

3.A. STRATEGY REQUEST
 83rd Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation System of Texas (ABEST)

8/14/2012 9:51:27AM

539 Aging and Disability Services, Department of

GOAL: 1 Long-term Services and Supports Statewide Goal/Benchmark: 3 3
 OBJECTIVE: 3 Community Services and Supports - Waivers Service Categories:
 STRATEGY: 2 Home and Community-based Services (HCS) Service: 26 Income: A.1 Age: B.3

CODE	DESCRIPTION	Exp 2011	Est 2012	Bud 2013	BL 2014	BL 2015
Output Measures:						
KEY 1	Avg # Individuals Served Per Mth: Home & Community Based Services (HCS)	19,485.00	19,893.00	20,471.00	20,511.00	20,511.00
Efficiency Measures:						
KEY 1	Avg Mthly Cost Per Individual Served: Home & Community Based Services	3,465.31	3,423.61	3,449.22	3,449.22	3,449.22
KEY 2	Avg Mthly Cost Indiv Served: Home and Community-Based Svcs Residential	5,098.83	5,030.82	5,154.33	5,154.33	5,154.33
KEY 3	Avg Mthly Cost Indiv: Home & Community-Based Svcs Non Residential	2,631.21	2,563.80	2,618.68	2,618.68	2,618.68
Explanatory/Input Measures:						
KEY 1	# Individuals Receiving Services at the End of the Fiscal Year: HCS	19,758.00	20,313.00	20,795.00	20,511.00	20,511.00
KEY 2	Avg # Individs on Interest List Per Month: Home & Community Based Svcs	49,713.00	56,876.00	65,372.00	75,047.00	86,153.00
KEY 3	Tot # Declined Svcs or Found to be Ineligible for Svcs FY HCS Waiver	607.00	60.00	65.00	0.00	0.00
KEY 4	Avg # on HCS Interest List Receiving Other DADS Svcs Per Mth	15,806.00	14,364.00	14,538.00	14,763.00	14,992.00

3.A. STRATEGY REQUEST

83rd Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation System of Texas (ABEST)

539 Aging and Disability Services, Department of

GOAL: 1 Long-term Services and Supports Statewide Goal/Benchmark: 3 3
 OBJECTIVE: 3 Community Services and Supports - Waivers Service Categories:
 STRATEGY: 2 Home and Community-based Services (HCS) Service: 26 Income: A.1 Age: B.3

CODE	DESCRIPTION	Exp 2011	Est 2012	Bud 2013	BL 2014	BL 2015
	5 % Declined Svcs or Found to be Ineligible Svcs at the EOY HCS Waiver	29.00 %	30.60 %	30.60 %	0.00 %	0.00 %
Objects of Expense:						
3001	CLIENT SERVICES	\$808,171,460	\$816,518,516	\$847,287,096	\$848,956,749	\$848,956,749
TOTAL, OBJECT OF EXPENSE		\$808,171,460	\$816,518,516	\$847,287,096	\$848,956,749	\$848,956,749
Method of Financing:						
1	General Revenue Fund	\$1,250,000	\$0	\$0	\$0	\$0
758	GR Match For Medicaid	\$263,494,993	\$330,329,869	\$345,608,406	\$341,620,196	\$341,280,613
8091	Eff- Match For Medicaid	\$0	\$6,628,524	\$0	\$0	\$0
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)		\$264,744,993	\$336,958,393	\$345,608,406	\$341,620,196	\$341,280,613
Method of Financing:						
369	Fed Recovery & Reinvestment Fund 93.778.014 Medicaid - Stimulus	\$47,807,064	\$0	\$0	\$0	\$0
CFDA Subtotal, Fund 369		\$47,807,064	\$0	\$0	\$0	\$0
555	Federal Funds					
	93.778.000 XIX FMAP	\$489,286,413	\$467,390,122	\$501,678,690	\$507,336,553	\$507,676,136
	93.779.000 Health Care Financing Res	\$6,332,990	\$12,170,001	\$0	\$0	\$0

3.A. STRATEGY REQUEST

83rd Regular Session, Agency Submission, Version 1
Automated Budget and Evaluation System of Texas (ABEST)

539 Aging and Disability Services, Department of

GOAL: 1 Long-term Services and Supports Statewide Goal/Benchmark: 3 3
 OBJECTIVE: 3 Community Services and Supports - Waivers Service Categories:
 STRATEGY: 2 Home and Community-based Services (HCS) Service: 26 Income: A.1 Age: B.3

CODE	DESCRIPTION	Exp 2011	Est 2012	Bud 2013	BL 2014	BL 2015
CFDA Subtotal, Fund	555	\$495,619,403	\$479,560,123	\$501,678,690	\$507,336,553	\$507,676,136
SUBTOTAL, MOF (FEDERAL FUNDS)		\$543,426,467	\$479,560,123	\$501,678,690	\$507,336,553	\$507,676,136
TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)					\$848,956,749	\$848,956,749
TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)		\$808,171,460	\$816,518,516	\$847,287,096	\$848,956,749	\$848,956,749
FULL TIME EQUIVALENT POSITIONS:		0.0	0.0	0.0	0.0	0.0

STRATEGY DESCRIPTION AND JUSTIFICATION:

The Home and Community-Based Services (HCS) strategy provides services and supports for individuals with intellectual or developmental disabilities as an alternative to an ICF/IID. Individuals may live in their own or family home, in a foster/companion care setting, or in a residence with no more than four individuals who receive similar services. Services include case management, and, as appropriate, residential assistance, supported employment, day habilitation, respite, dental treatment, adaptive aids, minor home modifications, and/or specialized therapies such as social work, behavioral support, occupational therapy, physical therapy, audiology, speech/language pathology, dietary services, and licensed nursing services.

To be eligible for HCS, an individual may be of any age, and must have a determination of intellectual disability made in accordance with state law or have been diagnosed by a physician as having a related condition; meet the ICF/IID Level of Care I criteria; have a monthly income that is within 300% of the SSI monthly income limit (currently \$2,094/month, adjusted annually); and have an Individual Plan of Care (IPC) that does not exceed 200 percent of the reimbursement rate that would have been paid for that same person to receive services in an ICF/IID, or 200 percent of the estimated annualized per capita cost for ICF/IID services, whichever is greater.

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

539 Aging and Disability Services, Department of

GOAL:	1	Long-term Services and Supports	Statewide Goal/Benchmark:	3	3
OBJECTIVE:	3	Community Services and Supports - Waivers	Service Categories:		
STRATEGY:	2	Home and Community-based Services (HCS)	Service: 26	Income: A.1	Age: B.3

CODE	DESCRIPTION	Exp 2011	Est 2012	Bud 2013	BL 2014	BL 2015
------	-------------	----------	----------	----------	---------	---------

EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

As a result of the elimination of CWP 1/1/2012, the avg # of individuals served in HCS in FY11 was increased by 101 to reflect the estimated # of CWP individuals who were eligible for HCS. For FY12, the avg. # served was increased by 33 (reflecting the impact of four months of the year.)

The baseline request for GR/ GR-D may not exceed the amounts expended/budgeted for FY12-13. Because of this limitation, the base will not fully fund the slots appropriated for the end of FY13. DADS has included a "caseload" item to maintain HCS slots at the end of FY '13 level. HCS has seen a .75% annual increase in the avg cost per individual served as the result of an increase in the % of individuals receiving higher-cost residential services. This equates to an increased cost per individual of \$25.87 in FY14/\$51.93 in FY '15. Funding for utilization/acuity related cost increases has been included in the "Cost Trends" item. The "Promoting Independence" Item requests 300 slots to prevent institutionalization of people with disabilities with imminent risk associated with their disability, 400 slots for moving individuals out of large/medium ICF/IDs, 192 slots for serving children aging out of foster care, and 120 slots in FY14 plus another 240 slots in FY15 for moving individuals with IDD from nursing facilities to HCS. The "Community Expansion" item includes a request to serve 5,566 individuals who are on the HCS interest list. This item also includes a new "Community First Choice (CFC) program" which would serve 8,478 individuals who are on the HCS interest list.