

6.E. Estimated Revenue Collections Supporting 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

1 General Revenue Fund

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Beginning Balance (Unencumbered):	\$2,457,952	\$0	\$0	\$0	\$0
Estimated Revenue: 3602 Earned Fed Funds, Food Stamp	6,025,847	4,388,878	5,200,000	5,200,000	5,200,000
Estimated Revenue: 3702 Fed Receipts - Earned Federal Funds	4,558,972	3,450,447	4,000,000	4,000,000	4,000,000
Estimated Revenue: 3726 Fed Receipts - Indirect Cost Recovery	4,695,150	4,460,675	3,100,000	3,100,000	3,100,000
Subtotal: Actual/Estimated Revenue	15,279,969	12,300,000	12,300,000	12,300,000	12,300,000
Total Available	\$17,737,921	\$12,300,000	\$12,300,000	\$12,300,000	\$12,300,000

DEDUCTIONS:

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Expended	(12,004,212)	(12,004,212)	(12,004,212)	(12,004,212)	(12,004,212)
Expended (MAC)	(175,000)	(175,000)	(175,000)	(175,000)	(175,000)
Tsfr for Benefits by CPA (Art IX, 6.22(g))	(120,788)	(120,788)	(120,788)	(120,788)	(120,788)
Lapsing Collections	(5,437,921)	0	0	0	0
Total Deductions	\$(17,737,921)	\$(12,300,000)	\$(12,300,000)	\$(12,300,000)	\$(12,300,000)
Ending Fund/Account Balance	\$0	\$0	\$0	\$0	\$0

REVENUE ASSUMPTIONS:

The unexpended balances of Earned Federal Funds in the amount of \$2,457,952 were carried forward from 2012 to 2013.

It is assumed that HHSC will continue to receive federal receipts for SNAP and Medicaid Administrative Claiming and will continue to be charged for SWCAP.

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In June 2014, Texas received a \$6.1 million SNAP High Performance Bonus for payment error accuracy rates (not reflected in amounts above).

The lapsing collections in 2013 is a result of unspent Earned Federal funds carried over from 2012 and additional revenue collected over the appropriated threshold.

CONTACT PERSON:

Lisa Subia

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666 Appropriated Receipts

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Beginning Balance (Unencumbered):	\$729,671	\$659,123	\$620,412	\$621,953	\$482,283
Estimated Revenue: 3740 Grants/Donations	78,225	173,537	141,211	0	0
Estimated Revenue: 3765 Supplies/Equipment/ Services	25,000	25,000	0	0	0
Estimated Revenue: 3766 Supplies/Equipment/ Services - Local Funds	9,574,979	9,463,428	9,463,428	9,463,428	9,463,428
Estimated Revenue: 3802 Reimbursements - Third Party	5,000	0	0	0	0
Subtotal: Actual/Estimated Revenue	9,683,204	9,661,965	9,604,639	9,463,428	9,463,428
Total Available	\$10,412,875	\$10,321,088	\$10,225,051	\$10,085,381	\$9,945,711

DEDUCTIONS:

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Expended Hospital Based Workers	(9,574,979)	(9,463,428)	(9,463,428)	(9,463,428)	(9,463,428)
Expended CEDD - Casey Family Program	(34)	(80)	0	0	0
Expended TOPDD	(92,624)	(149,782)	(139,670)	(139,670)	(139,670)
Transfer for Benefits TOPDD	(17,971)	0	0	0	0
Lapsed Collections	(68,144)	(87,386)	0	0	0
Total Deductions	\$(9,753,752)	\$(9,700,676)	\$(9,603,098)	\$(9,603,098)	\$(9,603,098)
Ending Fund/Account Balance	\$659,123	\$620,412	\$621,953	\$482,283	\$342,613

REVENUE ASSUMPTIONS:

Collections resulting from contracted eligibility workers are assumed at \$9,463,428 for fiscal years 2014 through 2017.

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The majority of the unexpended balances carried forward in this revenue schedule are related to grant funding received by the Texas Office for the Prevention of Developmental Disabilities (TOPDD) from a private corporation. The private grant funding agreement ended 5/31/2012 but expenditures will continue into FY 2015 and the next biennium.

We do not anticipate collecting revenues for TOPDD in 2016-17. The balance needs to be UB into 2018-2019 to support operations.

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705 Medicaid Program Income

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Beginning Balance (Unencumbered):	\$0	\$0	\$0	\$0	\$0
Estimated Revenue: 3639 Premium Credits - Medicaid Program	21,293,973	74,189,190	37,091,000	39,284,000	39,284,400
Estimated Revenue: 3714 Judgments	797,962	383,110	0	0	0
Estimated Revenue: 3769 Forfeitures	0	1,717,201	0	0	0
Estimated Revenue: 3773 Insurance and Damages	1,690,608	1,757,779	0	0	0
Estimated Revenue: 3854 Interest - Other	376,801	32,776	200,000	0	0
Subtotal: Actual/Estimated Revenue	24,159,344	78,080,056	37,291,000	39,284,000	39,2984,400
Total Available	\$24,159,344	\$78,080,056	\$37,291,000	\$39,284,000	\$39,2984,400

DEDUCTIONS:

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Expended	(24,159,344)	(78,080,056)	(37,291,000)	(39,284,000)	(39,284,400)
Total Deductions	\$(24,159,344)	\$(78,080,056)	\$(37,291,000)	\$(39,284,000)	\$(39,284,400)
Ending Fund/Account Balance	\$0	\$0	\$0	\$0	\$0

REVENUE ASSUMPTIONS:

Collections for Medicaid Program Income do not necessarily relate to with total expenditures or caseload projections as the majority of this revenue source is experience rebates from Medicaid managed care organizations (MCOs).

Experience rebates are received when the negotiated managed care premium rates exceed the actual incurred cost. MCOs return a portion of those dollars as experience rebates. The state retains the state share and the federal share is returned to the federal government.

HHSC experienced an increase in collections in 2014 from the managed care expansion implemented in march 2012, as well as collections from dental and managed transportation programs.

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706 Vendor Drug Rebates - Medicaid

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Beginning Balance (Unencumbered):	\$0	\$0	\$0	\$0	\$0
Estimated Revenue: 3638 Vendor Drug Rebates - Medicaid Program	524,568,457	475,145,995	539,232,613	630,476,143	628,243,097
Estimated Revenue: 3714 Judgments	168,490	380,230	0	0	0
Estimated Revenue: 3769 Forfeitures	186,380	4,306,760	0	0	0
Estimated Revenue: 3854 Interest - Other	61,709	24,981	220,000	0	0
Subtotal: Actual/Estimated Revenue	524,985,036	479,857,966	539,452,613	630,476,143	628,243,097
Total Available	\$524,985,036	\$479,857,966	\$539,452,613	\$630,476,143	\$628,243,097

DEDUCTIONS:

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Expended	(524,985,036)	(479,857,966)	(539,452,613)	(630,476,143)	(628,243,097)
Total Deductions	\$(524,985,036)	\$(479,857,966)	\$(539,452,613)	\$(630,476,143)	\$(628,243,097)
Ending Fund/Account Balance	\$0	\$0	\$0	\$0	\$0

REVENUE ASSUMPTIONS:

Vendor Drug Rebate revenue represents that state share of rebates provided by drug manufacturers to the State as part of the federal Medicaid Drug Rebate Program (OBRA 90). The revenue is calculated using Medicaid projected caseload and cost information. The FMAP also dictates the amount of state share retained and the amount returned to the federal government.

As the majority of Medicaid prescription drugs are provided through managed care, it is assumed that the share of general drugs will be increasing. Since generic drugs are cheaper, there should eventually be a decline in drug rebate revenue.

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3643 Premium Co-payments

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Beginning Balance (Unencumbered):	\$0	\$0	\$0	\$0	\$0
Estimated Revenue: 3643 Premium Co-pay, Low Income Child	1,467,595	1,430,822	1,387,298	433,991	348,761
Estimated Revenue: 3802 Reimbursements - Third Party	64	1,530	0	0	0
Subtotal: Actual/Estimated Revenue	1,467,659	1,432,352	1,387,298	433,991	348,761
Total Available	\$1,467,659	\$1,432,352	\$1,387,298	\$433,991	\$348,761

DEDUCTIONS:

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Expended	(1,467,659)	(1,432,352)	(1,387,298)	(433,991)	(348,761)
Total Deductions	\$(1,467,659)	\$(1,432,352)	\$(1,387,298)	\$(433,991)	\$(348,761)
Ending Fund/Account Balance	\$0	\$0	\$0	\$0	\$0

REVENUE ASSUMPTIONS:

CHIP enrollment fees are \$50 or less per family for each 12-month term of eligibility and vary based on the family's income.

Projected collections for 2016-17 are less as a result of the Federal Match Rate for CHIP increasing 23 percentage points.

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8044 Medicaid Subrogation Receipts

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Beginning Balance (Unencumbered):	\$0	\$0	\$0	\$0	\$0
Estimated Revenue: 3802 Reimbursements - Third Party	80,378,847	80,000,000	80,000,000	80,000,000	80,000,000
Subtotal: Actual/Estimated Revenue	80,378,847	80,000,000	80,000,000	80,000,000	80,000,000
Total Available	\$80,378,847	\$80,000,000	\$80,000,000	\$80,000,000	\$80,000,000

DEDUCTIONS:

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Expended	(80,378,847)	(80,000,000)	(80,000,000)	(80,000,000)	(80,000,000)
Total Deductions	\$(80,378,847)	\$(80,000,000)	\$(80,000,000)	\$(80,000,000)	\$(80,000,000)
Ending Fund/Account Balance	\$0	\$0	\$0	\$0	\$0

REVENUE ASSUMPTIONS:

Collections for Medicaid Subrogation Receipts do not necessarily relate to total expenditures or caseload projections.

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8054 Experience Rebates - CHIP

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Beginning Balance (Unencumbered):	\$0	\$0	\$0	\$0	\$0
Estimated Revenue: 3649 Vendor Drug/Exp. Rebates, Nonmed	2,256,412	6,353,600	3,225,200	704,800	555,200
Estimated Revenue: 3854 Interest - Other	98,926	0	0	0	0
Subtotal: Actual/Estimated Revenue	2,355,338	6,353,600	3,225,200	704,800	555,200
Total Available	\$2,355,338	\$6,353,600	\$3,225,200	\$704,800	\$555,200

DEDUCTIONS:

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Expended	(2,355,338)	(6,353,600)	(3,225,200)	(704,800)	(555,200)
Total Deductions	\$(2,355,338)	\$(6,353,600)	\$(3,225,200)	\$(704,800)	\$(555,200)
Ending Fund/Account Balance	\$0	\$0	\$0	\$0	\$0

REVENUE ASSUMPTIONS:

Experience Rebates are received when the negotiated managed care premium rates exceed the actual incurred cost. Managed care organizations (MCOs) return a portion of those dollars as experience rebates. The state retains the state share and the federal share is returned to the federal government.

Collections received in 2014 were related to 2013 financial performance of MCO - 18 month Financial Status Reporting period.

Projected collections for 2016-17 are less as a result of the Federal Match Rate for CHIP increasing 23 percentage points.

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8062 Approp Receipts - Match For Medicaid

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Beginning Balance (Unencumbered):	\$0	\$0	\$0	\$0	\$0
Estimated Revenue: 3014 Mtr Vehicle Registration Fees	17,469	0	0	0	0
Estimated Revenue: 3595 Medical Assist Cost Recovery	12,460,177	14,029,459	14,647,348	12,790,746	12,811,714
Estimated Revenue: 3802 Reimbursements - Third Party	3,527,222	1,251,502	1,210,213	1,251,502	1,251,502
Subtotal: Actual/Estimated Revenue	16,004,868	15,280,961	15,857,561	14,042,248	14,063,216
Total Available	\$16,004,868	\$15,280,961	\$15,857,561	\$14,042,248	\$14,063,216

DEDUCTIONS:

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Expended (GME)	(12,460,177)	(14,029,459)	(14,647,348)	(12,790,746)	(12,811,714)
Expended (Value Added Network)	(3,527,222)	(1,251,502)	(1,210,213)	(1,251,502)	(1,251,502)
Expended	(17,469)	0	0	0	0
Total Deductions	\$(16,004,868)	\$(15,280,961)	\$(15,857,561)	\$(14,042,248)	\$(14,063,216)
Ending Fund/Account Balance	\$0	\$0	\$0	\$0	\$0

REVENUE ASSUMPTIONS:

The source of this revenue is match for Graduate Medical Education (GME) and Value Added Network.

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8070 Vendor Drug Rebates - CHIP

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Beginning Balance (Unencumbered):	\$0	\$0	\$0	\$0	\$0
Estimated Revenue: 3469 Vendor Drug/Exp. Rebates, Nonmed	7,979,025	7,839,136	5,128,665	1,484,638	1,194,798
Estimated Revenue: 3854 Interest - Other	1,433	178	1,000	0	0
Subtotal: Actual/Estimated Revenue	7,980,458	7,839,314	5,129,665	1,484,638	1,194,798
Total Available	\$7,980,458	\$7,839,314	\$5,129,665	\$1,484,638	\$1,194,798

DEDUCTIONS:

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Expended	(7,980,458)	(7,839,314)	(5,129,665)	(1,484,638)	(1,194,798)
Total Deductions	\$(7,980,458)	\$(7,839,314)	\$(5,129,665)	\$(1,484,638)	\$(1,194,798)
Ending Fund/Account Balance	\$0	\$0	\$0	\$0	\$0

REVENUE ASSUMPTIONS:

Vendor Drug Rebates in CHIP represent the state share of rebates provided by drug manufacturers to the State as part of providing prescription drugs in the CHIP Program. The revenue is calculated using CHIP projected caseload and drug cost information. The EFMAP also dictates the amount of state share retained and the amount returned to the federal government.

Projected collections for 2016-17 are less as a result of the Federal Match Rate for CHIP increasing 23 percentage points.

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8075 Cost Sharing - Medicaid Clients

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Beginning Balance (Unencumbered):	\$0	\$0	\$0	\$0	\$0
Estimated Revenue: 3463 Premium Co-Pay Low Income Child	113,230	111,971	111,971	111,971	111,971
Subtotal: Actual/Estimated Revenue	113,230	111,971	111,971	111,971	111,971
Total Available	\$113,230	\$111,971	\$111,971	\$111,971	\$111,971

DEDUCTIONS:

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Expended	(113,230)	(111,971)	(111,971)	(111,971)	(111,971)
Total Deductions	\$(113,230)	\$(111,971)	\$(111,971)	\$(111,971)	\$(111,971)
Ending Fund/Account Balance	\$0	\$0	\$0	\$0	\$0

REVENUE ASSUMPTIONS:

In FY 2007 the Medicaid Buy-In program started, and revenues were collected. Estimates of future collections are based upon the projected caseload of participating clients. Both qualified adults and children can "buy in" to Medicaid coverage.

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8081 Vendor Drug Rebates - Sup Rebates

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Beginning Balance (Unencumbered):	\$0	\$0	\$0	\$0	\$0
Estimated Revenue: 3565 Medicaid Vendor Drug Supplemental	68,680,089	61,737,975	70,841,820	72,458,730	70,506,202
Subtotal: Actual/Estimated Revenue	68,680,089	61,737,975	70,841,820	72,458,730	70,506,202
Total Available	\$68,680,089	\$61,737,975	\$70,841,820	\$72,458,730	\$70,506,202

DEDUCTIONS:

FUND/ACCOUNT	Act 2013	Exp 2014	Exp 2015	Bud 2016	Est 2017
Expended	(68,680,089)	(61,737,975)	(70,841,820)	(72,458,730)	(70,506,202)
Total Deductions	\$(68,680,089)	\$(61,737,975)	\$(70,841,820)	\$(72,458,730)	\$(70,506,202)
Ending Fund/Account Balance	\$0	\$0	\$0	\$0	\$0

REVENUE ASSUMPTIONS:

Medicaid Vendor Drug supplemental rebate revenue represents the state share of rebates provided by drug manufacturers to the State for participation in the Preferred Drug List and Supplemental Rebate Program. Rebates are calculated using projected Medicaid caseload information provided from the forecast of Medicaid clients.

CONTACT PERSON:

Lisa Subia