

**TEXAS HEALTH AND HUMAN SERVICES COMMISSION  
RATE ANALYSIS DEPARTMENT**

**June 28, 2013**

**Proposed Payment Rates for Pediatric Care Facility Special  
Reimbursement Class for  
Truman W. Smith Children's Care Center**

Payment rates are proposed to be effective  
September 1, 2013

## SUMMARY OF PROPOSED PAYMENT RATES

**Effective September 1, 2013**

The Health and Human Services Commission (HHSC) will conduct a public hearing at 3:00 p.m. on July 15, 2013, in the Public Hearing Room in the John H. Winters Building, 701 West 51<sup>st</sup> Street, Austin, Texas, with entrance through Security at the front of the building facing 51st Street. Public comments will be received on Truman W. Smith Children's Care Center's Payment Rates to be effective September 1, 2013.

HHSC will consider concerns expressed at the hearing prior to final rate approval. This public hearing is held in compliance with Human Resources Code §32.0282 and Texas Administrative Code (TAC) Title 1, §355.105(g), which require public notice and hearings on proposed Medicaid reimbursements before such rates are approved by HHSC.

### PROPOSED RATES AND MINUTES

The proposed payment rate for Truman W. Smith Children's Care Center to be effective September 1, 2013, is as follows:

|                                      | Effective<br>9/1/13 |
|--------------------------------------|---------------------|
| Direct Care                          | \$90.96             |
| Other Resident Care                  | \$74.99             |
| Dietary                              | \$13.91             |
| Facility, General and Administration | \$58.64             |
| <b>Total</b>                         | <b>\$238.50</b>     |

The proposed rates are based upon total allowable per diem costs from the most recently available, reliable cost report for the provider inflated to the rate period and multiplied by 1.03. The provider's 2012 cost report was used in determining these proposed rates. The current rate for this service is \$226.66.

### METHODOLOGY AND JUSTIFICATION

The proposed rate was determined in accordance with the rate setting methodology codified at 1 TAC Chapter 355, Subchapter C, §355.307, Reimbursement Setting Methodology.

Should you have any questions regarding the information in this document, please contact Brian King, Rate Analyst at (512) 707-6074 or [brian.king@hhsc.state.tx.us](mailto:brian.king@hhsc.state.tx.us).