# Agency Budget Request FISCAL YEAR 2023–2024



Louisiana Department of Health

310 — Northeast Delta Human Services Authority



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Signature Page	1
Operational Plan	3
Budget Request Overview	15
Agency Summary Statement	
Program Summary Statement	
Source of Funding Summary	
Source of Funding Detail Interagency Transfers Fees & Self-Generated	27
Expenditures by Means of Financing  Existing Operating Budget  Total Request	39
Revenue Collections/Income Interagency Transfers Fees & Self-Generated Justification of Differences	
Schedule of Requested Expenditures	
Continuation Budget Adjustments	49
Agency Summary Statement	
Continuation Budget Adjustments - Summarized	53
Program Summary Statement	
Continuation Budget Adjustments - by Program	61

65
67
71
73
74
74
75
76
76
77
78
78
80
80
83
84
84
87
87
91
92

# Signature Page

#### **BUDGET REQUEST**

### Fiscal Year Ending June 30,2024

NAME OF DEPARTMENT / AGENCY: NE Delta Human SVC Authority  BUDGET UNIT: NE Delta Human SVC Authority  SCHEDULE NUMBER: 09-310 (318)362-5051	PHYSICAL ADDRESS: 2513 Ferrand St  Monroe,La 71201  ZIP CODE: 71201  WEB ADDRESS: NEDELTAHAS.ORG					
TO THE BEST OF OUR KNOWLEDGE.	ES ON THE ACCOMPANYING FORMS ARE TRUE AND CORRECT					
PRINTED NAME/TITLE: Dr. Courtney N Phillips/Sec  DATE: 024 72  EMAIL ADDRESS:	PRINTED NAME/TITLE:  Oct 17, 2022  DATE:  MONTEIC.SIZER@LA.GOV					
PROGRAM CONTACT PERSON: Janice Rogers  TITLE: DIRECTOR OF CORPORATE COMPLIANCE  TELEPHONE NUMBER: (318)362-5482  EMAIL ADDRESS: JANICE.ROGERS@LA.GOV	FINANCIAL CONTACT PERSON: KAREN EVANS  TITLE: CHIEF FINANCIAL AND OPERATIONS OFFICER  TELEPHONE NUMBER: (318)362-5332  EMAIL ADDRESS: KAREN.EVANS3@LA.GOV					

# **Operational Plan**

# OPERATIONAL PLAN FORM AGENCY (BUDGET UNIT) DESCRIPTION

AGENCY NUMBER AND NAME: 09-310 Northeast Delta Human Services Authority

#### AGENCY MISSION:

NE Delta HSA serves as a catalyst for individuals with mental health, developmental disabilities, and addictive disorders to realize their full human potential by offering quality, excellent care with greater accessibility.

#### AGENCY GOAL(S):

Goal I: Improve the outcomes of citizens by expanding access to a network of appropriate, quality prevention and wellness, integrated care and developmental disability services.

Goal II: Provide integrated services that promote holistic care through best practices and strategies; ensure a person centered approach through prevention, treatment, support, education, and

Goal III: Evaluate and analyze outcomes to strengthen internal operations to accommodate trending healthcare environments, payments, and electronic health records systems to produce data-driven decisions that best maximize efficiency and effectiveness.

Goal IV: Proactively address risks that impact the behavioral health of our citizens by using collaboration and sound communication practices both internally and with key partners and

STATEMENT OF AGENCY STRATEGIES FOR DEVELOPMENT AND IMPLEMENTATION OF HUMAN RESOURCE POLICIES THAT ARE HELPFUL AND BENEFICIAL TO WOMEN AND FAMILIES:
The Northeast Delta Human Services Authority abides by all state Civil Services guidelines and procedures regarding equal opportunity for staff and, in particular, women and their families.
The Northeast Delta Human Services Authority also addresses specific issues in respect to female employees and their families in the Human Resources policies for the agency and in the Northeast Delta Human Services Authority Personnel handbook. All policies are reviewed annually and changes/additions are made accordingly to new mandates or as issues arise.
The Northeast Delta Human Services Authority focuses its treatment approach on the person and family in the provision of services and supports. The family is paramount to the treatment model and serves as the basis for individual and family treatment, recovery and wellness adaption.

# OPERATIONAL PLAN FORM PROGRAM DESCRIPTION

PROGRAM NAME: Northeast Delta Human Services Authority

#### PROGRAM AUTHORIZATION:

Louisiana Act: 384 Northeast Delta Human Services Authority; creation; jurisdiction; domicile

The Northeast Delta Human Services Authority is hereby created as a special authority which, through its board, shall direct the operation and management of community-based programs and services relative to mental health, developmental disabilities, and addictive disorders services, including Early Childhood Supports and Services, and the Regional Transition Program for the parishes of Caldwell, East Carroll, Franklin, Jackson, Lincoln, Madison, Morehouse, Ouachita, Richland, Tensas, Union, and West Carroll. Programs and services relative to the Southern Oaks Addiction Recovery shall be provided in accordance with a twelve-month transition plan developed by the office of behavioral health and the governing board of the authority. B. The domicile of the authority shall be Ouachita Parish, Louisiana. Acts 2006, No. 631, §1, eff. June 23, 2006; Acts 2009, No. 384, §5, eff. July 1, 2010.

#### PROGRAM MISSION:

NE Delta HSA serves as a catalyst for individuals with mental health, developmental disabilities, and addictive disorders to realize their full human potential by offering quality, excellent care with greater accessibility.

#### PROGRAM GOAL(S):

Goal I: Improve the outcomes of citizens by expanding access to a network of appropriate, quality prevention and wellness, integrated care and developmental disability services.

Goal II: Provide integrated services that promote holistic care through best practices and strategies; ensure a person centered approach through prevention, treatment, support, education, and

Goal III: Evaluate and analyze outcomes to strengthen internal operations to accommodate trending healthcare environments, payments, and electronic health records systems to produce data-driven decisions that best maximize efficiency and effectiveness.

Goal IV: Proactively address risks that impact the behavioral health of our citizens by using collaboration and sound communication practices both internally and with key partners and

#### PROGRAM ACTIVITY:

Integrated Care

Northeast Delta HSA provides integrated mental health, substance abuse, and primary care services through the systematic coordination of general and behavioral healthcare which includes integration of behavioral health with primary care services from children/adolescents across the lifespan.

#### PROGRAM ACTIVITY:

Prevention and Wellness

NE Delta HSA Prevention & Wellness department uses research-based curriculums, environmental strategies, coalition-building and other proactive and data-driven strategies to help prevent and reduce risk-taking behaviors among regional youth, adolescents, and the general population. NE Delta HSA manages and administers these evidence-based prevention programs through its trusted regional and local community partners. Northeast Delta HSA provides prevention & wellness services to 8 of the 12 parishes served.

Through our continuous effects and great partnerships with local school districts, Northeast Delta HSA has been able to provide evidence-based prevention programs from Pre-K to 10 grades. School districts participate in Red Ribbon Week, Orange Ribbon Week, Prevention Week, and Anti-Bullying Awareness Day; these efforts are achieved with school systems implementing research-based prevention programs and policies.

#### PROGRAM ACTIVITY:

Developmental Disability Services

The Northeast Delta HSA Developmental Disability Services unit has two core specializations:

Waiver Services - Medicaid Home and Community-Based Waiver programs allow people greater flexibility to choose where they want to live and to use services and supports that best suit their needs. Services are provided in the home or in the community.

Home and Community Based Services - Individual and family support services provide assistance not available from any other resource that will allow people with intellectual and developmental disabilities to live in their own home or with their families in their own community. These services include respite care, personal assistance services, specialized clothing, dental and medical services, equipment and supplies, communication services, crisis intervention, utility costs, specialized nutrition, and family education. These services are also inclusive of Flexible Family Funds that provide a monthly stipend to families of eligible children with severe or profound developmental disabilities from birth through age 18 to help families meet extraordinary costs. Services are provided through contractual agreements by private provider agencies or through individualized agreements with individuals and families who obtain their own service

#### PROGRAM ACTIVITY:

Administrative Functions

Northeast Delta Human Service Authority administrative functions to support the management and operations related to integrated care, prevention and wellness, and developmental disability services. The mission of Northeast Delta HSA administrative functions is to coordinate and organize people, resources and systems to effectively and efficiently support the overall mission, vision and tenets of the agency.

DEPARTMENT ID: 09-Louisiana Department of Health AGENCY ID: 09-310 - Northeast Delta Human Services Authority PROGRAM ID: Northeast Delta Human Services Authority PROGRAM ACTIVITY: Integrated Care

1. K Northeast Delta Human Services Authority will provide access to integrated care of services for adults and adolescents with Behavioral Health diagnosis (Modified).

Children's Budget Link: Northeast Delta Human Services Authority services for children are related to the healthy policy outlined in the Children's Budget Link which mandates that all Louisiana children will have access to comprehensive healthcare services, and are linked via the Northeast Delta Human Services Authority agency's budget.

Human Resource Policies Beneficial to Women and Families Link: The Northeast Delta Human Services Authority abides by all state Civil Service and federal guidelines and procedures regarding equal opportunity for all staff and in particular women and their families. The Northeast Delta Human Services Authority also addresses specific issues in respect to female employees and their families in the Human Resource policies for the agency and the Northeast Delta Human Services Authority Handbook. All policies are reviewed annually and changes/additions are made according to new mandates or as issues arise.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2020, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAP).

#### Explanatory Note:

			PERFORMANCE INDICATOR VALUES						
	L				PERFORMANCE		PERFORMANCE	PERFORMANCE	PERFORMANCE
	E		YEAREND	ACTUAL	STANDARD	EXISTING	AT	AT EXECUTIVE	STANDARD AS
LaPAS	V		PERFORMANCE	YEAREND	AS INITIALLY	PERFORMANCE	CONTINUATION	BUDGET	INITIALLY
PI	Е		STANDARD	PERFORMANCE	APPROPRIATED	STANDARD	BUDGET LEVEL	LEVEL	APPROPRIATED
CODE	L	PERFORMANCE INDICATOR NAME	FY 2021-2022	FY 2021-2022	FY 2022-2023	FY 2022-2023	FY 2023-2024	FY 2023-2024	FY 2023-2024
26600	K	Percentage of Individual and Family Support/	95	93	95	95	95		
		Consumer Care Resource funds expended							
25212	K	Percentage of persons served who indicate they	95	99	95	95	95		
		would recommend NEDHSA services to family and friends							
25219	v	Percentage of successful completions (inpatient	65	51	65	65	65		
23219	K	addiction treatment programs, level 3.5)	0.5	31	0.5	03	0.5		
		addresson treatment programs, reversis)							

<sup>1</sup> We no longer have any contracted level 3.1 or 3.3 residential treatment beds, but are seeking a contractor.

<sup>3</sup> 

<sup>\*</sup> 

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DEPARTMENT ID: 09-Louisiana Department of Health AGENCY ID: 09-310 - Northeast Delta Human Services Authority PROGRAM ID: Northeast Delta Human Services Authority PROGRAM ACTIVITY: Prevention and Wellness

2. K Northeast Delta Human Services Authority will ensure that behavioral health data is available to state, regional, and community partners and continue to mobilize communities based on culturally competent programs and interventions.

Children's Budget Link: Northeast Delta Human Services Authority services for children are related to the healthy policy outlined in the Children's Budget Link which mandates that all Louisiana children will have access to comprehensive healthcare services, and are linked via the Northeast Delta Human Services Authority agency's budget.

Human Resource Policies Beneficial to Women and Families Link: The Northeast Delta Human Services Authority abides by all state Civil Service and federal guidelines and procedures regarding equal opportunity for all staff and in particular women and their families. The Northeast Delta Human Services Authority also addresses specific issues in respect to female employees and their families in the Human Resource policies for the agency and the Northeast Delta Human Services Authority Handbook. All policies are reviewed annually and changes/additions are made according to new mandates or as increase.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2020, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment

#### Explanatory Note:

				PERFORMANCE INDICATOR VALUES					
	L				PERFORMANCE		PERFORMANCE	PERFORMANCE	PERFORMANCE
	E		YEAREND	ACTUAL	STANDARD	EXISTING	AT	AT EXECUTIVE	STANDARD AS
LaPAS	V		PERFORMANCE	YEAREND	AS INITIALLY	PERFORMANCE	CONTINUATION	BUDGET	INITIALLY
PI	E		STANDARD	PERFORMANCE	APPROPRIATED	STANDARD	BUDGET LEVEL	LEVEL	APPROPRIATED
CODE	L	PERFORMANCE INDICATOR NAME	FY 2021-2022	FY 2021-2022	FY 2022-2023	FY 2022-2023	FY 2023-2024	FY 2023-2024	FY 2023-2024
26604	S	Number of prevention related presentations with	20	247 1	20	20	20		
		community-level data.							
26605	K	Number of participants that attend monthly Northeast	25	161	25	25	25		
		Delta HSA sponsored coalition meetings throughout							
		Northeast Delta HSA region.							

<sup>1</sup> We received an increase in requests for presentations, including NARCAN presentations. An increase in community partnerships also allowed for additional speaking engagements.

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DEPARTMENT ID: 09-Louisiana Department of Health AGENCY ID: 09-310 - Northeast Delta Human Services Authority PROGRAM ID: Northeast Delta Human Services Authority PROGRAM ACTIVITY: Developmental Disability Services

3. K Northeast Delta Human Services Authority will facilitate improved outcomes for citizens with intellectual developmental disabilities and promote the delivery of quality supports to live in the setting of their choice.

Children's Budget Link: Northeast Delta Human Services Authority services for children are related to the healthy policy outlined in the Children's Budget Link which mandates that all Louisiana children will have access to comprehensive healthcare services, and are linked via the Northeast Delta Human Services Authority agency's budget.

Human Resource Policies Beneficial to Women and Families Link: The Northeast Delta Human Services Authority abides by all state Civil Service and federal guidelines and procedures regarding equal opportunity for all staff and in particular women and their families. The Northeast Delta Human Services Authority also addresses specific issues in respect to female employees and their families in the Human Resource policies for the agency and the Northeast Delta Human Services Authority Handbook. All policies are reviewed annually and changes/additions are made according to new mandates or as increase.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2020, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).

#### Explanatory Note:

			PERFORMANCE INDICATOR VALUES						
	L				PERFORMANCE		PERFORMANCE	PERFORMANCE	PERFORMANCE
	E		YEAREND	ACTUAL	STANDARD	EXISTING	AT	AT EXECUTIVE	STANDARD AS
LaPAS	V		PERFORMANCE	YEAREND	AS INITIALLY	PERFORMANCE	CONTINUATION	BUDGET	INITIALLY
PI	E		STANDARD	PERFORMANCE	APPROPRIATED	STANDARD	BUDGET LEVEL	LEVEL	APPROPRIATED
CODE	L	PERFORMANCE INDICATOR NAME	FY 2021-2022	FY 2021-2022	FY 2022-2023	FY 2022-2023	FY 2023-2024	FY 2023-2024	FY 2023-2024
26608	K	Percentage of Waiver participants whose Plan of Care includes natural and community resources	90	100	90	90	90		
25223		Percentage of valid Flexible Family Fund (FFF) eligibility determinations (in accordance with FFF promulgation)	98	100	98	98	98		
25965		Percentage of Individual & Family Support (FS) plans for which fund guidelines were followed.	100	100	100	100	100		
25221		Number of people receiving individual and family support services	525	675	525	525	525		
26126		Percentage of Individual and Family Support Plans that meet the participants' goals	95	100	95	95	95		

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DEPARTMENT ID: 09-Louisiana Department of Health AGENCY ID: 09-310 - Northeast Delta Human Services Authority PROGRAM ID: Northeast Delta Human Services Authority PROGRAM ACTIVITY: Administrative Functions

4. Provide administrative support to programmatic services to ensure efficient, effective, and quality services.

Children's Budget Link: Northeast Delta Human Services Authority services for children are related to the healthy policy outlined in the Children's Budget Link which mandates that all Louisiana children will have access to comprehensive healthcare services, and are linked via the Northeast Delta Human Services Authority agency's budget.

Human Resource Policies Beneficial to Women and Families Link: The Northeast Delta Human Services Authority abides by all state Civil Service and federal guidelines and procedures regarding equal opportunity for all staff and in particular women and their families. The Northeast Delta Human Services Authority also addresses specific issues in respect to female employees and their families in the Human Resource policies for the agency and the Northeast Delta Human Services Authority Handbook. All policies are reviewed annually and changes/additions are made according to new mandates or as issues arise.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2020, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).

Explanatory Note:

			PERFORMANCE INDICATOR VALUES						
	L				PERFORMANCE		PERFORMANCE	PERFORMANCE	PERFORMANCE
	E		YEAREND	ACTUAL	STANDARD	EXISTING	AT	AT EXECUTIVE	STANDARD AS
LaPAS	V		PERFORMANCE	YEAREND	AS INITIALLY	PERFORMANCE	CONTINUATION	BUDGET	INITIALLY
PI	E		STANDARD	PERFORMANCE	APPROPRIATED	STANDARD	BUDGET LEVEL	LEVEL	APPROPRIATED
CODE	L	PERFORMANCE INDICATOR NAME	FY 2021-2022	FY 2021-2022	FY 2022-2023	FY 2022-2023	FY 2023-2024	FY 2023-2024	FY 2023-2024
26609	S	Percentage of contract invoices for which payment is	98	100	98	98	98		
		issued within 30 days of fiscal department receipt							
26610	S	Percentage of state assets in the Asset Management	98	100	98	98	98		
		System located/accounted for annually							
		, , , , , , , , , , , , , , , , , , ,							
26611	S	Number of findings in Legislative Auditor Report	0	0	0	0	0		
		resulting from misappropriation of resources, fraud,							
		theft, or other illegal or unethical activity.							
26612		Administrative expenditures as a percentage of	15	27	15	15	15		
		agency's budget							

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DEPARTMENT ID: 09-Louisiana Department of Health AGENCY ID: 09-310 - Northeast Delta Human Services Authority PROGRAM ID: Northeast Delta Human Services Authority PROGRAM ACTIVITY: Integrated Care

	GENERAL PERFORMANCE INFORMATION:									
		PERFORMANCE INDICATOR VALUES								
LaPAS PI		PRIOR YEAR ACTUAL	PRIOR YEAR ACTUAL	PRIOR YEAR ACTUAL	PRIOR YEAR ACTUAL	PRIOR YEAR ACTUAL				
CODE	PERFORMANCE INDICATOR NAME	FY 2017-2018	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022				
26601	Number of adults served through Integrated Healthcare Services	Not Applicable	1,998	1,856	1,264	1,358				
26602	Number of children/adolescents served through Integrated Healthcare Services	Not Applicable	52	75	47	59				
26603	Number of persons served in an evidence-based community-based program	Not Applicable	375	309	6,528	5,948				

DEPARTMENT ID: 09-Louisiana Department of Health AGENCY ID: 09-310 - Northeast Delta Human Services Authority

PROGRAM ID: Northeast Delta Human Services Authority PROGRAM ACTIVITY: Prevention and Wellness

	GENERAL PERFORMANCE INFORMATION:									
			PERFOR	RMANCE INDICATOR	VALUES					
LaPAS		PRIOR YEAR	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR	PRIOR YEAR				
PI		ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL				
CODE	PERFORMANCE INDICATOR NAME	FY 2017-2018	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022				
	Number of schools participating in Communities that Care Youth Survey (CCYS)	11	11	11	8	11				
•										

# OPERATIONAL PLAN FORM OPERATIONAL PLAN ADDENDA

#### ORGANIZATION AND PROGRAM STRUCTURE CHARTS CHECKLIST:

Organization Chart Attached:	Program and Activity Structure Chart Attached:
OTHER: List any other attachments to operational plan. 1. 2. 3.	
CONTACT PERSON(S):	
NAME: Dr. Monteic A. Sizer TITLE: Executive Director TELEPHONE: 318-362-3270 FAX: 318-362-3268 E-MAIL: monteic.sizer@la.gov	
NAME: Janice O. Rogers TITLE: Director of Corporate Compliance TELEPHONE: 318-362-4538 FAX: 318-362-3268 E-MAIL: janice.rogers@la.gov	

NAME: Karen Evans

TELEPHONE: 318-362-5332 FAX: 318-362-3268 E-MAIL: karen.evans3@la.gov

TITLE: Chief Fiscal and Operations Officer

# **Budget Request Overview**

Agency Summary Statement Total Agency

## **AGENCY SUMMARY STATEMENT**

# **Total Agency**

# **Means of Financing**

Description	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Total Request	Over/Under EOB	Percent Change
STATE GENERAL FUND (Direct)	10,389,954	11,336,370	11,844,205	507,835	4.48%
STATE GENERAL FUND BY:	_	_	_	_	_
INTERAGENCY TRANSFERS	4,222,997	4,483,420	4,483,420	_	_
FEES & SELF-GENERATED	120,039	798,353	773,844	(24,509)	(3.07)%
STATUTORY DEDICATIONS	_	_	_	_	_
FEDERAL FUNDS	<del>-</del>	_	_	_	_
TOTAL MEANS OF FINANCING	\$14,732,989	\$16,618,143	\$17,101,469	\$483,326	2.91%

Agency Summary Statement Total Agency

## Fees and Self-Generated

	FY2021-2022	<b>Existing Operating Budget</b>	FY2023-2024		
Description	Actuals	as of 10/01/2022	Total Request	Over/Under EOB	Percent Change
Fees & Self-Generated	120,039	798,353	773,844	(24,509)	(3.07)%
Total:	\$120,039	\$798,353	\$773,844	\$(24,509)	(3.07)%

# **Statutory Dedications**

	FY2021-2022	Existing Operating Budget	FY2023-2024		
Description	Actuals	as of 10/01/2022	Total Request	Over/Under EOB	Percent Change
Total:	_	_	_	_	_

**Agency Summary Statement Total Agency** 

# **Agency Expenditures**

ngenty Expenditures					
Description	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Total Request	Over/Under EOB	Percent Change
Salaries	Actuals	43 01 10/01/2022	Total nequest	Over/Officer LOD	i citciit tiiange
	_	<del>-</del>	_	_	_
Other Compensation	_	<del>-</del>	_	<del>-</del>	_
Related Benefits	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_
Travel	_	_	_	_	_
Operating Services	_	_	_	_	_
Supplies	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_
Other Charges	14,280,955	16,140,048	16,619,957	479,909	2.97%
Debt Service	_	_	_	_	_
Interagency Transfers	452,034	478,095	481,512	3,417	0.71%
TOTAL OTHER CHARGES	\$14,732,989	\$16,618,143	\$17,101,469	\$483,326	2.91%
Acquisitions	_	_	_	_	_
Major Repairs	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_
TOTAL EXPENDITURES	\$14,732,989	\$16,618,143	\$17,101,469	\$483,326	2.91%
Agongy Docitions					
Agency Positions					
Classified	_	_	_	_	_
Unclassified	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_
TOTAL AUTHORITED OTHER CHARGES DOCUTIONS					

Classified	_	_	_	_	
Unclassified	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	101	101	101	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_
TOTAL POSITIONS	101	101	101	<u> </u>	_

Agency Summary Statement Total Agency

## **Cost Detail**

# **Means of Financing**

Description	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Total Request	Over/Under EOB
State General Fund	10,389,954	11,336,370	11,844,205	507,835
Interagency Transfers	4,222,997	4,483,420	4,483,420	_
Fees & Self-Generated	120,039	798,353	773,844	(24,509)
Total:	\$14,732,990	\$16,618,143	\$17,101,469	\$483,326

# Other Charges

Commitment Item	Name	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Total Request	Over/Under EOB
5600000	TOTAL OTHER CHARGES	_	5,663,077	5,663,077	_
5610001	LOC AID-LOCL SCHL BD	1,861	_	_	_
5620062	MISC-INTERESTEXP	127	_	_	_
5620063	MISC-OPERATNG SVCS	1,064,742	_	31,614	31,614
5620064	MISC-PROF SVCS	1,592,758	_	70,154	70,154
5620065	MISC-SUPPLIES OTHER	626,093	213,262	20,459	(192,803)
5620066	MISC-TRVL IN STATE	9,238	_	_	_
5620067	MISC-TR OUT OF STATE	8,825	_	1,635	1,635
5620069	MISC-INTERAGENCY OTH	613,764	_	15,405	15,405
5620072	MISC-OC SAL CLASS&UN	5,834,448	6,578,156	6,564,374	(13,782)
5620073	MISC-OC-SAL CLASS OT	253	_	_	_
5620074	MISC-OC-SAL CLSS TRM	91,536	_	_	_
5620076	MISC-OC-WAGES	311,162	_	420,940	420,940
5620078	MISC-OC-RETIRE-STEM	2,163,474	2,394,553	2,474,769	80,216
5620079	MISC-OC-RETIRE-TEACH	50,310	52,000	65,684	13,684
5620081	MISC-OC-F.I.C.A. TAX	2,631	3,000	6,361	3,361
5620082	MISC-OC-MEDICARE TAX	83,481	85,000	100,114	15,114
5620083	MISC-OC-GRP INS CONT	742,660	800,000	800,169	169
5620137	MISC-OC-PS-MEDICAL	745,823	_	_	_

Agency Summary Statement Total Agency

# **Other Charges** (continued)

Commitment Item	Name	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Total Request	Over/Under EOB
5620161	MISC-TR OUT OF STATE	1,957	_	_	_
5620164	MISC-OC REL BENEFITS	832	1,000	_	(1,000)
5620165	MISC-OC-POST RET BEN	334,981	350,000	385,202	35,202
<b>Total Other Charges:</b>		\$14,280,955	\$16,140,048	\$16,619,957	\$479,909

# **Interagency Transfers**

Commitment Item	Name	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Total Request	Over/Under EOB
5950000	TOTAL IAT	_	478,095	478,095	_
5950014	IAT-TELEPHONE	137,766	_	_	_
5950017	IAT-INSURANCE	144,724	_	_	_
5950048	IAT-CPTP	40,418	_	_	_
5950051	IAT-OSUP	5,869	_	_	_
5950052	IAT-LEG. AUDITOR	30,074	_	3,417	3,417
5950053	IAT-STATE TREASURER	1,196	_	_	_
5950058	IAT-TECH SVCS	84,438	<u> </u>	_	_
5950059	IAT-ST PROCUREMENT	7,549	_	_	_
Total Interagency Transfers:		\$452,034	\$478,095	\$481,512	\$3,417
Total Agency Expenditures:		\$14,732,989	\$16,618,143	\$17,101,469	\$483,326

## **PROGRAM SUMMARY STATEMENT**

# **3101 - Northeast Delta Human Services Authority**

# **Means of Financing**

		Existing Operating Budget	FY2023-2024		
Description	Actuals	as of 10/01/2022	Total Request	Over/Under EOB	Percent Change
STATE GENERAL FUND (Direct)	10,389,954	11,336,370	11,844,205	507,835	4.48%
STATE GENERAL FUND BY:		_	_	_	_
INTERAGENCY TRANSFERS	4,222,997	4,483,420	4,483,420	_	_
FEES & SELF-GENERATED	120,039	798,353	773,844	(24,509)	(3.07)%
STATUTORY DEDICATIONS	_	_	_	_	_
FEDERAL FUNDS	_	_	_	<del>_</del>	_
TOTAL MEANS OF FINANCING	\$14,732,989	\$16,618,143	\$17,101,469	\$483,326	2.91%

# Fees and Self-Generated

Description	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Total Request	Over/Under EOB	Percent Change
Fees & Self-Generated	120,039	798,353	773,844	(24,509)	(3.07)%
Total:	\$120,039	\$798,353	\$773,844	\$(24,509)	(3.07)%

# **Program Expenditures**

Description	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Total Request	Over/Under EOB	Percent Change
Salaries	_	_	· –		
Other Compensation	_	_	_	_	_
Related Benefits	_	_	_	_	_
TOTAL PERSONAL SERVICES		_	_	_	_
Travel	_	_	_	_	_
Operating Services	_	_	_	_	_
Supplies	<u> </u>	_	_	_	_
TOTAL OPERATING EXPENSES		_	_	_	_
PROFESSIONAL SERVICES		_	_	_	_
Other Charges	14,280,955	16,140,048	16,619,957	479,909	2.97%
Debt Service	_	_	_	_	_
Interagency Transfers	452,034	478,095	481,512	3,417	0.71%
TOTAL OTHER CHARGES	\$14,732,989		\$17,101,469	\$483,326	2.91%
Acquisitions	_	_	_	_	_
Major Repairs	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS		_	_	_	_
TOTAL EXPENDITURES	\$14,732,989	\$16,618,143	\$17,101,469	\$483,326	2.91%
Program Positions					
Classified	<u> </u>		<u> </u>	<u> </u>	<u> </u>

Classified	<del></del>	_	<del>-</del>	_	_
Unclassified	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	101	101	101	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_
TOTAL POSITIONS	101	101	101	_	_

## **Cost Detail**

# **Means of Financing**

Description	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Total Request	Over/Under EOB
State General Fund	10,389,954	11,336,370	11,844,205	507,835
Interagency Transfers	4,222,997	4,483,420	4,483,420	_
Fees & Self-Generated	120,039	798,353	773,844	(24,509)
Total:	\$14,732,990	\$16,618,143	\$17,101,469	\$483,326

# Other Charges

Commitment Item	Name	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Total Request	Over/Under EOB
5600000	TOTAL OTHER CHARGES	_	5,663,077	5,663,077	_
5610001	LOC AID-LOCL SCHL BD	1,861	_	_	_
5620062	MISC-INTERESTEXP	127	_	_	_
5620063	MISC-OPERATNG SVCS	1,064,742	_	31,614	31,614
5620064	MISC-PROF SVCS	1,592,758	_	70,154	70,154
5620065	MISC-SUPPLIES OTHER	626,093	213,262	20,459	(192,803)
5620066	MISC-TRVL IN STATE	9,238	_	_	_
5620067	MISC-TR OUT OF STATE	8,825	_	1,635	1,635
5620069	MISC-INTERAGENCY OTH	613,764	_	15,405	15,405
5620072	MISC-OC SAL CLASS&UN	5,834,448	6,578,156	6,564,374	(13,782)
5620073	MISC-OC-SAL CLASS OT	253	_	_	_
5620074	MISC-OC-SAL CLSS TRM	91,536	_	_	_
5620076	MISC-OC-WAGES	311,162	_	420,940	420,940
5620078	MISC-OC-RETIRE-STEM	2,163,474	2,394,553	2,474,769	80,216
5620079	MISC-OC-RETIRE-TEACH	50,310	52,000	65,684	13,684
5620081	MISC-OC-F.I.C.A. TAX	2,631	3,000	6,361	3,361
5620082	MISC-OC-MEDICARE TAX	83,481	85,000	100,114	15,114
5620083	MISC-OC-GRP INS CONT	742,660	800,000	800,169	169
5620137	MISC-OC-PS-MEDICAL	745,823	_	_	_

# **Other Charges** (continued)

Commitment Item	Name	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Total Request	Over/Under EOB
5620161	MISC-TR OUT OF STATE	1,957	_	_	_
5620164	MISC-OC REL BENEFITS	832	1,000	_	(1,000)
5620165	MISC-OC-POST RET BEN	334,981	350,000	385,202	35,202
<b>Total Other Charges:</b>		\$14,280,955	\$16,140,048	\$16,619,957	\$479,909

# **Interagency Transfers**

Commitment Item	Name	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Total Request	Over/Under EOB
5950000	TOTAL IAT	_	478,095	478,095	_
5950014	IAT-TELEPHONE	137,766	<del>-</del>	_	_
5950017	IAT-INSURANCE	144,724	_	_	_
5950048	IAT-CPTP	40,418	_	_	_
5950051	IAT-OSUP	5,869	_	_	_
5950052	IAT-LEG. AUDITOR	30,074	_	3,417	3,417
5950053	IAT-STATE TREASURER	1,196	_	_	_
5950058	IAT-TECH SVCS	84,438	<u> </u>	_	_
5950059	IAT-ST PROCUREMENT	7,549	_	_	_
Total Interagency Transfers:		\$452,034	\$478,095	\$481,512	\$3,417
Total Expenditures for Program 3101		\$14,732,989	\$16,618,143	\$17,101,469	\$483,326
Total Agency Expenditures:		\$14,732,989	\$16,618,143	\$17,101,469	\$483,326

Source of Funding Summary

Agency Overview

## **SOURCE OF FUNDING SUMMARY**

# **Agency Overview**

# **Interagency Transfers**

	FY2021-2022 Exi	sting Operating Budget	FY2023-2024		
Description	Actuals	as of 10/01/2022	Total Request	Over/Under EOB	Form ID
LDH-OBH	4,245,816	4,483,420	4,483,420	<del>-</del>	11157
Total Interagency Transfers	\$4,245,816	\$4,483,420	\$4,483,420	_	

### Fees & Self-Generated

	FY2021-2022	<b>Existing Operating Budget</b>	FY2023-2024		
Description	Actuals	as of 10/01/2022	Total Request	Over/Under EOB	Form ID
FEES & SELF GENERATED	_	175,000	175,000	_	11182
FEES & SELF GENERATED	120,039	528,649	504,140	(24,509)	11209
FEES & SELF GENERATED	_	30,000	30,000	_	11214
FEES & SELF GENERATED	_	30,000	30,000	_	11215
FEES AND SELF GENERATED	_	34,704	34,704	_	11223
Total Fees & Self-Generated	\$120,039	\$798,353	\$773,844	\$(24,509)	
Total Sources of Funding:	\$4,365,855	\$5,281,773	\$5,257,264	\$(24,509)	

Source of Funding Detail Interagency Transfers

# **SOURCE OF FUNDING DETAIL**

# **Interagency Transfers**

# Form 11157 — 310 - OBH IAT

	Existing Opera	ating Budget as of 1	0/01/2022	FY202	23-2024 Total Requ	est	FY2	2024-2025 Projected	
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	4,483,420	_	_	4,483,420	_	_	_	_	_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers	_	_	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$4,483,420	_	_	\$4,483,420	_	_	_	_	_
Acquisitions		_	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$4,483,420	_	_	\$4,483,420	_	_	_	_	_

Source of Funding Detail Interagency Transfers

### Form 11157 — 310 - OBH IAT

Question	Narrative Response
State the purpose, source and legal citation.	The purpose of this IAT is to support various mental health and substance abuse programs as directed by LDH-OBH.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	None.
Is the Total Request amount for multiple years?	No.
Additional information or comments.	
Provide the amount of any indirect costs.	The amount of indirect costs associated with this activity is \$448,342 (10%). Indirect costs are allocated across operating services, acquisitions and IAT expenditure categories
Any indirect costs funded with other MOF?	There are indirect cost services not funded with this fee that are funded by State General Fund and IAT dollars.
Objectives and indicators in the Operational Plan.	Not applicable
Additional information or comments.	

## **Fees & Self-Generated**

# Form 11182 — 310 - Fees And Self Generated - Medicare

	Existing Operating Budget as of 10/01/2022 FY2023-2024 Total Request		est	FY2024-2025 Projected					
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_	_	_	
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	175,000	_	_	175,000	_	_	_	<u> </u>	_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers	_	_	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$175,000	_	_	\$175,000	_	_	_	_	_
Acquisitions		_	_	_	_	_	_	<u> </u>	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$175,000	_	_	\$175,000	_	_	_	_	_

### Form 11182 — 310 - Fees And Self Generated - Medicare

Question	Narrative Response
State the purpose, source and legal citation.	Purpose of the fees is to offset the cost of providing services to NEDHSA clients with revenues received for services provided to Medicare eligible clients.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	Not applicable
Is the Total Request amount for multiple years?	Not applicable
Additional information or comments.	No
Provide the amount of any indirect costs.	The amount of indirect costs associated with this activity is \$22,574(15%). Indirect costs are allocated across operating services, acquisitions and IAT expenditure categories.
Any indirect costs funded with other MOF?	There are indirect cost services not funded with this fee that are funded by State General Fund and IAT dollars.
Objectives and indicators in the Operational Plan.	Objective: NEDHSA Integrated Healthcare services provide access to integrated care services for adults and adolescents with behavioral health diagnoses. NEDHSA will provide a continuum of quality, competent behavioral health and integrated services that meet the needs of persons served. Performance Indicators: % of persons served who indicate they would recommend the clinic to a friend or family member, % of successful completions (inpatient addiction treatment programs, and % of successful completions (residential addiction treatment programs).
Additional information or comments.	

# Form 11209 — 310 - Fees And Self Generated - Medicaid

	Existing Opera	ating Budget as of 1	10/01/2022		23-2024 Total Requ	est	FY2	.024-2025 Projected	
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel		_	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	528,649	_	_	504,140	_	_	_	_	_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers	_	_	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$528,649	_	_	\$504,140	_	_	_	_	_
Acquisitions		_	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$528,649	_	_	\$504,140	_	_	_	_	_

## Form 11209 — 310 - Fees And Self Generated - Medicaid

Question	Narrative Response
State the purpose, source and legal citation.	Purpose of the fees is to offset the cost providing services to NEDHSA clients and indigent populations. Fee objective is to cover cost of service. Revenue received for services provided to Medicaid eligible clients.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	Not applicable
Is the Total Request amount for multiple years?	Not applicable
Additional information or comments.	No
Provide the amount of any indirect costs.	The amount of indirect costs associated with this activity is \$77,671(15%). Indirect costs are allocated across operating services, acquisitions and IAT expenditure categories. applicable.
Any indirect costs funded with other MOF?	There are indirect cost services not funded with this fee that are funded by State General Fund and IAT dollars
Objectives and indicators in the Operational Plan.	Objective: NEDHSA Integrated Healthcare services provide access to integrated care services for adults and adolescents with behavioral health diagnoses. NEDHSA will provide a continuum of quality, competent behavioral health and integrated services that meet the needs of persons served. Performance Indicators: % of persons served who indicate they would recommend the clinic to a friend or family member, % of successful completions (inpatient addiction treatment programs, and % of successful completions (residential addiction treatment programs).
Additional information or comments.	

- 32 -

## Form 11214 — 310 - Fees And Self Generated - Insurance

	Existing Opera	ating Budget as of '	10/01/2022	FY2023-2024 Total Request		FY2	.024-2025 Projected		
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation	_		_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel		_	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	30,000	_	_	30,000	_	_	_	_	_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers	_	_	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$30,000	_	_	\$30,000	_	_	_	_	_
Acquisitions		_	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$30,000	_	_	\$30,000	_	_	_	_	_

### Form 11214 — 310 - Fees And Self Generated - Insurance

Question	Narrative Response
State the purpose, source and legal citation.	Purpose of the fees is to offset the cost providing services to NEDHSA clients. Fees charged for services provided in Integrated Health Care, Mental Health, and Substance Abuse Clinics that are reimbursable by private insurance.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	Not applicable
ls the Total Request amount for multiple years?	Not applicable
Additional information or comments.	No
Provide the amount of any indirect costs.	The amount of indirect costs associated with this activity is \$4,500 (15%). Indirect costs are allocated across operating services, acquisitions and IAT expenditure categories.
Any indirect costs funded with other MOF?	There are indirect cost services not funded with this fee that are funded by State General Fund and IAT dollars.
Objectives and indicators in the Operational Plan.	Objective: NEDHSA Integrated Healthcare services provide access to integrated care services for adults and adolescents with behavioral health diagnoses. NEDHSA will provide a continuum of quality, competent behavioral health and integrated services that meet the needs of persons served. Performance Indicators: % of persons served who indicate they would recommend the clinic to a friend or family member, % of successful completions (inpatient addiction treatment programs, and % of successful completions (residential addiction treatment programs).
Additional information or comments.	

# Form 11215 — 310 - Fees And Self Generated - Co-Pays

	Existing Opera	ating Budget as of 1	10/01/2022	FY2023-2024 Total Request			FY2024-2025 Projected		
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	<u> </u>	_	_	_	_	_	_	_
Other Compensation		_	_	_		_	_	_	_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	30,000	_	_	30,000	_	_	_	_	_
Debt Service	_	_	_	_	_	_	_	_	_
Interagency Transfers	_	_	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$30,000	_	_	\$30,000	_	_	_	_	_
Acquisitions		_	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$30,000	_	_	\$30,000	_	_	_	_	_

## Form 11215 — 310 - Fees And Self Generated - Co-Pays

Question	Narrative Response
State the purpose, source and legal citation.	The collection of Co-Pays help support clinics that provide services to NEDHSA clients. Clients with private insurance pay applicable co-pays according to their insurance plans.
Agency discretion or Federal requirement?	Agency discretion
Describe any budgetary peculiarities.	Not applicable
ls the Total Request amount for multiple years?	Not applicable
Additional information or comments.	No
Provide the amount of any indirect costs.	The amount of indirect costs associated with this activity is \$4,500 (15%). Indirect costs are allocated across operating services, acquisitions and IAT expenditure categories.
Any indirect costs funded with other MOF?	There are indirect cost services not funded with this fee that are funded by State General Fund and IAT dollars.
Objectives and indicators in the Operational Plan.	Objective: NEDHSA Integrated Healthcare services provide access to integrated care services for adults and adolescents with behavioral health diagnoses. NEDHSA will provide a continuum of quality, competent behavioral health and integrated services that meet the needs of persons served. Performance Indicators: % of persons served who indicate they would recommend the clinic to a friend or family member, % of successful completions (inpatient addiction treatment programs, and % of successful completions (residential addiction treatment programs). not applicable
Additional information or comments.	

## Form 11223 — 310 - Fees and Self Generated - Miscellaneous

	Existing Opera	ating Budget as of '	10/01/2022	FY2023-2024 Total Request		FY2	.024-2025 Projected		
Expenditures	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match	Means of Financing	In-Kind Match	Cash Match
Salaries	_	_	_	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_	_	_
Travel		_	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_	_	_
Other Charges	34,704	_	_	34,704	_	_	_	_	_
Debt Service	_		_	_	_	_	_	_	_
Interagency Transfers	_	_	_	_	_	_	_	_	_
TOTAL OTHER CHARGES	\$34,704	_	_	\$34,704	_	_	_	_	_
Acquisitions		_	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$34,704	_	_	\$34,704	_	_	_	_	_

## Form 11223 — 310 - Fees and Self Generated - Miscellaneous

Question	Narrative Response
State the purpose, source and legal citation.	Purpose of these receipts and revenues is for the furtherance of the general agency activities. Revenues from space leased, medical records copies, DWI copay, Medicaid enrollment.
Agency discretion or Federal requirement?	Agency discretion.
Describe any budgetary peculiarities.	not applicable
Is the Total Request amount for multiple years?	No.
Additional information or comments.	
Provide the amount of any indirect costs.	The amount of indirect costs associated with this activity is \$5,206 (15%). Indirect costs are allocated across operating services, acquisitions and IAT expenditure categories.
Any indirect costs funded with other MOF?	There are indirect cost services not funded with this fee that are funded by State General Fund and IAT dollars.
Objectives and indicators in the Operational Plan.	Objective: NEDHSA Integrated Healthcare services provide access to integrated care services for adults and adolescents with behavioral health diagnoses. NEDHSA will provide a continuum of quality, competent behavioral health and integrated services that meet the needs of persons served. Performance Indicators: % of persons served who indicate they would recommend the clinic to a friend or family member, % of successful completions (inpatient addiction treatment programs, and % of successful completions (residential addiction treatment programs).
Additional information or comments.	

Expenditures by Means of Financing Existing Operating Budget

## **EXPENDITURES BY MEANS OF FINANCING**

# **Existing Operating Budget**

Expenditures	Used as a Cash Match	Total Means of Financing By Expenditure	Total State General Fund	Interagency Transfers Form ID 11157 LDH-OBH	Fees & Self-Generated Form ID 11182 FEES & SELF GENERATED	Fees & Self-Generated Form ID 11209 FEES & SELF GENERATED
Salaries	_	_	_	<del>_</del>	_	_
Other Compensation	_	_	_	<u> </u>	_	_
Related Benefits	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_
Travel	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_
Supplies	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_
Other Charges	_	16,140,048	10,858,275	4,483,420	175,000	528,649
Debt Service	_	_	_	_	_	_
Interagency Transfers	_	478,095	478,095	<u> </u>	_	_
TOTAL OTHER CHARGES	_	\$16,618,143	\$11,336,370	\$4,483,420	\$175,000	\$528,649
Acquisitions	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_
TOTAL EXPENDITURES	_	\$16,618,143	\$11,336,370	\$4,483,420	\$175,000	\$528,649

Expenditures by Means of Financing

Expenditures	Fees & Self-Generated Form ID 11214 FEES & SELF GENERATED	Fees & Self-Generated Form ID 11215 FEES & SELF GENERATED	Fees & Self-Generated Form ID 11223 FEES AND SELF GENERATED
Salaries	_	_	_
Other Compensation	_	_	<u>—</u>
Related Benefits	_	_	_
TOTAL PERSONAL SERVICES	_	_	_
Travel	_	_	_
Operating Services	_	_	_
Supplies	_	_	_
TOTAL OPERATING EXPENSES	_	_	_
PROFESSIONAL SERVICES	_	_	_
Other Charges	30,000	30,000	34,704
Debt Service	_	_	_
Interagency Transfers	_	_	_
TOTAL OTHER CHARGES	\$30,000	\$30,000	\$34,704
Acquisitions	_	_	_
Major Repairs	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_
TOTAL EXPENDITURES	\$30,000	\$30,000	\$34,704

Expenditures by Means of Financing Total Request

# **Total Request**

Expenditures	Used as a Cash Match	Total Means of Financing By Expenditure	Total State General Fund	Interagency Transfers Form ID 11157 LDH-OBH	Fees & Self-Generated Form ID 11182 FEES & SELF GENERATED	Fees & Self-Generated Form ID 11209 FEES & SELF GENERATED
Salaries	_	_	_	_	_	_
Other Compensation	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_
Travel	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_
Supplies	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_
Other Charges	_	16,619,957	11,362,693	4,483,420	175,000	504,140
Debt Service	_	_	_	_	_	_
Interagency Transfers	_	481,512	481,512	_	_	_
TOTAL OTHER CHARGES	_	\$17,101,469	\$11,844,205	\$4,483,420	\$175,000	\$504,140
Acquisitions	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_
TOTAL EXPENDITURES	_	\$17,101,469	\$11,844,205	\$4,483,420	\$175,000	\$504,140

Expenditures by Means of Financing Total Request

Expenditures	Fees & Self-Generated Form ID 11214 FEES & SELF GENERATED	Fees & Self-Generated Form ID 11215 FEES & SELF GENERATED	Fees & Self-Generated Form ID 11223 FEES AND SELF GENERATED
Salaries	_	_	_
Other Compensation	_	_	_
Related Benefits	_	_	_
TOTAL PERSONAL SERVICES	_	_	_
Travel	_	_	_
Operating Services	_	_	_
Supplies	_	_	_
TOTAL OPERATING EXPENSES	_	_	_
PROFESSIONAL SERVICES	_	_	_
Other Charges	30,000	30,000	34,704
Debt Service	_	_	_
Interagency Transfers	_	_	_
TOTAL OTHER CHARGES	\$30,000	\$30,000	\$34,704
Acquisitions	_	_	_
Major Repairs	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_
TOTAL EXPENDITURES	\$30,000	\$30,000	\$34,704

Revenue Collections/Income Interagency Transfers

## **REVENUE COLLECTIONS/INCOME**

# **Interagency Transfers**

# 003 - Interagency Transfers

Source	Commitment Item	Commitment Item Name	FY2021-2022 Actuals	FY-2023 Estimate	FY2023-2024 Projected	Over/Under Current Year Estimate
SOURCE						
LDH-OBH	4710059	MR-FROM STATE AGENCY	4,245,816	4,483,420	4,483,420	_
Total Collections/Income			\$4,245,816	\$4,483,420	\$4,483,420	_
TYPE						
Expenditures Source of Fundi	ng Form (BR-6)		4,245,816	4,483,420	4,483,420	_
Total Expenditures, Transfers an	d Carry Forwards to	Next FY	\$4,245,816	\$4,483,420	\$4,483,420	_
Difference in Total Collections/In Forwards to Next FY	come and Total Exp	enditures, Transfers and Carry	_	_	_	_

Revenue Collections/Income Fees & Self-Generated

## **Fees & Self-Generated**

### 002 - Fees & Self-Generated

Source	Commitment Item	Commitment Item Name	FY2021-2022 Actuals	FY-2023 Estimate	FY2023-2024 Projected	Over/Under Current Year Estimate
SOURCE						
MEDICARE	4650010	SALE NON ST-SERVICES	_	175,000	175,000	_
MEDICAID	4650010	SALE NON ST-SERVICES	120,039	517,805	517,805	_
INSURANCE - MISC	4650024	SALE NS-COMM INS	_	30,000	30,000	_
CO-PAY	4650026	SALE NS-CO-PAYS	_	30,000	30,000	_
MISC COLLECTIONS	4710095	MR-RECOUP & REBATES	_	45,548	21,039	(24,509)
Total Collections/Income			\$120,039	\$798,353	\$773,844	\$(24,509)
TYPE						
Expenditures Source of Funding	g Form (BR-6)		120,039	798,353	773,844	(24,509)
Total Expenditures, Transfers and	Carry Forwards to	Next FY	\$120,039	\$798,353	\$773,844	\$(24,509)
Difference in Total Collections/Incorporates to Next FY	ome and Total Expe	enditures, Transfers and Carry	_	_	_	_

Revenue Collections/Income

Justification of Differences

### **Justification of Differences**

### Form 12218 — 310 - OBH IAT

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	

### Form 12223 — 310 - Fees & SG Medicare

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	

### Form 12225 — 310 - Fees & SG Medicaid

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	

### Form 12226 — 310 - Fees & SG Insurance

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	

Revenue Collections/Income

Justification of Differences

## Form 12227 — 310 - Fees & SG Co-Pays

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	

### Form 12228 — 310 - Fees & SG Misc

Question	Narrative Response
Explain any transfers to other appropriations.	N/A
Break out INA by Source of Funding.	N/A
Additional information or comments.	

# **SCHEDULE OF REQUESTED EXPENDITURES**

# **3101 - Northeast Delta Human Services Authority**

## Other Charges

FY2023-2024 Request	Means of Financing	Description
278,469	Fees & Self-Generated	
2,627,714	Interagency Transfers	
2,982,971	State General Fund	
\$5,889,154		Contractual and operating costs of mental health, addictive disorders and developmental disability services.
495,375	Fees & Self-Generated	
1,855,706	Interagency Transfers	
8,379,722	State General Fund	
\$10,730,803		Salaries and related benefits for Other Charges positions.
\$16,619,957	Total Other Charges	

## **Interagency Transfers**

FY2023-2024 Request	Means of Financing	Receiving Agency	Description
29,940	State General Fund		
\$29,940		LEGISLATIVE AUDITOR	Louisiana Legislative Auditor
177,445	State General Fund		
\$177,445		OFFICE OF RISK MANAGEMENT	Office of Risk Management Premium
63,552	State General Fund		
\$63,552		DOA-OFFICE OF TECHNOLOGY SVCS	Office of Technology Services
155,128	State General Fund		
\$155,128		OFF. TELECOMMUNICATIONS MGMT	Office of Telecommunications
41,550	State General Fund		
\$41,550		STATE CIVIL SERVICE	State Civil Service fees and CPTP
6,310	State General Fund		
\$6,310		DOA-OFFICE OF ST PROCUREMENT	State Purchasing

# **Interagency Transfers** (continued)

FY2023-2024 Request	Means of Financing	Receiving Agency	Description
1,506	State General Fund		
\$1,506		ST TREASURER OPERATING	State Treasurer's Office
6,081	State General Fund		
\$6,081		UNIFORM PAYROLL OFFICE	Uniform Payroll
\$481,512	Total Interagency Transfers		

# **Continuation Budget Adjustments**

Agency Summary Statement Total Agency

## **AGENCY SUMMARY STATEMENT**

# **Total Agency**

# **Means of Financing**

	Existing Operating Budget						FY2023-2024 Requested
Description	as of 10/01/2022	Non-Recurring	Inflation	Compulsory	Workload	Other	Continuation Level
STATE GENERAL FUND (Direct)	11,336,370	(188,753)	139,267	553,904	_	3,417	11,844,205
STATE GENERAL FUND BY:	_	_		_		_	_
INTERAGENCY TRANSFERS	4,483,420	_	_	_	_	_	4,483,420
FEES & SELF-GENERATED	798,353	(24,509)		_		_	773,844
STATUTORY DEDICATIONS	_	_	_	_	_	_	_
FEDERAL FUNDS	_	_	_	_	_	_	_
TOTAL MEANS OF FINANCING	\$16,618,143	\$(213,262)	\$139,267	\$553,904	_	\$3,417	\$17,101,469

Agency Summary Statement Total Agency

## Fees and Self-Generated

Description	Existing Operating Budget as of 10/01/2022	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2023-2024 Requested Continuation Level
Fees & Self-Generated	798,353	(24,509)	_	_	<del>_</del>	<del>_</del>	773,844
Total:	\$798,353	\$(24,509)	_	_	_	_	\$773,844

# **Statutory Dedications**

D	Description	Existing Operating Budget as of 10/01/2022	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2023-2024 Requested Continuation Level
Т	Total:	_	_	_	_	_	_	_

Agency Summary Statement Total Agency

# **Expenditures and Positions**

	Existing Operating Budget						FY2023-2024 Requested
Description	as of 10/01/2022	Non-Recurring	Inflation	Compulsory	Workload	<b>Other</b>	Continuation Level
Salaries	<del>_</del>	_	<u> </u>	_	<del>_</del>	<del>_</del>	_
Other Compensation	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_
Travel	_	<del>_</del>	<u> </u>	<del>_</del>	_	_	_
Operating Services	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_
Other Charges	16,140,048	(213,262)	139,267	553,904	_	_	16,619,957
Debt Service	_	_	_	_	_	_	_
Interagency Transfers	478,095	_	_	_	_	3,417	481,512
TOTAL OTHER CHARGES	\$16,618,143	\$(213,262)	\$139,267	\$553,904	_	\$3,417	\$17,101,469
Acquisitions	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$16,618,143	\$(213,262)	\$139,267	\$553,904	_	\$3,417	\$17,101,469
Classified	_	<del>_</del>	<u> </u>	<del>_</del>	_	_	_
Unclassified	_	_	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	101	_	_	_	_	_	101
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_	_	_

Total Agency Request Type: NON-RECUR

## **CONTINUATION BUDGET ADJUSTMENTS - SUMMARIZED**

# Form 11655 — Non-recurring Carryforwards Means of Financing

	Amount
STATE GENERAL FUND (Direct)	(188,753)
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	(24,509)
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	_
TOTAL MEANS OF FINANCING	\$(213,262)

## **Expenditures**

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	(213,262)
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$(213,262)
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$(213,262)

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

# Form 11971 — 310 - Inflation

# **Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	139,267
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	<del>_</del>
TOTAL MEANS OF FINANCING	\$139,267

## **Expenditures**

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	139,267
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$139,267
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$139,267

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

# Form 11888 — 310 - Salary & RB Compulsory Adjustment Means of Financing

	Amount
STATE GENERAL FUND (Direct)	553,904
STATE GENERAL FUND BY:	<u> </u>
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	_
TOTAL MEANS OF FINANCING	\$553,904

## **Expenditures**

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	553,904
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$553,904
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$553,904

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

# Form 11957 — 310 - Other/IAT Increase LLA Means of Financing

	Amount
STATE GENERAL FUND (Direct)	3,417
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	_
TOTAL MEANS OF FINANCING	\$3,417

## **Expenditures**

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	3,417
TOTAL OTHER CHARGES	\$3,417
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$3,417

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

# Form 12201 — 310 - Funding Expenditure Swap Means of Financing

	Amount
STATE GENERAL FUND (Direct)	_
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	_
TOTAL MEANS OF FINANCING	_

## **Expenditures**

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	_
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	_

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

## **PROGRAM SUMMARY STATEMENT**

# **3101 - Northeast Delta Human Services Authority**

## **Means of Financing**

	Existing Operating Budget						FY2023-2024 Requested
Description	as of 10/01/2022	Non-Recurring	Inflation	Compulsory	Workload	Other	Continuation Level
STATE GENERAL FUND (Direct)	11,336,370	(188,753)	139,267	553,904	_	3,417	11,844,205
STATE GENERAL FUND BY:	_	_		_		_	_
INTERAGENCY TRANSFERS	4,483,420	_	_	_	_	_	4,483,420
FEES & SELF-GENERATED	798,353	(24,509)		_		_	773,844
STATUTORY DEDICATIONS	_	_	_	_	_	_	_
FEDERAL FUNDS	_	_	_	_	_	_	_
TOTAL MEANS OF FINANCING	\$16,618,143	\$(213,262)	\$139,267	\$553,904	_	\$3,417	\$17,101,469

### Fees and Self-Generated

Description	Existing Operating Budget as of 10/01/2022	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2023-2024 Requested Continuation Level
Fees & Self-Generated	798,353	(24,509)	<del>_</del>	_	<u> </u>	_	773,844
Total:	\$798,353	\$(24,509)	_	_	_	_	\$773,844

# **Expenditures and Positions**

Description	Existing Operating Budget as of 10/01/2022	Non-Recurring	Inflation	Compulsory	Workload	Other	FY2023-2024 Requested Continuation Level
Salaries	_	<del>_</del>	_	<del>_</del>	_	<del>_</del>	_
Other Compensation	_	_	_	_	_		_
Related Benefits	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	<del>-</del>	<del>_</del>	_	<del>-</del>	<del>-</del>	<del>_</del>	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_
Other Charges	16,140,048	(213,262)	139,267	553,904	_	_	16,619,957
Debt Service	_	_	_	_	_	_	_
Interagency Transfers	478,095	_	_	_	_	3,417	481,512
TOTAL OTHER CHARGES	\$16,618,143	\$(213,262)	\$139,267	\$553,904	_	\$3,417	\$17,101,469
Acquisitions	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$16,618,143	\$(213,262)	\$139,267	\$553,904	_	\$3,417	\$17,101,469
Classified	_	_	_	_	_	_	_
Unclassified	_	_	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	101	_	_	_	_	_	101
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_	_	_

## **CONTINUATION BUDGET ADJUSTMENTS - BY PROGRAM**

# Form 11655 — Non-recurring Carryforwards

### 3101 - Northeast Delta Human Services Authority

# **Means of Financing**

	Amount
STATE GENERAL FUND (Direct)	(188,753)
STATE GENERAL FUND BY:	<del>-</del>
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	(24,509)
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	_
TOTAL MEANS OF FINANCING	\$(213,262)

## **Expenditures**

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	(213,262)
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$(213,262)
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$(213,262)

#### **Positions**

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

### Fees and Self-Generated

	Amount
Fees & Self-Generated	(24,509)
Total:	\$(24,509)

## **Statutory Dedications**

	Amount
Total:	_

# Supporting Detail Means of Financing

Description	Amount
Fees & Self-Generated	(24,509)
State General Fund	(188,753)
Total:	\$(213,262)

# Other Charges

Commitment item	Name	Amount
5620065	MISC-SUPPLIES OTHER	(213,262)
Total:		\$(213,262)

## Form 11971 — 310 - Inflation

## 3101 - Northeast Delta Human Services Authority

#### **MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	139,267
STATE GENERAL FUND BY:	<u> </u>
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	_
TOTAL MEANS OF FINANCING	\$139,267

### **EXPENDITURES**

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	139,267
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$139,267
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$139,267

### **AUTHORIZED POSITIONS**

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Question	Narrative Response
Explain the need for this request.	Total Other Charges of \$5,876,339 comprised of supplies, services, travel, and professional services under the general inflation rate (2.37%). Inflation Adjustment \$139,267
Cite performance indicators for the adjustment.	None
What would the impact be if this is not funded?	Due to the increasing cost of of services and supplies without an incremental increase it could negatively impact our ability to provide services efficiently and effectively at our current high standards.
Is revenue a fixed amount or can it be adjusted?	No
Is the expenditure of these revenues restricted?	No
Additional information or comments.	

# Form 11888 — 310 - Salary & RB Compulsory Adjustment

## 3101 - Northeast Delta Human Services Authority

#### **MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	553,904
STATE GENERAL FUND BY:	<del>-</del>
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	_
TOTAL MEANS OF FINANCING	\$553,904

#### **EXPENDITURES**

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	553,904
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	\$553,904
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$553,904

#### **AUTHORIZED POSITIONS**

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

## **Statutory Dedications**

	Amount
Total:	_

Question	Narrative Response	
Explain the need for this request.	Salary and Wage Market Adjustment \$156,220 Base Salary Adj. \$2,976 Funding for Vacant Unclassified Positions \$240,000 Related Benefits Adjustment \$146,746 Wages Base Adjustment \$407,220 Wages Market Adjustment and CPG \$13,720 Less Attrition \$(412,978) Total \$553,904 (spreadsheet attached)	
Cite performance indicators for the adjustment.	None	
What would the impact be if this is not funded?	The inability to give market rate adjustments to current staff and the inability to fill vacant staff positions to provide needed services.	
Is revenue a fixed amount or can it be adjusted?	No	
Is the expenditure of these revenues restricted?	No	
Additional information or comments.		

## Form 11957 — 310 - Other/IAT Increase LLA

## 3101 - Northeast Delta Human Services Authority

#### **MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	3,417
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	_
TOTAL MEANS OF FINANCING	\$3,417

### **EXPENDITURES**

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	<del>-</del>
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	3,417
TOTAL OTHER CHARGES	\$3,417
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	\$3,417

### **AUTHORIZED POSITIONS**

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

Question	Narrative Response
Explain the need for this request.	Payment increase for IAT - Louisiana Legislative Auditor FY 23 invoice charges \$26,523.00 increasing to \$29,940.00 for FY 24. Requesting funding for the \$3,417.00 increase.
Cite performance indicators for the adjustment.	None
What would the impact be if this is not funded?	If not funded, the possible programmatic impact would be having to use other funds for this IAT that would prevent the agency from providing as many services as possible to our clients.
Is revenue a fixed amount or can it be adjusted?	No
Is the expenditure of these revenues restricted?	No
Additional information or comments.	



MICHAEL J. "MIKE" WAGUESPACK, CPA LOUISIANA LEGISLATIVE AUDITOR

RECEIVED

OCT - 5 2022

Northeast Delta HSA

September 30, 2022

Dr. Monteic A. Sizer Executive Director Northeast Delta Human Services Authority 2513 Ferrand Street Monroe, Louisiana 71201

Dear Dr. Sizer,

Act 198 of the 2022 Regular Legislative Session authorized the Legislative Auditor to allocate and collect from each auditee included in the state's Annual Comprehensive Financial Report such amounts as may be reasonably necessary to compensate the Legislative Auditor for services rendered.

I understand your agency is currently preparing its budget for the 2023-2024 fiscal year. I ask that you include \$29,940 for the 2023-2024 regular allocation of audit costs in your budget.

Your agency's audit allocation is based on the cost of audit services provided to you. If additional audit services are requested or required, those services may result in additional audit costs charged to your agency. Those costs would be discussed with you prior to any additional allocation.

Inquiries concerning this allocation should be directed to Mr. Ernest F. Summerville, Jr., CPA, First Assistant Legislative Auditor, at (225) 339-3839. I appreciate the many courtesies extended my staff over the years and look forward to working with you in the future.

Sincerely,

Michael J. Waguespack, CPA Louisiana Legislative Auditor

MJW:EFS:tmp Allocation Letter 2024-ID 10839

1600 NORTH 3RD STREET P.O. BOX 94397 BATON ROUGE, LA 70804-9397 PHONE 225-339-3800 | FAX 225-339-3870 | LLA.LA.GOV

INVOICE RECEIVED Invoice - 14898 Account - 10839 Date - 8/03/22

STATE OF LOUISIANA LOUISIANA LEGISLATIVE AUDITOR

AUG 2 2 2022

PLEASE MAIL REMITTANCE TO Legislative Auditor

1600 North Third Street/P.O. Box 94397 Baton Rouge, LA 70804-9397 Tel (225) 339-3800 Fax (225) 339-3988 Web www.lla.la.gov Northeast Delta HSA

Attn: Accounting Dept. P.O. Box 94397 Baton Rouge, LA 70804-9397

Dr. Monteic A. Sizer, Executive Director Northeast Delta Human Services Authority 2513 Ferrand Street Monroe LA 71201

Date Ty Reference Due Date Remark Amount

08/19/22 AI 000 09/19/22 2022-2023 Allocation 26,523.00

Balance Due 26,523.00

Z8 Document Number: 8800010639

Karen Evans

09/15/2022

Dr. Monteic A. Sizer

Signature: Dr. Monteic A. Sizer

Dr. Monteic A. Sizer (Sep 15, 2022 16:29 CDT)

Email: monteic.sizer@la.gov

## Form 12201 — 310 - Funding Expenditure Swap

## 3101 - Northeast Delta Human Services Authority

#### **MEANS OF FINANCING**

	Amount
STATE GENERAL FUND (Direct)	_
STATE GENERAL FUND BY:	_
INTERAGENCY TRANSFERS	_
FEES & SELF-GENERATED	_
STATUTORY DEDICATIONS	_
FEDERAL FUNDS	_
TOTAL MEANS OF FINANCING	_

#### **EXPENDITURES**

	Amount
Salaries	_
Other Compensation	_
Related Benefits	_
TOTAL PERSONAL SERVICES	_
Travel	_
Operating Services	_
Supplies	_
TOTAL OPERATING EXPENSES	_
PROFESSIONAL SERVICES	_
Other Charges	_
Debt Service	_
Interagency Transfers	_
TOTAL OTHER CHARGES	_
Acquisitions	_
Major Repairs	_
TOTAL ACQ. & MAJOR REPAIRS	_
TOTAL EXPENDITURES	_

#### **AUTHORIZED POSITIONS**

	FTE
Classified	_
Unclassified	_
TOTAL AUTHORIZED T.O. POSITIONS	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_
TOTAL NON-T.O. FTE POSITIONS	_

## **Statutory Dedications**

	Amount
1	Total: —

Question	Narrative Response
Explain the need for this request.	Requesting swap in expenditure categories funded with Self Generated Funds. Adjustments necessary between Other Charges and Other Charges - Related Benefits. Offset with the same expense categories funded by State General Funds.
Cite performance indicators for the adjustment.	N/A
What would the impact be if this is not funded?	N/A
Is revenue a fixed amount or can it be adjusted?	No
Is the expenditure of these revenues restricted?	No
Additional information or comments.	

## Technical and Other Adjustments

## **AGENCY SUMMARY STATEMENT**

## **Total Agency**

Means of Financing	Existing Operating Budget as of 10/01/2022	FY2023-2024 Requested Continuation Adjustment	FY2023-2024 Requested in this Adjustment Package	FY2023-2024 Requested Realignment
STATE GENERAL FUND (Direct)	11,336,370	507,835	_	11,844,205
STATE GENERAL FUND BY:	_	_	_	_
INTERAGENCY TRANSFERS	4,483,420	_	_	4,483,420
FEES & SELF-GENERATED	798,353	(24,509)	_	773,844
STATUTORY DEDICATIONS	_	_	_	_
FEDERAL FUNDS	_	_	_	_
TOTAL MEANS OF FINANCING	\$16,618,143	\$483,326	_	\$17,101,469
Salaries	_	_	_	_
Other Compensation	_	_	_	_
Related Benefits	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_
Travel	_	_	_	_
Operating Services	_	_	_	_
Supplies	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_
Other Charges	16,140,048	479,909	_	16,619,957
Debt Service	_	_	_	_
Interagency Transfers	478,095	3,417	_	481,512
TOTAL OTHER CHARGES	\$16,618,143	\$483,326	_	\$17,101,469
Acquisitions	_	_	_	_
Major Repairs	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_
TOTAL EXPENDITURES	\$16,618,143	\$483,326	_	\$17,101,469
Classified	_	_	_	_
Unclassified	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	101	_	_	101
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_

Agency Summary Statement Program Breakout

## **PROGRAM BREAKOUT**

	Requested in this	3101 Northeast Delta Human Services
Means of Financing	Adjustment Package	Authority
STATE GENERAL FUND (Direct)	_	_
STATE GENERAL FUND BY:	_	_
INTERAGENCY TRANSFERS	_	_
FEES & SELF-GENERATED	_	_
STATUTORY DEDICATIONS	_	_
FEDERAL FUNDS	_	_
TOTAL MEANS OF FINANCING	_	_
Salaries	_	_
Other Compensation	_	_
Related Benefits	_	_
TOTAL SALARIES	<del>-</del>	_
Travel	_	_
Operating Services	_	_
Supplies	_	_
TOTAL OPERATING EXPENSES	_	_
PROFESSIONAL SERVICES	_	_
Other Charges	_	_
Debt Service	_	_
Interagency Transfers	_	_
TOTAL OTHER CHARGES	_	_
Acquisitions	_	_
Major Repairs	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_
TOTAL EXPENDITURES & REQUEST	_	_
Classified	_	_
Unclassified	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	_	_
TOTAL NON-T.O. FTE POSITIONS	_	_

## **PROGRAM SUMMARY STATEMENT**

## **3101 - Northeast Delta Human Services Authority**

Means of Financing	Existing Operating Budget as of 10/01/2022	FY2023-2024 Requested Continuation Adjustment	FY2023-2024 Requested in this Adjustment Package	FY2023-2024 Requested Realignment
STATE GENERAL FUND (Direct)	11,336,370	507,835	_	11,844,205
STATE GENERAL FUND BY:	_	_	_	_
INTERAGENCY TRANSFERS	4,483,420	_	_	4,483,420
FEES & SELF-GENERATED	798,353	(24,509)	_	773,844
STATUTORY DEDICATIONS	_	_	_	_
FEDERAL FUNDS	<del>_</del>	_	<del>_</del>	_
TOTAL MEANS OF FINANCING	\$16,618,143	\$483,326	_	\$17,101,469
Salaries	_	_	_	_
Other Compensation	_	_	_	_
Related Benefits	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_
Travel	_	_	_	_
Operating Services	_	_	_	_
Supplies	_	_	_	
TOTAL OPERATING EXPENSES	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_
Other Charges	16,140,048	479,909	_	16,619,957
Debt Service	_	_	_	_
Interagency Transfers	478,095	3,417	<del>_</del>	481,512
TOTAL OTHER CHARGES	\$16,618,143	\$483,326	_	\$17,101,469
Acquisitions	_	_	_	_
Major Repairs	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_
TOTAL EXPENDITURES	\$16,618,143	\$483,326	_	\$17,101,469
Classified	_	_	_	_
Unclassified	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	101	_	_	101
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_

# New or Expanded Requests

## **AGENCY SUMMARY STATEMENT**

## **Total Agency**

Means of Financing and Expenditures	Existing Operating Budget as of 10/01/2022	FY2023-2024 Requested Continuation Adjustment	FY2023-2024 Requested in Technical/Other Package	FY2023-2024 Requested New/Expanded	FY2023-2024 Requested Realignment
STATE GENERAL FUND (Direct)	11,336,370	507,835	_	<del>-</del>	11,844,205
STATE GENERAL FUND BY:	_	_	_	_	_
INTERAGENCY TRANSFERS	4,483,420	_	_	_	4,483,420
FEES & SELF-GENERATED	798,353	(24,509)	_	_	773,844
STATUTORY DEDICATIONS	_	_	_	_	_
FEDERAL FUNDS	_	_	_	_	_
TOTAL MEANS OF FINANCING	\$16,618,143	\$483,326	_	_	\$17,101,469
Salaries	<del>-</del>	_	<del>-</del>	<del>-</del>	_
Other Compensation	_	_	_	_	_
Related Benefits	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_
Travel	_	_	_	_	_
Operating Services	_	_	_	_	_
Supplies	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_
Other Charges	16,140,048	479,909	_	_	16,619,957
Debt Service	_	_	_	_	_
Interagency Transfers	478,095	3,417	_	_	481,512
TOTAL OTHER CHARGES	\$16,618,143	\$483,326	_	_	\$17,101,469
Acquisitions	_	_	_	_	_
Major Repairs	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_
TOTAL EXPENDITURES	\$16,618,143	\$483,326	_	_	\$17,101,469
Classified	_	_	_	_	_
Unclassified	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	<del>_</del>	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	101	_	_	_	101
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_

## Fees and Self-Generated

	Existing Operating Budget	FY2023-2024 Requested	FY2023-2024 Requested in Technical/Other	FY2023-2024 Requested	FY2023-2024 Requested
Description	as of 10/01/2022	Continuation Adjustment	Package	New/Expanded	Realignment
Fees & Self-Generated	798,353	(24,509)	_	_	773,844
Total:	\$798,353	\$(24,509)	_	_	\$773,844

## **Statutory Dedications**

Existing Operating Budget Description as of 10/01/2022		FY2023-2024 Requested in Technical/Other Package	FY2023-2024 Requested New/Expanded	FY2023-2024 Requested Realignment
Total: —	_	_	_	_

## **PROGRAM SUMMARY STATEMENT**

## **3101 - Northeast Delta Human Services Authority**

Means of Financing and Expenditures	Existing Operating Budget as of 10/01/2022	FY2023-2024 Requested Continuation Adjustment	FY2023-2024 Requested in Technical/Other Package	FY2023-2024 Requested New/Expanded	FY2023-2024 Requested Realignment
STATE GENERAL FUND (Direct)	11,336,370	507,835	_	<del>-</del>	11,844,205
STATE GENERAL FUND BY:	_	_	_	_	_
INTERAGENCY TRANSFERS	4,483,420	_	_	_	4,483,420
FEES & SELF-GENERATED	798,353	(24,509)	_	_	773,844
STATUTORY DEDICATIONS	_	_	_	_	_
FEDERAL FUNDS	_	_	_	_	_
TOTAL MEANS OF FINANCING	\$16,618,143	\$483,326	_	_	\$17,101,469
Salaries	_	_	_	<del>-</del>	_
Other Compensation	_	_	_	_	_
Related Benefits	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_
Travel	_	_	_	_	_
Operating Services	_	_	_	_	_
Supplies	<del>-</del>	_	_	<del>_</del>	_
TOTAL OPERATING EXPENSES	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_
Other Charges	16,140,048	479,909	_	_	16,619,957
Debt Service	_	_	_	_	_
Interagency Transfers	478,095	3,417	_	_	481,512
TOTAL OTHER CHARGES	\$16,618,143	\$483,326	_	_	\$17,101,469
Acquisitions	_	_	_	_	_
Major Repairs	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_
TOTAL EXPENDITURES	\$16,618,143	\$483,326	_	_	\$17,101,469
Classified	_	_	_		_
Unclassified	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_		<del>-</del>
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	101	_	_	_	101
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_

## Fees and Self-Generated

Description	Existing Operating Budget as of 10/01/2022	FY2023-2024 Requested Continuation Adjustment	FY2023-2024 Requested in Technical/Other Package	FY2023-2024 Requested New/Expanded	FY2023-2024 Requested Realignment
Fees & Self-Generated	798,353	(24,509)	_	_	773,844
Total:	\$798,353	\$(24,509)	_	_	\$773,844

## **Statutory Dedications**

Description	Existing Operating Budget as of 10/01/2022	FY2023-2024 Requested Continuation Adjustment	FY2023-2024 Requested in Technical/Other Package	FY2023-2024 Requested New/Expanded	FY2023-2024 Requested Realignment
Total:	<del>-</del>	_	_	<del>-</del>	_



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# **Total Request Summary**

## **AGENCY SUMMARY STATEMENT**

## **Total Agency**

## **Means of Financing**

Description	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Requested Continuation Adjustments	FY2023-2024 Requested in Technical/Other Adjustments	FY2023-2024 Requested New or Expanded Adjustments	FY2023-2024 Total Request	Over/Under EOB
STATE GENERAL FUND (Direct)	10,389,954	11,336,370	507,835	_	_	11,844,205	507,835
STATE GENERAL FUND BY:	_	_	_	_	_	_	_
INTERAGENCY TRANSFERS	4,222,997	4,483,420	_	_	_	4,483,420	_
FEES & SELF-GENERATED	120,039	798,353	(24,509)	_	_	773,844	(24,509)
STATUTORY DEDICATIONS	_	_	_	_	_	_	_
FEDERAL FUNDS	_	_	_	_	_	_	_
TOTAL MEANS OF FINANCING	\$14,732,989	\$16,618,143	\$483,326	_	_	\$17,101,469	\$483,326

- 84 -

### Fees and Self-Generated

Description	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Requested Continuation Adjustments	FY2023-2024 Requested in Technical/Other Adjustments	FY2023-2024 Requested New or Expanded Adjustments	FY2023-2024 Total Request	Over/Under EOB
Fees & Self-Generated	120,039	798,353	(24,509)	_	_	773,844	(24,509)
Total:	\$120,039	\$798,353	\$(24,509)	_	_	\$773,844	\$(24,509)

## **Statutory Dedications**

Description	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Requested Continuation Adjustments	FY2023-2024 Requested in Technical/Other Adjustments	FY2023-2024 Requested New or Expanded Adjustments	FY2023-2024 Total Request	Over/Under EOB
Total:	_	_	_	_	_	_	_

## **Expenditures and Positions**

Description	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Requested Continuation Adjustments	FY2023-2024 Requested in Technical/Other Adjustments	FY2023-2024 Requested New or Expanded Adjustments	FY2023-2024 Total Request	Over/Under EOB
Salaries	_	_	_				_
Other Compensation	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_		_	_	_
Travel	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_
Other Charges	14,280,955	16,140,048	479,909	_	_	16,619,957	479,909
Debt Service	_	_	_	_	_	_	_
Interagency Transfers	452,034	478,095	3,417	_	_	481,512	3,417
TOTAL OTHER CHARGES	\$14,732,989	\$16,618,143	\$483,326	_	_	\$17,101,469	\$483,326
Acquisitions	_	_	_	_	_	_	_
Major Repairs	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS		<del>_</del>	_	<del>-</del>	<del>-</del>	<del>-</del>	<del>-</del>
TOTAL EXPENDITURES	\$14,732,989	\$16,618,143	\$483,326	_	_	\$17,101,469	\$483,326
Classified	_	_	_	_	_	_	_
Unclassified	_	_	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	_	_	_	_	_	_	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	101	101	_	_	_	101	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_	_	_

## **PROGRAM SUMMARY STATEMENT**

## **3101 - Northeast Delta Human Services Authority**

## **Means of Financing**

Description	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Requested Continuation Adjustments	FY2023-2024 Requested in Technical/Other Adjustments	FY2023-2024 Requested New or Expanded Adjustments	FY2023-2024 Total Request	Over/Under EOB
STATE GENERAL FUND (Direct)	10,389,954	11,336,370	507,835	_	_	11,844,205	507,835
STATE GENERAL FUND BY:	_	_	_	_	_	_	_
INTERAGENCY TRANSFERS	4,222,997	4,483,420	_	_	_	4,483,420	_
FEES & SELF-GENERATED	120,039	798,353	(24,509)	_	_	773,844	(24,509)
STATUTORY DEDICATIONS	_	_	_	_	_	_	_
FEDERAL FUNDS	_	_	_	_	_	_	_
TOTAL MEANS OF FINANCING	\$14,732,989	\$16,618,143	\$483,326	_	_	\$17,101,469	\$483,326

### Fees and Self-Generated

Description	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Requested Continuation Adjustments	FY2023-2024 Requested in Technical/Other Adjustments	FY2023-2024 Requested New or Expanded Adjustments	FY2023-2024 Total Request	Over/Under EOB
Fees & Self-Generated	120,039	798,353	(24,509)	_	_	773,844	(24,509)
Total:	\$120,039	\$798,353	\$(24,509)	_	_	\$773,844	\$(24,509)

## **Expenditures and Positions**

Description	FY2021-2022 Actuals	Existing Operating Budget as of 10/01/2022	FY2023-2024 Requested Continuation Adjustments	FY2023-2024 Requested in Technical/Other Adjustments	FY2023-2024 Requested New or Expanded Adjustments	FY2023-2024 Total Request	Over/Under EOB
Salaries				——————————————————————————————————————	——————————————————————————————————————		— — — — — — — — — — — — — — — — — — —
Other Compensation	_	_	_	_	_	_	_
Related Benefits	_	_	_	_	_	_	_
TOTAL PERSONAL SERVICES	_	_	_	_	_	_	_
Travel	_	_	_	_	_	_	_
Operating Services	_	_	_	_	_	_	_
Supplies	_	_	_	_	_	_	_
TOTAL OPERATING EXPENSES	_	_	_	_	_	_	_
PROFESSIONAL SERVICES	_	_	_	_	_	_	_
Other Charges	14,280,955	16,140,048	479,909	_	_	16,619,957	479,909
Debt Service	_	_	_	_	_	_	_
Interagency Transfers	452,034	478,095	3,417	_	_	481,512	3,417
TOTAL OTHER CHARGES	\$14,732,989	\$16,618,143	\$483,326	_	_	\$17,101,469	\$483,326
Acquisitions	_	_	_	<u> </u>	_	<del>_</del>	_
Major Repairs	_	_	_	_	_	_	_
TOTAL ACQ. & MAJOR REPAIRS	_	_	_	_	_	_	_
TOTAL EXPENDITURES	\$14,732,989	\$16,618,143	\$483,326	_	_	\$17,101,469	\$483,326
Classified	_	_	_	<u> </u>	_	<del>_</del>	_
Unclassified	_	_	_	_	_	_	_
TOTAL AUTHORIZED T.O. POSITIONS	<del>-</del>	<del>_</del>	_	<u> </u>	_	<del>-</del>	_
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	101	101	_	_	_	101	_
TOTAL NON-T.O. FTE POSITIONS	_	_	_	_	_	_	_



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## Addenda

## **CHILDREN'S BUDGET**

Department: 09A - Louisiana Department of Health STATE OF LOUISIANA

Agency: NDHSA

Childrens Budget
Department Summary

CHILD - DS Fiscal Year 2023 - 2024 Report Date: 10/21/22

Service Number	Service Name	Agency Number	Agency Name	General Fund	IAT	Self Generated	Stat Deds	Federal Funds	Total Funds	Positions
#	Not assigned	310	Northeast Delta Human Services /	\$1,713,628	\$640,256	\$0	\$0	\$0	\$2,353,884	11
			Total:	\$1,713,628	\$640,256	\$0	\$0	\$0	\$2,353,884	11

Department: 09A - Louisiana Department of Heal Agency: NDHSA	th	STATE OF LOUISIA Childrens Budget by Department	NA		CHILD - DC Fiscal Year 2023 - 2024 Report Date: 10/21/22
Means of Financing:	Existing Operating Budget	Requested Continuation	Requested NE	Total Requested	Total Recommended
STATE GENERAL FUND (Direct)	\$1,691,899	\$1,713,628	\$1,713,628	\$1,713,628	\$0
STATE GENERAL FUND BY:					
INTERAGENCY TRANSFERS	\$640,256	\$640,256	\$640,256	\$640,256	\$0
FEES & SELF-GENERATED	\$0	\$0	\$0	\$0	\$0
STATUTORY DEDICATIONS	\$0	\$0	\$0	\$0	\$0
FEDERAL FUNDS	\$0	\$0	\$0	\$0	\$0
TOTAL MEANS OF FINANCING	\$2,332,155	\$2,353,884	\$2,353,884	\$2,353,884	\$0
Salaries	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0
TOTAL PERSONAL SERVICES	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0
TOTAL OPERATING EXPENSES	\$0	\$0	\$0	\$0	\$0
PROFESSIONAL SERVICES	\$0	\$0	\$0	\$0	\$0
Other Charges	\$2,332,155	\$2,353,884	\$2,353,884	\$2,353,884	\$0
Debt Service	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$0	\$0	\$0	\$0	\$0
TOTAL OTHER CHARGES	\$2,332,155	\$2,353,884	\$2,353,884	\$2,353,884	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0

CHILD - DC - Page 1 of 2

Department: 09A - Louisiana Department of Health Agency: NDHSA	1	STATE OF LOUISIA Childrens Budget by Department	ANA				
TOTAL ACQ. & MAJOR REPAIRS	\$0	\$0	\$0	\$0	\$0		
TOTAL EXPENDITURES	\$2,332,155	\$2,353,884	\$2,353,884	\$2,353,884	\$0		
Classified	11	11	11	11	0		
Unclassified	0	0	0	0	0		
TOTAL AUTHORIZED T.O. POSITIONS	11	11	11	11	0		
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	0	0	0	0	0		
TOTAL NON-T.O. FTE POSITIONS	0	0	0	0	0		
TOTAL POSITIONS	11	11	11	11	0		

Department: 09A - Louisiana Department of Health

### **STATE OF LOUISIANA**

CHILD - AS Fiscal Year 2023 - 2024

Agency: NDHSA

Childrens Budget Agency Summary

Report Date: 10/21/22

#### 310 - Northeast Delta Human Services

Service Number	Service Name	Program Number	Program Name	General Fund	IAT	Self Generated	Stat Deds	Federal Funds	Total Funds	Positions
#	Not assigned	3101	Northeast Delta Hun	\$1,713,628	\$640,256	\$0	\$0	\$0	\$2,353,884	11
			Total:	\$1,713,628	\$640,256	\$0	\$0	\$0	\$2,353,884	11

Department: 09A - Louisiana Department of Health

Agency: NDHSA

STATE OF LOUISIANA

CHILD - AC Fiscal Year 2023 - 2024

Report Date: 10/21/22

Childrens Budget by Agency

#### 310 - Northeast Delta Human Services

Means of Financing:	Existing Operating Budget	Requested Continuation	Requested NE	Total Requested	Total Recommended
STATE GENERAL FUND (Direct)	\$1,691,899	\$1,713,628	\$1,713,628	\$1,713,628	\$0
STATE GENERAL FUND BY:					
INTERAGENCY TRANSFERS	\$640,256	\$640,256	\$640,256	\$640,256	\$0
FEES & SELF-GENERATED	\$0	\$0	\$0	\$0	\$0
STATUTORY DEDICATIONS	\$0	\$0	\$0	\$0	\$0
FEDERAL FUNDS	\$0	\$0	\$0	\$0	\$0
TOTAL MEANS OF FINANCING	\$2,332,155	\$2,353,884	\$2,353,884	\$2,353,884	\$0
Salaries	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0
TOTAL PERSONAL SERVICES	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0
TOTAL OPERATING EXPENSES	\$0	\$0	\$0	\$0	\$0
PROFESSIONAL SERVICES	\$0	\$0	\$0	\$0	\$0
Other Charges	\$2,332,155	\$2,353,884	\$2,353,884	\$2,353,884	\$0
Debt Service	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$0	\$0	\$0	\$0	\$0
TOTAL OTHER CHARGES	\$2,332,155	\$2,353,884	\$2,353,884	\$2,353,884	\$0

CHILD - AC - Page 1 of 2

Department: 09A - Louisiana Department of Health Agency: NDHSA	1	STATE OF LOUISIA Childrens Budget by Agency	ANA		CHILD - AC Fiscal Year 2023 - 2024 Report Date: 10/21/22
Acquisitions	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0
TOTAL ACQ. & MAJOR REPAIRS	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$2,332,155	\$2,353,884	\$2,353,884	\$2,353,884	\$0
Classified	11	11	11	11	0
Unclassified	0	0	0	0	0
TOTAL AUTHORIZED T.O. POSITIONS	11	11	11	11	0
TOTAL AUTHORIZED OTHER CHARGES POSITIONS	0	0	0	0	0
TOTAL NON-T.O. FTE POSITIONS	0	0	0	0	0
TOTAL POSITIONS	11	11	11	11	0

Department: 09A - Louisiana Department of Health

Agency: NDHSA

STATE OF LOUISIANA Childrens Budget by Agency/Program and Service CHILD1 Fiscal Year 2023 - 2024 Report Date: 10/21/22

310 - Northeast Delta Human Services

3101 - Northeast Delta Human Services Auth

Department: 09A - Louisiana Department of Health

#### STATE OF LOUISIANA

CHILD2 Fiscal Year 2023 - 2024

Agency: NDHSA

Childrens Budget Narrative

Report Date: 10/21/22

Form ID:

11977

Form Description: 310 - Children's Budget

Service: # - Not assigned

#### **Question and Narrative Response**

#### Describe the service:

NEDHSA provides individuals and their families assistance by team of behavioral health professionals including physicians, social workers, marriage and family therapist, addiction counselors and case managers.

#### How does this fulfill the program's mission?

Serving as a catalyst for individuals with mental health, developmental disabilities, and addictive disorders to realize their full human potential by offering quality, excellent care with greater accessibility.

#### Who are the principal users?

Children zero- eighteen.

#### Who primarily benefits from the service?

Children zero-eighteen and their immediate family.

#### Related objectives and performance measures:

P.I Code 25221 - Number of people receiving individual and family support services P.I Code 26126 - Percentage of individual and family support plans that meet the participate goals P.I Code 26606 - Number of schools participating in communities that care youth surveys

CHILD2 - Page 1 of 1



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