

**3.A. Strategy Request**  
 84th Regular Session, Agency Submission, Version 1  
 Automated Budget and Evaluation System of Texas (ABEST)

8/5/2014 1:43:21PM

**539 Aging and Disability Services, Department of**

|            |   |  |                           |             |          |
|------------|---|--|---------------------------|-------------|----------|
| GOAL:      | 1 | Long-term Services and Supports                            | Statewide Goal/Benchmark: | 3           | 3        |
| OBJECTIVE: | 6 | Nursing Facility and Hospice Payments                      | Service Categories:       |             |          |
| STRATEGY:  | 4 | Promote Independence by Providing Community-based Services | Service: 26               | Income: A.1 | Age: B.3 |

| CODE   | DESCRIPTION  | Exp 2013            | Est 2014            | Bud 2015            | BL 2016             | BL 2017            |
|--|--|---------------------|---------------------|---------------------|---------------------|--------------------|
| <b>Output Measures:</b>                      |  |                     |                     |                     |                     |                    |
| KEY 1  | Avg # of Individuals Served Through Promoting Independence Per Month | 5,221.00            | 4,968.00            | 3,353.00            | 3,351.00            | 51.00              |
| <b>Efficiency Measures:</b>                  |  |                     |                     |                     |                     |                    |
| KEY 1  | Average Monthly Cost Per Individual Served: Promoting Independence   | 1,404.79            | 1,410.24            | 1,463.89            | 1,463.91            | 3,723.00           |
| <b>Objects of Expense:</b>                   |  |                     |                     |                     |                     |                    |
| 3001   | CLIENT SERVICES  | \$87,956,735        | \$84,072,867        | \$64,627,979        | \$58,866,749        | \$2,278,476        |
| <b>TOTAL, OBJECT OF EXPENSE</b>              |  | <b>\$87,956,735</b> | <b>\$84,072,867</b> | <b>\$64,627,979</b> | <b>\$58,866,749</b> | <b>\$2,278,476</b> |
| <b>Method of Financing:</b>                  |  |                     |                     |                     |                     |                    |
| 758  | GR Match For Medicaid  | \$33,445,381        | \$32,375,558        | \$24,320,718        | \$24,417,616        | \$974,504          |
| <b>SUBTOTAL, MOF (GENERAL REVENUE FUNDS)</b> |  | <b>\$33,445,381</b> | <b>\$32,375,558</b> | <b>\$24,320,718</b> | <b>\$24,417,616</b> | <b>\$974,504</b>   |
| <b>Method of Financing:</b>                  |  |                     |                     |                     |                     |                    |
| 555  | Federal Funds  |                     |                     |                     |                     |                    |
|  | 93.778.000 XIX FMAP  | \$51,610,193        | \$49,015,769        | \$37,694,197        | \$31,836,069        | \$1,303,972        |
|  | 93.791.000 Money Follows Person Reblncng Demo                        | \$2,901,161         | \$2,681,540         | \$2,613,064         | \$2,613,064         | \$0                |
| CFDA Subtotal, Fund                          | 555  | \$54,511,354        | \$51,697,309        | \$40,307,261        | \$34,449,133        | \$1,303,972        |

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|---|-------------|---------------------|---------------------|---------------------|---------------------|--------------------|
| <b>SUBTOTAL, MOF (FEDERAL FUNDS)</b>                              |             | <b>\$54,511,354</b> | <b>\$51,697,309</b> | <b>\$40,307,261</b> | <b>\$34,449,133</b> | <b>\$1,303,972</b> |
| <b>Rider Appropriations:</b>                                      |             |                     |                     |                     |                     |                    |
| 758 GR Match For Medicaid   |             |                     |                     |                     |                     |                    |
| 539 14 Art II SP Sec 62, Medicaid Unexpended Balances (14-15 GAA) |             |                     |                     |                     |                     |                    |
| <b>TOTAL, RIDER &amp; UNEXPENDED BALANCES APPROP</b>              |             |                     |                     |                     | <b>\$0</b>          | <b>\$0</b>         |
| <b>TOTAL, METHOD OF FINANCE (INCLUDING RIDERS)</b>                |             |                     |                     |                     | <b>\$58,866,749</b> | <b>\$2,278,476</b> |
| <b>TOTAL, METHOD OF FINANCE (EXCLUDING RIDERS)</b>                |             | <b>\$87,956,735</b> | <b>\$84,072,867</b> | <b>\$64,627,979</b> | <b>\$58,866,749</b> | <b>\$2,278,476</b> |
| <b>FULL TIME EQUIVALENT POSITIONS:</b>                            |             |                     |                     |                     |                     |                    |
| <b>STRATEGY DESCRIPTION AND JUSTIFICATION:</b>                    |             |                     |                     |                     |                     |                    |

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|------|-------------|----------|----------|----------|---------|---------|

The Promote Independence by Providing Community-based Services strategy supports "the Money Follows the Person (MFP)" provisions which allow a Medicaid-eligible nursing facility resident to relocate back into the community and to receive long-term services and supports. Dollars from this strategy specifically fund the community-based services which support the individual while he/she resides in the community setting. Services may include 1915 (c) waiver or other community services and do not impact funding supported by the other community-based services.

Assistance is available from the Area Agencies on Aging (AAA). The AAA provide information about community options such as housing, health care, transportation, daily living, and social activities that can help individuals and their families make a decision from the planning phase to actual relocation in the community. To participate in MFP, an individual must reside in an institutional setting until a written eligibility determination by a community care worker approves specific community services and indicates when those services will begin.

Statutory Authority. Social Security Act, Title XIX, §1915(c); Olmstead v. Zimring, 527 USC 581 (1999); Executive Orders GWB99-2 and RP13; Government Code § §531.0244, 531.02441, 531.02442, 531.02443, 531.152 and 531.153; and Human Resources Code, Chapter 22, §§22.037 and 22.038, and Chapters 32 and 161.

**EXTERNAL/INTERNAL FACTORS IMPACTING STRATEGY:**

Effective September 1, 2014 the individuals formerly receiving CBA through this strategy will begin receiving services through HHSC Managed Care. Effective September 1, 2016, the individuals formerly receiving MDCP through this strategy will begin receiving services through HHSC Managed Care.