

6.H. Estimated Total of All Agency Funds Outside the GAA Bill Pattern

Health and Human Services Commission

ESTIMATED GRAND TOTAL OF AGENCY FUNDS OUTSIDE THE 2016-17 GAA BILL PATTERN: \$6,221,000,000

Texas Health Transformation and Quality Improvement Program 1115 Waiver - Uncompensated Care

Estimated Beginning Balance in FY 2014	\$0
Estimated Revenues FY 2014	\$3,884,000,000
Estimated Revenues FY 2015	\$3,394,000,000
FY 2014-15 Total	\$7,278,000,000
Estimated Beginning Balance in FY 2016	\$0
Estimated Revenues FY 2016	\$3,121,000,000
Estimated Revenues FY 2017	\$3,100,000,000
FY 2016-17 Total	\$6,221,000,000

Constitutional or Statutory Creation and Use of Funds:

The Texas Healthcare Transformation and Quality Improvement Program is a federally approved 1115 demonstration waiver. Under the waiver, the historical trended value of supplemental hospital funding, managed care savings and negotiated funding will be available to fund a statewide pool worth \$29 billion (all funds) over the five years of the waiver. Funding from the waiver pool will be distributed to hospitals to support the following objectives: (1) an uncompensated care (UC) pool and (2) a Delivery System Reform Incentive Payments Pool (DSRIP). Uncompensated Care payments subsidize the costs incurred by hospitals and physicians for patient care services provided to Medicaid and uninsured patients that are not reimbursed through the claims adjudication process or by other supplemental payments.

Transition payments will bridge supplemental payments to hospitals from the old UPL payments into uncompensated care.

Method of Calculation and Revenue Assumptions:

Data obtained from the Special Terms and Conditions for the Texas Healthcare Transformation and Quality Improvement Program, Section 1115(a) Medicaid demonstration as approved by the Centers for Medicare and Medicaid Services.

ESTIMATED GRAND TOTAL OF AGENCY FUNDS OUTSIDE THE 2016-17 GAA BILL PATTERN: \$6,180,000,000

Texas Health Transformation and Quality Improvement Program 1115 Waiver - Delivery System Reform Incentive Payments

Estimated Beginning Balance in FY 2014	\$0
Estimated Revenues FY 2014	\$2,636,000,000
Estimated Revenues FY 2015	\$2,834,000,000
FY 2014-15 Total	\$5,470,000,000
Estimated Beginning Balance in FY 2016	\$0
Estimated Revenues FY 2016	\$3,080,000,000
Estimated Revenues FY 2017	\$3,100,000,000
FY 2016-17 Total	\$6,180,000,000

Constitutional or Statutory Creation and Use of Funds:

The Texas Healthcare Transformation and Quality Improvement Program is a federally approved 1115 demonstration waiver. Under the waiver, the historical trended value of supplemental hospital funding, managed care savings and negotiated funding will be available to fund a statewide pool worth \$29 billion (all funds) over the five years of the waiver. Funding from the waiver pool will be distributed to hospitals to support the following objectives: (1) an uncompensated care (UC) pool and (2) a Delivery System Reform Incentive Payments Pool (DSRIP). DSRIP payments will be made to participating providers who have achieved their milestones and metrics for each project/intervention that is defined within their Regional Health Plan.

Method of Calculation and Revenue Assumptions:

Data obtained from the Special Terms and Conditions for the Texas Healthcare Transformation and Quality Improvement Program, Section 1115(a) Medicaid demonstration as approved by the Centers for Medicare and Medicaid Services.

ESTIMATED GRAND TOTAL OF AGENCY FUNDS OUTSIDE THE 2016-17 GAA BILL PATTERN: \$3,262,800,000

Disproportionate Share Program Funds

Estimated Beginning Balance in FY 2014	\$0
Estimated Revenues FY 2014	\$1,672,000,000
Estimated Revenues FY 2015	\$1,635,000,000
FY 2014-15 Total	\$3,307,000,000
Estimated Beginning Balance in FY 2016	\$0
Estimated Revenues FY 2016	\$1,631,400,000
Estimated Revenues FY 2017	\$1,631,400,000
FY 2016-17 Total	\$3,262,800,000

Constitutional or Statutory Creation and Use of Funds:

The Disproportionate Share Program is authorized in Chapter 32, Human Resource Code to reimburse certain hospitals that provide a high volume of indigent services. Transferring public hospitals (local and state) provide the required state match through an intergovernmental transfer to match federal funds. Total funding is redistributed to transferring and other public and private hospitals under federally approved methodologies.

Method of Calculation and Revenue Assumptions:

The value of the program is capped by the U.S. Centers for Medicare and Medicaid (CMS). The federal limit will determine the state match required.

ESTIMATED GRAND TOTAL OF AGENCY FUNDS OUTSIDE THE 2016-17 GAA BILL PATTERN: \$27,982

Texas Home Visiting Program Trust Fund

Estimated Beginning Balance in FY 2014	\$0
Estimated Revenues FY 2014	\$4,664
Estimated Revenues FY 2015	\$13,991
FY 2014-15 Total	\$18,655
Estimated Beginning Balance in FY 2016	\$0
Estimated Revenues FY 2016	\$13,991
Estimated Revenues FY 2017	\$13,991
FY 2016-17 Total	\$27,982

Constitutional or Statutory Creation and Use of Funds:

SB 1836 created the Texas Home Visiting Program (THVP) trust fund to support the promotion of healthy early childhood. The trust fund will consist of money from voluntary contributions of persons requesting a copy or certified copy of a birth, marriage, or divorce record and persons applying for a marriage license on or after January 1, 2014. Money in the trust fund may be spent without appropriation for the purpose of the THVP. The bill amends the Family Code, Health and Safety Code, and Local Government Code to establish the way in which a person can make a \$5 contribution to the fund and to provide for the collection and deposit of the contributions.

Method of Calculation and Revenue Assumptions:

Revenue estimates are estimated to maintain level collections based on limited history.