DEPARTMENT: Military Departme	ent		FOR OPB USE ONLY					
AGENCY: Military Department			OPB LOG NU	MBER	AGENDA NUMBER			
SCHEDULE NUMBER: 8112			101					
SUBMISSION DATE: 08/28/2018			Approval and Authority:					
AGENCY BA-7 NUMBER: 19-02			Approved by the Joint Legislative					
HEAD OF BUDGET UNIT: Glenn H	I. Curtis		Committe	e on the	Rudget			
TITLE: The Adjutant General								
SIGNATURE (Certifies that the information pro	ovided is correct and true	to the best of	DATE: 10 - 19-	2018	L. 21			
your knowledge								
MEANS OF FINANCING	CURRE	TV	ADJUSTM	ENT	REVISED)		
	FY 2018-2	019	(+) or (-)	FY 2018-20	19		
GENERAL FUND BY:								
DIRECT	\$39	,605,369		\$0	\$39,	605,369		
INTERAGENCY TRANSFERS	\$4	,369,717		\$0	\$4,	369,717		
FEES & SELF-GENERATED	\$5	,886,743		\$0	\$5,	886,743		
STATUTORY DEDICATIONS		\$50,000		\$0	\$50,00			
Camp Minden Fire Protection Fund (P38)		\$50,000	\$0		\$50,0			
[Select Statutory Dedication] Subtotal of Dedications from Page 2		\$0 \$0		\$0 \$0		\$0		
FEDERAL	9.10		•	1,992,761	CE4	\$0		
TOTAL	\$49,982,375 \$99,894,204			1,992,761		975,136		
AUTHORIZED POSITIONS	\$99,894,204 759		\$1,992,761		\$101,886,96 82			
AUTHORIZED OTHER CHARGES		4						
NON-TO FTE POSITIONS		60		0		4		
TOTAL POSITIONS			0		60			
TOTAL POSITIONS		823		61		884		
PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS		
PROGRAM NAME:								
Military Affairs	\$66,883,356	427	\$25,053	1	\$66,908,409	428		
Education	\$32,466,193	391	\$1,967,708	60	\$34,433,901	451		
Auxillary Account	\$544,655	5	\$0	0	\$544,655	5		
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	\$0	0	\$0	0	£ \$0,	103 O		
Subtotal of programs from Page 2:	\$0	0	\$0	0	\$0	0		
TOTAL	\$99,894,204	823	\$1,992,761	61	\$101,886,965	884		

DEPARTMENT: Military Department	FOR OPB U	ISE ONLY
AGENCY: Military Department	OPB LOG NUMBER	AGENDA NUMBER
SCHEDULE NUMBER: 8112		
SUBMISSION DATE: 08/28/2018	ADDENDUM	TO DACE 1
AGENCY BA-7 NUMBER: 19-02	ADDENDOM	10 PAGE I

MEANS OF FINANCING	CURRENT FY 2018-2019	ADJUSTMENT (+) or (-)	REVISED FY 2018-2019
GENERAL FUND BY:			
STATUTORY DEDICATIONS			
[Select Statutory Dedication]	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0
SUBTOTAL (to Page 1)	\$0	\$0	\$0

PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS
PROGRAM NAME:						
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
SUBTOTAL (to Page 1)	\$0	0	\$0	0	\$0	0

Policy and Procedure Memorandum No. 52, Revised, requires that all Requests for Changes in Appropriation be fully documented. At a minimum, the following questions and statements must be answered. Use Continuation Sheets as needed. FAILURE TO ANSWER ALL QUESTIONS COMPLETELY WILL BE CAUSE TO RETURN THIS DOCUMENT WITHOUT ACTION.

1. What is the source of funding (if other than General Fund (Direct))? Specifically identify any grant or public law and the purposes of the funds, if applicable. A copy of any grant application and the notice of approved grant or appropriation must accompany the BA-7. What are the expenditure restrictions of the funds?

Attached is the funding approval from the Assistant Under Secretary of Defense for Reserve Affairs authorizing the Louisiana National Guard to start up a Job Challenge Program at the Gills W. Long Center in Carville, LA. These funds will not be used for any purpose other than those specfied to staff, operate and maintain the program.

2. Enter the financial impact of the requested adjustment for the next four fiscal years.

MEANS OF FINANCING	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
OR EXPENDITURE					
GENERAL FUND BY:					
DIRECT	\$0	\$0	\$0	\$0	\$0
INTERAGENCY TRANSFERS	\$0	\$0	\$0	\$0	\$0
FEES & SELF-GENERATED	-\$0	\$0	\$0	\$0	\$0
STATUTORY DEDICATIONS	\$0	\$0	\$0	\$0	\$0
FEDERAL	\$1,992,761	\$2,812,500	\$2,812,500	\$2,812,500	\$2,812,500
TOTAL	\$1,992,761	\$2,812,500	\$2,812,500	\$2,812,500	\$2,812,500

3. If this action requires additional personnel, provide a detailed explanation below:

A total of 61 new positions will be required to fully staff the Job Challenge Program. Attached to this BA7 are the staffing chart and the cost analysis of the required positions.

4. Explain why this request can't be postponed for consideration in the agency's budget request for next fiscal

\$1.7M Federal FY18 funds were allocated for the start up of this new program for Louisiana. In order to meet the desired timeline to accept students for the inital class in July Additionally, if we are unable to use them for start up costs to get the required actions completed during state FY19 we may lose FY20 funding to another state vying to stand up a job challenge program.

5. Is this an after the fact BA-7, e.g.; have expenditures been made toward the program this BA-7 is for? If yes, explain per PPM No.52.

No expenditures for this new program request have been made at this time.

PERFORMANCE IMPACT OF MID-YEAR BUDGET ADJUSTMENT

 Identify and explain the programmatic impacts (positive or negative) that will result from the approval of this BA-7.

New program for 2019-2019. No performance measures for the Job Challenge Program are established at this time. This BA7 contains the start-up funding to prepare for receiving students in FY20. When the FY20 annual budget is submitted it will contain the performance measures. Results are expected to have a positive impact on employability of the students.

2. Complete the following information for each objective and related performance indicators that will be affected by this request. (Note: Requested adjustments may involve revisions to existing objectives and performance indicators or creation of new objectives and performance indicators. Repeat this portion of the request form as often as necessary.)

긂		PERF	ORMANCE STAN	IDARD
LEVEL	PERFORMANCE INDICATOR NAME	CURRENT	ADJUSTMENT	REVISED
=		FY 2018-2019	(+) OR (-)	FY 2018-2019

3. Briefly explain any performance impacts other than or in addition to effects on objectives and performance indicators. (For example: Are there any anticipated direct or indirect effects on program management or service recipients? Will this BA-7 have a positive or negative impact on some other program or agency?)

JUSTIFICATION FOR ADJUSTMENT(S): Explain the necessity of the adjustment(s).

Once this program is operational it will train 150 cadets per year in vocational program and prepare them for the workforce.

4. If there are no performance impacts associated with this BA-7 request, then fully explain this lack of performance impact.

New program for 2018-2019. Performance indicators will be developed and included with the submission of the FY20 budget request. No students will attend JCP during the start-up phase. Once we have students JCP will then have measurable items to track in FY20.

5. Describe the performance impacts of failure to approve this BA-7. (Be specific. Relate performance impacts to objectives and performance indicators.)

Failure to approve this BA-7 will result in loss of the start-up funds from federal FY18 and cause Louisiana to lose the program to the other states who are vying for a Job Challenge Program.

OBJECTIVE:

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 1 NAME: MILITARY AFFAIRS

MEANS OF FINANCING:	CURRENT	REQUESTED	REVISED	ADJU	STMENT OUTY	EAR PROJECTION	ONS
WEARS OF FINANCING.	FY 2018-2019	ADJUSTMENT	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
GENERAL FUND BY:							
Direct	\$31,740,382	\$0	\$31,740,382	\$0	\$0	\$0	\$0
Interagency Transfers	\$2,932,833	\$0	\$2,932,833	\$0	\$0	\$0	\$0
Fees & Self-Generated	\$5,118,305	\$0	\$5,118,305	\$0	\$0	\$0	\$0
Statutory Dedications *	\$50,000	\$0	\$50,000	\$0	\$0	\$0	\$0
FEDERAL FUNDS	\$27,041,836	\$25,053	\$27,066,889	\$38,317	\$38,317	\$38,317	\$38,317
TOTAL MOF	\$66,883,356	\$25,053	\$66,908,409	\$38,317	\$38,317	\$38,317	\$38,317
EXPENDITURES:		messanosanason nagonason nagagasana					
Salaries	\$18,142,704	\$16,962	\$18,159,666	\$25,943	\$25,943	\$25,943	\$25,943
Other Compensation	\$597,259	\$0	\$597,259	\$0	\$0	\$0	\$0
Related Benefits	\$8,395,845	\$8,091	\$8,403,936	\$12,374	\$12,374	\$12,374	\$12,374
Travel	\$133,010	\$0	\$133,010	\$0	\$0	\$0	\$0
Operating Services	\$14,088,010	\$0	\$14,088,010	\$0	\$0	\$0	\$0
Supplies	\$2,591,806	\$0	\$2,591,806	\$0	\$0	\$0	\$0
Professional Services	\$2,249,309	\$0	\$2,249,309	\$0	\$0	\$0	\$0
Other Charges	\$7,618,468	\$0	\$7,618,468	\$0	\$0	\$0	\$0
Debt Services	\$2,378,080	\$0	\$2,378,080	\$0	\$0	\$0	\$0
Interagency Transfers	\$4,547,604	\$0	\$4,547,604	\$0	\$0	\$0	\$0
Acquisitions	\$1,633,931	\$0	\$1,633,931	\$0	\$0	\$0	\$0
Major Repairs	\$4,507,330	\$0	\$4,507,330	\$0	\$0	\$0	\$0
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$66,883,356	\$25,053	\$66,908,409	\$38,317	\$38,317	\$38,317	\$38,317
		, , ,					
POSITIONS							
Classified	2	0	2	0	0	0	0
Unclassified	397	1	398	1	1	1	1
TOTAL T.O. POSITIONS	399	1	400	1	1	1	1
OTHER CHARGES POSITIONS	1	0	1	0	0	0	0
NON-TO FTE POSITIONS	27	0	27	0	0	0	0
TOTAL POSITIONS	427	1	428	1	1	1	1
Statutory Dedications:							
Camp Minden Fire Protection Fund (P38)	\$50,000	\$0	\$50,000	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication] [Select Statutory Dedication]	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0

BA-7 FORM (6/1/2017) Page 5

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 1 NAME: MILITARY AFFAIRS

MEANS OF FINANCING:	State General Fund	Interagency Transfers	Fees & Self- Generated Revenues	Statutory Dedications	Federal Funds	TOTAL
AMOUNT	\$0	\$0	\$0	\$0	\$25,053	\$25,053
EXPENDITURES:						
Salaries	\$0	\$0	\$0	\$0	\$16,962	\$16,962
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$8,091	\$8,091
Travel	\$0	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0
Other Charges	\$0	\$0	\$0	\$0	\$0	\$0
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$(
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$(
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$(
TOTAL EXPENDITURES	\$0	\$0	\$0	\$0	\$25,053	\$25,053
OVER / (UNDER)	\$0	\$0	\$0	\$0	\$0	\$(
POSITIONS						
Classified	2	0	0	0	0	- 2
Unclassified	397	0	0	0	1	398
TOTAL T.O. POSITIONS	399	0	0	0	1	400
OTHER CHARGES POSITIONS	1	0	0	0	0	
NON-TO FTE POSITIONS	27	0	0	0	0	2
TOTAL POSITIONS	427	0	0	0	1	42

BA-7 FORM (6/1/2017) Page 6

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT PROGRAM 2 NAME: EDUCATION CURRENT REQUESTED REVISED ADJUSTMENT OUTYEAR PROJECTIONS MEANS OF FINANCING: FY 2018-2019 ADJUSTMENT FY 2018-2019 FY 2019-2020 FY 2020-2021 FY 2021-2022 FY 2022-2023 GENERAL FUND BY: Direct \$7,864,987 \$0 \$7,864,987 \$0 \$0 \$0 \$0 Interagency Transfers \$1,436,884 \$0 \$1,436,884 \$0 \$0 \$0 \$0 Fees & Self-Generated \$223,783 \$0 \$223,783 \$0 \$0 \$0 \$0 Statutory Dedications * \$0 \$0 \$0 \$0 \$0 \$0 SO FEDERAL FUNDS \$22,940,539 \$1,967,708 \$24,908,247 \$2,774,183 \$2,774,183 \$2,774,183 \$2,774,183 TOTAL MOF \$32,466,193 \$1,967,708 \$34,433,901 \$2,774,183 \$2,774,183 \$2,774,183 \$2,774,183 **EXPENDITURES:** Salaries \$14,029,891 \$510,764 \$1,449,394 \$14,540,655 \$1,449,394 \$1,449,394 \$1,449,394 Other Compensation \$402,350 \$402,350 \$0 \$0 \$0 \$0 \$0 Related Benefits \$5,901,603 \$245,635 \$6,147,238 \$700,288 \$700,288 \$700,288 \$700,288 Travel \$196,697 \$10,313 \$207,010 \$11,250 \$11,250 \$11,250 \$11,250 Operating Services \$3,447,682 \$722,121 \$4,169,803 \$193,579 \$193,579 \$193,579 \$193,579 Supplies \$3,542,093 \$64,500 \$3,606,593 \$192,000 \$192,000 \$192,000 \$192,000 Professional Services \$311,119 \$37,500 \$348,619 \$19,875 \$19,875 \$19,875 \$19,875 Other Charges \$2,451,499 \$0 \$2,451,499 \$147,797 \$147,797 \$147,797 \$147,797 **Debt Services** \$0 \$0 \$0 \$0 \$0 \$0 \$0 Interagency Transfers \$556,978 \$45,000 \$601,978 \$60,000 \$60,000 \$60,000 \$60,000 Acquisitions \$324,190 \$331,875 \$656,065 \$0 \$0 \$0 \$0 Major Repairs \$1,302,091 \$0 \$1,302,091 \$0 \$0 \$0 \$0 UNALLOTTED \$0 \$0 \$0 \$0 \$0 \$0 \$0 TOTAL EXPENDITURES \$32,466,193 \$1,967,708 \$34,433,901 \$2,774,183 \$2,774,183 \$2,774,183 \$2,774,183 POSITIONS Classified 0 0 0 0 0 0 0 Unclassified 360 60 420 60 60 60 60 TOTAL T.O. POSITIONS 360 60 420 60 60 60 60 OTHER CHARGES POSITIONS 3 0 0 3 0 0 0 NON-TO FTE POSITIONS 28 0 28 0 0 0 0 TOTAL POSITIONS 391 60 451 60 60 60 60 **Statutory Dedications:**

BA-7 FORM (6/1/2017) Page 7

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PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 2 NAME: EDUCATION

MEANS OF FINANCING:	State General Fund	Interagency Transfers	Fees & Self- Generated Revenues	Statutory Dedications	Federal Funds	TOTAL
AMOUNT	\$0	\$0	\$0	\$0	\$1,967,708	\$1,967,708
EXPENDITURES:						
Salaries	\$0	\$0	\$0	\$0	\$510,764	\$510,76
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$
Related Benefits	\$0	\$0	\$0	\$0	\$245,635	\$245,63
Travel	\$0	\$0	\$0	\$0	\$10,313	\$10,31
Operating Services	\$0	\$0	\$0	\$0	\$722,121	\$722,12
Supplies	\$0	\$0	\$0	\$0	\$64,500	\$64,50
Professional Services	\$0	\$0	\$0	\$0	\$37,500	\$37,50
Other Charges	\$0	\$0	\$0	\$0	\$0	\$
Debt Services	\$0	\$0	\$0	\$0	\$0	\$
Interagency Transfers	\$0	\$0	\$0	\$0	\$45,000	\$45,00
Acquisitions	\$0	\$0	\$0	\$0	\$331,875	\$331,87
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$
TOTAL EXPENDITURES	\$0	\$0	\$0	\$0	\$1,967,708	\$1,967,70
OVER / (UNDER)	\$0	\$0	\$0	\$0	\$0	\$
POSITIONS		зиня в риссипродраменное водсо и пованно				000000000000000000000000000000000000000
Classified	0	0	0	0	0	
Unclassified	360	0	0	0		42
TOTAL T.O. POSITIONS	360	0	0	0	60	42
OTHER CHARGES POSIT	3	0	0	0	0	
NON-TO FTE POSITIONS	28	0	0	0	0	2
TOTAL POSITIONS	391	0	0	0	60	45

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 3 NAME: AUXILIARY

MEANS OF FINANCING:	CURRENT	REQUESTED	REVISED	ADJUSTMENT OUTYEAR PROJECTIONS				
	FY 2018-2019	ADJUSTMENT	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023	
GENERAL FUND BY;	-	- 24				- 201		
Direct	\$0	\$0	\$0	\$0	\$0	\$0	\$	
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$0	\$	
Fees & Self-Generated	\$544,655	\$0	\$544,655	\$0	\$0	\$0	\$	
Statutory Dedications *	\$0	\$0	\$0	\$0	\$0	\$0	\$	
EDERAL FUNDS	\$0	\$0	\$0	\$0	\$0	\$0	\$	
TOTAL MOF	\$544,655	\$0	\$544,655	\$0	\$0	\$0	\$	
EXPENDITURES:				200				
Salaries	\$0	\$0	\$0	\$0	\$0	\$0	\$	
Other Compensation	\$70,006	\$0	\$70,006	\$0	\$0	\$0	\$	
Related Benefits	\$13,624	\$0	\$13,624	\$0	\$0	\$0	\$	
Travel	\$2,075	\$0	\$2,075	\$0	\$0	\$0	\$	
Operating Services	\$27,450	\$0	\$27,450	\$0	\$0	\$0	\$	
Supplies	\$431,500	\$0	\$431,500	\$0	\$0	\$0	\$	
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0	\$	
Other Charges	\$0	\$0	\$0	\$0	\$0	\$0	\$	
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0	\$	
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$0	\$	
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$0	\$	
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$0	\$	
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0	\$	
TOTAL EXPENDITURES	\$544,655	\$0	\$544,655	\$0	\$0	\$0	\$	
POSITIONS								
Classified	0	0	0	0	0	0		
Unclassified	0	0	0	0	0	0		
TOTAL T.O. POSITIONS	0	0	0	0	0	0	0.00	
OTHER CHARGES POSITIONS	0	0	0	0	0	0		
ION-TO FTE POSITIONS	5	0	5	0	0	0		
TOTAL POSITIONS	5	0	5	0	0	0		
Statutory Dedications:	-11/2/							
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$	
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$	
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$	
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$	
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$	
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$	
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$	
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	5	

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 3 NAME: AUXILIARY

	State General Fund	Interagency Transfers	Generated Revenues	Statutory Dedications	Federal Funds	TOTAL
AMOUNT	\$0	\$0	\$0	\$0	\$0	\$0
					1	
EXPENDITURES:						980081100090000000000000000000000000000
Salaries	\$0	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0	\$(
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0
Other Charges	\$0	\$0	\$0	\$0	\$0	\$(
Debt Services	\$0	\$0	\$0	\$0	\$0	\$(
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$(
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$(
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$(
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$(
TOTAL EXPENDITURES	\$0	\$0	\$ 0	\$0	\$0	\$(
IOTAL EXPENDITURES	20	20	\$0	Ψυ	φυ	Ψ
oveo /////oeov			# 0	\$0	\$0	\$(
OVER / (UNDER)	\$0	\$0	\$0	\$0	\$0	φı
POSITIONS Classified	0	0	0	0	0 [
Unclassified	0	0	0	0	0	
TOTAL T.O. POSITIONS	0	0	0	0	0	
OTHER CHARGES POSIT	0	0	0	0	0	
NON-TO FTE POSITIONS	5	0	0	0	0	
TOTAL POSITIONS	5	0	0	0	0)

BA-7 QUESTIONNAIRE

(Provide answers on the Questionnaire Analysis Form; answer all questions applicable to the requested budget adjustment.)

GENERAL PURPOSE

1) The purpose of this BA7 is to request Federal budget authority in the amount of \$1,992,761 in order to start up a new Job Challenge Program at the Gillis W. Long Center in Carville, LA. This new program will provide vocational skills training, continued academic preparation and apprenticeship opportunities for 150 at-risk youth per year.

REVENUES - \$1,992,761

(Explain the Means of Financing. Provide details including Source, authority to spend, etc.)

- 1) If STATE GENERAL FUND \$0
- 2) If IAT \$0
- 3) If Self-Generated Revenues \$0
- 4) If Statutory Dedications \$0
- 5) If Interim Emergency Board Appropriations
- 6) If Federal Funds \$1,992,761
- 7) All Grants:

EXPENDITURES - \$1,992,761

- 1) \$ 527,726 Salaries
- 2) \$ 253,726 Related Benefits
- 3) \$ 10,313 Travel
- 4) \$ 722,121 Services
- 5) \$ 64,500 Supplies
- 6) \$ 37,500 Professional Services
- 7) \$ 45,000 Interagency Transfers
- 8) \$331,875 Acquisitions

OTHER

1) POC is SGM James Philyaw, 225-319-4711 or COL Herbert Fritts, 225-319-4757.

DEPARTMENT: Louisiana Dept. of	Health		F	OR OPB US	SE ONLY			
AGENCY: Florida Parishes Human	Services Author	ity	OPB LOG NUM	BER	AGENDA NUME	BER		
SCHEDULE NUMBER: 09-301			1 112		5			
SUBMISSION DATE: 09/24/2018			Approval and Authority:					
AGENCY BA-7 NUMBER: 19-02			Approved by the Joint Legislative					
HEAD OF BUDGET UNIT: Richard	Kramer							
TITLE: Executive Director			Committee on the Budget					
SIGNATURE (Conflets that the information pro-	vided is correct and true to	the best of	DATE: 10-19-18 P. A.					
MEANS OF FINANCING	CURREN		ADJUSTME	23.77	REVISED			
	FY 2018-2	019	(+) or (-)		FY 2018-20	19		
GENERAL FUND BY:		AU-E-16						
DIRECT	\$13	,021,287		\$0	\$13,	021,287		
INTERAGENCY TRANSFERS	\$4	.760,469		\$350,867	\$5,	111,336		
FEES & SELF-GENERATED	\$2	,275,086		\$0	\$2,	275,086		
STATUTORY DEDICATIONS		\$0		\$0		\$0		
[Select Statutory Dedication]		\$0		\$0		\$0		
[Select Statutory Dedication]		\$0		\$0		\$0		
Subtotal of Dedications from Page 2 FEDERAL	-	\$0 \$0		\$0		\$0		
				\$0		\$0		
	\$20,056,842			\$350,867		407,709		
AUTHORIZED POSITIONS		0		0		0		
AUTHORIZED OTHER CHARGES		181 0	0		[8].0			
NON-TO FTE POSITIONS		181		0		181		
TOTAL POSITIONS		181		0		181		
PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS		
PROGRAM NAME:				-				
FPHSA	\$20,056,842	0	\$350,867	0	\$20,407,709	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	so	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	-		
	\$0					0		
		0	\$0	0	\$0	0		
	\$0	0	\$0	0	S0	0		
Subtotal of programs from Page 2	\$0	0	\$0	0	\$0	0		
TOTAL	\$20,056,842	0	\$350,867	0	\$20,407,709	0		

Policy and Procedure Memorandum No. 52, Revised, requires that all Requests for Changes in Appropriation be fully documented. At a minimum, the following questions and statements must be answered. Use Continuation Sheets as needed. FAILURE TO ANSWER ALL QUESTIONS COMPLETELY WILL BE CAUSE TO RETURN THIS DOCUMENT WITHOUT ACTION.

1. What is the source of funding (if other than General Fund (Direct))? Specifically identify any grant or public law and the purposes of the funds, if applicable. A copy of any grant application and the notice of approved grant or appropriation must accompany the BA-7. What are the expenditure restrictions of the funds?

The source of funding is Interagency Transfer to Florida Parishes Human Services Authority from LHD/OBH/AD for: a) Oploid State Targeted Response (STR) Carryforward-CFDA # 93.788- \$150,867 and b) Partnership for Success II (LaPFS)-CFDA # 93.243- \$200,000. This is a companion BA7 to OBH BA7 # 6 and # 5.

2. Enter the financial impact of the requested adjustment for the next four fiscal years.

MEANS OF FINANCING					
OR EXPENDITURE	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
GENERAL FUND BY:					
DIRECT	\$0	\$0	\$0	\$0	\$0
INTERAGENCY TRANSFERS	\$350,867	\$0	\$0	\$0	\$0
FEES & SELF-GENERATED	\$0	\$0	\$0	\$0	\$0
STATUTORY DEDICATIONS	\$0	\$0	\$0	\$0	\$0
FEDERAL	\$0	\$0	\$0	\$0	\$0
TOTAL	\$350,867	\$0	\$0	\$0	\$0

3. If this action requires additional personnel, provide a detailed explanation below:

This request does not require an increase to FPHSA's Non-T.O. position cap.

4. Explain why this request can't be postponed for consideration in the agency's budget request for next fiscal year.

This requested increase in IAT means of financing cannot be postponed for consideration in the agency's budget request for next fiscal year. In order to have sufficient budget authority in FY-19, this BA-7 adjustment is needed to facilitate all IAT funding that the authority is allocated to receive.

5. Is this an after the fact BA-7, e.g.; have expenditures been made toward the program this BA-7 is for? If yes, explain per PPM No.52.

This is not an after the fact request.

PERFORMANCE IMPACT OF MID-YEAR BUDGET ADJUSTMENT

 Identify and explain the programmatic impacts (positive or negative) that will result from the approval of this BA-7.

Approval of this BA-7 will result in the agency having sufficient budget authority for FY-19 to facilitate all IAT funding that the authority is allocated to receive.

2. Complete the following information for each objective and related performance indicators that will be affected by this request. (Note: Requested adjustments may involve revisions to existing objectives and performance indicators or creation of new objectives and performance indicators. Repeat this portion of the request form as often as necessary.)

OB1	EC	ľ	۷	€.

릚	, , , , , , , , , , , , , , , , , , ,	PERFORMANCE STANDARD					
EVEL.	PERFORMANCE INDICATOR NAME		ADJUSTMENT	REVISED			
		FY 2018-2019	(+) OR (-)	FY 2018-2019			
		0		o			
		0		0			
		0		0			

JUSTIFICATION FOR ADJUSTMENT(S): Explain the necessity of the adjustment(s).

3. Briefly explain any performance impacts other than or in addition to effects on objectives and performance indicators. (For example: Are there any anticipated direct or indirect effects on program management or service recipients? Will this BA-7 have a positive or negative impact on some other program or agency?)

The increase in funding will have a positive impact to individuals in the FPHSA catchment area from outreach efforts related to the State Targeted Response (STR) carryforward of grant funding for the Opioid Epidemic and Partnership for Succuess II Grant for substance use prevention efforts/outreaches,

 If there are no performance impacts associated with this BA-7 request, then fully explain this lack of performance impact.

The performance imapets associated with this request are stated.

5. Describe the performance impacts of failure to approve this BA-7. (Be specific Relate performance impacts to objectives and performance indicators.)

Fallure to approve this BA-7 will result in the agency having insufficient budget authority to receive the reallocated IAT means of finance provided to the agency.

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT PROGRAM 1 NAME: Florida Parishes Human Services Authority CURRENT REQUESTED REVISED ADJUSTMENT OUTYEAR PROJECTIONS MEANS OF FINANCING: FY 2018-2019 ADJUSTMENT FY 2018-2019 FY 2019-2020 FY 2020-2021 FY 2021-2022 FY 2022-2023 GENERAL FUND BY: Direct 50 \$13,021,287 \$13,021,287 S0 \$0 SÕ SO Interagency Transfers \$4,760,469 \$350,867 \$5,111,336 SÜ \$0 SÜ SO Fees & Self-Generated \$2,275,086 \$0 \$2,275,086 SŰ SO. SO \$0 Statutory Dedications * S0 **\$0** \$0 \$0 \$0 \$0 SO FEDERAL FUNDS **S**0 50 50 \$0 50 S0 \$0 TOTAL MOF \$350,867 \$20,056,842 \$20,407,709 ŠO 50 \$0 **S**0 **EXPENDITURES:** Salaries SO \$0 SÜ S0 50 50 **SO** Other Compensation \$0 SO SO SO SO. \$0 \$0 Related Benefits 50 SO SQ. SO \$0 SO SO Travel S18.260 SO **\$**0 \$0 \$18,260 \$0 \$0. **Operating Services** \$689,059 SQ. \$689,059 S0 \$0 **S**0 **S**O Supplies \$87,995 SO \$87,995 SO \$0 **S**0 \$0 Professional Services 50 \$0 \$0 **\$0** \$0 **SO** SO Other Charges \$18,735,093 \$350.867 \$19,085,960 S0 \$0 SO \$0 **Debt Services** \$0 **\$**0 \$0 SO **S**0 **\$**0 \$0 Interagency Transfers \$505,637 \$0 \$0 \$0 \$505,637 \$0 \$0 Acquisitions \$20,798 **\$**0 \$20,798 \$0 \$0 **\$0** \$0 Major Repairs 50 50 \$0 SO SO \$0 \$0 UNALLOTTED \$0 \$0 \$0 80 \$0 SO SO TOTAL EXPENDITURES \$20,056,842 \$350.867 \$20,407,709 50 SO \$0 SO POSITIONS Classified 0 0 0 0 0 0 0 Unclassified Ó 0 0 0 0 0 0 TOTAL T.O. POSITIONS 0 0 0 0 0 0 0 OTHER CHARGES POSITIONS 0 0 0 0 0 0 0 NON-TO FTE POSITIONS 0 0 0 0 0 0 0 TOTAL POSITIONS 0 0 0 0 0 0 0 Statutory Dadications: Select Statulory Dedication \$0 \$0 50 \$0 Š0 SO SO |Select Statutory Dedication| \$0 \$0 **\$**0 SO \$0 \$0 \$0 [Select Statutory Dedication] \$0 \$0 50 \$0 \$0 S0 \$0 \$0 \$0 [Select Statutory Dedication] 50 \$0 \$0 \$0 \$0 [Select Statutory Dedication] \$0 \$0 \$0 \$0 **\$0** SO \$0 [Select Statutory Dedication] **S**0 \$0 50 \$0 \$Ö **S**0 SO [Select Statutory Dedication] \$0 \$0 **SO** \$0 <u>50</u> SO SO

\$0

50

S0

\$0

\$0

(Select Statutory Dedication)

\$0

\$0

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

Florida Parishes Human Services Authority

MEANS OF FINANCING:	State General Fund	Interagency Transfers	Fees & Self- Generated Revenues	Statutory Dedications	Federal Funds	TOTAL
AMOUNT	S0	\$350,867	\$0	S0	\$0	\$350,867
EXPENDITURES:		and the state of t			· · · · · · · · · · · · · · · · · · ·	
Salaries	\$0	\$0	\$0	\$0	\$0	S
Other Compensation	\$0	\$0	\$0	\$0	\$0	Si
Related Benefits	\$0	\$0	\$0	\$0	\$0	ş
Travel	\$0	\$0	\$0	\$0	\$0	S
Operating Services	\$0	\$0	\$0	\$0	\$0	S
Supplies	\$0	\$0	\$0	\$0	\$0	S
Professional Services	\$0	\$0	\$0	\$0	\$0	S
Other Charges	\$0	\$350,867	\$0	\$0	\$0	\$350,86
Debt Services	\$0	\$0	\$0	\$0	\$0	
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$
Acquisitions	\$0	\$0	\$0	\$0	\$0	S
Major Repairs	. \$0	\$0	\$0	\$0	\$0	\$
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	Ş
TOTAL EXPENDITURES	so	\$350,867	so	\$0	so so	\$350,86
OVER / (UNDER)	so	\$0	so	\$0	so	S
	1					
POSITIONS						
Classified	0	0	0	0	0	
Unclassified	0	0	. 0	0	0	
TOTAL T.O. POSITIONS	0	O	0	0	0	
OTHER CHARGES POSITIONS	O	0	0	0	0	
NON-TO FTE POSITIONS	0	0	0	0	o	
TOTAL POSITIONS	0	0	0	0	0	

DEPARTMENT: LA DEPARTMEN	FOR OPB USE ONLY						
AGENCY: CAPITAL AREA HUMA	N SERVICES DIS	STICT	OPB LOG NUMBER AGENDA NUMBER				
SCHEDULE NUMBER: 09-302			1 113		6		
SUBMISSION DATE: 09/20/2018	100		Approval and Authority:				
AGENCY BA-7 NUMBER: 302-19							
HEAD OF BUDGET UNIT: JAN K	Approve	ed by th	e Joint Legis	lative			
TITLE: EXECUTIVE DIRECTOR	Con	nmittee	on the Budg	et			
SIGNATURE (Certifies that the information p	1		18 8.0				
MEANS OF FINANCING	CURRE FY 2018-		ADJUSTM (+) or (-		REVISE FY 2018-20	REVISED	
GENERAL FUND BY:							
DIRECT	\$11	6,799,920		\$0	\$16	,799,920	
INTERAGENCY TRANSFERS		6,472,675		\$465.727		,938,402	
FEES & SELF-GENERATED		3,553,108		\$0		,553,108	
STATUTORY DEDICATIONS		\$0		\$0		\$0	
[Select Statutory Dedication]	\$0		\$0				
[Select Statutory Dedication]	\$0		\$0		\$		
Subtotal of Dedications from Page 2	\$0			\$0	\$0		
FEDERAL	W	\$0	\$0			\$0	
TOTAL	\$26,825,703			\$465,727		291,430	
AUTHORIZED POSITIONS		0		0		0	
AUTHORIZED OTHER CHARGES		220	0		2		
NON-TO FTE POSITIONS		0	0				
TOTAL POSITIONS		220	IN CONTRACTOR	0		220	
PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS	
PROGRAM NAME:					DOLLARO	F03	
CAPITAL AREA HUMAN SERVICE	\$26,825,703	0	\$465,727	0	\$27,291,430	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0		
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0		0	
	\$0	0	-		\$0	0	
Subtotal of programs from Page 2:	\$0	0	\$0	0	\$0	0	
TOTAL			\$0	0	\$0	0	
TOTAL	\$26,825,703	0	\$465,727	0	\$27,291,430	0	

DEPARTMENT: LA DEPARTMEN	T OF HEALTH		FOR OPB USE ONLY					
AGENCY: CAPITAL AREA HUMA	AGENCY: CAPITAL AREA HUMAN SERVICES DISTICT			OPB LOG NUMBER AGENDA NUMBER				
SCHEDULE NUMBER: 09-302								
SUBMISSION DATE: 09/20/2018			Approval and Authorit	/:				
AGENCY BA-7 NUMBER: 302-19-	1							
HEAD OF BUDGET UNIT: JAN KA	HEAD OF BUDGET UNIT: JAN KASOFSKY, PhD.							
TITLE: EXECUTIVE DIRECTOR	·····	1.						
SIGNATURE (Certifies that the information payour knowledge):	·	=						
MEANS OF FINANCING	CURRE	NT .	ADJUSTM	ENT	REVISED			
	FY 2018-2	019	(+) or (-)	FY 2018-20	19		
GENERAL FUND BY:			College Carte Survey and Act					
DIRECT	\$16	5,799,920		\$0	\$16,	799,920		
INTERAGENCY TRANSFERS	\$6	6,472,675		\$465,727	\$6,	938,402		
FEES & SELF-GENERATED	\$3	3,553,108		\$0	\$3,	553,108		
STATUTORY DEDICATIONS	\$0		\$0			\$0		
[Select Statutory Dedication]			\$0					
[Select Statutory Dedication] Subtotal of Dedications from Page 2	\$0. \$0		\$0 		\$0 \$0			
FEDERAL	\$0			\$0		\$0		
TOTAL	\$26,825,703		\$465,727		\$27.	291,430		
AUTHORIZED POSITIONS	0		0		¥,	0		
AUTHORIZED OTHER CHARGES		220	0		22			
NON-TO FTE POSITIONS		0	0					
TOTAL POSITIONS	-	220		0		220		
PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS		
PROGRAM NAME:								
CAPITAL AREA HUMAN SERVICE	\$26,825,703	0	\$465,727	0	\$27,291,430	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
Subtotal of programs from Page 2:	\$0	0	\$0	0	\$0	0		
TOTAL	\$26,825,703	0	\$465,72 7	0	\$27,291,430	0		

DEPARTMENT: LA DEPARTMENT OF HEALTH	FOR OPB USE ONLY
AGENCY: CAPITAL AREA HUMAN SERVICES DISTICT	OPB LOG NUMBER AGENDA NUMBER
SCHEDULE NUMBER: 09-302	
SUBMISSION DATE: 09/20/2018	
AGENCY BA-7 NUMBER: 302-19-1	ADDENDUM TO PAGE 1

MEANS OF FINANCING	CURRENT FY 2018-2019	ADJUSTMENT (+) or (-)	REVISED FY 2018-2019
GENERAL FUND BY:			
STATUTORY DEDICATIONS			
[Select Statutory Dedication]	\$0	\$0	
[Select Statutory Dedication]	\$0	\$0	
[Select Statutory Dedication]	\$0	\$0	
[Select Statutory Dedication]	\$0	\$0	
[Select Statutory Dedication]	\$0	\$0	
[Select Statutory Dedication]	\$0	\$0	
SUBTOTAL (to Page 1)	\$0	\$0	

Use this section for additional Pr	rogram Names, if needed.
The subtotal will automatically b	e transferred to Page 1.

PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS
PROGRAM NAME:		a Shiring Sala				
	\$0	0	\$0	. 0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
·	\$0	0	\$0	0	\$0	0
	, \$0	0	\$0	0	\$0	. 0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
SUBTOTAL (to Page 1)	\$0	0	\$0	0	\$0	0

Policy and Procedure Memorandum No. 52, Revised, requires that all Requests for Changes in Appropriation be fully documented. At a minimum, the following questions and statements must be answered. Use Continuation Sheets as needed. FAILURE TO ANSWER ALL QUESTIONS COMPLETELY WILL BE CAUSE TO RETURN THIS DOCUMENT WITHOUT ACTION.

- 1. What is the source of funding (if other than General Fund (Direct))? Specifically identify any grant or public law and the purposes of the funds, if applicable. A copy of any grant application and the notice of approved grant or appropriation must accompany the BA-7. What are the expenditure restrictions of the funds? IAT Funding will come from the Office of Behavioral Health for:
- 1. Promoting Integration of Primary and Behavioral Health Care (PIPBHC) grant = \$280,774
- 2. Louisiana Opioid State Targeted Response (STR) grant, unobligated balance = \$84,953
- 3. Partnership for Success II Grant = \$100,000
- 2. Enter the financial impact of the requested adjustment for the next four fiscal years.

MEANS OF FINANCING	FY 2018-2019	EV 2010 2020	EV 2020 2024	EV 0004 0000	FV 0000 0000
OR EXPENDITURE	F1 2016-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
GENERAL FUND BY:					
DIRECT	\$0	\$0	\$0	\$0	\$0
INTERAGENCY TRANSFERS	\$465,727	\$0	\$0	\$0	\$0
FEES & SELF-GENERATED	\$0	\$0	\$0	\$0	\$0
STATUTORY DEDICATIONS	\$0	\$0	\$0	\$0	\$0
FEDERAL	\$0	\$0	\$0	\$0	\$0
TOTAL	\$465,727	\$0	\$0	\$0	\$0

3. If this action requires additional personnel, provide a detailed explanation below:

This BA-7 does not require additional personnel.

4. Explain why this request can't be postponed for consideration in the agency's budget request for next fiscal year.

This is a companion BA-7 to the Office of Behavioral Health. Postponing this request will potentially jeopardize the grant awards.

5. Is this an after the fact BA-7, e.g.; have expenditures been made toward the program this BA-7 is for? If yes, explain per PPM No.52.

This is not an after the fact BA-7.

PERFORMANCE IMPACT OF MID-YEAR BUDGET ADJUSTMENT

1. Identify and explain the programmatic impacts (positive or negative) that will result from the approval of this BA-7.

Approval of this BA-7 will result in the district having sufficient budget authority for FY2019 to facilitate all IAT funding that the authority is allocated to receive.

2. Complete the following information for each objective and related performance indicators that will be affected by this request. (Note: Requested adjustments may involve revisions to existing objectives and performance indicators or creation of new objectives and performance indicators. Repeat this portion of the request form as often as necessary.)

긢		PERF	ORMANCE STAN	IDARD
LEVEL	PERFORMANCE INDICATOR NAME	CURRENT FY 2018-2019	ADJUSTMENT (+) OR (-)	REVISED FY 2018-2019

JUSTIFICATION FOR ADJUSTMENT(S): Explain the necessity of the adjustment(s).

There are no changes to the current Performance Indicators related to this BA-7.

3. Briefly explain any performance impacts other than or in addition to effects on objectives and performance indicators. (For example: Are there any anticipated direct or indirect effects on program management or service recipients? Will this BA-7 have a positive or negative impact on some other program or agency?)

The increase in funding will have a positive impact to individuals in the NDHSA catchment area from outreach efforts related to the State Targeted Response (STR) carryforward of grant funding for the Opioid Epidemic. Partnership for Success II (PFS II) Grant for substance use prevention efforts/outreaches, and Promoting Integration of Primary and Behavioral Health Care (PIPBHC) grant funding for the overall wellness and status of adults with co-occurring mental illness and physical health conditions or chronic diseases, and individuals with a substance use disorder.

4. If there are no performance impacts associated with this BA-7 request, then fully explain this lack of performance impact.

This BA-7 will aid in meeting existing Performance Indicators.

5. Describe the performance impacts of failure to approve this BA-7. (Be specific. Relate performance impacts to objectives and performance indicators.)

Failure to approve this request will prevent CAHSD from carrying out their missions and goals related to this request.

OBJECTIVE:

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 1 NAME: <u>CAPITAL AREA HUMAN SERVICES DISTRICT</u>

MEANS OF FINANCING: GENERAL FUND BY: Direct Interagency Transfers Fees & Self-Generated Statutory Dedications * FEDERAL FUNDS TOTAL MOF	\$16,799,920 \$6,472,675 \$3,553,108 \$0 \$0 \$26,825,703	\$0 \$465,727 \$0 \$0 \$0 \$0 \$0 \$0	\$16,799,920 \$6,938,402 \$3,553,108 \$0	\$0 \$0 \$0 \$0	\$0 \$0 \$0	\$0 \$0	FY 2022-2023 \$0 \$0
Direct Interagency Transfers Fees & Self-Generated Statutory Dedications * FEDERAL FUNDS TOTAL MOF	\$6,472,675 \$3,553,108 \$0 \$0 \$26,825,703	\$465,727 \$0 \$0 \$0	\$6,938,402 \$3,553,108 \$0	\$0 \$0	\$0	\$0	
Interagency Transfers Fees & Self-Generated Statutory Dedications * FEDERAL FUNDS TOTAL MOF	\$6,472,675 \$3,553,108 \$0 \$0 \$26,825,703	\$465,727 \$0 \$0 \$0	\$6,938,402 \$3,553,108 \$0	\$0 \$0	\$0	\$0	
Fees & Self-Generated Statutory Dedications * FEDERAL FUNDS TOTAL MOF	\$3,553,108 \$0 \$0 \$26,825,703	\$0 \$0 \$0	\$3,553,108 \$0	\$0			
Statutory Dedications * FEDERAL FUNDS TOTAL MOF	\$0 \$0 \$26,825,703	\$0 \$0	\$0		\$0		ΨΨ
FEDERAL FUNDS TOTAL MOF	\$0 \$26,825,703	\$0		\$0		\$0	\$0
TOTAL MOF	\$26,825,703		\$0	ΨΨ	\$0	\$0	\$0
		\$465,727		\$0	\$0	\$0	\$0
<u> 1860 yang berketak di Kabupatèn Balang Palangka di Pangka di Pangka Balang Pangka Balang Pangka Balang Pangka</u>		The second secon	\$27,291,430	\$0	\$0	\$0	\$0
					•		
EXPENDITURES:							
Salaries	\$0 I	\$0	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Travel	√ \$44,248	\$0	\$44,248	\$0	\$0	\$0	\$0
Operating Services	\$436,050	\$0	\$436,050	\$0	\$0	\$0	\$0
Supplies	\$347,276	\$0	\$347,276	\$0	\$0	\$0	\$0
Professional Services	/ \$42,000	\$0	\$42,000	\$0	\$0	\$0	\$0
Other Charges	V\$24,360,838	\$465,727	\$24,826,565	\$0	\$0	\$0	\$0
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	/\$1,595,291	\$0	\$1,595,291	\$0	\$0	\$0	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	φ0 \$0	\$0	\$0
UNALLOTTED	\$0	\$0	\$0	\$0 \$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$26,825,703	\$465,727	\$27,291,430	φο \$0	\$0	\$0	\$0
7-74, 3300 13 800 13 800 3					ΨΟ		- JU
POSITIONS	en de la finalista de la como				Sjock of the state		
Classified	0	0	0	o T	0	οΓ	0
Unclassified	0	0	0	0	0	0	
TOTAL T.O. POSITIONS	0	0	0	0	0		0
OTHER CHARGES POSITIONS	220	0	220	0	0	0	0
ION-TO FTE POSITIONS	0	. 0	0	0	0	0	0
TOTAL POSITIONS	220	0	220	0			
			Marka da alca a sa a sa a sa a sa a sa a sa a s	U Carlos Avadorios	0	0	0
<u>ranio il XIII del Company della company del</u>	estate. The control of the second	rekursin bir in salah di karanga	till som til sking i store sking som til sking sking sking som til sking sking sking sking sking sking sking s Sking sking sk	s vojskost previšti	15 17 46 27 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Statuton/ Dadications				Washinga (W.C.) (1997)			
Statutory Dedications: [Select Statutory Dedication]	\$0 T	\$0 l	\$0	\$0	\$0	e n	\$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0 \$0	\$0 \$0	\$0 \$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 1 NAME:

CAPITAL AREA HUMAN SERVICES DISTRICT

MEANS OF FINANCING:	State General Fund	Interagency Transfers	Fees & Self- Generated Revenues	Statutory Dedications	Federal Funds	TOTAL
AMOUNT	\$0	\$465,727	\$0	\$0	\$0	\$465,72
EXPENDITURES:						
Salaries	\$0	\$0	\$0	\$0	\$0	\$
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$1
Travel	\$0	\$0	\$0	\$0	\$0	\$(
Operating Services	\$0	\$0	\$0	\$0	\$0	\$
Supplies	\$0	\$0	\$0	\$0	\$0	\$
Professional Services	\$0	\$0	\$0	\$0	\$0	\$
Other Charges	\$0	\$465,727	\$0	\$ 0	\$0	\$465,72
Debt Services	\$0	\$0	\$0	\$ 0	\$0	\$
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$
TOTAL EXPENDITURES	\$0	\$465,727	\$0	\$0	\$0	\$465,72
terror and the comment of the commen	in the Arest of Art Comment		PART OF STATE OF STAT			¥ 100,1 =
OVER / (UNDER)	\$0	\$0	\$0	\$0	\$0	\$(
		ar daet af Wit my her at				
POSITIONS		e bud Graduski.				
Classified	0	0	0	0	o	(
Unclassified	0	0	0	0	0	(
TOTAL T.O. POSITIONS	0	0	0	0	0	· · · · · · · · · · · · · · · · · · ·
OTHER CHARGES POSITIONS	220	0	0	0	0	22
NON-TO FTE POSITIONS	0	0	0	0	0	
TOTAL POSITIONS	220	0	0	0	0	220

DEPARTMENT: Health		FOR OPB USE ONLY				
AGENCY: South Central LA Huma	OPB LOG NUMBER AGENDA NUMB					
SCHEDULE NUMBER: 09-309	1 114		48			
SUBMISSION DATE: 09/24/2018	Approval and Authority:					
AGENCY BA-7 NUMBER: 19-03						
HEAD OF BUDGET UNIT: Lisa Sc	hillina				he Joint Legi	
TITLE: Executive Director	9		Co	mmittee	on the Budg	get
SIGNATURE (Certifies that the information pr your knowledge):	DATE:_/c	19-2	1018 2.	N.		
MEANS OF FINANCING CURRENT FY 2018-2019			ADJUSTME (+) or (-)		REVISED FY 2018-20	
GENERAL FUND BY:						
DIRECT	\$15	,533,780		\$0	\$15,	533,780
INTERAGENCY TRANSFERS	\$4	,359,554		\$75,988	\$4,	435,542
FEES & SELF-GENERATED	\$2	,841,180		\$0	\$2,	841,180
STATUTORY DEDICATIONS		\$0		\$0		\$0
[Select Statutory Dedication]		\$0	\$0			
[Select Statutory Dedication]		\$0		\$0	\$	
Subtotal of Dedications from Page 2		\$0		\$0		\$0
FEDERAL		\$0		\$0		\$0
TOTAL	\$22	,734,514	\$75,988		\$22,	810,502
AUTHORIZED POSITIONS		0		0		0
AUTHORIZED OTHER CHARGES		145	0			145
NON-TO FTE POSITIONS		0	0			0
TOTAL POSITIONS		145	0		145	
PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS
PROGRAM NAME:						
Executive Administration	\$22,734,514	145	\$75,988	0	\$22,810,502	145
CDBG	\$0	0	\$0	0	\$0	0
Auxiliary Account	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	
	\$0	0	\$0			0
Subtotal of programs from Page 2:	\$0	0		0	\$0	0
			\$0	0	\$0	0
TOTAL	\$22,734,514	145	\$75,988	0	\$22,810,502	145

DEPARTMENT: Health	FOR OPB USE ONLY
AGENCY: South Central LA Human Services Authority	OPB LOG NUMBER AGENDA NUMBER
SCHEDULE NUMBER: 09-309	
SUBMISSION DATE: 09/24/2018	
AGENCY BA-7 NUMBER: 19-03	ADDENDUM TO PAGE 1

MEANS OF FINANCING	CURRENT FY 2018-2019	ADJUSTMENT (+) or (-)	REVISED FY 2018-2019
GENERAL FUND BY:			
STATUTORY DEDICATIONS			
[Select Statutory Dedication]	\$0	\$0	\$
[Select Statutory Dedication]	\$0	\$0	\$
[Select Statutory Dedication]	\$0	\$0	\$
[Select Statutory Dedication]	\$0	\$0	\$
[Select Statutory Dedication]	\$0	\$0	\$
[Select Statutory Dedication]	\$0	\$0	\$
SUBTOTAL (to Page 1)	\$0	\$0	\$(

Use this section for additional Program Names, if needed.
The subtotal will automatically be transferred to Page 1.

PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS
PROGRAM NAME:		10000			i kumunda maran da mada Maran da maran da ma	
	\$0	0	\$0	0	\$0	0
	\$0	. 0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
SUBTOTAL (to Page 1)	\$0	0	\$0	0	\$0	0

Policy and Procedure Memorandum No. 52, Revised, requires that all Requests for Changes in Appropriation be fully documented. At a minimum, the following questions and statements must be answered. Use Continuation Sheets as needed. FAILURE TO ANSWER ALL QUESTIONS COMPLETELY WILL BE CAUSE TO RETURN THIS DOCUMENT WITHOUT ACTION.

1. What is the source of funding (if other than General Fund (Direct))? Specifically identify any grant or public law and the purposes of the funds, if applicable. A copy of any grant application and the notice of approved grant or appropriation must accompany the BA-7. What are the expenditure restrictions of the funds? IAT - Funding will come from the Office of Behavioral Health for the Louisiana Opioid State Targeted Response (STR) grant, unobligated balance = \$75,988

2. Enter the financial impact of the requested adjustment for the next four fiscal years.

TOTAL	\$75,988	\$0	\$0	\$0	\$0
FEDERAL	\$0	\$0	\$0	\$0	. \$0
STATUTORY DEDICATIONS	\$0	\$0	\$0	\$0	\$0
FEES & SELF-GENERATED	\$0	\$0	\$0	\$0	\$0
INTERAGENCY TRANSFERS	\$75,988	\$0	\$0	\$0	\$0
DIRECT	\$0	\$0	\$0	\$0	\$0
GENERAL FUND BY:					
OR EXPENDITURE	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
MEANS OF FINANCING	EV 2019 2010	FV 2040 2000	F) (0000 0004	5) (000 (500)	

3. If this action requires additional personnel, provide a detailed explanation below:

This BA-7 does not require additional personnel.

4. Explain why this request can't be postponed for consideration in the agency's budget request for next fiscal year.

Postponing this request will potentially jeopardize the grant awards. This BA-7 is needed to facilitate all IAT funding SCLHSA will receive from OBH

5. Is this an after the fact BA-7, e.g.; have expenditures been made toward the program this BA-7 is for? If yes, explain per PPM No.52.

This is not an after the fact BA-7.

PERFORMANCE IMPACT OF MID-YEAR BUDGET ADJUSTMENT

1. Identify and explain the programmatic impacts (positive or negative) that will result from the approval of this BA-7.

The approval of the BA7 will allow SCLHSA to collect the Grant Funds from the Office of Behavioral Health for the expenses incurred in providing the services as outlined in the Grant.

2. Complete the following information for each objective and related performance indicators that will be affected by this request. (Note: Requested adjustments may involve revisions to existing objectives and performance indicators or creation of new objectives and performance indicators. Repeat this portion of the request form as often as necessary.)

ᆏ		PERF	ORMANCE STAN	NDARD
LEVEL	PERFORMANCE INDICATOR NAME	CURRENT	ADJUSTMENT	REVISED
_		FY 2018-2019	(+) OR (-)	FY 2018-2019

JUSTIFICATION FOR ADJUSTMENT(S): Explain the necessity of the adjustment(s).

There are no changes to the current Performance Indicators related to this BA-7.

3. Briefly explain any performance impacts other than or in addition to effects on objectives and performance indicators. (For example: Are there any anticipated direct or indirect effects on program management or service recipients? Will this BA-7 have a positive or negative impact on some other program or agency?)

The increase in funding will have a positive impact to individuals in the SCLHSA catchment area from outreach efforts related to the State Targeted Response (STR) carryforward of grant funding for the Opioid Epidemic and the State Opioid Response grant.

4. If there are no performance impacts associated with this BA-7 request, then fully explain this lack of performance impact.

This BA-7 will aid in meeting existing Performance Indicators.

OBJECTIVE: N/A

5. Describe the performance impacts of failure to approve this BA-7. (Be specific. Relate performance impacts to objectives and performance indicators.)

'SCLHSA will not be able to collect the Grant funds from Office of Behavioral Health for the expenses incurred for providing services as outlined in Grants.

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 1 NAME: South Central LA Human Services Authority

		dani da Kamarana	AND THE SERVICE OF THE SERVICE AND	tilaa 1000 mm menani e			
MEANS OF FINANCING:	CURRENT FY 2018-2019	REQUESTED ADJUSTMENT	REVISED FY 2018-2019	ADJI FY 2019-2020	USTMENT OUT? FY 2020-2021	EAR PROJECT FY 2021-2022	ONS FY 2022-2023
GENERAL FUND BY:							
Direct	\$15,533,780	\$0	\$15,533,780	\$0	\$0	\$0	\$0
Interagency Transfers	\$4,359,554	\$75,988	\$4,435,542	\$0	\$0	\$0	\$0
Fees & Self-Generated	\$2,841,180	\$0	\$2,841,180	\$0	\$0	\$0	\$0
Statutory Dedications *	\$0	\$0	\$0	\$0	\$0	\$0	\$0
FEDERAL FUNDS	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL MOF	\$22,734,514	\$75,988	\$22,810,502	\$0	\$0	\$0	\$0
			s president som en				ΨΟ
EXPENDITURES:							
Salaries	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Travel	\$62,793	\$0	\$62,793	\$0	\$Q	\$0	\$0
Operating Services	\$1,212,368	\$0	\$1,212,368	\$0	\$0	\$0	\$0
Supplies	\$1,067,904	\$0	\$1,067,904	\$0	\$0	\$0	\$0 \$0
Professional Services	\$0	\$0	\$0	\$0	\$0 \$0	\$0	\$0
Other Charges	\$19,852,16 4	\$75,988	\$19,928,152	\$0	\$0	\$0	
Debt Services	\$0	\$0	\$19,320,132	\$0			\$0
Interagency Transfers	\$539,285	\$0	\$539,285	\$0	\$0	\$0	\$0
Acquisitions	\$0	\$0	\$559,269 \$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0 \$0		\$0	\$0	\$0
UNALLOTTED	\$0	\$0		\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$22,734,514	\$75,988	\$0	\$0	\$0	\$0	\$0
TO TAL LAI ENDITORES	φ22,734,914		\$22,810,502	\$0	\$0	\$0	\$0
POSITIONS		Construction of the second			≰iliseria variotise Balendella attenda	na. Kaominina di James de James	
Classified	۸۱				1		
Unclassified	0	0	0	0	0	0	0
TOTAL T.O. POSITIONS	0	0	0	0	0	0	0
	0	0	0	0	0	0	0
OTHER CHARGES POSITIONS	0	0	0	0	0	0	0
NON-TO FTE POSITIONS	0]	0	0	0	0	0	0
TOTAL POSITIONS	0	0	0	0	0	0	0
				and the second of the second of		<u> Mad et 24 %, 15</u>	
Statutory Dedications:		ATS CONTROL TO A STATE OF THE S		tu al Tara viva			
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication] [Select Statutory Dedication]	\$0 \$0	\$0 \$0	\$0 60	\$0 \$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0 \$0	\$0	\$0 \$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication] [Select Statutory Dedication]	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 1 NAME:

South Central LA Human Services Authority

MEANS OF FINANCING:	State General Fund	Interagency Transfers	Fees & Self- Generated Revenues	Statutory Dedications	Federal Funds	TOTAL
AMOUNT	\$0	\$75,988	\$0	\$0	\$0	\$75,98
	(2) (2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4					
EXPENDITURES:			artikalari operationista. Pransistant			
Salaries	\$0	\$0	\$0	\$0	\$0	\$(
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$(
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$
Travel	\$0	\$0	\$0	\$0	\$0	\$1
Operating Services	\$0	\$0	\$0	\$0	\$0	\$
Supplies	\$0	\$0	\$0	\$0	\$0	\$
Professional Services	\$0	\$0	\$0	\$0	\$0	\$
Other Charges	\$0	\$75,988	\$0	\$0	\$0	\$75,98
Debt Services	\$0	\$0	\$0	\$0	\$0	\$
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$
TOTAL EXPENDITURES	\$0	\$75,988	\$0	\$0	\$0	\$75,98
	The part of the second	est entrage at a constitution of the constitut				
OVER / (UNDER)	\$0	\$0	\$0	\$0	\$0	\$(
				Shiku salata	The state of the s	
POSITIONS		e die altresta das altrestes.				
Classified	0	0	0	0	0	
Unclassified	0	0	0	0	0	
TOTAL T.O. POSITIONS	0	0	0	0	0	
OTHER CHARGES POSITIONS	145	0	0	0	0	14
NON-TO FTE POSITIONS	0	0	0	0	0	
TOTAL POSITIONS	145	0	0	0	0	14!

DEPARTMENT: LOUISIANA DEPA	RTMENT OF HEA	ALTH	FOR OPB USE ONLY				
AGENCY: 310 NE DELTA HUMAN	SRVS AUTHORIT	ΓY	OPB LOG NUMBER AGENDA NUMB				
SCHEDULE NUMBER:			115				
SUBMISSION DATE: 9/20/18	Approval and Authority:						
AGENCY BA-7 NUMBER: #2 Incre							
	on to OBH)				on Markety I have		
HEAD OF BUDGET UNIT: ANGEL	W. WILLIAMS				e Joint Legis		
TITLE: CHIEF FISCAL AND OPER	ATIONS OFFICER	2	Com	mittee	on the Budg	et	
SIGNATURE (Certifies that the information pro your knowledge):	DATE: /o-	19-20	18 d. a	/.			
MEANS OF FINANCING	CURREI FY 2018-2	TV	ADJUSTM (+) or (-	10.00	REVISED FY 2018-20		
GENERAL FUND BY:							
DIRECT	× \$10	0,491,877		\$0	¢10	491,877	
INTERAGENCY TRANSFERS		3,179,072		\$543,907			
FEES & SELF-GENERATED		\$773,844				722,979 773,844	
STATUTORY DEDICATIONS	\$773,044		\$0				
[Select Statutory Dedication]	\$0		\$0				
[Select Statutory Dedication]	\$0 \$0		\$0 \$0				
Subtotal of Dedications from Page 2	\$0			\$0		\$0	
FEDERAL	\$0			\$0		\$0	
TOTAL	\$14,444,793			\$543,907	\$14.9	988,700	
AUTHORIZED POSITIONS	0			0		0	
AUTHORIZED OTHER CHARGES		101	0			101	
NON-TO FTE POSITIONS		0	0				
TOTAL POSITIONS		101	0		10		
TO TALL CONTONO		101					
PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS	
PROGRAM NAME:							
NE DELTA HUMAN SRVS AUTHOR	\$14,444,793	J 101	\$543,907	0 [\$14,988,700	101	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0				
				0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
Subtotal of programs from Page 2:	\$0	0	\$0	0	\$0	0	
TOTAL	\$14,444,793	101	\$543,907	0	\$14,988,700	101	

DEPARTMENT: LOUISIANA DEPARTMENT OF HEALTH	FOR ORBUSE ONLY
AGENCY: 310 NE DELTA HUMAN SRVS AUTHORITY	OPB LOG NUMBER AGENDA NUMBER
SCHEDULE NUMBER:	
SUBMISSION DATE: 9/20/18	
AGENCY BA-7 NUMBER: #2 Increase IAT	ADDENDUM TO PAGE 1

Use this section for additional Statu	tory Dedications, if needed	l.						
The subtotal will automatically be transferred to Page 1.								
MEANS OF FINANCING	CURRENT FY 2018-2019	LADJUSTMENT (+) or (-)	REVISED FY 2018-2019					
GENERAL FUND BY:								
STATUTORY DEDICATIONS								
[Select Statutory Dedication]	\$0	\$0	\$0					
[Select Statutory Dedication]	\$0	\$0	\$0					
[Select Statutory Dedication]	\$0	\$0	\$0					
[Select Statutory Dedication]	\$0	\$0	\$0					
[Select Statutory Dedication]	\$0	\$0	\$0					
[Select Statutory Dedication]	\$0	\$0	\$0					
SUBTOTAL (to Page 1)	\$0	\$0	\$0					

Use this section for additional Pro	gram Names, if n	eeded.		·, ·				
The subtotal will automatically be transferred to Page 1.								
PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS		
PROGRAM NAME:					in the state of the state of			
	\$0	0	\$0	0	\$0	O		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
SUBTOTAL (to Page 1)	\$0	0	\$0	n İ	\$0	n		

BA-7 FORM (6/1/2017) Page 1

Policy and Procedure Memorandum No. 52, Revised, requires that all Requests for Changes in Appropriation be fully documented. At a minimum, the following questions and statements must be answered. Use Continuation Sheets as needed. FAILURE TO ANSWER ALL QUESTIONS COMPLETELY WILL BE CAUSE TO RETURN THIS DOCUMENT WITHOUT ACTION.

1. What is the source of funding (if other than General Fund (Direct))? Specifically identify any grant or public law and the purposes of the funds, if applicable. A copy of any grant application and the notice of approved grant or appropriation must accompany the BA-7. What are the expenditure restrictions of the funds?

The source of funding is IAT from the Office of Behavioral Health for the following grants:

\$250,959 - Promoting Integration of Primary and Behavioral Health Care (PIPBHC) grant,

\$200,000 - Partnership for Success II (PFS II) grant,

\$92,948 - Opioid State Targeted Response (STR) Carryforward grant.

(This is a companion BA-7 to the Office of Behavioral Health's BA-7 #3, #5, and #6.)

2. Enter the financial impact of the requested adjustment for the next four fiscal years.

GENERAL FUND BY: DIRECT	\$0	\$0	\$0	\$0	\$0
INTERAGENCY TRANSFERS	\$543,907	\$0	\$0	\$0	\$0
FEES & SELF-GENERATED	\$0	\$0		\$0	\$0
STATUTORY DEDICATIONS	\$0	\$0	\$0	\$0	\$0
FEDERAL	\$0	\$0	\$0	\$0	\$0
TOTAL	\$543,907	\$0	\$0	\$0	\$0

3. If this action requires additional personnel, provide a detailed explanation below:

No - this BA-7 does not require additional personnel.

4. Explain why this request can't be postponed for consideration in the agency's budget request for next fiscal year.

This is a companion BA-7 to the Office of Behavioral Health's BA-7 #3, #5, and #6. Postponing this request will potentially jeopardize the grant awards.

5. Is this an after the fact BA-7, e.g.; have expenditures been made toward the program this BA-7 is for? If yes, explain per PPM No.52.

This is not an after the fact BA-7.

PERFORMANCE IMPACT OF MID-YEAR BUDGET ADJUSTMENT

1. Identify and explain the programmatic impacts (positive or negative) that will result from the approval of this BA-7.

Approval of this BA-7 will result in the district having sufficient budget authority for FY-19 to facilitate all IAT funding that the authority is allocated to receive.

2. Complete the following information for each objective and related performance indicators that will be affected by this request. (Note: Requested adjustments may involve revisions to existing objectives and performance indicators or creation of new objectives and performance indicators. Repeat this portion of the request form as often as necessary.)

#		PERFORMANCE STANDARD				
PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR NAME	CURRENT FY 2018-2019	ADJUSTMENT (+) OR (-)	REVISED FY 2018-2019		
			1			

JUSTIFICATION FOR ADJUSTMENT(S): Explain the necessity of the adjustment(s).

There are no impacts to Performance Indicators related to this BA-7.

3. Briefly explain any performance impacts other than or in addition to effects on objectives and performance indicators. (For example: Are there any anticipated direct or indirect effects on program management or service recipients? Will this BA-7 have a positive or negative impact on some other program or agency?)

The increase in funding will have a positive impact to individuals in the NDHSA catchment area from outreach efforts related to the State Targeted Response (STR) carryforward of grant funding for the Opioid Epidemic, Partnership for Success II (PFS II) Grant for substance use prevention efforts/outreaches, and Promoting Integration of Primary and Behavioral Health Care (PIPBHC) grant funding for the overall wellness and status of adults with co-occurring mental illness and physical health conditions or chronic diseases, and individuals with a substance use disorder.

 If there are no performance impacts associated with this BA-7 request, then fully explain this lack of performance impact.

The performance impacts associated with this request are stated.

5. Describe the performance impacts of failure to approve this BA-7. (Be specific. Relate performance impacts to objectives and performance indicators.)

Failure to approve this BA-7 will result in the district having insufficient budget authority to receive the reallocated IAT means of finance provided to the district.

BA-7 FORM (6/1/2017) Page 1

PERFORMANCE IMPACT OF MID-YEAR BUDGET ADJUSTMENT

Failure to approve this request will prevent NEDHSA from carrying out their missions and goals related to this request.

Page 4

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 1 NAME: <u>NE DELTA HUMAN SERVICES AUTHORITY</u>

MEANS OF FINANCING:	CURRENT	REQUESTED	REVISED	ADJUSTMENT OUTYEAR PROJECTIONS			
	FY 2018-2019	ADJUSTMENT	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
GENERAL FUND BY:						eratoriale de la composición dela composición de la composición de la composición de la composición de la composición dela composición de la composición de la composición dela composición dela composición de la composición de la composición dela composición de la composición dela composición dela composición dela composición dela composición dela composición dela compos	
Direct	\$10,491,877	\$0	\$10,491,877	\$0	\$0	\$0	\$0
Interagency Transfers	\$3,179,072	\$543,907	\$3,722,979	\$0	\$0	\$0	\$0
Fees & Self-Generated	\$773,844	\$0	\$773,844	\$0	\$0	\$0	\$0
Statutory Dedications *	\$0	\$0	\$0	\$0	\$0	\$0	\$0
FEDERAL FUNDS	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL MOF	\$14,444,793	\$543,907	\$14,988,700	\$0	\$0	\$0	\$0
			kiri garandak				
EXPENDITURES:		per granders, hiterore Ses Ses II e cale	er abenyerezhen kezeneaz A la al la al al al al al al				
Salaries	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Charges	\$14,058,316	\$543,907	\$14,602,223	\$0	\$0	\$0	\$0
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$386,477	\$0 \$0	\$386,477	\$0 \$0	\$0	\$0 \$0	\$0
Acquisitions	\$300,477			\$0 \$0	\$0	\$0 \$0	\$0
Major Repairs	\$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0
UNALLOTTED							
	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$14,444,793	\$543,907	\$14,988,700	\$0	\$0	\$0	\$0
POSITIONS	_	_					
Classified	0	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0	0
TOTAL T.O. POSITIONS	0	0	0	0	0	0	0
OTHER CHARGES POSITIONS	101	0	101	0	0	0	0
NON-TO FTE POSITIONS	0	0	0	0	0	0	0
TOTAL POSITIONS	101	0	101	0	0	0	0
* Statutory Dedications:						and the second of the second o	
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0	\$0	\$0

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 1 NAME:

NE DELTA HUMAN SERVICES AUTHORITY

MEANS OF FINANCING:	State General Fund	Interagency Transfers	Fees & Self- Generated Revenues	Statutory Dedications	Federal Funds	TOTAL
AMOUNT	\$0	\$543,907	\$0	\$0	\$0	\$543,907
EXPENDITURES:	n i Gallaga da					
Salaries	\$0	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0
Other Charges	\$0	\$543,907	\$0	\$0	\$0	\$543,907
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$0
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$0	\$543,907	\$0	\$0	\$0	\$543,907
OVER / (UNDER)	\$0	\$0	\$0	\$0	\$0	\$0
POSITIONS		ratesta entre gear	eguntekako kutur		a in Lagrange de la con-	
Classified	. 0	0	0	0	0	
Unclassified	0	0	0	0	0	C
TOTAL T.O. POSITIONS	0	0	0	0	0	C
OTHER CHARGES POSITIONS	101	0	0	0	0	101
NON-TO FTE POSITIONS	0	0	0	0	0	(
TOTAL POSITIONS	101	0	0	0	0	101

DEPARTMENT: HEALTH	liwy v in		FOR OPB USE ONLY					
AGENCY: Acadiana Area Human Services District			OPB LOG NUMBER AGENDA NUMBER					
SCHEDULE NUMBER: 09-326					28			
SUBMISSION DATE: 09/24/2018			Approvel and Authority:					
AGENCY BA-7 NUMBER: 2			Approved	by the	Joint Legisla	iti.		
HEAD OF BUDGET UNIT: Brad Farmer			Comm	ittee on	the Budge			
TITLE: Executive Director								
SIGNATURE (Certifies that the Information pr your knowledge):	ovided is correct end true i	to the best of	DATE: <u>/0-/</u> 9	1-2018	<u>L. L. L.</u>			
MEANS OF FINANCING	CURRENT FY 2018-2019		ADJUSTME (+) or (-)	ADJUSTMENT (+) or (-)		19		
GENERAL FUND BY:								
DIRECT	\$14	,947,361		\$0	\$14,	947,361		
INTERAGENCY TRANSFERS	\$2	,923,045		\$200,000	\$3,	123,045		
FEES & SELF-GENERATED	\$1	,536,196	\$0			536,196		
STATUTORY DEDICATIONS	\$0		\$0					
[Select Statutory Dedication]	\$0		\$0					
[Select Statutory Dedication]	\$0			\$0				
Subtotal of Dedications from Page 2	\$0			\$0		\$0		
FEDERAL	\$0		10	\$0		\$0		
TOTAL	\$19,406,602			\$200,000	\$19,	606,602		
AUTHORIZED POSITIONS	0			0		0		
AUTHORIZED OTHER CHARGES		122	0		12			
NON-TO FTE POSITIONS		0	0			0		
TOTAL POSITIONS		122	0		122			
PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS		
PROGRAM NAME:								
AAHSD (Program 1000)	\$19,406,602	122	\$200,000	0	\$19,606,602	122		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
11.2	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
Subtotal of programs from Page 2:			\$0	0	\$0			
Campanian biodianno nami i ago a.	\$0 0		40	U	O.	0		

DEPARTMENT: HEALTH	FOR OPB USE ONLY		
AGENCY: Acadiana Area Human Services District	OPB LOG NUMBER	AGENDA NUMBER	
SCHEDULE NUMBER: 09-325			
SUBMISSION DATE: 09/24/2018	4005NDUM TO 04.05.4		
AGENCY BA-7 NUMBER: 2	ADDENDUM TO PAGE 1		

Use this section for additional Statu	tory Dedications, if needed	•					
The subtotal will automatically be transferred to Page 1.							
MEANS OF FINANCING	CURRENT FY 2018-2019	ADJUSTMENT (+) or (-)	REVISED FY 2018-2019				
GENERAL FUND BY:							
STATUTORY DEDICATIONS							
[Select Statutory Dedication]	\$0	\$0	\$0				
[Select Statutory Dedication]	\$0	\$0	\$0				
[Select Statutory Dedication]	\$0	\$0	\$0				
[Select Statutory Dedication]	\$0	\$0	\$0				
[Select Statutory Dedication]	\$0	\$0	\$0				
[Select Statutory Dedication]	\$0	\$0	\$0				
SUBTOTAL (to Page 1)	\$0	\$0	\$0				

Use this section for additional Program Names, if needed. The subtotal will automatically be transferred to Page 1.							
PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS	
PROGRAM NAME:							
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
SUBTOTAL (to Page 1)	\$0	0	\$0	0	\$0	0	

Policy and Procedure Memorandum No. 52, Revised, requires that all Requests for Changes in Appropriation be fully documented. At a minimum, the following questions and statements must be answered. Use Continuation Sheets as needed. FAILURE TO ANSWER ALL QUESTIONS COMPLETELY WILL BE CAUSE TO RETURN THIS DOCUMENT WITHOUT ACTION.

1. What is the source of funding (if other than General Fund (Direct))? Specifically identify any grant or public law and the purposes of the funds, if applicable. A copy of any grant application and the notice of approved grant or appropriation must accompany the BA-7. What are the expenditure restrictions of the funds? This request is for an increase in budget authority in IAT funding from the Office of Behavioral Health. The amount allocated for Acadiana Area Human Services District was increased after the appropriation was completed for fiscal year 2019. This is a companion BA7 to OBH's BA7#3 and #8.

2. Enter the financial impact of the requested adjustment for the next four fiscal years.

TOTAL	\$200,000	\$0	\$0	\$0	\$0
FEDERAL	\$0	\$0	\$0	\$0	\$0
STATUTORY DEDICATIONS	\$0	\$0	\$0	\$0	\$0
FEES & SELF-GENERATED	\$0	\$0	\$0	\$0	\$0
INTERAGENCY TRANSFERS	\$200,000	\$0	\$0	\$0	\$0
DIRECT	\$0	\$0	\$0	\$0	\$0
GENERAL FUND BY:					
MEANS OF FINANCING OR EXPENDITURE	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023

3. If this action requires additional personnel, provide a detailed explanation below: No - this BA-7 does not require additional personnel.

4. Explain why this request can't be postponed for consideration in the agency's budget request for next fiscal year.

This is a companion BA-7 to the Office Behavioral Health. Postponing this request will potentially jeopardize the grant awards.

5. Is this an after the fact BA-7, e.g.; have expenditures been made toward the program this BA-7 is for? If yes, explain per PPM No.52.

This is not an after the fact BA-7

PERFORMANCE IMPACT OF MID-YEAR BUDGET ADJUSTMENT

1. Identify and explain the programmatic impacts (positive or negative) that will result from the approval of this BA-7.

Approval of this BA-7 will result in the district having sufficient budget authority for FY-19 to facilitate all IAT funding that the authority is allocated to receive.

2. Complete the following information for each objective and related performance indicators that will be affected by this request. (Note: Requested adjustments may involve revisions to existing objectives and performance indicators or creation of new objectives and performance indicators. Repeat this portion of the request form as often as necessary.)

PERFORMANCE INDICATOR NAME	PERF	ORMANCE STAN	DARD
PERFORMANCE INDICATOR NAME	CURRENT FY 2018-2019	ADJUSTMENT (+) OR (-)	REVISED FY 2018-2019

JUSTIFICATION FOR ADJUSTMENT(S): Explain the necessity of the adjustment(s). There are no impacts to Performance Indicators related to this BA-7.

3. Briefly explain any performance impacts other than or in addition to effects on objectives and performance indicators. (For example: Are there any anticipated direct or indirect effects on program management or service recipients? Will this BA-7 have a positive or negative impact on some other program or agency?)

The increase in funding will have a positive impact to individuals in the AAHSD catchment area from outreach efforts related to the Partnership for Success II (PFS II) Grant for substance use prevention efforts/outreaches.

4. If there are no performance impacts associated with this BA-7 request, then fully explain this lack of performance impact.

This BA-7 will aid in meeting existing Performance Indicators

OBJECTIVE:

5. Describe the performance impacts of failure to approve this BA-7. (Be specific. Relate performance impacts to objectives and performance indicators.)

Failure to approve this request will prevent AAHSD from carrying out their missions and goals related to this request.

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 1 NAME: Acadiana Area Human Services District

MEANS OF FINANCING:	CURRENT	REQUESTED	REVISED	l, dA	JSTMENT OUTY	EAR PROJECTI	ONS
	FY 2018-2019	ADJUSTMENT	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
GENERAL FUND BY:			Anda disente (in line)		Escapa i valor al		
Direct	\$14,947,361	\$0	\$14,947,361	\$0	\$0	\$0	\$0
Interagency Transfers	\$3,004,025	\$200,000	\$3,204,025	\$0	\$0	\$0	\$0
Fees & Self-Generated	\$1,536,196	\$0	\$1,536,196	\$0	\$0	\$0	\$0
Statutory Dedications *	\$0	\$0	\$0	\$0	\$0	\$0	\$0
FEDERAL FUNDS	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL MOF	\$19,487,582	\$200,000	\$19,687,582	\$0	\$0	\$0	\$0
EXPENDITURES:		Ligarija galaga galaganik	in And Bakan ingu				
Salaries	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$0	\$0 \$0
Travel	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Supplies	\$176,100	\$0	\$176,100	\$0	\$0	\$0	\$0 \$0
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Charges	\$18,676,303	\$200,000	\$18,876,303	\$0	\$0	\$0 \$0	\$0
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0 \$0	\$0
Interagency Transfers	\$498,187	\$0	\$498,187	\$0	\$0	\$0	\$0
Acquisitions	\$136,992	\$0	\$136,992	\$0	\$0	\$0	\$0 \$0
Major Repairs	\$0	\$0	\$0	\$0	\$0		
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$19,487,582	\$200,000	\$19,687,582	\$0	\$0 \$0	\$0	\$0
	ψ10,407,00 <u>2</u>	\$200,000	\$15,007,502	40	20	\$0	\$0
POSITIONS						gyfigfyr degrollarun 1200.	
Classified	0	0	0			on a company of the second	
Unclassified	0	0	0	0	0	0	0
TOTAL T.O. POSITIONS	0	0			0	0	0
OTHER CHARGES POSITIONS	122	0	0	0	0	0	0
ON-TO FTE POSITIONS	0	0	122	0	0	0	0
TOTAL POSITIONS	122		0	0	0	0	0
TOTAL FOSTIIONS	122	0	122	0	0	0	0
						·	· · · · · · · · · · · · · · · · · · ·
Ctatuta - Dadia dia							
Statutory Dedications: [Select Statutory Dedication]	¢o I	en l		4.			
[Select Statutory Dedication]	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0 \$0	\$0	\$0	\$0 \$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication] [Select Statutory Dedication]	\$0 \$0	\$0 \$0	\$0 . \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 1 NAME:

Acadiana Area Human Services District

MEANS OF FINANCING:	State General Fund	Interagency Transfers	Fees & Self- Generated Revenues	Statutory Dedications	Federal Funds	TOTAL
AMOUNT	\$0	\$200,000	\$0	\$0	\$0	\$200,000
EXPENDITURES:			and of the second			var in formulari. Tafatta ili kultur j
Salaries	\$0	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0
Other Charges	\$0	\$200,000	\$0	\$0	\$0	\$200,000
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$0
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$0	\$200,000	\$0	\$0	\$0	\$200,000
		Mark Washington			<u> </u>	
OVER / (UNDER)	\$0	\$0	\$0	\$0	\$0	\$0
POSITIONS	recognistation	ndranskarderig				
Classified	0	0	0	0	0	(
Unclassified	0	0	0	0	0	(
TOTAL T.O. POSITIONS	0	0	0	0	0	(
OTHER CHARGES POSITIONS	0	0	0	0	0	(
NON-TO FTE POSITIONS	0	0	0	0	0	(
TOTAL POSITIONS	0	0	0	0	0	(

Page 1

BA-7 QUESTIONNAIRE

(Provide answers on the Questionnaire Analysis Form; answer all questions applicable to the requested budget adjustment.)

GENERAL PURPOSE

This is a companion BA-7 to OBH BA-7 # 5 to align IAT budget authority with OBH appropriated funding for Partnership for Success II Grant (PFSII) in the amount of \$200,000.

REVENUES

2. Interagency Transfer **OBH Transfer of IAT Budget Authority**

\$200,000

TOTAL

\$200,000

EXPENDITURES

This request is for an increase in budget authority in IAT funding from the Office of Behavioral Health. The amount allocated for Acadiana Area Human Services District was increased after the appropriation was completed for fiscal year 2019.

11. Expenditure

Object

Description

Amount

3740

Other Charges - Professional Services

\$200,000

TOTAL

\$200,000

OTHER

12. Provide names, phone numbers, and e-mail addresses of agency contacts

Brad Farmer, Executive Director 337-262-4190 Brad.Farmer@la.gov

Yancey Mire, Director of Behavioral Health 337-262-1611 yancey.mire@la.gov

Daniel Leger, Accountant Administrator 2 337-262-4189 Daniel.Leger@la.gov

DEPARTMENT: Louisiana Depart	ment of Health		FOR OPB USE ONLY				
AGENCY: Office of Behavorial He	AGENCY: Office of Behavorial Health			OPB LOG NUMBER			
SCHEDULE NUMBER: 09-330			120		3		
SUBMISSION DATE: August 23, 2	018		Approval and Authorit	y:			
AGENCY BA-7 NUMBER: #3 PIPB		hu tho	laint Logisla				
HEAD OF BUDGET UNIT: Karen Stubbs			Approved	by the	Joint Legisla n the Budget		
TITLE: Assistant Secretary	Comin	iiitee o	if the budget				
SIGNATURE (Certifies that the information proyour knowledge):	ovided is correct and true	to the best of	DATE: <u>/0 - /</u>	9-18	L. St.		
MEANS OF FINANCING	CURRE	NT	ADJUSTM	ENT	REVISE)	
	FY 2018-2	2019	(+) or (-	.)	FY 2018-20	019	
GENERAL FUND BY:							
DIRECT	\$11	1,787,351		\$0	\$111	,787,351	
INTERAGENCY TRANSFERS	\$88	3,703,716		\$0	\$88.	,703,716	
FEES & SELF-GENERATED		\$505,309		\$0		505,309	
STATUTORY DEDICATIONS	\$5,198,624		\$0		\$5,198,6		
Compulsive & Problem Gaming Fund (H10)	\$2,583,873		\$0		\$2,583		
Tobacco Tax Health Care Fund (E32)	\$2,312,539			\$0	\$2,312,5		
Subtotal of Dedications from Page 2	\$302,212			\$0		\$302,212	
FEDERAL	\$54,187,907		\$	1,172,804	\$55,	360,711	
TOTAL	\$260,382,907		\$	\$1,172,804		555,711	
AUTHORIZED POSITIONS	1,654			0		1,654	
AUTHORIZED OTHER CHARGES		6	0				
NON-TO FTE POSITIONS		139	0		13		
TOTAL POSITIONS		1,799	0		1,7		
PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS	
PROGRAM NAME:							
ADMINISTRATION AND SUPPORT	\$7,498,625	48	\$0	0	\$7,498,625	48	
BH COMMUNITY	\$73,344,899	119	\$1,172,804	0	\$74,517,703	119	
HOSPITAL BASED TREATMENT	\$179,519,383	1,632	\$0	0	\$179,519,383	1,632	
AUXILIARY	\$20,000	0	\$0	0	\$20,000	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
Subtotal of programs from Page 2:	\$0	0	\$0	0	\$0	0	
TOTAL	\$260,382,907	1,799	\$1,172,804	0	\$261,555,711	1,799	

DEPARTMENT: Louisiana Department of Health	FOR OPB USE ONLY		
AGENCY: Office of Behavorial Health	OPB LOG NUMBER	AGENDA NUMBER	
SCHEDULE NUMBER: 09-330			
SUBMISSION DATE: August 23, 2018	ADDENDUM TO PAGE 1		
AGENCY BA-7 NUMBER: #3 PIPBHC Grant	ADDENDOM TO PAGE T		

MEANS OF FINANCING	CURRENT FY 2018-2019	ADJUSTMENT (+) or (-)	REVISED FY 2018-2019
GENERAL FUND BY:			
STATUTORY DEDICATIONS		"	_
Health Care Fund (XXX)	\$302,212	\$0	\$302,212
[Select Statutory Dedication]	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0_	\$0
SUBTOTAL (to Page 1)	\$302,212	\$0	\$302,212

PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS
PROGRAM NAME:				Market 199		
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
1.00 100 100 100 100 100 100 100 100 100	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
SUBTOTAL (to Page 1)	\$0	0	\$0	0	\$0	0

Policy and Procedure Memorandum No. 52, Revised, requires that all Requests for Changes in Appropriation be fully documented. At a minimum, the following questions and statements must be answered. Use Continuation Sheets as needed. FAILURE TO ANSWER ALL QUESTIONS COMPLETELY WILL BE CAUSE TO RETURN THIS DOCUMENT WITHOUT ACTION.

1. What is the source of funding (if other than General Fund (Direct))? Specifically identify any grant or public law and the purposes of the funds, if applicable. A copy of any grant application and the notice of approved grant or appropriation must accompany the BA-7. What are the expenditure restrictions of the funds? Promoting Integration of Primary and Behavioral Health Care (PIPBHC) Cooperative Agreement is a federal grant from the United States Department of Health and Human Services Substance Abuse and Mental Health Services Administration (SAMHSA). See attached award letter dated 08/08/2018.

2. Enter the financial impact of the requested adjustment for the next four fiscal years.

MEANS OF FINANCING OR EXPENDITURE	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
GENERAL FUND BY:					
DIRECT	\$0	\$0	\$0	\$0	\$0
INTERAGENCY TRANSFERS	\$0	\$0 ⁻	\$0	\$0	\$0
FEES & SELF-GENERATED	\$0	\$0	\$0	\$0	\$0
STATUTORY DEDICATIONS	\$0	\$0	\$0	\$0	\$0
FEDERAL	\$1,172,804	\$0	\$0	\$0	\$0
TOTAL	\$1,172,804	\$0	\$0	\$0	\$0

3. If this action requires additional personnel, provide a detailed explanation below:

One non-TO position (Program Manager 1-A) will be hired in FY19, and will be maintained for the duration of the grant award. This position will be a full time job appointment, and is expected to start on December 1, 2018. This BA-7 does not include a request for a non-TO position; OBH will use an existing vacant slot.

4. Explain why this request can't be postponed for consideration in the agency's budget request for next fiscal year.

The grant award start date is September 30, 2018. To postpone the request will be to potentially jeopardize the entire five-year grant award.

5. Is this an after the fact BA-7, e.g.; have expenditures been made toward the program this BA-7 is for? If yes, explain per PPM No.52.

This is not an after the fact BA-7.

PERFORMANCE IMPACT OF MID-YEAR BUDGET ADJUSTMENT

1. Identify and explain the programmatic impacts (positive or negative) that will result from the approval of this BA-7.

The programmatic impacts are to: 1) develop an integration team consisting of qualified community health programs, community health centers, family, peers, and other consumer organizations to obtain guidance and feedback for quality improvement, sustainability, and scalability of increased access to health care services; 2) enhance integrated primary and behavioral health care services provided by four qualified community health programs (behavioral health centers) or community health centers (FQHCs); 3) provide integrated primary and behavioral health care services to 29,217 adults with co-occurring mental illness and physical health conditions or individuals with a substance use disorder (5,301 in Year 1, 5,602 in Year 2, 5,904 in Year 3, 6,105 in Year 4, and 6,305 in Year 5); 4) increase the number of policy changes completed as a result of coordinated, integrated care to four; 5) increase the number of qualified community health programs or community health centers that have implemented evidence-based practices/activities by four; and 6) provide screening, referral and treatment for mental health and substance abuse to 29,217 individuals.

2. Complete the following information for each objective and related performance indicators that will be affected by this request. (Note: Requested adjustments may involve revisions to existing objectives and performance indicators or creation of new objectives and performance indicators. Repeat this portion of the request form as often as necessary.)

_		PERFORMANCE STANDARD						
LEVEL	PERFORMANCE INDICATOR NAME	CURRENT	ADJUSTMENT	REVISED				
<u> </u>		FY 2018-2019	(+) OR (-)	FY 2018-2019				
	,							
				4				

JUSTIFICATION FOR ADJUSTMENT(S): Explain the necessity of the adjustment(s) There are no specific objectives that will be affected by this BA-7.

OBJECTIVE:

PERFORMANCE IMPACT OF MID-YEAR BUDGET ADJUSTMENT

3. Briefly explain any performance impacts other than or in addition to effects on objectives and performance indicators. (For example: Are there any anticipated direct or indirect effects on program management or service recipients? Will this BA-7 have a positive or negative impact on some other program or agency?)

The direct positive impact for service recipients within the state are described in section 1, above.

4. If there are no performance impacts associated with this BA-7 request, then fully explain this lack of performance impact.

This is not applicable to this BA-7.

5. Describe the performance impacts of failure to approve this BA-7. (Be specific. Relate performance impacts to objectives and performance indicators.)

If this BA-7 is not approved, the state will be limited in its ability to enhance and promote full integration and collaboration in clinical practice between primary and behavioral healthcare, unless state funds are utilized for the same purpose.

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 1 NAME: ADMINISTRATION AND SUPPORT

	CURRENT	REQUESTED REVISED		ADJU	STMENT OUTY	EAR PROJECT	IONS
MEANS OF FINANCING:	FY 2018-2019	ADJUSTMENT	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
GENERAL FUND BY:							
Direct	\$5,746,115	\$0	\$5,746,115	\$0	\$0	\$0	\$0
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Fees & Self-Generated	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Statutory Dedications *	\$53,014	\$0	\$53,014	\$0	\$0	\$0	\$0
FEDERAL FUNDS		\$0	\$1,699,496	\$0	\$0	\$0	\$0
	\$1,699,496			\$0	\$0	\$0	\$0
TOTAL MOF	\$7,498,625	\$0	\$7,498,625	\$0	. 50	φυ	φ0
EXPENDITURES:							
Salaries	\$3,488,252	\$0	\$3,488,252	\$0	\$0	\$0	\$0
Other Compensation	\$363,170	\$0	\$363,170	\$0	\$0	\$0	\$0
Related Benefits	\$2,209,984	\$0	\$2,209,984	\$0	\$0	\$0	\$0
Travel	\$25,193	\$0	\$25,193	\$0	\$0	\$0	\$0
Operating Services	\$19,180	\$0	\$19,180	\$0	\$0	\$0	\$0
Supplies	\$49,898	\$0	\$49,898	\$0	\$0	\$0	\$0
Professional Services	\$147,918	\$0	\$147,918	\$0	\$0	\$0	\$0
A MACHINEMPT DOWNS THE DI	\$19,746	\$0	\$19,746	\$0	\$0	\$0	\$0
Other Charges		101		\$0	\$0	\$0	\$0
Debt Services	\$0	\$0	\$0				\$0
Interagency Transfers	\$1,175,284	\$0	\$1,175,284	\$0	\$0	\$0	
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$0	\$0
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$7,498,625	\$0	\$7,498,625	\$0	\$0	\$0	\$0
POSITIONS							
Classified	41	0	41	0	0	0	0
Unclassified	2	0	2	0	0	0	
		0	43	0	0	0	_
TOTAL T.O. POSITIONS	43				0	0	
OTHER CHARGES POSITIONS	0	0	0	0		0	
NON-TO FTE POSITIONS	5	0	5	0	0		
TOTAL POSITIONS	48	0	48	0	0	0	0
* Statutory Dedications:					200	-	1 ***
Gaming Fund (H10)	\$0	\$0	\$0	\$0 \$0	\$0 \$0	\$0 \$0	
Tobacco Tax Fund (E32) [Select Statutory Dedication]	\$53,014 \$0	\$0 \$0	\$53,014 \$0	\$0 \$0	\$0	\$0	
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 1 NAME:

ADMINISTRATION AND SUPPORT

MEANS OF FINANCING:	State General Fund	Interagency Transfers	Fees & Self- Generated Revenues	Statutory Dedications	Federal Funds	TOTAL
AMOUNT	\$0	\$0	\$0	\$0	\$0	\$0
EXPENDITURES:					T	
Salaries	\$0	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0
Other Charges	\$0	\$0	\$0	\$0	\$0	\$0
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$0
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$0	\$0	\$0	\$0	\$0	\$0
OVER / (UNDER)	\$0	\$0	\$0	\$0	\$0	\$0

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 2 NAME: BH COMMUNITY

	CURRENT	REQUESTED	REVISED	ADJU	STMENT OUTY	EAR PROJECTION	ONS
MEANS OF FINANCING:	FY 2018-2019	ADJUSTMENT	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
GENERAL FUND BY:							
Direct	\$11,623,156	\$0	\$11,623,156	\$0	\$0	\$0	\$0
Interagency Transfers	\$5,375,108	\$0	\$5,375,108	\$0	\$0	\$0	\$0
Fees & Self-Generated	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Statutory Dedications *	\$4,843,398	\$0	\$4,843,398	\$0	\$0	\$0	\$0
FEDERAL FUNDS	\$51,503,237	\$1,172,804	\$52,676,041	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000
TOTAL MOF	\$73,344,899	\$1,172,804	\$74,517,703	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000
EXPENDITURES:							
Salaries	\$3,336,335	\$0	\$3,336,335	\$0	\$0	\$0	\$0
Other Compensation	\$1,236,761	\$0	\$1,236,761	\$0	\$0	\$0	\$0
Related Benefits	\$4,481,296	\$0	\$4,481,296	\$0	\$0	\$0	\$0
	\$4,481,296	\$0	\$56,059	\$0	\$0	\$0	\$0
Travel	\$210,241	\$0	\$210,241	\$0	\$0	\$0	\$0
Operating Services	\$182,855	\$0	\$182,855	\$0	\$0	\$0	\$0
Supplies Professional Services		\$0	\$162,036	\$0	\$0	\$0	\$0
14141414141414141414141414	\$162,036			\$1,100,000	\$1,100,000	\$1,100,000	\$1,100,000
Other Charges	\$20,555,760	\$638,471	\$21,194,231	\$1,100,000	\$1,100,000	\$0	\$1,100,000
Debt Services	\$0	\$0	\$0	\$900,000	\$900,000	\$900,000	\$900,000
Interagency Transfers	\$43,123,556	\$534,333	\$43,657,889	\$900,000	\$900,000	\$0	\$00,000
Acquisitions	\$0	\$0	\$0		\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0 \$0	\$0	\$0	\$0
UNALLOTTED	\$0	\$0	\$0			\$2,000,000	\$2,000,000
TOTAL EXPENDITURES	\$73,344,899	\$1,172,804	\$74,517,703	\$2,000,000	\$2,000,000	\$2,000,000	\$2,000,000
POSITIONS							
Classified	38	0	38	0	0	0	C
Unclassified	0	0	0	0	0	0	(
TOTAL T.O. POSITIONS	38	0	38	0	0	0	
OTHER CHARGES POSITIONS	6	0	6	0	0	0	
NON-TO FTE POSITIONS	75	0	75	0	0	0	(
TOTAL POSITIONS	119	0	119	0	0	0	
* Statutory Dedications:							
Gaming Fund (H10)	\$2,583,873	\$0 \$0	\$2,583,873 \$2,259,525	\$0 \$0	\$0 \$0	\$0 \$0	\$
Tobacco Tax Fund (E32) [Select Statutory Dedication]	\$2,259,525 \$0	\$0	\$2,259,525	\$0	\$0	\$0	\$1
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$ \$
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	Φ

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 2 NAME: BH COMMUNITY

MEANS OF FINANCING:	State General Fund	Interagency Transfers	Fees & Self- Generated Revenues	Statutory Dedications	Federal Funds	TOTAL	
AMOUNT	\$0	\$0	\$0	\$0	\$1,172,804	\$1,172,804	
EXPENDITURES:							
Salaries	\$0	\$0	\$0	\$0	\$0	\$0	
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0	
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$0	
Travel	\$0	\$0	\$0	\$0	\$0	\$0	
Operating Services	\$0	\$0	\$0	\$0	\$0	\$0	
Supplies	\$0	\$0	\$0	\$0	\$0	\$0	
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0	
Other Charges	\$0	\$0	\$0	\$0	\$638,471	\$638,471	
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0	
Interagency Transfers		\$0	\$0	\$0	\$534,333	\$534,333	
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$0	
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$0	
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0	
TOTAL EXPENDITURES	\$0	\$0	\$0	\$0	\$1,172,804	\$1,172,804	
OVER / (UNDER)	\$0	\$0	\$0	\$0	\$0	\$0	

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 3 NAME: HOSPITAL BASED TREATMENT

Direct Interagency Transfers Fees & Self-Generated Statutory Dedications * FEDERAL FUNDS	\$94,418,080 \$83,328,608 \$485,309 \$302,212 \$985,174 \$179,519,383 \$78,488,046 \$2,690,903	\$0 \$0 \$0 \$0 \$0 \$0 \$0	\$94,418,080 \$83,328,608 \$485,309 \$302,212 \$985,174 \$179,519,383	\$0 \$0 \$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0	\$0 \$0 \$0	\$0 \$0
Direct Interagency Transfers Fees & Self-Generated Statutory Dedications * FEDERAL FUNDS TOTAL MOF EXPENDITURES: Salaries Other Compensation Related Benefits Travel Operating Services Supplies Professional Services	\$83,328,608 \$485,309 \$302,212 \$985,174 \$179,519,383	\$0 \$0 \$0 \$0	\$83,328,608 \$485,309 \$302,212 \$985,174	\$0 \$0 \$0	\$0 \$0 \$0	\$0 \$0	\$0
Interagency Transfers Fees & Self-Generated Statutory Dedications * FEDERAL FUNDS TOTAL MOF EXPENDITURES: Salaries Other Compensation Related Benefits Travel Operating Services Supplies Professional Services	\$83,328,608 \$485,309 \$302,212 \$985,174 \$179,519,383	\$0 \$0 \$0 \$0	\$83,328,608 \$485,309 \$302,212 \$985,174	\$0 \$0 \$0	\$0 \$0 \$0	\$0 \$0	\$0
Fees & Self-Generated Statutory Dedications * FEDERAL FUNDS FOTAL MOF EXPENDITURES: Salaries Other Compensation Related Benefits Travel Operating Services Supplies Professional Services	\$485,309 \$302,212 \$985,174 \$179,519,383 \$78,488,046	\$0 \$0 \$0	\$485,309 \$302,212 \$985,174	\$0 \$0	\$0 \$0	\$0	
Fees & Self-Generated Statutory Dedications * FEDERAL FUNDS FOTAL MOF EXPENDITURES: Salaries Other Compensation Related Benefits Travel Operating Services Supplies Professional Services	\$485,309 \$302,212 \$985,174 \$179,519,383 \$78,488,046	\$0 \$0	\$485,309 \$302,212 \$985,174	\$0	\$0		0.0
Statutory Dedications * FEDERAL FUNDS TOTAL MOF EXPENDITURES: Salaries Other Compensation Related Benefits Travel Operating Services Supplies Professional Services	\$302,212 \$985,174 \$179,519,383 \$78,488,046	\$0 \$0	\$302,212 \$985,174	\$0	\$0		\$0
TOTAL MOF EXPENDITURES: Salaries Other Compensation Related Benefits Travel Operating Services Supplies Professional Services	\$985,174 \$179,519,383 \$78,488,046	\$0	\$985,174			\$0	\$0
Salaries Other Compensation Related Benefits Travel Operating Services Supplies Professional Services	\$179,519,383 \$78,488,046			ΨΟ	\$0	\$0	\$0
EXPENDITURES: Salaries Other Compensation Related Benefits Travel Operating Services Supplies Professional Services	\$78,488,046	\$0	\$179,519,363	\$0	\$0	\$0	\$0
Salaries Other Compensation Related Benefits Travel Operating Services Supplies Professional Services				\$0	\$0	\$0	Ψυ
Other Compensation Related Benefits Travel Operating Services Supplies Professional Services							
Related Benefits Travel Operating Services Supplies Professional Services	\$2,690,903	\$0	\$78,488,046	\$0	\$0	\$0	\$0
Related Benefits Travel Operating Services Supplies Professional Services	V-15-4-14-5-4	\$0	\$2,690,903	\$0	\$0	\$0	\$0
Travel Operating Services Supplies Professional Services	\$47,121,867	\$0	\$47,121,867	\$0	\$0	\$0	\$0
Operating Services Supplies Professional Services	\$149,919	\$0	\$149,919	\$0	\$0	\$0	\$0
Supplies Professional Services	\$10,761,109	\$0	\$10,761,109	\$0	\$0	\$0	\$0
Professional Services		\$0		\$0	\$0	\$0	\$0
THE RESERVE OF THE PERSON AND A PROPERTY OF THE PERSON AND A PROPERTY OF THE PERSON AND A PERSON	\$9,674,264	17.33	\$9,674,264	\$0	\$0	\$0	\$0
Other Charges	\$7,546,238	\$0	\$7,546,238				
	\$8,633,427	\$0	\$8,633,427	\$0	\$0	\$0	\$0
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$12,843,726	\$0	\$12,843,726	\$0	\$0	\$0	\$0
Acquisitions	\$399,527	\$0	\$399,527	\$0	\$0	\$0	\$0
Major Repairs	\$1,210,357	\$0	\$1,210,357	\$0	\$0	\$0	\$0
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$179,519,383	\$0	\$179,519,383	\$0	\$0	\$0	\$0
POSITIONS							
Classified	1,561	0	1,561	0	0	0	
Unclassified	12	0	12	0	0	0	(
TOTAL T.O. POSITIONS	1,573	0	1,573	0	0	0	
OTHER CHARGES POSITIONS	0	0	0	0	0	0	
NON-TO FTE POSITIONS	59	0	59	0	0	0	
TOTAL POSITIONS	1,632	0	1,632	0	0	0	
* Statutory Dedications:						40	0.
Gaming Fund (H10)	\$0	\$0	\$0	\$0 \$0	\$0 \$0	\$0 \$0	\$
Tobacco Tax Fund (E32) Health Care Fund (XXX)	\$0 \$302,212	\$0 \$0	\$0 \$302,212	\$0	\$0	\$0	\$
[Select Statutory Dedication]	\$302,212	\$0	\$0	\$0	\$0	\$0	\$
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 3 NAME: HOSPITAL BASED TREATMENT

MEANS OF FINANCING:	State General Fund	Interagency Transfers	Fees & Self- Generated Revenues	Statutory Dedications	Federal Funds	TOTAL	
AMOUNT	\$0	\$0	\$0	\$0	\$0	\$0	
EXPENDITURES:							
Salaries	\$0	\$0	\$0	\$0	\$0	\$0	
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0	
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$0	
Travel	\$0	\$0	\$0	\$0	\$0	\$0	
Operating Services	\$0	\$0	\$0	\$0	\$0	\$0	
Supplies	\$0	\$0	\$0	\$0	\$0	\$0	
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0	
Other Charges	\$0	\$0	\$0	\$0	\$0	\$0	
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0	
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$0	
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$0	
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$0	
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0	
TOTAL EXPENDITURES	\$0	\$0	\$0	\$0	\$0	\$0	
OVER / (UNDER)	\$0	\$0	\$0	\$0	\$0	\$0	

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

	CURRENT	REQUESTED	REVISED	ADJU	ISTMENT OUTY	EAR PROJECTION	ONS
MEANS OF FINANCING:	FY 2018-2019	ADJUSTMENT	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
GENERAL FUND BY:							
Direct	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Fees & Self-Generated	\$20,000	\$0	\$20,000	\$0	\$0	\$0	\$0
Statutory Dedications *	\$0	\$0	\$0	\$0	\$0	\$0	\$0
FEDERAL FUNDS	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL MOF	\$20,000	\$0	\$20,000	\$0	\$0	\$0	\$(
	720,000		120,000		124		
EXPENDITURES:							
Salaries	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A CONTRACTOR TO STATE OF THE ST	\$20,000	\$0	\$20,000	\$0	\$0	\$0	\$(
Other Charges		\$0	\$20,000	\$0	\$0	\$0	\$(
Debt Services	\$0			\$0 \$0	\$0	\$0	\$0
Interagency Transfers	\$0	\$0	\$0			\$0	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0		\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$0	
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$20,000	\$0	\$20,000	\$0	\$0	\$0	\$0
POSITIONS							
Classified	0	0	0	0	0	0	(
Unclassified	0	0	0	0	0	0	(
TOTAL T.O. POSITIONS	0	0	0	0	0	0	
OTHER CHARGES POSITIONS	0	0	0	0	0	0	
NON-TO FTE POSITIONS	0	0	0	0	0	0	(
TOTAL POSITIONS	0	0	0	0	0	0	
TOTAL POSITIONS	U	0	•		•	· ·	
			_				
* Statutory Dedications:							
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0 \$0	\$0 \$0	\$
[Select Statutory Dedication] [Select Statutory Dedication]	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0	\$0	\$
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 4 NAME: AUXILIARY

MEANS OF FINANCING:	State General Fund	Interagency Transfers	Fees & Self- Generated Revenues	Statutory Dedications	Federal Funds	TOTAL
AMOUNT	\$0	\$0	\$0	\$0	\$0	\$0
EXPENDITURES:						
Salaries	\$0	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0
Other Charges	\$0	\$0	\$0	\$0	\$0	\$0
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$0
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$0	\$0	\$0	\$0	\$0	\$0
	1 46		1 00	1 00	T 60	
OVER / (UNDER)	\$0	\$0	\$0	\$0	\$0	\$0

BA-7 QUESTIONNAIRE

GENERAL PURPOSE

The Louisiana Department of Health, Office of Behavioral Health (OBH) received the federal SAMHSA Promoting Integration of Primary and Behavioral Health Care (PIPBHC) Grant to provide a coordinated, comprehensive approach to improve the overall wellness and status of adults with co-occurring mental illness and physical health conditions or chronic diseases, and individuals with a substance use disorder through improved health care delivery.

Specific objectives of PIPBHC are to promote full integration and collaboration in clinical practice between primary and behavioral healthcare, support the improvement of integrated care models for primary care and behavioral health care to improve the overall wellness and physical health status of adults with a serious mental illness (SMI), and promote and offer integrated care services related to screening, diagnosis, prevention, and treatment of mental and substance use disorders, and co-occurring physical health conditions and chronic diseases. Louisiana was selected through a competitive grant application process and has been allocated \$2,000,000 per year for five years, beginning September 30, 2018.

OBH engaged in a selection process to identify providers that had the interest and capacity to implement the program, as well as meet the eligibility requirements as outlined in the grant Funding Opportunity Announcement. Per grant requirements, only community mental health programs (i.e., LGEs) and community health centers (i.e., Federally Qualified Health Centers or FQHCs) were eligible. Also, each provider had to have a provider of the opposite provider type with which to partner in order to provide integrated services (i.e., an LGE has to partner with an FQHC or an FQHC has to partner with an LGE). Interest surveys were sent to LGEs, FQHCs, and other organizations to gauge interest in collaborating with OBH on the grant. Interested providers also had to complete an eligibility survey to ensure they met the requirements and a proposal describing their approach to providing integrated care. The criteria used for selecting providers were: 1) an identified partner provider, 2) geographic location (located in a health professional shortage area or area with high prevalence rates of mental illness, substance abuse, and/or chronic conditions), and 3) capacity to implement integration activities.

Seven LGEs originally expressed interest, two of which were selected to participate in the grant: Capital Area Human Services District and Northeast Delta Human Services District. Of the five other LGEs that were interested but not selected, two were ineligible as they were unable to identify a partner provider, one later decided they were no longer interested, one was unable to submit the proposal due to time constraints, and one did not submit the proposal and did not reply to follow up requests.

EXPENDITURES AND REVENUE

Program	ORG	OBJ	Amount	MOF
200	7051	3681	\$35,523	Federal Funds
200	7051	3690	\$17,308	Federal Funds
200	7051	3700	\$4,590	Federal Funds
200	7051	3730	\$700	Federal Funds
200	7051	3740	\$580,350	Federal Funds
200	7051	4940	\$531,733	Federal Funds
200	7051	5045	\$2,600	Federal Funds
			\$1,172,804	

OTHER

Contact:
Lauri Hatlelid
Program Manager 2 - Budget – Administration
(225) 342-8561

DEPARTMENT: Louisiana Depart	ment of Health			OR OPB U	ISE ONLY			
AGENCY: Office of Behavorial He	alth		OPB LOG NUM	MBER	AGENDA NUM	BER		
SCHEDULE NUMBER: 09-330			121		2A			
SUBMISSION DATE: September 2	1, 2018		Approval and Authority	/ :				
AGENCY BA-7 NUMBER: #5 PFS	I		Approved by the Joint Legislative					
HEAD OF BUDGET UNIT: Karen S	itubbs		Approved by the Joint Legislative Committee on the Budget DATE: 10-19-2018					
TITLE: Assistant Secretary								
SIGNATURE (Certifies that the information proport knowledge):	ovided is correct and true in	to the best of						
MEANS OF FINANCING	CURREN FY 2018-2		ADJUSTM (+) or (-	200	REVISED FY 2018-2019			
GENERAL FUND BY:								
DIRECT	\$111	,787,351		\$0	\$111,	787,351		
INTERAGENCY TRANSFERS	\$88	,703,716		\$0	\$88,	703,716		
FEES & SELF-GENERATED		\$505,309	\$0		\$505,30			
STATUTORY DEDICATIONS	\$5	\$5,198,624		\$0		198,624		
Compulsive & Problem Gaming Fund (H10)		\$2,583,873		\$0	\$2,583,8			
Tobacco Tax Health Care Fund (E32)		\$2,312,539		\$0		2,312,539		
Subtotal of Dedications from Page 2	\$302,212			\$0		\$302,212		
FEDERAL	\$54,187,907		\$	1,809,768	\$55,	997,675		
TOTAL	\$260,382,907		\$	1,809,768	\$262,	192,675		
AUTHORIZED POSITIONS		1,654		0		1,654		
AUTHORIZED OTHER CHARGES		6	0		6			
NON-TO FTE POSITIONS		139	0		139			
TOTAL POSITIONS		1,799		0	1,799			
PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS		
PROGRAM NAME:								
ADMINISTRATION AND SUPPORT	\$7,498,625	48	\$0	0	\$7,498,625	48		
BH COMMUNITY	\$73,344,899	94	\$1,809,768	0	\$75,154,667	94		
HOSPITAL BASED TREATMENT	\$179,519,383	1,657	\$0	0	\$179,519,383	1,657		
AUXILIARY	\$20,000	0	\$0	0	\$20,000	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
Subtotal of programs from Page 2:	\$0	0	\$0	0	\$0	0		
TOTAL	\$260,382,907	1,799	\$1,809,768	0	\$262,192,675	1,799		

DEPARTMENT: Louisiana Department of Health	FOR OPB USE ONLY				
AGENCY: Office of Behavorial Health	OPB LOG NUMBER	AGENDA NUMBER			
SCHEDULE NUMBER: 09-330					
SUBMISSION DATE: September 21, 2018	ADDENDUM	TO DAGE 4			
AGENCY BA-7 NUMBER: #5 PFS II	ADDENDUM TO PAGE 1				

Use this section for additional Statutory Dedications, if needed. The subtotal will automatically be transferred to Page 1.									
MEANS OF FINANCING	CURRENT FY 2018-2019	ADJUSTMENT (+) or (-)	REVISED FY 2018-2019						
GENERAL FUND BY:									
STATUTORY DEDICATIONS									
Health Care Fund (XXX)	\$302,212	\$0	\$302,212						
[Select Statutory Dedication]	\$0	\$0	\$0						
[Select Statutory Dedication]	\$0	\$0	\$0						
[Select Statutory Dedication]	\$0	\$0	\$0						
[Select Statutory Dedication]	\$0	\$0	\$0						
[Select Statutory Dedication]	\$0	\$0	\$0						
SUBTOTAL (to Page 1)	\$302,212	\$0	\$302,212						

Use this section for additional Pro						
The subtotal will automatically be PROGRAM EXPENDITURES		ge 1. POS	DOLLARS	POS	DOLLARS	POS
PROGRAM NAME:						
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	.0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
SUBTOTAL (to Page 1)	\$0	0	\$0	0	\$0	0

Policy and Procedure Memorandum No. 52, Revised, requires that all Requests for Changes in Appropriation be fully documented. At a minimum, the following questions and statements must be answered. Use Continuation Sheets as needed. FAILURE TO ANSWER ALL QUESTIONS COMPLETELY WILL BE CAUSE TO RETURN THIS DOCUMENT WITHOUT ACTION.

1. What is the source of funding (if other than General Fund (Direct))? Specifically identify any grant or public law and the purposes of the funds, if applicable. A copy of any grant application and the notice of approved grant or appropriation must accompany the BA-7. What are the expenditure restrictions of the funds? OBH received the five-year federal SAMHSA-funded Partnerships for Success II (LaPFS II) award for grant period 9/30/2018 through 9/29/2023, for a total of \$11,300,000. See the attached award that was received on September 13, 2018.

2. Enter the financial impact of the requested adjustment for the next four fiscal years.

MEANS OF FINANCING OR EXPENDITURE	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
GENERAL FUND BY:					
DIRECT	\$0	\$0	\$0	\$0	\$0
INTERAGENCY TRANSFERS	\$0	\$0	\$0	\$0	\$0
FEES & SELF-GENERATED	\$0	\$0	\$0	\$0	\$0
STATUTORY DEDICATIONS	\$0	\$0	\$0	\$0	\$0
FEDERAL	\$1,809,768	\$2,260,000	\$2,260,000	\$2,260,000	\$2,260,000
TOTAL	\$1,809,768	\$2,260,000	\$2,260,000	\$2,260,000	\$2,260,000

3. If this action requires additional personnel, provide a detailed explanation below: No additional personnel are required.

4. Explain why this request can't be postponed for consideration in the agency's budget request for next fiscal year.

The PFS II grant award commences on September 30, 2018.

5. Is this an after the fact BA-7, e.g.; have expenditures been made toward the program this BA-7 is for? If yes, explain per PPM No.52.

This is not an after the fact BA-7, as no expenditures will be incurred before legislative approval.

PERFORMANCE IMPACT OF MID-YEAR BUDGET ADJUSTMENT

1. Identify and explain the programmatic impacts (positive or negative) that will result from the approval of this BA-7.

The goals identified for LaPFS II will position OBH to improve health, social, and academic outcomes of 9-20 year olds in 10 high needs communities across Louisiana. Specifically, the grant will prevent the misuse and abuse of alcohol and related negative consequences. These funds will be used to improve lives by addressing critical gaps in the current underage drinking prevention system and will allow for the maximization of project performance and outcomes. In order to measure the success of the program, a comprehensive evaluation plan will be implemented. At a minimum, the performance targets include:

- 1. Decreasing the number of persons 9-20 years old in the HNCs that have used alcohol in the last 30 days by 5%.
- 2. Decreasing the number of persons 9-20 years old in the HNCs that report binge drinking by 5%.
- 3. Decreasing the number of persons 9-20 years old in HNCs who have experienced alcohol-involved motor vehicle crash fatalities and injuries by 5%.
- 4. Decreasing the number of persons 9-20 years old in the HNCs who have experienced alcohol-related school suspensions by 5%.
- 5. Providing training and technical assistance to 100% of the coalition and prevention coordinators at the LGEs where the HNCs are located.

2. Complete the following information for each objective and related	performance indicators that will be affected
by this request. (Note: Requested adjustments may involve revision	ns to existing objectives and performance
indicators or creation of new objectives and performance indicators.	Repeat this portion of the request form as
often as necessary.)	

긮		PERFORMANCE STANDARD						
LEVEL	PERFORMANCE INDICATOR NAME	CURRENT	ADJUSTMENT	REVISED				
3		FY 2018-2019	(+) OR (-)	FY 2018-2019				

JUSTIFICATION FOR ADJUSTMENT(S): Explain the necessity of the adjustment(s). There are no specific objectives that will be affected by this BA-7.

OBJECTIVE:

PERFORMANCE IMPACT OF MID-YEAR BUDGET ADJUSTMENT

3. Briefly explain any performance impacts other than or in addition to effects on objectives and performance indicators. (For example: Are there any anticipated direct or indirect effects on program management or service recipients? Will this BA-7 have a positive or negative impact on some other program or agency?)

The expectation is that implementing evidence-based strategies that address individual, relationship, environmental, and societal contexts will reduce local rates of underage drinking behaviors, consequences, and risk factors in the identified high-need communities. Then, over time, these community improvements may lead to changes in underage drinking at the state level.

4. If there are no performance impacts associated with this BA-7 request, then fully explain this lack of performance impact.

Performance impacts included above.

5. Describe the performance impacts of failure to approve this BA-7. (Be specific. Relate performance impacts to objectives and performance indicators.)

If the legislature fails to approve this BA-7, services will be unavailable within the identified high need communities that are specific to underage drinking among individuals 9-20 years of age. There are currently school-based programs and services targeting substance abuse, but LaPFS II will support the community by providing a systematic approach that engages community members and key stakeholders in addressing alcohol related misuse/abuse not only in the schools, but also within the community. The PFS II grant will give community members an opportunity to increase awareness and access to resources, but ultimately, the benefit of this grant is that it will help to save lives through implementation of processes, policies, and evidence-based strategies.

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 1 NAME: ADMINISTRATION AND SUPPORT

	CURRENT	REQUESTED	REQUESTED REVISED		USTMENT OUTY	ITYEAR PROJECTIONS	
MEANS OF FINANCING:	FY 2018-2019	ADJUSTMENT	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
GENERAL FUND BY:							
Direct	\$5,746,115	\$0	\$5,746,115	\$0	\$0	\$0	\$0
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Fees & Self-Generated	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Statutory Dedications *	\$53,014	\$0	\$53,014	\$0	\$0	\$0	\$0
FEDERAL FUNDS	\$1,699,496	\$0	\$1,699,496	\$0	\$0	\$0	\$0
TOTAL MOF	\$7,498,625	\$0	\$7,498,625	\$0	\$0	\$0	\$0
EXPENDITURES:							
Salaries	\$3,488,252	\$0	\$3,488,252	\$0	\$0	\$0	\$0
Other Compensation	\$363,170	\$0	\$363,170	\$0	\$0	\$0	\$0
Related Benefits				\$0	\$0	\$0	\$0
A STATE OF THE PERSON OF THE P	\$2,209,984	\$0 \$0	\$2,209,984	\$0	\$0	\$0	\$0
Travel	\$25,193	\$0	\$25,193		\$0 \$0	\$0	\$0
Operating Services	\$19,180	\$0	\$19,180	\$0			
Supplies	\$49,898	\$0	\$49,898	\$0	\$0	\$0	\$0
Professional Services	\$147,918	\$0	\$147,918	\$0	\$0	\$0	\$0
Other Charges	\$19,746	\$0	\$19,746	\$0	\$0	\$0	\$0
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$1,175,284	\$0	\$1,175,284	\$0	\$0	\$0	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$0	\$0
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$7,498,625	\$0	\$7,498,625	\$0	\$0	\$0	\$0
POSITIONS							
Classified	41	0	41	0	0	0	0
Unclassified	2	0	2	0	0	0	0
TOTAL T.O. POSITIONS	43	0	43	0	0	0	0
OTHER CHARGES POSITIONS	0	0	0	0	0	0	0
NON-TO FTE POSITIONS	5	0	5	0	0	0	0
TOTAL POSITIONS	48	0	48	0	0	0	0
Statutory Dedications:			44			#0	1 00
Gaming Fund (H10) Tobacco Tax Fund (E32)	\$0 \$53,014	\$0 \$0	\$0 \$53,014	\$0 \$0	\$0 \$0	\$0 \$0	\$0
[Select Statutory Dedication]	\$55,014	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0 \$0	\$0 \$0	\$(
[Select Statutory Dedication] [Select Statutory Dedication]	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0	\$0	

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 1 NAME:

ADMINISTRATION AND SUPPORT

MEANS OF FINANCING:	State General Fund	Interagency Transfers	Fees & Self- Generated Revenues	Statutory Dedications	Federal Funds	TOTAL
AMOUNT	\$0	\$0	\$0	\$0	\$0	\$0
EXPENDITURES:						
Salaries	\$0	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0
Other Charges	\$0	\$0	\$0	\$0	\$0	\$0
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$0
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$0	\$0	\$0	\$0	\$0	\$0
OVER / (UNDER)	\$0	\$0	\$0	\$0	\$0	\$0

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

MEANS OF FINANCING:		DEGLEGIED	REVISED	ADJUSTMENT OUTYEAR PROJECTIONS				
	CURRENT FY 2018-2019	REQUESTED ADJUSTMENT	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023	
GENERAL FUND BY:								
Direct	\$11,623,156	\$0	\$11,623,156	\$0	\$0	\$0	\$0	
Interagency Transfers	\$5,375,108	\$0	\$5,375,108	\$0	\$0	\$0	\$0	
Fees & Self-Generated	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Statutory Dedications *	\$4,843,398	\$0	\$4,843,398	\$0	\$0	\$0	\$0	
FEDERAL FUNDS	\$51,503,237	\$1,809,768	\$53,313,005	\$2,260,000	\$2,260,000	\$2,260,000	\$2,260,000	
TOTAL MOF	\$73,344,899	\$1,809,768	\$75,154,667	\$2,260,000	\$2,260,000	\$2,260,000	\$2,260,000	
EXPENDITURES:								
Salaries	\$3,336,335	\$0	\$3,336,335	\$0	\$0	\$0	\$0	
191000000000000000000000000000000000000				\$0 \$0	\$0	\$0	\$0	
Other Compensation	\$1,236,761	\$0	\$1,236,761		217	\$0	\$0	
Related Benefits	\$4,481,296	\$0	\$4,481,296	\$0	\$0	\$0		
Travel	\$56,059	\$0	\$56,059	\$0	\$0		\$0	
Operating Services	\$210,241	\$0	\$210,241	\$0	\$0	\$0	\$0	
Supplies	\$182,855	\$0	\$182,855	\$0	\$0	\$0	\$0	
Professional Services	\$162,036	\$0	\$162,036	\$0	\$0	\$0	\$0	
Other Charges	\$20,555,760	\$809,768	\$21,365,528	\$1,010,000	\$1,010,000	\$1,010,000	\$1,010,000	
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Interagency Transfers	\$43,123,556	\$1,000,000	\$44,123,556	\$1,250,000	\$1,250,000	\$1,250,000	\$1,250,000	
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
TOTAL EXPENDITURES	\$73,344,899	\$1,809,768	\$75,154,667	\$2,260,000	\$2,260,000	\$2,260,000	\$2,260,000	
POSITIONS								
Classified	38	0	38	0	0	0	0	
Unclassified	0	0	0	0	0	0	0	
TOTAL T.O. POSITIONS	38	0	38	0	0	0	0	
OTHER CHARGES POSITIONS	6	0	6	0	0	0	0	
307				0	0	0	0	
NON-TO FTE POSITIONS	50	0	50 94	0	0	0	0	
TOTAL POSITIONS	94	0	94	0	U			
Statutory Dedications:	40 -22 25		40 500 075	00	60	60	\$0	
Gaming Fund (H10) Tobacco Tax Fund (E32)	\$2,583,873 \$2,259,525	\$0 \$0	\$2,583,873 \$2,259,525	\$0 \$0	\$0 \$0	\$0 \$0	\$(
[Select Statutory Dedication]	\$2,259,525	\$0	\$2,239,323	\$0	\$0	\$0	\$0	
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$(
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$(
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$(
[Select Statutory Dedication]	\$0	\$0	\$0	\$0 \$0	\$0 \$0	\$0	\$(

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 2 NAME: BH COMMUNITY

MEANS OF FINANCING:	State General Fund	Interagency Transfers	Fees & Self- Generated Revenues	Statutory Dedications	Federal Funds	TOTAL
AMOUNT	\$0	\$0	\$0	\$0	\$1,809,768	\$1,809,768
EXPENDITURES:						
Salaries	\$0	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0
Other Charges	\$0	\$0	\$0	\$0	\$809,768	\$809,768
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$0	\$0	\$0	\$0	\$1,000,000	\$1,000,000
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$0
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$0	\$0	\$0	\$0	\$1,809,768	\$1,809,768
OVER / (UNDER)	\$0	\$0	\$0	\$0	\$0	\$0

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 3 NAME: HOSPITAL BASED TREATMENT

Tell of the State of the Control of	CURRENT	REQUESTED	REVISED	ADJI	EAR PROJECTI	ONS	
MEANS OF FINANCING:	FY 2018-2019	ADJUSTMENT	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
GENERAL FUND BY:							
Direct	\$94,418,080	\$0	\$94,418,080	\$0	\$0	\$0	\$0
Interagency Transfers	\$83,328,608	\$0	\$83,328,608	\$0	\$0	\$0	\$0
Fees & Self-Generated	\$485,309	\$0	\$485,309	\$0	\$0	\$0	\$0
Statutory Dedications *	\$302,212	\$0	\$302,212	\$0	\$0	\$0	\$0
FEDERAL FUNDS	\$985,174	\$0	\$985,174	\$0	\$0	\$0	\$0
ACTION TO THE POLICY OF THE PROPERTY OF THE PR				\$0	\$0	\$0	\$0
TOTAL MOF	\$179,519,383	\$0	\$179,519,383	\$0	ΨŪ	40	Ψ
EXPENDITURES:							
Salaries	\$78,488,046	\$0	\$78,488,046	\$0	\$0	\$0	\$0
Other Compensation	\$2,690,903	\$0	\$2,690,903	\$0	\$0	\$0	\$0
Related Benefits	\$47,121,867	\$0	\$47,121,867	\$0	\$0	\$0	\$0
Travel	\$149,919	\$0	\$149,919	\$0	\$0	\$0	\$(
Operating Services	\$10,761,109	\$0	\$10,761,109	\$0	\$0	\$0	\$0
Supplies	\$9,674,264	\$0	\$9,674,264	\$0	\$0	\$0	\$0
Professional Services	\$7,546,238	\$0	\$7,546,238	\$0	\$0	\$0	\$0
Other Charges	\$8,633,427	\$0	\$8,633,427	\$0	\$0	\$0	\$0
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$12,843,726	\$0	\$12,843,726	\$0	\$0	\$0	\$0
	\$399,527	\$0	\$399,527	\$0	\$0	\$0	\$(
Acquisitions		\$0	\$1,210,357	\$0	\$0	\$0	\$(
Major Repairs	\$1,210,357			\$0	\$0	\$0	\$(
UNALLOTTED	\$0	\$0	\$0			\$0	\$(
TOTAL EXPENDITURES	\$179,519,383	\$0	\$179,519,383	\$0	\$0	\$0	1 0
POSITIONS							
Classified	1,561	0	1,561	0	0	0	(
Unclassified	12	0	12	0	0	0	(
TOTAL T.O. POSITIONS	1,573	0	1,573	0	0	0	
OTHER CHARGES POSITIONS	0	0	0	0	0	0	
NON-TO FTE POSITIONS	84	0	84	0	0	0	
TOTAL POSITIONS	1,657	0	1,657	0	0	0	
* Statutory Dedications:							
Gaming Fund (H10)	\$0	\$0	\$0	\$0	\$0	\$0	\$
Tobacco Tax Fund (E32)	\$0	\$0 \$0	\$0 \$302,212	\$0 \$0	\$0 \$0	\$0 \$0	
Health Care Fund (XXX) [Select Statutory Dedication]	\$302,212 \$0	\$0	\$302,212	\$0	\$0	\$0	
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0		
[Select Statutory Dedication]	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0		

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 3 NAME: HOSPITAL BASED TREATMENT

MEANS OF FINANCING:	State General Fund	Interagency Transfers	Fees & Self- Generated Revenues	Statutory Dedications	Federal Funds	TOTAL
AMOUNT	\$0	\$0	\$0	\$0	\$0	\$0
EXPENDITURES:						
Salaries	\$0	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0
Other Charges	\$0	\$0	\$0	\$0	\$0	\$0
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$0
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$0
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$0	\$0	\$0	\$0	\$0	\$0
OVER / (UNDER)	\$0	\$0	\$0	\$0	\$0	\$0

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 4 NAME: AUXILIARY

CURRENT	REQUESTED	REQUESTED REVISED	ADJUSTMENT OUTYEAR PROJECTIONS			
FY 2018-2019	ADJUSTMENT	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
\$0	\$0	\$0	\$0	\$0	\$0	\$0
			\$0	\$0	\$0	\$0
						\$0
20021000						\$0
						\$0
\$20,000	\$0	\$20,000	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
		- 1		\$0	\$0	\$0
						\$0
Car.						\$0
						\$0
						\$0
						\$0
						. 37
\$20,000	\$0	\$20,000				\$0
\$0	\$0	\$0	\$0	\$0		\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
\$0	\$0	\$0	\$0	\$0	\$0	\$0
				\$0	\$0	\$(
Ψ20,000	4.	720,000				
0	0	0	0	0	0	
0	0	0	0	0	0	(
0	0	0	0	0	0	(
0	0	0	0	0	0	
			0	0	0	
			0	0	0	
	\$0 \$0 \$0 \$0 \$0 \$0 \$20,000 \$0 \$0 \$0 \$20,000	\$0 \$0 \$20,000 \$	\$0 \$0 \$0 \$0 \$20,000 \$0 \$20,000 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 4 NAME: AUXILIARY

MEANS OF FINANCING:	State General Fund	Interagency Transfers	Fees & Self- Generated Revenues	Statutory Dedications	Federal Funds	TOTAL \$0	
AMOUNT	\$0	\$0	\$0	\$0	\$0		
EXPENDITURES:		_					
Salaries	\$0	\$0	\$0	\$0	\$0	\$0	
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0	
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$0	
Travel	\$0	\$0	\$0	\$0	\$0	\$0	
Operating Services	\$0	\$0	\$0	\$0	\$0	\$0	
Supplies	\$0	\$0	\$0	\$0	\$0	\$0	
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0	
Other Charges	\$0	\$0	\$0	\$0	\$0	\$0	
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0	
Interagency Transfers	\$0	\$0	\$0	\$0	\$0	\$0	
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$0	
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$0	
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0	
TOTAL EXPENDITURES	\$0	\$0	\$0	\$0	\$0	\$0	
OVER / (UNDER)	\$0	\$0	\$0	\$0	\$0	\$0	

DEPARTMENT: Louisiana Department of Health			FOR OPB USE ONLY					
AGENCY: Office of Behavorial Health			OPB LOG NUMBER		AGENDA NUMBER			
SCHEDULE NUMBER: 09-330			122		4 A			
SUBMISSION DATE: September	Approval and Authority:							
AGENCY BA-7 NUMBER: #6 STR	Approved by the Joint Legislative Committee on the Budget							
HEAD OF BUDGET UNIT: Karen S								
TITLE: Assistant Secretary			Comm	ittee on	the budget			
SIGNATURE (Certifies that the information pour knowledge):	rovided is correct and true	to the best of	DATE: <u>/0 - /</u>	9-18	J. 41-			
MEANS OF FINANCING	CURRENT FY 2018-2019		ADJUSTMENT (+) or (-)		REVISED FY 2018-2019			
GENERAL FUND BY:								
DIRECT	\$111,787,351			\$0		787,351		
INTERAGENCY TRANSFERS	\$88	,703,716		\$0		703,716		
FEES & SELF-GENERATED	\$505,309		\$0		\$505,309			
STATUTORY DEDICATIONS	\$5,198,624		\$0		\$5,198,624			
Compulsive & Problem Gaming Fund	\$2,583,873		\$0		\$2,583,87			
(H10) Tobacco Tax Health Care Fund (E32)		\$2,312,539		\$0		2,312,539		
Subtotal of Dedications from Page 2	\$302,212		\$0		\$302,212			
FEDERAL	\$54,187,907		\$3,749,879		\$57,937,786			
TOTAL	\$260,382,907		\$	\$3,749,879		132,786		
AUTHORIZED POSITIONS	1,654			0		1,654		
AUTHORIZED OTHER CHARGES	6		0					
NON-TO FTE POSITIONS		139	0		139			
TOTAL POSITIONS		1,799	0		1,799			
PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS		
PROGRAM NAME:								
ADMINISTRATION AND SUPPORT	\$7,498,625	48	\$0	0	\$7,498,625	48		
BH COMMUNITY	\$73,344,899	94	\$3,749,879	0	\$77,094,778	94		
HOSPITAL BASED TREATMENT	\$179,519,383	1,657	\$0	0	\$179,519,383	1,657		
AUXILIARY	\$20,000	0	\$0	0	\$20,000	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
Subtotal of programs from Page 2:	\$0	0	\$0	0	\$0	0		
TOTAL	\$260,382,907	1,799	\$3,749,879	0	\$264,132,786	1,799		

DEPARTMENT: Louisiana Department of Health	FOR OPB USE ONLY		
AGENCY: Office of Behavorial Health	OPB LOG NUMBER	AGENDA NUMBER	
SCHEDULE NUMBER: 09-330		· · · · · · · · · · · · · · · · · · ·	
SUBMISSION DATE: September 18, 2018	ADDENDUM TO PAGE 1		
AGENCY BA-7 NUMBER: #6 STR Carryforward	ADDENDOM	TO FAGL I	

MEANS OF FINANCING	CURRENT FY 2018-2019	ADJUSTMENT (+) or (-)	REVISED FY 2018-2019	
GENERAL FUND BY:				
STATUTORY DEDICATIONS				
Health Care Fund (XXX)	\$302,212	\$0	\$302,212	
[Select Statutory Dedication]	\$0	\$0	\$0	
[Select Statutory Dedication]	\$0	\$0	\$0	
[Select Statutory Dedication]	\$0	\$0	\$0	
[Select Statutory Dedication]	\$0	\$0	\$0	
[Select Statutory Dedication]	\$0	\$0	\$0	
SUBTOTAL (to Page 1)	\$302,212	\$0	\$302,212	

PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS
PROGRAM NAME:		\$ 1				
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	C
	\$0	0	\$0	0	\$0	O
	\$0	0	\$0	0	\$0	C
	\$0	0	\$0	0	\$0	C
	\$0	0	\$0	0	\$0	C
SUBTOTAL (to Page 1)	\$0	0	\$0	0	\$0	0

Policy and Procedure Memorandum No. 52, Revised, requires that all Requests for Changes in Appropriation be fully documented. At a minimum, the following questions and statements must be answered. Use Continuation Sheets as needed. FAILURE TO ANSWER ALL QUESTIONS COMPLETELY WILL BE CAUSE TO RETURN THIS DOCUMENT WITHOUT ACTION.

1. What is the source of funding (if other than General Fund (Direct))? Specifically identify any grant or public law and the purposes of the funds, if applicable. A copy of any grant application and the notice of approved grant or appropriation must accompany the BA-7. What are the expenditure restrictions of the funds?

OBH received the federally-funded Louisiana Opioid State Targeted Response (STR) Grant from 05/01/2017 through 04/30/2019 for a total of \$16,335,942. This BA-7 is necessary to receive the federal budget authority for the unobligated balance of \$3,749,879 (federal carryforward). See attached award letter dated September 9, 2018.

2. Enter the financial impact of the requested adjustment for the next four fiscal years.

MEANS OF FINANCING OR EXPENDITURE	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
GENERAL FUND BY:	·				
DIRECT	\$0	\$0	\$0	\$0	\$0
INTERAGENCY TRANSFERS	\$0	\$0	\$0	\$0	\$0
FEES & SELF-GENERATED	\$0	\$0	\$0	\$0	\$0
STATUTORY DEDICATIONS	\$0	\$0	\$0	\$0	\$0
FEDERAL	\$3,749,879	\$0	\$0	\$0	\$0
TOTAL	\$3,749,879	\$0	\$0	\$0	\$0

3. If this action requires additional personnel, provide a detailed explanation below
No additional personnel are required.

4. Explain why this request can't be postponed for consideration in the agency's budget request for next fiscal year.

Carryforward funds may only be used through April 30, 2019.

5. Is this an after the fact BA-7, e.g.; have expenditures been made toward the program this BA-7 is for? If yes, explain per PPM No.52.

This is not an after the fact BA-7.

PERFORMANCE IMPACT OF MID-YEAR BUDGET ADJUSTMENT

1. Identify and explain the programmatic impacts (positive or negative) that will result from the approval of this BA-7.

OBH will be unable to complete the deliverables of the STR grant.

2. Complete the following information for each objective and related performance indicators that will be affected by this request. (Note: Requested adjustments may involve revisions to existing objectives and performance indicators or creation of new objectives and performance indicators. Repeat this portion of the request form as often as necessary.)

OBJECTIVE:

_1	PERFORMANCE INDICATOR NAME	PERFORMANCE STANDARD			
LEVE		CURRENT FY 2018-2019	ADJUSTMENT (+) OR (-)	REVISED FY 2018-2019	

JUSTIFICATION FOR ADJUSTMENT(S): Explain the necessity of the adjustment(s). There are no specific objectives that will be affected by this BA-7.

3. Briefly explain any performance impacts other than or in addition to effects on objectives and performance indicators. (For example: Are there any anticipated direct or indirect effects on program management or service recipients? Will this BA-7 have a positive or negative impact on some other program or agency?)

Over 4,000 additional Narcan kits to be distributed; over 850 clients will receive sustainability services; eight Medication Assisted Treatment (MAT) beds added; and MAT and treatment services to up to 600 incarcerated individuals with Opioid Use Disorder.

4. If there are no performance impacts associated with this BA-7 request, then fully explain this lack of performance impact.

Performance impacts are shown above.

5. Describe the performance impacts of failure to approve this BA-7. (Be specific. Relate performance impacts to objectives and performance indicators.)

BA-7 FORM (6/1/2017) Page 4

PERFORMANCE IMPACT OF MID-YEAR BUDGET ADJUSTMENT

In Louisiana, behavioral health care services for indigent/uninsured individuals are funded through state block grant dollars, Statutorily Dedicated funds (tobacco and gaming services), State General Funds, and Temporary Assistance for Needy Families (TANF) in addition to the opioid specific MAT-PDOA grant. This funding is currently encumbered and insufficient to pay for an adequate number of MAT providers, beds, or facilities to address the opioid epidemic in Louisiana, particularly in the New Orleans area – Orleans and Jefferson parishes – which have been hardest hit by the epidemic.

The Louisiana STR carryover funding will be used to increase treatment capacity at the Behavioral Health Group OTPs in Orleans and Jefferson parishes that support the organized delivery and coordination of medical, behavioral, social and recovery support services for the indigent/uninsured population in this region as demonstrated by the overwhelming demand. If the BA-7 is not approved, this need for MAT and treatment services will not be met.

If unobligated funding is not received via Legislative approval, the STR program will be unable to distribute Naloxone where needed, which is to serve individuals/families currently served through the OTPs and the OBOT providers that are unable to acquire a kit. Distribution of Naloxone is a nationally recognized indicator and intervention to reducing opioid deaths. Also, incarcerated individuals with OUD will be impacted by not receiving urgent pharmacologic and psychosocial services needed to address their addiction, which increases the risk of potential overdose and death upon reentry.

Other impacts associated with lack of funding would be the loss of enhanced Peer Support training, equipment and supplies to support this training that would provide additional Peer Support Specialists, new evidence-based practice training and Peer supervisory training within the Louisiana STR program. It would be a lost opportunity to build upon existing strengths and supports.

DEPARTMENT: Health and Hospitals			FOR OPB USE ONLY					
AGENCY: ImCal Human Services	Authority		OPB LOG NUM	MBER	AGENDA NUME	BER		
SCHEDULE NUMBER: 09-375		24040			20			
SUBMISSION DATE:			Approval and Authority	;				
AGENCY BA-7 NUMBER: 2	AGENCY BA-7 NUMBER: 2							
HEAD OF BUDGET UNIT: Tanya McGee TITLE: Executive Director			Approve	ed by th	e Joint Legis	slativ.		
			Com	imittee	on the Budg	et		
SIGNATURE (Certifies that the information pro your knowledge):	ovided is correct and true t	to the best of	DATE: <u>/0</u> -					
MEANS OF FINANCING	CURRENT FY 2018-2019		ADJUSTME (+) or (-		REVISED FY 2018-2019			
GENERAL FUND BY:								
DIRECT	√ \$8	,087,821		\$0	\$8,	087,821		
INTERAGENCY TRANSFERS	\$2	,400,428		\$100,000	\$2,	500,428		
FEES & SELF-GENERATED	\$1,091,337			\$0	\$1,	091,337		
STATUTORY DEDICATIONS	\$0			\$0		\$0		
[Select Statutory Dedication]		\$0		\$0		\$0		
[Select Statutory Dedication] Subtotal of Dedications from Page 2	\$0 \$0		\$0 \$0		\$6			
FEDERAL	\$399,949			\$0		399,949		
TOTAL	\$11,979,535			\$100,000		079,535		
AUTHORIZED POSITIONS	0			0		079,555		
AUTHORIZED OTHER CHARGES	82			0		82		
NON-TO FTE POSITIONS		0		0		02		
TOTAL POSITIONS		82		0		82		
TOTALTOOMORD		02		0		02		
PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS		
PROGRAM NAME:								
ImCal HSA	\$11,979,535	0	\$100,000	0	\$12,079,535	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
	\$0	0	\$0	0	\$0	0		
Subtotal of programs from Page 2:	\$0	0	\$0	0	\$0	0		
TOTAL	\$11,979,535	0	\$100,000	0	\$12,079,535	0		

DEPARTMENT: Health and Hospitals	FOR OPB USE ONLY		
AGENCY: ImCal Human Services Authority	OPB LOG NUMBER AGENDA NUMBER		
SCHEDULE NUMBER: 09-375			
SUBMISSION DATE:	ADDENDUM TO DAGE 4		
AGENCY BA-7 NUMBER: 2	ADDENDUM TO PAGE 1		

The subtotal will automatically be transport of FINANCING	CURRENT	ADJUSTMENT	REVISED
	FY 2018-2019	(+) or (-)	FY 2018-2019
GENERAL FUND BY:			
STATUTORY DEDICATIONS			
[Select Statutory Dedication]	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0
SUBTOTAL (to Page 1)	\$0	\$0	\$0

PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS
PROGRAM NAME:						
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
SUBTOTAL (to Page 1)	\$0	0	\$0	0	\$0	0

BA-7 FORM (7/1/2018) Page 1

Policy and Procedure Memorandum No. 52, Revised, requires that all Requests for Changes in Appropriation be fully documented. At a minimum, the following questions and statements must be answered. Use Continuation Sheets as needed. FAILURE TO ANSWER ALL QUESTIONS COMPLETELY WILL BE CAUSE TO RETURN THIS DOCUMENT WITHOUT ACTION.

1. What is the source of funding (if other than General Fund (Direct))? Specifically identify any grant or public law and the purposes of the funds, if applicable. A copy of any grant application and the notice of approved grant or appropriation must accompany the BA-7. What are the expenditure restrictions of the funds?

The source of funding is IAT. This BA7 is generated to balance the IAT expected from LA Dept of Health, Office of Behavioral Health (OBH) for Partnership for Success II Grant for \$100,000 made after the FY19 Appropriation. This is a companion BA-7 to the Office of Behavioral Health's BA-7 #5.

2. Enter the financial impact of the requested adjustment for the next four fiscal years.

MEANS OF FINANCING	EV 2040 2040	FV 2040 2000	FV 0000 0004	EV 0004 0000	FV 0000 0000
OR EXPENDITURE	P1 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
GENERAL FUND BY:					
DIRECT	\$0	\$0	\$0	\$0	\$0
INTERAGENCY TRANSFERS	\$100,000	\$0	\$0	\$0	\$0
FEES & SELF-GENERATED	\$0	. \$0	\$0	\$0	\$0
STATUTORY DEDICATIONS	\$0	\$0	, \$0	\$0	\$0
FEDERAL	\$0	\$0	\$0	\$ 0	\$0
TOTAL	\$100,000	\$0	\$0	\$0	\$0

3. If this action requires additional personnel, provide a detailed explanation below:

This BA-7 does not require additional personnel.

4. Explain why this request can't be postponed for consideration in the agency's budget request for next fiscal year.

This is a companion BA-7 to the Office of Behavioral Health's BA-7 #5. Postponing this request will potentially jeopardize the grant awards.

5. Is this an after the fact BA-7, e.g.; have expenditures been made toward the program this BA-7 is for? If yes, explain per PPM No.52.

This is not an after the fact BA-7.

DEPARTMENT: LOUISIANA DEF	PARTMENT OF HE	ALTH		FOR OPB	USE ONLY		
AGENCY: 376 CENTRAL LA HUI	MAN SERVICE DIS	STRICT	OPB LOG NU	IMBER	AGENDA NUM	/BER	
SCHEDULE NUMBER:			1 110		20		
SUBMISSION DATE: 9/20/18		, ,	Approval and Authority:				
AGENCY BA-7 NUMBER: #1 Inci	roseo IAT						
(Companion to OBH)					e Joint Legis		
HEAD OF BUDGET UNIT: Michael R. DeCaire, Ph.D. TITLE: Executive Director			Com	mittee	on the Budg	et	
SIGNATURE (Certifies that the information your knowledge):	provided is correct and true	to the best of	DATE: 70~	19-20	18 L. S.		
MEANS OF FINANCING	CURRENT FY 2018-2019		ADJUSTM (+) or (ADJUSTMENT		REVISED FY 2018-2019	
GENERAL FUND BY:							
DIRECT	/ s	9,672,970		\$0	\$9	,672,970	
INTERAGENCY TRANSFERS		3,816,387		\$100,000	-	,916,387	
FEES & SELF-GENERATED		\$1,502,783		\$100,000		,502,783	
STATUTORY DEDICATIONS	\$0		\$0				
[Select Statutory Dedication]	\$0			\$0	\$		
[Select Statutory Dedication]	\$0		- \$0		\$0		
Subtotal of Dedications from Page 2	\$0		\$0		\$0		
FEDERAL	\$0			\$0		\$0	
TOTAL	\$14,992,140			\$100,000		\$15,092,140	
AUTHORIZED POSITIONS	0			0	0		
AUTHORIZED OTHER CHARGES	./ 85		0		88		
NON-TO FTE POSITIONS		0		0		0	
TOTAL POSITIONS		85	0		85		
PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS	
PROGRAM NAME:							
Central LA Human Service District	\$14,992,140	85	\$100,000	0	\$15,092,140	85	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0			
					\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
ubtotal of programs from Page 2:	\$0	0	\$0	0	\$0	0	
TOTAL	\$14,992,140	85	\$100,000	0	\$15,092,140	85	

DEPARTMENT: LOUISIANA DEPARTMENT OF HEALTH	FOR ORBUSE ONLY
AGENCY: 376 CENTRAL LA HUMAN SERVICE DISTRICT	OPB LOG NUMBER AGENDA NUMBER
SCHEDULE NUMBER:	
SUBMISSION DATE: 9/20/18	
AGENCY BA-7 NUMBER: #1 Increase IAT	ADDENDUM TO PAGE 1

MEANS OF FINANCING	FY 2018-2019	ADJUSTMENT (+) or (-)	REVISED FY 2018-2019
GENERAL FUND BY:	er besonderen der der Besterrer betretten er der besonderen. Der Besterrer besondere besondere besterrer besonderen besonderen.		a gradina da manara kanaran kalan. Banaran bi kanal manaran bi kanaran banaran
STATUTORY DEDICATIONS			•
[Select Statutory Dedication]	\$0	\$0	\$(
[Select Statutory Dedication]	\$0	\$0	\$(
[Select Statutory Dedication]	\$0	\$0	\$(
[Select Statutory Dedication]	\$0	\$0	\$(
[Select Statutory Dedication]	\$0	\$0	\$(
[Select Statutory Dedication]	\$0	\$0	\$6
SUBTOTAL (to Page 1)	\$0	\$0	\$(

Use this section for additional Program Names, if needed.	_
The subtotal will automatically be transferred to Page 1.	

PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARS	POS
PROGRAM NAME:						
	\$0	0	\$0	0	\$0	О
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
SUBTOTAL (to Page 1)	\$0	0	\$0	0	\$0	0

Policy and Procedure Memorandum No. 52, Revised, requires that all Requests for Changes in Appropriation be fully documented. At a minimum, the following questions and statements must be answered. Use Continuation Sheets as needed. FAILURE TO ANSWER ALL QUESTIONS COMPLETELY WILL BE CAUSE TO RETURN THIS DOCUMENT WITHOUT ACTION.

1. What is the source of funding (if other than General Fund (Direct))? Specifically identify any grant or public law and the purposes of the funds, if applicable. A copy of any grant application and the notice of approved grant or appropriation must accompany the BA-7. What are the expenditure restrictions of the funds?

The source of funding is IAT from the Office of Behavioral Health for the following grant:

\$100,000 - Partnership for Success II (PFS II) grant (This is a companion BA-7 to the Office of Behavioral Health's BA-7 #5.)

2. Enter the financial impact of the requested adjustment for the next four fiscal years.

MEANS OF FINANCING	EV 2018 2010	EV 2010 2020	EV 2020 2021	EV 2021 2022	EV 2022 2023	
OR EXPENDITURE	F1 2016-2019	FY 2018-2019 FY 2019-2020 F		F 1 2021-2022	F1 2022-2023	
GENERAL FUND BY:		·				
DIRECT	\$0	\$0	\$0	\$0	\$0	
INTERAGENCY TRANSFERS	\$100,000	\$0	\$0	\$0	\$0	
FEES & SELF-GENERATED	\$0	\$0	\$0	\$0	\$0	
STATUTORY DEDICATIONS	\$0	\$0	\$0	\$0	\$0	
FEDERAL	\$0	\$0	\$0	\$0	\$0	
TOTAL	\$100,000	\$0	\$0	\$0	\$0	

3. If this action requires additional personnel, provide a detailed explanation below:

No - this BA-7 does not require additional personnel.

4. Explain why this request can't be postponed for consideration in the agency's budget request for next fiscal year.

This is a companion BA-7 to the Office of Behavioral Health's BA-7 #5. Postponing this request will potentially jeopardize the grant award.

5. Is this an after the fact BA-7, e.g.; have expenditures been made toward the program this BA-7 is for? If yes, explain per PPM No.52.

This is not an after the fact BA-7.

PERFORMANCE IMPACT OF MID-YEAR BUDGET ADJUSTMENT

1. Identify and explain the programmatic impacts (positive or negative) that will result from the approval of this BA-7.

Approval of this BA-7 will result in the district having sufficient budget authority for FY-19 to facilitate all IAT funding that the authority is allocated to receive.

2. Complete the following information for each objective and related performance indicators that will be affected by this request. (Note: Requested adjustments may involve revisions to existing objectives and performance indicators or creation of new objectives and performance indicators. Repeat this portion of the request form as often as necessary.)

4		PERFORMANCE STANDARD					
LEVEL	PERFORMANCE INDICATOR NAME	CURRENT FY 2018-2019	ADJUSTMENT (+) OR (-)	REVISED FY 2018-2019			
	76						

JUSTIFICATION FOR ADJUSTMENT(S): Explain the necessity of the adjustment(s).

There are no impacts to Performance Indicators related to this BA-7.

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3. Briefly explain any performance impacts other than or in addition to effects on objectives and performance indicators. (For example: Are there any anticipated direct or indirect effects on program management or service recipients? Will this BA-7 have a positive or negative impact on some other program or agency?)

The increase in funding will have a positive impact to individuals in the CLHSD catchment area from outreach efforts related to the Partnership for Success II (PFS II) Grant for substance use prevention efforts/outreaches.

4. If there are no performance impacts associated with this BA-7 request, then fully explain this lack of performance impact.

The performance impacts associated with this request are stated.

5. Describe the performance impacts of failure to approve this BA-7. (Be specific. Relate performance impacts to objectives and performance indicators.)

Failure to approve this BA-7 will result in the district having insufficient budget authority to receive the reallocated IAT means of finance provided to the district.

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 1 NAME: Central LA Human Service District

MEANS OF FINANCING:	CURRENT	REQUESTED	REVISED	ADJI	USTMENT OUTY	EAR PROJECTI	ONS
MEANS OF FINANCING:	FY 2018-2019	ADJUSTMENT	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
GENERAL FUND BY:				drobenski stocki	le de orași		
Direct	\$9,672,970	\$0	\$9,672,970	\$0	\$0	\$0	\$ 0
Interagency Transfers	\$3,816,387	\$100,000	\$3,916,387	\$0	\$0	\$0	\$0
Fees & Self-Generated	\$1,502,783	\$0	\$1,502,783	\$0	\$0	\$0	\$0
Statutory Dedications *	\$0	\$0	\$0	\$0	\$0	\$0	\$0
FEDERAL FUNDS	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL MOF	\$14,992,140	\$100,000	\$15,092,140	\$0	\$0	\$0	\$0
EXPENDITURES:			ia dispersa da la				
Salaries	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Operating Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Supplies	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Professional Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Charges	\$14,933,165	\$100,000	\$15,033,165	\$0	\$0	\$0	\$0
Debt Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Interagency Transfers	\$58,975	\$0	\$58,975	\$0	\$0	\$0	\$0
Acquisitions	\$0 ;	\$0	\$0	\$0	\$0	\$0	\$0
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$0	\$0
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL EXPENDITURES	\$14,992,140	\$100,000	\$15,092,140	\$0	\$0	\$0	\$0
	V11,002,110	ψ.00,000	ψ10,032,140	Ψ υ		Ψ0	ΨΟ
POSITIONS							
Classified	0	0	0	0	0	0	0
Unclassified	0		0	0	0	0	0
TOTAL T.O. POSITIONS	0	0	0	0	0	0	0
OTHER CHARGES POSITIONS	85	0	85	0	0	0	0
NON-TO FTE POSITIONS	0	0	0	0	0	0	0
TOTAL POSITIONS	85	0	85	0	0	0	0
TOTALTOUTHORD		Weigner Volley				<u> </u>	U
<u>and a first of Hillians and </u>							
* Statutory Dedications:							
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0 \$0	\$0	\$0 \$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication]	\$0 \$0	\$0	\$0	\$0	\$0	\$0	\$0
[Select Statutory Dedication] [Select Statutory Dedication]	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0	\$0 \$0
[Select Statutory Dedication]	\$0	\$0	\$0 \$0	\$0 \$0	\$0	\$0 \$0	\$0 \$0
[Select Statutory Dedication]	\$0	\$0	\$0	\$0	\$0 \$0	\$0 \$0	\$0 \$0

PROGRAM LEVEL REQUEST FOR MID-YEAR BUDGET ADJUSTMENT

PROGRAM 1 NAME:

Central LA Human Service District

MEANS OF FINANCING:	State General Fund	Interagency Transfers	Fees & Self- Generated Revenues	Statutory Dedications	Federal Funds	TOTAL
AMOUNT	\$0	\$100,000	\$0	\$0	\$0	\$100,00
EXPENDITURES:						ijusijent ja
Salaries	\$0	\$0	\$0	\$ 0	\$0	\$
Other Compensation	\$0	\$0	\$0	\$0	\$0	\$
Related Benefits	\$0	\$0	\$0	\$0	\$0	\$
Travel	\$0	\$0	\$0	\$0	\$0	\$
Operating Services	\$0	\$0	\$0	\$0	\$0	\$
Supplies	\$0	\$0	\$0	\$0	\$0	\$
Professional Services	\$0	\$0	\$0	\$0	\$0	\$
Other Charges	\$0	\$100,000	\$0	\$0	\$0	\$100,00
Debt Services	\$0	\$0	\$0	\$0	\$0	\$
Interagency Transfers	\$0	\$0	\$0	\$0	\$0 -	\$
Acquisitions	\$0	\$0	\$0	\$0	\$0	\$
Major Repairs	\$0	\$0	\$0	\$0	\$0	\$
UNALLOTTED	\$0	\$0	\$0	\$0	\$0	\$
TOTAL EXPENDITURES	\$0	\$100,000	\$0	\$0	\$0	\$100,00
OVER / (UNDER)	\$0	\$0	\$0	\$0	\$0	\$
POSITIONS	ikawa impropas	ng bag sagistor	e no se po tempo no ve	endirect place of electric	Bare Strucking	
Classified	0	0	0	0	0	
Unclassified	0	0	0	0	0	
TOTAL T.O. POSITIONS	0	0	0	0	0	
OTHER CHARGES POSITIONS	85	0	0	0	0	8
NON-TO FTE POSITIONS	0	0	0	. 0	0	
TOTAL POSITIONS	85	0	0	0	0	8:

BA-7 QUESTIONNAIRE

(Provide answers on the Questionnaire Analysis Form; answer all questions applicable to the requested budget adjustment.)

GENERAL PURPOSE

This BA-7 is a companion to BA-7 #5 or the Office of Behavioral Health (OBH), and is required to provide IAT budget authority to allow CLHSD to receive Federal grant funds totaling \$100,000 as IAT funding from OBH/LDH for the Partnership for Success II (PFS II) grant,

REVENUES

IAT - Federal Grants received from OBH as IAT funding for CLHSD

EXPENDITURES

Other Charges - \$100,000 (Object Code 3500)

OTHER

Agency Contact Information:

Dr. Michael R. DeCaire, Ph.D. Executive Director (318) 487-5191 michael.decaire@la.gov

Karin Shrader Chief Fiscal Officer (318) 487-5030 Karin.shrader@la.gov

BA-7 SUPPORT INFORMATION Page _____

DEPARTMENT: HEALTH AND HO	SPITALS		FOR OPB USE ONLY				
AGENCY: NORTHWEST LA HUMA	AN SERVICES DIS	STRICT	OPB LOG NUN	MBER	AGENDA NUM	BER	
SCHEDULE NUMBER: 09-377			119		2E		
SUBMISSION DATE: 9/20/18			Approval and Authority	:			
AGENCY BA-7 NUMBER: #2			1				
HEAD OF BUDGET UNIT: DOUG	EFFERSON				Joint Legisl		
TITLE: EXECUTIVE DIRECTOR	•		Committee on the Budget DATE: 10-19-2018 L.M.				
SIGNATURE (Certifies that the information proyour knowledge):	ovided is correct and true	to the best of					
MEANS OF FINANCING	CURREN FY 2018-2		ADJUSTME (+) or (-)	ADJUSTMENT (+) or (-)		REVISED FY 2018-2019	
GENERAL FUND BY:							
DIRECT	\$7	,670,686		\$0	\$7.	670,686	
INTERAGENCY TRANSFERS	\$4,532,623			\$100,000		632,623	
FEES & SELF-GENERATED	\$1,500,000			\$0		500,000	
STATUTORY DEDICATIONS	****	\$0		\$0	\$		
[Select Statutory Dedication]		\$0	\$0				
[Select Statutory Dedication]	\$0 \$0		\$0		\$		
Subtotal of Dedications from Page 2 FEDERAL	\$0		\$0 \$0			\$0	
TOTAL				\$100,000		\$0	
AUTHORIZED POSITIONS	\$13,703,309				\$13,	803,309	
AUTHORIZED OTHER CHARGES	7	0	0				
NON-TO FTE POSITIONS		98	0		9		
TOTAL POSITIONS		0		0	100	0	
TOTAL POSITIONS		98		0		98	
PROGRAM EXPENDITURES	DOLLARS	POS	DOLLARS	POS	DOLLARO	B00	
PROGRAM NAME:	DOLLARO		DOLLARS	PUS	DOLLARS	POS	
Executive Administration	\$0	0	\$0		**		
CDBG	\$0	0	\$0	0	\$0	0	
Auxiliary Account	\$0	0	\$0	0	\$0 \$0	0	
NLHSD	\$13,703,309	0	\$100,000	0	\$13,803,309	0	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$0	0	\$0	0	\$13,803,309	0	
	\$0	0	\$0	0		0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0	0	\$0	0	
	\$0	0	\$0		\$0	0	
	\$0			0	\$0	0	
Subtotal of programs from Page 2:	\$0 \$0	0	\$0	0	\$0	0	
		0	\$0	0	\$0	0	
TOTAL	\$13,703,309	0	\$100,000	0	\$13,803,309	0	

DEPARTMENT: HEALTH AND HOSPITALS	FOR OPB USE ONLY
AGENCY: NORTHWEST LA HUMAN SERVICES DISTRICT	OPB LOG NUMBER AGENDA NUMBER
SCHEDULE NUMBER: 09-377	
SUBMISSION DATE: 9/20/18	ADDONDIES TO DAGE 4
AGENCY BA-7 NUMBER: #2	ADDENDUM TO PAGE 1

MEANS OF FINANCING	CURRENT FY 2018-2019	ADJUSTMENT (+) or (-)	REVISED FY 2018-2019
GENERAL FUND BY:			
STATUTORY DEDICATIONS		Tálanin la la haireán la la ha ha fla falunta hairtá fla fhannt se é ann a go Lá, tímph i tímh a fhairí i tímh I	oran na tanga dia na aktawila na Afrika na Afrika dia Calumba na Afrika dia na da kata tinga na k
[Select Statutory Dedication]	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	\$(
[Select Statutory Dedication]	\$0	\$0	\$(
[Select Statutory Dedication]	\$0	\$0	\$0
[Select Statutory Dedication]	\$0	\$0	ş(
[Select Statutory Dedication]	\$0	\$0	\$(
SUBTOTAL (to Page 1)	\$0	\$0 l	\$0

The subtotal will automatically be PROGRAM EXPENDITURES		POS	DOLLARS	POS	DOLLARS	POS
PROGRAM NAME:						JOJ
	\$0	0	\$0	οŢ	\$0	0
######################################	\$0	0	\$0	0	\$0	0
- CHANNEL MAN CONTRACTOR OF THE CONTRACTOR OF TH	\$0	0	\$0	0	\$0	0
A A A A A A A A A A A A A A A A A A A	\$0	0	\$0	0	\$0	0
7724	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
	\$0	0	\$0	0	\$0	0
SUBTOTAL (to Page 1)	. \$0	0	\$0	0	\$0	0

Policy and Procedure Memorandum No. 52, Revised, requires that all Requests for Changes in Appropriation be fully documented. At a minimum, the following questions and statements must be answered. Use Continuation Sheets as needed. FAILURE TO ANSWER ALL QUESTIONS COMPLETELY WILL BE CAUSE TO RETURN THIS DOCUMENT WITHOUT ACTION.

1. What is the source of funding (if other than General Fund (Direct))? Specifically identify any grant or public law and the purposes of the funds, if applicable. A copy of any grant application and the notice of approved grant or appropriation must accompany the BA-7. What are the expenditure restrictions of the funds?

The source of funding is IAT. This BA7 is generated to balance the IAT expected from LA Dept of Health, Office of Behavioral Health (OBH) for Partnership for Success II Grant for \$100,000 made after the FY19 Appropriation. This is a companion BA-7 to the Office of Behavioral Health's BA-7 #5.

2. Enter the financial impact of the requested adjustment for the next four fiscal years.

MEANS OF FINANCING	FY 2018-2019	FY 2019-2020	FY 2020-2021	FY 2021-2022	FY 2022-2023
OR EXPENDITURE					
GENERAL FUND BY:					
DIRECT	\$0	\$0	\$0	\$0	\$0
INTERAGENCY TRANSFERS	\$100,000	\$0	\$0	\$0	\$0
FEES & SELF-GENERATED	. \$0	\$0	\$0	\$0	\$0
STATUTORY DEDICATIONS	\$0	\$ 0	\$ 0	\$0	\$0
FEDERAL	\$0	\$0	\$0	\$0	\$0
TOTAL	\$100,000	\$0	\$0	\$0	\$0

3. If this action requires additional personnel, provide a detailed explanation below:

This BA-7 does not require additional personnel.

4. Explain why this request can't be postponed for consideration in the agency's budget request for next fiscal year.

This is a companion BA-7 to the Office of Behavioral Health's BA-7 #5. Postponing this request will potentially jeopardize the grant awards.

5. Is this an after the fact BA-7, e.g.; have expenditures been made toward the program this BA-7 is for? If yes, explain per PPM No.52.

No - this is not an after the fact BA-7.