



COMMISSIONER  
Jon Weizenbaum

November 30, 2012

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

Subject: Fiscal Year 2013 October Monthly Financial Report

Dear Ms. Parks:

The following is a narrative summary of budget adjustments processed as of October 2012, as well as, year-to-date (YTD) 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 \$3,744.4 million in All Funds (\$1,484.9 million in General Revenue/General Revenue Dedicated Funds), which is \$287.4 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, 82<sup>nd</sup> Legislature, Regular Session, 2011 (2012-13 General Appropriations Act (GAA)). In addition to amounts appropriated in Article II, DADS received \$112.9 million in General Revenue 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 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% of Medicaid long-term services and supports (LTSS) funding on community LTSS are eligible for a 2% enhanced Federal Medical Assistance Percentage (FMAP). Texas spends 46.9% 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% 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 has not submitted a

request for approval to expend the additional federal revenue, pursuant to GAA, Article II, Special Provisions, Section 7; therefore, the associated freed-up GR is assumed to be transferred out of the respective strategies proportionately to the additional BIP funds increase.

BUDGET_YEAR	GOS_CODE	STRATEGY_DESC	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)	2,315,135.7
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)	16,262,024.3
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 (CLASS)	3,502,066.68
AY13	1.1.1	Intake, Access and Eligibility to Services and Supports	879,236
<b>Total:</b>			<b>29,047,351.28</b>

- 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 (0758)	Title XIX - FMAP (93.778)
A.3.6 Consolidated Waiver Program	-156	(\$3,770,017)	(\$1,537,791)	(\$2,232,226)
<b>Total FY 2013</b>		<b>(\$3,770,017)</b>	<b>(\$1,537,791)</b>	<b>(\$2,232,226)</b>

STRATEGY	Measures (Number of Clients)	All Funds	GR Match for Medicaid (0758)	Title XIX - FMAP (93.778)
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
<b>Total FY 2013</b>	<b>156</b>	<b>\$3,770,017</b>	<b>\$1,537,791</b>	<b>\$2,232,226</b>

- The transfer of funds and 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 (HHS) 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 Governor's Office of Budget Policy and Planning (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 cover the fiscal year 2012 shortfall.
- All other Federal Funds adjustments related to aligning Federal Funds with available General Revenue Funds as well as adjustments made to various original Federal Grant amounts.

#### BUDGET VARIANCES

As of October 31, 2012, DADS is projecting a fiscal year 2013 deficit of \$2,548.8 million in All Funds (\$1,035.4 million in General Revenue). Projections are based on estimates from July 2012, using data through August 2012. For fiscal year 2013, DADS' Medicaid Entitlement programs were funded at approximately 41 percent of the anticipated demand. This estimate includes State Supported Living Centers, and would reflect 31 percent funding without them. Of the total agency shortfall, approximately \$2,130.7 million in All Funds (\$869.1 million in General Revenue) is related to "unfunded months" for direct client service Medicaid programs. The \$869.1 million GR amount reflects adjustments for Article IX, Section 18.12 – Additional Funding for Medicaid, a more favorable FMAP, and non-caseload related items.

- **Strategy A.2.1, Primary Home Care** - This strategy is projected to have a negative variance of \$67.0 million in All Funds, which includes \$26.2 million in General Revenue Funds. The variance relates to an increase in the average monthly cost per individual served from \$671.90, as found in HB 1, to the current estimate of \$716.55, a difference of \$44.65. This is partially offset by a decrease in the number of individuals served per month from 12,084 to the current estimate of 11,355, a difference of 729.
- **Strategy A.2.2, Community Attendant Services** - This strategy is projected to have a negative variance of \$361.4 million in All Funds, which includes \$141.1 million in General Revenue Funds. The variance relates to an increase in the average monthly cost per individual served from \$842.35, as found in HB 1, to the current estimate of \$902.74, a difference of \$60.39. This is

partially offset by a decrease in the number of individuals served per month from 51,534 to the current estimate of 48,417, a difference of 3,117.

- **Strategy A.2.3, Day Activity and Health Services** – This strategy is projected to have a negative variance of \$8.4 million in All Funds, which includes \$3.3 million in General Revenue Funds. The variance relates to an increase in the average monthly cost per individual served from \$469.67, as found in HB 1, to the current estimate of \$477.08, a difference of \$7.41. In addition, the number of individuals served per month increased from 1,686 to the current estimate of 1,999, a difference of 313.
- **Strategy A.3.1, Community Based Alternatives** - This strategy is projected to have a negative variance of \$46.1 million in All Funds, which includes \$18.1 million in General Revenue Funds. The variance relates to the average monthly cost per individual served, which increased from \$992.15 per month, as found in HB 1, to the current estimate of \$1,378.36, a difference of \$386.21.
- **Strategy A.3.2, Home and Community Based Services** - This strategy is projected to have a negative variance of \$32.3 million in All Funds, which includes \$16.8 million in General Revenue Funds. The variance relates to an increase in the average monthly cost per individual served from \$3299.07, as found in HB 1, to the current estimate of \$3,449.22, a difference of \$150.15. This is partially offset by a decrease in the number of individuals served per month from 20,539 to the current estimate of 20,470, a difference of 68.
- **Strategy A.3.3, Community Living Assistance Support Services** – This strategy is projected to have a negative variance of \$19.8 million in All Funds, which includes \$8.0 million in General Revenue Funds. The variance relates to the average monthly cost per individual served, which increased from \$3,159.11, as found in HB 1, to the current estimate of \$3,503.09, a difference of \$343.98. In addition, the average monthly number of individuals served increased from 4,619 to 4,655, a difference of 36. Of the 36 additional individuals served, 24 are a result of the transfer of individuals from the expired Consolidated Waiver Program.
- **Strategy A.3.7, Texas Home Living Waiver** - This strategy is projected to have a negative variance of \$10.3 million in All Funds, which includes \$4.6 million in General Revenue Funds. The variance relates to the average monthly cost per individual served, which increased from \$650.47, as found in HB 1, to the current estimate of \$800.00, a difference of \$149.53.
- **Strategy A.4.1, Non-Medicaid Services** – This strategy is projected to have a positive variance of \$1.5 million in All Funds, which includes \$1.6 million in General Revenue Funds. The variance relates to the average monthly cost per individual served, which increased from \$211.80, as found in HB 1, to the current estimate of \$224.48, a difference of \$12.68. This increase is more than compensated for by a decrease in the number of individuals served per month from 35,377 to the current estimate of 32,462, a difference of 2,915.

- **Strategy A.4.2, Mental Retardation Community Services** – This strategy is projected to have a positive variance of \$3.3 million in All Funds, which is all General Revenue. The variance relates to an unforeseen decline in necessary program funding.
- **Strategy A.5.1, Program of All-Inclusive Care for the Elderly (PACE)** - This strategy is projected to have a negative variance of \$24.3 million in All Funds, which includes \$9.5 million in General Revenue Funds. The variance in PACE is the result of a general lack of program funding in FY 2013.
- **Strategy A.6.1, Nursing Facility Payments** - This strategy is projected to have a negative variance of \$1,438.1 million in All Funds, which includes \$586.1 million in General Revenue Funds. The variance relates 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 \$3,279.97, a difference of \$329.43. The average number of individuals served per month increased from 56,223 to 57,060, a difference of 837.
- **Strategy A.6.2, Medicare Skilled Nursing Facility** - This strategy is projected to have a negative variance of \$96.0 million in All Funds, which includes \$39.2 million in General Revenue Funds. The variance in Medicare Skilled Nursing Facilities is the result of a general lack of program funding in FY 2013.
- **Strategy A.6.3, Hospice** - This strategy is projected to have a negative variance of \$166.2 million in All Funds, which includes \$67.8 million in General Revenue Funds. The variance relates to the average net payment for individuals serviced per month, which increased from \$2,732.23, as found in HB 1, to the current estimate of \$2,874.12 a difference of \$141.89. This is partially offset by a decrease in the average number of individuals served per month from 7,343 to 7,034, a difference of 309.
- **Strategy A.6.4, Promoting Independence Services** - This strategy is projected to have a negative variance of \$57.5 million in All Funds, which includes \$21.6 million in General Revenue Funds. The variance relates to the average monthly cost per individual served, which increased from \$1,418.11 per month, as found in HB 1, to the current estimate of \$1,432.42, a difference of \$14.31. This is partially offset by a decrease of the average number of individuals served per month from 6,863 to 5,500, a difference of 1,363.
- **Strategy A.7.1, Intermediate Care Facilities** - This strategy is projected to have a negative variance of \$210.2 million in All Funds, which includes \$85.8 million in General Revenue Funds. The variance relates to average monthly cost per consumer per month, which increased from \$4,349.92, as found in HB 1, to the current estimate of \$4,368.51, a difference of \$18.59. The average number of individuals in ICF beds per month increased from 5,423 to the current estimate of 5,620, a difference of 197.

- **Strategy A.8.1, State Supported Living Centers** - This strategy is projected to have a negative variance of \$18.3 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 FY 2013.
- **Strategy A.9.1, Capital Repairs and Renovations** - This strategy is projected to have a positive variance of \$2.5 million in All Funds, consisting almost entirely of bond proceeds. The variance relates to funds not fully encumbered for the current fiscal year, but will be carried forward for use in subsequent fiscal years.

#### PENDING AGENCY REQUESTS FOR AUTHORITY

DADS currently has two requests for additional budget authority pending at the LBB and the GOBPP. They include:

- An approval request for FY 2013 capital budget authority relating to DADS' Regulatory Services Mobile Investigator/Reviewer Application Development Pilot Project. This pilot, upon approval, would allow approximately 70 regulatory investigators and reviewers to minimize time spent in-office completing required data entry. It would also provide managers with immediate knowledge of the location and status of investigation teams so that resources can be allocated more efficiently and effectively. The estimated cost for the Mobile Investigator/Reviewer Application Development Pilot Project in fiscal year 2013 is \$720,000 in All Funds, \$201,600 in General Revenue.
- An approval request for FY 2013 capital budget authority relating to DADS' Regulatory Services Nursing Facility Administrator Online Licensing System. This system, upon approval, would allow the agency to operate a web-enabled Nursing Facility Administrator (NFA) Licensing program. The current system used for NFA oversight is obsolete and requires excessive manual operation. The new system would allow online application submittal, provide the ability to create and update a license online, and give immediate status and license information to regulatory personnel. The estimated cost for the NFA Online Licensing System is \$200,000 in All Funds, all of which is General Revenue.

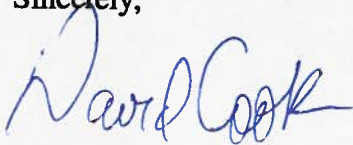
#### OTHER KEY BUDGET ISSUES

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 entitlement services were funded at 41 percent of expected utilization. If funding for SSLCs is removed, that Medicaid entitlement amount sinks to 31 percent.

Ursula Parks  
November 29, 2012  
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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) 438-3177 or by e-mail at [David.Cook@dads.state.tx.us](mailto:David.Cook@dads.state.tx.us).

Sincerely,

A handwritten signature in blue ink that reads "David Cook". The signature is written in a cursive style with a large initial "D".

David Cook  
Interim Chief Financial Officer

DC:rb

Enclosure

cc: Jonathan Hurst, Director, 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 October 2012**

	General Revenue	GR - Dedicated	Federal	Other	Total
<b>Adjustments to the FY 2013 Operating Budget:</b>					
<b>Appropriated Funds</b>	<b>\$1,388,100,103</b>	<b>\$61,561,124</b>	<b>\$1,968,629,019</b>	<b>\$38,722,581</b>	<b>\$3,457,012,827</b>
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 October 2012**

	<b>General Revenue</b>	<b>GR - Dedicated</b>	<b>Federal</b>	<b>Other</b>	<b>Total</b>
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)
<b>Revised Operating Budget, September 2012</b>	<b>\$1,423,350,462</b>	<b>\$61,562,624</b>	<b>\$2,220,734,540</b>	<b>\$38,717,585</b>	<b>\$3,744,365,211</b>
Federal Funds Adjustment - Art II, SP Sec 7, FMAP Changes - BIP	\$0	\$0	\$0	\$0	\$0
<b>Revised Operating Budget, October 2012</b>	<b>\$1,423,350,462</b>	<b>\$61,562,624</b>	<b>\$2,220,734,540</b>	<b>\$38,717,585</b>	<b>\$3,744,365,211</b>

**Department of Aging and Disability Services**  
**FY 2013 Monthly Financial Report: Strategy Budget and Variance, All Funds**  
**Data Through the End of October 2012**

	Budget						
	Appropriated	Adjustments	Notes	Op Bgt.	Expend. YTD	Projected	Variance
A.1.1 Intake, Access and Eligibility to Services and Supports	\$176,496,261	\$1,092,921	A,F,H,J,K	\$177,589,182	\$31,409,457	\$177,589,182	\$0
A.1.2 Guardianship	\$6,995,223	\$21,567	A	\$7,016,790	\$1,138,344	\$7,016,790	\$0
A.2.1 Primary Home Care	\$29,579,623	\$1,337,246	J	\$30,916,869	\$15,533,062	\$97,910,842	(\$66,993,973)
A.2.2 Community Attendant Services (Formerly Frail Elderly)	\$158,152,934	\$7,153,185	J	\$165,306,119	\$82,560,244	\$526,704,978	(\$361,398,859)
A.2.3 Day Activity and Health Services (DAHS)	\$2,885,234	\$130,814	J	\$3,016,048	\$1,881,070	\$11,445,503	(\$8,429,455)
A.3.1 Community Based Alternatives (CBA)	\$116,605,425	\$0	I,J	\$116,605,425	\$24,807,650	\$162,723,953	(\$46,118,529)
A.3.2 Home and Community Based Services (HCS)	\$813,101,215	\$1,922,236	H,I,J	\$815,023,451	\$137,719,773	\$847,287,093	(\$32,263,642)
A.3.3 Community Living Assistance & Support Services (CLASS)	\$175,103,334	\$791,001	H,I,J	\$175,894,335	\$32,886,696	\$195,691,998	(\$19,797,663)
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)	\$7,351,681	\$46,320	H,I,J	\$7,398,001	\$1,305,873	\$8,009,203	(\$611,202)
A.3.5 Medically Dependent Children Program (MDCP)	\$41,554,496	\$302,494	H,I,J	\$41,856,990	\$6,525,138	\$41,530,184	\$326,806
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	\$0	I,J	\$44,788,688	\$7,698,655	\$55,084,795	(\$10,296,107)
A.4.1 Non-Medicaid Services	\$145,516,181	\$5,875,244	F	\$151,391,425	\$23,110,944	\$149,928,213	\$1,463,212
A.4.2 Mental Retardation Community Services	\$75,000,000	\$1,500	B	\$75,001,500	\$29,498,914	\$71,671,515	\$3,329,985
A.4.3 Promoting Independence Plan	\$4,818,281	(\$952,103)	F,K	\$3,866,178	\$644,362	\$3,866,178	\$0
A.4.4 In-Home and Family Support	\$4,989,908	\$0		\$4,989,908	\$654,499	\$4,989,908	\$0
A.5.1 Program of All-inclusive Care for the Elderly (PACE)	\$11,510,529	\$0	I,J	\$11,510,529	\$5,959,658	\$35,775,228	(\$24,264,699)
A.6.1 Nursing Facility Payments	\$604,369,591	\$243,389,581	F,I,J,L,M	\$847,759,172	\$388,619,992	\$2,285,820,909	(\$1,438,061,737)
A.6.2 Medicare Skilled Nursing Facility	\$53,188,257	\$2,408,411	J	\$55,596,668	\$25,141,650	\$151,585,457	(\$95,988,789)
A.6.3 Hospice	\$73,092,040	\$3,304,658	J	\$76,396,698	\$39,670,674	\$242,598,645	(\$166,201,947)
A.6.4 Promoting Independence Services	\$35,457,808	\$1,631,275	J	\$37,089,083	\$14,835,510	\$94,543,966	(\$57,454,883)
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	\$85,946,848	\$5,135	A,I,J	\$85,951,983	\$48,703,237	\$296,182,891	(\$210,230,908)
A.8.1 State Supported Living Centers (SSLC)	\$638,552,815	\$8,918,137	A,F,I,J	\$647,470,952	\$111,279,454	\$665,724,003	(\$18,253,051)
A.9.1 Capital Repairs and Renovations	\$15,185,518	\$0		\$15,185,518	\$67,109	\$12,721,708	\$2,463,810
<b>Subtotal, Goal A: Long Term Services and Supports</b>	<b>\$3,324,011,907</b>	<b>\$273,609,605</b>		<b>\$3,597,621,512</b>	<b>\$1,031,651,965</b>	<b>\$6,146,403,143</b>	<b>(\$2,548,781,631)</b>
B.1.1 Facility and Community-Based Regulation	\$62,510,903	\$7,123,493	A,C,F	\$69,634,396	\$10,983,803	\$69,634,396	\$0
B.1.2 Credentialing/Certification	\$1,274,531	\$10,387	A,F	\$1,284,918	\$215,765	\$1,284,918	\$0
B.1.3 Quality Outreach	\$5,080,202	\$136,705	A,F,K	\$5,216,907	\$777,559	\$5,216,907	\$0
<b>Subtotal, Goal B: Regulation, Certification and Outreach</b>	<b>\$68,865,636</b>	<b>\$7,270,585</b>		<b>\$76,136,221</b>	<b>\$11,977,127</b>	<b>\$76,136,221</b>	<b>\$0</b>
C.1.1 Central Administration	\$29,873,291	\$3,471,372	A,D,F,G	\$33,344,663	\$4,648,873	\$33,344,663	\$0
C.1.2 Information Technology Program Support	\$34,261,993	\$3,000,822	A,D,F	\$37,262,815	\$6,176,190	\$37,262,815	\$0
<b>Subtotal, Goal C: Indirect Administration</b>	<b>\$64,135,284</b>	<b>\$6,472,194</b>		<b>\$70,607,478</b>	<b>\$10,825,063</b>	<b>\$70,607,478</b>	<b>\$0</b>
<b>GRAND TOTAL, DADS</b>	<b>\$3,457,012,827</b>	<b>\$287,352,383</b>		<b>\$3,744,365,210</b>	<b>\$1,054,454,155</b>	<b>\$6,293,146,842</b>	<b>(\$2,548,781,631)</b>
<b>Method of Finance:</b>							
General Revenue	\$1,388,100,103	\$35,250,358		\$1,423,350,461	\$430,729,373	\$2,458,744,837	(\$1,035,394,376)
General Revenue-Dedicated	\$61,561,124	\$1,500		\$61,562,624	\$2,665,612	\$61,562,124	\$500
<i>Subtotal, GR-Related</i>	<i>\$1,449,661,227</i>	<i>\$35,251,858</i>		<i>\$1,484,913,085</i>	<i>\$433,394,985</i>	<i>\$2,520,306,961</i>	<i>(\$1,035,393,876)</i>
Federal Funds	\$1,968,629,019	\$252,105,519		\$2,220,734,538	\$617,417,532	\$3,736,586,105	(\$1,515,851,567)
Other Funds	\$38,722,581	(\$4,994)		\$38,717,587	\$3,641,638	\$36,253,776	\$2,463,811
<b>TOTAL, ALL Funds</b>	<b>\$3,457,012,827</b>	<b>\$287,352,383</b>		<b>\$3,744,365,210</b>	<b>\$1,054,454,155</b>	<b>\$6,293,146,842</b>	<b>(\$2,548,781,631)</b>

**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 October 2012**

	<b>Appropriated</b>	<b>Adjusted Cap</b>	<b>Budgeted</b>	<b>Filled Avg YTD</b>	<b>Filled Monthly</b>
A.1.1 Intake, Access and Eligibility to Services and Supports	1,511.2	0.0	1,511.2	1,374.9	1,386.6
A.1.2 Guardianship	108.0	0.0	108.0	104.4	105.0
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					11.3
A.6.2 Medicare Skilled Nursing Facility					
A.6.3 Hospice					
A.6.4 Promoting Independence Services					
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	29.0	0.0	29.0	28.4	29.1
A.8.1 State Supported Living Centers (SSLC)	14,200.4	0.0	14,200.4	13,130.6	13,122.7
A.9.1 Capital Repairs and Renovations					
<b>Subtotal, Goal A: Long Term Services and Supports</b>	<b>15848.6</b>	<b>0.0</b>	<b>15848.6</b>	<b>14,649.4</b>	<b>14,654.7</b>
B.1.1 Facility and Community-Based Regulation	1,079.5	0.0	1,079.5	1,033.7	1,034.8
B.1.2 Credentialing/Certification	27.0	0.0	27.0	27.9	28.0
B.1.3 Quality Outreach	74.0	2.0	76.0	62.1	61.5
<b>Subtotal, Goal B: Regulation, Certification and Outreach</b>	<b>1180.5</b>	<b>2.0</b>	<b>1182.5</b>	<b>1,123.8</b>	<b>1,124.2</b>
C.1.1 Central Administration	365.0	5.0	370.0	359.3	358.8
C.1.2 Information Technology Program Support	97.9	0.0	97.9	104.1	104.7
C.1.3 Other Support Services	0.0	0.0			
<b>Subtotal, Goal C: Indirect Administration</b>	<b>462.9</b>	<b>5.0</b>	<b>467.9</b>	<b>463.4</b>	<b>463.6</b>
<b>GRAND TOTAL, DADS</b>	<b>17492</b>	<b>7.0</b>	<b>17499.0</b>	<b>16,236.6</b>	<b>16,242.5</b>

**Department of Aging and Disability Services**  
**FY 2013 Monthly Financial Report: Agency Budget and Variance, Detailed MOF**  
**Data Through the End of October 2012**

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	41,469,226	149,134,528	(3,585,730)
GR-Match for Medicaid	0758	1,002,067,463	40,013,801	1,042,081,264	346,551,954	2,069,473,747	(1,027,392,482)
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	42,708,194	235,854,182	(4,416,164)
<b>Subtotal, General Revenue</b>		<b>1,388,100,103</b>	<b>35,250,358</b>	<b>1,423,350,461</b>	<b>430,729,373</b>	<b>2,458,744,837</b>	<b>(1,035,394,376)</b>
GR Ded-Tx Capital TF	0543	289,802	0	289,802	48,300	289,802	0
GR Ded-HCSSA	5018	1,948,343	0	1,948,343	339,462	1,948,343	0
Special Olympic Lic Plate	5055	1,500	1,500	3,000	0	2,500	500
GR Ded - QAF	5080	59,321,479	0	59,321,479	2,277,849	59,321,479	0
<b>Subtotal, General Revenue-Dedicated</b>		<b>61,561,124</b>	<b>1,500</b>	<b>61,562,624</b>	<b>2,665,612</b>	<b>61,562,124</b>	<b>500</b>
<b>Subtotal, GR-Related</b>		<b>1,449,661,227</b>	<b>35,251,858</b>	<b>1,484,913,085</b>	<b>433,394,985</b>	<b>2,520,306,961</b>	<b>(1,035,393,876)</b>
XIX ADM 50%	93.778.003	35,568,183	10,463,829	46,032,012	7,328,509	45,228,508	803,505
XIXADM 75%	93.778.004	19,039,429	(2,116,639)	16,922,790	4,028,346	17,524,858	(602,067)
XIXADM 90%	93.778.005	76,500	2,837,523	2,914,023	448,411	5,000,639	(2,086,616)
XIX FMAP	93.778.000	1,700,812,173	192,095,161	1,892,907,334	562,328,721	3,399,677,828	(1,506,770,495)
Title XX	93.667.000	88,840,273	105,127	88,945,400	14,344,225	88,945,400	0
School Breakfast Program	10.553.000	0	0	0	16,290	0	0
National School Lunch Program	10.555.000	0	113,575	113,575	0	97,739	15,836
TITLE XVIII	93.777.000	27,692,377	82,419	27,774,796	4,177,787	27,774,796	0
SUR&C-75%	93.777.002	17,409,788	2,923,173	20,332,961	3,181,805	20,332,961	0
Foster Grandparent Pgm	94.011.000	2,088,893	6,175	2,095,068	325,345	1,959,768	135,300
CMS Res, Demo, & Eval	93.779.000	2,346,700	1,339,719	3,686,419	1,812,242	4,803,416	(1,116,997)
CMS Res, Demo, & Eval	93.779.001	0	1,330,880	1,330,880	0	1,330,880	0
Spc Svcs Aging-VII3	93.041.000	377,737	(65,363)	312,374	28,998	309,304	3,070
Spc Svcs Aging-VII2	93.042.000	973,603	77,431	1,051,034	97,357	1,051,034	0
Spc Svcs Aging-IIID	93.043.000	1,334,413	(71,138)	1,263,275	264,023	1,316,750	(53,475)
Spc Svcs Aging-IIIB	93.044.000	23,154,603	1,210,289	24,364,892	4,073,086	24,566,949	(202,057)
Spc Svcs Aging-IIIC	93.045.000	28,115,487	8,485,679	36,601,166	5,824,927	36,461,945	139,221
Spc Svcs Aging-Discretionary	93.048.000	499,800	(16,699)	483,101	75,440	474,768	8,333
Natl Family Caregiver	93.052.000	9,325,188	(545,751)	8,779,437	1,468,431	8,904,064	(124,627)
Nutrition Svcs Incentive	93.053.000	10,973,872	1,432,751	12,406,623	1,519,763	12,268,169	138,454
Balancing Incentive Program (BIP), ACA Section 10202	93.778.000	0	29,047,351	29,047,351	5,632,246	35,186,302	(6,138,951)
MFP Demo	93.791.000	0	2,783,761	2,783,761	278,329	2,783,761	0
MIPPA AoA Grants	93.518.000	0	48,681	48,681	48,888	48,681	0
MIPPA AoA Grants	93.518.001	0	50,571	50,571	58,906	50,571	0
MIPPA CMS	93.779.000	0	70,240	70,240	27,661	70,240	0
Respite AoA	93.072.000	0	416,774	416,774	27,796	416,774	0
<b>Subtotal, Federal Funds</b>		<b>1,968,629,019</b>	<b>252,105,519</b>	<b>2,220,734,538</b>	<b>617,417,532</b>	<b>3,736,586,105</b>	<b>(1,515,851,567)</b>
Appropriated Receipts	0666	2,150,393	2,564	2,152,957	369,945	2,152,957	0
MR Collections	8095	17,266,928	(7,945)	17,258,983	2,406,182	17,258,983	0
MR Approp Recpts	8096	754,450	386	754,836	103,811	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	753,289	3,635,317	0
Bond Proceeds-7631	0780	530,845	0	530,845	0	442,371	88,474
Bond Proceeds-7644	0780	14,302,488	0	14,302,488	8,411	11,927,151	2,375,337
<b>Subtotal, Other Funds</b>		<b>38,722,581</b>	<b>(4,994)</b>	<b>38,717,587</b>	<b>3,641,638</b>	<b>36,253,776</b>	<b>2,463,811</b>
<b>GRAND TOTAL, ALL FUNDS</b>		<b>3,457,012,827</b>	<b>287,352,383</b>	<b>3,744,365,210</b>	<b>1,054,454,155</b>	<b>6,293,146,842</b>	<b>(2,548,781,631)</b>

**Department of Aging and Disability Services  
FY 2013 Monthly Financial Report: Strategy Projections by MOF  
Data Through the End of October 2012**

	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	\$30,203,816	\$106,462,259	\$1,949,369	\$177,589,182
A.1.2 Guardianship	\$0	\$0	\$0	\$7,016,790	\$0	\$7,016,790	\$0	\$7,016,790
A.2.1 Primary Home Care	\$38,146,064	\$0	\$59,764,778	\$0	\$0	\$59,764,778	\$0	\$97,910,842
A.2.2 Community Attendant Services (Formerly Frail Elderly)	\$205,204,259	\$0	\$321,500,718	\$0	\$0	\$321,500,718	\$0	\$526,704,978
A.2.3 Day Activity and Health Services (DAHS)	\$4,459,168	\$0	\$6,986,335	\$0	\$0	\$6,986,335	\$0	\$11,445,503
A.3.1 Community Based Alternatives (CBA)	\$63,452,361	\$0	\$99,271,592	\$0	\$0	\$99,271,592	\$0	\$162,723,953
A.3.2 Home and Community Based Services (HCS)	\$333,065,243	\$0	\$513,413,427	\$0	\$808,423	\$514,221,850	\$0	\$847,287,093
A.3.3 Community Living Assistance & Support Services (CLASS)	\$76,241,602	\$0	\$119,450,395	\$0	\$0	\$119,450,395	\$0	\$195,691,998
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)	\$3,120,385	\$0	\$4,888,818	\$0	\$0	\$4,888,818	\$0	\$8,009,203
A.3.5 Medically Dependent Children Program (MDCP)	\$16,180,160	\$0	\$25,350,024	\$0	\$0	\$25,350,024	\$0	\$41,530,184
A.3.7 Texas Home Living Waiver	\$21,972,219	\$0	\$33,112,576	\$0	\$0	\$33,112,576	\$0	\$55,084,795
A.4.1 Non-Medicaid Services	\$14,348,855	\$0	\$0	\$74,645,861	\$60,933,497	\$135,579,358	\$0	\$149,928,213
A.4.2 Mental Retardation Community Services	\$71,669,015	\$2,500	\$0	\$0	\$0	\$0	\$0	\$71,671,515
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)	\$13,938,029	\$0	\$21,837,199	\$0	\$0	\$21,837,199	\$0	\$35,775,228
A.6.1 Nursing Facility Payments	\$934,519,293	\$0	\$1,351,301,616	\$0	\$0	\$1,351,301,616	\$0	\$2,285,820,909
A.6.2 Medicare Skilled Nursing Facility	\$61,831,708	\$0	\$89,753,749	\$0	\$0	\$89,753,749	\$0	\$151,585,457
A.6.3 Hospice	\$98,955,987	\$0	\$143,642,658	\$0	\$0	\$143,642,658	\$0	\$242,598,645
A.6.4 Promoting Independence Services	\$36,762,380	\$0	\$57,473,012	\$0	\$308,574	\$57,781,586	\$0	\$94,543,966
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	\$94,170,407	\$26,321,479	\$175,621,352	\$0	\$0	\$175,621,352	\$69,653	\$296,182,891
A.8.1 State Supported Living Centers (SSLC)	\$245,448,022	\$33,000,000	\$365,465,814	\$0	\$3,195,345	\$368,661,159	\$18,614,822	\$665,724,003
A.9.1 Capital Repairs and Renovations	\$62,384	\$289,802	\$0	\$0	\$0	\$0	\$12,369,522	\$12,721,708
<b>Subtotal, Goal A: Long Term Services and Supports</b>	<b>\$2,410,428,702</b>	<b>\$59,613,781</b>	<b>\$3,458,509,783</b>	<b>\$88,245,375</b>	<b>\$96,602,135</b>	<b>\$3,643,357,293</b>	<b>\$33,003,366</b>	<b>\$6,146,403,143</b>
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
<b>Subtotal, Goal B: Regulation, Certification and Outreach</b>	<b>\$20,397,433</b>	<b>\$1,948,343</b>	<b>\$7,276,989</b>	<b>\$0</b>	<b>\$45,183,456</b>	<b>\$52,460,445</b>	<b>\$1,330,000</b>	<b>\$76,136,221</b>
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
<b>Subtotal, Goal C: Indirect Administration</b>	<b>\$27,918,701</b>	<b>\$0</b>	<b>\$36,831,363</b>	<b>\$700,025</b>	<b>\$3,236,979</b>	<b>\$40,768,367</b>	<b>\$1,920,409</b>	<b>\$70,607,478</b>
<b>GRAND TOTAL, DADS</b>	<b>\$2,458,744,837</b>	<b>\$61,562,124</b>	<b>\$3,502,618,135</b>	<b>\$88,945,400</b>	<b>\$145,022,570</b>	<b>\$3,736,586,105</b>	<b>\$36,253,776</b>	<b>\$6,293,146,842</b>

**Department of Aging and Disability Services**  
**FY 2013 Monthly Financial Report: Strategy Variance by MOF**  
**Data Through the End of October 2012**

	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	(\$26,153,411)	\$0	(\$40,840,563)	\$0	\$0	(\$40,840,563)	\$0	(\$66,993,973)
A.2.2 Community Attendant Services (Formerly Frail Elderly)	(\$141,082,016)	\$0	(\$220,316,843)	\$0	\$0	(\$220,316,843)	\$0	(\$361,398,859)
A.2.3 Day Activity and Health Services (DAHS)	(\$3,289,243)	\$0	(\$5,140,212)	\$0	\$0	(\$5,140,212)	\$0	(\$8,429,455)
A.3.1 Community Based Alternatives (CBA)	(\$18,125,984)	\$0	(\$27,992,545)	\$0	\$0	(\$27,992,545)	\$0	(\$46,118,529)
A.3.2 Home and Community Based Services (HCS)	(\$16,809,193)	\$0	(\$14,646,026)	\$0	(\$808,423)	(\$15,454,449)	\$0	(\$32,263,642)
A.3.3 Community Living Assistance & Support Services (CLASS)	(\$7,996,370)	\$0	(\$11,801,293)	\$0	\$0	(\$11,801,293)	\$0	(\$19,797,663)
A.3.4 Deaf-Blind Multiple Disabilities (DBMD)	(\$249,774)	\$0	(\$361,428)	\$0	\$0	(\$361,428)	\$0	(\$611,202)
A.3.5 Medically Dependent Children Program (MDCP)	\$62,216	\$0	\$264,589	\$0	\$0	\$264,589	\$0	\$326,806
A.3.6 Consolidated Waiver Program	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A.3.7 Texas Home Living Waiver	(\$4,598,687)	\$0	(\$5,697,420)	\$0	\$0	(\$5,697,420)	\$0	(\$10,296,107)
A.4.1 Non-Medicaid Services	\$1,554,293	\$0	\$0	\$0	(\$91,081)	(\$91,081)	\$0	\$1,463,212
A.4.2 Mental Retardation Community Services	\$3,329,485	\$500	\$0	\$0	\$0	\$0	\$0	\$3,329,985
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)	(\$9,473,094)	\$0	(\$14,791,605)	\$0	\$0	(\$14,791,605)	\$0	(\$24,264,699)
A.6.1 Nursing Facility Payments	(\$586,079,956)	\$0	(\$851,981,782)	\$0	\$0	(\$851,981,782)	\$0	(\$1,438,061,737)
A.6.2 Medicare Skilled Nursing Facility	(\$39,153,827)	\$0	(\$56,834,962)	\$0	\$0	(\$56,834,962)	\$0	(\$95,988,789)
A.6.3 Hospice	(\$67,793,774)	\$0	(\$98,408,173)	\$0	\$0	(\$98,408,173)	\$0	(\$166,201,947)
A.6.4 Promoting Independence Services	(\$21,633,743)	\$0	(\$35,512,566)	\$0	(\$308,574)	(\$35,821,140)	\$0	(\$57,454,883)
A.7.1 Intermediate Care Facilities - Mental Retardation (ICF/MR)	(\$85,777,327)	\$0	(\$124,453,582)	\$0	\$0	(\$124,453,582)	\$0	(\$210,230,908)
A.8.1 State Supported Living Centers (SSLC)	(\$12,123,970)	\$0	(\$6,280,217)	\$0	\$151,136	(\$6,129,080)	\$0	(\$18,253,051)
A.9.1 Capital Repairs and Renovations	(\$1)	\$0	\$0	\$0	\$0	\$0	\$2,463,811	\$2,463,810
<b>Subtotal, Goal A: Long Term Services and Supports</b>	<b>\$1,035,394,376)</b>	<b>\$500</b>	<b>\$1,514,794,625)</b>	<b>\$0</b>	<b>(\$1,056,942)</b>	<b>\$1,515,851,567)</b>	<b>\$2,463,811</b>	<b>\$2,548,781,631)</b>
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
<b>Subtotal, Goal B: Regulation, Certification and Outreach</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
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
<b>Subtotal, Goal C: Indirect Administration</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>GRAND TOTAL, DADS</b>	<b>\$1,035,394,376)</b>	<b>\$500</b>	<b>\$1,514,794,625)</b>	<b>\$0</b>	<b>(\$1,056,942)</b>	<b>\$1,515,851,567)</b>	<b>\$2,463,811</b>	<b>\$2,548,781,631)</b>

**Department of Aging and Disability Services  
0543 - Capital Trust Funds  
Data Through the End of October 2012**

	<u>Oct 12</u>	<u>FY13 Year to Date as of 10/31/12</u>
<b>Beginning Balance, 10/01/12</b>	<b>0</b>	<b>0</b>
<b>Reductions:</b>		
Expended	0	0
Transfer Reduction	0	0
<b>Total Reductions</b>	<b><u>0</u></b>	<b><u>0</u></b>
<b>Ending Balance, 10/31/12</b>	<b><u><u>0</u></u></b>	<b><u><u>0</u></u></b>

**Department of Aging and Disability Services  
0543 Unappropriated - Capital Trust Funds  
Data Through the End of October 2012**

	<u>Oct 12</u>	<u>FY13 Year to Date as of 10/31/12</u>
<b>Beginning Balance, 10/01/12</b>	<b>0</b>	<b>0</b>
<b>Increases:</b>		
3321 Oil Royaltie	10,593	10,593
<b>Total Increases</b>	<b><u>10,593</u></b>	<b><u>10,593</u></b>
<b>Reductions:</b>		
Expended	0	0
Transfer Reduction	0	0
<b>Total Reductions</b>	<b><u>0</u></b>	<b><u>0</u></b>
<b>Ending Balance, 10/31/12</b>	<b><u><u>10,593</u></u></b>	<b><u><u>10,593</u></u></b>



**Department of Aging and Disability Services**  
**0666 - Appropriated Receipts**  
**Data Through the End of October 2012**

	<u>Oct 12</u>	<u>FY13 Year to Date as of 10/31/12</u>
<b>Beginning Balance, 10/01/12</b>	<b>0</b>	<b>0</b>
<b>Increases:</b>		
3557 Health Care Facilities Fee	148,823	215,648
3560 Medical Exam & Registratio	18,133	31,199
3719 Fees for Copies, Fil Re	44	67
<b>Total Increases</b>	<b><u>167,000</u></b>	<b><u>246,914</u></b>
<b>Reductions:</b>		
Expended	167,000	247,348
Transfer Reduction	0	0
<b>Total Reductions</b>	<b><u>167,000</u></b>	<b><u>247,348</u></b>
<b>Ending Balance, 10/31/12</b>	<b><u><u>0</u></u></b>	<b><u><u>0</u></u></b>

**Department of Aging and Disability Services**  
**5080 - QAF**  
**Data Through the End of October 2012**

	<u>Oct 12</u>	<u>FY13 Year to Date as of 10/31/12</u>
<b>Beginning Balance, 10/01/12</b>	<b>0</b>	<b>0</b>
<b>Increases:</b>		
3557 Health Care Facilities Fee	5,726,332	6,641,858
3770 Administrative Penaltie	524	(720)
<b>Total Increases</b>	<b><u>5,726,856</u></b>	<b><u>6,641,138</u></b>
<b>Reductions:</b>		
Expended	5,725,856	6,640,138
Transfer Reduction	0	0
<b>Total Reductions</b>	<b><u>5,725,856</u></b>	<b><u>6,640,138</u></b>
<b>Ending Balance, 10/31/12</b>	<b><u><u>1,000</u></u></b>	<b><u><u>1,000</u></u></b>

**Department of Aging and Disability Services  
8091 - EFF Match for Medicaid  
Data Through the End of October 2012**

	<u>Oct 12</u>	<u>FY13 Year to Date as of 10/31/12</u>
<b>Beginning Balance, 10/01/12</b>	<b>0</b>	<b>0</b>
<b>Reductions:</b>		
Expended	0	0
Transfer Reduction	0	0
<b>Total Reductions</b>	<b><u>0</u></b>	<b><u>0</u></b>
<b>Ending Balance, 10/31/12</b>	<b><u><u>0</u></u></b>	<b><u><u>0</u></u></b>

**Department of Aging and Disability Services  
8095 - SMT  
Data Through the End of October 2012**

	<b>Oct 12</b>	<b>FY13 Year to Date as of 10/31/12</b>
<b>Beginning Balance, 10/01/12</b>	<b>0</b>	<b>0</b>
<b>Increases:</b>		
3606 Support/Maint of Patient	2,317,426	2,430,997
3618 Welfare/MHMR service fee	126	280
<b>Total Increases</b>	<b>2,317,552</b>	<b>2,431,277</b>
<b>Reductions:</b>		
Expended	2,317,552	2,431,277
Transfer Reduction	0	0
<b>Total Reductions</b>	<b>2,317,552</b>	<b>2,431,277</b>
<b>Ending Balance, 10/31/12</b>	<b>0</b>	<b>0</b>

**Department of Aging and Disability Services  
8096 - MR Appropriated Receipts  
Data Through the End of October 2012**

	<u>Oct 12</u>	<u>FY13 Year to Date as of 10/31/12</u>
<b>Beginning Balance, 10/01/12</b>	<b>0</b>	<b>0</b>
<b>Increases:</b>		
3719 Fees for Copies, Fil Re	10	23
3753 Sale of Surplus Property Fe	33	91
3767 Supply,Equip,Service-Fed/Othe	1,998	2,614
3802 Reimbursements-Third Part	2,010	2,655
3806 Rental Of Housing To State Em	18,960	19,817
<b>Total Increases</b>	<b><u>23,011</u></b>	<b><u>25,200</u></b>
<b>Reductions:</b>		
Expended	23,011	25,200
Transfer Reduction	0	0
<b>Total Reductions</b>	<b><u>23,011</u></b>	<b><u>25,200</u></b>
<b>Ending Balance, 10/31/12</b>	<b><u><u>0</u></u></b>	<b><u><u>0</u></u></b>

**Department of Aging and Disability Services  
8098 - MR Revolving Funds  
Data Through the End of October 2012**

	<u>Oct 12</u>	<u>FY13 Year to Date as of 10/31/12</u>
<b>Beginning Balance, 10/01/12</b>	<b>0</b>	<b>0</b>
<b>Reductions:</b>		
Expended	0	0
Transfer Reduction	0	0
<b>Total Reductions</b>	<u><b>0</b></u>	<u><b>0</b></u>
<b>Ending Balance, 10/31/12</b>	<u><u><b>0</b></u></u>	<u><u><b>0</b></u></u>

**Department of Aging and Disability Services**  
**8115 - Medicare Part D Receipts**  
**Data Through the End of October 2012**

	<u>Oct 12</u>	<u>FY13 Year to Date as of 10/31/12</u>
<b>Beginning Balance, 10/01/12</b>	<b>0</b>	<b>0</b>
<b>Reductions:</b>		
Expended	0	0
Transfer Reduction	0	0
<b>Total Reductions</b>	<b><u>0</u></b>	<b><u>0</u></b>
<b>Ending Balance, 10/31/12</b>	<b><u><u>0</u></u></b>	<b><u><u>0</u></u></b>

**Department of Aging and Disability Services**  
**Unappropriated - EFF**  
**Data Through the End of October 2012**

	<u>Oct 12</u>	<u>FY13 Year to Date as of 10/31/12</u>
<b>Beginning Balance, 10/01/12</b>	<b>455,210</b>	<b>455,210</b>
<b>Increases:</b>		
3851 Int-State Dep&Treas Inv-Gener	3,533	4,848
3965 Cash Transf Btn Fnds/Accts-Me	422,963	876,858
<b>Total Increases</b>	<b><u>426,496</u></b>	<b><u>881,706</u></b>
<b>Reductions:</b>		
Expended	0	0
Transfer Reduction	0	0
<b>Total Reductions</b>	<b><u>0</u></b>	<b><u>0</u></b>
<b>Ending Balance, 10/31/12</b>	<b><u><u>881,706</u></u></b>	<b><u><u>881,706</u></u></b>



**Department of Aging and Disability Services  
FY 2013 Monthly Financial Report: Capital Projects  
Data Through the End of October 2012**

	Budget						
	Appropriated	Adjustments	Notes	Op Bgt.	Expend. YTD	Projected	Variance
<b>Capital Projects in Capital Rider</b>							
Community Services DataBase Portal Design	\$1,500,000	\$0		\$1,500,000	\$0	\$1,500,000	\$0
Data Center Consolidation	\$3,475,079	\$0		\$3,475,079	\$0	\$3,475,079	\$0
Data Mart & Relocation Contractor Data System - MFP	\$0	\$514,900		\$514,900	\$0	\$514,900	\$0
Dev and Maintenance - Contract monitoring tool - MFP	\$0	\$313,600		\$313,600	\$0	\$313,600	\$0
Lease of Personal Computers	\$3,995,874	\$0		\$3,995,874	\$0	\$3,995,874	\$0
Messaging & Collaboration	\$1,605,939	\$0		\$1,605,939	\$0	\$1,605,939	\$0
Payment of MLPP-Transportation	\$127,751	\$0		\$127,751	\$0	\$127,751	\$0
Payment of MLPP-Utility Savings	\$2,387,101	\$0		\$2,387,101	\$0	\$2,387,101	\$0
Repairs & Renovations	\$15,185,518	\$0		\$15,185,518	\$2,036	\$15,185,518	\$0
Replacement of Transportation Items	\$1,227,366	\$0		\$1,227,366	\$0	\$1,227,366	\$0
SAS/CARE Consolidation	\$814,433	\$0		\$814,433	\$0	\$814,433	\$0
Security Improvements	\$914,216	\$0		\$914,216	\$0	\$914,216	\$0
Software Licenses	\$1,701,400	\$0		\$1,701,400	\$0	\$1,701,400	\$0
Tech Enhancements to A/N/E database - MFP	\$0	\$228,000		\$228,000	\$0	\$228,000	\$0
<b>GRAND TOTAL</b>	<b>\$32,934,677</b>	<b>\$1,056,500</b>		<b>\$33,991,177</b>	<b>\$2,036</b>	<b>\$33,991,177</b>	<b>\$0</b>

**Notes:**

**Department of Aging and Disability Services**  
**FY 2013 Monthly Financial Report: Select Performance Measures**  
**Data Through the End of October 2012**

Measure	HB 1	FY 2013 YTD Actual	FY 2013 Projected	Variance (SB 1 vs. Projected)
<b>Primary Home Care</b>				
Avg. # of clients served per month	12084	11168	11355	729
Avg. cost per month	\$671.90	\$694.07	\$716.55	(\$44.65)
<b>CAS</b>				
Avg. # of clients served per month	51534	47368	48417	3117
Avg. cost per month	\$842.35	\$868.87	\$902.74	(\$60.39)
<b>DAHS</b>				
Avg. # of clients served per month	1686	1881	1999	(313)
Avg. cost per month	\$469.67	\$500.15	\$477.08	(\$7.41)
<b>CBA Waiver</b>				
Average # of CBA clients served per month	9794	9587	9794	0
Average Monthly Cost of CBA Clients	\$992.15	\$1,287.82	\$1,378.36	(\$386.21)
<b>HCS Waiver</b>				
Average Monthly Number of Consumers Served in the HCS Waiver Program	20539	19931	20470	68
Average Monthly Cost Per Consumer Served in the HCS Waiver Program	\$3,299.07	\$3,454.91	\$3,449.22	(\$150.15)
<b>CLASS Waiver</b>				
Average # of CLASS Waiver clients served per month	4619	4781	4655	(36)
Average Monthly Cost of CLASS Waiver Clients	\$3,159.11	\$3,439.31	\$3,503.09	(\$343.98)
<b>DBMD Waiver</b>				
Average # of DBMD Waiver clients served per month	148	151	158	(10)
Average Monthly Cost of DBMD clients	\$4,139.46	\$4,324.08	\$4,224.26	(\$84.80)
<b>MDCP Waiver</b>				
Average # of MDCP clients served per month	2380	2253	2404	(24)
Average Monthly Cost of MDCP clients	\$1,454.99	\$1,448.10	\$1,437.76	\$17.23
<b>Consolidated Waiver Program</b>				
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)
<b>TxHmL Waiver</b>				
Average Monthly Number of Consumers Served in the TxHmL Waiver Program	5738	4439	5738	0
Average Monthly Cost Per Consumer Served in the TxHmL Waiver Program	\$650.47	\$867.16	\$800.00	(\$149.53)

**Department of Aging and Disability Services  
FY 2013 Monthly Financial Report: Select Performance Measures  
Data Through the End of October 2012**

Measure	HB 1	FY 2013 YTD Actual	FY 2013 Projected	Variance (SB 1 vs. Projected)
<b>Non-Medicaid Services - Title XX</b>				
Average number of clients served per month: Non-Medicaid Community Care (XX)	35377	28893	32462	2915
Average monthly cost per client served: Non-Medicaid Community Care (XX)	\$211.80	\$218.98	\$224.48	(\$12.68)
<b>Program of All-Inclusive Care for the Elderly (PACE)</b>				
Average number of recipients per month: Program for All Inclusive Care (PACE)	1105	1033	1033	72
Average monthly cost per recipient: Program for All Inclusive Care (PACE)	\$2,859.20	\$2,886.03	\$2,886.03	(\$26.83)
<b>Promoting Independence</b>				
Avg. # of clients served per month	6863	5272	5500	1363
Avg. cost per month	\$1,418.11	\$1,407.01	\$1,432.42	(\$14.31)
<b>Nursing Facilities</b>				
Average # of persons receiving Medicaid funded Nursing Facility svcs. per mo.	56223	58420	57060	(837)
Net Nursing Facility cost per Medicaid resident per month	\$2,950.54	\$3,275.59	\$3,279.97	(\$329.43)
<b>Medicare Skilled Nursing Facility</b>				
Average number of clients receiving Copaid/Medicaid nursing facility services per month	6903	6024	6077	826
Net payment per client for co-paid Medicaid nursing facility services per month	\$2,115.01	\$2,086.17	\$2,078.68	\$36.33
<b>Hospice</b>				
Average # of clients receiving Hospice services per month	7343	7041	7034	309
Average net payment per client per month for Hospice	\$2,732.23	\$2,817.12	\$2,874.12	(\$141.89)
<b>ICFs/MR</b>				
Average Monthly Number of Persons in ICF/MR Medicaid Beds, Total	5423	5597	5620	(197)
Monthly Cost Per ICF/MR Medicaid Eligible Consumer, Total	\$4,349.92	\$4,363.00	\$4,368.51	(\$18.59)
<b>State School Facilities</b>				
Average Monthly Number of MR Campus Residents	3595	3739	3595	0
Average Monthly Cost per MR Campus Resident	\$14,801.53	\$14,231.48	\$14,801.53	\$0.00

**Department of Aging and Disability Services  
 FY 2013 Monthly Financial Report: Waiver Clients Served  
 Data Through the End of October 2012**

<b>DADS Programs</b>	<b>Actual Sept 1, 2012 Client Count</b>	<b>Total number of slots at end of FY 2013</b>	<b>October 2012 Count</b>	<b>FY 2013 Budgeted (average for the Fiscal Year)</b>	<b>Projected FY 2013 Average</b>
Community Based Alternatives (CBA)	19,169	9,816	9,620	9,794	9,794
Comm. Living Assist. & Supp. Svcs. (CLASS)	4,736	4,627	4,853	4,619	4,655
Med. Dep. Children Pgm. (MDCP)	2,293	2,380	2,249	2,380	2,404
Deaf-Blind w/Mult. Disab. (DBMD)	148	156	151	148	158
Home & Comm. Based Svcs. (HCS)	19,770	20,729	19,970	20,539	20,470
Texas Home Living	2,743	5,738	4,458	5,738	5,738

CBA Star+ rollout occurred March 2012