

DRAFT - numbers subject to change.		Department of Human Services					DRAFT - numbers subject to change.	
		OHP Savings / Off-sets						
		Potential HB 5077 Section 89 Disappropriation					Note that the following represents preliminary recommendations only. The material has not yet been analyzed or approved by the DAS Budget and Management division (BAM) or by the Governor's Office.	
		As of 01/05/04						
General Funds, Lottery Funds, & Tobacco Tax:		Health Services	Children Adults & Families	Community Human Services	Seniors & People with Disabilities	Total All	Description of GF Impact in Other Clusters	
HB 5077 - Disappropriation Target - General Funds		\$154,121,800	\$11,981,200	\$54,460	\$12,798,100	\$178,955,560		
HB 5077 - Disappropriation Target - Lottery Funds		\$3,812,200	\$0	\$0	\$0	\$3,812,200		
HB 5077 - Disappropriation Target - Tobacco Tax		\$24,162,000	\$0	\$0	\$0	\$24,162,000		
January 2004 financial forecast position after problems, savings, and management actions.		(\$49,446,158)	(\$8,339,002)	\$0	(\$37,416,696)	(\$95,201,856)		
Net - Position after disappropriation & financial forecast		\$132,649,842	\$3,642,198	\$54,460	(\$24,618,596)	\$111,727,904		
Potential OMAP Action Items								
OMAP - Do not implement MEDS		(\$7,144,347)				(\$7,144,347)		
OMAP - Do not implement CHIP at 185% - 200% FPL		(\$958,319)				(\$958,319)		
OMAP Administration associated with CHIP 185% - 200%		(\$11,436)				(\$11,436)		
OMAP - Eliminate medical assistance for OHP Standard population (Adult/Couples and Families).		(\$48,094,213)	\$553,300		\$57,395	(\$47,483,518)	CAF - Approximately 1,000 TANF clients are placed every month and are removed from the caseload. An estimated 10% of these clients will return to TANF for medical coverage. The estimated impact to CAF-TANF Basic and UN caseload is an increase of 100 cases per month at a rate of \$503 per month, per case. SPD - Staff to process increased application due to expected increase in those applying for Presumptive Eligibility.	
Off-set cost - Office of Mental Health and Addiction Services - Acute Psyc Care - for civilly committed individuals.		\$2,563,451				\$2,563,451	Cost to continue care of those civilly committed individuals in acute care settings currently receiving benefits as a standard population client.	
OMAP - Offset costs - Increase in OHP Plus cost due to presumptive Medicaid disability determination		\$622,905				\$622,905		
OMAP - Offset costs for no 30-line move (assumes Federal government would not approve).		\$6,768,041				\$6,768,041		
OMAP - Reduce PLM program (pregnant women) from 185% FPL to 133% FPL.		(\$8,480,003)				(\$8,480,003)		
OMAP - Reduction in CAWEMS related to PLM reduction to 133% FPL		(\$84,291)				(\$84,291)		
OMAP - Eliminate following Plus Adults services:								
Vision		(\$1,814,403)	\$440,460			(\$1,373,943)	CAF - As a result of this action in HS, an estimated 588 JOBS clients would access these services each month at a rate of \$68.00 per month, per case.	

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Dental	(\$10,809,596)		\$673,644		#REF!	#REF!	<p>CAF - As a result of this action in HS, an estimated 588 JOBS clients would access these services each month at a rate of \$104.00 per month, per case.</p> <p>SPD Cost for approximately 5,000 people who are developmentally disabled. Cost will increase as a result of Dental disease secondary to use of anti-epileptic medicine, and the need for increases staffing and services for individuals with significant behavior outbursts caused by mouth pain. LTC cost will increase for approximately 700 people who are quadriplegic and use their mouths for activities of daily living. CMS has historically refused to allow Federal Match for such services within the Home and Community based waivers.</p>	
Behavioral Offset to loss of Dental in other rates paid	\$17,671					\$17,671		
Therapies (this includes Physical, occupational, speech, and language therapies).	(\$1,664,245)				\$2,520,321	\$856,076	<p>Nursing facilities must provide therapies for people who need them, regardless of outside payment. Hospital discharge planners will increase referrals of Medicaid clients in need of therapy to nursing homes, rather than other care options. The result is an anticipated increase in Medicaid caseload and cost as an increased number of people in need of 90 to 120 days of therapy are discharged to facilities.</p>	
Administrative savings associated with above three actions (2.29 FTE).	(\$546,604)					(\$546,604)		
OMAP - Eliminate Outpatient Mental Health & Chemical Dependency for Plus Adults :								
Mental Health	(\$24,046,318)					(\$24,046,318)		
Chemical Dependency	(\$3,319,885)					(\$3,319,885)		
OMAP Behavioral Add-back - Loss of MH & CD services will increased utilization of other medical services.	\$7,559,605					\$7,559,605		
CAF self sufficiency impact - related to elimination of MH & CD			\$1,346,400			\$1,346,400	<p>CAF - Approximately 2,000 TANF adults (25% of the 8,000 required to participate in employment related services each month) have mental health and/or chemical dependency issues that must be treated before the clients can become self sufficient. This action will create a cost shift from OHP to TANF GF, based on 2,000 cases per month at a rate of \$61.20 per month, per case.</p>	

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	CAF Child Welfare impact - related to elimination of MH & CD		\$3,492,682			\$3,492,682	CAF - An estimated 40 children per month will enter the foster care system with significant family Alcohol and Drug issues which will need to be addressed. An additional 725 children per month are estimated to remain in Foster Care longer as a result of Alcohol and Drug Treatment needs for the parents, which will delay reunification. The estimated impact to CAF-Foster Care caseload is an increase of 765 cases per month at a rate of \$425 per month, per case. Also, should residential treatment beds be reduced, approximately 200 children will enter Foster Care with special rates estimated to be \$1,725 per month, per case.	
	Potential Offset - OMHAS Acute Psyc Care. - OMHAS estimate of costs required to retain Psychiatric inpatient capacity.	\$3,615,463				\$3,615,463		
	OMHAS loss of Federal Revenue for Court appointed A&D treatment in A&D Residential Settings	\$1,804,915				\$1,804,915		
	OMAP Eliminate CHIP at 133% - 185% of FPL	(\$3,591,555)				(\$3,591,555)		
	Administration associated with CHIP 133% - 185%	(\$44,348)				(\$44,348)		
	OMAP Eliminate CHIP at < 133% FPL	(\$2,572,952)				(\$2,572,952)		
	Administration associated with CHIP 133% - 185%	(\$31,516)				(\$31,516)		
	OMAP Reduction of RX drug Benefit	(\$25,622,971)				(\$25,622,971)		
	OMHAS Potential added cost due to a reduction in OMAP Drug benefit	Pending	Pending	Pending	Pending	Pending		
	Total OMAP GF Impact from Potential Actions	(\$115,884,951)	\$6,506,486	\$0	#REF!	#REF!		
	Net - January Rebalance Savings available for Disappropriation	N/A	N/A	\$0	#REF!			