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

539 Aging and Disability Services, Department of

GOAL: OBJECTIVE: STRATEGY:	 Long-term Services and Supports Nursing Facility and Hospice Payments Nursing Facility Payments 			Statewide Goal Service Categor Service: 26		3 1 Age: B.3
CODE	DESCRIPTION	Exp 2011	Est 2012	Bud 2013	BL 2014	BL 2015
Facility	res: ge Number Receiving Medicaid-funded Nursing Services/Mo ge Number Receiving Personal Needs Allowance Per	56,307.00 12,695.00	56,921.00 12,695.00	56,843.00 12,695.00	56,916.00 12,695.00	57,030.00 12,695.00
Efficiency Mea		125.07	120.21	121.25	121.02	121.02
	ge Daily Nursing Facility Rate Amount of Individual Income Applied to the Cost of Day	125.97 23.01	129.21 23.49	131.25 24.16	131.83 24.72	131.83 25.43
KEY 3 Net N	ursing Facility Cost Per Medicaid Resident Per Month	3,131.89	3,224.60	3,257.58	3,258.06	3,236.32
4 Avera Allowan	ge Monthly Cost Per Individual: Personal Needs	30.00	30.00	30.00	30.00	30.00
Objects of Exp	ense:					
2001 PRO	FESSIONAL FEES AND SERVICES	\$8,195,270	\$6,078,130	\$4,552,772	\$2,024,587	\$2,024,587
2009 OTH	IER OPERATING EXPENSE	\$318,651	\$5,055,021	\$5,804,094	\$6,058,313	\$6,058,313
	ENT SERVICES E CT OF EXPENSE	\$2,126,735,651 \$2,135,249,572	\$2,226,446,837 \$2,237,579,988	\$2,245,458,387 \$2,255,815,253	\$2,259,071,546 \$2,267,154,446	\$2,248,650,418 \$2,256,733,318

Method of Financing:

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

539 Aging and Disability Services, Department of

GOAL:1Long-term Services and SupportsOBJECTIVE:6Nursing Facility and Hospice Payments			Statewide Goa Service Catego		3 1
STRATEGY: 1 Nursing Facility Payments			Service: 26	Income: A.1	Age: B.3
CODE DESCRIPTION	Exp 2011	Est 2012	Bud 2013	BL 2014	BL 2015
1 General Revenue Fund	\$4,570,200	\$4,570,200	\$4,570,200	\$4,570,200	\$4,570,200
758 GR Match For Medicaid	\$714,476,396	\$908,993,674	\$316,789,643	\$910,803,949	\$905,713,205
8091 Eff- Match For Medicaid	\$0	\$15,109,643	\$0	\$0	\$0
8137 GR Match: Medicaid E/W FY 12-13	\$0	\$0	\$602,934,098	\$0	\$0
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)	\$719,046,596	\$928,673,517	\$924,293,941	\$915,374,149	\$910,283,405
Method of Financing:					
369 Fed Recovery & Reinvestment Fund					
93.778.014 Medicaid - Stimulus	\$133,709,949	\$0	\$0	\$0	\$0
CFDA Subtotal, Fund 369	\$133,709,949	\$0	\$0	\$0	\$0
555 Federal Funds					
93.778.000 XIX FMAP	\$1,275,476,082	\$1,301,217,573	\$449,615,720	\$1,346,939,135	\$1,341,608,163
93.778.003 XIX 50%	\$401,054	\$3,321,320	\$4,072,418	\$3,322,722	\$3,323,310
93.778.004 XIX ADM @ 75%	\$4,236,652	\$998,884	\$610,825	\$1,518,440	\$1,518,440
93.778.005 XIX FMAP @ 90%	\$2,379,239	\$3,368,694	\$2,014,505	\$0	\$0
CFDA Subtotal, Fund 555 8138 FF for FY 12-13 Entitlement/Waiver	\$1,282,493,027	\$1,308,906,471	\$456,313,468	\$1,351,780,297	\$1,346,449,913
93.778.000 XIX FMAP	\$0	\$0	\$875,207,844	\$0	\$0

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

539 Aging and Disability Services, Department of

GOAL: OBJECTIVE:	 Long-term Services and Supports Nursing Facility and Hospice Payments 			Statewide Goal Service Catego		3 1
STRATEGY:	1 Nursing Facility Payments			Service: 26	Income: A.1	Age: B.3
CODE	DESCRIPTION	Exp 2011	Est 2012	Bud 2013	BL 2014	BL 2015
CFDA Subtotal, l SUBTOTAL, M	Fund 8138 IOF (FEDERAL FUNDS)	\$0 \$1,416,202,976	\$0 \$1,308,906,471	\$875,207,844 \$1,331,521,312	\$0 \$1,351,780,297	\$0 \$1,346,449,913
TOTAL, METH	OD OF FINANCE (INCLUDING RIDERS)				\$2,267,154,446	\$2,256,733,318
TOTAL, METH	OD OF FINANCE (EXCLUDING RIDERS)	\$2,135,249,572	\$2,237,579,988	\$2,255,815,253	\$2,267,154,446	\$2,256,733,318
FULL TIME EQ	QUIVALENT POSITIONS:	0.0	0.0	0.0	0.0	0.0
STRATEGY DE	SCRIPTION AND JUSTIFICATION:					

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	1
OBJECTIVE:	6 Nursing Facility and Hospice Payments			Service Categori	es:		
STRATEGY:	1 Nursing Facility Payments			Service: 26	Income: A.1		Age: B.3
CODE	DESCRIPTION	Exp 2011	Est 2012	Bud 2013	BL 2014		BL 2015

The Nursing Facility strategy provides payments to promote quality of care for individuals with medical problems that require nursing facility or hospice care. The types of payments include Nursing Facility Care, Medicaid Swing Bed Program, Augmented Communication Device Systems, Customized Power Wheelchairs, Emergency Dental Services, and Specialized and Rehabilitative Services.

The Nursing Facility Payments provides institutional nursing care for individuals whose medical condition requires the skills of a licensed nurse on a regular basis. The nursing facility must provide for the medical, nursing, and psychosocial needs of each individual, to include room and board, social services, over-the-counter drugs (prescription drugs are covered through the Medicaid Vendor Drug program or Medicare Part D), medical supplies and equipment, personal needs items, and rehabilitative therapies.

To be eligible for Medicaid coverage in a nursing facility, the individual must reside in a Medicaid-certified facility for 30 consecutive days; be eligible for Supplemental Security Income (SSI) from the Social Security Administration or be determined by the Texas Health and Human Services Commission to be financially eligible for Medicaid; and meet medical necessity requirements.

Statutory Authority. Social Security Act, Title XIX; Human Resources Code, Chapters 32 and 161; Government Code, Chapter 531, and Texas Administrative Code §193130, 19.1401, and 19.2613-2614.

EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:

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/I	Benchmark:	3	1
OBJECTIVE:	6 Nursing Facility and Hospice Payments			Service Categori	es:		
STRATEGY:	1 Nursing Facility Payments			Service: 26	Income: A.1		Age: B.3
CODE	DESCRIPTION	Exp 2011	Est 2012	Bud 2013	BL 2014		BL 2015

HHSC's Office of Inspector General (OIG) billings are accounted for in this strategy for Nursing Home Utilization Review. In addition, a request for funding for Preadmission Screening and Resident Review (PASRR) is also included for FYs 204-15. PASRR was enacted by Congress as part of the Omnibus Budget Reconciliation Act (OBRA) of 1987, aka the "Nursing Facility Reform Act". The law became effective October 1, 1990. PASRR is a process to identify individuals with a mental illness (MI)/intellectual or developmental disability (IDD) who chose admission into a Medicaid-certified nursing facility (NF) or who are currently residing in an NF. The purpose of PASRR is to ensure the appropriateness of NF admission and that individuals with MI/IDD are receiving all the necessary services to meet their overall physical, mental and psychosocial needs.

This strategy has experienced a 2.43% annual increase in the average daily rate as the result of an increase in patient acuity. This equates to an increase in the daily rate of \$2.61 in FY 2014 and \$5.88 in FY 2015, which equates to an increase cost per individual served of \$79.39 per month in FY 2014 and \$178.85 per month in FY 2015. Funding for this utilization/acuity related cost increase has been included in the department's "Cost Trends" Exceptional Item.

Agency Code: 539	Agency Nar	ne: Aging and Disat	oility Services, Depa	ortment of	
GOAL:1Long Term Services and SupportsOBJECTIVE:6Nursing Facility and Hospice PaymentsSTRATEGY:1Nursing Facility PaymentsSUB-STRATEGY:1Nursing Facilities					
Code Description	Exp 2011	Est 2012	Bud 2013	BL 2014	BL 2015
Output Measures: 1 Average Number of Individuals Receiving Medicaid - Funded Nursing Facility Services per Month	56,307.00	56,921.00	56,843.00	56,916.00	57,030.00
Efficiency Measures:					
 Average Daily Nursing Facility Rate Average Amount of Individual Income Applied to the Cost of Care Per Day 	\$125.97 \$23.01	\$129.21 \$23.49	\$131.25 \$24.16	\$131.83 \$24.72	\$131.83 \$25.43
3 Net Nursing Facility Cost Per Medicaid Resident Per Month	\$3,131.89	\$3,224.60	\$3,257.58	\$3,258.06	\$3,236.32
Objects of Expense:					
2001 - Professional Fees & Services 3001 - Client Services TOTAL, OBJECT OF EXPENSE	\$0 \$2,102,298,435 \$2,102,298,435	\$236,231 \$2,202,005,409 \$2,202,241,640	\$0 \$2,220,760,220 \$2,220,760,220	\$0 \$2,225,231,470 \$2,225,231,470	\$0 \$2,214,808,991 \$2,214,808,991
Method of Financing: 0758 GR-Match for Medicaid 8091 EFF-Match for Medicaid 8137 GR Match for Medicaid-FY 12-13 demand SUBTOTAL, MOF (General Revenue)	\$706,186,860 \$0 \$0 \$706,186,860	\$896,969,223 \$15,109,643 \$0 \$912,078,866	\$304,422,524 \$0 \$602,934,098 \$907,356,622	\$895,433,144 \$0 \$0 \$895,433,144	\$890,353,214 \$0 \$0 \$890,353,214
Method of Financing: 0369 Federal Funds 93.778.014 XIX Stimulus CFDA Subtotal, Fund 0369	\$132,366,191 \$132,366,191	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0
0555 Federal Funds 93.778.000 XIX FMAP 93.778.005 XIXADM 90% CFDA Subtotal, Fund 0555	\$1,263,745,384 \$0 \$1,263,745,384	\$1,289,950,166 \$212,608 \$1,290,162,774	\$438,195,754 \$0 \$438,195,754	\$1,329,798,326 \$0 \$1,329,798,326	\$1,324,455,777 \$0 \$1,324,455,777
8138 Federal Funds-FY 12-13 demand 93.778.000 XIX FMAP	\$0	\$0	\$875,207,844	\$0	\$0

Agency Code: 539	cy Code: 539 Agency Name: Aging and Disability Services, Department of					
GOAL: OBJECTIVE: STRATEGY: SUB-STRATEGY:	 Long Term Services and Supports Nursing Facility and Hospice Payments Nursing Facility Payments Nursing Facilities 					
Code Descript	ion	Exp 2011	Est 2012	Bud 2013	BL 2014	BL 2015
CFDA Subtotal,	Fund 8138	\$0	\$0	\$875,207,844	\$0	\$0
SUBTOTAL, MO	F (Federal Funds)	\$1,396,111,576	\$1,290,162,774	\$1,313,403,598	\$1,329,798,326	\$1,324,455,777
TOTAL, METHOD OF TOTAL, VARIANCE:	FINANCE	\$2,102,298,435 \$0	\$2,202,241,640 \$0	\$2,220,760,220 \$0	\$2,225,231,470 \$0	\$2,214,808,991 \$0
FULL TIME EQUIV	ALENT POSITIONS:	0.0	0.0	0.0	0.0	0

Agency Code: 539	Agency Name	e: Aging and Disabi	lity Services, Depar	tment of	
GOAL:1 Long Term Services and SupportsOBJECTIVE:6 Nursing Facility and Hospice PaymentsSTRATEGY:1 Nursing Facility PaymentsSUB-STRATEGY:2 Nursing Facility Other Services					
Code Description	Exp 2011	Est 2012	Bud 2013	BL 2014	BL 2015
Output Measures: 2 Average Number of Individuals Receiving State Supplementation of Personal Needs Allowance Per Month	12,695.00	12,695.00	12,695.00	12,695.00	12,695.00
Efficiency Measures: 4 Average Monthly Cost Per Individual: Personal Needs Allowance	\$30.00	\$30.00	\$30.00	\$30.00	\$30.00
Objects of Expense:					
3001 - Client Services TOTAL, OBJECT OF EXPENSE	\$18,837,216 \$18,837,216	\$18,841,428 \$18,841,428	\$18,843,948 \$18,843,948	\$24,444,652 \$24,444,652	\$24,446,003 \$24,446,003
Method of Financing: 0001 General Revenue Fund 0758 GR-Match for Medicaid SUBTOTAL, MOF (General Revenue)	\$4,570,200 \$4,761,662 \$9,331,862	\$4,570,200 \$5,983,177 \$10,553,377	\$4,570,200 \$5,876,281 \$10,446,481	\$4,570,200 \$8,054,783 \$12,624,983	\$4,570,200 \$8,047,727 \$12,617,927
Method of Financing: 0369 Federal Funds 93.778.014 XIX Stimulus CFDA Subtotal, Fund 0369	\$947,096 \$947,096	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0
0555 Federal Funds 93.778.000 XIX FMAP 93.778.003 XIX ADM 50% CFDA Subtotal, Fund 0555	\$8,267,930 \$290,328 \$8,558,258	\$7,995,887 \$292,164 \$8,288,051	\$8,104,205 \$293,262 \$8,397,467	\$11,526,104 \$293,565 \$11,819,669	\$11,533,923 \$294,153 \$11,828,076
SUBTOTAL, MOF (Federal Funds)	\$9,505,354	\$8,288,051	\$8,397,467	\$11,819,669	\$11,828,076
TOTAL, METHOD OF FINANCE TOTAL, VARIANCE:	\$18,837,216 \$0	\$18,841,428 \$0	\$18,843,948 \$0	\$24,444,652 \$0	\$24,446,003 \$0
FULL TIME EQUIVALENT POSITIONS:	0.0	0.0	0.0	0.0	0

Date: Aug 13, 2012 Time: 1:53:31 PM

Agency Code: 539	Agency Nam	e: Aging and Disabi	lity Services, Depart	ment of	
GOAL:1 Long Term Services and SupportsOBJECTIVE:6 Nursing Facility and Hospice PaymentsSTRATEGY:1 Nursing Facility PaymentsSUB-STRATEGY:3 Nursing Facility Services Other - Admin					
Code Description	Exp 2011	Est 2012	Bud 2013	BL 2014	BL 2015
Objects of Expense:					
2001 - Professional Fees & Services 2005 - Travel 2009 - Other Operating Expense	\$5,870,206 \$0 \$92	\$1,272,092 \$0 \$4,560,579	\$0 \$0 \$6,058,313	\$2,024,587 \$0 \$6,058,313	\$2,024,587 \$0 \$6,058,313
3001 - Client Services TOTAL, OBJECT OF EXPENSE	\$5,600,000 \$11,470,298	\$5,600,000 \$11,432,671	\$5,600,000 \$11,658,313	\$0 \$8,082,900	\$0 \$8,082,900
Method of Financing: 0758 GR-Match for Medicaid SUBTOTAL, MOF (General Revenue)	\$3,263,508 \$3,263,508	\$4,926,226 \$4,926,226	\$5,313,396 \$5,313,396	\$3,535,303 \$3,535,303	\$3,535,303 \$3,535,303
Method of Financing: 0369 Federal Funds					
93.778.014 XIX Stimulus CFDA Subtotal, Fund 0369	\$396,662 \$396,662	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0
0555 Federal Funds 93.778.000 XIX FMAP 93.778.003 XIX ADM 50% 93.778.004 XIXADM 75% CFDA Subtotal, Fund 0555	\$3,462,767 \$110,726 \$4,236,635 \$7,810,128	\$3,271,520 \$2,279,156 \$955,768 \$6,506,445	\$3,315,760 \$3,029,156 \$0 \$6,344,916	\$0 \$3,029,156 \$1,518,440 \$4,547,597	\$0 \$3,029,156 \$1,518,440 \$4,547,597
SUBTOTAL, MOF (Federal Funds)	\$8,206,790	\$6,506,445	\$6,344,916	\$4,547,597	\$4,547,597
TOTAL, METHOD OF FINANCE TOTAL, VARIANCE:	\$11,470,298 \$0	\$11,432,671 \$0	\$11,658,313 \$0	\$8,082,900 \$0	\$8,082,900 \$0
FULL TIME EQUIVALENT POSITIONS:	0.0	0.0	0.0	0.0	0.0

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Agency Code: 539	Agency Name	e: Aging and Disabil	ity Services, Departm	nent of	
GOAL:1 Long Term Services and SupportsOBJECTIVE:6 Nursing Facility and Hospice PaymentsSTRATEGY:1 Nursing Facility PaymentsSUB-STRATEGY:4 Capital Projects					
Code Description	Exp 2011	Est 2012	Bud 2013	BL 2014	BL 2015
Objects of Expense: 2001 - Professional Fees & Services 2009 - Other Operating Expense TOTAL, OBJECT OF EXPENSE	\$2,325,064 \$318,558 \$2,643,622	\$4,569,807 \$494,443 \$5,064,250	\$4,552,772 \$0 \$4,552,772	\$0 \$0 \$0	\$0 \$0 \$0
Method of Financing: 0758 GR-Match for Medicaid SUBTOTAL, MOF (General Revenue)	\$264,366 \$264,366	\$1,115,048 \$1,115,048	\$1,177,442 \$1,177,442	\$0 \$0	\$0 \$0
Method of Financing: 0555 Federal Funds 93.778.003 XIX ADM 50% 93.778.004 XIXADM 75% 93.778.005 XIXADM 90% CFDA Subtotal, Fund 0555	\$0 \$17 \$2,379,239 \$2,379,256	\$750,000 \$43,116 \$3,156,086 \$3,949,202	\$750,000 \$610,825 \$2,014,505 \$3,375,330	\$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0
SUBTOTAL, MOF (Federal Funds)	\$2,379,256	\$3,949,202	\$3,375,330	\$0	\$0
TOTAL, METHOD OF FINANCE TOTAL, VARIANCE:	\$2,643,622 \$0	\$5,064,250 \$0	\$4,552,772 \$0	\$0 \$0	\$0 \$0
FULL TIME EQUIVALENT POSITIONS:	0.0	0.0	0.0	0.0	0.0

Date: Aug 13, 2012 Time: 1:53:31 PM

Agency Code: 539		Agency Name: Aging and Disability Services, Department of				
GOAL: OBJECTIVE: STRATEGY: SUB-STRATEGY:	 Long Term Services and Supports Nursing Facility and Hospice Payments Nursing Facility Payments PASRR 					
Code Descript	ion	Exp 2011	Est 2012	Bud 2013	BL 2014	BL 2015
Objects of Expens 3001 - Client Ser TOTAL, OBJECT OF	vices	\$0 \$0	\$0 \$0	\$0 \$0	\$9,395,424 \$9,395,424	\$9,395,424 \$9,395,424
Method of Financi 0758 GR-Match SUBTOTAL, MO		\$0 \$0	\$0 \$0	\$0 \$0	\$3,780,719 \$3,780,719	\$3,776,960 \$3,776,960
Method of Financia 0555 Federal F 93.778. CFDA Subtotal,	unds 000 XIX FMAP	\$0 \$0	\$0 \$0	\$0 \$0	\$5,614,705 \$5,614,705	\$5,618,464 \$5,618,464
SUBTOTAL, MO	F (Federal Funds)	\$0	\$0	\$0	\$5,614,705	\$5,618,464
TOTAL, METHOD OF TOTAL, VARIANCE:	FINANCE	\$0 \$0	\$0 \$0	\$0 \$0	\$9,395,424 \$0	\$9,395,424 \$0
FULL TIME EQUIV	ALENT POSITIONS:	0.0	0.0	0.0	0.0	0