

## Department of Social Services DSS60000

### Permanent Full-Time Positions

Fund	Actual FY 16	Actual FY 17	Governor Estimated FY 18	Original Appropriation FY 19	Governor Revised FY 19	Legislative FY 19	Difference Leg-Gov FY 19
General Fund	1,975	1,986	2,009	2,009	1,986	1,986	-

### Budget Summary

Account	Actual FY 16	Actual FY 17	Governor Estimated FY 18	Original Appropriation FY 19	Governor Revised FY 19	Legislative FY 19	Difference Leg-Gov FY 19
Personal Services	130,009,841	116,604,913	117,637,370	122,536,340	117,445,907	117,199,907	(246,000)
Other Expenses	149,965,328	133,475,186	135,877,763	146,570,860	139,611,834	139,311,834	(300,000)
<b>Other Current Expenses</b>							
HUSKY Performance Monitoring	134,979	-	-	-	-	-	-
Genetic Tests in Paternity Actions	76,388	67,710	81,906	81,906	81,906	81,906	-
State-Funded Supplemental Nutrition Assistance Program	512,338	292,432	31,205	-	-	-	-
HUSKY B Program	5,928,386	4,750,000	5,060,000	5,320,000	5,320,000	5,320,000	-
<b>Other Than Payments to Local Governments</b>							
Medicaid	2,391,092,663	2,407,142,715	2,533,840,000	2,616,365,000	2,602,295,000	2,608,368,000	6,073,000
Old Age Assistance	37,815,756	39,228,323	38,506,679	38,026,302	39,826,302	39,826,302	-
Aid To The Blind	618,526	531,532	577,715	584,005	584,005	584,005	-
Aid To The Disabled	60,543,460	60,226,853	60,874,851	59,707,546	61,607,546	61,107,546	(500,000)
Temporary Family Assistance - TANF	90,077,812	78,941,777	70,131,712	70,131,712	75,131,712	75,131,712	-
Emergency Assistance	-	-	1	1	1	1	-
Food Stamp Training Expenses	5,583	6,804	9,832	9,832	9,832	9,832	-
Healthy Start	1,186,026	-	-	-	-	-	-
DMHAS-Disproportionate Share	108,935,000	108,935,000	108,935,000	108,935,000	108,935,000	108,935,000	-
Connecticut Home Care Program	43,537,058	42,920,322	39,910,000	46,530,000	44,350,000	44,350,000	-
Human Resource Development- Hispanic Programs	839,539	701,404	33,551	697,307	-	1,197,307	1,197,307
Community Residential Services	-	522,416,052	542,850,433	571,064,720	566,136,140	562,902,640	(3,233,500)
Protective Services to the Elderly	448,521	478,300	-	785,204	-	785,204	785,204
Safety Net Services	2,405,354	2,008,185	1,326,321	1,840,882	1,666,476	1,326,321	(340,155)
Refunds Of Collections	87,301	85,849	94,699	94,699	94,699	94,699	-
Services for Persons With Disabilities	486,105	469,852	273,897	370,253	369,318	273,897	(95,421)
Nutrition Assistance	356,101	377,217	631,056	837,039	743,095	743,095	-
State Administered General Assistance	22,449,707	20,008,333	19,431,557	19,334,722	19,334,722	19,334,722	-
Connecticut Children's Medical Center	13,963,390	12,657,171	11,163,625	10,125,737	9,897,908	10,125,737	227,829
Community Services	952,322	802,922	390,356	688,676	-	688,676	688,676
Human Service Infrastructure Community Action Program	3,190,614	2,580,426	2,934,598	3,209,509	3,054,198	3,149,619	95,421
Teen Pregnancy Prevention	1,511,245	1,412,540	1,245,860	1,271,286	1,245,860	1,245,860	-
Programs for Senior Citizens	-	-	5,777,475	7,895,383	-	-	-
Family Programs - TANF	513,086	352,038	29,337	316,835	-	29,337	29,337
Domestic Violence Shelters	5,158,570	4,997,814	5,198,424	5,353,162	5,247,072	5,247,072	-
Hospital Supplemental Payments	-	35,635,954	598,440,138	496,340,138	496,340,138	496,340,138	-

Account	Actual FY 16	Actual FY 17	Governor Estimated FY 18	Original Appropriation FY 19	Governor Revised FY 19	Legislative FY 19	Difference Leg-Gov FY 19
<b>Grant Payments to Local Governments</b>							
Human Resource Development-Hispanic Programs - Municipality	4,964	4,578	-	4,120	-	-	-
Teen Pregnancy Prevention - Municipality	118,778	111,430	98,281	100,287	98,281	98,281	-
Community Services - Municipality	74,309	-	-	-	-	-	-
<b>Agency Total - General Fund</b>	<b>3,072,999,049</b>	<b>3,598,223,632</b>	<b>4,301,393,642</b>	<b>4,335,128,463</b>	<b>4,299,426,952</b>	<b>4,303,808,650</b>	<b>4,381,698</b>
Family Programs - TANF	2,177,383	2,370,629	-	-	-	-	-
<b>Agency Total - Special Transportation Fund</b>	<b>2,177,383</b>	<b>2,370,629</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
Fall Prevention	-	-	376,023	376,023	-	-	-
<b>Agency Total - Insurance Fund</b>	<b>-</b>	<b>-</b>	<b>376,023</b>	<b>376,023</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total - Appropriated Funds</b>	<b>3,075,176,432</b>	<b>3,600,594,261</b>	<b>4,301,769,665</b>	<b>4,335,504,486</b>	<b>4,299,426,952</b>	<b>4,303,808,650</b>	<b>4,381,698</b>

Account	Governor Revised FY 19	Legislative FY 19	Difference from Governor
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## Policy Revisions

### Adjust Medicare Savings Program (MSP) Eligibility

Medicaid	-	61,500,000	61,500,000
<b>Total - General Fund</b>	<b>-</b>	<b>61,500,000</b>	<b>61,500,000</b>

#### Background

The FY 18 - FY 19 Biennial Budget reduced income eligibility for the Medicare Savings Program (MSP) from between 211% and 246% of the Federal Poverty Level (FPL) to the federal minimum of between 100% and 135% FPL. PA 17-1 JSS restored eligibility in FY 18. The FY 19 budget assumed Medicaid savings of \$61.5 million with a corresponding revenue gain of \$68.5 million (for a net state impact of \$130 million), associated with eliminating coverage for up to 68,100 individuals and reducing benefits for an additional 37,100.

#### Legislative

Provide funding of \$61.5 million (with a corresponding revenue loss of \$68.5 million) to reflect maintaining Medicare Savings Program (MSP) income eligibility at 211% to 246% FPL instead of reducing eligibility to the federal minimum. Increasing income eligibility restores coverage and maintains benefits for approximately 100,000 individuals. Section 13 of PA 18-81, the budget act, is related to this change.

### Increase Income Eligibility for Husky A

Medicaid	-	11,300,000	11,300,000
<b>Total - General Fund</b>	<b>-</b>	<b>11,300,000</b>	<b>11,300,000</b>

#### Background

PA 17-2, JSS, reduced funding by \$500,000 in FY 18 and \$11.3 million in FY 19 to reflect reducing income eligibility for HUSKY A adults from 155% FPL to 138% FPL.

#### Legislative

Provide funding of \$11.3 million to reflect restoring income eligibility for HUSKY A adults to FY 17 levels (from 138% to 155% FPL inclusive of the 5% disregard). Section 48 of PA 18-81, the budget act, is related to this change.

### Adjust Funding for Evacuees Displaced by Hurricane Maria

Human Resource Development-Hispanic Programs	-	500,000	500,000
<b>Total - General Fund</b>	<b>-</b>	<b>500,000</b>	<b>500,000</b>

Account	Governor Revised FY 19	Legislative FY 19	Difference from Governor
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**Background**

Section 19 of PA 18-81, the budget act, appropriates total funding of \$1.5 million to provide assistance to persons residing in the state who were displaced by Hurricane Maria. Funding is appropriated as follows: (1) \$400,000 million to the State Department of Education for Bilingual Education, (2) \$600,000 to the Department of Housing for Housing/Homeless Services to fund security deposits and first month rent to those evacuees impacted by Hurricane Maria, and (3) \$500,000 to the Department of Social Services for Human Resource Development (HRD)-Hispanic Programs.

**Legislative**

Provide funding of \$500,000 to HRD- Hispanic Programs to assist persons residing in Connecticut who were displaced by Hurricane Maria. Section 19 of PA 18-81, the budget bill, specifies these funds will provide grants of \$90,000 each to the Hispanic Coalition Inc. in Waterbury, Junta For Progressive Action in New Haven, Family Resource Center in Hartford, Caribe Youth Leaders in Waterbury, and \$40,000 each to Casa Boricua in Meriden, Human Resource Agency of New Britain Inc. in New Britain, YMCA of Greater Hartford, Larson Center, and \$20,000 to Thames Valley Council for Community Action in New London.

**Carryforward Medicaid Lapse**

Medicaid	-	(21,000,000)	(21,000,000)
<b>Total - General Fund</b>	-	<b>(21,000,000)</b>	<b>(21,000,000)</b>

**Legislative**

Reduce funding by \$21 million to reflect the carry forward and use of FY 18 Medicaid funds (that otherwise would have lapsed) in FY 19. Section 9 of PA 18-81, the budget act, is related to this change.

**Carryforward FY18 Hospital Supplementals for Payment in FY19****Legislative**

Section 8 of PA 18-81, the budget act, authorizes the carry forward of \$299.2 million in funding for Hospital Supplemental Payments from FY 18 to FY 19. This shift in funding reflects the anticipated delay in federal approval for supplemental payments and rate increases.

**Eliminate Medicaid Payments to Hospitals for GME**

Medicaid	(10,570,000)	-	10,570,000
<b>Total - General Fund</b>	<b>(10,570,000)</b>	-	<b>10,570,000</b>

**Background**

Medicare is the primary payer of graduate medical education (GME) and many states voluntarily supplement GME through their Medicaid program, in accordance with federal rules. The state's Medicaid program is slated to provide \$21.1 million in total GME funding to Connecticut's hospitals in FY 18 and FY 19, with annual payments ranging from \$6,816 (Rockville Hospital) to approximately \$8 million (Yale New Haven Hospital); 19 hospitals currently receive payments.

**Governor**

Eliminate funding of \$10,570,000 in the Medicaid account in FY 19 to reflect the elimination of Medicaid GME payments to hospitals, for a total reduction of \$21.1 million after accounting for the federal share.

**Legislative**

Maintain Medicaid GME payments to hospitals.

**Reduce Enhanced Reimbursement for Primary Care Providers**

Medicaid	(3,500,000)	-	3,500,000
<b>Total - General Fund</b>	<b>(3,500,000)</b>	-	<b>3,500,000</b>

**Background**

The Affordable Care Act (ACA) required states to increase Medicaid reimbursement for primary care providers to Medicare levels in 2013 and 2014, which was 100% federally funded during those years. Connecticut continued to fund PCP rates at that level until passage of PA 17-2 JSS, the biennial budget act, which reduced funding by \$2,750,000 in FY 18 and \$3,800,000 in FY 19 to reflect a reduction in the reimbursement rate for primary care providers to 95% of the 2014 Medicare fee schedule.

**Governor**

Reduce funding by \$3.5 million to reflect a reduction in the reimbursement rate for primary care providers to approximately 90% of Medicare levels. The gross impact to providers when factoring both the state and federal share reduces Medicaid expenditures by \$8.5 million in FY 19 and \$9.3 million in FY 20 when fully annualized.

Account	Governor Revised FY 19	Legislative FY 19	Difference from Governor
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**Legislative**

Maintain the current reimbursement rate for primary care providers.

**Annualize FY 18 Budgeted Lapses**

Personal Services	(269,710)	(269,710)	-
Other Expenses	(7,151,461)	(7,151,461)	-
Connecticut Home Care Program	(2,180,000)	(2,180,000)	-
Human Resource Development-Hispanic Programs	(663,756)	-	663,756
Community Residential Services	(11,078,580)	(11,078,580)	-
Safety Net Services	(514,561)	(514,561)	-
Services for Persons With Disabilities	(96,356)	(96,356)	-
Nutrition Assistance	(93,944)	(93,944)	-
Connecticut Children's Medical Center	(227,829)	-	227,829
Community Services	(298,320)	-	298,320
Human Service Infrastructure Community Action Program	(59,890)	(59,890)	-
Teen Pregnancy Prevention	(25,426)	(25,426)	-
Programs for Senior Citizens	(2,117,908)	-	2,117,908
Family Programs - TANF	(287,498)	(287,498)	-
Domestic Violence Shelters	(106,090)	(106,090)	-
Human Resource Development-Hispanic Programs - Municipality	(4,120)	(4,120)	-
Teen Pregnancy Prevention - Municipality	(2,006)	(2,006)	-
<b>Total - General Fund</b>	<b>(25,177,455)</b>	<b>(21,869,642)</b>	<b>3,307,813</b>

**Background**

The Governor's revised FY 19 budget allocates \$217.2 million in non-SEBAC lapses to various agencies.

**Governor**

Reduce funding by \$25,177,455 to reflect this agency's portion of the non-SEBAC lapses.

**Legislative**

Reduce funding by \$21,869,642 to reflect this agency's portion of the non-SEBAC lapses. Maintain total funding of \$3,307,813 for the Human Resource Development- Hispanic Programs, Connecticut Children's Medical Center, Community Services, and the Programs for Senior Citizens line items.

**Rollout SEBAC Attrition Savings to Agencies**

Personal Services	(3,144,692)	(3,144,692)	-
<b>Total - General Fund</b>	<b>(3,144,692)</b>	<b>(3,144,692)</b>	<b>-</b>

**Background**

The FY 18 - FY 19 biennial budget assumed various savings as a result of the 2017 SEBAC agreement. One of the components of the SEBAC Labor Management lapse in the biennial budget was attrition. Attrition savings are achieved by agencies actively managing the normal employee turnover in an agency. The Governor's revised FY 19 budget allocates \$75.1 million to various agencies to achieve savings related to attrition.

**Governor**

Reduce Personal Services by \$3,144,692 to reflect this agency's portion of the attrition savings.

**Legislative**

Same as Governor

**Eliminate Funding for Expired Contracts**

Human Resource Development-Hispanic Programs	(33,551)	-	33,551
Community Services	(50,201)	-	50,201
Family Programs - TANF	(29,337)	-	29,337
<b>Total - General Fund</b>	<b>(113,089)</b>	<b>-</b>	<b>113,089</b>

Account	Governor Revised FY 19	Legislative FY 19	Difference from Governor
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**Background**

Under Executive Order 58, funding for Human Resource Development - Hispanic Programs and Family Programs-TANF (the Fatherhood Initiative) were eliminated and the Department of Social Services (DSS) terminated the contracts for these programs as of 7/1/17. DSS did not enter into new contracts when the biennial budget was adopted in order to accommodate the holdbacks applied to the agency's accounts pursuant to PA 17-2 JSS as amended by PA 17-4 JSS. The funding remaining in the accounts reflects 1 month of funding provided to DSS to pay for contract expenditures for services while the contracts were being closed out.

In addition, under Executive Order 58 funding for earmarks under Community Services was eliminated, leaving funding for Connecticut Council for Family Service Agencies (CCSFA). Currently, CCFSA is funded under both the Community Services and Safety Net Services accounts. The Governor's revised FY 19 budget recommends consolidating funding for CCFSA within the Safety Net Services account. The recommended reduction in this account is the residual left after funding for CCFSA is shifted to the Safety Net Services account.

**Governor**

Eliminate funding of \$113,089 across various accounts to reflect the elimination of the remaining funding for contracts which were terminated in FY 18. The funding remaining in the account for CCFSA is consolidated within the Safety Net Services account, which is reflected in a separate policy write-up.

**Legislative**

Maintain remaining funding for contracts terminated in FY 18.

**Convert DDS Group Homes from Public to Private**

Aid To The Disabled	500,000	-	(500,000)
Community Residential Services	5,200,000	-	(5,200,000)
<b>Total - General Fund</b>	<b>5,700,000</b>	<b>-</b>	<b>(5,700,000)</b>

**Background**

As of 2/1/18, there were a total of 811 group homes (supported by a Medicaid waiver), 45 operated by DDS, and 766 operated by private providers. In FY 18, ten DDS operated group homes were converted to private providers. In FY 19, an additional ten group homes are scheduled for conversion. Group homes for DDS clients, operated by private providers, are funded in the DSS Community Residential Services account. The state receives a 50% federal reimbursement for Medicaid waived programs.

**Governor**

Provide funding of \$5.2 million to Community Residential Services and \$500,000 to Aid ToThe Disabled to support private providers operating ten group homes. The DDS budget is reduced by \$6,300,000 in Personal Services, \$410,000 in Other Expenses, and \$40,000 in Clinical Services for a total reduction of \$6,750,000. The conversion of ten group homes from public to private provider operation is anticipated to result in net savings of \$1,000,000 in FY 19. The DDS staff associated with the ten homes will be offered placements in vacancies within DDS, per the provisions of the 2017 SEBAC agreement.

**Legislative**

Do not provide additional funding for DDS group home conversions.

**Provide Funding for Community Residential Services for MFP**

Community Residential Services	950,000	-	(950,000)
<b>Total - General Fund</b>	<b>950,000</b>	<b>-</b>	<b>(950,000)</b>

**Background**

The Money Follows the Person (MFP) program helps states rebalance their Medicaid long-term care systems by increasing the use of home and community-based services and reducing the use of institutionally-based services such as nursing homes, Southbury Training School, and DDS Regional Centers.

**Governor**

Provide funding of \$950,000 to Community Residential Services to support MFP placements.

**Legislative**

Do not provide additional funding for MFP placements.

Account	Governor Revised FY 19	Legislative FY 19	Difference from Governor
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### Reallocate Positions to General Fund for MFP

Personal Services	246,000	-	(246,000)
<b>Total - General Fund</b>	<b>246,000</b>	<b>-</b>	<b>(246,000)</b>

#### Background

The federal Money Follows the Person (MFP) Rebalancing Demonstration Grant helps states rebalance their Medicaid long-term care systems by increasing the use of home and community-based services (HCBS) and reducing the use of institutionally-based services. The Affordable Care Act (ACA) enhanced the program for participating states through increased funding and extended federal reimbursement. Connecticut received a total award of \$234.6 million to fund MFP transitions from January 1, 2007 through December 31, 2018.

#### Governor

Provide funding of \$246,000 to reflect shifting support for eight MFP transition support staff (community nurse coordinators and eligibility services workers) to the General Fund. While federal funds will no longer be available to fully support these positions as of January 1, 2019, the state will continue to receive reimbursement for a portion of the position costs.

#### Legislative

Do not provide General Fund support for MFP transition support staff.

### Provide Funding to Modernize Nursing Home Rate Setting

Other Expenses	300,000	-	(300,000)
<b>Total - General Fund</b>	<b>300,000</b>	<b>-</b>	<b>(300,000)</b>

#### Governor

Provide funding of \$300,000 to support the development of an acuity-based rate setting system for nursing homes.

#### Legislative

Do not provide funding to support the development of an acuity-based rate setting system for nursing homes.

### Transfer Aging and Long Term Care Ombudsman to DORS

Personal Services	(1,922,031)	(1,922,031)	-
Other Expenses	(107,565)	(107,565)	-
Programs for Senior Citizens	(5,777,475)	(7,895,383)	(2,117,908)
<b>Total - General Fund</b>	<b>(7,807,071)</b>	<b>(9,924,979)</b>	<b>(2,117,908)</b>
<b>Positions - General Fund</b>	<b>(23)</b>	<b>(23)</b>	<b>-</b>
Fall Prevention	(376,023)	(376,023)	-
<b>Total - Insurance Fund</b>	<b>(376,023)</b>	<b>(376,023)</b>	<b>-</b>

#### Background

Pursuant to PA 17-2, JSS (the FY 18 - FY 19 biennial budget) the State Department on Aging was eliminated and its responsibility was transferred to: (1) DSS for the State Unit on Aging and (2) OPM for the Long Term Care Ombudsman program. DSS and OPM signed a Memorandum of Understanding (MOU) with the Department of Rehabilitation Services (DORS), transferring the responsibility of administering both the State Unit on Aging and the Long Term Care Ombudsman program to the Department of Rehabilitation Services (DORS), and allowing DSS to provide funding to DORS through a transfer invoice. The MOU was effective upon the passage of PA 17-2, JSS.

#### Governor

Transfer total funding of \$8,183,094 and 23 positions to DORS, consistent with the MOU in place for FY 18.

#### Legislative

Transfer total funding of \$10,301,002 and 23 positions to DORS. This reflects the addition of \$2,117,908 to support elderly nutrition programs under the Programs for Senior Citizens line item, which is restored under the Annualize FY 18 Budgeted Lapses write-up.

### Shift Funding to SSBG for Protective Services-Elderly

Protective Services to the Elderly	(785,204)	-	785,204
<b>Total - General Fund</b>	<b>(785,204)</b>	<b>-</b>	<b>785,204</b>

Account	Governor Revised FY 19	Legislative FY 19	Difference from Governor
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**Background**

PA 17-2 JSS, the biennial budget act, reduced funding by \$772,320 in FY 18 to reflect supporting Protective Services for the Elderly (PSE) programs with Social Services Block Grant (SSBG) funding.

**Governor**

Reduce funding by \$785,204 to reflect continuing to support the Protective Services for the Elderly program with Social Services Block Grant (SSBG) funding.

**Legislative**

Maintain General Fund support for PSE.

**Transfer Funding for Brain Injury Alliance of Connecticut**

Services for Persons With Disabilities	95,421	-	(95,421)
Human Service Infrastructure Community Action Program	(95,421)	-	95,421
<b>Total - General Fund</b>	-	-	-

**Background**

The Brain Injury Alliance of Connecticut provides community education, outreach, information, and referral services for persons with acquired brain injury and their families.

**Governor**

Transfer funding of \$95,421 in FY 19 from the Human Service Infrastructure Community Action Program account to the Services for Persons with Disabilities.

**Legislative**

Maintain current funding structure.

**Consolidate Funding for Safety Net Services Providers**

Safety Net Services	340,155	-	(340,155)
Community Services	(340,155)	-	340,155
<b>Total - General Fund</b>	-	-	-

**Background**

The Connecticut Council of Family Service Agencies (CCFSA) is a statewide family service network of fifteen independent, non-profit, family service agencies that deliver services to over 150,000 families annually from more than 100 sites located throughout Connecticut. Member Agencies are community-based, licensed by the State of Connecticut and nationally accredited, and governed by volunteer boards of directors from their respective communities. Currently funding for CCFSA is provided in both the Community Services account and the Safety Net Services account.

**Governor**

Consolidate funding of \$340,155 for the Connecticut Council of Family Service Agencies (CCFSA) from the Community Services account to the Safety Net Services account.

**Legislative**

Maintain current funding structure.

**Current Services****Fund PCA Agreement**

Medicaid	-	5,203,000	5,203,000
Community Residential Services	-	2,916,500	2,916,500
<b>Total - General Fund</b>	-	<b>8,119,500</b>	<b>8,119,500</b>

Account	Governor Revised FY 19	Legislative FY 19	Difference from Governor
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**Legislative**

Provide funding of \$8,119,500 to support the Memorandum of Agreement between the Personal Care Attendant (PCA) Workforce Council and the New England Health Care Employees Union, as approved by Senate Resolution No. 7 and House Resolution No. 8. Funding supports wage increases, training and orientation costs, holiday pay, and workers' compensation coverage. Additional funds of \$972,167 are provided in the Department of Developmental Services to support the portion of the contract funded under the Employment Opportunities and Day Services account. Total contract funding results in a federal grants revenue gain of \$1,944,335 associated with Medicaid reimbursement.

**Reflect FY 18 Expenditure Trends**

Medicaid	-	(65,000,000)	(65,000,000)
<b>Total - General Fund</b>	-	<b>(65,000,000)</b>	<b>(65,000,000)</b>

**Legislative**

Reduce funding by \$65 million to reflect FY 18 expenditure trends in Medicaid.

**Update Current Services-TFA and Supplemental Assistance**

Old Age Assistance	1,800,000	1,800,000	-
Aid To The Disabled	1,400,000	1,400,000	-
Temporary Family Assistance - TANF	5,000,000	5,000,000	-
<b>Total - General Fund</b>	<b>8,200,000</b>	<b>8,200,000</b>	-

**Background**

The Temporary Family Assistance (TFA) program provides cash assistance to eligible low-income families. The TFA program limits assistance to 21 months for non-exempt cases, with possible six month extensions for good cause. Individuals in the TFA program are usually eligible for health care services provided under the state's Medicaid program. The average monthly caseload under this (and its predecessor) program has declined from over 60,000 families in FY 95 to approximately 15,600 in FY 16 with an average cost per case of \$481. For December 2017, caseload totaled 13,781 with an average cost per case of \$477.

State Supplemental programs consist of Old Age Assistance, Aid to the Blind, and Aid to the Disabled. These programs provide monthly financial assistance to low-income individuals. These programs are entirely state funded, but operate under both state and federal guidelines. In order to receive benefits, an individual must have another source of income to supplement, such as federal Social Security, Supplemental Security Income, or Veteran's Benefits. All recipients are automatically eligible for health care benefits under the state's Medicaid program.

**Governor**

Provide funding to \$8.2 million in FY 19 to reflect anticipated expenditures in the Temporary Family Assistance Program, Aid to the Disabled and Old Age Assistance.

**Legislative**

Same as Governor

**Totals**

Budget Components	Governor Revised FY 19	Legislative FY 19	Difference from Governor
Original Appropriation - GF	4,335,128,463	4,335,128,463	-
Policy Revisions	(43,901,511)	17,360,687	61,262,198
Current Services	8,200,000	(48,680,500)	(56,880,500)
<b>Total Recommended - GF</b>	<b>4,299,426,952</b>	<b>4,303,808,650</b>	<b>4,381,698</b>
Original Appropriation - IF	376,023	376,023	-
Policy Revisions	(376,023)	(376,023)	-
<b>Total Recommended - IF</b>	-	-	-



Positions	Governor Revised FY 19	Legislative FY 19	Difference from Governor
Original Appropriation - GF	2,009	2,009	-
Policy Revisions	(23)	(23)	-
<b>Total Recommended - GF</b>	<b>1,986</b>	<b>1,986</b>	-