3.A. STRATEGY REQUEST

82nd Regular Session, Agency Submission, Version 1 Automated Budget and Evaluation System of Texas (ABEST) DATE: TIME:

8/10/2010 9:29:18AM

Agency code: 539 Agency name: Aging and Disability Services, Department of

GOAL: Long-term Services and Supports Statewide Goal/Benchmark: 3

4

OBJECTIVE: Community Services and Supports - Waivers Service Categories: Service:

STRATEGY: 4 Deaf-Blind Multiple Disabilities (DBMD)			Service:	26 Income: A	A.1 Age: B.3
CODE DESCRIPTION	Exp 2009	Est 2010	Bud 2011	BL 2012	BL 2013
Output Measures: KEY 1 Average Number of Individuals Served Per Month: Deaf-Blind Waiver	153.00	150.00	153.00	116.00	116.00
Efficiency Measures:					
KEY 1 Average Monthly Cost Per Individual: Deaf-Blind Waiver	3,925.09	4,082.11	4,084.03	4,078.92	4,078.92
Explanatory/Input Measures: 1 Average Number on Interest List: Deaf-Blind Mult Disabilties Waiver	53.00	247.00	272.00	335.00	335.00
KEY 2 # of Persons Receiving Services at the End of the Fiscal Year: DBMD	154.00	151.00	153.00	116.00	116.00
Objects of Expense:					
3001 CLIENT SERVICES	\$7,219,231	\$7,347,798	\$7,498,275	\$5,677,854	\$5,677,854
TOTAL, OBJECT OF EXPENSE	\$7,219,231	\$7,347,798	\$7,498,275	\$5,677,854	\$5,677,854
Method of Financing:					
758 GR Match For Medicaid	\$2,510,623	\$2,280,514	\$2,851,154	\$2,239,913	\$2,239,913
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)	\$2,510,623	\$2,280,514	\$2,851,154	\$2,239,913	\$2,239,913
Method of Financing: 369 Fed Recovery & Reinvestment Fund					
93.778.014 Medicaid - Stimulus	\$622,016	\$747,513	\$217,901	\$0	\$0
CFDA Subtotal, Fund 369 555 Federal Funds	\$622,016	\$747,513	\$217,901	\$0	\$0
93.778.000 XIX FMAP	\$4,086,592	\$4,319,771	\$4,429,220	\$3,437,941	\$3,437,941
CFDA Subtotal, Fund 555	\$4,086,592	\$4,319,771	\$4,429,220	\$3,437,941	\$3,437,941

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GOAL: 1 Long-term Services and Supports

Statewide Goal/Benchmark:

Service Categories:

4

3

OBJECTIVE: 3 Community Services and Supports - Waivers

STRATEGY: 4 Deaf-Blind Multiple Disabilities (DBMD)

Service: 26 Income: A.1 Age

Age: B.3

CODE DESCRIPTION	Exp 2009	Est 2010	Bud 2011	BL 2012	BL 2013
SUBTOTAL, MOF (FEDERAL FUNDS)	\$4,708,608	\$5,067,284	\$4,647,121	\$3,437,941	\$3,437,941
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)				\$5,677,854	\$5,677,854
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)	\$7,219,231	\$7,347,798	\$7,498,275	\$5,677,854	\$5,677,854

FULL TIME EQUIVALENT POSITIONS:

STRATEGY DESCRIPTION AND JUSTIFICATION:

The Deaf, Blind and Multiple Disabilities (DBMD) strategy provides services and supports for individuals with deaf blindness and one or more other disabilities as an alternative to residing in an ICF/MR. Individuals may reside in their own or family home or in small group homes. Services include adaptive aids and medical supplies, dental services, assisted living, behavioral support services, case management, chore services, minor home modifications, residential habilitation, day habilitation, intervener, nursing services, occupational therapy, physical therapy, orientation and mobility, respite, speech, hearing and language therapy, supported employment, employment assistance, dietary services, financial management services for the consumer directed services option, and transition assistance services.

To be eligible for DBMD, an individual must be 18 years of age or older; have deaf blindness with one or more other disabilities that impairs independent functioning; have a monthly income that is within 300% of the monthly income limit for SSI (currently \$2,022/month, adjusted annually); have countable resources of no more than \$2,000; and have an ISP that does not exceed 200% of the estimated annualized per capita cost of providing services in an ICF/MR to an individual qualifying for an ICF/MR Level of Care VIII.

Statutory Authority. Social Security Act, §1915(c); Human Resources Code, Chapters 32 and 161; and Government Code, Chapter 531.

EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

The base request would allow us to serve 37 fewer individuals per month than we anticipate serving in August 2011. At this funding level, the affordable number of individuals served is 40 below March 2010 service levels, which may put us in violation of maintenance —of —effort requirements under the Affordable Care Act. The "Return to regular FMAP after ARRA expiration" exceptional item addresses the loss of ARRA funding which further reduced the All Funds amount requested per the general budget instructions for the FY 2012-FY 2013 Legislative Appropriations Request (LAR); an exceptional item will be submitted to address maintaining services for DADS customers, "Annualization of Non-Entitlement Programs". The projected annual increase in the rates for FY 2012 and FY 2013 equates to an increased cost per client per month of \$81.68 for FY 2012 and \$164.99 for FY 2013. Funding for this utilization/acuity-related increase has been included in the departments" "Maintain FY2010-2011 Service Levels-Cost Trends (entitlement and non-entitlement)" exceptional item.