Art IX Sec. 18.65, Contingency for SB 223 (2012-13 GAA)

D. Art IX Sec 17.01, Data Center Services Reductions (2012-13 GAA)

E. Art II, Rider 42, Unexpended Balance Authority for SAS/CARE Consolidation Project (2012-13 GAA)

F. Art IX Sec 8.02, Fed Funds/Block Grants(2012-13 GAA) ARRA Chronic Disease Management Program

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

	Appropriated	Adjusted Cap	Budgeted	Filled Avg YTD	Filled Monthly
A.1.1 Intake, Access and Eligibility to Services and Supports	1,681.3	0.0	1,681.3	1,660.9	1,648.0
A.1.2 Guardianship	108.0	0.0	108.0	101.8	102.9
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	29.5	29.0
A.8.1 State Supported Living Centers (SSLC)	14,200.4	0.0	14,200.4	13,315.6	13,254.8
A.9.1 Capital Repairs and Renovations					
Subtotal, Goal A: Long Term Services and Supports	16,018.7	0.0	16,018.7	15,108.1	15,034.8
B.1.1 Facility and Community-Based Regulation	1,079.5	0.0	1,079.5	1,037.3	1,043.1
B.1.2 Credentialing/Certification	27.0	0.0	27.0	28.0	27.9
B.1.3 Quality Outreach	74.0	2.0	76.0	63.5	65.1
Subtotal, Goal B: Regulation, Certification and Outreach	1,180.5	2.0	1,182.5	1,128.8	1,136.2
C.1.1 Central Administration	365.4	0.0	365.4	366.6	361.1
C.1.2 Information Technology Program Support	97.8	0.0	97.8	115.1	111.2
C.1.3 Other Support Services	0.0	0.0			
Subtotal, Goal C: Indirect Administration	463.2	0.0	463.2	481.7	472.3
GRAND TOTAL, DADS	17,662.4	2.0	17,664.4	16,718.6	16,643.3

9

SCHEDULE 2

## Department of Aging and Disability Services FY 2012 Monthly Financial Report: Agency Budget and Variance, Detailed MOF Data Through the End of December 2011

Method of Finance	ABEST Code/CFDA	Appropriated	Adjustments	Op Budget	Expend YTD	Projected	Variance
General Revenue	0001	148,625,478	818,449	149,443,927	73,198,349	145,540,140	3,903,787
GR-Match for Medicaid	0758	2,128,893,990	642,215	2,129,536,205	794,098,725	2,224,456,697	(94,920,492)
Earned Federal Funds	0888	0	0 12,213	0	0	0	(5 1,520, 152)
GR for Fed Funds (OAA)	8004	4,282,380	ő	4,282,380	8,397	4,282,380	ام
GR Cert Match - Medicaid	8032	237,147,291	689,276	237,836,567	85,442,536	242,930,121	(5,093,554)
80R SUPP: General Revunue Fund	8890	257,117,251	005,270	257,050,507	05,112,550	212,330,121	(3,033,331)
80R SUPP: GR Match for Medicaid	8891	١	٥	ν Λ	Λ	ار	0
81R SUPP: General Revenue Fund	8900	Ν̈́	١	ň	Ν̈́	ار	٥
81R SUPP: GR Match for Medicaid	8901	Ν̈́	o l	ام	ام	ار	0
Subtotal, General Revenue	0901	2,518,949,139	2,149,940	2,521,099,079	952,748,007	2,617,209,338	(96,110,259)
GR Ded-Tx Capital TF	0543	289,803	0	289,803	138,546	289,803	0
GR Ded-HCSSA	5018	1,948,343	ő	1,948,343	639,497	1,948,343	ő
Special Olympic Lic Plate	5055	1,500	ő	1,500	033,137	1,500	ő
GR Ded - OAF	5080	59,821,479	ő	59,821,479	4,573,808	59,821,479	ő
Subtotal, General Revenue-Dedicated	3000	62,061,125	Ö	62,061,125	5,351,851	62,061,125	<u> </u>
Subtotal, GR-Related		2,581,010,264	2,149,940	2,583,160,204	958,099,858	2,679,270,463	(96,110,259)
XIX ADM 50%	93.778.003	40,354,169	6,116,282	46,470,451	18,672,548	46,470,320	131
IXIXADM 75%	93.778.003	19,042,420	(995,197)	18,047,223	6,455,903	19,015,246	(968,023)
IXIXADM 90%	93.778.004	76,500	3,813,984	3,890,484	250,138	3,497,187	393,296
IXIX Stimulus	93.778.014	70,300	3,013,904	3,090,404	250,136	3, <del>4</del> 97,107	393,290
IXIX FMAP	93.778.014	2 241 017 220	(10,000,222)	3,330,318,896	1,207,978,065	2 471 550 202	(141 220 407)
Federal Funds-FY 12-13 demand		3,341,017,228	(10,698,332)	3,330,318,890	1,207,978,005	3,471,558,303	(141,239,407)
	93.778.000	88,840,273	100 225	00 040 500	25 224 704	00 040 500	0
Title XX	93.667.000	88,840,273	109,235	88,949,508	35,331,781	88,949,508	U O
Title XX Ike Transportation Food Distribution	93.667.000 10.550.000	U	U	U O	ار	ال	U
School Breakfast Program	10.553.000	0	0	١	١	٥	0
National School Lunch Program	10.555.000	0	113,575	113,575	37,860	113,575	0
Child & Adult Care Food Program	10.558.000	٥	113,3/3	113,3/3	37,000	113,3/3	0
TITLE XVIII	93.777.000	27,692,377	82,419	27,774,796	9,696,892	27,774,797	0
SUR&C-75%	93.777.000	17,407,153	4,708,562	22,115,715	8,043,709	22,115,715	0
Foster Grandparent Pgm	94.011.000			2,095,068		1,956,863	138,205
	93.779.000	2,088,893 2,346,700	6,175		652,295		(106,653)
CMS Res, Demo, & Eval Spc Svcs Aging-VII3	93.041.000	377,737	10,084,275 0	12,430,975 377,737	9,841,585 60,094	12,537,628 322,392	55,345
Spc Svcs Aging-VII3	93.042.000	973,603	0	973,603	137,951	973,603	33,343
Spc Svcs Aging-VII2	93.043.000	1,334,413	0	1,334,413	436,843	1,297,167	37,246
Spc Svcs Aging IIID	93.044.000	23,154,603	38,593	23,193,196	5,273,753	21,777,070	1,416,126
Spc Svcs Aging-IIIC	93.045.000	28,145,487	(112,843)	28,032,644	9,804,713	33,951,946	(5,919,301)
Spc Svcs Aging-IIIC Spc Svcs Aging-Discretionary	93.048.000	469,800	120,379	590,179	115,265	569,191	20,988
Natl Family Caregiver	93.052.000	9,325,188	16,222	9,341,410	2,524,583	8,864,335	477,075
Nutrition Svcs Incentive	93.053.000	10,973,872	10,222	10,973,872	1,794,960	12,210,795	(1,236,923)
Public Assist-FEMA	93.076.000	10,973,072	o l	10,973,072	1,754,500	12,210,793	(1,230,923)
ARRA AoA Grant to AAA's	93.725.000	٥	415,304	415,304	144,538	415,304	0
Home Delivered Meals-Title IIIC2	93.705.000	ام	U 113,304	713,30 <del>1</del>	ام	713,304	ام
MIDR AoA	93.071.000	0	0	٥	١	٥١	١
MIPPA AOA	93.071.000	0	0	١	ار	0	0
MIPPA AOA MIPPA AOA Grants	93.518.000	0	813,438	813,438	111 425	813,438	0
MIPPA AOA Grants MIPPA AoA Grants	93.518.000	ol Ol	727,815		111,435 85.652	727,815	ν]
MIPPA AOA GRANIS IMIPPA CMS	93.779.000	U O	672,460	727,815 672,460	97,731	672,460	١
IMMSEA CMS	93.779.000	0	072,460	072,460	97,731	0/2,400	0
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SCHEDULE 3 10

# Department of Aging and Disability Services FY 2012 Monthly Financial Report: Agency Budget and Variance, Detailed MOF Data Through the End of December 2011

Method of Finance	ABEST Code/CFDA	Appropriated	Adjustments	Op Budget	Expend YTD	Projected	Variance
Respite AoA	93.072.000	0	193,511	193,511	30,080	193,511	0
Congregate Meals-Title IIIC1	93.707.000	0	0	0	0	0	0
FEMA Hurricane	97.036.000	0	0	0	0	0	0
Subtotal, Federal Funds		3,613,620,416	16,225,857	3,629,846,273	1,317,578,375	3,776,778,169	(146,931,896)
Appropriated Receipts	0666	2,150,393	(1,776)	2,148,617	784,110	2,148,618	0
MR Collections	8095	17,266,929	4,282	17,271,211	6,033,306	17,271,211	0
MR Approp Recpts	8096	754,450	859	755,309	260,320	755,309	0
MR Medicare Recpts	8097	0	0	0	0	0	0
MR Revolving Fund	8098	82,160	0	82,160	0	82,160	0
Interagency Contracts	0777	3,635,317	0	3,635,317	1,533,783	3,635,317	0
Bond Proceeds-7605	0780	0	0	0	0	0	0
Bond Proceeds-7616	0780	0	0	0	0	0	0
Bond Proceeds-7620	0780	0	0	0	0	0	0
Bond Proceeds-7631	0780	0	0	0	0	0	0
Bond Proceeds-7210	0780	0	0	0	0	0	0
Bond Proceeds-7644	0780	0	0	0	0	0	0
Bond Proceeds-9999	0780	0	0	0	0	0	0
Medicare Part D Receipts	8115	0	0	0	0	0	0
Subtotal, Other Funds		23,889,249	3,366	23,892,615	8,611,519	23,892,615	0
GRAND TOTAL, ALL FUNDS		6,218,519,929	18,379,163	6,236,899,092	2,284,289,753	6,479,941,247	(243,042,156)

SCHEDULE 3 11

# Department of Aging and Disability Services FY 2012 Monthly Financial Report: Strategy Projections by MOF Data Through the End of December 2011

					Federal				
		GR	GR-D	93.778.000	93.667.000	Other CFDA	Subtotal, FF	Other Funds	All Funds
	Intake, Access and Eligibility to Services and Supports	\$74,111,985	\$0	\$75,376,001	\$6,582,724	\$25,730,882	\$107,689,607	\$1,292,625	\$183,094,218
A.1.2	Guardianship	\$0	\$0	\$0	\$7,020,898	\$0	\$7,020,898	\$0	\$7,020,898
A.2.1	Primary Home Care	\$125,156,210	\$0	\$175,844,775	\$0	\$0	\$175,844,775	\$0	\$301,000,985
A.2.2	Community Attendant Services (Formerly Frail Elderly)	\$204,411,006	\$0	\$287,197,954	\$0	\$0	\$287,197,954	\$0	\$491,608,960
A.2.3	Day Activity and Health Services (DAHS)	\$26,256,439	\$0	\$36,890,359	\$0	\$0	\$36,890,359	\$0	\$63,146,798
A.3.1	Community Based Alternatives (CBA)	\$106,609,494	\$0	\$149,614,804	\$0	\$0	\$149,614,804	\$0	\$256,224,298
A.3.2	Home and Community Based Services (HCS)	\$341,164,284	\$0	\$476,981,757	\$0	\$6,385,835	\$483,367,592	\$0	\$824,531,876
A.3.3	Community Living Assistance & Support Services (CLASS)	\$80,684,778	\$0	\$113,362,307	\$0	\$0	\$113,362,307	\$0	\$194,047,085
A.3.4	Deaf-Blind Multiple Disabilities (DBMD)	\$3,293,349	\$0	\$4,627,164	\$0	\$0	\$4,627,164	\$0	\$7,920,513
A.3.5	Medically Dependent Children Program (MDCP)	\$17,297,264	\$0	\$24,302,698	\$0	\$0	\$24,302,698	\$0	\$41,599,962
A.3.6	Consolidated Waiver Program	\$1,662,759	\$0	\$2,336,180	\$0	\$0	\$2,336,180	\$0	\$3,998,939
A.3.7	Texas Home Living Waiver	\$19,413,351	\$0	\$27,275,805	\$0	\$0	\$27,275,805	\$0	\$46,689,156
A.4.1	Non-Medicaid Services	\$14,255,746	\$0	\$0	\$74,645,861	\$60,116,616	\$134,762,477	\$0	\$149,018,223
A.4.2	Mental Retardation Community Services	\$72,885,044	\$1,500	\$0	\$0	\$0	\$0	\$0	\$72,886,544
A.4.3	Promoting Independence Plan	\$2,713,698	\$0	\$0	\$0	\$1,146,833	\$1,146,833	\$656,744	\$4,517,275
A.4.4	In-Home and Family Support	\$4,989,907	\$0	\$0	\$0	\$0	\$0	\$0	\$4,989,907
A.5.1	Program of All-inclusive Care for the Elderly (PACE)	\$15,607,391	\$0	\$21,928,423	\$0	\$0	\$21,928,423	\$0	\$37,535,814
A.6.1	Nursing Facility Payments	\$914,732,320	\$0	\$1,280,204,918	\$0	\$0	\$1,280,204,918	\$0	\$2,194,937,238
A.6.2	Medicare Skilled Nursing Facility	\$64,264,878	\$0	\$90,292,307	\$0	\$0	\$90,292,307	\$0	\$154,557,185
A.6.3	Hospice	\$93,415,223	\$0	\$131,248,614	\$0	\$0	\$131,248,614	\$0	\$224,663,837
A.6.4	Promoting Independence Services	\$45,803,242	\$0	\$63,714,896	\$0	\$1,732,177	\$65,447,073	\$0	\$111,250,315
A.7.1	Intermediate Care Facilities - Mental Retardation (ICF/MR)	\$94,774,017	\$26,821,479	\$170,851,428	\$0	\$0	\$170,851,428	\$70,057	\$292,516,981
A.8.1	State Supported Living Centers (SSLC)	\$245,463,373	\$33,000,000	\$365,759,629	\$0	\$2,070,438	\$367,830,067	\$18,614,637	\$664,908,078
A.9.1	Capital Repairs and Renovations	\$62,383	\$289,803	\$0	\$0	\$0	\$0	\$0	\$352,186
Subto	tal, Goal A: Long Term Services and Supports	\$2,569,028,141	\$60,112,782	\$3,497,810,019	\$88,249,483	\$97,182,782	\$3,683,242,284	\$20,634,064	\$6,333,017,271
B.1.1	Facility and Community-Based Regulation	\$19,002,118	\$1,948,343	\$4,027,621	\$0	\$46,814,329	\$50,841,950	\$0	\$71,792,411
B.1.2	Credentialing/Certification	\$866,364	\$0	\$102,429	\$0	\$300,733	\$403,161	\$0	\$1,269,525
B.1.3	Quality Outreach	\$530,320	\$0	\$3,841,768	\$0	\$0	\$3,841,768	\$1,333,792	\$5,705,880
Subto	tal, Goal B: Regulation, Certification and Outreach	\$20,398,802	\$1,948,343	\$7,971,817	\$0	\$47,115,061	\$55,086,879	\$1,333,792	\$78,767,816
C.1.1	Central Administration	\$12,535,906	\$0	\$16,164,969	\$375,601	\$1,252,736	\$17,793,306	\$1,339,981	\$31,669,193
C.1.2	Information Technology Program Support	\$15,246,488	\$0	\$18,594,251	\$324,424	\$1,737,026	\$20,655,701	\$584,778	\$36,486,968
Subto	tal, Goal C: Indirect Administration	\$27,782,394	\$0	\$34,759,220	\$700,025	\$2,989,762	\$38,449,007	\$1,924,759	\$68,156,161
GRAN	D TOTAL, DADS	\$2,617,209,338	\$62,061,125	\$3,540,541,057	\$88,949,508	\$147,287,605	\$3,776,778,169	\$23,892,615	\$6,479,941,247

SCHEDULE 4 12

# Department of Aging and Disability Services FY 2012 Monthly Financial Report: Strategy Variance by MOF Data Through the End of December 2011

					Federal Funds				
		GR	GR-D	93.778.000	93.667.000	Other CFDA	Subtotal, FF	Other Funds	All Funds
A.1.1	Intake, Access and Eligibility to Services and Supports	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A.1.2	Guardianship	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A.2.1	Primary Home Care	\$3,968,314	\$0	\$5,575,492	\$0	\$0	\$5,575,492	\$0	\$9,543,806
A.2.2	Community Attendant Services (Formerly Frail Elderly)	(\$1,991,777)	\$0	(\$2,798,450)	\$0	\$0	(\$2,798,450)	\$0	(\$4,790,227)
A.2.3	Day Activity and Health Services (DAHS)	(\$834,368)	\$0	(\$1,172,288)	\$0	\$0	(\$1,172,288)	\$0	(\$2,006,656)
A.3.1	Community Based Alternatives (CBA)	(\$10,457,981)	\$0	(\$14,693,486)	\$0	\$0	(\$14,693,486)	\$0	(\$25,151,466)
A.3.2	Home and Community Based Services (HCS)	(\$11,728,259)	\$0	(\$14,123,350)	\$0	\$359,158	(\$13,764,192)	\$0	(\$25,492,451)
A.3.3	Community Living Assistance & Support Services (CLASS)	(\$6,177,422)	\$0	(\$8,679,293)	\$0	\$0	(\$8,679,293)	\$0	(\$14,856,715)
A.3.4	Deaf-Blind Multiple Disabilities (DBMD)	(\$227,541)	\$0	(\$319,696)	\$0	\$0	(\$319,696)	\$0	(\$547,237)
A.3.5	Medically Dependent Children Program (MDCP)	\$147,749	\$0	\$207,587	\$0	\$0	\$207,587	\$0	\$355,336
A.3.6	Consolidated Waiver Program	(\$90,581)	\$0	(\$127,266)	\$0	\$0	(\$127,266)	\$0	(\$217,847)
A.3.7	Texas Home Living Waiver	(\$735,511)	\$0	(\$1,033,395)	\$0	\$0	(\$1,033,395)	\$0	(\$1,768,906)
A.4.1	Non-Medicaid Services	\$1,647,402	\$0	\$0	\$0	(\$5,149,444)	(\$5,149,444)	\$0	(\$3,502,042)
A.4.2	Mental Retardation Community Services	\$2,113,456	\$0	\$0	\$0	\$0	\$0	\$0	\$2,113,456
A.4.3	Promoting Independence Plan	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A.4.4	In-Home and Family Support	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A.5.1	Program of All-inclusive Care for the Elderly (PACE)	\$9,947	\$0	\$13,974	\$0	\$0	\$13,974	\$0	\$23,921
A.6.1	Nursing Facility Payments	(\$74,981,831)	\$0	(\$106,755,423)	\$0	\$0	(\$106,755,423)	\$0	(\$181,737,254)
A.6.2	Medicare Skilled Nursing Facility	\$5,183,304	\$0	\$7,282,556	\$0	\$0	\$7,282,556	\$0	\$12,465,860
A.6.3	Hospice	\$2,826,980	\$0	\$3,971,913	\$0	\$0	\$3,971,913	\$0	\$6,798,893
A.6.4	Promoting Independence Services	\$1,099,236	\$0	\$2,183,198	\$0	(\$465,811)	\$1,717,387	\$0	\$2,816,623
A.7.1	Intermediate Care Facilities - Mental Retardation (ICF/MR)	(\$924,009)	\$0	(\$1,307,698)	\$0	\$0	(\$1,307,698)	\$0	(\$2,231,707)
A.8.1	State Supported Living Centers (SSLC)	(\$4,957,367)	\$0	(\$10,038,380)	\$0	\$138,205	(\$9,900,174)	\$1	(\$14,857,540)
A.9.1	Capital Repairs and Renovations	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Sub	total, Goal A: Long Term Services and Supports	(\$96,110,258)	\$0	(\$141,814,005)	\$0	(\$5,117,892)	(\$146,931,897)	\$1	(\$243,042,155)
B.1.1	Facility and Community-Based Regulation	(\$1)	\$0	\$0	\$0	\$0	\$0	\$0	\$0
B.1.2	Credentialing/Certification	\$0	\$0	\$1	\$0	\$0	\$0	\$0	\$0
B.1.3	Quality Outreach	\$0	\$0	\$0	\$0	\$0	\$0	(\$1)	\$0
Sub	total, Goal B: Regulation, Certification and Outreach	(\$1)	\$0	\$2	\$0	(\$1)	\$1	(\$1)	(\$1)
C.1.1	Central Administration	\$0	\$0	\$0	\$0	(\$1)	\$0	\$0	\$0
C.1.2	Information Technology Program Support	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Sub	total, Goal C: Indirect Administration	\$0	\$0	\$0	\$0	(\$1)	\$0	\$0	\$0
GRAN	D TOTAL, DADS	(\$96,110,259)	\$0	(\$141,814,003)	\$0	(\$5,117,893)	(\$146,931,896)	\$0	(\$243,042,156)

SCHEDULE 5 13

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

	Dec 11	FY12 Year to Date as of 12/31/11
Beginning Balance, 12/01/11	0	0
Reductions: Expended	0	0
Total Reductions	0	0
Ending Balance, 12/31/11	0	0

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

	Dec 11	FY12 Year to Date as of 12/31/11
Beginning Balance, 12/01/11	6,750	6,750
Increases: 3321 Oil Royaltie	10,015	10,015
3746 Rental of Lan 3851 Int-State Dep&Treas Inv-Gener	2,250 2,579	9,000 2,579
Total Increases	14,844	21,594
Reductions: Expended	0	0
Total Reductions	0	0
Ending Balance, 12/31/11	21,594	21,594

#### Department of Aging and Disability Services 0666 - Appropriated Receipts Data Through the End of December 2011

Beginning Balance, 12/01/11	Dec 11 0	FY12 Year to Date as of 12/31/11 0
Increases: 3557 Health Care Facilities Fee 3560 Medical Exam & Registratio 3719 Fees for Copies, Fil Re	162,085 14,964 15	529,070 67,216 746
Total Increases	177,064	597,032
Reductions: Expended	177,064	597,032
Total Reductions	177,064	597,032
Ending Balance, 12/31/11	0	0

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

Beginning Balance, 12/01/11	Dec 11 0	FY12 Year to Date as of 12/31/11 0
Increases: 3557 Health Care Facilities Fee 3770 Administrative Penaltie 3851 Int-State Dep&Treas Inv-Gener	5,327,211 2,574 66,039	16,541,150 8,666 66,039
Total Increases	5,395,824	16,615,855
Reductions: Expended	5,395,824	16,615,855
Total Reductions	5,395,824	16,615,855
Ending Balance, 12/31/11	0	0

17

SCHEDULE 6

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

Beginning Balance, 12/01/11	Dec 11 0	FY12 Year to Date as of 12/31/11 0
Reductions: Expended	0	0
Total Reductions	0	0
Ending Balance, 12/31/11	0	0

#### Department of Aging and Disability Services 8095 - SMT Data Through the End of December 2011

	Dec 11	FY12 Year to Date as of 12/31/11
Beginning Balance, 12/01/11	0	0
Increases:		
3606 Support/Maint of Patient 3618 Welfare/MHMR service fee	2,353,853 125	7,079,709 440
Total Increases	2,353,978	7,080,149
Reductions:		
Expended	2,353,978	7,080,149
Total Reductions	2,353,978	7,080,149
Ending Balance, 12/31/11	0	0

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

	Dec 11	FY12 Year to Date as of 12/31/11
Beginning Balance, 12/01/11	0	0
Increases:		
3719 Fees for Copies, Fil Re	0	619
3753 Sale of Surplus Property Fe	134	290
3767 Supply, Equip, Service-Fed/Othe	10,339	91,197
3802 Reimbursements-Third Part	1,220	4,563
3806 Rental Of Housing To State Em	16,947	56,730
Total Increases	28,640	153,399
Reductions:		
Expended	28,640	153,399
Total Reductions	28,640	153,399
Ending Balance, 12/31/11	0	0

20

SCHEDULE 6

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

	Dec 11	FY12 Year to Date as of 12/31/11
Beginning Balance, 12/01/11	0	0
Increases:		
3765 Sales Of Supplies/Equipment/S	51	401
3767 Supply,Equip,Service-Fed/Othe	20,455	31,753
Total Increases	20,506	32,154
Reductions:		
Expended	20,506	32,154
Total Reductions	20,506	32,154
Ending Balance, 12/31/11	0	0

21

SCHEDULE 6

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

Beginning Balance, 12/01/11	0	FY12 Year to Date as of 12/31/11 0	
Reductions: Expended	0	0	
Total Reductions	0	0	
Ending Balance, 12/31/11	0	0	

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

Beginning Balance, 12/01/11	Dec 11 1,686,747	FY12 Year to Date as of 12/31/11 1,686,747
Increases: 3702 Federal Receipts-Earned Credi 3851 Int-State Dep&Treas Inv-Gener 3965 Cash Transf Btn Fnds/Accts-Me	648 4,573 637,634	1,296 18,625 2,309,681
Total Increases	642,855	2,329,602
<b>Reductions:</b> Expended	0	0
Total Reductions	0	0
Ending Balance, 12/31/11	2,329,602	2,329,602

23

SCHEDULE 6

## Department of Aging and Disability Services FY 2012 Monthly Financial Report: Capital Projects Data Through the End of December 2011

	Budget						
	Appropriated	Adjustments	Notes	Op Bgt.	Expend. YTD	Projected	Variance
Capital Projects in Capital Rider							
Community Services DataBase Portal Design	\$1,500,000	\$0		\$1,500,000	\$0	\$1,500,000	\$0
Data Center Consolidation	\$3,598,640	\$0		\$3,598,640	\$857,766	\$3,598,640	\$0
Lease of Personal Computers	\$3,965,874	\$0		\$3,965,874	\$668,105	\$3,965,874	\$0
Messaging & Collaboration	\$1,605,939	\$0		\$1,605,939	\$0	\$1,605,939	\$0
Payment of MLPP-Transportation	\$271,914	\$0		\$271,914	\$0	\$271,914	\$0
Payment of MLPP-Utility Savings	\$3,305,939	\$0		\$3,305,939	\$0	\$3,305,939	\$0
Repairs & Renovations	\$3,352,186	\$0		\$3,352,186	\$632,989	\$3,352,186	\$0
Replacement of Transportation Items	\$1,271,365	\$0		\$1,271,365	\$0	\$1,271,365	\$0
SAS/CARE Consolidation	\$4,909,368	\$1,707,654	Α	\$6,617,022	\$153,218	\$6,617,022	\$0
Security Improvements	\$290,000	\$0		\$290,000	\$0	\$290,000	\$0
Software Licenses	\$1,701,400	\$0		\$1,701,400	\$0	\$1,701,400	\$0
Telecommunications Enhancements	\$1,082,445	\$0		\$1,082,445	\$0	\$1,082,445	\$0
GRAND TOTAL	\$26,855,070	\$1,707,654		\$28,562,724	\$2,312,078	\$28,562,724	\$0
Method of Finance:							
General Revenue	\$13,681,291	\$170,765		\$14,029,689	\$1,318,170	\$14,029,689	\$0
General Revenue-Dedicated	\$289,803	\$0		\$289,802	\$0	\$289,802	\$0
Subtotal, GR-Related	\$13,971,094	<i>\$170,765</i>		\$14,319,491	<i>\$1,318,170</i>	<i>\$14,319,491</i>	\$0
Federal Funds	\$12,587,332	\$1,536,889		\$13,939,950	\$972,301	\$13,939,950	\$0
Other Funds	\$296,644	\$0		\$303,283	\$21,607	\$303,283	\$0
TOTAL, All Funds	\$26,855,070	\$1,707,654		\$28,562,724	\$2,312,078	\$28,562,724	\$0

#### Notes:

**A.** The FY2012 SAS/CARE Consolidation Project operating budget was updated with current data and was adjusted accordingly. The revised amount of \$6,617,002 reflects the amount DADS submitted in a letter dated October 3, 2011 to the LBB/GOBPP, pursuant to Rider 42, House Bill 1, 82nd Legislature, 2012-13 General Appropriations Act (GAA).

SCHEDULE 7 24

# Department of Aging and Disability Services FY 2012 Monthly Financial Report: Select Performance Measures Data Through the End of December 2011

Measure	HB 1	FY 2012 YTD Actual	FY 2012 Projected	Variance (HB 1 vs. Projected)
Primary Home Care				
Avg. # of clients served per month	31240	48957	29773	1467
Avg. cost per month	\$830.90	\$879.64	\$842.46	(\$11.56)
CAS				
Avg. # of clients served per month	48617	46637	46848	1769
Avg. cost per month	\$834.21	\$859.26	\$874.45	(\$40.24)
DAHS				
Avg. # of clients served per month	9716	17742	9660	56
Avg. cost per month	\$526.50	\$541.05	\$544.75	(\$18.25)
CBA Waiver				
Average # of CBA clients served per month	14616	19129	14616	0
Average Monthly Cost of CBA Clients	\$1,320.19	\$1,568.60	\$1,456.00	(\$135.81)
HCS Waiver				
Average Monthly Number of Consumers Served in the HCS Waiver Program	20123	19836	20123	0
Average Monthly Cost Per Consumer Served in the HCS Waiver Program	\$3,280.22	\$3,381.69	\$3,414.55	(\$134.33)
CLASS Waiver				
Average # of CLASS Waiver clients served per month	4619	4702	4834	(215)
Average Monthly Cost of CLASS Waiver Clients	\$3,232.17	\$3,454.31	\$3,345.15	(\$112.98)
DBMD Waiver				
Average # of DBMD Waiver clients served per month	148	146	156	(8)
Average Monthly Cost of DBMH clients	\$4,150.80	\$4,103.17	\$4,231.04	(\$80.24)
MDCP Waiver				
Average # of MDCP clients served per month	2380	2311	2380	0
Average Monthly Cost of MDCP clients	\$1,468.73	\$1,472.82	\$1,456.57	\$12.16
Consolidated Waiver Program				
Average # of CWP clients served per month	154	110	154	0
Average Monthly Cost of CWP clients	\$2,045.64	\$2,282.27	\$2,163.75	(\$118.11)
TxHmL Waiver				
Average Monthly Number of Consumers Served in the TxHmL Waiver Program	5738	3264	5738	0
Average Monthly Cost Per Consumer Served in the TxHmL Waiver Program	\$652.25	\$716.98	\$678.07	(\$25.82)

# Department of Aging and Disability Services FY 2012 Monthly Financial Report: Select Performance Measures Data Through the End of December 2011

Measure	HB 1	FY 2012 YTD Actual	FY 2012 Projected	Variance (HB 1 vs. Projected)
Non-Medicaid Services - Title XX				
Average number of clients served per month: Non-Medicaid Community Care (XX)	35377	34902	32985	2392
Average monthly cost per client served: Non-Medicaid Community Care (XX)	\$211.80	\$222.43	\$222.43	(\$10.63)
Program of All-Inclusive Care for the Elderly (PACE)				
Average number of recipients per month: Program for All Inclusive Care (PACE)	1091	1011	1091	0
Average monthly cost per recipient: Program for All Inclusive Care (PACE)	\$2,867.08	\$2,880.95	\$2,867.08	\$0.00
Promoting Independence				
Avg. # of clients served per month	6318	6234	6301	17
Avg. cost per month	\$1,487.75	\$1,534.10	\$1,471.31	\$16.44
Nursing Facilities				
Average # of persons receiving Medicaid funded Nursing Facility svcs. per mo.	56213	56668	56598	(385)
Net Nursing Facility cost per Medicaid resident per month	\$2,981.92	\$3,188.94	\$3,178.81	(\$196.89)
Medicare Skilled Nursing Facility				
Average number of clients receiving Copaid/Medicaid nursing facility services per month	6767	5903	6370	397
Net payment per client for co-paid Medicaid nursing facility services per month	\$2,055.93	\$2,027.21	\$2,029.26	\$26.67
Hospice				
Average # of clients receiving Hospice services per month	7039	6661	6773	266
Average net payment per client per month for Hospice	\$2,739.58	\$2,772.14	\$2,773.05	(\$33.47)
ICFs/MR				
Average Monthly Number of Persons in ICF/MR Medicaid Beds, Total	5602	5610	5613	(11)
Monthly Cost Per ICF/MR Medicaid Eligible Consumer, Total	\$4,360.27	\$4,371.14	\$4,345.66	\$14.61
State School Facilities				
Average Monthly Number of MR Campus Residents	3831	3831	3831	0
Average Monthly Cost per MR Campus Resident	\$14,107.11	\$14,107.11	\$14,107.11	\$0.00

# Department of Aging and Disability Services FY 2012 Monthly Financial Report: Waiver Clients Served Data Through the End of December 2011

DADS Programs	Actual Sept 1, 2011 Client Count	Total number of slots at end of FY 2012	December 2011 Count	FY 2012 Budgeted (average for the Fiscal Year)	Projected FY 2012 Average
Community Based Alternatives (CBA)	19,163	9,768	19,213	14,616	14,616
Comm. Living Assist. & Supp. Svcs. (CLASS)	4,729	4,771	4,654	4,834	4,834
Med. Dep. Children Pgm. (MDCP)	2,294	2,380	2,314	2,380	2,380
Deaf-Blind w/Mult. Disab. (DBMD)	147	156	145	156	156
Home & Comm. Based Svcs. (HCS)	19,776	20,313	19,891	20,123	20,123
Texas Home Living	1,923	5,738	3,813	5,738	5,738

CBA Star+ rollout is expected to begin March 2012