

# House Budget Committee Report

**Agency:** Kansas Department for Aging and Disability Services    **Bill No.** HB 2802

**Bill Sec.** 63

**Analyst:** LaMunyon

**Budget Analysis Vol. --**

**GBR Vol. II, p. 242**

Expenditure Summary	Agency Estimate FY 2024	Governor Recommendation FY 2024	House Budget Committee Adjustments
<i>Operating Expenditures:</i>			
State General Fund	\$ 1,393,082,461	\$ 1,381,031,000	\$ 0
Federal Funds	1,789,759,504	1,771,744,305	0
Other Funds	91,201,751	88,894,271	0
<i>Subtotal</i>	<b>\$ 3,274,043,716</b>	<b>\$ 3,241,669,576</b>	<b>\$ 0</b>
<i>Capital Improvements:</i>			
State General Fund	\$ 0	\$ 0	\$ 0
Federal Funds	0	0	0
Other Funds	18,943,660	18,943,660	0
<i>Subtotal</i>	<b>\$ 18,943,660</b>	<b>\$ 18,943,660</b>	<b>\$ 0</b>
<b>TOTAL</b>	<b>\$ 3,292,987,376</b>	<b>\$ 3,260,613,236</b>	<b>\$ 0</b>
FTE positions	380.6	380.6	0.0

### Agency Estimate

The **agency** requests a revised estimate of \$3.3 billion, including \$1.4 billion SGF, in expenditures and 380.6 FTE positions in FY 2024. This is an increase of \$111.7 million or 3.5 percent, including a SGF decrease of \$23.0 million or 1.6 percent, compared to the amount approved by the 2023 Legislature.

The all funds increase is primarily due to the award of \$66.0 million to the agency by the Strengthening People and Restoring Kansas (SPARK) Taskforce to **administer the Health Facilities and Program Expansion grant program**, \$15.5 million in **State Institutions Building Fund (SIBF) reappropriations**, and \$34.6 million in **federal grants** received by KDADS above the amount included in the budget approved by the 2023 Legislature.

The SGF decrease is primarily due to a transfer of \$12.3 million SGF to the state hospitals to provide **hourly differential pay pursuant to the 24/7 Pay Plan** and the agency's enhancement request to **lapse \$7.5 million of the SGF reappropriation for KanCare caseloads**. The KanCare caseloads funds are revised every Spring and Fall by the consensus caseloads estimating group, consisting of the Kansas Department of Health and Environment, the Kansas Department for Aging and Disability Services, the Department for Children and Families, the Division of Budget, and the Kansas Legislative Research Department.

### **Governor's Recommendation**

The **Governor** recommends expenditures totaling \$3.3 billion, including \$1.4 billion SGF, in FY 2024. This is a decrease of \$32.8 million, including \$12.1 million SGF, below the agency's revised estimate in FY 2024. The Governor's recommendation includes 380.6 FTE positions, which is the same as the agency's revised estimate.

The decrease in expenditures is primarily due to the Governor's recommendation to delete \$39.0 million, including \$18.7 million SGF, to adopt the **fall consensus caseloads revised estimate** in FY 2024. The decrease is primarily due to a decrease of \$11.6 million, including \$4.5 million SGF, to account for several Community Mental Health Centers (CMHCs) transitioning to Certified Community Behavioral Health Clinics (CCBHCs) partway through the year. The previous estimate assumed all CMHCs would transition on July 1 and the revised estimate more accurately reflects a partial year's cost. For more information, see the Special Topics section "Consensus Caseloads Estimate."

Lastly, the Governor recommends lapsing \$903,780 SGF from the **CARE/PASRR program** to avoid double counting, as funding for this program was moved to consensus caseloads in FY 2024. The Client Assessment, Referral and Evaluation (CARE) program is the Kansas-specific version of the PASRR, which is a CMS-mandated assessment to determine appropriate placement of an individual in a long-term-care facility, including in nursing facilities which are funded through the consensus caseloads process.

### **House Committee on Social Services Budget Recommendation**

The **Budget Committee** concurs with the Governor's recommendation in FY 2024.

### **House Committee on Appropriations Recommendation**

The **Committee** concurs with the Budget Committee's recommendation in FY 2024.

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## Senate Subcommittee Report

**Agency:** Kansas Department for Aging and Disability Services     **Bill No.** SB 514

**Bill Sec.** 82

**Analyst:** LaMunyon

**Budget Analysis Vol. II, p. 1059**

**GBR Vol. II, p. 242**

Expenditure Summary	Agency Estimate FY 2024	Governor Recommendation FY 2024	Senate Subcommittee Adjustments
<b>Operating Expenditures:</b>			
State General Fund	\$ 1,393,082,461	\$ 1,381,031,000	\$ 5,600,000
Federal Funds	1,789,759,504	1,771,744,305	0
Other Funds	91,201,751	88,894,271	0
<i>Subtotal</i>	\$ 3,274,043,716	\$ 3,241,669,576	\$ 5,600,000
<b>Capital Improvements:</b>			
State General Fund	\$ 0	\$ 0	\$ 0
Federal Funds	0	0	0
Other Funds	18,943,660	18,943,660	0
<i>Subtotal</i>	\$ 18,943,660	\$ 18,943,660	\$ 0
<b>TOTAL</b>	<b>\$ 3,292,987,376</b>	<b>\$ 3,260,613,236</b>	<b>\$ 5,600,000</b>
FTE positions	380.6	380.6	0.0

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### **Senate Committee on Ways and Means Human Services Subcommittee Recommendation**

The **Subcommittee** concurs with the Governor's recommendation in FY 2024 with the following adjustments:

1. Add \$2.5 million SGF to supplement federal opioid grant funds for substance use disorder treatment for non-Medicaid eligible populations, and require a report on distribution and usage of the funds.
2. Add \$2.5 million SGF to provide grants to organizations utilizing 14(c) labor to increase wages in 14(c) settings, and to assist providers in providing competitive wages in anticipation of the federal government eliminating the 14(c) exception.
3. Add \$600,000 SGF for Envision for operational support to address its waitlist for FY 2024 only.

### **Senate Committee on Ways and Means Recommendation**

The **Committee** concurs with the Subcommittee's recommendation in FY 2024 with the following adjustment:

1. Add language to lapse \$2.5 million SGF for grants to 14(c) providers if the exception has not yet been eliminated by the effective date of the mega appropriations bill.
2. Delete \$600,000 SGF for Envision for operational support to address its waitlist in FY 2024 only and move the funding to FY 2025 only.