

4.B. Exceptional Items Strategy Allocation Schedule
 84th Regular Session, Agency Submission, Version 1
 Automated Budget and Evaluation System of Texas (ABEST)

Agency Code: **529** Agency Name: **Health and Human Services Commission**

Item Name: **Maintain Cost Trends for Medicaid Current Services**

Allocation to Strategy: **2-1-2** Disability-Related Eligibility Group

EFFICIENCY MEASURES

Code/Description	Excp 2016	Excp 2017
1 Average Disability-Related Cost Per Recipient Month	1,069.33	1,138.86
2 Average Cost/Disability-Related Recipient Month: STAR+PLUS	1,099.53	1,176.56

OBJECTS OF EXPENSE

Code/Description	Excp 2016	Excp 2017
3001 CLIENT SERVICES	243,783,445	507,428,222
TOTAL, OBJECT OF EXPENSE	\$243,786,445	\$507,428,222

METHOD OF FINANCING

Code/Description	Excp 2016	Excp 2017
555 Federal Funds 93.778.000 XIX FMAP	140,800,682	292,591,721
555 Federal Funds 93.778.005 XIX FMAP @ 90%	17,977	29,459
758 GR Match for Medicaid	102,964,786	214,807,042
TOTAL, METHOD OF FINANCING	\$243,783,445	\$507,428,222

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Item Name: **Maintain Cost Trends for Medicaid Current Services**

Allocation to Strategy: **2-2-1** **Non-Full Benefit Payments**

EFFICIENCY MEASURES

Code/Description	Excp 2016	Excp 2017
1 Average Emergency Services for Non-Citizens Cost Per Recipient Month	3,092.47	3,123.39

OBJECTS OF EXPENSE

Code/Description	Excp 2016	Excp 2017
3001 CLIENT SERVICES	11,465,941	24,310,582
TOTAL, OBJECT OF EXPENSE	\$11,465,941	\$24,310,582

METHOD OF FINANCING

Code/Description	Excp 2016	Excp 2017
555 Federal Funds 93.778.000 XIX FMAP	1,548,321	3,629,979
555 Federal Funds 93.778.009 SHARS	8,764,776	17,967,792
758 GR Match for Medicaid	1,152,844	2,712,811
TOTAL, METHOD OF FINANCING	\$11,465,941	\$24,310,582

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Item Name: **Maintain Cost Trends for Medicaid Current Services**

Allocation to Strategy: **2-2-2 Medicaid Prescription Drugs**

EFFICIENCY MEASURES

Code/Description	Excp 2016	Excp 2017
1 Average Cost/Medicaid Recipient Month: Prescription Drugs	68.65	70.57

OBJECTS OF EXPENSE

Code/Description	Excp 2016	Excp 2017
3001 CLIENT SERVICES	196,938,113	374,686,415
TOTAL, OBJECT OF EXPENSE	\$196,938,113	\$374,686,415

METHOD OF FINANCING

Code/Description	Excp 2016	Excp 2017
555 Federal Funds 93.778.000 XIX FMAP	116,319,113	220,535,285
555 Federal Funds 93.778.005 XIX FMAP @ 90%	1,527,648	2,385,048
706 Vendor Drug Rebates - Medicaid	34,549,500	73,997,403
758 GR Match for Medicaid	40,886,407	70,164,760
8081 Vendor Drug Rebates - Sup Rebates	3,675,445	7,603,919
TOTAL, METHOD OF FINANCING	\$196,938,113	\$374,686,415

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Allocation to Strategy: **2-2-5** For Clients Dually Eligible for Medicare and Medicaid

EFFICIENCY MEASURES

Code/Description	Excp 2016	Excp 2017
1 Average Part B Premium Per Month	115.69	122.66
2 Average Part A Premium Per Month	418.66	426.71
3 Average Qualified Medicare Beneficiaries (QMBs) Cost Per Recipient Month	47.08	47.60

OBJECTS OF EXPENSE

Code/Description	Excp 2016	Excp 2017
3001 CLIENT SERVICES	32,396,684	99,142,275
TOTAL, OBJECT OF EXPENSE	\$32,396,684	\$99,142,275

METHOD OF FINANCING

Code/Description	Excp 2016	Excp 2017
555 Federal Funds 93.778.000 XIX FMAP	17,173,642	46,475,822
555 Federal Funds 93.778.007 XIX ADM @ 100	2,426,606	6,439,370
758 GR Match for Medicaid	12,796,436	34,733,024
8092 Medicare Giveback Provision	0	11,494,059
TOTAL, METHOD OF FINANCING	#32,396,684	\$99,142,275

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Agency Code: **529** Agency Name: **Health and Human Services Commission**

Item Name: **Maintain Cost Trends for CHIP Current Services**

Allocation to Strategy: **3-1-1 Children's Health Insurance Program (CHIP)**

EFFICIENCY MEASURES

Code/Description	Excp 2016	Excp 2017
3 Average CHIP Programs Benefit Cost without Prescription Benefit	159.98	165.91
4 Average CHIP Programs Benefit Cost with Prescription Benefit	186.59	196.55

OBJECTS OF EXPENSE

Code/Description	Excp 2016	Excp 2017
3001 CLIENT SERVICES	22,207,087	46,517,475
TOTAL, OBJECT OF EXPENSE	\$22,207,087	\$46,517,475

METHOD OF FINANCING

Code/Description	Excp 2016	Excp 2017
555 Federal Funds 93.767.000 CHIP	20,250,643	43,289,162
8010 GR Match for Title XXI	1,956,444	3,228,313
TOTAL, METHOD OF FINANCING	\$22,207,087	\$46,517,475

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Agency Code: **529** Agency Name: **Health and Human Services Commission**

Item Name: **Increase HHS Recruitment and Retention**

Allocation to Strategy: **1-2-1 Consolidated System Support**

OBJECTS OF EXPENSE

Code/Description	Excp 2016	Excp 2017
1001 SALARIES AND WAGES	3,830,458	2,466,179
2009 OTHER OPERATING EXPENSE	57,458	36,993
3001 CLIENT SERVICES	66,717,479	67,296,397
TOTAL, OBJECT OF EXPENSE	\$70,605,395	\$69,799,569

METHOD OF FINANCING

Code/Description	Excp 2016	Excp 2017
1 General Revenue Fund	35,742,371	35,216,722
555 Federal Funds 00.000.001 Comptroller Miscellaneous Claims Federal Fund Payment	33,460,369	33,582,452
555 Federal Funds 10.561.000 State Admin Match SNAP	257,938	181,964
555 Federal Funds 93.566.000 Refugee and Entrant Assis	1,232	927
555 Federal Funds 93.767.000 CHIP	56,784	41,376
555 Federal Funds 93.778.003 XIX 50%	380,866	275,832
555 Federal Funds 93.778.004 XIX ADM @ 75%	33,130	19,337
758 GR Match for Medicaid	391,643	282,146
777 Interagency Contracts	13	7
8010 GR Match for Title XXI	23,111	16,842
8014 GR Match Food Stamp Adm	257,938	181,964
TOTAL, METHOD OF FINANCING	\$70,605,395	\$69,799,569

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Agency Code: **529** Agency Name: **Health and Human Services Commission**

Item Name: **Increase HHS Recruitment and Retention**

Allocation to Strategy: **2-1-2 Disability-Related Eligibility Group**

EFFICIENCY MEASURES

Code/Description	Excp 2016	Excp 2017
1 Average Disability-Related Cost Per Recipient Month	1,027.07	1,052.76
2 Average Cost/Disability-Related Recipient Month: STAR+PLUS	1,043.70	1,062.23
3 Average Cost/Disability-Related Recipient Month: STAR Kids	0.00	1,104.00

OBJECTS OF EXPENSE

Code/Description	Excp 2016	Excp 2017
3001 CLIENT SERVICES	27,319,814	28,691,455
TOTAL, OBJECT OF EXPENSE	\$27,319,814	\$28,691,455

METHOD OF FINANCING

Code/Description	Excp 2016	Excp 2017
555 Federal Funds 93.778.000 XIX FMAP	17,232,854	18,077,988
758 GR Match for Medicaid	10,086,960	10,613,467
TOTAL, METHOD OF FINANCING	\$27,619,814	\$28,691,455

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Agency Code: **529** Agency Name: **Health and Human Services Commission**

Item Name: **Improve Employee Technical Support**

Allocation to Strategy: **5-1-2 Information Technology Program Support**

OBJECTS OF EXPENSE

Code/Description	Excp 2016	Excp 2017
2009 OTHER OPERATING EXPENSE	25,000	0
TOTAL, OBJECT OF EXPENSE	\$25,000	\$0

METHOD OF FINANCING

Code/Description	Excp 2016	Excp 2017
1 General Revenue Fund	2,642	0
555 Federal Funds 00.000.001 Comptroller Miscellaneous Claims Federal Fund Payment	651	0
555 Federal Funds 10.561.000 State Admin Match SNAP	3,613	0
555 Federal Funds 93.566.000 Refugee and Entrant Assis	44	0
555 Federal Funds 93.767.000 CHIP	1,030	0
555 Federal Funds 93.778.003 XIX 50%	6,494	0
758 GR Match for Medicaid	6,494	0
8010 GR Match for Title XXI	419	0
8014 GR Match Food Stamp Adm	3,613	0
TOTAL, METHOD OF FINANCING	\$25,000	\$0

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Code/Description	Excp 2016	Excp 2017
8014 GR Match Food Stamp Adm	754,249	439,129
TOTAL, METHOD OF FINANCING	\$3,120,288	\$1,827,211