



COMMISSIONER
Jon Weizenbaum

April 9, 2013

Ms. Ursula Parks, Director
Legislative Budget Board
P.O. Box 12666
Austin, TX 78711-2666

Subject: Fiscal Year 2013 February Monthly Financial Report

Dear Ms. Parks:

The following is a narrative summary of budget adjustments processed as of February 2013, as well as year-to-date expenditure data; annual projections; budget variances; and other key budget issues at this time.

Budget Adjustments

In total, the Department of Aging and Disability Services (DADS) fiscal year 2013 Operating Budget is \$3,924.1 million in All Funds (\$1,484.9 million in General Revenue/General Revenue Dedicated Funds), which is \$467.1 million in All Funds above the fiscal year 2013 appropriation of \$3,457.0 million in All Funds, as stated in House Bill 1, 82nd Legislature, Regular Session, 2011, Conference Committee, Stage 12, dated May 22, 2011. For fiscal year 2013, the most significant budget adjustments affecting DADS operating budget are as follows:

- Additional funding for Medicaid-related programs pursuant to Article IX, Section 18.12(a), House Bill 1, 82nd Legislature, Regular Session, 2011 (2012-2013 General Appropriations Act (GAA)). In addition to amounts appropriated in Article II, DADS received \$112.9 million in General Revenue (GR) and \$264.8 million in All Funds for fiscal year 2013. This amount is reflected in DADS fiscal year 2013 Operating Budget.
- The federal Affordable Care Act created a Balancing Incentive Program (BIP) which authorizes enhanced federal funding for states through September 30, 2015 to provide quality care in the most appropriate integrated setting. States that spend less than 50 percent of Medicaid long-term services and supports (LTSS) funding on community LTSS are eligible for a two percent enhanced Federal Medical Assistance Percentage (FMAP). Texas spends 46.9 percent on community LTSS and is eligible to receive funding for community LTSS in exchange for making structural and programmatic changes to increase access to community LTSS. By October 1, 2015, Texas must achieve a 50 percent benchmark of Medicaid community-based LTSS expenditures.

- Based on appropriated funding, DADS fiscal year 2013 Operating Budget reflects a \$29.0 million increase in Federal Funds and an offsetting General Revenue reduction. DADS, pursuant to Section 7, Special Provisions, Article II, GAA, has received approval from the Legislative Budget Board (LBB) and the Governor’s Office of Budget, Planning and Policy (GOBPP) for a one-time expenditure of \$361,601 in BIP-related GR in fiscal year 2013 for completion of the assessment phase of the “No Wrong Door/Single Entry Point System” allowed under the BIP. The table below reflects the sources of enhanced FMAP (EFMAP), given appropriated amounts:

BUDGET			
YEAR	STRATEGY	STRATEGY DESCRIPTION	AMOUNT
AY13	1.3.4	Deaf-Blind Multiple Disabilities (DBMD)	\$ 147,033.62
AY13	1.2.1	Primary Home Care	618,337.38
AY13	1.3.1	Community Based Alternatives (CBA)	2,315,135.70
AY13	1.2.2	Community Attendant Services (Formerly Frail Elderly)	3,306,122.38
AY13	1.3.5	Medically Dependent Children Program (MDCP)	831,089.92
AY13	1.3.7	Texas Home Living Waiver	895,773.76
AY13	1.2.3	Day Activity and Health Services (DAHS)	60,320.96
AY13	1.3.2	Home and Community Based Services (HCS)	16,262,024.30
AY13	1.5.1	Program of All-inclusive Care for the Elderly (PACE)	230,210.58
AY13	1.3.3	Community Living Assistance & Support Services	3,502,066.68
AY13	1.1.1	Intake, Access and Eligibility to Services and Supports	879,236.00
Total:			\$ 29,047,351.28

- The transfer of funds and full-time equivalents (FTEs) from the Department of Assistive and Rehabilitative Services (DARS) to DADS pursuant to GAA, Article II, Special Provisions, Section 10 - Limitations on Transfer Authority, related to health and human services media service for DADS Strategy C.1.1, Central Administration. DARS submitted a letter requesting the transfer of funds and FTEs to DADS, and the letter was approved by the LBB and the GOBPP on February 16, 2012. The fiscal year 2013 Operating Budget reflects the adjustment (\$513,750 in All Funds, \$86,310 in General Revenue Funds and 5.0 FTEs).
- Carry back of \$50.0 million in General Revenue and \$72.6 million in Federal Matching Funds from fiscal year 2013 to fiscal year 2012 in A.6.1, Nursing Facilities, pursuant to GAA, DADS Rider 11 - Appropriation Transfer between Fiscal Years. The carry back amount was used to offset the fiscal year 2012 shortfall.

- The budget transfer authority relating to the elimination of the Consolidated Waiver Program (Rider 35-Elimination of Consolidated Waiver Programs, Rider 9-Limitation: Medicaid Transfer Authority, and Rider 34-Limits for Waivers and Other Programs).

STRATEGY	Measures (Number of Clients)	All Funds	GR Match for Medicaid	Title XIX - FMAP
A.3.6 Consolidated Waiver Program	-156	\$(3,770,017)	\$(1,537,791)	\$(2,232,226)
Total FY 2013		\$(3,770,017)	\$(1,537,791)	\$(2,232,226)

STRATEGY	Measures (Number of Clients)	All Funds	GR Match for Medicaid	Title XIX - FMAP
A.1.1 Intake, Access, and Eligibility to Services and Support	-	\$ 144,778	\$ 59,057	\$ 85,721
A.3.2 Home & Community-Based Services (HCS)	66	1,922,236	784,080	1,138,156
A.3.3 Community Living Assistance & Support (CLASS)	36	791,001	322,649	468,352
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)	2	46,320	18,894	27,426
A.3.5 Medically Dependent Children Program (MDCP)	24	302,494	123,387	179,107
B.1.6 STAR+PLUS	28	563,188	229,724	333,464
Total FY 2013	156	\$ 3,770,017	\$ 1,537,791	\$ 2,232,226

Budget Variances

As of February 28, 2013, DADS is projecting a fiscal year 2013 deficit of \$2,354.7 million in All Funds (\$1,030.3 million in General Revenue). Projections are based on estimates from March 2013, using data through February 2013. For fiscal year 2013, DADS Medicaid client services programs were funded at approximately 41 percent of the anticipated demand. This estimate includes State Supported Living Centers (SSLC), and would reflect 31 percent funding without them.

The total agency shortfall listed in this report reflects the use of the enhanced federal participation rate relating to both BIP and Money Follows the Person (MFP) for the respective programs. However, DADS has not received approval to expend the GR savings as a result of the enhanced rates, therefore, excluding the BIP (\$16.8 million in additional freed up General Revenue) and MFP (\$6.9 million in additional freed up General Revenue) rates, the Agency

shortfall is estimated to be \$2,577.8 in All Funds (\$1,054.0 in General Revenue). Of this amount, approximately \$2,165.7 million in All Funds (\$873.4 million in General Revenue) is related to “unfunded months” for direct client service Medicaid programs.

Finally, it should be noted that strategy variances outlined below have been impacted by DADS cash management efforts taken in order to ensure the continuation of current services. DADS cash management details are specified in a later section. Since House Bill 10, 83rd Legislature, Regular Session, 2013, relating to supplemental appropriations, was enacted and implemented by the Comptroller’s Office in March 2013, its effect on agency funding is not reflected in this report.

- **Strategy A.2.1, Primary Home Care** - This strategy is projected to have a negative variance of \$49.9 million in All Funds, which includes \$19.2 million in General Revenue Funds. In addition to the “unfunded months” issue, the variance is partially due to a projected increase in the average monthly cost per individual served from \$671.90, as found in HB 1, to the current estimate of \$700.86, a difference of \$28.96. This is partially offset by a projected decrease in the number of individuals served per month from 12,084, as found in HB 1, to the current estimate of 11,330, a difference of 754.
- **Strategy A.2.2, Community Attendant Services** - This strategy is projected to have a negative variance of \$266.6 million in All Funds, which includes \$102.5 million in General Revenue Funds. In addition to the “unfunded months” issue, the variance is partially due to a projected increase in the average monthly cost per individual served from \$842.35, as found in HB 1, to the current estimate of \$897.10, a difference of \$54.75. This is partially offset by a projected decrease in the average number of individuals served per month from 51,534, as found in HB 1, to the current estimate of 48,391, a difference of 3,143.
- **Strategy A.2.3, Day Activity and Health Services** – This strategy is projected to have a negative variance of \$9.0 million in All Funds, which includes \$3.7 million in General Revenue Funds. In addition to the “unfunded months” issue, the variance is partially due to a projected increase in the average monthly cost per individual served from \$469.67, as found in HB 1, to the current estimate of \$492.21, a difference of \$22.54. In addition, the projected average number of individuals served per month increased from 1,686, as found in HB 1, to the current estimate of 1,980, a difference of 294.
- **Strategy A.3.1, Community Based Alternatives** - This strategy is projected to have a negative variance of \$48.9 million in All Funds, which includes \$27.7 million in General Revenue Funds. The variance relates to a projected increase in the average monthly cost per individual served from \$992.15, as found in HB 1, to the current estimate of \$1,287.38, a difference of \$295.23. This is partially offset by a projected decrease in the average number of individuals served per month from 9,794, as found in HB 1, to the current estimate of 9,701, a difference of 93.
- **Strategy A.3.2, Home and Community Based Services** - This strategy is projected to have a negative variance of \$102.6 million in All Funds, which includes \$82.7 million in General

Revenue Funds. The variance relates to a projected increase in the average monthly cost per individual served from \$3,299.07, as found in HB 1, to the current estimate of \$3,494.81, a difference of \$195.74. This is partially offset by a projected decrease in the average number of individuals served per month from 20,539, as found in HB 1, to the current estimate of 20,311, a difference of 228.

- **Strategy A.3.3, Community Living Assistance Support Services** – This strategy is projected to have a negative variance of \$51.0 million in All Funds, which includes \$37.4 million in General Revenue Funds. The variance relates to a projected increase in the average monthly cost per individual served from \$3,159.11, as found in HB 1, to the current estimate of \$3,500.14, a difference of \$341.03. In addition, the projected average monthly number of individuals served increased from 4,619 to 4,727, a difference of 108. Of the 108 additional individuals served, 24 are a result of the transfer of individuals from the expired Consolidated Waiver Program, as of December 2011.
- **Strategy A.3.4, Deaf-Blind Multiple Disabilities** – This strategy is projected to have a negative variance of \$1.9 million in All Funds, which includes \$1.6 million in General Revenue Funds. The variance relates to a projected increase in the average monthly cost per individual served from \$4,139.46, as found in HB 1, to the current estimate of \$4,228.17, a difference of \$88.71. In addition, the projected average monthly number of individuals served increased from 148, as found in HB 1, to 158, a difference of ten.
- **Strategy A.3.5, Medically Dependent Children Program** - This strategy is projected to have a negative variance of \$3.4 million in All Funds, which includes \$3.9 million in General Revenue Funds. The variance relates to a projected increase in the average monthly cost per individual served from \$1,454.99, as found in HB 1, to the current estimate of \$1,460.38, a difference of \$5.39. This is partially offset by a projected decrease in the average number of individuals served per month from 2,380, as found in HB 1, to the current estimate of 2,341, a difference of 39.
- **Strategy A.3.7, Texas Home Living Waiver** - This strategy is projected to have a negative variance of \$16.0 million in All Funds, which includes \$12.0 million in General Revenue Funds. The variance relates to a projected increase in the average monthly cost per individual served from \$650.47, as found in HB 1, to the current estimate of \$869.46, a difference of \$218.99. This is partially offset by a projected decrease in the average number of individuals served per month from 5,738, as found in HB 1, to the current estimate of 4,999, a difference of 739.
- **Strategy A.5.1, Program of All-Inclusive Care for the Elderly (PACE)** - This strategy is projected to have a negative variance of \$26.9 million in All Funds, which includes \$11.0 million in General Revenue Funds. In addition to the “unfunded months” issue, the variance is partially due to a projected increase in the average monthly cost per individual served from \$2,859.20, as found in HB 1, to the current estimate of \$2,871.43, a difference of \$12.23. This is partially offset by a projected decrease in the number of individuals served per month from 1105, as found in HB 1, to the current estimate of 1089, a difference of 16.

- **Strategy A.6.1, Nursing Facility Payments** - This strategy is projected to have a negative variance of \$1,326.2 million in All Funds, which includes \$539.7 million in General Revenue Funds. In addition to the “unfunded months” issue, the variance is partially due to the net nursing facility cost per Medicaid resident per month served, which increased from \$2,950.54, as found in HB 1, to the current estimate of \$3,259.64, a difference of \$309.10. The projected average number of individuals served per month increased from 56,223, as found in HB 1, to 57,329, a difference of 1,106. There has been a significant change in the annual projections due to the impact of changes in DADS Third Party recovery processes. Previously, DADS would make payment on nursing facility claims and then pursue any possible reimbursement if an individual was covered by a private insurance plan. Now, DADS requires a denial letter from any third party insurance before issuing payment, which results in a reduction in cost and/or increase in the lag time for billing submissions from providers.
- **Strategy A.6.2, Medicare Skilled Nursing Facility** - This strategy is projected to have a negative variance of \$85.0 million in All Funds, which includes \$34.7 million in General Revenue Funds. In addition to the “unfunded months” issue, the variance in Medicare Skilled Nursing Facilities is partially due to a general lack of program funding in fiscal year 2013.
- **Strategy A.6.3, Hospice** - This strategy is projected to have a negative variance of \$135.3 million in All Funds, which includes \$55.2 million in General Revenue Funds. In addition to the “unfunded months” issue, the variance is partially due to a projected increase in the average net payment for individuals serviced per month from \$2,732.23, as found in HB 1, to the current estimate of \$2,803.94, a difference of \$71.71. This is partially offset by a projected decrease in the average number of individuals served per month from 7,343, as found in HB 1, to 6,974, a difference of 369.
- **Strategy A.6.4, Promoting Independence Services** – This strategy is projected to have a negative variance of \$60.6 million in All Funds, which includes \$23.7 million in General Revenue Funds. In addition to the “unfunded months” issue, the variance is the result of a general lack of program funding in fiscal year 2013.
- **Strategy A.7.1, Intermediate Care Facilities** - This strategy is projected to have a negative variance of \$154.7 million in All Funds, which includes \$63.3 million in General Revenue Funds. In addition to the “unfunded months” issue, the variance is partially due to a projected increase in the average monthly cost per consumer from \$4,349.92, as found in HB 1, to the current estimate of \$4,350.62, a difference of \$0.70. The average number of individuals in ICF beds per month increased from 5,423, as found in HB 1, to the current estimate of 5,595, a difference of 172.
- **Strategy A.8.1, State Supported Living Centers** - This strategy is projected to have a negative variance of \$16.7 million in All Funds, which includes \$12.1 million in General Revenue Funds. The variance in SSLCs is the result of a general lack of program funding in fiscal year 2013.

Agency Cash Management

Pursuant to DADS Rider 9, Section (f), Cash Management, DADS issued various temporary strategy transfers for cash management purposes to keep agency programs operational until supplemental appropriations were provided by the 83rd Legislature.

Strategy	Current GR Transfers	Proposed Transfers
A.2.1 Primary Home Care	\$ 0	\$ 0
A.2.2 Community Attendant Services (Formerly Frail Elderly)	0	0
A.2.3 Day Activity and Health Services (DAHS)	1,500,000	0
A.3.1 Community Based Alternatives (CBA)	(1,300,000)	0
A.3.2 Home and Community Based Services (HCS)	(86,000,000)	1,009,841
A.3.3 Community Living Assistance & Support Services (CLASS)	0	0
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)	0	0
A.3.5 Medically Dependent Children Program (MDCP)	0	(1,570,651)
A.3.6 Consolidated Waiver Program	0	0
A.3.7 Texas Home Living Waiver	0	560,810
A.5.1 Program of All-inclusive Care for the Elderly (PACE)	4,500,000	0
A.6.1 Nursing Facility Payments	80,000,000	0
A.6.2 Medicare Skilled Nursing Facility	0	0
A.6.3 Hospice	0	0
A.6.4 Promoting Independence Services	1,300,000	0
A.7.1 Intermediate Care Facilities – Intellectual Disability (ICF/IID)	11,600,000	0
A.8.1 State Supported Living Centers (SSLC)	(11,600,000)	0
Subtotal, Goal A: Long Term Services and Supports	\$ -	\$ -

Pending Agency Requests for Expenditure Authority
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DADS has four pending requests for additional budget authority. Two of these relate to the expenditure of EFMAP funds. Two items seek additional capital budget authority. These requests include:

- A request for DADS to contract for support of a purchased service, software, and support solution for a community-based Direct Service Workforce Employer/Employee Matching System. This request spans three years and totals \$475,000 in General Revenue that is made

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available through the EFMAP provided by the federal MFP program. (Approval anticipated April 9, 2013).

- A request for DADS to expend up to \$300,000 in General Revenue in fiscal year 2013 for implementation of a Direct Service Worker Evaluation Project. This additional General Revenue is made available through the EFMAP provided through the federal MFP program. (Approval anticipated April 9, 2013)
- A request for \$1,881,522 in All Funds (\$235,207 in General Revenue) for additional capital authority for the Preadmission Screening and Resident Review Project (PASRR) for fiscal year 2013. This request covers expenditures for the time period March 1 to August 31, 2013. This request will be funded from Strategy A.6.1, NF Payments, within existing appropriations. (LBB approval received March 29, 2013)
- A request for \$266,514 in All Funds (\$129,571 in General Revenue) in fiscal year 2013 for additional capital authority for a videoconferencing pilot project between the John H. Winters Building public hearing room and the Mexia and San Angelo SSLCs.

Other Key Budget Issues

Projected budget shortfalls in fiscal year 2012 were resolved through LBB and GOBPP-approved budget adjustments. The projected shortfall for fiscal year 2013, however, primarily relates to the fact that DADS Medicaid client services programs were funded at 41 percent of expected utilization. If funding for SSLCs is removed, that Medicaid-related program amount sinks to 31 percent. These funding amounts contributed to the need for short-term cash management measures and helped generate the requirement for the large supplemental appropriation measure passed by the 83rd Legislature in March of this year.

Please let me know if you have any questions or need additional information. David Cook, DADS Budget Director, will serve as the lead staff on this matter and can be reached by phone at (512) 438-3177 or by email at David.Cook@dads.state.tx.us.

Sincerely,



James Jenkins
Chief Financial Officer

JJ:dc

Enclosure

cc: Kate McGrath, Governor's Office of Budget, Planning and Policy

Department of Aging and Disability Services
FY 2013 Attachment A: Budget Adjustments
Data Through the End of February 2013

	General Revenue	GR - Dedicated	Federal	Other	Total
Adjustments to the FY 2013 Operating Budget:					
Appropriated Funds	\$1,388,100,103	\$61,561,124	\$1,968,629,019	\$38,722,581	\$3,457,012,827
Additional Funding for Medicaid	\$112,903,533	\$0	\$151,941,724	\$0	\$264,845,257
Align FMAP with 2012-13 GAA	\$0	\$0	\$7,079,398	\$0	\$7,079,398
Eliminating Consolidated Waiver Program - transfer between programs	\$0	\$0	\$0	\$0	\$0
Eliminating Consolidated Waiver Program - transfer to HHSC	(\$229,218)	\$0	(\$333,970)	\$0	(\$563,188)
Federal Funds Adjustment for ACA MIPPA	\$0	\$0	\$70,240	\$0	\$70,240
Federal Funds Adjustment - Adjust FMAP with Demand	\$0	\$0	\$13,177,206	\$0	\$13,177,206
Federal Funds Adjustment - Art II, SP Sec 7, FMAP Changes	\$0	\$0	\$52,220,572	\$0	\$52,220,572
Federal Funds Adjustment - Art II, SP Sec 7, FMAP Changes - BIP	(\$29,047,352)	\$0	\$29,047,352	\$0	\$0
Federal Funds Adjustment - Lifestyle Respite Care Demo Grant	\$0	\$0	\$416,774	\$0	\$416,774
Federal Funds Adjustment - Money Follows the Person Demo	\$0	\$0	\$2,783,761	\$0	\$2,783,761
Federal Funds Adjustment - National School Lunch Program	\$0	\$0	\$113,575	\$0	\$113,575
Federal Funds Adjustment - Relating to Centers for Medicare and Medicaid Services (CMS) Research, Demonstrations and Evaluations	\$0	\$0	\$2,670,600	\$0	\$2,670,600
Federal Funds Adjustment - Relating to Medicare Enrollment Assistance Program Program	\$0	\$0	\$99,252	\$0	\$99,252
Federal Funds Adjustment - Relating to Nutritional Services Incentive Program	\$0	\$0	\$1,432,751	\$0	\$1,432,751
Federal Funds Adjustment - Relating to Program Transfers	\$0	\$0	\$39,308,087	\$0	\$39,308,087
Federal Funds Adjustment - Relating to Special Programs for the Aging Discretionary	\$0	\$0	(\$16,699)	\$0	(\$16,699)
Federal Funds Adjustment - Relating to Special Programs for the Aging Title III-D, Disease Prevention and Health Promotion Services	\$0	\$0	(\$71,138)	\$0	(\$71,138)
Federal Funds Adjustment - Relating to Special Programs for the Aging Title III-E, National Family Caregiver Support	\$0	\$0	(\$546,174)	\$0	(\$546,174)
Federal Funds Adjustment - Relating to Special Programs for the Aging Title III, Part B, Grants for Supportive Services and Senior Centers	\$0	\$0	\$1,209,256	\$0	\$1,209,256
Federal Funds Adjustment - Relating to Special Programs for the Aging Title III, Part C, Nutrition Services	\$0	\$0	\$8,484,091	\$0	\$8,484,091
Federal Funds Adjustment - Relating to Special Programs for the Aging Title VII-Chapter 3, Programs for Prevention of Elder Abuse, Neglect, and Exploitation	\$0	\$0	(\$44,700)	\$0	(\$44,700)
Federal Funds Adjustment - Survey and Cert - 75%	\$0	\$0	\$2,840,302	\$0	\$2,840,302
Federal Funds Adjustment-Medicaid Administrative Match	\$0	\$0	\$10,449,029	\$0	\$10,449,029
GR Certified Match for Medicaid reclassified from GR	\$794,847	\$0	\$0	\$0	\$794,847

**Department of Aging and Disability Services
FY 2013 Attachment A: Budget Adjustments
Data Through the End of February 2013**

	General Revenue	GR - Dedicated	Federal	Other	Total
GR Certified Match for Medicaid reclassified to GR Match for Medicaid	(\$3,100,661)	\$0	\$0	\$0	(\$3,100,661)
GR Match for Medicaid reclassified from GR	\$3,348,611	\$0	\$0	\$0	\$3,348,611
GR Match for Medicaid reclassified from GR Certified Match for Medicaid	\$3,100,661	\$0	\$0	\$0	\$3,100,661
GR Match for Medicaid reclassified to GR	(\$538,526)	\$0	\$0	\$0	(\$538,526)
GR reclassified from GR Match for Medicaid	\$538,526	\$0	\$0	\$0	\$538,526
GR reclassified to GR Certified Match for Medicaid	(\$794,847)	\$0	\$0	\$0	(\$794,847)
GR reclassified to GR Match for Medicaid	(\$3,348,611)	\$0	\$0	\$0	(\$3,348,611)
GR Transfer from DFPS - CEDD	\$113,664	\$0	\$0	\$0	\$113,664
Other Funds Adjustment - Appropriated Receipts and IAC	\$0	\$0	\$0	(\$3,791)	(\$3,791)
Program Transfer for additional GR produced by more favorable FMAP	\$0	\$0	\$0	\$0	\$0
Reductions for Administrative Rate Charged for Administration of Data Center Services	(\$20,710)	\$0	(\$29,176)	(\$1,397)	(\$51,283)
Reductions for Cost of Living Adjustments related to Certain Data Center Services	(\$188,795)	\$0	(\$266,293)	(\$12,766)	(\$467,854)
SB 102 Benefit Replacement Pay (BRP)	\$1,491,917	\$0	\$2,181,016	\$12,958	\$3,685,891
SB 2 Sec 24, Specialty License Plate Revenue - DADS Rider 25, GR-Dedicated License Plates Account No. 5055.	\$0	\$1,500	\$0	\$0	\$1,500
SB 223 - Relating to licensing, regulation HCSSA and Admin providing penalties	\$141,010	\$0	\$40,309	\$0	\$181,319
Transfer from DARS - Media Services Staffing	\$86,310	\$0	\$427,440	\$0	\$513,750
Transfer of Appropriation made for fiscal year ending August 31, 2013 to fiscal year ending August 31, 2012	(\$50,000,000)	\$0	(\$72,579,064)	\$0	(\$122,579,064)
Revised Operating Budget, September 2012	\$1,423,350,462	\$61,562,624	\$2,220,734,540	\$38,717,585	\$3,744,365,211
Federal Funds Adjustment - Art II, SP Sec 7, FMAP Changes - BIP	\$0	\$0	\$0	\$0	\$0
Revised Operating Budget, October 2012	\$1,423,350,462	\$61,562,624	\$2,220,734,540	\$38,717,585	\$3,744,365,211
Revised Operating Budget, November 2012	\$1,423,350,462	\$61,562,624	\$2,220,734,540	\$38,717,585	\$3,744,365,211
Federal Funds Adjustment -Relating to Aging and Disability Resource Centers	\$0	\$0	\$198,161	\$0	\$198,161
General Method of Finance Reclassification (2010-11 GAA)	\$0	\$0	\$0	\$0	\$0
Revised Operating Budget, December 2012	\$1,423,350,462	\$61,562,624	\$2,220,932,701	\$38,717,585	\$3,744,563,372
Federal Funds Adjustment - Art II, SP Sec 7, FMAP Changes	\$0	\$0	(\$1,631,275)	\$0	(\$1,631,275)
Federal Funds Adjustment - Relating to Cash Flow Issues within Medicaid Strategies	\$0	\$0	\$181,125,780	\$0	\$181,125,780
General Method of Finance Reclassification (2010-11 GAA)	\$0	\$0	\$0	\$0	\$0
Program Transfer (Rider 9 Medicaid Strategies)	\$0	\$0	\$0	\$0	\$0
Revised Operating Budget, January 2013	\$1,423,350,462	\$61,562,624	\$2,400,427,206	\$38,717,585	\$3,924,057,877

**Department of Aging and Disability Services
FY 2013 Attachment A: Budget Adjustments
Data Through the End of February 2013**

	General Revenue	GR - Dedicated	Federal	Other	Total
Revised Operating Budget, February 2013	\$1,423,350,462	\$61,562,624	\$2,400,427,206	\$38,717,585	\$3,924,057,877

Department of Aging and Disability Services
FY 2013 Monthly Financial Report: Strategy Budget and Variance, All Funds
Data Through the End of February 2013

	Budget						
	Appropriated	Adjustments	Notes	Op Bgt.	Expend. YTD	Projected	Variance
A.1.1 Intake, Access and Eligibility to Services and Supports	\$176,496,261	\$1,291,082	A,F,H,J,K	\$177,787,343	\$88,483,243	\$177,787,343	\$0
A.1.2 Guardianship	\$6,995,223	\$21,567	A	\$7,016,790	\$3,345,183	\$7,016,790	\$0
A.2.1 Primary Home Care	\$29,579,623	\$17,360,110	J	\$46,939,733	\$45,193,702	\$96,795,095	(\$49,855,362)
A.2.2 Community Attendant Services (Formerly Frail Elderly)	\$158,152,934	\$98,566,100	J	\$256,719,034	\$246,970,674	\$523,289,510	(\$266,570,476)
A.2.3 Day Activity and Health Services (DAHS)	\$2,885,234	(\$221,064)	J	\$2,664,170	\$5,488,984	\$11,692,815	(\$9,028,645)
A.3.1 Community Based Alternatives (CBA)	\$116,605,425	(\$13,936,906)	I,J	\$102,668,519	\$73,256,644	\$151,526,389	(\$48,857,870)
A.3.2 Home and Community Based Services (HCS)	\$813,101,215	(\$62,506,170)	H,I,J	\$750,595,045	\$414,683,376	\$853,233,834	(\$102,638,789)
A.3.3 Community Living Assistance & Support Services (CLASS)	\$175,103,334	(\$27,372,198)	H,I,J	\$147,731,136	\$99,634,687	\$198,779,903	(\$51,048,767)
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)	\$7,351,681	(\$1,259,071)	H,I,J	\$6,092,610	\$3,856,311	\$8,016,615	(\$1,924,005)
A.3.5 Medically Dependent Children Program (MDCP)	\$41,554,496	(\$3,787,273)	H,I,J	\$37,767,223	\$19,443,050	\$41,194,284	(\$3,427,061)
A.3.6 Consolidated Waiver Program	\$3,770,017	(\$3,770,017)	H	\$0	\$0	\$0	\$0
A.3.7 Texas Home Living Waiver	\$44,788,688	(\$8,604,328)	I,J	\$36,184,360	\$23,291,305	\$52,157,167	(\$15,972,807)
A.4.1 Non-Medicaid Services	\$145,516,181	\$5,875,244	F	\$151,391,425	\$69,077,180	\$151,391,425	\$0
A.4.2 Mental Retardation Community Services	\$75,000,000	\$1,500	B	\$75,001,500	\$49,039,190	\$75,001,500	\$0
A.4.3 Promoting Independence Plan	\$4,818,281	(\$952,103)	F,K	\$3,866,178	\$1,724,860	\$3,866,178	\$0
A.4.4 In-Home and Family Support	\$4,989,908	\$0		\$4,989,908	\$2,081,579	\$4,989,908	\$0
A.5.1 Program of All-inclusive Care for the Elderly (PACE)	\$11,510,529	(\$890,011)	I,J	\$10,620,518	\$17,866,012	\$37,523,848	(\$26,903,330)
A.6.1 Nursing Facility Payments	\$604,369,591	\$348,955,609	F,I,J,L,M	\$953,325,200	\$1,112,251,285	\$2,279,501,878	(\$1,326,176,679)
A.6.2 Medicare Skilled Nursing Facility	\$53,188,257	\$12,221,049	J	\$65,409,306	\$73,864,662	\$150,413,419	(\$85,004,113)
A.6.3 Hospice	\$73,092,040	\$26,306,048	J	\$99,398,088	\$113,555,869	\$234,656,105	(\$135,258,017)
A.6.4 Promoting Independence Services	\$35,457,808	(\$3,008,370)	J	\$32,449,438	\$44,035,441	\$93,009,811	(\$60,560,373)
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	\$85,946,848	\$60,093,336	A,I,J	\$146,040,184	\$151,630,831	\$300,773,444	(\$154,733,260)
A.8.1 State Supported Living Centers (SSLC)	\$638,552,815	\$8,918,137	A,F,I,J	\$647,470,952	\$329,527,783	\$664,201,614	(\$16,730,662)
A.9.1 Capital Repairs and Renovations	\$15,185,518	\$0		\$15,185,518	\$251,595	\$15,185,518	\$0
Subtotal, Goal A: Long Term Services and Supports	\$3,324,011,907	\$453,302,271		\$3,777,314,178	\$2,988,553,445	\$6,132,004,392	(\$2,354,690,214)
B.1.1 Facility and Community-Based Regulation	\$62,510,903	\$7,123,493	A,C,F	\$69,634,396	\$31,806,316	\$69,634,396	\$0
B.1.2 Credentialing/Certification	\$1,274,531	\$10,387	A,F	\$1,284,918	\$605,487	\$1,284,918	\$0
B.1.3 Quality Outreach	\$5,080,202	\$136,705	A,F,K	\$5,216,907	\$2,275,228	\$5,216,907	\$0
Subtotal, Goal B: Regulation, Certification and Outreach	\$68,865,636	\$7,270,585		\$76,136,221	\$34,687,031	\$76,136,221	\$0
C.1.1 Central Administration	\$29,873,291	\$3,471,372	A,D,F,G	\$33,344,663	\$13,497,692	\$33,344,663	\$0
C.1.2 Information Technology Program Support	\$34,261,993	\$3,000,822	A,D,F	\$37,262,815	\$15,533,344	\$37,262,815	\$0
Subtotal, Goal C: Indirect Administration	\$64,135,284	\$6,472,194		\$70,607,478	\$29,031,036	\$70,607,478	\$0
GRAND TOTAL, DADS	\$3,457,012,827	\$467,045,049		\$3,924,057,876	\$3,052,271,511	\$6,278,748,091	(\$2,354,690,214)

- Notes:**
- | | | | |
|--|---|---|--|
| A. Art IX, Sec 6.07(b) Benefit Replacement Pay (2012-2013 GAA) | B. Art II Rider 25, Appropriation: GR-Dedicated License Plates Account No. 5055 (2012-13 GAA) | C. Art IX Sec. 18.65, Contingency for SB 223 (2012-13 GAA) | D. Art IX Sec. 17.01, Reductions Related to Data Center Services (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) | G. Art IX Sec 8.02, Fed Funds/Block Grants (2012-13 GAA) | H. Art II Rider 35, Eliminating Consolidated Waiver Program (2012-13 GAA) |
| I. Art II Rider 9, Limitation: Medicaid Transfer Authority (2012-13 GAA) | J. Art II SP Sec 7, Federal Match Assumptions (2012-13 GAA) | K. Art IX Sec 8.03, Reimbursements and Payments (2012-13 GAA) | L. Art IX Sec. 18.12 (a), Additional Funding for Medicaid (2012-13 GAA) |
| M. Art II Rider 11, Appropriation Transfer between Fiscal Years (2012-13 GAA) | | | |

Department of Aging and Disability Services
FY Monthly Financial Report: FTE Cap and Filled Positions
Data Through the End of February 2013

	Appropriated	Adjusted Cap	Budgeted	Filled Avg YTD	Filled Monthly
A.1.1 Intake, Access and Eligibility to Services and Supports	1,511.2	0.0	1,511.2	1,385.5	1,389.4
A.1.2 Guardianship	108.0	0.0	108.0	103.7	100.0
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					8.2
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	29.2	29.9
A.8.1 State Supported Living Centers (SSLC)	14,200.4	0.0	14,200.4	13,096.0	13,036.7
A.9.1 Capital Repairs and Renovations					
Subtotal, Goal A: Long Term Services and Supports	15,848.6	0.0	15,848.6	14,623.6	14,564.2
B.1.1 Information Technology Program Support	1,079.5	0.0	1,079.5	1,033.2	1,033.8
B.1.2 Credentialing/Certification	27.0	0.0	27.0	27.2	25.4
B.1.3 Quality Outreach	74.0	2.0	76.0	61.3	60.4
Subtotal, Goal B: Regulation, Certification and Outreach	1,180.5	2.0	1,182.5	1,121.7	1,119.6
C.1.1 Central Administration	365.0	5.0	370.0	356.5	359.2
C.1.2 Information Technology Program Support	97.9	0.0	97.9	104.5	106.5
C.1.3 Other Support Services	0.0	0.0			
Subtotal, Goal C: Indirect Administration	462.9	5.0	467.9	461.0	465.7
GRAND TOTAL, DADS	17,492.0	7.0	17,499.0	16,206.3	16,149.5

Department of Aging and Disability Services
FY 2013 Monthly Financial Report: Agency Budget and Variance, Detailed MOF
Data Through the End of February 2013

Method of Finance	ABEST Code/CFDA	Appropriated	Adjustments	Op Budget	Expend YTD	Projected	Variance
General Revenue	0001	148,684,263	(3,135,464)	145,548,799	84,601,755	154,175,303	(8,626,504)
GR-Match for Medicaid	0758	1,002,067,463	40,013,801	1,042,081,264	1,012,147,698	2,061,308,976	(1,019,227,712)
GR for Fed Funds (OAA)	8004	4,282,380	0	4,282,380	0	4,282,380	0
GR Cert Match - Medicaid	8032	233,065,997	(1,627,979)	231,438,018	125,631,208	233,933,025	(2,495,007)
Subtotal, General Revenue		1,388,100,103	35,250,358	1,423,350,461	1,222,380,661	2,453,699,684	(1,030,349,223)
GR Ded-Tx Capital TF	0543	289,802	0	289,802	144,900	289,802	0
GR Ded-HCSSA	5018	1,948,343	0	1,948,343	902,083	1,948,343	0
Special Olympic Lic Plate	5055	1,500	1,500	3,000	0	3,000	0
GR Ded - QAF	5080	59,321,479	0	59,321,479	6,453,935	59,321,479	0
Subtotal, General Revenue-Dedicated		61,561,124	1,500	61,562,624	7,500,918	61,562,624	0
Subtotal, GR-Related		1,449,661,227	35,251,858	1,484,913,085	1,229,881,579	2,515,262,308	(1,030,349,223)
XIX ADM 50%	93.778.003	35,568,183	10,463,829	46,032,012	19,641,202	45,192,592	839,420
XIXADM 75%	93.778.004	19,039,429	(2,116,639)	16,922,790	6,676,761	16,635,364	287,426
XIXADM 90%	93.778.005	76,500	2,837,523	2,914,023	3,553,979	5,864,419	(2,950,397)
XIX FMAP	93.778.000	1,700,812,173	371,589,666	2,072,401,839	1,647,277,896	3,383,134,267	(1,310,732,429)
Title XX	93.667.000	88,840,273	105,127	88,945,400	42,943,614	88,945,400	0
School Breakfast Program	10.553.000	0	113,575	113,575	36,775	85,644	27,931
National School Lunch Program	10.555.000	0	0	0	0	0	0
TITLE XVIII	93.777.000	27,692,377	82,419	27,774,796	12,949,780	27,774,796	0
SUR&C-75%	93.777.002	17,409,788	2,923,173	20,332,961	9,476,802	20,332,961	0
Foster Grandparent Pgm	94.011.000	2,088,893	6,175	2,095,068	977,462	1,958,844	136,224
CMS Res, Demo, & Eval	93.779.000	2,346,700	2,670,599	5,017,299	8,838,656	11,183,999	(6,166,700)
CMS Res, Demo, & Eval	93.779.001	0	0	0	0	0	0
Spc Svcs Aging-VII3	93.041.000	377,737	(65,363)	312,374	143,789	312,374	0
Spc Svcs Aging-VII2	93.042.000	973,603	77,431	1,051,034	472,380	1,051,034	0
Spc Svcs Aging-IIID	93.043.000	1,334,413	(71,138)	1,263,275	675,087	1,263,275	0
Spc Svcs Aging-IIIB	93.044.000	23,154,603	1,210,289	24,364,892	12,259,678	24,364,892	0
Spc Svcs Aging-IIIC	93.045.000	28,115,487	8,485,679	36,601,166	17,951,899	36,601,166	0
Spc Svcs Aging-Discretionary	93.048.000	499,800	181,462	681,262	278,335	681,262	0
Natl Family Caregiver	93.052.000	9,325,188	(545,751)	8,779,437	4,530,372	8,779,437	0
Nutrition Svcs Incentive	93.053.000	10,973,872	1,432,751	12,406,623	5,792,880	12,406,623	0
Balancing Incentive Program (BIP), ACA Section 10202	93.778.000	0	29,047,351	29,047,351	16,810,642	34,906,534	(5,859,183)
MFP Demo	93.791.000	0	2,783,761	2,783,761	692,594	2,707,047	76,714
MIPPA AoA Grants	93.518.000	0	48,681	48,681	57,492	48,681	0
MIPPA AoA Grants	93.518.001	0	50,571	50,571	61,678	50,571	0
MIPPA CMS	93.779.000	0	70,240	70,240	74,399	70,240	0
Respite AoA	93.072.000	0	416,774	416,774	66,116	416,774	0
Subtotal, Federal Funds		1,968,629,019	431,798,185	2,400,427,204	1,812,240,267	3,724,768,196	(1,324,340,992)
Appropriated Receipts	0666	2,150,393	2,564	2,152,957	940,138	2,152,957	0
MR Collections	8095	17,266,928	(7,945)	17,258,983	7,106,356	17,258,983	0
MR Approp Recpts	8096	754,450	386	754,836	344,946	754,836	0
MR Revolving Fund	8098	82,160	0	82,160	0	82,160	0
Interagency Contracts	0777	3,635,317	0	3,635,317	1,682,724	3,635,317	0
Bond Proceeds-7631	0780	530,845	0	530,845	0	530,845	0
Bond Proceeds-7210	0780	0	0	0	9,543	0	0
Bond Proceeds-7644	0780	14,302,488	0	14,302,488	65,958	14,302,488	0
Subtotal, Other Funds		38,722,581	(4,994)	38,717,587	10,149,665	38,717,587	0
GRAND TOTAL, ALL FUNDS		3,457,012,827	467,045,049	3,924,057,876	3,052,271,511	6,278,748,091	(2,354,690,214)

**Department of Aging and Disability Services
FY 2013 Monthly Financial Report: Strategy Projections by MOF
Data Through the End of February 2013**

	GR	GR-D	Federal Funds				Other Funds	All Funds
			93,778,000	93,667,000	Other CFDA	Subtotal, FF		
A.1.1 Intake, Access and Eligibility to Services and Supports	\$69,177,553	\$0	\$69,675,719	\$6,582,724	\$30,401,977	\$106,660,420	\$1,949,369	\$177,787,343
A.1.2 Guardianship	\$0	\$0	\$0	\$7,016,790	\$0	\$7,016,790	\$0	\$7,016,790
A.2.1 Primary Home Care	\$37,711,369	\$0	\$59,083,726	\$0	\$0	\$59,083,726	\$0	\$96,795,095
A.2.2 Community Attendant Services (Formerly Frail Elderly)	\$203,873,593	\$0	\$319,415,917	\$0	\$0	\$319,415,917	\$0	\$523,289,510
A.2.3 Day Activity and Health Services (DAHS)	\$4,555,521	\$0	\$7,137,294	\$0	\$0	\$7,137,294	\$0	\$11,692,815
A.3.1 Community Based Alternatives (CBA)	\$59,092,412	\$0	\$92,433,977	\$0	\$0	\$92,433,977	\$0	\$151,526,389
A.3.2 Home and Community Based Services (HCS)	\$334,526,168	\$0	\$514,156,433	\$0	\$4,551,232	\$518,707,666	\$0	\$853,233,834
A.3.3 Community Living Assistance & Support Services (CLASS)	\$77,444,650	\$0	\$121,335,253	\$0	\$0	\$121,335,253	\$0	\$198,779,903
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)	\$3,123,273	\$0	\$4,893,342	\$0	\$0	\$4,893,342	\$0	\$8,016,615
A.3.5 Medically Dependent Children Program (MDCP)	\$16,049,293	\$0	\$25,144,991	\$0	\$0	\$25,144,991	\$0	\$41,194,284
A.3.7 Texas Home Living Waiver	\$20,804,447	\$0	\$31,352,720	\$0	\$0	\$31,352,720	\$0	\$52,157,167
A.4.1 Non-Medicaid Services	\$15,903,148	\$0	\$0	\$74,645,861	\$60,842,416	\$135,488,277	\$0	\$151,391,425
A.4.2 Mental Retardation Community Services	\$74,998,500	\$3,000	\$0	\$0	\$0	\$0	\$0	\$75,001,500
A.4.3 Promoting Independence Plan	\$2,713,698	\$0	\$0	\$0	\$1,152,480	\$1,152,480	\$0	\$3,866,178
A.4.4 In-Home and Family Support	\$4,989,908	\$0	\$0	\$0	\$0	\$0	\$0	\$4,989,908
A.5.1 Program of All-inclusive Care for the Elderly (PACE)	\$14,619,291	\$0	\$22,904,557	\$0	\$0	\$22,904,557	\$0	\$37,523,848
A.6.1 Nursing Facility Payments	\$931,232,584	\$0	\$1,348,269,295	\$0	\$0	\$1,348,269,295	\$0	\$2,279,501,878
A.6.2 Medicare Skilled Nursing Facility	\$61,353,634	\$0	\$89,059,785	\$0	\$0	\$89,059,785	\$0	\$150,413,419
A.6.3 Hospice	\$95,716,225	\$0	\$138,939,880	\$0	\$0	\$138,939,880	\$0	\$234,656,105
A.6.4 Promoting Independence Services	\$35,859,951	\$0	\$55,534,393	\$0	\$1,615,467	\$57,149,861	\$0	\$93,009,811
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	\$96,177,236	\$26,321,479	\$178,205,076	\$0	\$0	\$178,205,076	\$69,653	\$300,773,444
A.8.1 State Supported Living Centers (SSLC)	\$245,398,712	\$33,000,000	\$364,082,468	\$0	\$3,105,613	\$367,188,080	\$18,614,822	\$664,201,614
A.9.1 Capital Repairs and Renovations	\$62,383	\$289,802	\$0	\$0	\$0	\$0	\$14,833,333	\$15,185,518
Subtotal, Goal A: Long Term Services and Supports	\$2,405,383,549	\$59,614,281	\$3,441,624,824	\$88,245,375	\$101,669,185	\$3,631,539,384	\$35,467,177	\$6,132,004,392
B.1.1 Facility and Community-Based Regulation	\$19,000,750	\$1,948,343	\$3,813,313	\$0	\$44,871,990	\$48,685,303	\$0	\$69,634,396
B.1.2 Credentialing/Certification	\$866,364	\$0	\$107,088	\$0	\$311,466	\$418,554	\$0	\$1,284,918
B.1.3 Quality Outreach	\$530,320	\$0	\$3,356,587	\$0	\$0	\$3,356,587	\$1,330,000	\$5,216,907
Subtotal, Goal B: Regulation, Certification and Outreach	\$20,397,433	\$1,948,343	\$7,276,989	\$0	\$45,183,456	\$52,460,445	\$1,330,000	\$76,136,221
C.1.1 Central Administration	\$12,735,880	\$0	\$17,470,918	\$375,601	\$1,422,282	\$19,268,802	\$1,339,981	\$33,344,663
C.1.2 Information Technology Program Support	\$15,182,821	\$0	\$19,360,445	\$324,424	\$1,814,697	\$21,499,566	\$580,428	\$37,262,815
Subtotal, Goal C: Indirect Administration	\$27,918,701	\$0	\$36,831,363	\$700,025	\$3,236,979	\$40,768,367	\$1,920,409	\$70,607,478
GRAND TOTAL, DADS	\$2,453,699,684	\$61,562,624	\$3,485,733,176	\$88,945,400	\$150,089,620	\$3,724,768,196	\$38,717,587	\$6,278,748,091

Department of Aging and Disability Services
FY 2013 Monthly Financial Report: Strategy Variance by MOF
Data Through the End of February 2013

	GR	GR-D	Federal Funds				Other Funds	All Funds
			93,778,000	93,667,000	Other CFDA	Subtotal, FF		
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	(\$19,182,989)	\$0	(\$30,672,373)	\$0	\$0	(\$30,672,373)	\$0	(\$49,855,362)
A.2.2 Community Attendant Services (Formerly Frail Elderly)	(\$102,464,021)	\$0	(\$164,106,454)	\$0	\$0	(\$164,106,454)	\$0	(\$266,570,476)
A.2.3 Day Activity and Health Services (DAHS)	(\$3,737,474)	\$0	(\$5,291,171)	\$0	\$0	(\$5,291,171)	\$0	(\$9,028,645)
A.3.1 Community Based Alternatives (CBA)	(\$27,702,941)	\$0	(\$21,154,929)	\$0	\$0	(\$21,154,929)	\$0	(\$48,857,870)
A.3.2 Home and Community Based Services (HCS)	(\$82,698,524)	\$0	(\$15,389,032)	\$0	(\$4,551,232)	(\$19,940,264)	\$0	(\$102,638,789)
A.3.3 Community Living Assistance & Support Services (CLASS)	(\$37,362,617)	\$0	(\$13,686,150)	\$0	\$0	(\$13,686,150)	\$0	(\$51,048,767)
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)	(\$1,558,053)	\$0	(\$365,952)	\$0	\$0	(\$365,952)	\$0	(\$1,924,005)
A.3.5 Medically Dependent Children Program (MDCP)	(\$3,896,684)	\$0	\$469,623	\$0	\$0	\$469,623	\$0	(\$3,427,061)
A.3.6 Consolidated Waiver Program	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A.3.7 Texas Home Living Waiver	(\$12,035,243)	\$0	(\$3,937,564)	\$0	\$0	(\$3,937,564)	\$0	(\$15,972,807)
A.4.1 Non-Medicaid Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A.4.2 Mental Retardation Community Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
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)	(\$11,044,368)	\$0	(\$15,858,962)	\$0	\$0	(\$15,858,962)	\$0	(\$26,903,330)
A.6.1 Nursing Facility Payments	(\$539,732,863)	\$0	(\$786,443,815)	\$0	\$0	(\$786,443,815)	\$0	(\$1,326,176,679)
A.6.2 Medicare Skilled Nursing Facility	(\$34,673,178)	\$0	(\$50,330,935)	\$0	\$0	(\$50,330,935)	\$0	(\$85,004,113)
A.6.3 Hospice	(\$55,171,745)	\$0	(\$80,086,272)	\$0	\$0	(\$80,086,272)	\$0	(\$135,258,017)
A.6.4 Promoting Independence Services	(\$23,739,684)	\$0	(\$35,205,222)	\$0	(\$1,615,467)	(\$36,820,689)	\$0	(\$60,560,373)
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	(\$63,274,178)	\$0	(\$91,459,081)	\$0	\$0	(\$91,459,081)	\$0	(\$154,733,260)
A.8.1 State Supported Living Centers (SSLC)	(\$12,074,661)	\$0	(\$4,896,870)	\$0	\$240,869	(\$4,656,001)	\$0	(\$16,730,662)
A.9.1 Capital Repairs and Renovations	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Subtotal, Goal A: Long Term Services and Supports	(\$1,030,349,223)	\$0	(\$1,318,415,161)	\$0	(\$5,925,831)	(\$1,324,340,992)	\$0	(\$2,354,690,214)
B.1.1 Facility and Community-Based Regulation	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
B.1.2 Credentialing/Certification	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
B.1.3 Quality Outreach	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Subtotal, Goal B: Regulation, Certification and Outreach	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C.1.1 Central Administration	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C.1.2 Information Technology Program Support	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Subtotal, Goal C: Indirect Administration	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
GRAND TOTAL, DADS	(\$1,030,349,223)	\$0	(\$1,318,415,161)	\$0	(\$5,925,831)	(\$1,324,340,992)	\$0	(\$2,354,690,214)

**Department of Aging and Disability Services
0543 - Capital Trust Funds
Data Through the End of February 2013**

	<u>Feb 13</u>	<u>FY13 Year to Date as of 02/28/13</u>
Beginning Balance, 02/01/13	0	0
Reductions:		
Expended	0	0
Transfer Reduction	0	0
Total Reductions	0	0
Ending Balance, 02/28/13	0	0

**Department of Aging and Disability Services
0543 Unappropriated - Capital Trust Funds
Data Through the End of February 2013**

	<u>Feb 13</u>	<u>FY13 Year to Date as of 02/28/13</u>
Beginning Balance, 02/01/13	41,455	41,455
Increases:		
3321 Oil Royaltie	0	39,314
3746 Rental of Lan	38,402	38,402
3851 Int-State Dep&Treas Inv-Gener	345	2,486
Total Increases	<u>38,747</u>	<u>80,202</u>
Reductions:		
Expended	0	0
Transfer Reduction	0	0
Total Reductions	<u>0</u>	<u>0</u>
Ending Balance, 02/28/13	<u><u>80,202</u></u>	<u><u>80,202</u></u>

**Department of Aging and Disability Services
0666 - Appropriated Receipts
Data Through the End of February 2013**

	<u>Feb 13</u>	<u>FY13 Year to Date as of 02/28/13</u>
Beginning Balance, 02/01/13	0	0
Increases:		
3557 Health Care Facilities Fee	98,530	545,629
3560 Medical Exam & Registratio	17,682	100,660
3719 Fees for Copies, Fil Re	10	187
Total Increases	<u>116,222</u>	<u>646,476</u>
Reductions:		
Expended	116,222	646,476
Transfer Reduction	0	0
Total Reductions	<u>116,222</u>	<u>646,476</u>
Ending Balance, 02/28/13	<u><u>0</u></u>	<u><u>0</u></u>

**Department of Aging and Disability Services
5080 - QAF
Data Through the End of February 2013**

	<u>Feb 13</u>	<u>FY13 Year to Date as of 02/28/13</u>
Beginning Balance, 02/01/13	0	0
Increases:		
3557 Health Care Facilities Fee	5,622,196	28,948,865
3770 Administrative Penaltie	422	935
3851 Int-State Dep&Treas Inv-Gener	9,030	75,446
Total Increases	<u>5,631,648</u>	<u>29,025,246</u>
Reductions:		
Expended	5,631,648	29,025,246
Transfer Reduction	0	0
Total Reductions	<u>5,631,648</u>	<u>29,025,246</u>
Ending Balance, 02/28/13	<u><u>0</u></u>	<u><u>0</u></u>

**Department of Aging and Disability Services
8091 - EFF Match for Medicaid
Data Through the End of February 2013**

	<u>Feb 13</u>	<u>FY13 Year to Date as of 02/28/13</u>
Beginning Balance, 02/01/13	<u>0</u>	<u>0</u>
Reductions:		
Expended	0	0
Transfer Reduction	0	0
Total Reductions	<u>0</u>	<u>0</u>
Ending Balance, 02/28/13	<u><u>0</u></u>	<u><u>0</u></u>

**Department of Aging and Disability Services
8095 - SMT
Data Through the End of February 2013**

	<u>Feb 13</u>	<u>FY13 Year to Date as of 02/28/13</u>
Beginning Balance, 02/01/13	0	0
Increases:		
3606 Support/Maint of Patient	1,494,542	8,802,013
3618 Welfare/MHMR service fee	123	718
Total Increases	<u>1,494,665</u>	<u>8,802,731</u>
Reductions:		
Expended	1,494,665	8,802,731
Transfer Reduction	0	0
Total Reductions	<u>1,494,665</u>	<u>8,802,731</u>
Ending Balance, 02/28/13	<u><u>0</u></u>	<u><u>0</u></u>

**Department of Aging and Disability Services
8096 - MR Appropriated Receipts
Data Through the End of February 2013**

	<u>Feb 13</u>	<u>FY13 Year to Date as of 02/28/13</u>
Beginning Balance, 02/01/13	0	0
Increases:		
3719 Fees for Copies, Fil Re	16	136
3753 Sale of Surplus Property Fe	473	1,415
3767 Supply, Equip, Service-Fed/Othe	5,732	40,973
3802 Reimbursements-Third Part	789	8,428
3806 Rental Of Housing To State Em	20,007	97,379
Total Increases	<u>27,017</u>	<u>148,331</u>
Reductions:		
Expended	27,017	148,331
Transfer Reduction	0	0
Total Reductions	<u>27,017</u>	<u>148,331</u>
Ending Balance, 02/28/13	<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 February 2013**

	Feb 13	FY13 Year to Date as of 02/28/13
Beginning Balance, 02/01/13	0	0
Increases:		
3765 Sales Of Supplies/Equipment/S	720	1,201
3767 Supply, Equip, Service-Fed/Othe	5	43,748
Total Increases	725	44,949
Reductions:		
Expended	725	44,949
Transfer Reduction	0	0
Total Reductions	725	44,949
Ending Balance, 02/28/13	0	0

**Department of Aging and Disability Services
8115 - Medicare Part D Receipts
Data Through the End of February 2013**

	<u>Feb 13</u>	<u>FY13 Year to Date as of 02/28/13</u>
Beginning Balance, 02/01/13	<u>0</u>	<u>0</u>
Reductions:		
Expended	0	0
Transfer Reduction	0	0
Total Reductions	<u>0</u>	<u>0</u>
Ending Balance, 02/28/13	<u><u>0</u></u>	<u><u>0</u></u>

**Department of Aging and Disability Services
Unappropriated - EFF
Data Through the End of February 2013**

	<u>Feb 13</u>	<u>FY13 Year to Date as of 02/28/13</u>
Beginning Balance, 02/01/13	2,215,288	2,215,288
Increases:		
3851 Int-State Dep&Treas Inv-Gener	1,147	12,581
3965 Cash Transf Btn Fnds/Accts-Me	429,263	2,633,117
Total Increases	<u>430,410</u>	<u>2,645,698</u>
Reductions:		
Expended	0	0
Transfer Reduction	0	0
Total Reductions	<u>0</u>	<u>0</u>
Ending Balance, 02/28/13	<u><u>2,645,698</u></u>	<u><u>2,645,698</u></u>

Department of Aging and Disability Services
FY 2013 Monthly Financial Report: Capital Projects
Data Through the End of February 2013

	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	\$0	\$1,500,000
Data Center Consolidation	\$3,475,079	\$123,561		\$3,598,640	\$1,799,322	\$3,598,640	\$0
Data Mart & Relocation Contractor Data System - MFP	\$0	\$514,900		\$514,900	\$0	\$0	\$514,900
Dev and Maintenance - Contract monitoring tool - MFP	\$0	\$313,600		\$313,600	\$0	\$231,172	\$82,428
Lease of Personal Computers	\$3,995,874	(\$28,175)		\$3,967,699	\$1,192,368	\$2,461,441	\$1,506,258
Messaging & Collaboration	\$1,605,939	\$0		\$1,605,939	\$802,968	\$1,605,939	\$0
Payment of MLPP-Transportation	\$127,751	\$0		\$127,751	\$26,436	\$154,187	(\$26,436)
Payment of MLPP-Utility Savings	\$2,387,101	\$0		\$2,387,101	\$321,411	\$2,708,512	(\$321,411)
Repairs & Renovations	\$15,185,518	\$3,000,001		\$18,185,519	\$263,067	\$9,355,826	\$8,829,693
Replacement of Transportation Items	\$1,227,366	\$0		\$1,227,366	\$116,914	\$730,594	\$496,772
SAS/CARE Consolidation	\$814,433	\$2,725,318		\$3,539,751	\$3,416,653	\$4,555,332	(\$1,015,581)
Security Improvements	\$914,216	\$290,000		\$1,204,216	\$0	\$1,204,216	\$0
Software Licenses	\$1,701,400	\$0		\$1,701,400	\$1,701,400	\$3,402,800	(\$1,701,400)
Tech Enhancements to A/N/E database - MFP	\$0	\$228,000		\$228,000	\$0	\$0	\$228,000
GRAND TOTAL	\$32,934,677	\$7,167,205		\$40,101,882	\$9,640,539	\$30,008,659	\$10,093,223
Method of Finance:							
General Revenue	\$8,914,289	\$3,208,948		\$12,123,237	\$3,071,528	\$10,427,075	\$1,696,162
General Revenue-Dedicated	\$289,803	(\$1)		\$289,802	\$144,900	\$289,802	\$0
<i>Subtotal, GR-Related</i>	<i>\$9,204,092</i>	<i>\$3,208,947</i>		<i>\$12,413,039</i>	<i>\$3,216,428</i>	<i>\$10,716,877</i>	<i>\$1,696,162</i>
Federal Funds	\$8,601,826	\$4,050,068		\$12,651,894	\$6,246,267	\$11,579,181	\$1,072,713
Other Funds	\$15,128,759	(\$91,809)		\$15,036,950	\$177,844	\$7,712,602	\$7,324,348
TOTAL, All Funds	\$32,934,677	\$7,167,205		\$40,101,882	\$9,640,539	\$30,008,659	\$10,093,223

Notes:

**Department of Aging and Disability Services
FY 2013 Monthly Financial Report: Select Performance Measures
Data Through the End of February 2013**

Measure	HB 1	FY 2013 YTD Actual	FY 2013 Projected	Variance (SB 1 vs. Projected)
Primary Home Care				
Avg. # of clients served per month	12084	11126	11330	754
Avg. cost per month	\$671.90	\$672.34	\$700.86	(\$28.96)
CAS				
Avg. # of clients served per month	51534	47453	48391	3143
Avg. cost per month	\$842.35	\$862.25	\$897.10	(\$54.75)
DAHS				
Avg. # of clients served per month	1686	1900	1980	(294)
Avg. cost per month	\$469.67	\$481.53	\$492.21	(\$22.54)
CBA Waiver				
Average # of CBA clients served per month	9794	9598	9701	93
Average Monthly Cost of CBA Clients	\$992.15	\$1,262.46	\$1,287.38	(\$295.23)
HCS Waiver				
Average Monthly Number of Consumers Served in the HCS Waiver Program	20539	20049	20311	228
Average Monthly Cost Per Consumer Served in the HCS Waiver Program	\$3,299.07	\$3,435.30	\$3,494.81	(\$195.74)
CLASS Waiver				
Average # of CLASS Waiver clients served per month	4619	4693	4727	(108)
Average Monthly Cost of CLASS Waiver Clients	\$3,159.11	\$3,536.88	\$3,500.14	(\$341.03)
DBMD Waiver				
Average # of DBMD Waiver clients served per month	148	152	158	(10)
Average Monthly Cost of DBMH clients	\$4,139.46	\$4,237.70	\$4,228.17	(\$88.71)
MDCP Waiver				
Average # of MDCP clients served per month	2380	2280	2341	39
Average Monthly Cost of MDCP clients	\$1,454.99	\$1,419.86	\$1,460.38	(\$5.39)
Consolidated Waiver Program				
Average # of CWP clients served per month	154	0	0	154
Average Monthly Cost of CWP clients	\$2,040.05	\$0.00	\$2,248.78	(\$208.73)
TxHmL Waiver				
Average Monthly Number of Consumers Served in the TxHmL Waiver Program	5738	4521	4999	739
Average Monthly Cost Per Consumer Served in the TxHmL Waiver Program	\$650.47	\$858.70	\$869.46	(\$218.99)

**Department of Aging and Disability Services
FY 2013 Monthly Financial Report: Select Performance Measures
Data Through the End of February 2013**

Measure	HB 1	FY 2013 YTD Actual	FY 2013 Projected	Variance (SB 1 vs. Projected)
Non-Medicaid Services - Title XX				
Average number of clients served per month: Non-Medicaid Community Care (XX)	35377	29502	32764	2613
Average monthly cost per client served: Non-Medicaid Community Care (XX)	\$211.80	\$215.55	\$222.85	(\$11.05)
Program of All-Inclusive Care for the Elderly (PACE)				
Average number of recipients per month: Program for All Inclusive Care (PACE)	1105	1037	1089	16
Average monthly cost per recipient: Program for All Inclusive Care (PACE)	\$2,859.20	\$2,871.43	\$2,871.43	(\$12.23)
Promoting Independence				
Avg. # of clients served per month	6863	5247	5448	1415
Avg. cost per month	\$1,418.11	\$1,381.98	\$1,411.83	\$6.28
Nursing Facilities				
Average # of persons receiving Medicaid funded Nursing Facility svcs. per mo.	56223	56590	57329	(1106)
Net Nursing Facility cost per Medicaid resident per month	\$2,950.54	\$3,218.24	\$3,259.64	(\$309.10)
Medicare Skilled Nursing Facility				
Average number of clients receiving Copaid/Medicaid nursing facility services per month	6903	6110	6088	815
Net payment per client for co-paid Medicaid nursing facility services per month	\$2,115.01	\$2,017.63	\$2,058.88	\$56.13
Hospice				
Average # of clients receiving Hospice services per month	7343	6876	6974	369
Average net payment per client per month for Hospice	\$2,732.23	\$2,752.54	\$2,803.94	(\$71.71)
ICFs/MR				
Average Monthly Number of Persons in ICF/MR Medicaid Beds, Total	5423	5560	5595	(172)
Monthly Cost Per ICF/MR Medicaid Eligible Consumer, Total	\$4,349.92	\$4,310.68	\$4,350.62	(\$0.70)
State School Facilities				
Average Monthly Number of MR Campus Residents	3595	3707	3612	(17)
Average Monthly Cost per MR Campus Resident	\$14,801.53	\$14,354.33	\$14,731.87	\$69.66

**Department of Aging and Disability Services
 FY 2013 Monthly Financial Report: Waiver Clients Served
 Data Through the End of February 2013**

DADS Programs	Actual Sept 1, 2012 Client Count	Total number of slots at end of FY 2013	February 2013 Count	FY 2013 Budgeted (average for the Fiscal Year)	Projected FY 2013 Average
Community Based Alternatives (CBA)	19,170	9,816	9,534	9,794	9,701
Comm. Living Assist. & Supp. Svcs. (CLASS)	4,736	4,627	4,687	4,619	4,727
Med. Dep. Children Pgm. (MDCP)	2,288	2,380	2,297	2,380	2,341
Deaf-Blind w/Mult. Disab. (DBMD)	148	156	152	148	158
Home & Comm. Based Svcs. (HCS)	19,768	20,729	20,096	20,539	20,311
Texas Home Living	2,743	5,738	4,685	5,738	4,999

CBA Star+ rollout occurred March 2012