# **Department of Health and Hospitals**



#### **Department Description**

The mission of the Department of Health and Hospitals is to develop and provide health and medical services for the prevention of disease for the citizens of Louisiana, particularly those individuals who are indigent and uninsured, persons with mental illness, persons with developmental disabilities and those with addictive disorders.

The goals of the Department of Health and Hospitals are:

- I. To ensure access to medical services, preventive services and rehabilitative and habilitative services for eligible people who are in need of such while respecting budgetary constraints set by the legislature.
- II. To protect the health needs of the people of Louisiana and promote effective health practices.
- III. To ensure that appropriate and quality health care services are provided to the citizens of Louisiana.

For additional information, see:

#### Department of Health and Hospitals

# Department of Health and Hospitals Budget Summary

	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB
Means of Financing:						
State General Fund (Direct)	\$ 1,794,164,101	\$ 1,899,986,459	\$ 1,901,864,240	\$ 2,713,355,186	\$ 2,472,209,864	\$ 570,345,624



# Department of Health and Hospitals Budget Summary

	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB
State General Fund by:						
Total Interagency Transfers	387,344,513	474,842,213	477,300,223	476,753,084	454,599,970	(22,700,253)
Fees and Self-generated Revenues	142,885,198	196,845,821	196,845,821	196,927,611	201,108,182	4,262,361
Statutory Dedications	492,181,728	524,521,397	554,124,189	324,868,100	424,557,369	(129,566,820)
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	5,138,520,286	5,822,081,146	5,802,642,647	5,338,385,741	5,326,105,148	(476,537,499)
<b>Total Means of Financing</b>	\$ 7,955,095,826	\$ 8,918,277,036	\$ 8,932,777,120	\$ 9,050,289,722	\$ 8,878,580,533	\$ (54,196,587)
Expenditures & Request:						
Jefferson Parish Human Services Authority	\$ 22,666,193	\$ 25,996,855	\$ 25,996,855	\$ 26,835,795	\$ 24,494,706	\$ (1,502,149)
Florida Parishes Human Services Authority	19,638,223	20,113,201	20,600,858	21,082,567	19,415,214	(1,185,644)
Capital Area Human Services District	29,360,862	32,223,034	32,223,034	32,530,225	30,011,253	(2,211,781)
Developmental Disabilities Council	1,763,744	1,977,796	1,977,796	1,941,900	1,892,842	(84,954)
Metropolitan Human Services District	26,731,154	33,085,322	33,215,571	31,711,337	29,590,560	(3,625,011)
Medical Vendor Administration	245,749,932	332,409,506	332,742,062	375,955,193	328,930,497	(3,811,565)
Medical Vendor Payments	6,635,980,082	7,424,313,179	7,424,313,179	7,499,259,921	7,446,032,094	21,718,915
Office of the Secretary	74,650,389	105,982,767	105,982,767	104,922,393	101,912,105	(4,070,662)
South Central Louisiana Human Services Authority	22,772,330	24,593,064	24,935,506	25,552,177	24,024,157	(911,349)
Northeast Delta Human Services Authority	0	0	0	0	11,543,165	11,543,165
Office of Aging and Adult Services	44,822,430	54,529,003	54,535,797	56,547,550	54,738,197	202,400
Louisiana Emergency Response Network Board	2,371,528	2,933,373	2,957,141	2,975,861	1,758,479	(1,198,662)
Acadiana Area Human Services District	0	20,805,218	20,805,218	21,535,715	20,636,538	(168,680)
Office of Public Health	304,544,826	334,048,461	337,582,926	346,571,494	324,928,966	(12,653,960)
Office of Behavioral Health	300,740,305	316,037,415	325,287,253	313,233,913	271,610,057	(53,677,196)
Office for Citizens w/ Developmental Disabilities	223,303,828	189,228,842	189,621,157	189,633,681	157,665,052	(31,956,105)
Imperial Calcasieu Human Services Authority	0	0	0	0	8,613,148	8,613,148
Central Louisiana Human Services District	0	0	0	0	9,271,679	9,271,679
Northwest Louisiana Human Services District	0	0	0	0	11,511,824	11,511,824





# Department of Health and Hospitals Budget Summary

	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB
Total Expenditures & Request	\$ 7,955,095,826	\$ 8,918,277,036	\$ 8,932,777,120	\$ 9,050,289,722	\$ 8,878,580,533	\$ (54,196,587)
Authorized Full-Time Equiva	alents:					
Classified	8,335	6,600	6,602	6,318	5,680	(922)
Unclassified	123	118	116	116	92	(24)
Total FTEs	8,458	6,718	6,718	6,434	5,772	(946)



# 09-300 — Jefferson Parish Human Services Authority



# **Agency Description**

The Mission of Jefferson Parish Human Services Authority is to minimize the existence and disabling effects of mental illness, substance abuse, and developmental disabilities and to maximize opportunities for individuals and families affected by those conditions to achieve a better quality of life and to participate more fully within our community.

The goals of Jefferson Parish Human Services Authority Program are:

- I. To provide comprehensive services and supports which improve the quality of life and community participation for persons in crisis and/or with serious and persistent mental illness, emotional and behavioral disorders, addictive disorders, and/or developmental disabilities, while providing appropriate and best practices to individuals with less severe needs.
- II. To improve personal outcomes through effective implementation of best practices and data-driven decision-making.

In 1989, the Louisiana State Legislature passed RS 28:831, the enabling legislation that established Jefferson Parish Human Services Authority as a Local Governing Entity responsible for the administration, management and operation of mental health, addictive disorders, and developmental disabilities services for the residents of Jefferson Parish, Louisiana.

Governance of JPHSA is by a 12-member Board of Directors with nine members appointed by the Jefferson Parish Council and the remaining three members appointed by the Governor of Louisiana. Each Board member must possess experience in the areas of mental health, addictive disorders, or developmental disabilities and represent parents, consumers, advocacy groups, or serve as a professional in one of the areas. All members serve without compensation.

Administration of JPHSA is by an Executive Director, who is selected by the Board of Directors and is supported in administration and day-to-day operations by an Executive Management Team. This leadership strives to foster a culture of accountability and collaboration in an environment focused on evidence-based and best practices and the ongoing assessment of needs and monitoring of quality and efficacy. Success is defined by positive outcomes and customer satisfaction along with maximized efficiency and cost-effectiveness in the provision of services and supports.

The Jefferson Parish Human Services Authority has one program: Jefferson Parish Human Services Authority.



#### For additional information, see:

#### Jefferson Parish Human Services Authority

#### Jefferson Parish Human Services Authority Budget Summary

	Prior Year Actuals FY 2011-2012		Enacted FY 2012-2013		Existing Oper Budget as of 12/01/12		Continuation FY 2013-2014		Recommended FY 2013-2014		Total Recommended Over/(Under) EOB	
Means of Financing:												
State General Fund (Direct)	\$	17,337,968	\$	15,634,853	\$	15,634,853	\$	16,356,257	\$	14,553,468	\$	(1,081,385)
State General Fund by:												
Total Interagency Transfers		4,831,551		6,001,315		6,001,315		4,868,851		4,330,551		(1,670,764)
Fees and Self-generated Revenues		0		4,360,687		4,360,687		5,610,687		5,610,687		1,250,000
Statutory Dedications		496,674		0		0		0		0		0
Interim Emergency Board		0		0		0		0		0		0
Federal Funds		0		0		0		0		0		0
Total Means of Financing	\$	22,666,193	\$	25,996,855	\$	25,996,855	\$	26,835,795	\$	24,494,706	\$	(1,502,149)
Expenditures & Request:												
Expenditures & Request:												
Jefferson Parish Human Services Authority	\$	22,666,193	\$	25,996,855	\$	25,996,855	\$	26,835,795	\$	24,494,706	\$	(1,502,149)
Total Expenditures & Request	\$	22,666,193	\$	25,996,855	\$	25,996,855	\$	26,835,795	\$	24,494,706	\$	(1,502,149)
Authorized Full-Time Equiva	lents:											
Classified		0		0		0		0		0		0
Unclassified		0		0		0		0		0		0
Total FTEs		0		0		0		0		0		0



# **300\_1000 — Jefferson Parish Human Services Authority**

Program Authorization: R.S. 28:771 (c), R.S. 28:831, R.S. 36:254 (e), R.S. 36:258 (f) and related statutes.

#### **Program Description**

The mission of Jefferson Parish Human Services Authority (JPHSA) Program is to minimize the existence of mental illness and its disabling effects, substance abuse, and developmental disabilities and to maximize opportunities for individuals and families affected by those conditions to achieve a better quality of life and to participate more fully within our community.

The goals of Jefferson Parish Human Services Authority Program are:

- I. To provide comprehensive services and supports which improve the quality of life and community participation for persons in crisis and/or with serious and persistent mental illness, emotional and behavioral disorders, addictive disorders, and/or developmental disabilities, while providing appropriate and best practices to individuals with less severe needs.
- II. To improve personal outcomes through effective implementation of best practices and data-driven decision-making.

In 1989, the Louisiana State Legislature passed RS 28:831, the enabling legislation that established Jefferson Parish Human Services Authority as a Local Governing Entity responsible for the administration, management and operation of mental health, addictive disorders, and developmental disabilities services for the residents of Jefferson Parish, Louisiana. JPHSA is now a model for other regions in Louisiana who also provide these services. Previously, direct provision of these services was through the Department of Health and Hospitals. (DHH)

Governance of JPHSA is by a 12-member Board of Directors with nine members appointed by the Jefferson Parish Council and the remaining three members appointed by the Governor of Louisiana. Each Board member must possess experience in the areas of mental health, addictive disorders, or developmental disabilities and represent parents, consumers, advocacy groups, or serve as a professional in one of the areas. All members serve without compensation.

Administration of JPHSA is by an Executive Director, who is selected by the Board of Directors and is supported in administration and day-to-day operations by a Executive Management Team. This leadership strives to foster a culture of accountability and collaboration in an environment focused on evidence-based and best practices and the ongoing assessment of needs and monitoring of quality and efficacy. Success is defined by positive outcomes and customer satisfaction along with maximized efficiency and cost-effectiveness in the provision of services and supports.

The Jefferson Parish Human Services Authority program includes the following activities:

• Administration - Administration functions comprise performance and quality improvement, decision support, utilization management, human resources, training, fiscal/accounting services, information technology (including the Authority's electronic health record), compliance, safety/emergency preparedness, and facilities management. JPHSA's Administration is responsible for:



- The effective and prudent management of the resources and operations of community Behavioral Health and Developmental Disabilities services and supports for individuals and families residing in Jefferson Parish
- The ongoing critical assessment, evaluation, and continuous improvement of the performance and quality of every aspect of the Authority's service delivery and support functions. Administration promotes a culture of service quality, positive outcomes, maximization of resources, productivity, efficiency and efficacy of service delivery, maximization of capacity as well as the achievement of Mission and Strategic Goals.
- Behavioral Health Services JPHSA's Behavioral Health Services comprises child/youth and adult clinicand community-based Mental Health and Addictive Disorders services for individuals who meet basic eligibility criteria. The Authority's Level of Care Utilization System provides a guide to determine the range and duration of services delivered to an individual, thus helping to prevent over- and under-utilization of resources. Services range from assessment, crisis intervention, service planning, individual & group therapy, Intensive Outpatient Programs (IOPs), prescription assistance, medication management, school- and home-based services, residential treatment, Assertive Community Treatment (ACT), hospital diversion programs, housing supports, and employment services. As an individual's level of care increases, so do the intensity and availability of services. Behavioral Health Services incorporates a wide array of evidencebased practices into the JPHSA continuum. A mobile crisis team is available after hours, on weekends, and on holidays. Multi-disciplinary and cross-program collaboration within JPHSA assures the unique needs of each individual are met.
- Developmental Disabilities Services JPHSA's Developmental Disabilities Services provides services/ supports to individuals meeting state eligibility criteria from birth throughout their lifespan. Services include: respite care, personal companions, family support, cash subsidy, psychological services, 24/7 crisis services, supported living, school transition planning, employment/vocational services, a home ownership program, and service coordination. Person/family-centered planning is used to determine priority needs (e.g. social support, behavioral health, daily living, etc.); and following, services are obtained to meet identified priority needs using both personal and community resources. If resources are not sufficient, JPHSA state-funded services are allocated, using a needs-based assessment and a determination of priority need level. Developmental Disabilities Services monitors and manages the utilization and quality of services. Cross-program collaboration within JPHSA and service planning with schools, family advocates, private providers, and local/state agencies maximize service efficiencies and best use of resources.

For additional information, see:

#### Jefferson Parish Human Services Authority

#### Jefferson Parish Human Services Authority Budget Summary

	Prior Year Actuals (2011-2012	Enacted 2012-2013	isting Oper Budget of 12/01/12	ontinuation 7 2013-2014	commended 2013-2014	Total commended ver/(Under) EOB
Means of Financing:						
State General Fund (Direct)	\$ 17,337,968	\$ 15,634,853	\$ 15,634,853	\$ 16,356,257	\$ 14,553,468	\$ (1,081,385)



	Α	or Year ctuals 011-2012	Enacted 2012-2013	isting Oper Budget of 12/01/12	Continuation TY 2013-2014	ecommended 'Y 2013-2014	Total ecommended wer/(Under) EOB
State General Fund by:							
Total Interagency Transfers		4,831,551	6,001,315	6,001,315	4,868,851	4,330,551	(1,670,764)
Fees and Self-generated Revenues		0	4,360,687	4,360,687	5,610,687	5,610,687	1,250,000
Statutory Dedications		496,674	0	0	0	0	0
Interim Emergency Board		0	0	0	0	0	0
Federal Funds		0	0	0	0	0	0
Total Means of Financing	\$	22,666,193	\$ 25,996,855	\$ 25,996,855	\$ 26,835,795	\$ 24,494,706	\$ (1,502,149)
Expenditures & Request:							
Personal Services	\$	0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Total Operating Expenses		0	0	0	0	0	0
Total Professional Services		0	0	0	0	0	0
Total Other Charges		22,666,193	25,996,855	25,996,855	26,835,795	24,494,706	(1,502,149)
Total Acq&Major Repairs		0	0	0	0	0	0
Total Unallotted		0	0	0	0	0	0
Total Expenditures & Request	\$	22,666,193	\$ 25,996,855	\$ 25,996,855	\$ 26,835,795	\$ 24,494,706	\$ (1,502,149)
Authorized Full-Time Equiva	lents:						
Classified		0	0	0	0	0	0
Unclassified		0	0	0	0	0	0
<b>Total FTEs</b>		0	0	0	0	0	0

### Jefferson Parish Human Services Authority Budget Summary

# **Source of Funding**

This program is funded with State General Fund, Fees and Self-generated Revenues and Interagency Transfers. The Fees and Self-generated Revenues are from the collection of fees for services provided to clients who are not Medicaid eligible through the Statewide Management Organization (SMO)/ Magellan. The Interagency Transfers are from the Office for Citizens with Developmental Disabilities, Office of Behavioral Health, Office of Aging and Adult Services, Medical Vendor Payment - Title XIX. The Statutory Dedication listed is from the Overcollections Fund. (Per R.S. 39:36B. (8), see table below for a listing of expenditures out of each Statutory Dedication Fund.)

# Jefferson Parish Human Services Authority Statutory Dedications

Fund	tior Year Actuals 2011-2012	acted 12-2013	В	ing Oper udget 12/01/12	ontinuation 7 2013-2014	commended 2013-2014	Total commended /er/(Under) EOB
Overcollections Fund	\$ 496,674	\$ 0	\$	0	\$ 0	\$ 0	\$ 0



Ge	eneral Fund	T	otal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	15,634,853	\$	25,996,855	0	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
\$	(20,447)	\$	(20,447)	0	Group Insurance Rate Adjustment for Active Employees
\$	(5,734)	\$	(5,734)	0	Group Insurance Rate Adjustment for Retirees
\$	137,757	\$	137,757	0	Salary Base Adjustment
\$	(297,467)	\$	(297,467)	0	Attrition Adjustment
\$	(187,902)	\$	(187,902)	0	Personnel Reductions
\$	(1,715)	\$	(1,715)	0	Risk Management
\$	838	\$	838	0	UPS Fees
\$	(3,774)	\$	(3,774)	0	Civil Service Fees
					Non-Statewide Major Financial Changes:
\$	0	\$	(152,255)	0	Reduction in budget authority from the Office for Citizens with Developmental Disabilities.
\$	0	\$	(386,045)	0	Reduction in budget authority from the Office of Behavioral Health for the Temporary Assistance for Needy Families (TANF) programs.
\$	0	\$	117,536	0	Increase in budget authority from the Office of Behavioral Health for the Mental Health block grant.
\$	(558,415)	\$	(558,415)	0	Annualize mid-year reduction - Savings due to the elimination of contractual services, increased utilization in the Patient Assistance Program (PAP), and a reduction to operational supplies and travel.
\$	(144,526)	\$	(144,526)	0	Contract consolidations and reductions.
\$	14,553,468	\$	24,494,706	0	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
\$	14,553,468	\$	24,494,706	0	Base Executive Budget FY 2013-2014
\$	14,553,468	\$	24,494,706	0	Grand Total Recommended

#### Major Changes from Existing Operating Budget

#### **Professional Services**

Amount	Description
	This program does not have funding for Professional Services for Fiscal Year 2013-2014.



#### **Other Charges**

Amount	Description
	Other Charges:
\$12,655,824	Salaries and related benefits for Non T.O. FTE positions
\$4,853,919	Other Charges - Operating Services: These funds will be utilized for travel, operating services (*), supplies, and pharmaceuticals (**) for behavioral health and developmental disabilities services. (*) Maintenance of equipment, maintenance of facilities, utilities, facilities leases, software licenses, etc. (**) Pharmaceuticals for uninsured individuals with behavioral health diagnosis.
\$6,793,735	Other Charges - Contractual Services: Mental health, addictive disorders, and developmental disabilities contractual services which include contracts for Assertive Community Treatment, Mobile Crisis, Transitional Care Center, Individual and Family Support, Respite, Supported Living, Vocational services, etc.
\$7,612	Payments to the Division of Administration - Uniform Payroll Services
\$147,681	Payments to the Division of Administration - Office of Risk Management
\$35,935	Payments to the Department of Civil Service - Civil Service Fees
\$24,494,706	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
	This program does not have funding for Interagency Transfers for Fiscal Year 2013-2014.
\$24,494,706	TOTAL OTHER CHARGES

#### **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.

#### **Performance Information**

 (KEY) Through the Behavioral Health Services activity providing a continuum of best and evidencebased practices to promote independence, foster recovery, enhance employment and productivity, encourage personal responsibility, improve the quality of life, and decrease utilization of hospital/institutional settings and the justice system, by the end of FY 2015-2016, Jefferson Parish Human Services Authority (JPHSA) will: 1) reduce reported symptoms by adults with depression by 50%; 2) facilitate 80% of adults receiving Assertive Community Treatment (ACT) to remain housed for at least seven months; 3) facilitate 80% of adults receiving ACT to remain in the community without a hospitalization; 4) decrease reported mental health symptoms or continued stability in 80% of youth; 5) facilitate 80% of youth completing Multi-Systemic Therapy (MST) remaining free from arrests; and, 6) facilitate 80% of youth completing MST remaining in school or working.

Children's Budget Link: JPHSA services for children, under the umbrella of these objectives, are related to the health policy enunciated in the Children's Budget Link, i.e. all Louisiana Children will have access to comprehensive healthcare services, and are linked via the Authority's budget.

Human Resource Policies Beneficial to Women and Families Link: JPHSA has an array of Authority-wide Human Resources policies that support and assist female employees and their families. Policies are updated and amended as needed to remain in compliance with federal, state, and local laws/rules as well as with Authority philosophy and standards set forth by the Council On Accreditation (COA).



Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Brazelon Center for Mental Health Law; Healthy People 2020; Institute of Medicine Report; National Alliance for the Mentally III (NAMI); Parish Children and Youth Services Planning Boards Act (ACT 555); Substance Abuse and Mental Health Services Administration; Substance Abuse and Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP); and, Substance Abuse and Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).

Explanatory Note: JPHSA's Behavioral Health Services comprises child/youth and adult clinic- and community-based Mental Health and Addictive Disorders services for individuals who meet basic eligibility criteria.

#### **Performance Indicators**

		Performance Inc	licator Values		
Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
50%	48%	50%	50%	50%	50%
28%	23%	24%	24%	24%	24%
50%	46%	50%	50%	50%	50%
65%	48%	65%	65%	65%	65%
5,500	6,623	5,500	5,500	6,000	6,000
80%	77%	80%	80%	80%	80%
88%	91%	83%	83%	83%	83%
	Performance Standard FY 2011-2012	Performance Standard FY 2011-2012Actual Yearend Performance FY 2011-201250%48%28%23%28%23%65%46%65%48%65%6,62380%77%	Yearend Performance FY 2011-2012Actual Yearend Performance PY 2011-2013Performance Standard as Initially Approximated PY 2012-201350%48%50%28%23%24%50%46%50%65%48%65%65%6,6235,50080%77%80%	Yearend Performance FY 2011-2012Actual Yearend Performance FY 2012-2013Standard as Performance Standard FY 2012-2013Existing Performance Standard FY 2012-201350%48%50%50%28%23%24%24%50%46%50%50%65%48%65%65%65%6,6235,5005,50080%77%80%80%	Yearend Performance FY 2011-2012Actual Yearend Performance FY 2012-2013Performance Performance Standard as Standard as Performance FY 2012-2013Performance Standard Performance PY 2012-2013Performance Standard Pr 2012-2013Performance Standard Pr 2012-2013Performance Standard Performance PY 2013-2014Performance Standard Pr 2012-2013Performance Standard Performance PY 2013-2014Performance Standard Pr 2013-2014Performance Standard Pr 2013-2014Performance Standard Pr 2013-2014Performance Standard Pr 2013-2014Performance Standard Pr 2013-2014Performance Standard Performance Pr 2013-2014Performance Standard Pr 2013-2014Performance Standard Performance Pr 2013-2014Performance Standard Performance Pr 2013-2014Performance Standard Performance Pr 2013-2014Performance Standard Performance Pr 2013-2014Performance Performance Pr 2013-2014Performance Performance Pr 2013-2014Performance Performance Performance Pr 2013-2014Performance Performance Performance Performance PerformancePerformance Performance Performance Performance Performance PerformancePerformance Performance Performance Performance PerformancePerformance Performance Performance Performance Performance Performance PerformancePerformance Performance Performance Performance PerformancePerformance Performance Performance PerformancePerformance Performance PerformancePerformance Performance PerformancePerformance Performance 



#### **Performance Indicators (Continued)**

L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Ind Performance Standard as Initially Appropriated FY 2012-2013	licator Values Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of youth with a Behavioral Health illness served in Child & Youth Clinic-based Behavioral Health Services (LAPAS CODE - 23817)	2,025	2,389	1,775	1,775	2,000	2,000
K Percent of individuals completing Multi-Systemic Therapy (MST) free from arrests (LAPAS CODE - 23818)	80%	88%	80%	80%	85%	85%
Mult-Systemic Therapy is an	evidence based prac	etice				
K Percent of individuals completing Multi-Systemic Therapy (MST) in school or working (LAPAS CODE - 23819)	80%	96,015%	80%	80%	85%	85%
Mult-Systemic Therapy is an	evidence based prac	etice				
K Percent of youth who completed Functional Family Therapy (FFT) to show improvement in behavior problems (LAPAS CODE - 23821)	70%	69%	70%	70%	70%	70%
FFT, an evidence based practic	ce, is an intensive in	n-home therapy prog	ram.			

#### 2. (KEY) Through the Developmental Disabilities Community Services activity promoting independence, participation, employment and productivity, personal responsibility, quality of life in the community, and preventing institutionalization, by the end of FY 2015-2016, Jefferson Parish Human Services Authority (JPHSA) will ensure that 95% of individuals and families receiving family and support services will remain in their communities.

Children's Budget Link: JPHSA services for children, under the umbrella of these objectives, are related to the health policy enunciated in the Children's Budget Link, i.e. all Louisiana Children will have access to comprehensive healthcare services, and are linked via the Authority's budget.

Human Resource Policies Beneficial to Women and Families Link: JPHSA has an array of Authority-wide Human Resources policies that support and assist female employees and their families. Policies are updated and amended as needed to remain in compliance with federal, state, and local laws/rules as well as with Authority philosophy and standards set forth by the Council On Accreditation (COA).

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Institute of Medicine Report; American Association on Intellectual and Developmental Disabilities; Developmental Disabilities Council; Individuals with Disabilities Education Act (IDEA); Louisiana Act 378 (Family Support Act of 1989).



#### **Performance Indicators**

				Performance Inc	dicator Values		
L e v e P l	'erformance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
Sub rem vs.	rcentage of Cash bsidy recipients who nain in the community institution (LAPAS DDE - 22935)	95%	100%	95%	95%	95%	95%
and rec the inst	rcentage of Individual d Family Support sipients who remain in community vs. titution (LAPAS CODE 2936)	95%	98%	95%	95%	95%	95%
a de em bas	rcentage of persons with levelopmental disability ployed in community- sed employment APAS CODE - 15784)	50%	70%	43%	43%	58%	58%
dev and ass of t Edu Ind	mber of children with velopmental disabilities d their families who were sisted in the development their Individual ucation Plans including lividual Transition Plans APAS CODE - 22312)	75	165	50	50	155	155
(un stat disa bas	umber of people nduplicated) receiving te-funded developmental abilities community- sed services (LAPAS DDE - 15892)	382	485	350	350	350	350

3. (KEY) Through the Administration/Performance & Quality Improvement Services activity, effectively and efficiently managing Jefferson Parish Human Services Authority (JPHSA) and utilizing an Electronic Health Record for data analysis to assure continuous quality improvement of workforce performance, by the end of FY2015-2016, JPHSA will: 1) advance client engagement and retention as demonstrated by 85% of clients keeping intake and ongoing clinicbased appointments; and 2) increase access to Behavioral Health and Developmental Disabilities services by 15% with FY 2009-2010 used as the baseline measure.

Children's Budget Link: JPHSA services for children, under the umbrella of these objectives, are related to the health policy enunciated in the Children's Budget Link, i.e. all Louisiana children will have access to comprehensive healthcare services, and are linked via the agency's budget.



Human Resource Policies Beneficial to Women and Families Link: JPHSA has an array of Human Resources policies that support and assist female employees and their families. Policies are updated and amended as needed to remain in compliance with federal, state, and local laws/rules as well as with agency philosophy and standards set forth by the Council on Accreditation (COA).

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2020; Institute of Medicine Report; and the Substance Abuse and Mental Health Services Administration.

#### **Performance Indicators**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percent of appointments kept for intake and ongoing clinic-based appointments (LAPAS CODE - 23822)	80%	82%	80%	80%	80%	80%
K Percent increase in community access to mental health, addictive disorders, and/or developmental disabilities services (LAPAS CODE - 23812)	1%	-5%	1%	1%	0	0

#### Jefferson Parish Human Services Authority General Performance Information

		Perfor	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012
Percentage of individuals with a developmental disability surveyed who reported they had choice in the services they received (LAPAS CODE - 15889)	85%	85%	83%	80%	86%
Percentage of individuals with a developmental disability surveyed who reported they had overall satisfaction with the services they received (LAPAS CODE - 15890)	95%	97%	92%	97%	97%





# 09-301 — Florida Parishes Human Services Authority

# Agency Description

The mission of the Florida Parishes Human Services Authority (FPHSA) is to direct the operation and management of public community-based programs and services relative to addictive disorders (including the Alcohol Drug Unit and Fontainebleau Treatment Center), developmental disabilities, and mental health in the parishes of Livingston, St. Helena, St. Tammany, Tangipahoa, and Washington.

The goals of the Florida Parishes Human Services Authority Program are:

- I. To assure comprehensive services and supports which improve the quality of life and community participation for persons with serious and persistent addictive disorders, developmental disabilities, and/or mental illness, while providing effective limited intervention to individuals with less severe needs.
- II. To improve the quality and effectiveness of services and/or treatment through the implementation of best practices and use of data-based decision making.
- III. To promote healthy and safe lifestyles for the people by providing leadership in educating the community on the importance of prevention, early detection and intervention, and by facilitating coalition building to address localized community problems.

The Florida Parishes Human Services Authority Program is a local governing entity/political subdivision of this state created by the Louisiana Legislature to directly operate and manage community-based addictive disorders, developmental disabilities, and mental health services in the parishes of Livingston, St. Helena, St. Tammany, Tangipahoa, and Washington. Functions and funds relative to the operation of these services were transferred to FPHSA from the Department of Health and Hospitals (DHH) through a memorandum of understanding monitored by the DHH Secretary. Some funds relative to these functions are also appropriated directly to FPHSA. To increase responsiveness to local human service needs, FPHSA is governed by a board composed of members appointed by the respective parish governing authority and ratified by a plurality of the legislative delegation representing the five parishes which are included in the authority. The program has three major activities: addictive disorders, developmental disabilities, and mental health services. Also included are the activities of permanent supportive housing and executive administration.

The Florida Parishes Human Services Authority has one program: Florida Parishes Human Services Authority.



#### For additional information, see:

#### Florida Parishes Human Services Authority

#### Florida Parishes Human Services Authority Budget Summary

		rior Year Actuals 2011-2012	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation FY 2013-2014	ecommended Y 2013-2014	Total commended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	11,888,195	\$	10,255,362	\$ 10,255,362	\$ 10,835,891	\$ 9,950,579	\$ (304,783)
State General Fund by:		, ,		, ,	, ,	, ,	, ,	( ) )
Total Interagency Transfers		7,177,750		6,798,558	7,286,215	7,187,395	6,405,354	(880,861)
Fees and Self-generated Revenues		95,188		3,036,181	3,036,181	3,036,181	3,036,181	0
Statutory Dedications		453,990		0	0	0	0	0
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		23,100		23,100	23,100	23,100	23,100	0
Total Means of Financing	\$	19,638,223	\$	20,113,201	\$ 20,600,858	\$ 21,082,567	\$ 19,415,214	\$ (1,185,644)
Expenditures & Request:								
Florida Parishes Human Services Authority	\$	19,638,223	\$	20,113,201	\$ 20,600,858	\$ 21,082,567	\$ 19,415,214	\$ (1,185,644)
Total Expenditures & Request	\$	19,638,223	\$	20,113,201	\$ 20,600,858	\$ 21,082,567	\$ 19,415,214	\$ (1,185,644)
Authorized Full-Time Equiva	lents:							
Classified		0		0	0	0	0	0
Unclassified		0		0	0	0	0	0
Total FTEs		0		0	0	0	0	0



# **301\_1000 — Florida Parishes Human Services Authority**

Program Authorization: Act 594 of the 2003 Regular Legislative Session

#### **Program Description**

The mission of the Florida Parishes Human Services Authority (FPHSA) Program is to direct the operation and management of public community-based programs and services relative to addictive disorders (including the Alcohol Drug Unit and Fontainebleau Treatment Center), developmental disabilities, and mental health in the parishes of Livingston, St. Helena, St. Tammany, Tangipahoa, and Washington.

The goals of the Florida Parishes Human Services Authority Program are:

- I. To assure comprehensive services and supports which improve the quality of life and community participation for persons with serious and persistent addictive disorders, developmental disabilities, and/or mental illness, while providing effective limited intervention to individuals with less severe needs.
- II. To improve the quality and effectiveness of services and/or treatment through the implementation of best practices and use of data-based decision making.
- III. To promote healthy and safe lifestyles for the people by providing leadership in educating the community on the importance of prevention, early detection and intervention, and by facilitating coalition building to address localized community problems.

The Florida Parishes Human Services Authority Program is a local governing entity/political subdivision of this state created by the Louisiana Legislature to directly operate and manage community-based addictive disorders, developmental disabilities, and mental health services in the parishes of Livingston, St. Helena, St. Tammany, Tangipahoa, and Washington. Functions and funds relative to the operation of these services were transferred to FPHSA from the Department of Health and Hospitals (DHH) through a memorandum of understanding monitored by the DHH Secretary. Some funds relative to these functions are also appropriated directly to FPHSA. To increase responsiveness to local human service needs, FPHSA is governed by a board composed of members appointed by the respective parish governing authority and ratified by a plurality of the legislative delegation representing the five parishes which are included in the authority. The program has three major activities: addictive disorders, developmental disabilities, and mental health services. Also included are the activities of permanent supportive housing and executive administration.

The Florida Parishes Human Services Authority Program includes the following activities:

Addictive Disorders Services - Addictive Disorders Services (ADS) provides an accessible system of prevention and addiction treatment services available in each of the five parishes served by FPHSA. Primary Prevention is an anticipatory process that prepares and supports individuals and systems in the creation and reinforcement of healthy behaviors and lifestyles. Alcohol, tobacco, and other drug problem prevention focuses on risk and protective factors associated with the use of these substances, concentrating on areas where research and experience suggest that success in reducing abuse and addiction is most likely. Evidence-based programs are currently administered to students in schools in all of the five parishes. ADS



addictions treatment promotes and supports healthy lifestyles for individuals, families, and communities by providing substance abuse/dependence and compulsive problem gambling treatment through a comprehensive system of care. Levels of care include outpatient and primary inpatient/residential Level III.5. Outpatient clinics provide both intensive outpatient treatment consisting of a minimum of nine hours per week at a minimum of three days per week for adults 21 years and older and a minimum of six hours per week at a minimum of three days per week for those less than 21 years and non-intensive treatment includ-ing aftercare, counseling, and supportive services. Primary inpatient/residential Level III.5 is a twenty-four hours a day, seven days a week modality providing non-acute care and includes a planned and profession-ally implemented regime for persons suffering from alcohol and/or other addiction problems.

- Developmental Disabilities Services Developmental Disabilities Services (DDS) focuses on communitybased services which assist individuals and families to maintain their family member in the home or community close to natural supports. DDS is the single point of entry into community-based services which include, Support Coordination, Family Support, Flexible Family Fund, Residential Living Option, and local oversight and operation of the Home and Community Based (HCB) waivers. A developmental disability may be a physical or cognitive impairment, must occur prior to the age of 22, not solely be attributed to mental illness, and significantly impair three or more activities of daily living. The Entry Services unit determines whether the individual meets criteria for participation in the system. Support Coordination is offered to individuals to obtain needed services through an assessment of their needs, and development of an Individual Support Plan (ISP) which identifies and provides access to natural community supports and system-funded services (such as Medicaid) to meet needs and preferences. Information and referral to other agencies is provided on an ongoing basis. Family Support services are provided to enable a family to maintain their family member in their home or an individual in their own home. Crisis Intervention and Diversion services include crisis funding, coordination for those involved in court and/or DHH custody, crisis admission to residential living options, transition coordination, and referral to immediate support services. Services are developed using a person-centered approach. Flexible Family Fund (formerly Cash Subsidy) is a flat monthly stipend provided to families of children from birth through age 17 with severe developmental disabilities. Funding helps these families meet the extraordinary cost of services and equipment to maintain a developmentally-disabled child in the home. Residential Living Options include a broad range of group living providing 24-hour supports such as community homes and institutions. The DDS Home and Community Based (HCB) waivers include the New Opportunities Waiver (NOW), the Children's Choice Waiver (CCW), the Supports Waiver (SW), and the Residential Options Waiver (ROW). Referrals for residential placement are of last resort and per the request of the family and/or individual. Pre-admission Screening Resident Review (PASRR) is the review of all nursing home admissions within the FPHSA area of persons with developmental disabilities to determine appropriateness of nursing home environment in meeting their needs and to identify their need for specialized services and/or services of a lesser intensity. DDS strives to provide supports and services in order to maintain persons with developmental disabilities in the home with family or in a home of their own.
- Executive Administration Florida Parishes Human Services Authority (FPHSA) is a local governing entity/political subdivision of the state with the mission to direct the operation and management of public community-based programs and services relative to addictive disorders (including Alcohol Drug Unit and Fontainebleau Treatment Center), developmental disabilities, and mental health in the FPHSA catchment area. FPHSA was created to pool funding dollars in the areas of addictive disorders, developmental disabilities, and mental health services and to bring spending and operational decisions down to the local level. FPHSA's geographical service area includes the parishes of Livingston, St. Helena, St. Tammany, Tangipahoa, and Washington. The Authority is governed by a nine-member Board of Directors representing the five-parish area. FPHSA, through its Board, directs the operation and management of community-based programs. The Executive Administration oversees the budget, contracting, and purchasing processes, ensuring that the agency optimizes tax-payer dollars; develops, implements, and monitors agency



compliance with policies and procedures modeled after state and national best-practices; assesses staff training needs and fosters workforce development by connecting employees with appropriate training opportunities; reduces or eliminates inefficiencies by analyzing and improving on agency processes; keeps pace with the rest of the state by early adoption of technological improvements; and ensures agency adherence to state and federal regulations. Along with traditional clinic services, such as evaluation, therapy, and medication management, a number of various other services are provided through contract providers, such as respite care, case management, crisis intervention, in-home therapy, vocational training, housing supports, etc. In addition to community-based out-patient services, FPHSA has two inpatient/residential Level III.5 substance abuse treatment programs, Alcohol Drug Unit (ADU) and Fontainebleau Treatment Center (FTC), which are housed on the grounds of Northlake Behavioral Health System but are not part of that system. FPHSA serves both adults and children who meet the criteria for services in the areas of addictive disorders, developmental disabilities, mental health, and permanent supportive housing. A goal of Executive Administration is to avoid duplication, to streamline service delivery, and to improve the quality of care and service delivery to the individuals who are served.

- Mental Health Services Mental Health Services (MHS) provides community-based mental health services in out-patient settings at three mental health centers located in the FPHSA catchment area. In addition to clinic-based services, outreach services are provided at several different locations across the fiveparish service area to enhance access to services. MHS are provided to adults with severe and persistent mental illness as well as children and adolescents. MHS uses a person-centered approach that is individualized, educational, and supportive to assist individuals in their recovery. The clinic services include: crisis assessments; behavioral health assessments; psychiatric evaluations; psychological evaluations; individual, family, and group therapy; medication management; and provision of psychiatric medications to indigent individuals as deemed appropriate. In addition, supportive services are provided through contract providers in the community as an extension of the service delivery system and continuum of care. Some of the supportive services and community-based interventions provided by contract providers include the following: crisis phone line for after-hours access; case management services; consumer care resources; and Interagency Services Coordination (ISC) to develop plans for "wraparound services" in an effort to maintain youth in the community and to avert out-of-home and out-of-school placements. These services are coordinated and every effort is made to avoid duplication of services, not only within the agency, but with other community stakeholders. This philosophy and promotion of coordination and collaboration of service delivery helps to maximize use of limited resources, both staff time and funding for contracted services.
- Permanent Supportive Housing Permanent Supportive Housing Services (PSHS) is a nationally-recognized model designed to provide flexible, community-based supportive services linked to affordable rental housing units in community-integrated, non-institutional settings. PSHS targets a population with serious and long-term disabilities including mental illnesses, developmental disabilities, physical disabilities, substance use disorders, and chronic health conditions such as HIV/AIDS. As a result of the 2006-2007 and 2007-2008 Louisiana Housing Finance Agency (LHFA) Tax Credit Rounds, Shelter Plus Care PSHS Program, and Project-Based Vouchers Program, PSHS provides supportive service to almost 200 PSH units in the FPHSA catchment area. Florida Parishes Human Services Authority (FPHSA) is the designated Local Lead Agency (LLA) for the PSHS program. FPHSA is responsible for individual service planning and coordination, monitoring service delivery, quality and performance, and coordinating diverse funding streams to optimize cost-effectiveness and service sustainability. FPHSA has established relationships with representative stakeholders from all target populations to obtain and maintain a current understanding of



community needs and to conduct critical outreach efforts to ensure that PSHS units are promoted to all eligible populations. The target populations have a variety of complex service needs that require flexible services and supports to establish and maintain long-term housing stability. To meet these complex service needs, FPHSA PSHS Housing Support Team (HST) provides pre-tenancy assistance, move-in activities, and stabilization services in an effort to provide PSHS households long-term housing.

For additional information, see:

#### Florida Parishes Human Services Authority

#### Florida Parishes Human Services Authority Budget Summary

		Prior Year Actuals 2 2011-2012	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation FY 2013-2014	ecommended 'Y 2013-2014	Total commended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	11,888,195	\$	10,255,362	\$ 10,255,362	\$ 10,835,891	\$ 9,950,579	\$ (304,783)
State General Fund by:								
Total Interagency Transfers		7,177,750		6,798,558	7,286,215	7,187,395	6,405,354	(880,861)
Fees and Self-generated Revenues		95,188		3,036,181	3,036,181	3,036,181	3,036,181	0
Statutory Dedications		453,990		0	0	0	0	0
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		23,100		23,100	23,100	23,100	23,100	0
Total Means of Financing	\$	19,638,223	\$	20,113,201	\$ 20,600,858	\$ 21,082,567	\$ 19,415,214	\$ (1,185,644)
Expenditures & Request:								
Personal Services	\$	0	\$	0	\$ 0	\$ 0	\$ 0	\$ 0
Total Operating Expenses		1,244,375		1,237,691	1,237,691	1,262,452	744,014	(493,677)
Total Professional Services		292,458		498,368	498,368	509,014	498,368	0
Total Other Charges		18,101,390		18,377,142	18,864,799	19,311,101	18,172,832	(691,967)
Total Acq& Major Repairs		0		0	0	0	0	0
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	19,638,223	\$	20,113,201	\$ 20,600,858	\$ 21,082,567	\$ 19,415,214	\$ (1,185,644)
Authorized Full-Time Equiva	lents:							
Classified		0		0	0	0	0	0
Unclassified		0		0	0	0	0	0
Total FTEs		0		0	0	0	0	0



#### **Source of Funding**

This program is funded with State General Fund, Interagency Transfers, Fees and Self-generated Revenues, Federal Funds and Statutory Dedications. The Interagency Transfers are from the Office for Citizens with Developmental Disabilities, the Office of Behavioral Health, Office of Aging and Adult Services, and Medical Vendor Payments - Title XIX. The Fees and Self-generated Revenues are from the collection of fees for services provided to clients who are not Medicaid eligible through the Statewide Management Organization (SMO)/ Magellan, copy fees, and cost reimbursement from the 22nd Judicial District Court (Drug Court Treatment Program). The Statutory Dedication listed is from the Overcollections Fund. (Per R.S. 39:36B. (8), see table below for a listing of expenditures out of each Statutory Dedication Fund.)

#### Florida Parishes Human Services Authority Statutory Dedications

Fund	Act	r Year tuals 11-2012	Enacted FY 2012-20		Existing Op Budget as of 12/01/		ontinuation ( 2013-2014	Recommended FY 2013-2014		Total Recommende Over/(Under EOB	
Overcollections Fund	\$	453,990	\$	0	\$	0	\$ 0	\$ (	) 9	5	0

# Major Changes from Existing Operating Budget

Co	neral Fund	т	otal Amount	Table of Organization	Description
\$	nerai runu 0	\$	487,657	Organization 0	
¢	0	¢	487,037	0	Milu-Tear Aujustinents (DA-75).
\$	10 255 262	\$	20 600 858	0	Fristing Oney Dudget as of 12/01/12
Ф	10,255,362	Э	20,600,858	0	Existing Oper Budget as of 12/01/12
					Statewide Maior Financial Changes
<u>^</u>	(10.045)	<b>^</b>	(10.045)	<u>^</u>	Statewide Major Financial Changes:
\$	(18,045)	\$	(18,045)	0	Group Insurance Rate Adjustment for Active Employees
\$	(8,170)	\$	(8,170)	0	Group Insurance Rate Adjustment for Retirees
\$	962,309	\$	962,309	0	Salary Base Adjustment
\$	(293,756)	\$	(293,756)	0	Attrition Adjustment
\$	(484,458)	\$	(484,458)	0	Salary Funding from Other Line Items
\$	29,958	\$	29,958	0	Risk Management
\$	(5,104)	\$	(5,104)	0	Legislative Auditor Fees
\$	1,190	\$	1,190	0	UPS Fees
\$	(292)	\$	(292)	0	Civil Service Fees
\$	(1,250)	\$	(1,250)	0	Office of Computing Services Fees
					Non-Statewide Major Financial Changes:
\$	0	\$	(109,177)	0	Non Recurs Title 19 Medicaid budget authority due to the implementation of the Statewide Management Organization.
\$	0	\$	(609,437)	0	Reduction in budget authority from the Office of Behavioral Health for the Temporary Assistance for Needy Families (TANF) programs.
\$	(487,165)		(487,165)	0	Annualize mid-year reduction - Savings due to the elimination of three (3) Non T.O. FTE positions and a reduction in supplies.



# Major Changes from Existing Operating Budget (Continued)

Ge	neral Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	(162,247)	0	Reduction in budget authority from the Office for Citizens with Developmental Disabilities.
\$	9,950,579	\$	19,415,214	0	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
\$	9,950,579	\$	19,415,214	0	Base Executive Budget FY 2013-2014
\$	9,950,579	\$	19,415,214	0	Grand Total Recommended

#### **Professional Services**

Amount	Description
\$498,368	Contracted Services - Psychiatric, psychological, and interpretive services, as well as preliminary medical screening for clients served by Florida Parishes Human Services Authority
\$498,368	TOTAL PROFESSIONAL SERVICES

#### **Other Charges**

Amount	Description
	Other Charges:
\$13,710,765	Salaries and related benefits for Non T.O. FTE positions
\$3,433,309	Funding to support behavioral health and developmental disabilities contracts for treatment and various supports including essential and enhanced community-based services for the five-parish catchment area of Florida Parishes Human Services Authority.
\$17,144,074	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$9,041	Payments to the Division of Administration for Uniform Payroll Services
\$42,119	Payments to the Department of Civil Service - Civil Service Fees
\$186,862	Payments to the Division of Administration - Office of Risk Management
\$14,967	Payments to the Legislative Auditor
\$14,144	Payments to the Office of Computing Services-Email services (mailboxes, storage, archiving)
\$17,796	Payments to Workforce Development (301) - Unemployment compensation
\$345	Payments to Office of the Secretary (307) - Loss prevention/safety/HIPPA training
\$2,800	Payments to Administrative Services (805) - Mail Operations
\$545,290	Support services for Fountainebleau Treatment Center and Alcohol and Drug Unit
\$290	Payments to the Office of State Police-criminal inquiries
\$9,490	Payments to the Office of State Printing and Forms Management
\$81,059	Intensive Residential Bed Program for Adults consisting of six male beds



# **Other Charges (Continued)**

Amount	Description
\$104,555	Payments to the Office of Telecommunications for fees
\$1,028,758	SUB-TOTAL INTERAGENCY TRANSFERS
\$18,172,832	TOTAL OTHER CHARGES

# **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.

#### **Performance Information**

#### 1. (KEY) Through the Addictive Disorders Services activity, Florida Parishes Human Services Authority will provide treatment services to individuals with addictive disorders and prevention services to four percent of the population within its catchment area.

Children's Budget Link: Services for children are linked via the Children's Budget to the Children's Cabinet.

Human Resource Policies Beneficial to Women and Families Link: Not applicable.

Explanatory Note: The Florida Parishes Human Services Authority provides addictive disorders services through outpatient clinics as well as contract providers throughout it's catchment area. Inpatient residential substance abuse treatment is provided at the Alcohol Drug Unit (ADU) and Fontainebleau Treatment Center (FTC) in Mandeville. Prevention services are provided throughout the Florida parishes, primarily by contract providers.



#### **Performance Indicators**

L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Inc Performance Standard as Initially Appropriated FY 2012-2013	licator Values Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of individuals receiving outpatient treatment for three months or more (LAPAS CODE - 21037)	40.0%	39.7%	40.0%	40.0%	40.0%	40.0%
<ul> <li>K Percentage of individuals successfully completing the program (Primary Inpatient - Adult(FTC/ADU)) (LAPAS CODE - 21038)</li> </ul>	88%	91%	88%	88%	88%	88%
S Average daily census- (Primary Inpatient - Adult)(FTC/ADU)) (LAPAS CODE - 21039)	54	46	61	61	55	55
K Total number of individuals admitted/received outpatient addictive disorders treatment services (LAPAS CODE - 23823)	1,437	1,172	1,437	1,437	1,172	968
K Total number of individuals screened but not admitted to outpatient addictive disorders treatment services (LAPAS CODE - 23824)	248	352	248	248	352	352
K Total number of individuals receiving inpatient addictive disorders treatment services.(FTC/ ADU) (LAPAS CODE - 21043)	765	780	835	835	835	835
K Total number of individuals served in prevention programs (LAPAS CODE - 23825)	26,900	54,823	30,900	30,900	43,510	43,510
K Total number of participants served by other prevention efforts (does not include those enrolled in evidence-based educational (prevention) programming or merchants educated through Synar) (LAPAS CODE - 23826)	20,800	46,988	24,800	24,800	36,000	36,000



				Perfo	rma	ance Indicator <b>V</b>	/aluo	es		
Performance Indicator Name		rior Year Actual 7 2007-2008	ł	Prior Year Actual FY 2008-2009		Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011			Prior Year Actual FY 2011-2012
Percentage of enrollees completing the evidence-based educational (prevention) program. (LAPAS CODE - 23827)		91%		91%		91%		94%		93%
Total number of individuals receiving addictive disorders treatment services (LAPAS CODE - 21041)		2,701		2,950		2,903		2,784		2,336
Average cost per client day (Primary Inpatient - Adult)(FTC/ADU)) (LAPAS CODE - 21045)	\$	152	\$	142	\$	127	\$	118	\$	154
Average cost per individual served in outpatient addictive disorders treatment services. (LAPAS CODE - 23828)	<b>\$</b> ]	Not Available	\$	Not Available	\$	Not Available	\$	1,226	\$	1,463
This indicator was established in Fiscal Year 1	1, the	refore there is	no p	revious perform	ance	e information.				
Average cost per individual served in inpatient (FTC/ADU) addictive disorders treatment services. (LAPAS CODE - 23829)	<b>\$</b> ]	Not Available	\$	Not Available	\$	Not Available	\$	3,116	\$	3,481
This indicator was established in Fiscal Year 1	1, the	refore there is a	no p	revious perform	ance	e information.				
Average cost per individual served in addictive disorders prevention programs. (LAPAS CODE - 23830)	<b>\$</b> ]	Not Available	\$	Not Available	\$	Not Available	\$	19	\$	12
This indicator was established in Fiscal Year 1	1, the	refore there is	no p	revious perform	ance	e information.				
Total number of merchants educated through Synar services. (LAPAS CODE - 23831)	]	Not Available		Not Available		Not Available		727		662
This Performance Indicator is new, therefore,	there i	s no previous o	lata							
Cost per participant enrolled in evidence-based educational (prevention) programs. (LAPAS CODE - 23832)	<b>\$</b> ]	Not Available	\$	Not Available	\$	Not Available	\$	63	\$	63
This Performance Indicator is new, therefore,	there i	s no previous o	lata							

#### Florida Parishes Human Services Authority General Performance Information

2. (KEY) Through the Developmental Disabilities Services activity, Florida Parishes Human Services Authority (FPHSA) will provide services that emphasize person-centered individual and family supports to people with developmental disabilities. Delivery of services will result in an increased percentage of people within the FPHSA catchment area that remain in the community rather than being institutionalized.

Children's Budget Link: Services for children are linked via the Children's Budget to the Children's Cabinet.

Human Resource Policies Beneficial to Women and Families Link: Not applicable.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other)

Explanatory Note: A developmental disability can present special challenges for individuals and their families. The Florida Parishes Human Services Authority provides information, individualized service planning, and/or referrals. A developmental disability refers to a documented diagnosis of developmental disability and/or mental retardation appearing before the age of 22 years. It can also mean a severe or chronic disability result-ing from cerebral palsy, epilepsy, autism, or any condition other than mental illness. In addition, there must be a substantial limitation in three of six life skills areas (i.e., learning, self-care, mobility, etc.)



#### **Performance Indicators**

				Performance Inc	licator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
	Percentage of Waiver participants with a current Statement of Approval (SOA). (Comprehensive Plan of Care (CPOC) begin date within the quarter.) (LAPAS CODE - 24950)	90%	91%	90%	90%	95%	95%
	Percentage of Waiver participants discharged from program services due to admission to an institution (LAPAS CODE - 24951)	5%	1%	5%	5%	3%	3%
	The total unduplicated number of individuals receiving developmental disabilities community- based services (LAPAS CODE - 21022)	475	475	465	465	385	336
	This indicator standard is bein Disabilities.	g decreased beginni	ing FY2014 due to a	reduction in funding	g from the Office for	r Citizens with Deve	lopmental
	The total unduplicated number of individuals receiving individual and family support services (LAPAS CODE - 21023)	185	180	166	166	110	89
	This indicator standard is bein Disabilities.	g decreased beginni	ing FY2014 due to a	reduction in funding	g from the Office for	r Citizens with Deve	lopmental
	The total unduplicated number of individuals receiving Cash Subsidy (LAPAS CODE - 23833)	187	198	194	194	174	142
	The total unduplicated number of individuals receiving individual and family support crisis services (LAPAS CODE - 23834)	60	76	60	60	60	60
	The total unduplicated number of individuals receiving Pre-admission Screening and Annual Resident Review (PASRR) services (LAPAS CODE - 23835)	21	34	21	21	30	30
	The total unduplicated number of individuals referred by FPHSA/DDS to Families Helping Families services (LAPAS CODE - 23836)	300	209	300	300	250	250



# Florida Parishes Human Services Authority General Performance Information

	Performance Indicator Values									
Performance Indicator Name	l	Prior Year Actual FY 2007-2008	I	Prior Year Actual FY 2008-2009		Prior Year Actual FY 2009-2010		Prior Year Actual FY 2010-2011		Prior Year Actual FY 2011-2012
Average cost per individual receiving Individual and Family Support services. (LAPAS CODE - 23837)	\$	Not Available	\$	Not Available	\$	Not Available	\$	3,427	\$	2,141
Average cost per individual receiving Flexible Family Funds. (LAPAS CODE - 23838)	\$	Not Available	\$	Not Available	\$	Not Available	\$	2,632	\$	2,636
Average cost per individual receiving individual and family support crisis services. (LAPAS CODE - 23839)	\$	Not Available	\$	Not Available	\$	Not Available	\$	715	\$	934
Average cost per individual receiving Pre- admission Screening and Annual Review (PASRR) services. (LAPAS CODE - 23840)	\$	Not Available	\$	Not Available	\$	Not Available	\$	271	\$	537
Average cost per individual referred by FPHSA/ DDS to Families Helping Families services. (LAPAS CODE - 23841)	\$	Not Available	\$	Not Available	\$	Not Available	\$	196	\$	280
Percentage of Flexible Family Fund recipients who remain in the community (vs. institution). (LAPAS CODE - 23842)		Not Available		Not Available		Not Available		100%		100%
Percentage of Individual and Family Support recipients that remain in the community (vs. institution). (LAPAS CODE - 23843)		Not Available		Not Available		Not Available		100%		100%
The total unduplicated number of individuals served through waiver supports and services, including New Opportunities Waiver (NOW), Childrenis Choice Waiver (CC), Supports Waver (SW), and Residential Options Waver (ROW) (LAPAS CODE - 25073)		Not Available		Not Available		Not Available		Not Available		1.433
Waiver Supports and Services were transferred	d to		ıg F							-,100

# 3. (KEY) Through the Executive Administration activity, Florida Parishes Human Services Authority will increase the efficiency of the operation and management of public, community-based services related to addictive disorders, developmental disabilities, mental health, and permanent supportive housing in the parishes of Livingston, St. Helena, St. Tammany, Tangipahoa, and Washington.

#### Children's Budget Link: Not applicable

Human Resource Policies Beneficial to Women and Families Link: Florida Parishes Human Services Authority, through its Human Resource's Department, will develop and implement policies that are helpful and beneficial to women and families, using such resources as federal, state, and/or local laws, guidelines, and procedures, as well as provide a mechanism for internal feedback. As a part of the implementation process, continued monitoring of all applicable resources will ensure that these policies are regularly maintained and updated for accuracy.

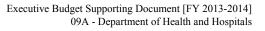
Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not applicable.



Explanatory Note: Florida Parishes Human Services Authority (FPHSA) is a local governing entity/political subdivision of htis state with the mission to direct the operation and management of public community-based programs and servcies relative to addictive disorders (including Alcohol Drug Unit and Fontainebleau Treatment services relative to addictive disorders, developmental disabilities, and mental health. FPHSA was created to pool funding dollars in the areas of addictive disorders, developmental disabilities, and mental health services and to bring spending and operational decisions down to the local level. The FPHSA geographical service area includes the parishes of Livingston, St. Helena, St. Tammany, Tangipahoa, and Washington. The Authority is governed by a nine-member Board of Directors representing the five-parish area. FPHSA, through its Board, directs the operation and management of community-based programs. Along with traditional clinic services, such as evaluation, therapy, and medication management, a number of various other services are provided through contract providers, such as respite care, case management, crisis intervention, in-home therapy, vocational training, housing supports, etc. In addition to community-based out-patient services, FPHSA has two inpatient/residential level III.5 substance abuse treatment programs, the Alcohol Drug Unit and the Fontainebleau Treatment Center (FTC), which are housed on the grounds of Northlake Behavioral Health System but are not part of that system. FPHSA serves both adults and children who meet the criteria for services in the areas of addictive disorders, developmental disabilities, mental health and permanent supportive housing. A goal of the Executive Administration is to avoid duplication, to streamline service delivery, and to improve the quality of care and service delivery to the consumers who are served.

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of Information Technology (IT) work orders closed within 5 business days of work request (LAPAS CODE - 23845)	95%	91%	95%	95%	95%	95%
K Percentage of contract invoices for which payment is issued within 21 days of agency receipt (LAPAS CODE - 23846)	85%	71%	85%	85%	85%	85%
K Percentage of new employees completing mandatory online training courses within 90 days of employment (LAPAS CODE - 23847)	95%	100%	95%	95%	95%	95%
K Percentage of agency's Performance Indicators within (+ / -) 4.99% of target (LAPAS CODE - 23848)	70%	54%	70%	70%	70%	70%

#### **Performance Indicators**



#### Florida Parishes Human Services Authority General Performance Information

		Perfor	mance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012
Executive Administration expenditures as a percentage of agency's budget. (LAPAS CODE - 23850)	Not Available	Not Available	Not Available	10%	12%
This indicator was established in Fiscal Year 11	, therefore there is n	o previous performa	nce information.		
Percentage of agency's moveable property accounted for annually. (LAPAS CODE - 23851)	Not Available	Not Available	Not Available	98%	100%
This indicator was established in Fiscal Year 11	, therefore there is n	o previous performa	nce information.		
Total number of individuals served by Florida Parishes Human Services Authority (Includes admitted and screened/assessed). (LAPAS CODE - 23852)	Not Available	Not Available	Not Available	47,513	66,454
This indicator was established in Fiscal Year 11	, therefore there is n	o previous performa	nce information.		

# 4. (KEY) Through the Mental Health Services activity, Florida Parishes Human Services Authority will manage community based mental health services such that quality services will be provided in a cost effective manner.

Children's Budget Link: Services for children are linked via the Children's Budget to the Children's Cabinet.

Human Resource Policies Beneficial to Women and Families Link: Not applicable.

Explanatory Note: The performance data included here reflects the operation of FPHSA's community-based mental health clinics and outreach sites.



#### **Performance Indicators**

			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
S Average number of days between discharge from an OMH acute unit and an aftercare CMHC visit (Adult) (LAPAS CODE - 21027)	5.0	20.6	5.0	5.0	5.0	5.0
S Average number of days between discharge from an OMH acute unit and an aftercare CMHC visit (Children/Adolescents) (LAPAS CODE - 21029)	6	0	5	5	5	5
K Total number of adults considered active status at a FPHSA Mental Health Center (LAPAS CODE - 23854)	3,091	3,264	3,500	3,500	3,500	3,500
K Total number of youth (children/adolescents) considered active status at a FPHSA Mental Health Center (LAPAS CODE - 23855)	782	1,089	1,000	1,000	1,000	1,000
K Total number of adults served (includes screening/ assessment and treatment) at a FPHSA Mental Health Center. (LAPAS CODE - 21031)	5,765	5,340	6,025	6,025	6,025	4,100
K Total number of youth (children/adolescents) served (includes screening/ assessment and treatment) at a FPHSA Mental Health Center. (LAPAS CODE - 21032)	1,743	1,623	1,825	1,825	1,825	1,250



		Perfo	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012
Total number of individuals (adults and youth) considered active status at a FPHSA Mental Health Center. (LAPAS CODE - 23853)	Not Available	Not Available	4,979	4,628	4,353
This indicator was established in Fiscal Year 1	l therefore previous	performance inform	ation is limited.		
Total number of individuals (adults/youth) screened/assessed but not admitted at a FPHSA Mental Health Center (LAPAS CODE - 23856)	Not Available	Not Available	2,908	3,194	2,610
This indicator was established in Fiscal Year 1	l therefore previous	performance inform	ation is limited.		
Total number of adults screened/assessed but not admitted at a FPHSA Mental Health Center (LAPAS CODE - 23857)	Not Available	Not Available	Not Available	2,426	2,076
This indicator was established in Fiscal Year 1	l therefore there is n	o previous performa	nce information.		
Total number of youth (children/adolescents) screened/assessed but not admitted at a FPHSA Mental Health Center (LAPAS CODE - 23858)	Not Available	Not Available	Not Available	766	534
This indicator was established in Fiscal Year 1	l therefore there is n	o previous performa	nce information.		
Total number of individuals (adults/youth) served (inlcudes screening/assessment and treatment) at a FPHSA Mental Health Center (LAPAS CODE - 23859)	Not Available	Not Available	7,887	7,882	6,963
This indicator was established in Fiscal Year 1	l therefore previous	performance inform	ation is limited.		
Average cost per individual served through community-based mental health services (LAPAS CODE - 21034)	\$ 1,258	\$ 1,391	\$ 1,055	\$ 1,045	\$ 1,093

#### Florida Parishes Human Services Authority General Performance Information

# 5. (KEY) Through the Permanent Supportive Housing Services activity, Florida Parishes Human Services Authority will maintain tenancy of and provide support services to 198 apartment/housing units designated for individuals/families with a variety of long-term disabilities.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Hurricane Disaster Recovery - Louisiana's Road Home Action Plan provided \$72 million in Community Development Block Grant (CDBG) funding for supportive services in impacted areas across the state to be used in conjunction with 2,000 Section 8 Project-Based Housing Choice Vouchers and 1,000 McKinney-Vento Shelter Plus Care rental subsidies for Permanent Supportive Housing (PSH) units for persons with disabilities that are homeless or at risk of homelessness.

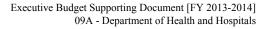
Explanatory Note: Permanent Supportive Housing Services (PSHS) is a nationally-recognized model designed to provide flexible, community-based supportive services linked to affordable rental housing units in community-integrated, non-institutional settings. PSHS targets a population with serious and long-term disabilities including mental illnesses, developmental disabilities, physical disabilities, substance use disorders, chronic health conditions such as HIV/AIDS. As a result of the 2006-2007 and 2007-2008 Louisiana Housing Finance Agency (LHFA) Tax Credit Rounds, Shelter Plus Care PSHS Program, and Project-Based Vouchers Program, PSHS provides supportive service to almost two hundred (200) PSHS units in the FPHSA catchment area. Florida Parishes Human Services Authority (FPHSA) is the designated Local Lead Agency (LLA) for the PSHS program. FPHSA is responsible for individual service planning and coordination, monitoring service delivery, quality and performance, and coordinating diverse funding streams to optimize cost-effectiveness and



service sustainability. FPHSA has established relationships with representative stakeholders from all target populations to obtain and maintain a current understanding of community needs and to conduct critical outreach efforts to ensure that PSH units are promoted to all eligible populations. The target population has a variety of complex service needs that require flexible services and supports to establish and maintain long-term housing stability. To meet these complex service needs, FPHSA PSHS Housing Support Team (HST) provides pre-tenancy assistance, move-in activities, and stabilization services in an effort to provide PSHS households long-term housing.

#### **Performance Indicators**

				Performance Inc	dicator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
	Total number of individuals or families residing in Permanent Supportive Housing (PSH) units (LAPAS CODE - 23860)	198	198	198	198	198	198







# 09-302 — Capital Area Human Services District

# Agency Description

The mission of the Capital Area Human Services District (CAHSD) is to improve the availability and quality of support to enhance each individual's quality of life. The CAHSD directs the operation and management of public, community-based programs and services relative to addiction recovery, developmental disabilities, and mental health for individuals meeting treatment criteria in the parishes of Ascension, East Baton Rouge, East Feliciana, Iberville, Pointe Coupee, West Baton Rouge, and West Feliciana.

The goals of the Capital Area Human Services District Program are:

- I. To provide mental health, addiction recovery and developmental disabilities services that consumers, their families and communities want; in a manner which provides them quick and convenient entry into services.
- II. To ensure that services provided are responsive to client concerns, integrated in service delivery methods, representative of best practice, and consistent with the goals of the Department of Health and Hospitals and its Program Offices.
- III. To promote healthy, safe lives for people by providing leadership in educating the community on the importance of prevention, early detection and intervention, and by facilitating coalition building to address localized community problems.

The Capital Area Human Services District is a political subdivision created by the Louisiana Legislature to directly operate and manage community-based mental health, addiction recovery, developmental disabilities and certain public health functions in the parishes of Ascension, East Baton Rouge, East Feliciana, Iberville, Pointe Coupee, West Baton Rouge, and West Feliciana. Functions and funds relative to the operation of these services were transferred to CAHSD from the Department of Health and Hospitals (DHH) through a Memorandum of Understanding (MOU) monitored by the DHH Secretary. Some funds relative to these functions are also appropriated directly to CAHSD. To increase responsiveness to local human service needs, CAHSD is governed by a board composed of members nominated by the respective parish governing bodies, and appointed by the Governor of Louisiana. The district became operational July 1, 1997. Capital Area Human Services District Program has four major activities: developmental disabilities, mental health, addiction recovery, and public health.

The Capital Area Human Services District (CAHSD) has one program: Capital Area Human Services District.



#### For additional information, see:

#### Capital Area Human Services District

#### Capital Area Human Services District Budget Summary

		rior Year Actuals 2011-2012	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014		Total ecommended ver/(Under) EOB
Means of Financing:									
State General Fund (Direct)	\$	19,077,032	\$	18,803,290	\$ 18,803,290	\$ 19,171,981	\$ 17,395,980	\$	(1,407,310)
State General Fund by:		, ,		, ,	, ,	, ,	, ,		
Total Interagency Transfers		9,544,187		10,139,963	10,139,963	10,139,963	9,396,992		(742,971)
Fees and Self-generated Revenues		48,000		3,207,781	3,207,781	3,207,781	3,207,781		0
Statutory Dedications		619,643		0	0	0	0		0
Interim Emergency Board		0		0	0	0	0		0
Federal Funds		72,000		72,000	72,000	10,500	10,500		(61,500)
Total Means of Financing	\$	29,360,862	\$	32,223,034	\$ 32,223,034	\$ 32,530,225	\$ 30,011,253	\$	(2,211,781)
Expenditures & Request:									
Capital Area Human Services District	\$	29,360,862	\$	32,223,034	\$ 32,223,034	\$ 32,530,225	\$ 30,011,253	\$	(2,211,781)
Total Expenditures & Request	\$	29,360,862	\$	32,223,034	\$ 32,223,034	\$ 32,530,225	\$ 30,011,253	\$	(2,211,781)
Authorized Full-Time Equiva	lents:								
Classified		0		0	0	0	0		0
Unclassified		0		0	0	0	0		0
Total FTEs		0		0	0	0	0		0



# **302\_1000 — Capital Area Human Services District**

Program Authorization: R.S. 46:2661-2666; R.S. 28:771(D); R.S. 36:254(F); and R.S. 36:258(G)

#### **Program Description**

The mission of the Capital Area Human Services District (CAHSD) Program, is to direct the operation and management of public, community-based programs and services relative to addiction recovery, developmental disability, mental health, and public health in the parishes of Ascension, East Baton Rouge, East Feliciana, Iberville, Pointe Coupee, West Baton Rouge, and West Feliciana.

The goals of the Capital Area Human Services District Program are:

- I. To provide mental health, addiction recovery, and developmental disability services that consumers, their families, and communities want in a manner that provides them quick and convenient entry into the services.
- II. To ensure that services provided are responsive to client needs and concerns, integrated in service delivery methods, representative of best practice, and consistent with the goals of the Department of Health and Hospitals and its program offices.
- III. To promote healthy and safe lives for people by providing leadership in educating the community on the importance of prevention, early detection and intervention, and by facilitating coalition building to address localized community problems.

The Capital Area Human Services District Program is a political subdivision created by the Louisiana Legislature to directly operate and manage community-based mental health, addiction recovery, developmental disabilities, and certain public health functions in the parishes of Ascension, East Baton Rouge, East Feliciana, Iberville, Pointe Coupee, West Baton Rouge, and West Feliciana. Functions and funds relative to the operation of these services were transferred to CAHSD from the Department of Health and Hospitals (DHH) through a memorandum of agreement monitored by the DHH Secretary. Some funds relative to these functions are also appropriated directly to CAHSD. To increase responsiveness to local human service needs, CAHSD is governed by a board composed of members nominated by the respective parish governing bodies, and appointed by the Governor of Louisiana. The district became operational July 1, 1997.

The Capital Area Human Services District includes the following activities:

- Administration CAHSD Administration provides leadership, management and supports in the areas of District Operations, Management and Finance, Human Resources, Employee Administration, Information Technology, and Strategic Planning & Quality Improvement for the clinical and support services offices of the District.
- Developmental Disabilities CAHSD Developmental Disabilities activity operates community-based services for mentally retarded, developmentally disabled and autistic individuals residing within the seven parishes of the District's service catchment area.
- Nurse Family Partnership CAHSD Nurse Family Partnership activity operates the Maternal and Child Health Program for individuals residing in the District's service catchment area.



- Children's Behavioral Health Services CAHSD Children's Behavioral Health Services provides the mental health and addiction recovery treatment and support services for children and adolescents in the District's service catchment area.
- Adult Behavioral Health Services CAHSD Adult Behavioral Health Services provides the mental health and addiction recovery treatment and support services for adults in the District's service catchment area.
- Prevention and Primary Care CAHSD Prevention and Primary Care provides physical health integration into the behavioral health settings for clients receiving mental health, addiction recovery and development disabilities services within the District's service catchment area.
- Disaster Response CAHSD Disaster Response provides leadership in the Region 2 Medical Special Needs Shelter Theater during disasters and provides clinical outreach supports and services to persons with behavioral health and developmental disabilities within the community during a disaster.
- Behavioral Health Emergency Services Continuum CAHSD Behavioral Health Emergency Services Continuum provides comprehensive community-based services to prevent, mitigate and avoid repeated cycles of crises to reduce the reliance on first responders, emergency departments and acute psychiatric beds.

	Prior Year Actuals ¥ 2011-2012	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation Y 2013-2014	Recommended FY 2013-2014		Total commended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$ 19,077,032	\$	18,803,290	\$ 18,803,290	\$ 19,171,981	\$ 17,395,980	\$	(1,407,310)
State General Fund by:								
Total Interagency Transfers	9,544,187		10,139,963	10,139,963	10,139,963	9,396,992		(742,971)
Fees and Self-generated Revenues	48,000		3,207,781	3,207,781	3,207,781	3,207,781		0
Statutory Dedications	619,643		0	0	0	0		0
Interim Emergency Board	0		0	0	0	0		0
Federal Funds	72,000		72,000	72,000	10,500	10,500		(61,500)
Total Means of Financing	\$ 29,360,862	\$	32,223,034	\$ 32,223,034	\$ 32,530,225	\$ 30,011,253	\$	(2,211,781)
Expenditures & Request:								
Personal Services	\$ 0	\$	0	\$ 0	\$ 0	\$ 0	\$	0
Total Operating Expenses	1,314,286		1,557,204	937,204	1,069,295	937,204		0
Total Professional Services	404,868		433,600	433,600	452,497	433,600		0
Total Other Charges	27,641,708		30,232,230	30,852,230	30,833,433	28,640,449		(2,211,781)
Total Acq&Major Repairs	0		0	0	175,000	0		0
Total Unallotted	0		0	0	0	0		0
Total Expenditures & Request	\$ 29,360,862	\$	32,223,034	\$ 32,223,034	\$ 32,530,225	\$ 30,011,253	\$	(2,211,781)

#### Capital Area Human Services District Budget Summary



	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB
Authorized Full-Time Equiv	alents:					
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
Total FTEs	0	0	0	0	0	0

## **Capital Area Human Services District Budget Summary**

## **Source of Funding**

This program is funded with State General Fund, Interagency Transfers, Fees and Self-generated Revenues, and Federal Funds. Interagency Transfers include: payments from the Office of Behavioral Health for community based treatment of mental illness, community based treatment for drug and alcohol abuse, payments from the Office for Citizens with Developmental Disabilities for the services to the mentally, physically and developmentally disabled, and payments from the Office of Public Health for community based services in Region 2, and Medical Vendor Payments - Title XIX. Fees and Self-generated Revenues represents reimbursements for ineligible patient fees from the Office of Behavioral Health, collection of fees for services provided to clients who are not Medicaid eligible through the Statewide Management Organization (SMO)/ Magellan, private pay or insurance provider clientes. Federal funds are derived from reimbursements for services provided to Medicare eligible patients. The Statutory Dedication listed is from the Overcollections Fund. (Per R.S. 39:36B. (8), see table below for a listing of expenditures out of each Statutory Dedication Fund.)

## **Capital Area Human Services District Statutory Dedications**

Fund	Act	r Year tuals 11-2012	Enacted FY 2012-20		Existing Budg as of 12/	et	ntinuation 2013-2014	ommended 2013-2014	Total commend /er/(Unde EOB	
Overcollections Fund	\$	619,643	\$	0	\$	0	\$ 0	\$ 0	\$	0

## Major Changes from Existing Operating Budget

Ge	neral Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	\$ 0 0		Mid-Year Adjustments (BA-7s):
\$	18,803,290	\$	32,223,034	0	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
\$	(20,683)	\$	(20,683)	0	Group Insurance Rate Adjustment for Active Employees
\$	(32,665)	\$	(32,665)	0	Group Insurance Rate Adjustment for Retirees
\$	(129,907)	\$	(129,907)	0	Group Insurance Base Adjustment
\$	722,505	\$	722,505	0	Salary Base Adjustment
\$	(385,979)	\$	(385,979)	0	Attrition Adjustment
\$	(86,778)	\$	(86,778)	0	Personnel Reductions



## Major Changes from Existing Operating Budget (Continued)

Ce	neral Fund	т	otal Amount	Table of Organization	Description
\$	(178,392)	\$	(178,392)	01 gamzation 0	Salary Funding from Other Line Items
\$	8,987		8,987	0	Risk Management
\$	(9,858)	\$	(9,858)	0	Legislative Auditor Fees
\$	(311,696)	\$	(311,696)	0	Rent in State-Owned Buildings
\$	3,603	\$	3,603	0	Capitol Police
\$	87	\$	87	0	UPS Fees
\$	2,559	\$	2,559	0	Civil Service Fees
\$	(7,152)	\$	(7,152)	0	Office of Computing Services Fees
					Non-Statewide Major Financial Changes:
\$	0	\$	(61,500)	0	Non Recurs federal funding due to the loss of the contract from the Federal Bureau of Prisons.
\$	0	\$	(587,748)	0	Reduction in budget authority from the Office of Behavioral Health for the Temporary Assistance for Needy Families (TANF) programs.
\$	(790,941)	\$	(790,941)	0	Annualize mid-year reduction - Savings due to the elimination of ten (10) Non T.O. FTE positions.
\$	(191,000)	\$	(191,000)	0	Contract consolidations and reductions.
\$	0	\$	(155,223)	0	Reduction in Interagency Transfer budget authority from the Office for Citizens with Developmental Disabilities.
\$	17,395,980	\$	30,011,253	0	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
_					
\$	17,395,980	\$	30,011,253	0	Base Executive Budget FY 2013-2014
\$	17,395,980	\$	30,011,253	0	Grand Total Recommended

## **Professional Services**

Amount	Description
\$31,000	Contracted Legal Council Services
\$393,600	Contract Physicians for psychiatric evaluations
\$9,000	Media & Public Relations Consultant
\$433,600	TOTAL PROFESSIONAL SERVICES

## **Other Charges**

Amount	Description
	Other Charges:
\$19,930,699	Salaries and related benefits for Non T.O. FTE positions



## **Other Charges (Continued)**

Amount	Description
\$7,241,043	Funding to support mental health, addiction recovery and developmental disabilities services via Social Services Contracts
\$27,171,742	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$10,410	Payments to the Division of Administration for Uniform Payroll Services
\$217,096	Payments to the Division of Administration - Office of Risk Management
\$15,314	Payments to the Legislative Auditor
\$287,175	Payments to Capitol Police
\$58,738	Payments to the Department of Civil Service (Civil Service Fees)
\$690,290	Rent in State Owned Buildings
\$18,977	Office of Computing Service Fees
\$148,461	Payment to the Office of Telecommunications for fees
\$22,246	Miscellaneous commodities and services
\$1,468,707	SUB-TOTAL INTERAGENCY TRANSFERS
\$28,640,449	TOTAL OTHER CHARGES

## **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.

## **Performance Information**

#### 1. (KEY) Through the Administration activity, CAHSD will support and oversee programmatic operations that improve health outcomes of the citizens served by ensuring that at least 90% of LaPas Indicators meet or exceed target within (-/+) 4.99%.

Children's Budget Link: "Not Applicable"

Human Resource Policies Beneficial to Women and Families Link: "Not Applicable"

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): "Not Applicable"

Explanatory Note: Administration establishes strategic goals and objectives, develops policy and procedures, provides direction, training and guidance, and monitors compliance with state and federal regulations, departmental directives, and legislative mandates.



#### **Performance Indicators**

L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Inc Performance Standard as Initially Appropriated FY 2012-2013	licator Values Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of staff Performance Appraisals conducted in compliance with Civil Service guidelines (LAPAS CODE - 23989)	100%	100%	100%	100%	100%	100%
K Percentage of state assets in the Protege system located/ accounted for annually (LAPAS CODE - 23990)	100%	100%	100%	100%	100%	100%
K Percentage score on annual Civil Service ISIS Human Resources Data Integrity Report Card (LAPAS CODE - 23991)	100%	100%	100%	100%	100%	100%
K Percentage of LaPas indicators that meet target within (+/-) 4.9 % or exceed target (LAPAS CODE - 23992)	90%	79%	90%	90%	90%	90%
K Number of findings in Legislative Auditor Report resulting from misappropriation of resources, fraud, theft or other illegal or unethical activity (LAPAS CODE - 23993)	Not Available	0	0	0	0	0

#### 2. (KEY) Through the Developmental Disabilities activity, CAHSD will provide services for persons with developmental disabilities in the least restrictive setting near their home or community and ensure that at least 95% of the persons served will have satisfaction with the services they receive.

Children's Budget Link: This activity is linked to Objective I.1.b of the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: "Not Applicable"

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): "Not Applicable"

Explanatory Note: This activity reflects the performance of the Developmental Disabilities unit of the Capital Area Human Services District. This section provides case management, assistive supplies, support services and eligibility determination for individuals living with developmental disabilities to avoid out-of-home placement and foster/increase their ability to live independently within the community.



#### **Performance Indicators**

			Performance Inc	dicator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
S Percentage of those surveyed reporting that they had choice in the services they received (LAPAS CODE - 15703)	75%	83%	75%	75%	75%	75%
S Percentage of those surveyed reporting they had overall satisfaction with the services received (LAPAS CODE - 15704)	95%	96%	95%	95%	95%	95%
S Percentage of those surveyed reporting regular participation in community activities (LAPAS CODE - 15705)	70%	59%	70%	70%	70%	70%
K Percentage of those surveyed reporting that the Individual and Family Support services contributed to maintaining themselves or their family member in their own home (LAPAS CODE - 15707)	80%	86%	80%	80%	80%	80%

#### **Capital Area Human Services District General Performance Information**

Performance Indicator Values									
Performance Indicator Name	Prior Year Actual FY 2007-200		Prior Y Actua FY 2008-	ıl	F	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	]	Prior Year Actual FY 2011-2012
Number of available cash subsidy slots (LAPAS CODE - 11189)	2	239		239		220	201		201
Amount of cash subsidy stipend per person per month (LAPAS CODE - 11198)	\$ 2	258	\$	258	\$	258	\$ 258	\$	258
Number of person determined eligible for MR/ DD services, but not yet receiving services (LAPAS CODE - 15712)		24		141		39	182		0

## 3. (KEY) Through the Nurse Family Partnership activity, CAHSD will provide home visiting for first time, low-income mothers to 100% capacity.

Children's Budget Link: This objective is linked to Objective I.1.a in the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: "Not Applicable"



Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): "Not Applicable"

Explanatory Note: NFP's three major goals are to improve pregnancy outcomes by helping women engage in good preventative health practices; improve child health & development by helping parents provide responsible, competent care, and improve economic self-sufficiency of the families by helping parents envision for their future, plan future pregnancies, continue their education and find work.

#### **Performance Indicators**

			Performance Ind	Performance Indicator Values						
L e v e Performance Indicator I Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014				
K Total number of home visits completed (LAPAS CODE - 25074)	Not Applicable	Not Applicable	4,680	4,680	4,680	4,680				
K Number of families served in program (LAPAS CODE - 25075)	Not Applicable	Not Applicable	450	450	450	450				

#### 4. (KEY) Through the Children's Behavioral Health Services activity, CAHSD will provide an integrated, comprehensive behavioral health system of care prevention & treatment services for at risk youth ages 6-18 1 years & their families and will ensure that at least 95% of children/adolescents who are admitted for mental health services and 85% admitted for addiction recovery services 2 are served in their parish of residence.

Children's Budget Link: This objective is linked to Objective I.1.a of the Children's Budget. This activity supports Act 5 of 1998 [First Extraordinary Session] by utilization of Assertive Community Treatment (ACT) teams in the de-escalation and resolution of potential crisis in the home and preventing out-of-home placement; Interagency Services Coordination (ISC) to bring together state and local service providers (CAHSD, DSS, OCS, FINS, OJJ, school officials, truancy officials) to assess and address the needs of children at risk of out-of-home placement, hospitalization or incarceration; and Family Preservation (FP) teams work with the entire family to strengthen the parent's ability to parent responsibly so that the child may thrive in the home and in school.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by providing access to and provisions of school-based mental health and addictive disorders services to children in their parish of residence.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, Goal 26: Reduce substance abuse to protect the health, safety and quality of life for all, especially children. TANF: Utilizing TANF funds in cooperation with DSS and OAD, we are now able to provide the treatment services necessary for TANF-eligible women and their children with addictive disorders to maintain a lifestyle free from the harmful effects of addiction. The goals of this TANF program include not only substance abuse treatment for the mother, but family reunification, developmental testing, and safe housing services for the dependent children.



Explanatory Note: This activity reflects the performance of the Children's Behavioral Health Services unit of the Capital Area Human Services District. The multi-specialty staff helps manage the many issues causing or arising from a child's emotional, mental and/or addiction recovery.

#### **Performance Indicators**

		Performance Inc	licator Values		
Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
95%	98%	95%	95%	95%	95%
85%	100%	85%	85%	85%	85%
15%	2%	15%	15%	15%	15%
95%	100%	95%	95%	95%	95%
40%	39%	40%	40%	40%	40%
	Performance Standard FY 2011-2012	Performance Standard FY 2011-2012Actual Yearend Performance FY 2011-201295%98%95%98%100%2%95%100%	Yearend Performance PY 2011-2012Actual Yearend Performance PY 2011-2013Standard as Standard as Performance PY 2012-201395%98%95%95%100%85%15%2%15%95%100%95%	Yearend Performance FY 2011-2012Actual Yearend Performance FY 2012-2013Existing Performance Standard FY 2012-201395%98%95%95%95%100%85%85%15%2%15%15%95%100%95%95%	Yearend Performance Y 2011-2012Actual Yearend Performance PY 2012-2013Performance Performance Standard PY 2012-2013Performance Continuation Budget Level 



		Perfo	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012
Number of children/adolescents admitted per year who are provided publicly supported behavioral services in their parish of residence (LAPAS CODE - 24001)	897	1,145	1,195	1,011	1,304
Number of child/adolescents admitted per year for behavioral health services (LAPAS CODE - 24002)	1,023	1,171	1,237	1,064	1,334
Number of parishes with parish-domiciled public behavioral health services for children/ adolescents (LAPAS CODE - 24003)	7	7	7	7	7
Number of child/adolescent substance abuse primary prevention programs offered (LAPAS CODE - 11321)	16	16	16	13	13
Number of parishes in which child/adolescent substance abuse primary prevention programs exist (LAPAS CODE - 11323)	7	7	7	6	6

#### **Capital Area Human Services District General Performance Information**

Primary Prevention Services are available in East Baton Rouge, Ascension, Iberville, East Feliciana, West Feliciana and Pointe Coupee Parishes.

Percentage of child/adolescent mental health prevalence population served (LAPAS CODE - 15687)	10.0%	12.0%	12.0%	13.0%	10.0%
Total children/adolescents served (LAPAS CODE - 24004)	2,386	2,619	2,854	2,915	7,786
Average cost per person served in the community (LAPAS CODE - 24005)	\$ 1,907 \$	1,734 \$	1,448 \$	1,104 \$	605

# 5. (KEY) Through the Adult Behavioral Health Services activity, CAHSD will provide a comprehensive continuum of coordinated community-based services and ensure that at least 80% of clients will successfully complete the Addiction Recovery Services inpatient program..

Children's Budget Link: "Not Applicable"

Human Resource Policies Beneficial to Women and Families Link: "Not Applicable"

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): TANF: Utilizing TANF funds in cooperation with DSS and OAD, we are now able to provide the treatment services necessary for TANF-eligible women and their children with addictive disorders to maintain a lifestyle free from the harmful effects of addiction. The goals of this TANF program include not only substance abuse treatment for the mother, but family reunification, developmental testing, and safe housing services for the dependent children.

Explanatory Note: This activity reflects the performance of the Adult Behavioral Health Services unit of the Capital Area Human Services District. The multi-specialty staff helps manage the many issues causing or arising from serious mental illness and addiction problems (i.e. criminal activity, homelessness, unemployment, hospitalization, failed physical health, etc.).



#### **Performance Indicators**

			Performance In	dicator Values		
L e v e Performance Indicat l Name	Yearend Performance or Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
S Percentage of persons served in Community Mental Health Clinics the have been maintained in the community for the p six months (LAPAS CODE - 15681)		98%	96%	96%	96%	96%
S Annual percentage of adults reporting satisfactory access to services (LAPAS COD 15683)	E - 85%	93%	85%	85%	85%	85%
S Annual percentage of adults reporting positive service quality (LAPAS CODE - 15684)		97%	90%	90%	90%	90%
K Percentage of clients successfully completing outpatient treatment program (addictive disorders) (LAPAS CO - 9976)		70%	65%	65%	65%	65%
K Percentage of persons successfully completing residential addictions (CARP 28 day inpatient treatment program (LAPAS CODE - 11284	)	76%	85%	85%	85%	85%
S Percentage of adults wit major mental illness ser in the community receiv new generation medicat (LAPAS CODE - 15680	ved ing on	93%	95%	95%	95%	95%



## Capital Area Human Services District General Performance Information

		Perfo	rmance Indicator V	Values	
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012
Total adults served in CAHSD (Mental Health) (LAPAS CODE - 24006)	6,350	6,638	7,150	7,027	7,573
Average cost per person served in community (Mental Health) (LAPAS CODE - 24007)	\$ 1,907	\$ 1,734	\$ 1,478	\$ 1,365	\$ 1,134
Percentage of adult mental health prevalence population served (LAPAS CODE - 15686)	35%	37%	41%	38%	33%
Number of Community Mental Health Centers operated in CAHSD (LAPAS CODE - 15688)	3	3	3	3	3
1. CAHSD operates two Community Mental H	lealth Centers in Eas	t Baton Rouge Paris	h and one Ascension	n Parish.	
Percentage of Community Mental Health Centers licensed (LAPAS CODE - 11240)	100.00%	100.00%	100.00%	100.00%	100.00%
Numbers of persons provided social detoxification services (LAPAS CODE - 24008)	2,497	2,587	2,158	959	753
Average daily census (Detoxification) (LAPAS CODE - 11241)	42	34	32	11	10
Average length of stay in days (Detoxification) (LAPAS CODE - 11250)	6.10	5.70	4.90	5.60	4.90
Number of beds (Detoxification) (LAPAS CODE - 11297)	40	40	20	12	10
Percentage of positive responses on client survey (Detoxification) (LAPAS CODE - 15700)	96%	95%	97%	98%	100%
Number of beds Residential (Inpatient) (LAPAS CODE - 11301)	40	40	40	40	40
Average daily census Residential (Inpatient) (LAPAS CODE - 15698)	38	35	38	34	31
Number of persons provided Residential (28 day Inpatient) services (LAPAS CODE - 24009)	529	542	575	506	423
Number of persons provided Community-Based Residential services (LAPAS CODE - 24010)	260	318	331	341	312
Average daily census (Community-Based Residential) (LAPAS CODE - 15695)	53	55	59	58	49
Number of beds (Community-Based Residential) (LAPAS CODE - 15696)	65	64	59	59	55
Number of persons provided outpatient addiction recovery services (LAPAS CODE - 24011)	3,219	2,013	2,762	2,618	2,116
Number of services provided (Outpatient Addiction Recovery services) (LAPAS CODE - 11294)	32,863	32,752	32,654	33,170	29,974
Number of admissions (Outpatient Compulsive Gambling) (LAPAS CODE - 15691)	84	60	38	42	45
Number of services provided (Outpatient Compulsive Gambling) (LAPAS CODE - 15694)	1,135	1,723	1,734	1,952	1,654



#### 6. (KEY) Through the Prevention and Primary Care activity, CAHSD will improve physical health and emotional well-being of the adult un/underinsured population and ensure that at least 50% of tobacco cessation group participants will reduce the use of tobacco by 50% or quit the use of tobacco use by the end of the program.

## Children's Budget Link: "Not Applicable"

Human Resource Policies Beneficial to Women and Families Link: "Not Applicable"

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): The social workers provided care management, assistance with basic care needs, (transportation, access to medication, housing, and legal services), health education, referral to tobacco cessation, mental health counseling, and psychosocial assessment. The tobacco cessation model utilized is the Freedom from Smoking Program of the American Lung Association (the mentally ill make up 44% of smokers).

Explanatory Note: Integration of behavioral health and primary care is critical and supported by a review of academic journals which indicates that public behavioral health clients die 25 years earlier due to risky behaviors, the complexity of their medication management, and the lack of care addressing other chronic illness. 41% of our clients have 4+ co-morbid physical health problems. This highly specialized program focuses on connecting the severely mentally ill individual with primary care providers to eliminate and/or improve chronic illnesses, to educate them on the importance of good overall health care (behavioral and physical) and to increase the life expectancy of the individuals receiving services in our public behavioral health clinics.

				Performance Inc	dicator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
	Percentage of new adult admissions in the three largest behavioral health clinics that received a physical health screen (LAPAS CODE - 24012)	95%	78%	95%	95%	95%	95%

#### **Performance Indicators**



#### **Performance Indicators (Continued)**

			licator Values		
Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
25%	26%	25%	25%	25%	25%
72%	74%	72%	72%	72%	72%
76%	69%	72%	72%	76%	76%
500/	000/		500/	5004	50%
	Performance Standard FY 2011-2012 25% 72%	Performance Standard FY 2011-2012Actual Yearend Performance FY 2011-201225%26%72%74%72%69%	Yearend Performance Standard FY 2011-2012Actual Yearend Performance FY 2011-2013Performance Standard as Initially Appropriated FY 2012-201325%26%25%72%74%72%76%69%72%	Yearend Performance FY 2011-2012Actual Yearend Performance FY 2012-2013Existing Performance Standard FY 2012-201325%26%25%25%72%74%72%72%76%69%72%72%	Yearend Performance Standard Standard Performance PY 2011-2012Actual Yearend Performance 

## 7. (KEY) Through the Disaster Response activity, CAHSD will deliver targeted communication, supports, and services prior to, during and after and emergency/disaster.

Children's Budget Link: "Not Applicable"

Human Resource Policies Beneficial to Women and Families Link: "Not Applicable"

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): "Not Applicable"

Explanatory Note: This program works to prepare and protect clients and the greater community from the impact of an emergency or disaster thru continuous education and outreach messages and to assist them in their own home preparedness plans; enabling them to have their own response developed and ready and thus most able to take care of their own needs independently.



#### **Performance Indicators**

L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Ind Performance Standard as Initially Appropriated FY 2012-2013	licator Values Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of Medical Special Needs Shelter assigned to staff who are trained in required NIMS courses (LAPAS CODE - 24017)	100%	98%	100%	100%	100%	100%
S Percentage of staff assigned to Medical Special Needs Shelter who were successfully contacted during call drill (LAPAS CODE - 24019)	80%	83%	80%	80%	80%	80%

8. (KEY) Through the Behavioral Health Emergency Services Continuum activity, CAHSD will provides a comprehensive community-based continuum of behavioral health (BH) services to prevent, mitigate and avoid repeated cycles of crises to reduce reliance on first responders, emergency departments and acute psychiatric beds and ensure that 100% of all calls received by Access Services during hours of operation are triaged at the time of call and referred for care.

Children's Budget Link: "Not Applicable"

Human Resource Policies Beneficial to Women and Families Link: "Not Applicable"

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): "Not Applicable"

Explanatory Note: The focus of the continuum is to provide: harm reduction for clients, law enforcement, treatment providers, and transporters; rapid access to urgent care, crisis intervention and stabilization services; training for service partners; coordination and linkage of stakeholders and providers for a cohesive system; humane, essential care; linkage to ongoing care to prevent emergencies and decrease recidivism; cost-effective care and diminished financial losses, and ongoing performance appraisal.



#### **Performance Indicators**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of all calls received by Access Services during hours of operation that were triaged at the time of call and referred for care (LAPAS CODE - 24022)	95%	96%	95%	95%	95%	95%
K Percentage of clients referred from the MHERE to CAHSD clinics for aftercare that kept their appointment (LAPAS CODE - 24023)	50%	54%	50%	50%	50%	50%
K Percentage of consumers receiving Inter-agency Services Coordination that achieve and maintain residential stability within twelve (12) months (LAPAS CODE - 24024)	70%	100%	70%	70%	70%	70%



## 09-303 — Developmental Disabilities Council

& Louisiana Developmental Disabilities Council

## Agency Description

The mission of the Louisiana Developmental Disabilities Council is to advocate for and support people with developmental disabilities to exercise control over their lives and participate fully in the community.

The goal of the Developmental Disabilities Council Program is to:

I. Effectively implement the Developmental Disabilities Assistance and Bill of Rights Act of 2000 in Louisiana.

The Council supports Act 1078 through funding for information and referral and support to parents of children with disabilities through regional Families Helping Families Centers.

For additional information, see:

Developmental Disabilities Council

## **Developmental Disabilities Council Budget Summary**

	Prior Year Actuals ( 2011-2012	F	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total ecommended over/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 372,934	\$	383,364	\$ 383,364	\$ 383,631	\$ 328,961	\$ (54,403)
State General Fund by:							
Total Interagency Transfers	0		0	0	0	0	0
Fees and Self-generated Revenues	0		0	0	0	0	0
Statutory Dedications	0		0	0	0	0	0
Interim Emergency Board	0		0	0	0	0	0
Federal Funds	1,390,810		1,594,432	1,594,432	1,558,269	1,563,881	(30,551)
Total Means of Financing	\$ 1,763,744	\$	1,977,796	\$ 1,977,796	\$ 1,941,900	\$ 1,892,842	\$ (84,954)
Expenditures & Request:							
Developmental Disabilities Council	\$ 1,763,744	\$	1,977,796	\$ 1,977,796	\$ 1,941,900	\$ 1,892,842	\$ (84,954)
Total Expenditures & Request	\$ 1,763,744	\$	1,977,796	\$ 1,977,796	\$ 1,941,900	\$ 1,892,842	\$ (84,954)



## **Developmental Disabilities Council Budget Summary**

	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB
Authorized Full-Time Equiva	alents:					
Classified	6	5	5	5	6	1
Unclassified	2	2	2	2	2	0
Total FTEs	8	7	7	7	8	1



## **303\_1000 — Developmental Disabilities Council**

Program Authorization: R.S. 28:750-758; R.S. 36:259(L); P.L. 106-402

## **Program Description**

The Developmental Disabilities Council is a 28 member, Governor appointed board whose function is to implement the Federal Developmental Disabilities Assistance and Bill of Rights Act (P.L. 106-402) in Louisiana. The focus of the Council is to facilitate change in Louisiana's system of supports and services to individuals with disabilities and their families in order to enhance and improve their quality of life. The Council plans and advocates for greater opportunities for individuals with disabilities in all areas of life, and supports activities, initiatives and practices that promote the successful implementation of the Council's Mission and mandate for systems change.

The mission of the Louisiana Developmental Disabilities Council is to advocate for and support people with developmental disabilities to exercise control over their lives and participate fully in the community.

The program goals of the Developmental Disabilities Council are to:

- I. Pursue systems change (e.g., the way human service agencies do business so that individuals with developmental disabilities and their families have better or expanded services),
- II. Advocacy (e.g., educating policy makers about unmet needs of individuals with developmental disabilities),
- III. Capacity building (e.g., working with state service agencies to provide training and benefits to direct care workers) to promote independence, self-determination, productivity, integration and inclusion of people with developmental disabilities in all facets of community life.

The Council provides services, through contracts with agencies, organizations, universities, other state agencies and individuals and funds projects which facilitate advocacy, capacity building and systemic change for individuals with disabilities and their families.

The Developmental Disabilities Council (DDC) has only one program and one activity: Developmental Disabilities Council; where DDC implement initiatives identified in Council plan.

Prior Year Actuals FY 2011-2012		Existing Oper Enacted Budget FY 2012-2013 as of 12/01/12			ontinuation 7 2013-2014	Recommended FY 2013-2014		Total Recommended Over/(Under) EOB		
Means of Financing:										
State General Fund (Direct)	\$	372,934	\$ 383,364	\$	383,364	\$ 383,631	\$	328,961	\$	(54,403)

## **Developmental Disabilities Council Budget Summary**



## **Developmental Disabilities Council Budget Summary**

	Α	or Year ctuals 011-2012	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation FY 2013-2014	decommended FY 2013-2014	Total Recommended Over/(Under) EOB
State General Fund by:								
Total Interagency Transfers		0		0	0	0	0	0
Fees and Self-generated Revenues		0		0	0	0	0	0
Statutory Dedications		0		0	0	0	0	0
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		1,390,810		1,594,432	1,594,432	1,558,269	1,563,881	(30,551)
<b>Total Means of Financing</b>	\$	1,763,744	\$	1,977,796	\$ 1,977,796	\$ 1,941,900	\$ 1,892,842	\$ (84,954)
Expenditures & Request:								
Personal Services	\$	597,640	\$	716,646	\$ 590,001	\$ 591,207	\$ 598,429	\$ 8,428
Total Operating Expenses		121,154		135,516	137,179	138,861	137,179	0
Total Professional Services		0		0	0	0	0	0
Total Other Charges		1,037,101		1,125,634	1,236,616	1,205,832	1,151,234	(85,382)
Total Acq & Major Repairs		7,849		0	14,000	6,000	6,000	(8,000)
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	1,763,744	\$	1,977,796	\$ 1,977,796	\$ 1,941,900	\$ 1,892,842	\$ (84,954)
Authorized Full-Time Equiva	lents:							
Classified		6		5	5	5	6	1
Unclassified		2		2	2	2	2	0
Total FTEs		8		7	7	7	8	1

## **Source of Funding**

This program is funded with State General Fund and Federal Funds. The Federal Funds are from the Federal Developmental Disabilities Grant.

## Major Changes from Existing Operating Budget

Gen	General Fund Total Amount		Table of Organization	Description						
\$	0	\$ 0 0		0	Mid-Year Adjustments (BA-7s):					
\$	383,364	\$	1,977,796	7	Existing Oper Budget as of 12/01/12					
					Statewide Major Financial Changes:					
	0		8,994	0	Louisiana State Employees' Retirement System Rate Adjustment					
	0		186	0	Louisiana State Employees' Retirement System Base Adjustment					
	(140)		(700)	0	Group Insurance Rate Adjustment for Active Employees					

DHH - 54



## Major Changes from Existing Operating Budget (Continued)

General Fund	Total Amount	Table of Organization	Description
(48)	(240)	0	
188	188	0	Salary Base Adjustment
0	6,000	0	Acquisitions & Major Repairs
0	(14,000)	0	Non-Recurring Acquisitions & Major Repairs
0	(8,571)	0	Risk Management
63	63	0	UPS Fees
0	412	0	Civil Service Fees
			Non-Statewide Major Financial Changes:
0	(37,841)	0	Reducing expenditures to match the level of needed services for our developmental disabled population.
0	15,207	1	Annualization of a T.O. Position partially funded for current year.
(16,126)	(16,126)	0	Create administrative and related functional savings in Families Helping Families Regional Center Contracts.
(38,340)	(38,340)	0	Contract consolidations and reductions to reduce overhead and achieve agency efficiencies for SFY14.
0	(186)	0	Retirement Funding from Other Line Items
\$ 328,961	\$ 1,892,842	8	Recommended FY 2013-2014
\$ 0	\$ 0	0	Less Supplementary Recommendation
\$ 328,961	\$ 1,892,842	8	Base Executive Budget FY 2013-2014
\$ 328,961	\$ 1,892,842	8	Grand Total Recommended

## **Professional Services**

Amount	Description
	This program does not have funding for Professional Services for Fiscal Year 2013-2014.

## **Other Charges**

Amount	Description
	Other Charges:
\$328,898	Families Helping Families (FHF) Resource Centers - There are nine regional resource centers that provide information and referral, education and training and peer support to individuals and families with disabilities.
\$25,000	Stipend Program - This program provides support to individuals with developmental disabilities and their family members to attend meetings, conferences and other training events. The stipends are available through each Families Helping Families Resource Center.



## **Other Charges (Continued)**

Amount	Description
\$135,000	Louisiana Citizens for Action Now (LaCAN) - This is grassroots advocacy network of individuals and families who have worked together since 1988 advocating for a service system that supports individuals with disabilities to live in their own homes and for implementation of Louisiana's Community and Family Support System Plan. There are ten regional LaCAN leaders who receive stipends and reimbursement for expenses associated with the dissemination of information about the Community and Family Support System to other parents, individuals with disabilities, professionals and advocates in the community.
\$94,000	Statewide Self-Advocacy Organization - This project is to develop and implement a statewide self-advocacy organization, and to provide support necessary to hold meetings and conduct the business of the statewide group. The organization is made up of and led by self-advocates.
\$80,000	Partners in Policymaking - This is a leadership training program for parents of young children with developmental disabilities and self-advocates. There are eight monthly sessions that provide state-of-the-art training in disability issues to develop the competencies in participants that are necessary for effective advocacy to influence public policy at all levels of government.
\$110,000	LaTEACH - A program that provides education, training and support for family members of children with disabilities to serve as effective advocates for their children's special education needs.
\$10,000	My Choice Training Project – Provides training for people with developmental disabilities by individuals with developmental disabilities on topics that increase skill and knowledge in areas related to communicating needs and wants, abuse and neglect, and other areas identified.
\$12,000	Thomas M. Hoffman, L.L.C- This contract is for budget analysis, budget preparation and other budgetary matters as required.
\$1,000	A&E and Redstick Internet- This is a contract for web design and maintenance for the DD Council's website.
\$32,375	Child Care Inclusion Initiative- Advocate for policies that promote inclusion of children with developmental disabilities in child care settings, training standards that ensure capacity to appropriately meet all children's needs and rating systems that inform parents or qualified child care settings in their community.
\$90,000	Ombudsman Pilot Program (SIL) - Support a pilot ombudsman program for people with developmental disabilities receiving Supported Independent Living (SIL) services in Jefferson Parish. The pilot will demonstrate effective methods for ensuring that people receiving SIL services have access to an Ombudsman that can investigate potential abuses and advocate for participants to enjoy all rights and protections indicated by law.
\$91,100	Physician Training - Develop curricula and provide structured interview of a parent of a child with complex/intensive support needs for Nurse Practitioner (NP) students, 'Physician Assistant (PA) students, and online Continuing Medical Education (CME) units for physicians to improve physicians understanding of experiences of individuals with significant 'disabilities.
\$117,720	Amount available for additional initiatives.
\$1,127,093	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$3,191	Office of Risk Management-Insurance Premiums
\$353	Uniform Payroll Services
\$5,000	Division of Administration- Printing
\$7,000	Division of Administration- Postage
\$1,600	Civil Service Fees
\$6,997	Office of Telecommunications
\$24,141	SUB-TOTAL INTERAGENCY TRANSFERS
\$1,151,234	TOTAL OTHER CHARGES

## **Acquisitions and Major Repairs**

Amount	Description
	Acquisitions and Major Repairs
\$6,000	Replace outdated telephone system
\$6,000	TOTAL ACQUISITIONS AND MAJOR REPAIRS



## **Performance Information**

1. (KEY) Through the Developmental Disabilities Council activity, to maintain a Council to undertake advocacy, capacity building, and systematic change activities that contribute to a coordinated, consumer and family-centered and directed, comprehensive system of community-based and individualized supports and services for individuals with developmental disabilities.

#### Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: This objective supports Act 1078 through funding for training and technical assistance to child care providers to increase their acceptance of children with disabilities. This will directly assist women with children with disabilities who have not been able to have day care for their child because there are currently few day care centers that accept children with disabilities.

Other Link(s): (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010: Goal 6: Promote the health of people with disabilities, prevent secondary conditions, and eliminate disparities between people with and without disabilities in the U.S. Population. Goal 18: Improve mental health and ensure access to appropriate, quality mental health services.

			Performance Inc			
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of decisions regarding policy and program practices influenced through council involvement. (LAPAS CODE - 24026)	75%	81%	75%	75%	75%	75%
K Percent of council plan objectives on target (LAPAS CODE - 24027)	95%	95%	95%	95%	95%	95%

#### **Performance Indicators**

2. (KEY) Through the Developmental Disabilities council activity, to effectively provide or support information and referral services, provide education and training for peer to peer support to individuals with disabilities, parents/family members, professionals in each region of Louisiana.

#### Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: This objective supports Act 1078 through funding for training and technical assistance to child care providers to increase their acceptance of children with disabilities. This will directly assist women with children with disabilities who have not been able to have day care for their child because there are currently few day care centers that accept children with disabilities.



Other Link(s): (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010: Goal 6: Promote the health of people with disabilities, prevent secondary conditions, and eliminate disparities between people with and without disabilities in the U.S. Population. Goal 18: Improve mental health and ensure access to appropriate, quality mental health services.

#### **Performance Indicators**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of information and referral services provided (LAPAS CODE - 10697)	25,620	40,993	25,260	25,260	25,620	25,620
K Number of training sessions provided statewide (LAPAS CODE - 21284)	265	285	265	265	265	225
K Number of individuals provided training statewide (LAPAS CODE - 21285)	2,880	5,711	2,880	2,880	2,880	2,500
K Number of individuals provided peer to peer support opportunities statewide (LAPAS CODE - 21286)	9,380	23,664	9,380	9,380	9,380	9,380
K Percentage of individuals who report that they received the information/ support they needed (LAPAS CODE - 24025)	90%	100%	90%	90%	90%	90%

#### **Developmental Disabilities Council General Performance Information**

	Performance Indicator Values									
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012					
Percent of funds spent on community living (LAPAS CODE - 14074)	8%	38%	33%	30%	30%					
Percent of funds spent on employment activities (LAPAS CODE - 14075)	5%	12%	24%	22%	24%					
Percent of funds spent on system coordination (LAPAS CODE - 14076)	87%	49%	43%	48%	46%					



## Developmental Disabilities Council General Performance Information (Continued)

	Performance Indicator Values										
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012						
Percent of individuals with disabilities assisted (LAPAS CODE - 14077)	52%	54%	54%	5%	6%						
Prior Year Actual FY 2009-2010: Previous year Developmental Disabilities Council. DIAL wa regional resource centers. The significant reduc of a significantly higher overall number of calls high volume of total requests for information be disabilities making direct calls.	s discontinued in Dec ction in percentage o . Therefore, the num	cember 2008. The cu f individuals with di ber of individuals wi	arrent data is derived sabilities from previ ith disabilities access	l from Families Help ous years needs to be sing information is st	ing Families e taken in context ill fairly high. The						
Percent of parents/family members of individuals with disabilities assisted (LAPAS CODE - 14078)	33%	30%	35%	73%	69%						
Percent of professionals assisted (LAPAS CODE - 14079)	14%	16%	17%	22%	25%						
Percent of Families Helping Families maintaining 100% compliance with Developmental Disabilities Council contractual obligations and standards of operation (LAPAS											



## 09-304 — Metropolitan Human Services District

O NETROPOLITAN HUNAN SERVICES DISTRICT

## Agency Description

The mission of the Metropolitan Human Services District (MHSD) is to provide and coordinate, directly and through community collaboration, a range of services to address mental health, addictive disorders, and developmental disability needs among the citizens of Orleans, St. Bernard, and Plaquemines Parishes.

The goals of the Metropolitan Human Services District are:

- I. To identify, strengthen and link relevant resources that will foster community collaboration resulting in a dynamic and comprehensive system of service delivery for citizens of Orleans, St. Bernard and Plaquemines Parishes.
- II. To develop meaningful, innovative, research-based activities and programs directed towards the self-actualization of individuals and families throughout the community.
- III. To deliver high-quality, cost-efficient, community-based prevention, early intervention, treatment, recovery supports, and individual and family supports that will equip and strengthen individuals, children, and youth to be maintained in the community.
- IV. To deliver a seamless, integrated, and comprehensive system of services that is responsive to consumer strengths, needs, interests, and choices.
- V. To ensure quick and easy access of consumers, family members and the community to an efficient system of care which addresses their addictive disorder, developmental disability and mental health needs.

The Metropolitan Human Services District (MHSD) has one program: Metropolitan Human Services District.

For additional information, see:

Metropolitan Human Services District

## Metropolitan Human Services District Budget Summary

	Prior Year Actuals FY 2011-2012		Enacted FY 2012-2013		Existing Oper Budget as of 12/01/12		Continuation FY 2013-2014		Recommended FY 2013-2014		Total ecommended ver/(Under) EOB
Means of Financing:											
State General Fund (Direct)	\$	20,062,683	\$	22,696,482	\$	22,696,482	\$	22,633,149	\$	21,194,397	\$ (1,502,085)
State General Fund by:											
Total Interagency Transfers		4,428,823		6,792,758		6,923,007		6,678,893		5,996,868	(926,139)
Fees and Self-generated Revenues		530,119		2,241,030		2,241,030		1,044,243		1,044,243	(1,196,787)



## Metropolitan Human Services District Budget Summary

		rior Year Actuals 2011-2012	FY	Enacted Y 2012-2013	Existing Oper Budget Is of 12/01/12	Continuation FY 2013-2014	ecommended 'Y 2013-2014	Total ecommended over/(Under) EOB
Statutory Dedications		397,904		0	0	0	0	0
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		1,311,625		1,355,052	1,355,052	1,355,052	1,355,052	0
Total Means of Financing	\$	26,731,154	\$	33,085,322	\$ 33,215,571	\$ 31,711,337	\$ 29,590,560	\$ (3,625,011)
Expenditures & Request:								
Metropolitan Human Services District	\$	26,731,154	\$	33,085,322	\$ 33,215,571	\$ 31,711,337	\$ 29,590,560	\$ (3,625,011)
Total Expenditures & Request	\$	26,731,154	\$	33,085,322	\$ 33,215,571	\$ 31,711,337	\$ 29,590,560	\$ (3,625,011)
Authorized Full-Time Equiva	lents:							
Classified		0		0	0	0	0	0
Unclassified		0		0	0	0	0	0
Total FTEs		0		0	0	0	0	0



## **304\_1000 — Metropolitan Human Services District**

Program Authorization: Act 846 of the 2003 Regular Legislative Session, R.S. 28:865

## **Program Description**

The mission of the Metropolitan Human Services District (MHSD) is to provide and coordinate, directly and through community collaboration, a range of services to address mental health, addictive disorders, and developmental disability needs among the citizens of Orleans, St. Bernard, and Plaquemines Parishes.

The goals of the Metropolitan Human Services District are:

- I. To identify, strengthen and link relevant resources that will foster community collaboration resulting in a dynamic and comprehensive system of service delivery for citizens of Orleans, St. Bernard and Plaquemines Parishes.
- II. To develop meaningful, innovative, research-based activities and programs directed towards the self-actualization of individuals and families throughout the community.
- III. To deliver high-quality, cost-efficient, community-based prevention, early intervention, treatment, recovery supports, and individual and family supports that will equip and strengthen individuals, children, and youth to be maintained in the community.
- IV. To deliver a seamless, integrated, and comprehensive system of services that is responsive to consumer strengths, needs, interests, and choices.
- V. To ensure quick and easy access of consumers, family members and the community to an efficient system of care which addresses their addictive disorder, developmental disability and mental health needs.

The Metropolitan Human Services District (MHSD) program represents the division of administration within Metropolitan Human Services District. This division includes administration, management, finance, human resources, quality assurance, medical management, intergovernmental relations with the State of Louisiana, City of New Orleans, St. Bernard, and Plaquemines Parishes. The MHSD program includes three main activities: Developmental Disabilities, Addictive Disorders, and the Adult, Families, and Children Community Based Mental Health.

Care Management/Administration – MHSD will implement a care management system that bridges the current gap between inpatient and outpatient behavioral health (BH) services, assessing the consumer's broad needs, planning and linking the individual to resources to assure access to medical and BH care, and partnering with other community based providers to increase consumer choice around housing and other supportive services. This work will be supported by creating an administrative structure that is efficient, equitable, effective/evidence-based, patient centered, safe and timely.

Developmental Disabilities – This activity focuses on providing cost effective community based services and supporting the continued de-institutionalization of individuals with developmental disabilities. Examples of these supports can include: identification of work and supports to maintain work, assisting with maintaining a household, such as paying bills, and assisting with learning hobbies.



Adult Behavioral Health Services – This activity focuses on improving the coordination of services across the continuum of care for adults with behavioral health problems. MHSD will re-design the current clinic based delivery system so that mental health (MH) and addictive disorder (AD) services are integrated for the clients. MHSD will focus its efforts on working with the hand-off between the inpatient and outpatient settings and ensuring that the necessary transitional services are available for these high risk clients. And, third, MHSD will expand the services available to clients as it begins to build out the continuum of care.

Children's Behavioral Health Services – This activity focuses on improving the coordination of services across the continuum of care for children and youth with behavioral health problem. As MHSD moves toward community based care that is part of a larger continuum of care, it will initially focus its services at the beginning of the continuum-prevention. MHSD will continue its successful work in prevention by expanding the number of its community contractors that deliver evidence based practices, particularly around substance abuse. MHSD will also work closely with the future State Office of Behavioral Health to further define and refine the continuum of care available for children, adolescents and their families.

#### For additional information, see:

## Metropolitan Human Services District

## Metropolitan Human Services District Budget Summary

	Prior Year Actuals Y 2011-2012	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation Y 2013-2014	ecommended Y 2013-2014	Total commended ver/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 20,062,683	\$	22,696,482	\$ 22,696,482	\$ 22,633,149	\$ 21,194,397	\$ (1,502,085)
State General Fund by:							
Total Interagency Transfers	4,428,823		6,792,758	6,923,007	6,678,893	5,996,868	(926,139)
Fees and Self-generated Revenues	530,119		2,241,030	2,241,030	1,044,243	1,044,243	(1,196,787)
Statutory Dedications	397,904		0	0	0	0	0
Interim Emergency Board	0		0	0	0	0	0
Federal Funds	1,311,625		1,355,052	1,355,052	1,355,052	1,355,052	0
Total Means of Financing	\$ 26,731,154	\$	33,085,322	\$ 33,215,571	\$ 31,711,337	\$ 29,590,560	\$ (3,625,011)
Expenditures & Request:							
Personal Services	\$ 0	\$	0	\$ 0	\$ 0	\$ 0	\$ 0
Total Operating Expenses	3,269,287		3,165,812	3,165,812	3,270,876	3,383,899	218,087
Total Professional Services	0		0	0	0	0	0
Total Other Charges	23,461,867		29,919,510	30,049,759	28,440,461	26,206,661	(3,843,098)
Total Acq & Major Repairs	0		0	0	0	0	0
Total Unallotted	0		0	0	0	0	0



		rior Year Actuals 2011-2012	F	Enacted Y 2012-2013	sting Oper Budget of 12/01/12	Continuation 'Y 2013-2014	ecommended Y 2013-2014	Total commended ver/(Under) EOB
Total Expenditures & Request	\$	26,731,154	\$	33,085,322	\$ 33,215,571	\$ 31,711,337	\$ 29,590,560	\$ (3,625,011)
Authorized Full-Time Equiva	lents:							
Classified		0		0	0	0	0	0
Unclassified		0		0	0	0	0	0
Total FTEs		0		0	0	0	0	0

## Metropolitan Human Services District Budget Summary

## **Source of Funding**

This program is funded with State General Fund, Interagency Transfers, Fees and Self-generated Revenues, and Federal Funds. The Interagency Transfers are from the Office for Citizens with Developmental Disabilities, the Office of Behavioral Health, and Medical Vendor Payments - Title XIX. The Fees and Self-generated Revenues are from the collection of fees for services provided to clients who are not eligible for Medicaid services through the Statewide Management Organization (SMO)/ Magellan. Federal Funds are from collection of fees for services provided to Medicare eligible clients and from the Shelter Plus Grant. The Statutory Dedication listed is from the Overcollections Fund. (Per R.S. 39:36B. (8), see table below for a listing of expenditures out of each Statutory Dedication Fund.)

## **Metropolitan Human Services District Statutory Dedications**

Fund	Α	or Year ctuals 011-2012	cted 2-2013	В	ing Oper udget 12/01/12	Continuation TY 2013-2014	commended 7 2013-2014	Total commend ver/(Unde EOB	
Overcollections Fund	\$	397,904	\$ 0	\$	0	\$ 0	\$ 0	\$	0

## Major Changes from Existing Operating Budget

Ge	eneral Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	130,249	0	Mid-Year Adjustments (BA-7s):
\$	22,696,482	\$	33,215,571	0	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
\$	(52,003)	\$	(52,003)	0	Louisiana State Employees' Retirement System Base Adjustment
\$	(12,893)	\$	(12,893)	0	Group Insurance Rate Adjustment for Active Employees
\$	(7,430)	\$	(7,430)	0	Group Insurance Rate Adjustment for Retirees
\$	(107,183)	\$	(107,183)	0	Group Insurance Base Adjustment
\$	1,261,406	\$	1,261,406	0	Salary Base Adjustment
\$	(251,200)	\$	(251,200)	0	Attrition Adjustment



Ge	eneral Fund	Т	otal Amount	Organization	Description
\$	(748,301)	\$	(748,301)	0	Salary Funding from Other Line Items
\$	(4,550)	\$	(4,550)	0	Risk Management
\$	(5,252)	\$	(5,252)	0	Legislative Auditor Fees
\$	(378)	\$	(378)	0	UPS Fees
\$	8,835	\$	8,835	0	Civil Service Fees
\$	969	\$	969	0	Office of Computing Services Fees
					Non-Statewide Major Financial Changes:
\$	0	\$	(145,791)	0	Non Recurs Title 19 Medicaid Interagency Transfer budget authority as this revenue can only be collected through the Louisiana Behavioral Health Partnership.
\$	0	\$	(504,138)	0	Non Recurs Fees and Self Generated Revenue budget authority due to the expiration of the Drug Court contract.
\$	0	\$	(723,070)	0	Reduction in budget authority from the Office of Behavioral Health for the Temporary Assistance for Needy Families (TANF) programs.
\$	0	\$	(29,000)	0	Reduces Title 19 Medicaid Interagency Transfer budget authority to match projected collections from the Medicaid Application Center.
\$	0	\$	(692,649)	0	Reduces Fees and Self Generated Revenue budget authority to match projected collections from the Louisiana Behavioral Health Partnership.
\$	(1,269,405)	\$	(1,269,405)	0	Annualize mid-year reduction - Savings due to the reduction of five (5) Non T.O. FTE positions, restructuring of children's services, downsizing of the mobile response crisis team, reduction to contracts, and downsizing of transitional beds.
\$	(314,700)	\$	(314,700)	0	Contract consolidations and reductions.
\$	0	\$	(28,278)	0	Reduction in budget authority from the Office for Citizens with Developmental Disabilities.
\$	21,194,397	\$	29,590,560	0	Recommended FY 2013-2014
<b>^</b>		¢		_	
\$	0	\$	0	0	Less Supplementary Recommendation
\$	21,194,397	\$	29,590,560	0	Base Executive Budget FY 2013-2014
		<b>^</b>			
\$	21,194,397	\$	29,590,560	0	Grand Total Recommended

## **Major Changes from Existing Operating Budget (Continued)**

Table of

## **Professional Services**

Amount	Description
	This agency has no funding for Professional Services in Fiscal Year 2013-2014.

## **Other Charges**

Amount	Description
	Other Charges:



## **Other Charges (Continued)**

Amount	Description							
\$12,214,180	Salaries and related benefits for Non T.O. FTE positions.							
\$13,627,481	Funding to support mental health, substance abuse and developmental disabilities services							
\$25,841,661	SUB-TOTAL OTHER CHARGES							
	Interagency Transfers:							
\$6,831	Payments to the Division of Administration for Uniform Payroll Services							
\$31,689	Payments to the Department of Civil Service							
\$164,909	Payments to the Division of Administration - Office of Risk Management							
\$32,849	Payments to the Legislative Auditor							
\$12,441	Payments to the Office of Computing Services							
\$116,281	Miscellaneous Commodities and Services							
\$365,000	SUB-TOTAL INTERAGENCY TRANSFERS							
\$26,206,661	TOTAL OTHER CHARGES							

## Acquisitions and Major Repairs

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.

## **Performance Information**

1. (KEY) Through the Case Management/Administration activity, MHSD will provide access, engagement and coordination of care for the behavioral health populations (addictive disorders (AD) and mental health (MH)) through the implementation of a care management system that is evidence based and supported by high quality administration.

Children's Budget Link : Services for children are linked via the Children's Budget to the Children's Cabinet.

Human Resource Policies Beneficial to Women and Families Link: Not - Applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, Goal 6: Promote the health of people with disabilities, prevent secondary conditions, and eliminate disparities between people with and without disabilities in the U.S. population.

Explanatory Note: Using the Crossing the Quality Chasm framework, MHSD will implement a Care Center based on these six evidence-based strategies: (a) Implementing an administrative structure that is effective, providing services based on scientific knowledge to all who could benefit and refraining from providing services to those not likely to benefit. (b) Through the establishment of the Care Center and the continuum of care, providing care that is patient-centered and respectful of a responsive to individual patient preferences, needs and values. (c) Providing timely care that reduces waits and sometimes harmful delays for those who receive care. (d) Running an efficient administration that avoids waste, and including waste of equipment, supplies, ideas and energy. (e) Providing care through the contracting of community based services and the continuum of care that is equitable, and does not vary in quality because of personal characteristics such as gender, ethnicity, geography or socioeconomic status. (f) Providing an environment that is safe, for the patient and the



staff (IOM, 2001). Implementing a continuum of care that comes from these evidence-based strategies and uses the purchasing strategies above will result in cost efficiencies that can then be reinvested in more services, resulting in more choice for the clients. Stroll (1996) found that the costs of providing a continuum of care appear to be less than for traditional service delivery patterns and continuum of care result in the avoidance of costs by reducing the use of facilities and programs.

#### **Performance Indicators**

			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of clients in compliance with ambulatory follow - up 30 days after hospitalization (LAPAS CODE - 24028)	35%	0	35%	35%	35%	35%
K Percentage of contracted services that are active participants in Care Management Program (LAPAS CODE - 24029)	50%	78%	50%	50%	70%	70%

#### 2. (KEY) Through the Developmental Disabilities activity, MHSD will provide person and family centered planning, supports and service in home and community based setting to meet the needs of individuals with developmental disabilities and their families who reside in Orleans, St. Bernard, and Plaquemines Parishes to prevent institutionalization.

Children's Budget Link: Services for children are linked via the Children's Budget to the Children's Cabinet.

Human Resources Policies Beneficial to Women and Families Link: Not Applicable.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, Goal 6: Promote the health of people with disabilities, prevent secondary conditions, and eliminate disparities between people with and without disabilities in the U.S. population.

Explanatory Note: Since the 1980s, there has been an increasing trend toward providing person-centered approaches to working with people with developmental disabilities. The guiding principles of this framework are: focus on the person; invite participation from people who know the person best; allow the funding of services to be controlled by the person and/or significant others; base supports on choice and the needs of the person; promote and guide the person into activities to avoid isolation, and promote community inclusion, participation, and independence; promote the community to meet the needs of the individuals with disabilities and provide services to consumers from a strengths perspective focusing on ability not disability. The research has also shown that individuals with developmental disabilities are just as vulnerable as the general population to the full range of mental disorders including personality disorders, mood disorders, anxiety disorders and addictive disorders. Therefore, it is imperative that MHSD work towards the integration of services across the distinct disciplines to promote holistic and comprehensive support and service planning when individuals with intellectual disabilities are also faced with co-occurring MH/AD disorders. The research has shown that individuals with co-occurring MH/AD disorders.



that place them at greater risk for abuse, neglect, exploitation, mistreatment, and repeated hospitalizations. These are the individuals who are the most difficult to support in the community and require the highest level of coordination and collaboration across service sectors and agencies. They are the individuals who are at the greatest risk of becoming involved with the criminal justice system, of being incarcerated, dropping out of school, being unemployed or underemployed, being institutionalized long-term. References: Brown and Maire (2007) A Comprehensive Guide to Intellectual and Developmental Disabilities. Holburn & Vietze (2002) Person-centered planning: Research, practice, and future directions.

#### **Performance Indicators**

	Performance Indicator Values								
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014			
K Total unduplicated count of people receiving state - funded developmental disabilities community - based services (LAPAS CODE - 21002)	475	544	475	475	500	500			
K Total number of individuals who apply for Developmental Disabilities Services (LAPAS CODE - 22194)	300	245	300	300	200	200			
K Number of consumers receiving cash subsidies (LAPAS CODE - 22317)	136	136	128	128	136	136			
K Number of individual agreements with consumers (LAPAS CODE - 22319)	250	276	300	300	250	250			
K Percentage of consumers who indicate satisfaction services received from MHSD staff as is reflected in consumer evaluations (LAPAS CODE - 22320)	90%	97%	90%	90%	95%	95%			

**3.** (KEY) Through the Adult Behavioral Health Services activity, MHSD will provide a continuum of care that is patient centric and evidence-based, focused on early intervention and recovery supports for adult behavioral health consumers resulting in an increase in clients that receive treatment, complete treatment and are able to be maintained in the community.

Children's Budget Link: Services for children are linked via the Children's Budget to the Children's Cabinet.

Human Resources Policies Beneficial to Women and Families Link: Not Applicable.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, Goal 6: Promote the health of people with disabilities, prevent secondary conditions, and eliminate disparities between people with and without disabilities in the U.S. population.



Explanatory Note: The integration of MH/AD services will be based on the conceptual framework for treatment developed by the MASMHPD-NASADAD Task Force in 2002. It will be flexible, cost-effective, clientcentered and evidence-driven. To make integration of patient's MH/AD care services the norm, MHSD will establish clinically effective linkages within its own clinics and between providers of MH/AD treatment. The necessary communication and interaction will take place with the patient's knowledge and consent and will be fostered by: routine sharing of information on patients for co-morbid MH\AD in MHSD's community based clinical setting and reliable monitoring of their progress (IOM 2002). This approach will lead to higher rates of success in treatment retention and completion. To facilitate the delivery of coordinated care by expanding the use of supportive services, MHSD will improve the coordination of their clinic services with those of other human services agencies, and move toward establishing referral arrangements and contracts for needed services (IOM 2002). In order to achieve these outcomes, MHSD will base its continuum of care on the character traits of highly effective care systems. Service delivery will be closely coordinated for clients with co-occurring disorders, creating a seamless system of care for the consumer, and it will be community based. The system will be consumer-centered and culturally competent, where consumers and their families play active and key roles in system design and individual treatment decisions. The treatment will be based on the individual consumer needs. Depending on the severity of the co-occurring illness, the level of coordination between MH/ AD professional staff may range from consultation (i.e., a telephone request), to collaboration (i.e., interagency staffing conferences), to integration (i.e., the full range of services for both MH/AD is provided by the same group of professionals at the same time) (Coker, et al 2004).

#### **Performance Indicators**

	Performance Indicator Values						
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014	
K Percentage of clients successfully completing outpatient treatment program (LAPAS CODE - 21018)	45%	55%	45%	45%	45%	45%	
K Percentage of clients continuing treatment for 90 days or more (LAPAS CODE - 21019)	40%	66%	40%	40%	50%	50%	
S Total persons served in Community Mental Health Centers (CMHC) area-wide (Region 1) (LAPAS CODE - 21007)	5,250	5,077	5,250	5,250	5,250	5,250	
K Percentage of persons served in Community Mental Health Center (CMHC) that have been maintained in the community for the past six months (LAPAS CODE - 21008)	98.00%	0	98.00%	98.00%	98.00%	98.00%	



	Performance Indicator Values				
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012
Total number of adults receiving mental health services (LAPAS CODE - 21013)	693	898	1,230	1,055	1,483
Total number of participants in community- based employment (LAPAS CODE - 21016)	524	501	817	865	542
Total number of outpatient admissions (LAPAS CODE - 21017)	1,894	1,737	1,621	1,286	633

#### Metropolitan Human Services District General Performance Information

4. (KEY) Through the Children's Behavioral Health Services activity, MHSD will work as part of the State Office's children's continuum of care that centers on prevention and early intervention supports by providing services to consumers with behavioral health disorders resulting in an increase in clients that receive prevention and community- based behavioral health services in the community.

Children's Budget Link: Services for children are linked via the Children's Cabinet

Human Resource Policies Beneficial to Women and Families Link: Not - Applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, Goal 6: Promote the health of people with disabilities, prevent secondary conditions, and eliminate disparities between people with and without disabilities in the U.S. population.

Explanatory Note: All of the strategies MHSD will use in this activity are evidence based. In recent years there has been significant research around the effectiveness of implementing evidence based and community based services through the continuum of care framework. According to Cook (2004), a review of the literature on the impact of continuation of care suggests that: (a) service delivery systems change; and (b) children with MH disorders experience modest improvement in symptomatology and functioning. There is a large body of literature supporting the fact that children's AD prevention services should be community based and focused on the adolescent population. It is much better to prevent young people from starting to use drugs than entering at a later stage and helping them give up drugs (United Nations 2002). SAMHSA has made a significant financial investment in continuation of care for children, and claims participants in their grantee programs (2006) boast the following outcomes: Mental health improvements were sustained for 18 months by 90% of the children. Suicide-related behaviors were significantly reduced by 32%. Juvenile detention center placements decreased 43% from entry into continuum of care to 18 months after entering. School attendance increased with 84% of children in continuum of care attending school regularly after 18 months. School achievement increased 21% with 75% of children passing after 18 months. Although these results seem impressive, it is important to note that designing and implementing a system of this magnitude takes a very long time (Pires 2002). Thus, MHSD has started with small, logical pieces. For AD, MHSD is beginning at the front end of the continuum through prevention, and requiring that the services be community based and evidence based because that works. The grant funding to support school-based behavioral health services has ended. Consequently, MHSD will no longer provide these services.



#### **Performance Indicators**

		Performance Indicator Values					
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
1 ] (	Number of prevention and treatment contract providers delivering evidenced based programs (LAPAS CODE - 22315)	6	5	6	6	5	5
1	Number of children receiving behavioral health services within the community (LAPAS CODE - 22323)	1,250	616	1,250	1,250	1,250	1,250



## 09-305 — Medical Vendor Administration



## **Agency Description**

The mission of Medical Vendor Administration is to anticipate and respond to the health needs of Louisiana's citizens by developing and enforcing administrative and programmatic policy with respect to eligibility, licensure, reimbursement and monitoring of quality-driven health care services, in concurrence with evidence-based best practices as well as federal and state laws and regulations.

The goals of Medical Vendor Administration are:

- I. To improve health outcomes by emphasizing medical homes and reducing the number of uninsured persons in Louisiana.
- II. To improve the quality of care by expanding existing and developing additional community-based services as an alternative to institutional care.
- III. To ensure cost effectiveness in the delivery of health care services by using efficient management practices and maximizing revenue opportunities.
- IV. To assure the quality of the health care delivery system in an effort to promote the health and safety of Louisiana citizens.
- V. To streamline work processes and increase productivity through technology by expanding the utilization of electronic tools for both the providers and the Medicaid Administrative staff.

Agency 09-305 Medical Vendor Administration and 09-306 Medical Vendor Payments, which follows, constitute the Bureau of Health Services Financing (BHSF). The Bureau of Health Services Financing falls within the Department of Health and Hospitals, which is the single Medicaid agency for the state of Louisiana. BHSF exists to furnish access to innovative, cost effective and quality health care to Medicaid recipients and other Louisiana citizens. The Bureau assures access to medically necessary services in the most appropriate setting and at the most appropriate level of care, while honoring choice.

Medical Vendor Administration includes the following human resources policies that are helpful and beneficial to women and children: the Family Medical Leave Policy (8108-93), the Sexual Harassment Policy (8143-02), and the Equal Employment Opportunity Policy (8116-77). In addition, flexibility in work schedules and the availability of Dependent Day Care Spending Accounts assist both women and their families.

Medical Vendor Administration has one program: Medical Vendor Administration.

For additional information, see:



#### Medical Vendor Administration

		Prior Year Actuals Y 2011-2012	F	Enacted Y 2012-2013	Existing Oper Budget Is of 12/01/12	Continuation Y 2013-2014	ecommended Y 2013-2014	Total commended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	77,063,236	\$	86,739,505	\$ 86,905,783	\$ 103,590,678	\$ 85,622,497	\$ (1,283,286)
State General Fund by:								
Total Interagency Transfers		1,699,205		15,075,493	15,075,493	14,590,834	14,090,834	(984,659)
Fees and Self-generated Revenues		2,579,742		739,641	739,641	940,204	940,204	200,563
Statutory Dedications		6,744,450		3,234,014	3,234,014	34,904	34,904	(3,199,110)
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		157,663,299		226,620,853	226,787,131	256,798,573	228,242,058	1,454,927
Total Means of Financing	\$	245,749,932	\$	332,409,506	\$ 332,742,062	\$ 375,955,193	\$ 328,930,497	\$ (3,811,565)
Expenditures & Request:								
Medical Vendor Administration	\$	245,749,932	\$	332,409,506	\$ 332,742,062	\$ 375,955,193	\$ 328,930,497	\$ (3,811,565)
Total Expenditures & Request	\$	245,749,932	\$	332,409,506	\$ 332,742,062	\$ 375,955,193	\$ 328,930,497	\$ (3,811,565)
Authorized Full-Time Equiva	lents	s:						
Classified		1,135		875	875	875	875	0
Unclassified		2		2	2	2	2	0
<b>Total FTEs</b>		1,137		877	877	877	877	0

# Medical Vendor Administration Budget Summary



# **305\_2000 — Medical Vendor Administration**

Program Authorization: The Constitution of Louisiana (1974) Article 12, Section 8, declares that the Legislature may establish a system of economic and social welfare, unemployment compensation, and public health. Louisiana Revised Statues 36:251 et seq., and Louisiana Revised Statute 46:976 give the Louisiana Department of Health and Hospitals (DHH) Secretary authority to direct and be responsible for the Medical Assistance Program, Title XIX of the Social Security Act, and the Children's Health Insurance Program (CHIP), Title XXI of the Social Security Act, and the authority to act as the sole agent of the state or, in necessary cases, designate one of the offices within the department or its assistant secretary to cooperate with the federal government and with other state and local agencies in the administration of federal funds granted to the state or directly to the department or an office thereof to aid in the furtherance of any function of the department or its offices, including funding for the Medical Assistance Program and funding for CHIP.

# **Program Description**

The mission of the Medical Vendor Administration Program is to administer the Medicaid program and ensure that operations are in accordance with federal and state statutes, rules and regulations.

The goals of the Medical Vendor Administration Program are:

- I. To process claims from Medicaid providers within state and federal regulations.
- II. To process Medicaid applications within state and federal regulations.
- III. To license and survey health care facilities providing services to Louisiana citizens.
- IV. To enroll and provide health care coverage for uninsured children.

The Medical Vendor Administration Program has the following activities:

- Bayou Health Program Has full authority and responsibility for the development and monitoring of all regulatory requirements with the exception of financial solvency requirements for the Managed Care Organizations (MCO) for Medicaid's newly established managed care health delivery system (branded as Bayou Health) for approximately 900,000 Medicaid and LaCHIP enrollees. Bayou Health is responsible for overall oversight, coordination, monitoring and ongoing operations for Bayou Health. It works in partnership with five (5) major contractors for Bayou Health support services, thousands of providers, advocates, and Medicaid and LaCHIP enrollees to comply with federal Medicaid managed care mandates and state regulations specific to Bayou Health. The Program works strategically with diverse partners to leverage opportunities unique to this period of unparalleled change to reshape the state's health care system to improve the quality of health care; provide greater financially sustainability and produce better health outcomes for the people of Louisiana. The Program is responsible for day to day operations of the Medicaid program in relation to development of policies for and reimbursement of Medicaid covered services under Bayou Health. It also develops and implements initiatives to assure efficient and effective provision of medical services of adequate quality to recipients.
- Bayou Health Program also provides oversight of the state run Pharmacy Benefits Management Program that oversees operation and policy development of the Medicaid pharmacy program regarding coverage of pharmaceutical services and their reimbursement for those recipients that are not enrolled in Bayou Health Prepaid Health Plans. It consists of the of the following components:



- Pharmacy provider network; formulary incentives; claims management; clinical interventions; drug utilization review; pharmaceutical manufacture rebates, policy development; pharmacy provider audits; disease management; outcomes management reporting; recipient lock-in program; and a provider help desk.
- Medicaid Management Information System (MMIS) Responsible for the direct oversight of the Fiscal Intermediary (FI) contract, in addition to coordinating, authorizing, prioritizing and monitoring all Agency, State and Federal requests to the Medicaid FI. This activity oversees the MARS Data Warehouse, the Electronic Health Records Incentive Payment Program, Claims Processing, and Recipient Reimbursement. Current initiatives include ICD-10 [International Classification of Disease] transition; and the Replacement MMIS Project.
- Supplemental Payments Responsible for day to day operations of the Medicaid program in relation to the development and implementation of reimbursement and rate-setting methodologies for all hospital, disproportionate share hospitals (DSH) and upper payment limit (UPL) payments. This activity is also responsible for calculating hospital outlier payments, disproportionate share adjustment payments, cost settlements, and graduate medical education (GME) payments.
- Monitoring Administers Medicaid reimbursements to Long Term Care providers (i.e., nursing homes, Program All Inclusive Care for the Elderly (PACE), Adult Day Health Care (ADHC), Medicaid Administrative Claiming and Direct Services) in compliance with federal and state regulations. This activity also manages accountability of provider expenditures in compliance with federal and state regulations.
- Eligibility Processes applications and renewals, develops and implements policies and procedures for statewide utilization, manages the Medicaid recovery efforts and administers premium assistance efforts, administer the LaCHIP program, serves as public information outlet through the website and develops and maintains the mainframe eligibility system. This activity also conducts Medicaid Eligibility Quality Control reviews and implements corrective action to assure the integrity and accuracy of eligibility decisions.
- Executive Administration includes the functions of the Medicaid Director's office and Financial Management and Operations. This activity administers the Title XVIII, Title XIX, and Title XXI fiscal operations within federal and state regulations. It maintains federal funding for program services and administrative expenditures, and develops and implements the Bureau's strategic plan, operational plan, and performance indicator reporting function.
- Policy and Program Compliance -- Includes the functions of Medicaid administrative rulemaking, Medicaid Title XIX and XXI State Plan development and maintenance, Native American tribal consultation, Medicaid legislative management, and Medicaid Program services and provider/recipient resources development. Collectively responsible for the analysis and interpretation of state/federal regulations and legislation which are used in the development of policies and procedures which govern the administration of the Medicaid Program. Ensures compliance with the state and federal authorities and legislation which governs the Medicaid Program.

For additional information, see:

Medical Vendor Administration



# Medical Vendor Administration Budget Summary

		Prior Year Actuals Y 2011-2012	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation FY 2013-2014	ecommended Y 2013-2014	Total ecommended over/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	77,063,236	\$	86,739,505	\$ 86,905,783	\$ 103,590,678	\$ 85,622,497	\$ (1,283,286)
State General Fund by:								
Total Interagency Transfers		1,699,205		15,075,493	15,075,493	14,590,834	14,090,834	(984,659)
Fees and Self-generated Revenues		2,579,742		739,641	739,641	940,204	940,204	200,563
Statutory Dedications		6,744,450		3,234,014	3,234,014	34,904	34,904	(3,199,110)
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		157,663,299		226,620,853	226,787,131	256,798,573	228,242,058	1,454,927
Total Means of Financing	\$	245,749,932	\$	332,409,506	\$ 332,742,062	\$ 375,955,193	\$ 328,930,497	\$ (3,811,565)
Expenditures & Request:								
Personal Services	\$	87,478,277	\$	66,145,438	\$ 66,145,438	\$ 66,618,324	\$ 63,646,176	\$ (2,499,262)
Total Operating Expenses		8,660,996		10,314,602	10,314,602	10,268,580	9,521,333	(793,269)
Total Professional Services		119,868,899		156,978,129	157,310,685	188,312,525	146,083,697	(11,226,988)
Total Other Charges		28,134,544		98,951,337	98,951,337	110,163,366	109,679,291	10,727,954
Total Acq&Major Repairs		1,607,216		20,000	20,000	592,398	0	(20,000)
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	245,749,932	\$	332,409,506	\$ 332,742,062	\$ 375,955,193	\$ 328,930,497	\$ (3,811,565)
Authorized Full-Time Equiva	lents	:						
Classified		1,135		875	875	875	875	0
Unclassified		2		2	2	2	2	0
Total FTEs		1,137		877	877	877	877	0

# Source of Funding

The Medical Vendor Administration Program is funded with State General Fund, Intergency Transfers, Fees and Self-generated Revenues, Statutory Dedications, and Federal Funds. The Interagency Transfers are from the Department of Children and Family Services and the Office of Juvenile Justice for the Behavioral Health Partnership, Division of Administration ñ Community Development Block Grant for the Section 1115 waiver, and DHH ñ Office of the Secretary. Fees & Self-generated Revenues are derived from third party liability collections and provider fees for online training of waiver services. Statutory Dedications represent funding received from the Health Trust Fund, the Louisiana Health Care Redesign Fund, the Medical Assistance Pro-



gram Fraud Detection Fund, the Overcollections Fund, and the New Opportunities Waiver Fund. (Per R.S. 39.36B. (8), see table below for a listing of expenditures out of each Statutory Dedicated Fund.) Federal Funds include funds for the survey and certification activities for health care facilities participating in Title XIX; federal match for providing services related to the Medicaid program; and funding which supports the transition of people from institutions to home and community-based services.

### **Medical Vendor Administration Statutory Dedications**

Fund	Prior Year Actuals ( 2011-2012	F	Enacted Y 2012-2013	Existing Oper Budget is of 12/01/12	Continuation FY 2013-2014	ecommended 'Y 2013-2014	Total ecommended wer/(Under) EOB
Medical Assistance Program Fraud Detection	\$ 767,662	\$	0	\$ 0	\$ 0	\$ 0	\$ 0
Health Trust Fund	2,056		2,056	2,056	2,056	2,056	0
Louisiana Health Care Redesign Fund	1,592,000		1,580,792	1,580,792	0	0	(1,580,792)
New Opportunities Waiver (NOW) Fund	1,885,465		1,651,166	1,651,166	32,848	32,848	(1,618,318)
Overcollections Fund	2,497,267		0	0	0	0	0

### Major Changes from Existing Operating Budget

Ge	eneral Fund	Т	otal Amount	Table of Organization	Description
\$	166,278	\$	332,556	0	Mid-Year Adjustments (BA-7s):
\$	86,905,783	\$	332,742,062	877	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
	(7,272)		(14,544)	0	Teachers Retirement Base Adjustment
	(41,687)		(83,374)	0	Group Insurance Rate Adjustment for Active Employees
	(43,952)		(87,904)	0	Group Insurance Rate Adjustment for Retirees
	(218,434)		(436,868)	0	Group Insurance Base Adjustment
	386,795		773,590	0	Salary Base Adjustment
	(878,761)		(1,757,522)	0	Attrition Adjustment
	(10,000)		(20,000)	0	Non-Recurring Acquisitions & Major Repairs
	(166,278)		(332,556)	0	Non-recurring Carryforwards
	50,317		100,634	0	Risk Management
	155,217		310,434	0	Rent in State-Owned Buildings
	(5,233)		(10,467)	0	Maintenance in State-Owned Buildings
	923		1,845	0	Capitol Police
	1,661		3,321	0	UPS Fees
	(33,350)		(66,700)	0	Civil Service Fees
	8,781		17,562	0	State Treasury Fees
	(8,183)		(16,366)	0	Office of Computing Services Fees
					Non-Statewide Major Financial Changes:



General Fund	Total Amount	Table of Organization	Description
(44,972)	(2,009,900)	0	Non Recurs budget authority due to the expiration of the Medicaid Infrastructure Grant, the Maximizing Enrollment Grant, and the Children's Health Insurance Program Reauthorization Outreach and Enrollment Grants.
(158,275)	(487,000)	0	Reduction to contracts for Optional Medicaid Services.
(700,359)	(1,400,718)	0	Annualize mid-year reduction to the Bayou Health's Enrollment Broker's contract.
(300,000)	(600,000)	0	Annualize mid-year reduction to contracts in supplemental payments.
(125,000)	(250,000)	0	Reduction to Ombudsman Community Based contracts.
(427,282)	(1,709,128)	0	The Molina contract for capitated encounter claims is being reduced.
(87,500)	(350,000)	0	Reduction to the LSU dental contract.
0	475,407	0	As part of the 642 CFR 455.101-455.470, certain providers are subject to a non- refundable application fee. The application fee is set by CMS and may be adjusted annually. The fee, which is assessed at the point of initial enrollment and at enrollment revalidation, is to be charged individually for each service location.
0	6,400,000	0	Under an MOU with DCFS, DHH utilizes federal funding under the Title XIX Medicaid Program to reimburse eligible costs incurred by DCFS for the provision of services and performance of administrative activities to assist and support Child Welfare Programs for eligible children and youth. These activities include Medicaid eligibility determination, case management and supervision, referral of medical and behavioral health related services, and Medicaid outreach.
0	(1,969,318)	0	Non Recurs budget authority due to the expiration of the Federal Greater New Orleans Community Health Connection (GNOCHC), a Medicaid Section 1115 Demonstration Waiver.
1,580,792	0	0	Means of financing substitution replacing \$1,580,792 of the La. Health Care Redesign Fund Statutory Dedication with State General Fund. The funds are used for the Consumer Right to Know and the La. Healthcare Quality Forum, and continuing costs associated with Healthcare Reform Transition.
0	62,166	0	DHH has entered into a contract with University of Louisiana at Lafayette, Cecil J. Picard Center for Child Development to provide an array of technical and professional services to the Louisiana Department of Health and Hospitals [DHH], and Local Education Agencies [LEAs] for services provided in schools and reimbursed by Medicaid.
1,618,318	0	0	Means of financing substitution replacing New Opportunities Waiver (NOW) Fund with State General Fund (Direct).
(587,647)	(1,175,294)	0	Annualize mid-year reduction to Kidmed overhead and management costs in the Molina Contract.
(2,500,000)	(5,000,000)	0	Annualize mid-year reduction to Radiology Utilization Management (RUM) costs.
(317,958)	(635,916)	0	Annualize mid-year reduction to Travel costs in Medical Vendor Administration.
(125,000)	(250,000)	0	The Third Party Liability Contract for Medical Vendor Administration is being reduced.
(125,000)	(250,000)	0	Reduction to Interqual IT software costs.
(500,000)	(1,000,000)	0	Reduction to the Maximus contract.
2,030,998	4,061,996	0	Annualization of the professional services contract. The Bureau of Health Services Financing (BHSF) contracts for the provision of professional services necessary to support mission critical operations.
(104,945)	(104,945)	0	Contract consolidations and reductions.



G	eneral Fund	1	otal Amount	Table of Organization	Description
	400,000		4,000,000	0	The Affordable Care Act requires each State Medicaid agency to replace the current Medicaid Statistical Information System (MSIS)database with a transformed MSIS (T-MSIS) database as requested by the federal Office of Inspector General. The new database contains more data elements than its predecessor for the improved detection of fraud, waste and abuse. The final database requirements are to be determined, but a mandated compliance date in SFY 2014 has been indicated.
\$	85,622,497	\$	328,930,497	877	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
\$	85,622,497	\$	328,930,497	877	Base Executive Budget FY 2013-2014
\$	85,622,497	\$	328,930,497	877	Grand Total Recommended

# **Professional Services**

Amount	Description
\$4,594,250	Audits of Title XIX Reimbursement to Hospitals, Rural Health Clinics and Federally Qualified Health Centers, LTC
\$41,221,746	Fiscal Intermediary Contract
\$33,603,237	Dual Fiscal Intermediary Contract
\$6,246,451	Independent Validation and Verification (IV & V) contract
\$291,954	Training, public education and analytic support regarding the Medicaid Buy-In program, as well as other technical training and workshops and programmers to maintain programs
\$1,873,375	Provision of Title XIX, non-emergency, non-ambulance medical transportation for Medicaid patients
\$94,051	Nurse Aide Registry from the Board of Examiners for Nursing Facility Administrators
\$1,450,758	Nursing Home case mix design and development
\$905,000	SMAC Reimbursement methodology, supplemental payments, and pharmacy outreach and education
\$179,627	Various services, including empirical data, interpretation, TIS development, assistive technology, Level of Care Eligibility Tool (LOCET), LOCET Validation and Maintenance, review psyc evaluations, work incentive workshops for the disabled, development of integrated applications, NF LOC Screener and Care Tracker
\$472,000	School Based Direct Services
\$3,086,189	Third Party Liability collections process development and implementation
\$12,348,508	Maintenance and support services for the Medicaid Eligibility Data System (MEDS) and MEDS Enhancement
\$14,625	Training and technical assistance to Long Term Care facilities for the special health needs of ventilator dependent children
\$2,400,000	IV and V Contract for MEDS Enhancement Project
\$3,302	Criminal background checks
\$6,100	Medical exams for the indigent
\$480,600	Medical Review Physicians, Psychiatrists and Psychologists - Disability determinations
\$700,000	Legal fees associated with appeals of disallowances
\$250,000	Upgrade two automation efforts; a 24-hour renewal hotline for enrollees and an online application for use by certified Application Centers



# **Professional Services (Continued)**

Amount	Description
\$450,000	DSH payments audit contracts
\$7,004,320	BAYOU HEALTH, formerly known as Provider Service Network (PSN)
\$1,700,000	Data Maintenance for HCBS Waiver Programs, prior authorization, and validation of the Request for Service registry
\$1,000,000	Waiver Monitoring
\$400,000	Uniform Provider Reporting System (UPRS)
\$4,192,440	Actuarial Services: Health Care delivery models/ Medicaid / LACHIP/ GNOCHC/ CSOC
\$1,284,000	La Health Care Quality Forum
\$10,571,707	Assessment and Long Term Care Services
\$4,917,350	Enhancement Service Authorization contract
\$69,906	Office of Telecommunications Management
\$500,000	Pre-Admission Screening and Resident Review
\$53,244	Data Contractor Waivers
\$3,118,550	Fiscal Agent that processes payments in "self-direction" in home and community based services
\$125,000	1115 Demonstration Waiver
\$475,407	ACA Enrollment
\$146,083,697	TOTAL PROFESSIONAL SERVICES

# **Other Charges**

Amount	Description
	Other Charges:
\$792,806	Reimbursement to Medicaid Enrollment Centers statewide at the current rate of \$14 per completed application
\$217,066	Social Security Administration field offices for Supplemental Security Income (SSI) assignment of rights and third party liability information collection
\$4,947	Various services, including employment development/shredding
\$655,759	Greyhound bus tickets purchased for Medicaid recipients who must travel a significant distance for medical treatment/ out-of-state airplane tickets
\$12,898	Nurse Home - Nurse Aid Training
\$11,432	Travel for Medicaid Pharmaceutical & Therapeutics Committee Members/Federal Express and professional shorthand reporters
\$3,136	One Source Toxicology
\$887,444	Ventilator Assisted Program
\$34,953	Managed Care Initiatives
\$26,700	Tobacco Quitline
\$50,137,188	Louisiana Behavioral Health Partnership
\$7,500,000	Health Information Exchange (HIE)
\$24,000	On-line Provider Training for Private Providers of Waiver services
\$60,308,329	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$28,661	Office of Public Health - Vital Records Registry
\$2,050,000	University of Louisiana Lafayette - Information Technology operations



# **Other Charges (Continued)**

Amount	Description
\$3,023,576	University of La - Monroe - Pharmaceutical and Therapeutic Committee, Pharmacy Program consultants
\$6,868,844	University of New Orleans - Computer Training and Support
\$179,003	Department of Civil Service - Civil Service Fees
\$360,130	LSU School of Dentistry - Survey Utilization Review (SURS)
\$346	Division of Administration - Commodities/Administrative services
\$120,793	LSU Office of Sponsored Research - Survey on the effectiveness of LaCHIP on the uninsured
\$1,125,645	Office of Group Benefits - Separate SCHIP TPA and premium pay
\$120,000	Department of Children and Family Services - Office of Family Support - DHH/DCFS Co-housed Units
\$399,923	Division of Administration - Forms management, postage and printing
\$693,773	Division of Administration - Payment of Risk Management premiums
\$2,050,582	Division of Administration - Payment for rent in State-owned buildings
\$24,651	Division of Administration - Payment for maintenance of State-owned buildings
\$59,755	Division of Administration - Treasury Fees
\$59,366	Division of Administration - UPS Fees
\$34,685	Division of Administration - Comprehensive Public Training Program (CPTP) Fees
\$172,089	Division of Administration - Office of Computing Services
\$1,421,087	Division of Administration - Office of Telecommunications Management
\$39,583	Capitol Police
\$11,117,575	Transfer of Title 19 Federal Funds to Office of the Secretary for Health Standards
\$2,367,785	Transfer of Title 19 Federal Funds to Office of the Secretary for Program Integrity
\$200,000	DHH - Office of the Secretary - Governor's Program on Physical Fitness
\$350,000	Office of Public Health - Influenza vaccine, medical supplies and pneumonia vaccine
\$1,300,000	Local Education Agencies (LEA) - Medicaid match for administrative functions related to School Based Administrative Claiming Services
\$438,670	OAAS Waiver - Adult Protective Services
\$1,745,026	Money Follows the Person (MFP) transferred to OAAS
\$140,190	Louisiana Register Publishing
\$456,169	DOJ Attorney General Advocacy Center
\$2,261	MEDS System Enhancements
\$49,367	Office Of Public Health HIV Program
\$91,392	Miscellaneous Expenditures
\$2,616,270	DCFS IT Modernization - CAFÉ system
\$8,612,697	DCFS IAT Child Welfare Administrative Claiming
\$71,304	Department of Labor - Workforce Development: Unemployment
\$150,000	Board of Regents - Medical and Allied Health Professional Education Scholarships & Loan Program
\$829,764	University of Louisiana (Picard Center for Child Development)
\$49,370,962	SUB-TOTAL INTERAGENCY TRANSFERS
\$109,679,291	TOTAL OTHER CHARGES

# **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.



# **Performance Information**

1. (KEY) Through the Medicaid BAYOU HEALTH Initiative activity to perform all federally mandated administrative activities required for the Medicaid Managed Care Program through: 1) implementation of fee-for-service coordinated care networks (BAYOU HEALTH Shared Savings); and 2) implementation of comprehensive prepaid coordinated care networks (BAYOU HEALTH Prepaid).

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.

Other Link(s) (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

#### **Performance Indicators**

			Performance Indicator Values						
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014			
K Annual percentage of Bayou Health members who proactively select a health plan (LAPAS CODE - 24034)	30%	4%	51%	51%	51%	51%			
K Percentage of Bayou Health Primary Care practices NCQA PCMH recognized or JCAHO PCH accredited. (LAPAS CODE - 25063)	Not Applicable	Not Applicable	20%	20%	20%	20%			

# 2. (KEY) Through the Medicaid Eligibility Determination activity, to provide Medicaid eligibility determinations and administer the program within federal regulations by processing up to 98.5% of applications timely.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.



#### **Performance Indicators**

Performance Indicator Values						
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of applications for Pregnant Women approved within 5 calendar days (LAPAS CODE - 24036)	80%	74%	80%	80%	75%	75%
K Percentage of Eligibility determination accuracy obtained through Medicaid Eligibility Quality Control process-review of negative case actions (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	97.0%	97.0%	97.0%
S Percentage of applications processed timely (LAPAS						
CODE - New)	Not Applicable	Not Applicable	Not Applicable	98.5%	98.5%	98.5%

# 3. (KEY) Through the Eligibility activity, to inform, identify and enroll eligibles into LaCHIP/Medicaid by processing applications & annual renewals timely and to improve access to health care for uninsured children through the LaCHIP Affordable Plan.

Children's Budget Link: In general, child/adolescent services identified in this budget unit are indirectly linked to the Children's Cabinet via the Children's Budget. The Children's Budget reflects funding and expenditures for a broad range of Medicaid services for children under 21 years of age.

Human Resource Policies Beneficial to Women and Families Link: This will provide access to medical care for children (birth through 18 years of age) living below 200% of the Federal Poverty Level.

Other Link(s) (TANF, Tobacco Settlement, Workforce Development Commission, or Other): The Governor's Healthcare Reform Panel for improving healthcare in Louisiana, linked to Medical Vendor Administration as follows: Objective A-3, Reduce the number of uninsured children in Louisiana-identify, informs, and enroll uninsured children in the publicly funded health coverage programs (Medicaid, LaCHIP) for which they are eligible.

Explanatory Note: Title XIX of the Social Security Act is a program of national health assistance funded by the federal government and the states. The program covers low-income individuals and their families who are aged, blind or disabled, and members of families with dependent children. Title XXI allow states to expand coverage of Medicaid health assistance to children who live in families with incomes up to 200% of the federal poverty level (FPL). This objective is being modified to remove reference to "living below 200% of FPL, "due to certain income disregards which are allowed for the determination of eligibility. Due to these income disregards, it is sometimes possible that children living in families with incomes above 200% of FPL are determined to be eligible for coverage under Title XIX and Title XXI.



#### **Performance Indicators**

Performance Indicator Values						
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
S Number of children potentially eligible for coverage under Medicaid or LaCHIP (LAPAS CODE - 21778)	839,299	768,871	788,564	788,564	788,564	788,564
The previous performance st available data. This data was LSU Policy Research Lab in as having incomes less than household composition not in payments, child support, etc. Consequently, the departmen representation of people on p	s based on census est SFY04. Both of the 200% of the Federal neluding step-parents ) allow children in h tt has asked LSU to c	timates and the first of se instruments only l Poverty Level (FPL) s or kin-caregivers at ouseholds above 2000 expand their second	version of the Louisia ooked at the number ). However, Medicai nd income disregards 0% FPL to be enrolled version of the LHIS t	ana Health Insurance of children in house d and LaCHIP eligi and deductions, su d and potentially eli	e Survey (LHIS) con cholds that registered bility regulations (i.e. ch as earned income gible for these progr	nducted by the with the census e. definition of , child care ams.
S Number of children enrolled as Title XXI eligibles - LaCHIP (LAPAS CODE - 2241)	128,707	121,696	119,240	119,240	120,092	120,092
S Number of children enrolled as Title XIX eligibles - traditional Medicaid (LAPAS CODE - 2242)	622,899	605,637	610,790	610,790	609,309	609,309
K Total number of children enrolled (LAPAS CODE - 10013)	751,606	727,333	730,030	730,030	729,401	729,401
S Number of potentially eligible children remaining uninsured (LAPAS CODE - 21779)	44,350	26,515	44,350	44,350	26,515	26,515
The name of this indicator w name, as modified, more acc Code #10013.					-	
K Average cost per Title XXI enrolled per year (LAPAS CODE - 10016)	\$ 1,770	\$ 1,726	\$ 1,711	\$ 1,711	\$ 1,786	\$ 1,786
K Average cost per Title XIX enrolled per year (LAPAS CODE - 10017)	\$ 2,475	\$ 2,493	\$ 2,469	\$ 2,469	\$ 2,578	\$ 2,578
K Percentage of procedural closures of renewal (LAPAS CODE - 17038)	1.0%	1.5%	1.0%	1.0%	99.0%	99.0%



#### **Performance Indicators (Continued)**

	icator Values					
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
This indicator was initially set make more attempts to reach a of procedural closures.	1		1	U U	1 1	
K Percentage of applications for LaCHIP and Medicaid programs for children approved within 15 calendar days (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	65%	65%	65%
S Percentage of calls received through the Medicaid & LaCHIP hotlines who hold for a representative less than 5 minutes (LAPAS CODE - 24041)	60%	38%	60%	60%	60%	60%
K Estimated percentage of children potentially eligible for coverage under Medicaid or LaCHIP who remain uninsured (LAPAS CODE - 24042)	5.3%	2.9%	5.3%	5.3%	2.9%	2.9%

#### 4. (KEY) Through the Eligibility activity, to explore third party sources responsible for payments otherwise incurred by the state.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

Explanatory Note: TPL refers to "Third Party Liability". The Bureau of Health Services Financing is required to identify all claims for which third party insurance exists and where applicable, make a reduced payment based on what the third party insurance pays. Certain Medicaid claims are exempt from the initial edit for TPL. In those instances the agency may pay the full amount allowed under the agency's payment schedule for the claim and then seek reimbursement from the liable third party. This process is known as "pay and chase". Exempt claims include those for labor and delivery, postpartum care, prenatal care, preventive pediatric services. As Medicaid claims are processed those that are exempt from TPL are identified. The remaining claims are referred to in the General Performance Information table as the "Number of claims available for TPL processing."



#### **Performance Indicators**

			Performance In	dicator Values			
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014	
K Number of TPL claims processed (LAPAS CODE - 2215)	6,305,000	6,740,336	7,500,000	7,500,000	3,750,000	3,750,000	
The "Number of TPL claims processed" refers to the portion of these claims requiring processing for which third party insurance or Medicare coverage was actually available/applicable.							
K Percentage of TPL claims processed (LAPAS CODE - 7957)	100.00%	98.59%	100.00%	100.00%	100.00%	100.00%	
The "Percentage of TPL clai payments, or avoided the ful	1	1	ns processed for whi	ich the Bureau of He	ealth Services Finance	cing reduced	
S TPL trauma recovery amount (LAPAS CODE - 7958)	\$ 10,125,000	\$ 15,686,914	\$ 10,125,000	\$ 10,125,000	\$ 8,000,000	\$ 8,000,000	
S Funds recovered from third parties with a liability for services provided by Medicaid (LAPAS CODE - 24044)	\$ 44,712,500	\$ 59,812,329	\$ 44,712,500	\$ 44,712,500	\$ 42,000,000	\$ 42,000,000	

#### Medical Vendor Administration General Performance Information

	Performance Indicator Values						
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012		
Number of recipients eligible for program (eligibles) (LAPAS CODE - 12024)	1,131,357	1,223,453	1,293,458	1,349,949	1,383,879		
Number of program recipients (LAPAS CODE - 17036)	1,119,484	1,173,121	1,231,803	1,285,635	1,312,485		
Average number of eligibles per month (LAPAS CODE - 17037)	991,425	1,080,513	1,152,381	1,194,547	1,229,378		
Average number of recipients per month (LAPAS CODE - 12025)	853,155	897,342	976,903	985,560	1,002,949		
Number of applications taken annually (LAPAS CODE - 12026)	323,732	342,136	371,162	389,624	420,736		
Number of application centers (LAPAS CODE - 12027)	415	529	570	613	533		
Number of claims available for TPL processing (LAPAS CODE - 12021)	65,529,083	74,249,396	80,783,792	83,835,638	86,875,426		
Percentage of TPL claims processed and cost avoided (LAPAS CODE - 12022)	9.6%	7.7%	7.9%	8.4%	8.0%		
The "Percentage of TPL claims processed and	aget avoided" is the	number of TDL alair	ne processed divided	hy the total number	of alaims		

The "Percentage of TPL claims processed and cost avoided" is the number of TPL claims processed divided by the total number of claims.

DHH - 86



#### 5. (SUPPORTING)Through the Executive Administration activity, to administer the Medicaid program and ensure that operations are in accordance with federal and state statutes, rule, and regulations.

Human Resource Policies Beneficial to Women and Families Link: Not Applicable

Other Link(s) (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

#### **Performance Indicators**

Performance Indicator Values							
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
	Administrative cost as a percentage of total cost (LAPAS CODE - 24045)	7%	5%	6%	6%	5%	5%

#### Medical Vendor Administration General Performance Information

	Performance Indicator Values						
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012		
Percentage of State Plan amendments approved. (LAPAS CODE - 24046)	82%	82%	82%	82%	88%		
Number of State Plan amendments submitted. (LAPAS CODE - 24047)	33	33	35	65	58		

6. (KEY) Through the Monitoring activity, to reduce the incidence of inappropriate Medicaid expenditures and to annually perform a minimum of 95% of the planned monitoring visits to school systems/boards participating in the Medicaid School-Based Administrative Claiming Program.

Children's Budget Link: Not Applicable

Explanatory Note: These Performance Indicators relate to the monitoring and evaluation of the participating School Boards. Information on services provided would be included in the Operational Plan of the Department of Education.



#### **Performance Indicators**

Performance Indicator Values							
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014	
S Number of School Boards quarterly claims targeted for monitoring (LAPAS CODE - 13375)	68	71	68	68	84	84	
K Percent of targeted School Boards monitored (LAPAS CODE - 13376)	95.0%	106.0%	95.0%	95.0%	95.0%	95.0%	

#### Medical Vendor Administration General Performance Information

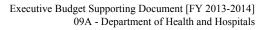
		Perfo	ormance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012
Number of claims adjusted as a result of monitoring activities (LAPAS CODE - 16539)	31	38	57	59	59
Amount identified as over claimed as a result of monitoring (LAPAS CODE - 16540)	\$ -1,422	\$ 930	\$ 18,545	\$ 59	\$ 33

# 7. (KEY) Through the MMIS Operations activity, to operate an efficient Medicaid claims processing system.

#### Children's Budget Link: Not Applicable

#### **Performance Indicators**

Performance Indicator Values							
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
1	Percentage of total claims processed within 30 days of receipt (LAPAS CODE - 2219)	98.0%	100.0%	98.0%	98.0%	98.0%	98.0%
	Average processing time in days (LAPAS CODE - 2217)	9.0	10.9	9.0	9.0	9.0	9.0



	Performance Indicator Values						
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012		
Total number of claims processed (LAPAS CODE - 12020)	75,988,577	84,524,974	93,649,727	100,115,618	97,238,093		

#### **Medical Vendor Administration General Performance Information**

The "Total number of claims processed" is a number over which the Bureau of Health Services Financing has no control; it represents all claims that are submitted by billing entities.

# 8. (KEY) Through the Pharmacy Benefits Management activity, to develop, implement and administer the Medicaid pharmacy outpatient program.

Children's Budget Link: Not Applicable.

#### **Performance Indicators**

	Performance Indicator Values							
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014	
	Percentage (%) of Total Scripts PDL Compliance (LAPAS CODE - 24061)	90%	91%	90%	90%	90%	90%	



# 09-306 — Medical Vendor Payments



# **Agency Description**

The mission of Medical Vendor Payments is to anticipate and respond to the health needs of Louisiana's citizens by developing and enforcing administrative and programmatic policy with respect to eligibility, licensure, reimbursement and monitoring of quality-driven health care services, in concurrence with evidence-based best practices as well as federal and state laws and regulations.

The goals of Medical Vendor Payments are:

- I. To improve health outcomes by emphasizing medical homes and reducing the number of uninsured persons in Louisiana.
- II. To improve the quality of care by expanding existing and developing additional community-based services as an alternative to institutional care.
- III. To ensure cost effectiveness in the delivery of health care services by using efficient management practices and maximizing revenue opportunities.
- IV. To assure the quality of the health care delivery system in an effort to promote the health and safety of Louisiana citizens.
- V. To implement measures that will constrain the growth in Medicaid expenditures while improving services and to secure alternative sources of funding for health care in Louisiana.

Agency 09-306 Medical Vendor Payments and 09-305 Medical Vendor Administration constitute the Bureau of Health Services Financing (BHSF). The Bureau of Health Services Financing falls within the Department of Health and Hospitals, which is the single Medicaid agency for the state of Louisiana. BHSF exists to provide innovative, cost effective and quality health care to Medicaid recipients and Louisiana citizens. It provides medically necessary services in the most appropriate setting and at the most appropriate level of care, while honoring choice.

The Medical Vendor Payments Program uses Tobacco Settlement Funds as a means of financing. These funds are used in the Department of Health and Hospitals to partially cover the cost of providing medically necessary services to Medicaid eligible recipients. Major activities include inpatient and outpatient hospital services, intermediate care facilities for the mentally retarded and nursing homes.

The services provided by Medical Vendor Payments in support of Act 1078 of 2003 that are beneficial to women and families include:

- Low Income Families and Children Program (LIFC)
- Bayou Health Program



- Child Health and Maternity Program (CHAMP)
- Louisiana Children's Health Insurance Program (LaCHIP)
- Early and Periodic Screening, Diagnosis and Testing Program (EPSDT)

Medical Vendor Payments Program includes the following four programs: Payments to Private Providers, Payments to Public Providers, Medicare Buy-Ins and Supplements, and Uncompensated Care Costs (UCC) Payments.

The Private Providers Program has the following activities:

- Primary and Preventive Care includes Family Planning, Federally Qualified Health Centers (FQHC's), Rural Health Clinics (RHC's), Physicians, Early and Periodic Screening, Diagnosis and Treatment, and Hospital-Outpatient. FQHC's and RHC's provide physician and professional services. Physician Services provides physician and other professional services, including those of the following professions: physicians (including specialists); nurse midwives; and nurse practitioners. EPSDT is the mandatory child-specific component of the Medicaid program for provision of preventive services including periodic preventive visits, immunizations and oral/dental care, as well as provision of diagnosis and treatment of any identified illnesses, conditions or disabilities. Family Planning (including Waiver) provides services to Medicaid recipients for routine family planning services, including doctor visits and counseling, contraceptives and certain lab services. Hospital Outpatient Services consist of outpatient hospital care and services.
- Community-Based Services (in avoidance of Hospitalizations) includes Case Management, Durable Medical Equipment, Home Health, Early and Periodic Screening, Diagnosis and Treatment (EPSDT), and Outpatient- Hospital.
- Community-Based Support and Services for Elders, Adults with Physical Disbilities and Persons with Developmental Disabilities provides community-based supports and services to elders and adults with physical disabilities, and persons with developmental disabilities through six Medicaid waiver programs, the Program for All-Inclusive Care for the Elderly (PACE), and Long Term Personal Care Services (LTPCS).
- Behavioral Health includes Mental Health In-Patient and Mental Health Rehabilitation (MHR). Mental Health In-patient services are psychiatric hospital care. Mental Health Rehabilitation (MHR) provides outpatient mental health services for adults with severe and persistent mental illness (SPMI) and children with emotional behavioral disorders (EBD).
- Specialty Care Services medical services that are rendered by the physicians and other medical providers who have completed advanced medical education and clinical training in a specific area of medicine. Specialty care services can be provided in a multitude of settings, including community clinics, hospitals, ambulatory surgical centers (ASCs), end stage renal disease facilities and through telemedicine. Includes the following sub-programs: Adult Dentures, Hemodialysis, Anesthesia, and other Private Provider services. The Adult Denture program provides dentures, relines, and repairs for adults. Hemodialysis services include dialysis treatment, medically necessary non routine laboratory services, and medically necessary injections reimbursed to free-standing End Stage Renal Disease Facilities. Anesthesia Services are services performed primarily by anesthesiologists and Certified Registered Nurse Anesthetists (CRNAs) to alleviate individuals from pain while they are receiving various medical procedures. ASCs are health care facilities which allow patients to have selected surgical and procedural services performed outside the hospital setting. Telemedicine is the use of audio/video equipment permitting two-way, real-time interactive communication between the patient, their primary care provider and a specialist located at a distant site.



- Support Services includes Lab & X-Ray, Pharmacy, Transportation Non-Emergency Ambulance and Transportation - Non-Emergency Non-ambulance. Lab & X-Ray services consists of screening and diagnostic services performed by an independent laboratory or physician's office. Pharmaceutical Products and Services consists of prescription services for prescriptions issued by a licensed prescribing practitioner. Transportation (Non-Emergency – Ambulance) consists of transportation provided by an ambulance in which no other means of transportation is available and/or the recipient is unable to ride in any other type of vehicle. All services are subject to review for medical necessity of ambulance transportation. Transportation (Non-Emergency – Non-Ambulance) provides transportation to and from routine medical appointments.
- Emergency Care Services specialty services in which a physician or health care provider renders treatment to patients with acute illnesses or injuries that require medical attention.
- Inpatient hospitalization includes Hospital-Inpatient, Certified Respiratory Nurse Anesthetists, and Physicians.
- Institutional Based Long Term for Persons with Developmental Disabilities to provide homes for the long-term care of developmental disabled recipients.
- Institutional Based Long Term for the Elderly and Disabled consists of nursing homes that provide long-term and rehab care to persons needing 24-hour nursing.

The Public Providers Program has one activity:

 Payments to Public Providers – provision of approved medically necessary services by public providers. Public providers are enrolled Medicaid Vendors that are state owned. Included are: LSUHSC- Health Care Services Division, LSUHSC- Shreveport, LSUHSC-E.A. Conway, DHH- State MR/DD Services, DHH-State Nursing Homes, DHH- Office of Public Health, DHH- Community Mental Health, DHH- Public Psychiatric Free Standing Units, State Education, and Other Public Providers for services.

Medicare Buy-Ins and Supplements has the following activities:

- Bayou Health provides for all Louisiana Medical State Plan core benefits and services through Medicaid managed care programs through Bayou Health Prepaid Health Plans and Shared Savings Health Plans.
- Louisiana Behavioral Health Partnership The behavioral health program managed by DHH-Office of Behavioral Health includes behavioral health services for a special target population of children eligible for the Coordinated System of Care (CSoC), adults with Serious Mental Illness (SMI), and the Statewide Management Organization (SMO) child/adult population (e.g., the rest of the non-institutionalized Medicaid population).
- Medicare Savings Program (MSP) for Low-Income Seniors and Persons with Disabilities pays Medicare premiums for low-income seniors and individuals with disabilities and additionally for some limits responsibility of the state Medicaid agency to payment of only those services not covered by Medicare. MSP also fills gaps in Medicare by eliminating some out-of-pocket expenses (co-pays, deductibles, etc.) and conveying eligibility for the Low Income Subsidy (LIS) program which provides premium assistance for Medicare Part D (prescription drug) coverage.



- Clawback since the implementation of Medicare Part D in 2006, low-income seniors and persons with disabilities who qualify for both Medicaid and Medicare, known as "dual eligibles," receive most of their prescription drugs from the Part D plans offered by Medicaid; federal Medicaid matching funds are no longer available for the costs of outpatient prescription drugs for these dual eligibles. Rather than allowing states to keep their entire share of these costs and apply them to other purposes, the "Clawback" provision requires that they pay most of their estimated savings to the Medicare program to help pay for Part D coverage for low-income beneficiaries.
- Louisiana Health Insurance Premium Payment (LaHIPP) Program a premium assistance program offered by Louisiana Medicaid that pays some or all of the health insurance premiums for an employee and his/her family if he/she has insurance available through an employer and a member of the family is already enrolled in Medicaid.

Uncompensated Care Costs (UCC) has the following activities:

- Uncompensated Care Costs The Uncompensated Care Costs (UCC) Program funds payments to hospitals for providing inpatient and outpatient care for uninsured and low-income individuals who are not financially
- Greater New Orleans Community Health Connection (GNOCHC) Demonstration GNOCHC is a 39month (10/1/10-12/31/13), \$97.5 million Medicaid Section 1115 Demonstration waiver utilizing Disproportionate Share Hospital (DSH) funding to continue funding of various providers previously funded by the Primary Care Access and Stabilization Grant (PCASG). The Demonstration's goals are: 1) Preserve primary and behavioral health care access that was restored and expanded in the Greater New Orleans area after Hurricane Katrina with the PCASG funds; 2) Advance and sustain the medical home model begun under PCASG; and 3) Evolve the grant-funded model to a financially sustainable model over the long term that incorporates Medicaid, Children Health Insurance Program (CHIP), and other payor sources as the revenue base.

For additional information, see:

#### Medical Vendor Payments

### Medical Vendor Payments Budget Summary

	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB
Means of Financing:						
State General Fund (Direct)	\$ 1,335,319,929	\$ 1,439,759,814	\$ 1,439,759,814	\$ 2,205,857,880	\$ 2,027,803,526	\$ 588,043,712
State General Fund by:						
Total Interagency Transfers	38,966,674	88,278,004	88,278,004	99,335,135	98,215,460	9,937,456
Fees and Self-generated Revenues	105,411,285	108,787,697	108,787,697	115,583,484	118,673,658	9,885,961
Statutory Dedications	450,984,841	498,076,598	521,307,824	302,711,092	402,557,031	(118,750,793)
Interim Emergency Board	0	0	0	0	0	0



# Medical Vendor Payments Budget Summary

	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB
Federal Funds	4,705,297,353	5,289,411,066	5,266,179,840	4,775,772,330	4,798,782,419	(467,397,421)
<b>Total Means of Financing</b>	\$ 6,635,980,082	\$ 7,424,313,179	\$ 7,424,313,179	\$ 7,499,259,921	\$ 7,446,032,094	\$ 21,718,915
Expenditures & Request:						
Payments to Private Providers	\$ 4,484,850,415	\$ 4,085,659,765	\$ 4,085,659,765	\$ 4,126,538,521	\$ 4,084,246,091	\$ (1,413,674)
Payments to Public Providers	726,790,471	512,246,407	512,246,407	447,249,569	277,176,571	(235,069,836)
Medicare Buy-Ins & Supplements	757,510,816	1,997,626,194	1,997,626,194	2,416,675,386	2,393,128,806	395,502,612
Uncompensated Care Costs	664,561,556	828,780,813	828,780,813	508,796,445	691,480,626	(137,300,187)
Recovery Funds	2,266,824	0	0	0	0	0
Total Expenditures & Request	\$ 6,635,980,082	\$ 7,424,313,179	\$ 7,424,313,179	\$ 7,499,259,921	\$ 7,446,032,094	\$ 21,718,915
Authorized Full-Time Equiva	lents:					
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
Total FTEs	0	0	0	0	0	0



# **306\_1000 — Payments to Private Providers**

Program Authorization: The Constitution of Louisiana (1974) Article 12, Section 8, declares that the Legislature may establish a system of economic and social welfare, unemployment compensation, and public health. Louisiana Revised Statues 36:251 et seq., give the Louisiana Department of Health and Hospitals (DHH) Secretary authority to direct and be responsible for the Medical Assistance Program, Title XIX of the Social Security Act, and the authority to act as the sole agent of the state or, in necessary cases, designate one of the offices within the department or its assistant secretary to cooperate with the federal government and with other state and local agencies in the administration of federal funds granted to the state or directly to the department or an office thereof to aid in the furtherance of any function of the department or its offices, including funding for the Medical Assistance Program, Title XIX of the Social Security Act. Authority is also given by the Balanced Budget Act of 1997 (BBA) (Public Law 105-33), as amended by recent technical amendments (Public Law 105-100, signed into law on November 19, 1997).

# **Program Description**

The mission of the Payments to Private Providers Program is to administer the Medicaid Program to ensure operations are in accordance with federal and state statutes regarding medically necessary services to eligible recipients.

The goals of the Payments to Private Providers Program are:

- I. To provide cost-effective and medically-appropriate pharmaceutical services.
- II. To improve health outcomes by emphasizing choice of healthcare options for Medicaid recipients, better coordination of care and quality of care, increasing access to medically necessary services, and mandating accountability for the delivery of Medicaid covered services through contractual arrangements with two different types of managed care organizations/ health plans.
- III. To provide cost effective and medically appropriate Medicaid covered services for individuals remaining in the Fee-for-Service Program.

The Payments to Private Providers Program includes the following categories of service:

- Adult Dentures A limited program of dentures, relines, and repairs for Medicaid eligible adults. Services are limited in scope and frequency and are subject to prior authorization.
- Case Management Services Assists the recipient in prioritizing and defining his desired personal outcomes, defining appropriate supports and services, and accessing these supports and services.
- Certified RN Anesthetists (CRNAs) Services Anesthetic services provided by certified registered nurse anesthetists.
- Durable Medical Equipment (DME) Medically necessary equipment, appliances, and supplies. DME providers must obtain prior authorization from BHSF for most services.



- Early and Periodic Screening, Diagnostics and Treatment (EPSDT) & Related Services The child-specific component of Louisiana Medicaid designed to make health care available and accessible to lowincome children. The EPSDT Health Services component of EPSDT provides evaluation and treatment for children with disabilities, primarily through school-based and early intervention services providers. The screening component of EPSDT provides a framework for routine health, mental health, and developmental screening of children from birth to age 21, as well as evaluation and treatment for illness, conditions, or disabilities.
- Family Planning Services to female Medicaid recipients for routine family planning services including doctor's visit, counseling, contraceptives and certain lab services.
- Federally Qualified Health Center (FQHC) Services Physician or professional services and designated services and supplies incident to the physician or other professional services. FQHCs are more commonly known as community health centers, migrant health centers, and health care for the homeless programs, and must meet federal requirements of the U.S. Department of Health and Human Services prior to Medic-aid enrollment.
- Hemodialysis Services Dialysis treatment (including routine laboratory services), medically necessary non-routine lab services, and medically necessary injections reimbursed to free-standing End Stage Renal Disease (ESRD) facilities.
- Home Health Services Intermittent or part-time services furnished by a home health agency; personal care services provided by a home health agency in accordance with the plan of treatment recommended by the physician; medical supplies recommended by the physician as required in the care of the recipient and suitable for use in the home; and physical therapy services provided by a home health agency. All services must be ordered by a physician. Note: Certain services under this program require prior authorization through Unisys.
- Hospital Inpatient Services Inpatient hospital care and services. Inpatient services must be pre-certified in most instances if provided by an in-state, non-charity hospital.
- Hospital Outpatient Services Outpatient hospital care and services. Some outpatient services must be prior authorized by BHSF.
- Intermediate Care Facilities for the Mentally Retarded Mentally Retarded/Developmental Disabilities Community Homes Homes for the long-term care of the mentally retarded and/or developmentally disabled recipients.
- Laboratory and X-Ray Services Diagnostic testing performed by a laboratory independent of both the attending or consulting physician's office and/or the hospital where services are rendered.
- Mental Health Inpatient Services Mental health evaluation, treatment, and counseling services provided in an outpatient clinic setting and which are limited to one per recipient per day.
- Behavioral Health Services Medicaid behavioral health services are managed and reimbursed by Magellan Health Services under the authority of the 1915(b) waiver. Adult behavioral health services are under a capitated arrangement. Children's behavioral health services are paid on a fee for service basis; however, Magellan is the sole Medicaid provider.
- Nursing Homes Facilities that provide professional nursing and rehabilitation services on a 24 hour-a-day basis. Must be state licensed.

- Programs of All Inclusive Care for the Elderly (PACE) A service model that provides all Medicare and Medicaid services, as well as in-home supports to individuals who are 55 years of age or older, meet certain qualifications and choose to participate.
- Pharmaceutical Products and Services Prescription services for prescriptions issued by a licensed physician, podiatrist, certified nurse practitioner, or dentist.
- Physician Services Physician and other professional services, including those of the following professionals: physicians (including specialists), audiologists, certified registered nurse anesthetists, chiropractors, nurse midwives, nurse practitioners, optometrists, and podiatrists.
- Rural Health Clinics Physician or professional services and designated services and supplies incident to the physician or other professional services. Rural health clinics must meet federal requirements of the US Department of Health and Human Services prior to Medicaid enrollment.
- Transportation (Emergency Ambulance) Transportation provided by an ambulance for an unforeseen combination of circumstances which demands immediate attention at a medical facility to prevent serious impairment or loss of life. All services are subject to review for medical necessity of ambulance transportation.
- Transportation (Non-Emergency Ambulance) Transportation provided by an ambulance in which no other means of transportation is available and/or the recipient is unable to ride in any other type of vehicle. All services are subject to review for medical necessity of ambulance transportation.
- Transportation (Non-Emergency Non-Ambulance) Transportation to and from routine medical appointments.
- Waiver (Adult Day Health Care) Provides supervised care, through health and social services, to adults with disabilities or elders in a licensed day care facility, during part of the day. A limited number of opportunities are available for recipients who meet the requirements of the program.
- Waiver (Children's Choice) Provides supplemental support to children with developmental disabilities who currently live at home with their families or with a foster family. Services include support coordination, center-based respite, environmental accessibility adaptations, and family training and family support. A limited number of opportunities are available for recipients who meet the requirements of the program.
- Waiver (Community Choices) Provides services to the elderly and adults with disabilities in their homes as an alternative to nursing home placement. Services include support coordination (case management), personal assistance services, environmental modifications, adult day health care services, home delivered meals, respite, therapy services, and nursing services. –
- Waiver (NOW New Opportunities Waiver) Provides services to individuals, age 3 and older, with developmental disabilities as an alternative to institutional care. Services include individual and family support (personal care), center-based respite, community integration and development, environmental accessibility adaptations, specialized medical equipment and supplies, supported living, substitute family care, day habilitation, supported employment, employment-related training, professional services, skilled nursing, transitional services, and personal emergency response system. A limited number of opportunities are available for recipients who meet the requirements of the program.
- Waiver (Family Planning) Provides services to low-income women as a means of reducing unintentional pregnancies, thus improving quality of life and promoting better health practices for women and children. A limited number of opportunities are available for recipients who meet the requirements of the program.



- Waiver (Supports) Offers focused, individualized vocational services to individuals age 18 and older as an alternative to institutional care. Services include support coordination, day habilitation, prevocational services, respite, habilitation, and the personal emergency response system. This waiver is designed for participants who have access to supports and services through family and community resources that are sufficient to assure their health and welfare. A limited number of opportunities are available for recipients who meet the requirements of the program.
- Waiver (ROW Residential Options Waiver) Provide services to individual with developmental disabilities as an alternative to institutional care. Services include support coordination, community living supports, companion care, host home, shared living, transitional services, environmental accessibility adaptation, assistive technology/specialized medical equipment, center-based respite, nursing, professional services, transportation, supported employment, prevocational services, day habilitation, and personal emergency response system. A limited number of opportunities are available for recipients who meet the requirements of the program.
- Waiver Coordinated System of Care (CSoC) The 1915(c) waiver provides the authority and funds services for children who meet institutional level of care for behavioral health conditions.
- Other Private Provider Services Included in this group are the following services:
  - Audiology
  - Chiropractic Services
  - Personal Care Attendant
  - Physical & Occupational Therapy
  - Prenatal Clinics
  - Early Steps
  - Supported Employment Personal Assistance Services
  - Other services

**Note:** Although the Home and Community Based waiver services receive funding from Medicaid, the following waivers are reported in LaPAS by the Office for Citizens with Developmental Disabilities, Agency 09-340: New Opportunities Waiver (NOW), Children's Choice Waiver, Supports Waiver, and Residential Options Waiver (ROW). Also, the following waivers are reported in LaPAS by the Office of Aging and Adult Services, Agency 09-320: Community Choices Waiver and the Adult Day Health Care (ADHC) Waiver.

For additional information, see:

Medical Vendor Payments



# Payments to Private Providers Budget Summary

	Ì	Prior Year Actuals FY 2011-2012	]	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total ecommended Over/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	671,870,967	\$	476,726,468	\$ 476,726,468	\$ 1,058,360,445	\$ 879,131,073	\$ 402,404,605
State General Fund by:								
Total Interagency Transfers		34,900,527		45,467,438	45,467,438	59,636,138	58,516,463	13,049,025
Fees and Self-generated Revenues		81,978,101		87,485,141	87,485,141	94,138,032	97,228,206	9,743,065
Statutory Dedications		428,755,941		483,529,399	506,760,625	270,163,893	370,009,832	(136,750,793)
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		3,267,344,879		2,992,451,319	2,969,220,093	2,644,240,013	2,679,360,517	(289,859,576)
Total Means of Financing	\$	4,484,850,415	\$	4,085,659,765	\$ 4,085,659,765	\$ 4,126,538,521	\$ 4,084,246,091	\$ (1,413,674)
Expenditures & Request:								
Personal Services	\$	0	\$	0	\$ 0	\$ 0	\$ 0	\$ 0
Total Operating Expenses		0		0	0	0	0	0
Total Professional Services		0		0	0	0	0	0
Total Other Charges		4,484,850,415		4,085,659,765	4,085,659,765	4,126,538,521	4,084,246,091	(1,413,674)
Total Acq & Major Repairs		0		0	0	0	0	0
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	4,484,850,415	\$	4,085,659,765	\$ 4,085,659,765	\$ 4,126,538,521	\$ 4,084,246,091	\$ (1,413,674)
Authorized Full-Time Equiva	len	ts:						
Classified		0		0	0	0	0	0
Unclassified		0		0	0	0	0	0
Total FTEs		0		0	0	0	0	0

# **Source of Funding**

The Payments to Private Providers program is funded with State General Fund, Interagency Transfers, Fees and Self-generated Revenues, Statutory Dedications, and Federal Funds. Interagency Transfers originate from the Department of Children and Family Services, Prevention and Intervention Program for non-medical foster care. Interagency Transfers funding is also generated from overcollections from the Office for Citizens with Developmental Disabilities. The Statutory Dedications represent funding received from the Louisiana Medical Assistance Trust Fund, which derives its funding source from the collection of provider fees from varying medical providers in the state based on corresponding per bed per day rates and/or prior year excess revenues; the Louisiana Fund and the Health Excellence Fund, payable out of funding received pursuant to the Master Settlement Agreement reached between certain states and participating tobacco manufacturers; the New



Opportunities Waiver Fund, created by Act 481 of the 2007 Regular Legislative Session; the Medicaid Trust Fund for the Elderly and the Health Trust Fund, based on interest earnings from the principal of the Medicaid Trust Fund for the Elderly; and the Community Hospital Stabilization Fund. (Per R.S. 39.36B. (8), see table below for a listing of expenditures out of each Statutory Dedicated Fund.) Federal Funds represent federal financial participation in the Medicaid program, matched at a rate of 62.96% for state Fiscal Year 2013-2014.

# **Payments to Private Providers Statutory Dedications**

Fund	Prior Year Actuals Y 2011-2012	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation Y 2013-2014	ecommended Y 2013-2014	Total Recommended Over/(Under) EOB
LA Medical Assistance Trust Fund	\$ 290,444,078	\$	335,607,093	\$ 335,607,093	\$ 99,264,340	\$ 130,710,122	\$ (204,896,971)
Medicaid Trust Fund for the Elderly	97,222,925		97,871,479	121,102,705	121,102,705	183,505,794	62,403,089
Health Trust Fund	6,280,952		7,159,084	7,159,084	6,905,105	6,905,105	(253,979)
New Opportunities Waiver (NOW) Fund	11,174,264		0	0	0	0	0
Community Hospital Stabilization Fund	0		10,089,053	10,089,053	10,089,053	10,989,053	900,000
Louisiana Fund	9,755,047		5,119,644	5,119,644	5,119,644	12,135,818	7,016,174
Health Excellence Fund	13,878,675		27,683,046	27,683,046	27,683,046	25,763,940	(1,919,106)

# Major Changes from Existing Operating Budget

G	eneral Fund	Total Amount	Table of Organization	Description
\$	0	\$ 0	0	Mid-Year Adjustments (BA-7s):
_				
\$	476,726,468	\$ 4,085,659,765	0	Existing Oper Budget as of 12/01/12
_				
				Statewide Major Financial Changes:
				Non-Statewide Major Financial Changes:
	253,145,842	0	0	Means of financing substitution replacing federal funds with State General Fund (Direct) due to a FMAP rate change in the Private Providers, Public Providers, and Medicare Buy-Ins and Supplements Programs. State General Fund (Direct) is being replaced with federal funds in the Uncompensated Care Costs Program due to the FMAP rate change. The FY13 Title XIX blended rate was 66.58% federal and the FY14 blended rate is 62.96% federal. For UCC, the FY13 FMAP rate is 61.24% federal and the FY14 rate is 60.98% federal.
	191,626,947	0	0	Means of financing substitution replacing Medical Assistance Trust Fund with State General Fund.
	686,178	1,852,533	0	Funding to increase inpatient hospital rates for small rural hospitals per Act 327 of 2007 Session. The Act requires DHH to raise the rates annually by the Medicare market basket inflation factor. This is part of Louisiana's state plan with CMS.
	311,838	841,896	0	Annualization of the increase in Medical Economic Index (MEI) costs for Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs)
	1,146,053	3,094,094	0	Funding for nine new Federally Qualified Health Centers (FQHCs) and eight new Rural Health Clinics (RHCs) projected to enroll in FY 14.



General Fund	Total Amount	Table of Organization	Description
1,595,021	4,306,211	0	Annualization for payments to eight rural health clinics and nine federally qualified health centers that are projected to enroll in FY 13.
(4,421,769)	(11,937,822)	0	Annualize mid-year cost reduction due to the restructuring of Nursing Home Admissions.
(1,900,079)	(4,900,901)	0	Annualize mid-year reduction to Dental services for Medicaid Recipients who are expecting and above 133% of the Federal Poverty Level.
(1,206,330)	(3,256,830)	0	Nursing Home bed buy-back is being restructured.
(42,879,621)	0	0	Nursing Home rates are being rebased
(24,528,567)	(66,441,507)	0	Optional Medicaid Programs for the Medicaid Purchase Plan, Disability Medicaid, and for Pregnant Women above 133% of the Federal Poverty Level are being realigned.
(1,365,753)	(3,687,238)	0	DHH will request a 1915(b) waiver from the Centers for Medicare and Medicaid Services to allow the purchase of laboratory and x-ray services from a sole source
(3,438,634)	(9,283,570)	0	Reduction in Rural Hospital Upper Payment Limit payments.
(350,000)	(944,924)	0	Annualize mid-year rebasing of the Program for All Inclusive Care of the Elderly (PACE)
(103,695)	(279,953)	0	Two Emergency Ambulance rate reductions are being annualized.
(94,567)	(255,310)	0	Annualization of a 1.5% rate reduction to Intermediate Care Facilities.
			Funding for additional days in SFY 14 that are not currently funded in SFY 13 due to privatization of state run Intermediate Care Facilities. The privatization of these facilities
4,521,839	12,207,988	0	represents an overall savings to the state, but some of the expenditures will shift from the public program to the private program.
0	15,000,000	0	Increase for Hospital Based Physician UPL payments.
(80,966,605)	(296,562,209)	0	Reduction due to the inclusion of pharmacy in the set of covered services provided by Bayou Health Prepaid Plans effective November 1, 2012. The remaining Private Providers program pharmacy budget will provide for pharmacy services to Bayou Health Shared Savings Plan enrollees and Bayou Health excluded (Fee For Service) populations.
(245,074)	(661,646)	0	Annualize mid-year reduction of rehabilitation service expenditures due to the implementation of Bayou Health.
(813,264)	(2,195,638)	0	Behavioral health services are being transferred to the Behavioral Health Partnership (BHP) effective April 1, 2012. BHP is a capitated managed care service delivery model budgeted in the Buy In program. For SFY14, the total SFY13 Existing Operating Budget amounts for these service categories are being non-recurred in Private Providers.
0	(14,608,190)	0	Reduction of excess budget authority for Upper Payment Limit payments.
637,274	2,337,763	0	Increase in Buy Ins and Supplements program due to LaCHIP Affordable Plan (LAP) enrollees moving out of the Office of Group Benefits' (OGB) PPO Plan and into the BAYOU HEALTH group plan.
253,979	0	0	Means of financing substitution replacing Health Trust Fund with State General Fund (Direct) due to lowered projections for the fund by the Revenue Estimating Conference on December 13, 2012.
(34,594)	(93,397)	0	Annualize mid-year cost reduction due to the transition of the 1st Time Mothers Home Visit Program to Bayou Health.
(57,675)	(155,710)	0	Annualize mid-year cost reduction due to the transition of Case Management Services to Bayou Health.
(1,631,020)	(4,403,403)	0	The Our Lady of the Lake Upper Payment Limit payment is being eliminated.
1,419,675	3,832,815	0	Additional funding for reimbursement of Medicaid covered services to adults currently eligible for but not enrolled in Medicaid.
2,783,496	7,514,838	0	The projected expenditures for Inpatient Graduate Medical Education (GME) is \$12,514,837 for FY 2014. The adjustment of \$7,514,837 is the amount of the GME portion of the per diem rate paid to teaching hospitals for recipients enrolled in the prepaid health plans



General Fund	Total Amount	Table of Organization	Description
1,074,160	2,900,000	0	The total annual outlier pool amount is \$10,000,000. The initial estimate for outliers was \$7.1 million due to the percentages of recipients that were in fee for service vs. the prepaid plans. However, the actual outlier claims that have come in for SFY 12 show that most if not all of the outlier claims submitted were for fee for service and nothing from the pre-paid plans. For this reason, DHH is adjusting the amount paid for outliers for the non-prepaid recipients to be the full \$10,000,000.
111,120	300,000	0	The projected expenditures for Inpatient Major Teaching is \$300,000 for SFY 2014. The amount is for reimbursing Tulane Hospital for its high cost hemophilia cases in SFY 2014.
(2,026,366)	(5,470,750)	0	Annualize mid-year 1% Provider rate reduction to Hospital Inpatient, Hospital Outpatient, and Physicians.
900,000	0	0	Means of financing substitution replacing Interagency Transfers with State General Fund (Direct). Funds are being transferred from the Louisiana Emergency Response Network to Medical Vendor Payments for participation in the Low-Income and Needy Care Collaboration Agreement program (LINCCA).
(7,016,174)	0	0	Means of financing substitution replacing State General Fund (Direct) with the Louisiana Fund due to the projections for the fund by the Revenue Estimating Conference on December 13, 2012.
1,919,106	0	0	Means of financing substitution replacing the Health Excellence Fund with State General Fund (Direct) due to lowered projections for the fund by the Revenue Estimating Conference on December 13, 2012.
4,217,256	0	0	Means of financing substitution replacing federal funds with State General Fund due to Federal government denying the LTPCS 1915K waiver.
11,513,883	0	0	Means of financing substitution replacing Fees and Self Generated Revenues with State General Fund (Direct) and Interagency Transfers due to the nonrecurring of DHH over collections.
(800,000)	(2,159,827)	0	Medical Vendor Payments will move to using a third party administrator to be the sole source for the provision of Durable Medical Equipment (DME) and supplies. The third party administrator, similar to the ones currently utilized by Bayou Health prepaid plans, will allow MVP the opportunity to control costs, reduce unnecessary expenditures, and have greater predictability in DME pricing and expenditures.
0	52,709,148	0	Rebasing of nursing home rates. The statutory dedication is the Medicaid Trust Fund for the Elderly.
(11,659,285)	0	0	Means of financing substitution replacing State General Fund (Direct) with Federal Funds. UPL payments to Rural Hospitals will be shifted to Certified Public Expenditures.
(1,426,040)	(3,850,000)	0	The High Medicaid Claims Pool is being eliminated.
363,235	980,656	0	Adjustment for increased utilization in manually priced Durable Medical Equipment.
118,662	320,362	0	Adjustment for increased utilization in the Home Health private duty nursing program pursuant to the Chisholm settlement.
26,924,463	72,690,236	0	Utilization
1,591,166	4,295,805	0	Annualization of slots filled in SFY13 for the Adult Day Health Care (ADHC), Children's Choice, New Opportunities (NOW), Residential Options and Supports waivers. ADHC is having 744 slots annualized, Children's Choice is having 55 slots annualized, the NOW waiver is having 220 slots annualized, the Residential Options waiver is having 12 slots annualized, and the Supports waiver is having 41 slots annualized.
481,520	1,300,000	0	Funds for Rural Health Clinic cost report settlements. The agency provides funding to Rural Health Clinics based on an analysis of prior year and estimated current year expenditures. The funds are for Rural Health Clinics whose actual expenditures exceeds the budgeted amount.
1,628,781	10,993,248	0	Adjustment that annualizes federally mandated increased reimbursement for designated primary care services to begin January 1, 2013.



G	eneral Fund	Total Amount	Table of Organization	Description
	36,759,185	99,241,862	0	Fee for Service Claims for Private Hospitals.
	27,723,690	74,847,975	0	Increase in UPL Payments to Private Hospitals.
	16,815,348	45,397,808	0	Realignment of HCSD Central Office Operations.
	(900,000)	0	0	Means of financing substitution replacing State General Fund (Direct) with the Community Hospital Stabilization Fund due to a carryover balance from SFY13.
	0	12,769,913	0	Pass through from provider fees.
\$	879,131,073	\$ 4,084,246,091	0	Recommended FY 2013-2014
\$	0	\$ 0	0	Less Supplementary Recommendation
\$	879,131,073	\$ 4,084,246,091	0	Base Executive Budget FY 2013-2014
\$	879,131,073	\$ 4,084,246,091	0	Grand Total Recommended

#### **Professional Services**

Amount	Description
	This program does not have funding for Professional Services for Fiscal Year 2013-2014.

# **Other Charges**

Amount	Description
	Other Charges:
\$4,084,246,091	Payments to Private Providers
\$4,084,246,091	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
	This program does not have funding for Interagency Transfers for Fiscal Year 2013-2014.
\$0	SUB-TOTAL INTERAGENCY TRANSFERS
\$4,084,246,091	TOTAL OTHER CHARGES

# **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.



## **Performance Information**

1. (KEY) Through the Medicaid BAYOU HEALTH Initiatives activity, to increase preventive health care; improve quality, performance measurement, and patient experience; and moderate cost increases through: 1) implementation of fee-for-service coordinated care networks (BAYOU HEALTH Shared Savings); and 2) implementation of comprehensive pre-paid coordinated care networks (BAYOU HEALTH Prepaid).

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.

Other Link(s) (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

Note: The Health Plan's performance measure outcomes that fall below the DHH benchmarks for improvement for calendar year ending 12/31/2013 may be subject the following sanctions: 1) Bayou Health - Prepaid a maximum recoupment of 2.5% of total capitation payments for the measured calendar year; and 2) Bayou Health - Shared - non-payment of up to 100% of the eligible savings payouts. DHH reserves the right to modify or replace existing performance incentive-based measures, if the Health Plans achieve benchmarks. The improvement goals are established to mandate improvement in the Medicaid performance measures over the contract period. The overarching goal is to improve Louisiana Medicaid standings in the percentile rankings for the incentive-based Medicaid HEDIS measurements.

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of health plans that meet for the calendar year DHH improvement benchmarks for BAYOU HEALTH incentive-based performance measures (LAPAS CODE - 25064)	Not Applicable	Not Applicable	100%	100%	100%	100%
S Percentage of Health Plans that meet adults' access to preventative/ambulatory health services for their members (LAPAS CODE - 25065)	Not Applicable	Not Applicable	100%	100%	100%	100%

#### **Performance Indicators**



#### **Performance Indicators (Continued)**

	Performance Indicator Values					
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
S Percentage of Health Plans that meet comprehensive diabetes care HgbA1C for their members (LAPAS CODE - 25066)	Not Applicable	Not Applicable	100%	100%	100%	100%
S Percentage that meet Chlamydia screening for women for their members. (LAPAS CODE - 25067)	Not Applicable	Not Applicable	100%	100%	100%	100%
S Percentage of Health Plans that meet well-child visits in third, fourth, fifth and sixth years of life for their members. (LAPAS CODE - 25068)	Not Applicable	Not Applicable	100%	100%	100%	100%
S Percentage of Health Plans that meet adolescent well- care visits for their members. (LAPAS CODE - 25069)	Not Applicable	Not Applicable	100%	100%	100%	100%

2. (KEY) Through the Medicaid BAYOU HEALTH Initiative activity, encourage Medicaid recipients to obtain appropriate preventive and primary care in order to improve their overall health and quality of life, and to ensure that those who care for them provide the care through: 1) implementation of fee-for-service coordinated care networks (BAYOU HEALTH Shared Savings); and 2) implementation of comprehensive prepaid coordinated care networks (BAYOU HEALTH Prepaid).

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.

Other Link(s) (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

Note: Health Plans that fall below the DHH benchmarks for improvement for calendar year ending 12/31/2013 shall implement corrective action plans to ensure compliance with meeting the established goals. DHH reserves the right to modify or replace existing performance measures, if the Health Plans achieve benchmarks. The improvement goals are established to ensure improvement in the Level 1 performance measures over the contract period. The overarching goal is to improve Louisiana Medicaid standings in percentile rankings for the administrative and clinical performance measures. See listing of performance measures at: http:// new.dhh.louisiana.gov/assets/docs/Making\_Medicaid\_Better/RequestsforProposals/CCNPAppendices/AppendixJ\_PerformanceMeasures04112011.pdf



#### **Performance Indicators**

		Performance Indicator Values						
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014	
	Percentage of the non- incentive based administrative and clinical performance measures that meet or exceed the DHH established performance improvement benchmarks for each Health Plan.	Net Applicable	Net Applicable	1000/	100%/	1000/	100%	
	(LAPAS CODE - 25070)	Not Applicable	Not Applicable	100%	100%	100%	10	

# **3. (KEY)** Through the Community-Based Services activity, to achieve better health outcomes for the state by promoting affordable community-based services, decreasing reliance on more expensive institutional care, and providing choice to recipients.

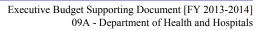
Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.

Other Link(s) (TANF, Tobacco Settlement, Workforce Development Commission, or Other): The DHH plan for improving health care in Louisiana, now known as the BluePrint for Health is linked as follows: Goal VII: Strengthen Accountability for Reimbursement

	Performance Indicator Values						
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014	
K Percentage change in the unduplicated number of recipients receiving community-based services (LAPAS CODE - 24069)	11%	34%	3%	3%	3%	3%	

#### **Performance Indicators**



# 4. (KEY) Through the Community-Based Long Term Care for Persons with Disabilities activity, to increase the number of people accessing community-based services by 5% annually over the next 5 years in a more cost-effective and efficient manner.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.

Other Link(s) (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

#### **Performance Indicators**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage change in number of persons served in community-based waiver services (LAPAS CODE - 24070)	6%	15%	9%	9%	9%	9%
K Percentage change in the cost of the New Opportunities Waiver post implementation of resource allocation (LAPAS CODE - 24071)	3%	7%	3%	3%	2%	2%
K Number of residents of private ICFs/DD transitioning to Residential Options Waiver (ROW) opportunities (LAPAS CODE - 25071)	Not Applicable	Not Applicable	10,011	10,011	10,011	10,011
This is a new performance in	dicator for FY 2012-	2013 and there is no	prior year informati	ion available.		
K Utilization of Residential Options Waiver (ROW) opportunities available through funding allocation or conversion of ICF/DD beds. (LAPAS CODE - 24073)	87%	19%	75%	75%	100%	100%
Note: This indicator has changed for FY 2014. The only slots being utilized would be those available through 'crisis diversion", therefore the standard is based on 100% of available slots being filled.						
K Percentage of persons surveyed reporting overall satisfaction with services requested. (LAPAS CODE - 24074)	80%	94%	80%	80%	85%	85%



# 5. (KEY) Through the Community-Based Long Term Care for the Elderly and Disabled activity, to achieve national averages for Medicaid-funded institutional versus community-based Long Term Care (LTC) spending for older adults and adults with disabilities by 2015.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.

Other Link(s) (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

#### **Performance Indicators**

Ŧ			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of Medicaid spending for elderly and disabled adult long term care that goes towards community-based services rather than nursing homes (LAPAS CODE - 24075)	28%	24%	28%	28%	31%	31%
K Average Medicaid expenditure per person for community-based long term care as percentage of average expenditure per person for nursing home care (LAPAS CODE - 24076)	54%	42%	60%	60%	55%	55%
K Percentage of available, nationally recognized measures on which Medicaid community- based programs perform the same or better than the Medicaid nursing programs (LAPAS CODE - 24077)	67%	70%	80%	80%	80%	80%

# 6. (KEY) Through the Behavioral Health activity, to increase access to a full array of community-based, evidence-based and/or best practice behavioral services, improve health outcomes, and decrease reliance on institutional care.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.



#### Other Link(s) (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

#### **Performance Indicators**

				Performance Ind	licator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K	Percentage of eligible recipients receiving behavioral health services in the community. (LAPAS CODE - 24078)	5.0%	0	5.0%	5.0%	5.0%	5.0%
	•					5.0%	5.0% 5.0%

#### **Payments to Private Providers General Performance Information**

		Perfo	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012
Percent change in expenditures for state inpatient psychiatric services. (LAPAS CODE - 24079)	Not Applicable	Not Applicable	Not Applicable	11%	0

#### 7. (KEY) Through the Medicaid BAYOU HEALTH Initiatives activity, ensure prompt payment or preprocessing of claims for network providers.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.

Other Link(s) (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

#### **Performance Indicator Values** L Performance Yearend Standard as Existing **Performance At** Performance **Actual Yearend** Initially At Executive Performance Performance Continuation **Performance Indicator** Appropriated **Budget Level Budget Level** Standard Performance Standard FY 2011-2012 FY 2012-2013 FY 2012-2013 Name FY 2011-2012 FY 2013-2014 FY 2013-2014 K Percentage of Bayou Health - Prepaid Health Planís payments that meet the prompt pay requirements. (LAPAS CODE - 25072) 100% 100% 100% 100% Not Applicable Not Applicable Program implemented in FY 2012 and did not have a yearend performance standard for FY 2012.

#### **Performance Indicators**



8. (KEY) Through the Support Services activity, to reduce the rate of growth of expenditures for drugs in the DHH Pharmacy Benefits Management Program by implementing a prior authorization (PA) program with a preferred drug list (PDL) and obtaining supplemental rebates from drug manufacturers.

Children's Budget Link: Not Applicable

#### **Performance Indicators**

			Performance In	dicator Values			
L e v e Performance Indicator I Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014	
S Amount of cost avoidance (in millions) through the prior authorization (PA) program and use of the preferred drug list (LAPAS CODE - 15421)	\$ 40.5	\$ 42.2	\$ 37.0	\$ 37.0	\$ 37.0	\$ 37.0	
K Percentage of Total Scripts PDL compliance (LAPAS CODE - 22942)	90%	166%	90%	90%	90%	90%	

#### Payments to Private Providers General Performance Information

		Perfo	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012
Number of classes of therapeutic drugs established (LAPAS CODE - 13377)	57	68	68	73	75

#### 9. (KEY) Through the Inpatient Hospitalization activity, to provide necessary care for Medicaid recipients when acute care hospitalization is most appropriate and to lower the growth of inpatient hospital costs while moving toward a higher and consistent level of quality medical care.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.



#### **Performance Indicators**

				Performance Inc	dicator Values		
L e v e 1	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
	Average (mean) length of stay in days (non-psych.) for Title XIX Medicaid recipients (LAPAS CODE - 24083)	4.3	4.3	4.4	4.4	4.5	4.5

# 10. (KEY)Through the Institutional Based Long Term Care for Persons with Developmental Disabilities activity, to transition recipients living in Intermediate Care Facilities for individuals with developmental disabilities to home and community based settings.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

# Performance Indicators

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of Recipients moved from the ICF-DD settting into home and community based settings (LAPAS CODE - 24084)	2%	7%	2%	2%	2%	2%
S Number of recipients moving from ICF-DD to community based services. (LAPAS CODE - 24085)	72	131	72	72	40	40

# 11. (KEY)Through the Institutional Based Long Term Care for the Elderly and Disabled activity, to use spending to reduce unused bed capacity and improve quality to achieve national averages by 2015.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.



#### **Performance Indicators**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of national nursing home quality measures on which Louisiana nursing homes rate at or above the national average per most recent Dept. of Health & Human Services Report (LAPAS CODE - 24086)	30%	26%	30%	30%	32%	32%
K Percentage change in nursing facility utilization (LAPAS CODE - 24087)	0	-12.84%	0	0	0	0
K Percentage change in nursing facility spending under Medicaid (LAPAS CODE - 24088)	6.31%	-9.20%	6.31%	6.31%	1.90%	1.90%
K Nursing Home Occupancy Rate (LAPAS CODE - 24089)	72%	70%	72%	72%	72%	72%

#### 12. (KEY)Through the Hospice and Nursing Home Room and Board Payments activity, to provide quality palliative care to Medicaid Hospice recipients at the most reasonable cost to the state.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

#### **Performance Indicators**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of Room & Board Services for Hospice Patients (LAPAS CODE - 24090)	522,941	110,067	560,000	560,000	474,683	474,683
K Number of Hospice Services (LAPAS CODE - 24091)	95,246	18,447	101,000	101,000	92,808	92,808



# **306\_2000 — Payments to Public Providers**

Program Authorization: The Constitution of Louisiana (1974) Article 12, Section 8, declares that the Legislature may establish a system of economic and social welfare, unemployment compensation, and public health. Louisiana Revised Statues 36:251 et seq., give the Louisiana Department of Health and Hospitals (DHH) Secretary authority to direct and be responsible for the Medical Assistance Program, Title XIX of the Social Security Act, and the authority to act as the sole agent of the state or, in necessary cases, designate one of the offices within the department or its assistant secretary to cooperate with the federal government and with other state and local agencies in the administration of federal funds granted to the state or directly to the department or an office thereof to aid in the furtherance of any function of the department or its offices, including funding for the Medical Assistance Program, Title XIX of the Social Security Act. Authority is also given by the Balanced Budget Act of 1997 (BBA) (Public Law 105-33), as amended by recent technical amendments (Public Law 105-100, signed into law on November 19, 1997).

# **Program Description**

The mission of the Payments to Public Providers Program is to administer the Medicaid Program to ensure operations are in accordance with federal and state statutes regarding medically necessary services to eligible recipients.

The goals of the Payments to Public Providers Program are:

- I. To provide cost effective and medically appropriate pharmaceutical services.
- II. To improve health outcomes by emphasizing choice of healthcare options for Medicaid recipients, better coordination of care and quality of care, increasing access to medically necessary services, and mandating accountability for the delivery of Medicaid covered services through contractual arrangements with two different types of managed care organizations/ health plans.
- III. To provide cost effective and medically appropriate Medicaid covered services for individuals remaining in the Fee-for-Service Program.

The Payments to Public Providers Program sole activity is the provision of approved medically necessary services by public providers. Public providers are enrolled Medicaid Vendors that are state owned, and include:

- LSUHSC Health Care Services Division
- LSUHSC Shreveport
- LSUHSC E. A. Conway
- LSUHSC H. P. Long
- DHH State MR/DD Services (including Special School District #1)
- DHH State Nursing Homes Villa Feliciana Medical Complex and John J. Hainkel Home
- DHH Office of Public Health
- DHH Community Mental Health



- DHH Public Psychiatric Free Standing Units
- State Education
- Other Public Providers for Services

For additional information, see:

Medical Vendor Payments

#### **Payments to Public Providers Budget Summary**

		Prior Year Actuals FY 2011-2012		Enacted FY 2012-2013		Existing Oper Budget as of 12/01/12		Continuation FY 2013-2014		ecommended Y 2013-2014	Total Recommended Over/(Under) EOB
Means of Financing:											
State General Fund (Direct)	\$	189,074,445	\$	124,713,404	\$	124,713,404	\$	136,155,909	\$	73,160,871	\$ (51,552,533)
State General Fund by:											
Total Interagency Transfers		0		0		0		0		0	0
Fees and Self-generated Revenues		0		0		0		0		0	0
Statutory Dedications		11,845,056		9,147,866		9,147,866		9,147,866		9,147,866	0
Interim Emergency Board		0		0		0		0		0	0
Federal Funds		525,870,970		378,385,137		378,385,137		301,945,794		194,867,834	(183,517,303)
Total Means of Financing	\$	726,790,471	\$	512,246,407	\$	512,246,407	\$	447,249,569	\$	277,176,571	\$ (235,069,836)
Expenditures & Request:											
Personal Services	\$	0	\$	0	\$	0	\$	0	\$	0	\$ 0
Total Operating Expenses		0		0		0		0		0	0
Total Professional Services		0		0		0		0		0	0
Total Other Charges		726,790,471		512,246,407		512,246,407		447,249,569		277,176,571	(235,069,836)
Total Acq & Major Repairs		0		0		0		0		0	0
Total Unallotted		0		0		0		0		0	0
Total Expenditures & Request	\$	726,790,471	\$	512,246,407	\$	512,246,407	\$	447,249,569	\$	277,176,571	\$ (235,069,836)
Authorized Full-Time Equival	lents										
Classified		0		0		0		0		0	0
Unclassified		0		0		0		0		0	0
Total FTEs		0		0		0		0		0	0



#### **Source of Funding**

The Payments to Public Providers program is funded with State General Fund, Statutory Dedications, and Federal Funds. The Statutory Dedications represent funding received from the Louisiana Medical Assistance Trust Fund (R.S. 39:98.6) from provider fees from varying medical providers in the state based on corresponding per bed per day rates and/or prior year excess revenues. (Per R.S. 39.36B. (8), see table below for a listing of expenditures out of each Statutory Dedicated Fund.) Federal Funds represent federal financial participation in the Medicaid program, matched at a rate of 62.96% for state Fiscal Year 2013-2014.

#### **Payments to Public Providers Statutory Dedications**

Fund	Prior Year Actuals FY 2011-2012		Enacted FY 2012-2013		Existing Oper Budget as of 12/01/12		Continuation FY 2013-2014		Recommended FY 2013-2014		Total Recommended Over/(Under) EOB	
LA Medical Assistance Trust Fund	\$	11,845,056	\$	9,147,866	\$	9,147,866	\$	9,147,866	\$	9,147,866	\$	0

# Major Changes from Existing Operating Budget

G	eneral Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
_					
\$	124,713,404	\$	512,246,407	0	Existing Oper Budget as of 12/01/12
_					
					Statewide Major Financial Changes:
					Non-Statewide Major Financial Changes:
	34,924,092		0	0	Means of financing substitution replacing federal funds with State General Fund (Direct) due to a FMAP rate change in the Private Providers, Public Providers, and Medicare Buy-Ins and Supplements Programs. State General Fund (Direct) is being replaced with federal funds in the Uncompensated Care Costs Program due to the FMAP rate change. The FY13 Title XIX blended rate was 66.58% federal and the FY14 blended rate is 62.96% federal. For UCC, the FY13 FMAP rate is 61.24% federal and the FY14 rate is 60.98% federal.
	0		11,332,800	0	Increase for the expenditure authority for services paid by Medicaid to Local Education Agencies (LEA) for certain services. The LEA certifies the state share and DHH pays the federal share to the LEA. These services were previously paid under the KIDMED Program.



# Major Changes from Existing Operating Budget (Continued)

(	General Fund	1	Fotal Amount	Table of Organization	Description
	(86,476,625)		(246,402,636)	0	Adjusts funding in the Public Providers and Uncompensated Care Cost (UCC) programs due to the increased or decreased need for Title XIX and UCC in the various agencies' recommended budgets.
\$	73,160,871	\$	277,176,571	0	Recommended FY 2013-2014
Ψ	75,100,071	Ψ	277,170,071	Ŭ	Accommended 1 1 2010-2014
\$	0	\$	0	0	Less Supplementary Recommendation
\$	73,160,871	\$	277,176,571	0	Base Executive Budget FY 2013-2014
\$	73,160,871	\$	277,176,571	0	Grand Total Recommended

#### **Professional Services**

Amount	Description
	This program does not have funding for Professional Services for Fiscal Year 2013-2014.

### **Other Charges**

Amount	Description
	Other Charges:
\$4,934,246	Funds for Local Education Agencies for Certified Public Expenditures due to Coordinated System of Care agreements
\$43,437,246	Local Education for School Based Health
\$48,371,492	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$62,312,071	LSU HSC - Shreveport
\$1,369,291	LSU HSC - EA Conway
\$7,194,653	LSU HCSD
\$921,915	Capital Area Human Services District
\$315,053	Florida Parishes Human Services District
\$171,294	Metropolitan Human Services District
\$685,462	Jefferson Parish Human Service District
\$328,989	South Central Human Services Authority
\$530,362	Acadiana Human Services District
\$16,895,337	Villa Feliciana Medical Complex
\$12,090,919	Office of Public Health
\$2,934,542	Office of Mental Health for public free standing psych units
\$107,476,567	Office for Citizens with Developmental Disabilities
\$14,992,977	Louisiana Special Education Center
\$550,647	Special School District #1



# **Other Charges (Continued)**

Amount	Description
\$35,000	Louisiana School for the Deaf
\$228,805,079	SUB-TOTAL INTERAGENCY TRANSFERS
\$277,176,571	TOTAL OTHER CHARGES

# **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.

#### **Performance Information**

1. (KEY) Through the Payment to Public Providers activity, to encourage all Medicaid enrollees to obtain appropriate preventive and primary care in order to improve their overall health and quality of life as shown by well-visits, annual dental visits, access to primary care practitioners and asthma and diabetes measures.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provisions of primary and preventive healthcare services to children.

				Performance Inc	dicator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
	Average acute care length of stay in days per discharge for state hospitals. (LAPAS CODE - 24092)	5.50	5.54	5.60	5.60	6.30	6.30

#### **Performance Indicators**



# **306\_3000 — Medicare Buy-Ins & Supplements**

Program Authorization: The Constitution of Louisiana (1974) Article 12, Section 8, and Public Law 89-97 and the Balanced Budget Act of 1997 (BBA) (Public Law 105-33), as amended by technical amendments (Public Law 105-100, signed into law on November 19, 1997).

### **Program Description**

The mission of the Buy-Ins Program is to allow a mechanism for states to pay premiums under specific circumstances. This program has four major components:

A. Medicare Buy-In and Supplements Program which allows states to enroll certain groups of needy people in the supplemental medical insurance program and pay their premiums. The Medicare Buy-Ins and Supplements Program may permit the State, as part of its total assistance plan, to provide medical insurance protection to designated categories of needy individuals who are eligible for Medicaid and also meet the Medicare eligibility requirements. It has the effect of transferring some medical costs for this population from the Title XIX Medicaid program, which is partially state financed, to the Title XVIII program, which is financed by the Federal government. Federal matching money is available through the Medicaid program to assist the State with the premium payments for certain buy-in enrollees.

The goal of the Medicare Buy-Ins and Supplements Program is to avoid additional Medicaid cost by utilizing Buy-In (premiums) for Medicare eligibles.

B. Bayou Health Buy-In Program which reimburses for the delivery of specified health services to Medicaid recipients who members of a Bayou Health Plan. Reimbursement consists of:

1) Capitated per member per month payments to full risk Managed Care Organizations; and

2) Primary care case management per member per month payments to Primary Care Manager Organizations.

C. Louisiana Behavioral Health Partnership – The behavioral health program managed by DHH-Office of Behavioral Health includes behavioral health services for a special target population of children eligible for the Coordinated System of Care (CSoC), adults with Serious Mental Illness (SMI), and the Statewide Management Organization (SMO) child/adult population (e.g., the rest of the non-institutionalized Medicaid population). The benefit package for the SMO child/adult population includes inpatient psychiatric care, emergency room care, substance abuse services and care by psychiatrists for all adults and children. It also includes all EPSDT behavioral health care services for all Medicaid children. The Louisiana Behavioral Health Partnership also oversees the Behavioral SMO, the Prepaid Inpatient Health Plan (PIHP) that implements the 1) 1915(b) waiver; 2) the 1915(i) Adult Mental Health Rehabilitation services for the Severely Mentally III; and 3) the CSoC –1915(c) Serious Emotional Disturbance Children's waiver.

D. Bayou Health Buy-In Dental Program which reimburses for the delivery of dental services for recipients less than 21 years of age to a single statewide Dental Health Plan. The Health Plan will receive a risk-based per member per month capitated payment.



For additional information, see:

#### Medical Vendor Payments

### Medicare Buy-Ins & Supplements Budget Summary

		Prior Year Actuals Y 2011-2012	l	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation TY 2013-2014	Recommended FY 2013-2014	Total ecommended wer/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	252,859,352	\$	574,978,798	\$ 574,978,798	\$ 865,899,746	\$ 857,262,878	\$ 282,284,080
State General Fund by:								
Total Interagency Transfers		1,460,072		17,330,013	17,330,013	16,794,719	16,794,719	(535,294)
Fees and Self-generated Revenues		23,433,184		0	0	0	0	C
Statutory Dedications		10,383,844		5,399,333	5,399,333	23,399,333	23,399,333	18,000,000
Interim Emergency Board		0		0	0	0	0	C
Federal Funds		469,374,364		1,399,918,050	1,399,918,050	1,510,581,588	1,495,671,876	95,753,826
Total Means of Financing	\$	757,510,816	\$	1,997,626,194	\$ 1,997,626,194	\$ 2,416,675,386	\$ 2,393,128,806	\$ 395,502,612
Expenditures & Request:								
Personal Services	\$	0	\$	0	\$ 0	\$ 0	\$ 0	\$ 0
Total Operating Expenses		0		0	0	0	0	C
Total Professional Services		0		0	0	0	0	C
Total Other Charges		757,510,816		1,997,626,194	1,997,626,194	2,416,675,386	2,393,128,806	395,502,612
Total Acq & Major Repairs		0		0	0	0	0	0
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	757,510,816	\$	1,997,626,194	\$ 1,997,626,194	\$ 2,416,675,386	\$ 2,393,128,806	\$ 395,502,612
Authorized Full-Time Equiva	lonto							
Classified	ients	0		0	0	0	0	0
Unclassified		0		0	0	0	0	0
Total FTEs		0		0	0	0	0	0



#### **Source of Funding**

The Medicare Buy-Ins and Supplements Program is funded with State General Fund, Interagency Transfers, Statutory Dedications, and Federal Funds. The Interagency Transfers originate from the Office of Group Benefits from premium payments collected from individuals participating in LaCHIP Phase V. The Statutory Dedications represent funding received from the Louisiana Medical Assistance Trust Fund (R.S. 39:98.6) from provider fees from varying medical providers in the state based on corresponding per bed per day rates and/or prior year excess revenues and from the Community Hospital Stabilization Fund. (Per R.S. 39.36B. (8), see table below for a listing of expenditures out of each Statutory Dedicated Fund.) The Federal Funds represent federal financing participation for the Medicaid program. Federal Funds represent federal financial participation in the Medicaid program, matched at a rate of 62.96% for Title XIX and 72.74% for Title XXI for state Fiscal Year 2013-2014.

#### **Medicare Buy-Ins & Supplements Statutory Dedications**

Fund	Prior Year Actuals 7 2011-2012	F	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	ecommended Y 2013-2014	Total ecommended wer/(Under) EOB
LA Medical Assistance Trust Fund	\$ 10,383,844	\$	0	\$ 0	\$ 18,000,000	\$ 18,000,000	\$ 18,000,000
Community Hospital Stabilization Fund	0		5,399,333	5,399,333	5,399,333	5,399,333	0

# Major Changes from Existing Operating Budget

General Fund Total Amount		Table of Organization	Description		
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	574,978,798	\$ 1,99	7,626,194	0	Existing Oper Budget as of 12/01/12
_					
					Statewide Major Financial Changes:
					Non-Statewide Major Financial Changes:
	148,158,531		0	0	Means of financing substitution replacing federal funds with State General Fund (Direct) due to a FMAP rate change in the Private Providers, Public Providers, and Medicare Buy-Ins and Supplements Programs. State General Fund (Direct) is being replaced with federal funds in the Uncompensated Care Costs Program due to the FMAP rate change. The FY13 Title XIX blended rate was 66.58% federal and the FY14 blended rate is 62.96% federal. For UCC, the FY13 FMAP rate is 61.24% federal and the FY14 rate is 60.98% federal.
	33,214,422	3.	3,214,422	0	Clawback due to the FMAP rate change.
	0	10	0,412,500	0	Increase for the Electronic Health Records (EHR) Incentive Payment Program due to the projected increase in participation by the Eligible Professional (EP) and Eligible Hospital (EH) groups resulting from outreach activities performed in SFY 2013 targeting approximately 700 provider specialists.
	0	:	2,620,132	0	Medicare Part B QI increase. This adjustment provides funding for federally mandated rate changes to Medicare premiums and for anticipated increase in the number of "dual eligibles" (low-income seniors and disabled individuals who qualify for both Medicare and Medicaid) who enroll in the Medicare Savings Program and the Low-Income Subsidy (LIS) program.



# Major Changes from Existing Operating Budget (Continued)

G	eneral Fund	1	fotal Amount	Table of Organization	Description
	(4,506,574)		(12,166,777)	0	Reduction in Enhanced Primary Care Case Management (ePCCM) payments to Bayou
	(1,367,031)		(6,648,586)	0	Reduction of LaCHIP Affordable Plan enrollee costs from Medicare Buy-Ins & Supplements. Effective 1/1/2013, LaCHIP Affordable Plan (LAP) enrollees will move out of the Office of Group Benefits' (OGB) PPO Plan and into the BAYOU HEALTH group plan.
	80,966,605		296,562,209	0	Increase in Buy Ins and Supplements due to the inclusion of pharmacy in the set of covered services provided by Bayou Health Prepaid Plans effective November 1, 2012. The remaining Private Providers program pharmacy budget will provide for pharmacy services to Bayou Health Shared Savings Plan enrollees and Bayou Health excluded (Fee For Service) populations.
	729,757		3,775,531	0	Increase in Buy Ins and Supplements program due to LaCHIP Affordable Plan (LAP) enrollees moving out of the Office of Group Benefits' (OGB) PPO Plan and into the BAYOU HEALTH group plan.
	22,713,051		61,320,332	0	Pharmacy Utilization
	2,375,319		6,412,849	0	The Medicare Part A and Part B adjustment provides funding for federally mandated rate changes to Medicare premiums and for anticipated increase in the number of "dual eligibles" (low-income seniors and disabled individuals who qualify for both Medicare and Medicaid) who enroll in the Medicare Savings Program and the Low-Income Subsidy (LIS) program.
\$	857,262,878	\$	2,393,128,806	0	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
\$	857,262,878	\$	2,393,128,806	0	Base Executive Budget FY 2013-2014
\$	857,262,878	\$	2,393,128,806	0	Grand Total Recommended
Ŷ	0	\$	0	0	Less Supplementary Recommendation

#### **Professional Services**

Amount	Description
	This program does not have funding for Professional Services for Fiscal Year 2013-2014.

#### **Other Charges**

Amount	Description
	Other Charges:
\$288,877,314	Medicare Savings Plans
\$138,172,357	Clawback Payments
	BAYOU HEALTH payments
\$382,930,691	Louisiana Behavioral Health Partnership (LaBHP) for behavioral health services
\$113,358,857	Electronic Health Record Technology



# **Other Charges (Continued)**

Amount	Description
\$6,543,714	LaHIPP
\$929,882,933	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$1,914,596	Medical Vendor Administration from Department of Education CPE's to use as (LaBHP) match
\$1,914,596	SUB-TOTAL INTERAGENCY TRANSFERS
\$931,797,529	TOTAL OTHER CHARGES

#### **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.

#### **Performance Information**

1. (KEY) Through the Clawback activity, to help finance the Medicare Part D benefit for dual eligibles (individuals insured by both Medicare and Medicaid), as required by the Medicare Prescription Drug Improvement Modernization Act of 2003.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

#### **Performance Indicator Values** L Performance Standard as Existing **Performance** At Yearend Performance Performance **Actual Yearend** Initially Performance Continuation At Executive **Performance Indicator** Standard Performance Appropriated Standard **Budget Level Budget Level** Name FY 2011-2012 FY 2011-2012 FY 2012-2013 FY 2012-2013 FY 2013-2014 FY 2013-2014 K Number of dual eligibles (LAPAS CODE - 24093) 101,202 102,026 108,778 108,778 108,778 108,778

#### Performance Indicators

2. (KEY) Through the Medicare Savings Programs activity, to avoid more expensive costs that would otherwise be funded by Medicaid by ensuring that eligible low-income senior citizens do not forego health coverage due to increasing Medicare premiums that make maintaining coverage increasingly difficult.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.

Other Link(s) (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable



Explanatory Note: Medicare is a health insurance program for people 65 years of age and older, certain younger people with disabilities, and people with End-Stage Renal Disease (people with permanent kidney failure who need dialysis or transplant). Medicare has two parts: Part A (hospital insurance), Part B (medical insurance). Part B helps pay for doctors, outpatient hospital care and some other medical services that part A does not cover, such as the services of physical and occupational therapists.

#### Performance Indicators

L							Performance In Performance	dica	tor Values				
L e v e l	Performance Indicator Name		Yearend Performance Standard TY 2011-2012	1	ctual Yearend Performance FY 2011-2012		Standard as Initially Appropriated FY 2012-2013		Existing Performance Standard FY 2012-2013	( ]	erformance At Continuation Budget Level FY 2013-2014	A B	erformance .t Executive udget Level Y 2013-2014
	Total number of recipients (Part A) (LAPAS CODE - 2261)		6,423		7,804		8,551		8,551		8,360		8,360
	Total number of recipients en	rolle	ed in a Medicare	Bu	y-In program the	at L	ouisiana is payin	g Pa	art A premium.				
	Total number of recipients (Part B) (LAPAS CODE - 2262)		176,701		173,681		180,991		180,991		184,389		184,389
	Total number of recipients en	rolle	ed in a Medicare	e Bu	y-In program the	at L	ouisiana is payin	g Pa	art B premium.				
	Total number of Buy-In eligibles (Part A & B) (LAPAS CODE - 2263)		183,124		181,485		189,542		189,542		192,749		192,749
	Sum Total of Part A and Part	Bre	ecipients (PI Co	de 2	261 + PI Code 2	262	2).						
	Buy-In Expenditures (Part A) (LAPAS CODE - 2264)	\$	35,162,352	\$	38,675,959	\$	45,981,978	\$	45,981,978	\$	44,730,547	\$	44,730,547
	Figures were reduced because	e the	e actual 2012 pro	emiu	ums were less the	an tl	he estimated prei	niu	ms used at the tir	ne t	he budget reques	t w	as submitted.
	Buy-In Expenditures (Part B) (LAPAS CODE - 2265)	\$	245,544,637	\$	224,949,346	\$	231,255,188	\$	231,255,188	\$	241,529,070	\$	241,529,070
	Total savings (cost of care less premium costs for Medicare benefits) (LAPAS CODE - 2266)	\$	1,090,000,000	\$	1,213,762,865	\$	1,090,000,000	\$	1,090,000,000	\$	1,253,500,000	\$ 1	,253,500,000

# 3. (KEY) Through the LaCHIP Affordable Plan activity, to maximize enrollment of children (birth through 18 years of age) who are potentially eligible for services under Title XXI of the Social Security Act, improve their health outcomes, and ensure they receive quality health care.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.



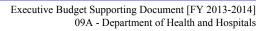
#### **Performance Indicators**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
S Total number of children enrolled as LaCHIP Affordable Plan (LAP) eligibles (between 201-250 %FPL) (LAPAS CODE - 24094)	4,389	3,196	3,920	3,920	3,406	3,406
K Total number of LAP eligibles who have annual dental exams (HEDIS measure) (LAPAS CODE - 24095)	2,411	422	2,337	2,337	Not Applicable	Not Applicable
Effective 1/1/2013, LAP enrol indicator will no longer be needed.		1	nto the mandatory BA	AYOU HEALTH gr	oup; therefore, this p	orogram-specific
K Percentage of LAP eligibles who lost coverage due to failure to pay premium (LAPAS CODE - 24096)	4.8%	4.3%	4.0%	4.0%	4.0%	4.0%
K Percentage of enrollees reporting satisfaction with LAP and access to services (OGB CAHPS Survey) (LAPAS CODE - 24097)	80.6%	84.9%	80.6%	80.6%	Not Applicable	Not Applicable
Effective 1/1/2013, LAP enrol indicator will no longer be needed.			nto the mandatory BA	AYOU HEALTH gr	oup; therefore, this p	program-specific
K Number of well-care visits, including immunizations, for adolescents (HEDIS measure) (LAPAS CODE - 24098)	2,065	1,474	1,790	1,790	Not Applicable	Not Applicable
Effective 1/1/2013, LAP enrol	lees will move out o	of OGB's PPO plan ii	· · · ·	· · · ·	11	11

indicator will no longer be necessary beginning in SFY14.

4. (KEY) Through the Louisiana Health Insurance Premium Payment (LaHIPP) Program activity, to assist eligible individuals and families in purchasing private health insurance through an employer while maintaining Medicaid/LaCHIP coverage as a secondary payor of medical expenses, resulting in reduced cost exposure to the state.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.





L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance In Performance Standard as Initially Appropriated FY 2012-2013	dicator Values Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of cases added in LaHIPP (LAPAS CODE - 22327)	1,525	1,210	1,250	1,250	1,200	1,200
K LaHIPP Total Savings (Cost of Care less LaHIPP Premium Costs) in Millions (LAPAS CODE - 24099)	\$ 6	\$ 4	\$ 6	\$ 4	\$ 5	\$ 5

#### **Performance Indicators**

The Louisiana Health Insurance Premium Payment program is part of Louisiana Medicaid. When it is determined to be cost-effective to pay the insurance premium for an employed Medicaid recipient or employed family member of a Medicaid recipient where employer-sponsored health insurance coverage is available to cover the Medicaid recipient rather than pay the medical expenses associated with that Medicaid recipient, Louisiana Medicaid may pay some or all of the health insurance premiums for an employee and his/her family. The goal of the program is to reduce the number of the uninsured and lower Medicaid spending by establishing a third party resource as the primary payer of the medical expenses. Medicaid pays only after a third party resource has met the legal obligation to pay. Medicaid is always the payer of last resort. Therefore the more cases that are enrolled in the LaHIPP program the greater the savings Louisiana Medicaid should realize.



# **306\_4000 — Uncompensated Care Costs**

Program Authorization: The Constitution of Louisiana (1974) Article 12, Section 8, Public Law 89-97 and the Balanced Budget Act of 1997 (BBA) (Public Law 105-33), as amended by technical amendments (Public Law 105-100, signed into law on November 19, 1997).

# **Program Description**

The mission of the Uncompensated Care Costs Program is to encourage hospitals and providers to serve uninsured and indigent clients. As a result, the client's quality of and access to medical care is improved. Louisiana's disproportionate share hospital (DSH) cap allotment provides federal funding to cover a portion of qualifying hospitals' costs of treating the uninsured and Medicaid patients. If this funding was not available, hospitals' costs of treating the uninsured would have to be financed by State General Fund.

The goal of the Uncompensated Care Costs Program is to encourage hospitals and other providers to provide access to medical care for the uninsured and to reduce reliance on the State General Fund to cover these costs.

Uncompensated Care Costs provides compensation for the care given in hospitals to individuals who are uninsured and those who are eligible for Medicaid but not all Medicaid costs were reimbursed through the Medicaid rates. Hospitals must qualify to receive such payments. The following hospitals currently receive these payments:

- LSUHSC Health Care Services Division
- LSUHSC Shreveport
- LSUHSC E. A. Conway
- LSUHSC H. P. Long
- DHH Public Psychiatric Free Standing Units
- Some Private Hospitals
- •

Additionally, the Greater New Orleans Community Health Connection (GNOCHC) Program is funded through Uncompensated Care Costs. GNOCHC allows continued funding for clinics initially funded by the Primary Care Access Stabilization Grant (PCASG).

For additional information, see:

Medical Vendor Payments



# **Uncompensated Care Costs Budget Summary**

	Prior Year Actuals FY 2011-2012		F	Enacted FY 2012-2013		Existing Oper Budget as of 12/01/12		Continuation FY 2013-2014		ecommended FY 2013-2014	Total Recommended Over/(Under) EOB
Means of Financing:											
State General Fund (Direct)	\$	221,515,165	\$	263,341,144	\$	263,341,144	\$	145,441,780	\$	218,248,704	\$ (45,092,440
State General Fund by:											
Total Interagency Transfers		2,606,075		25,480,553		25,480,553		22,904,278		22,904,278	(2,576,275
Fees and Self-generated Revenues		0		21,302,556		21,302,556		21,445,452		21,445,452	142,890
Statutory Dedications		0		0		0		0		0	(
Interim Emergency Board		0		0		0		0		0	(
Federal Funds		440,440,316		518,656,560		518,656,560		319,004,935		428,882,192	(89,774,368
Total Means of Financing	\$	664,561,556	\$	828,780,813	\$	828,780,813	\$	508,796,445	\$	691,480,626	\$ (137,300,187
Expenditures & Request:											
Personal Services	\$	0	\$	0	\$	0	\$	0	\$	0	\$ (
Total Operating Expenses		0		0		0		0		0	(
Total Professional Services		0		0		0		0		0	(
Total Other Charges		664,561,556		828,780,813		828,780,813		508,796,445		691,480,626	(137,300,187
Total Acq & Major Repairs		0		0		0		0		0	(
Total Unallotted		0		0		0		0		0	(
Total Expenditures & Request	\$	664,561,556	\$	828,780,813	\$	828,780,813	\$	508,796,445	\$	691,480,626	\$ (137,300,187
Authorized Full-Time Equiva	lents	:									
Classified		. 0		0		0		0		0	(
Unclassified		0		0		0		0		0	(
Total FTEs		0		0		0		0		0	(

# Source of Funding

The Uncompensated Care Cost Program is funded with State General Fund and Federal Funds. The Federal Funds represent federal financing participation on Uncompensated Care Costs, matched at a rate of 60.98% for Fiscal Year 2013-2014.



### Major Changes from Existing Operating Budget

G	eneral Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	263,341,144	\$	828,780,813	0	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
-					Non-Statewide Major Financial Changes:
	(124,613,896)		0	0	Means of financing substitution replacing federal funds with State General Fund (Direct) due to a FMAP rate change in the Private Providers, Public Providers, and Medicare Buy-Ins and Supplements Programs. State General Fund (Direct) is being replaced with federal funds in the Uncompensated Care Costs Program due to the FMAP rate change. The FY13 Title XIX blended rate was 66.58% federal and the FY14 blended rate is 62.96% federal. For UCC, the FY13 FMAP rate is 61.24% federal and the FY14 rate is 60.98% federal.
	(1,951,000)		(5,000,000)	0	Annualize mid-year reduction to the High Medicaid Disproportionate Share Pool.
	0		(13,306,148)	0	A portion of the Greater New Orleans Community Health demonstration waiver is being non recurred due to federal grant expenditure limits.
	0		(323,886,144)	0	Reduction of the UCC payment schedule because of a change in the FMAP rates. LSUHSC-HCSD \$213,365,665, LSUHSC-Shreveport \$85,684,679, LSUHSC-Huey P Long \$15,689,320, LSUHSC-EA Conway \$1,615,160, Rural Hospitals and Health Clinics \$7,531,320.
	(400,345)		(1,026,000)	0	Disproportionate Share payments to the Villa Feliciana Medical Complex are being eliminated.
	(780,400)		(2,000,000)	0	The Public Hospitals Uncompensated Care Costs/Disproportionate Share Psych Pool is being eliminated.
	82,653,201		211,822,657	0	Adjusts funding in the Public Providers and Uncompensated Care Cost (UCC) programs due to the increased or decreased need for Title XIX and UCC in the various agencies' recommended budgets.
	0		(3,904,552)	0	Net Decrease in Certified Public Expenditures for LSU Hospitals.
\$	218,248,704	\$	691,480,626	0	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
		*			
\$	218,248,704	\$	691,480,626	0	Base Executive Budget FY 2013-2014
¢	218,248,704	¢	691,480,626	0	Grand Total Recommended
¢	210,240,704	Φ	091,400,020	0	Granu rotal Accommenteu

### **Professional Services**

Amount	Description
	This program does not have funding for Professional Services for Fiscal Year 2013-2014.



#### **Other Charges**

Amount	Description							
	Other Charges:							
\$354,787,796	LSU Privatization Partners							
\$100,000,000	Low Income & Needy Care Collaboration							
\$14,727,078	GNOCHC 1115 Waiver							
\$14,690,831	OBH Public/Private CEA Agreements							
\$6,312,998	Other Hospitals							
\$2,000,000	Nonrual Hospitals - High Medicaid DSH Pool							
\$492,518,703	SUB-TOTAL OTHER CHARGES							
	Interagency Transfers:							
\$21,478,319	Louisiana State University Health Care Services Division							
\$115,499,832	Louisiana State University Health Sciences Center at Shreveport							
\$9,332,139	Louisiana State University Health Sciences Center E. A. Conway Hospital							
\$52,651,633	Office of Mental Health Psyc Free Standing Units							
\$198,961,923	SUB-TOTAL INTERAGENCY TRANSFERS							
\$691,480,626	TOTAL OTHER CHARGES							

#### **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.

#### **Performance Information**

# 1. (KEY) Through the Uncompensated Care Costs activity, to encourage hospitals and other providers to provide access to medical care for the uninsured and reduce reliance on State General Fund by collecting disproportionate share (DSH) payments from UCC.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.

Other Link(s) (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

Explanatory Note: Disproportionate Share Hospitals (DSH) are federally mandatory hospitals serving a larger percentage of Medicaid and/or uninsured patients.



#### **Performance Indicators**

		Performance Indicator Values										
L e v e Performance Indi I Name	Perfo cator Sta	Yearend Performance Standard FY 2011-2012		Actual Yearend Performance FY 2011-2012		Performance Standard as Initially Appropriated FY 2012-2013		Existing erformance Standard Y 2012-2013	Performance At Continuation Budget Level FY 2013-2014		A Bu	erformance t Executive idget Level 7 2013-2014
S Total DSH funds col in millions (LAPAS - 17040)		730.9	\$	638.9	\$	776.2	\$	776.2	\$	512.9	\$	691.5
K Total federal funds collected in millions (LAPAS CODE - 17		451.6	\$	392.8	\$	526.3	\$	486.2	\$	327.6	\$	428.9
S Total State Match in millions (LAPAS C 17042)		232.7	\$	246.1	\$	290.0	\$	290.0	\$	185.3	\$	262.6
S Public Disproportion Share (DSH) in mill (LAPAS CODE - 22	ions	536.3	\$	588.7	\$	565.2	\$	565.2	\$	338.3	\$	199.0
Hospitals included in and health clinics ar										tals. Private and	l Ru	ral hospitals
S State Match in millio (public only) (LAP/ CODE - 2270)		207.2	\$	226.5	\$	219.1	\$	219.1	\$	132.0	\$	77.6
Hospitals included in and health clinics ar										tals. Private and	l Ru	ral hospitals
K Amount of federal fi collected in millions (public only) (LAP/ CODE - 2271)		329.1	\$	362.2	\$	394.2	\$	346.1	\$	206.3	\$	121.3
Hospitals included in and health clinics ar										tals. Private and	l Ru	ral hospitals
K Number of patients by GNOCHC provid (LAPAS CODE - 24	lers	50,000		58,034		64,000		64,000		75,000		75,000



# 306\_5000 — Recovery Funds

#### **Program Description**

The purpose of the Primary Care Access Stabilization Grant is to help stabilize and expand primary care Services to Region 1 to all, regardless of a patient's ability to pay.

The Primary Care Access and Stabilization Grant (PCASG) is a three-year, \$100 million grant for eligible outpatient clinics in DHH Region 1 (New Orleans metro area) to be used for payments to eligible primary care clinics, including primary mental health care, to help stabilize and expand primary healthcare access in the Greater New Orleans neighborhoods that were not adequately served as a result of Hurricane Katrina.

For additional information, see:

#### Medical Vendor Payments

#### **Recovery Funds Budget Summary**

	Prior Year Actuals FY 2011-2012		Enacted FY 2012-2013		Existing Oper Budget as of 12/01/12		Continuation FY 2013-2014		Recommended FY 2013-2014		Total Recommended Over/(Under) EOB	
Means of Financing:												
State General Fund (Direct)	\$	0	\$	0	\$	0	\$	0	\$	0	\$ (	0
State General Fund by:												
Total Interagency Transfers		0		0		0		0	(	0	(	0
Fees and Self-generated Revenues		0		0		0		0		0	(	0
Statutory Dedications		0		0		0		0	(	0	(	0
Interim Emergency Board		0		0		0		0	(	0	(	0
Federal Funds	2,26	6,824		0		0		0	(	0	(	0
Total Means of Financing	\$ 2,26	6,824	\$	0	\$	0	\$	0	\$	0	\$ (	0
Expenditures & Request:												
Personal Services	\$	0	\$	0	\$	0	\$	0	\$	0	\$ (	0
Total Operating Expenses		0		0		0		0	(	0	(	0
Total Professional Services		0		0		0		0	(	0	(	0
Total Other Charges	2,26	6,824		0		0		0	(	0	(	0
Total Acq&MajorRepairs		0		0		0		0		0	(	0
Total Unallotted		0		0		0		0	(	0	(	0
Total Expenditures & Request	\$ 2,26	6,824	\$	0	\$	0	\$	0	\$	0	\$ (	0

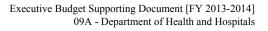


# **Recovery Funds Budget Summary**

	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB
Authorized Full-Time Equiva	lents:					
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
Total FTEs	0	0	0	0	0	0

# Major Changes from Existing Operating Budget

Gener	al Fund	1	<b>Fotal Amount</b>	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	0	\$	0	0	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
					Non-Statewide Major Financial Changes:
\$	0	\$	0	0	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
\$	0	\$	0	0	Base Executive Budget FY 2013-2014
\$	0	\$	0	0	Grand Total Recommended





# 09-307 — Office of the Secretary



#### **Agency Description**

The mission of the Office of the Secretary is to provide both quality leadership and support to the various offices and programs in the Department of Health and Hospitals so their functions and mandates can be carried out in an efficient and effective manner.

The goal of the Office of the Secretary is to provide overall direction and administrative support to the Department.

The Office of the Secretary includes the following human resources policies that are helpful and beneficial to women and children: the Family Medical Leave Policy (8108-93), the Sexual Harassment Policy (8143-02), and the Equal Employment Opportunity Policy (8116-77).

The Office of the Secretary has two programs: Management and Finance and the Health Education Authority of Louisiana Auxiliary Account.

For additional information, see:

#### Office of the Secretary

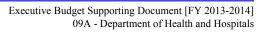
#### Office of the Secretary Budget Summary

	rior Year Actuals 2011-2012	F	Enacted FY 2012-2013	Existing Oper Budget Is of 12/01/12	Continuation FY 2013-2014	ecommended Y 2013-2014	Total commended ver/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 47,697,801	\$	52,606,540	\$ 52,606,540	\$ 53,786,828	\$ 51,078,434	\$ (1,528,106)
State General Fund by:							
Total Interagency Transfers	17,996,830		28,955,834	28,955,834	29,020,611	28,712,067	(243,767)
Fees and Self-generated Revenues	203,381		3,226,820	3,226,820	2,231,900	2,238,550	(988,270)
Statutory Dedications	3,699,113		7,548,994	7,548,994	6,238,475	6,238,475	(1,310,519)
Interim Emergency Board	0		0	0	0	0	0
Federal Funds	5,053,264		13,644,579	13,644,579	13,644,579	13,644,579	0
Total Means of Financing	\$ 74,650,389	\$	105,982,767	\$ 105,982,767	\$ 104,922,393	\$ 101,912,105	\$ (4,070,662)
Expenditures & Request:							
Management and Finance	\$ 74,493,091	\$	105,705,947	\$ 105,705,947	\$ 104,640,493	\$ 101,623,555	\$ (4,082,392)



# Office of the Secretary Budget Summary

		Prior Year Actuals 7 2011-2012	F	Enacted 'Y 2012-2013	Existing Oper Budget is of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total commended ver/(Under) EOB
Auxiliary Account		157,298		276,820	276,820	281,900	288,550	11,730
Total Expenditures & Request	\$	74,650,389	\$	105,982,767	\$ 105,982,767	\$ 104,922,393	\$ 101,912,105	\$ (4,070,662)
Authorized Full-Time Equival	lents:							
Classified		290		466	467	480	480	13
Unclassified		11		11	10	10	10	0
Total FTEs		301		477	477	490	490	13





# **307\_1000 — Management and Finance**

Program Authorization: R.S. 36:251-259

#### **Program Description**

The mission of the Management and Finance Program is to provide both quality and timely leadership and support to the various office and programs within the Department of Health and Hospitals so that their functions and mandates can be carried out in an efficient and effective manner.

The goal of the Office of Management and Finance is to provide overall direction and administrative support to the agencies and activities within the Department.

The Management and Finance Program includes the following activities:

Executive Administration and Program Support - Executive Management provides leadership, technical support, strategic and policy direction to various functions throughout the department and ensures that policies and procedures put in place are relevant to the structure of agency operations and adhere to strictest government performance and accountability standards. The Bureau of Media and Communications is responsible for preparing and distributing information relevant to all operations of the department. The bureau's main functions involve public information, internal communications and computer graphics. The intergovernmental relations section coordinates legislative activities and communication between legislators and members of congress; reviews/tracks legislation and maintains a continuous stream of information for the citizens of Louisiana, executive staff of the department, the Legislature, Office of the Governor, and various news media. Human Resources, Training & Staff Development provides services to applicants, employees, and managers in the areas of Time & Attendance, Employee Relations, Labor Law Compliance, Classification, Pay Administration, Performance Planning & Review, Drug Testing, Employee Administration, and Staff Development. The Governor's Council on Physical Fitness and Sports (Governor's Games) promotes physical fitness and health through participating in competitive sports, workshops and conferences. Its main purpose is to motivate all Louisianans to become and stay physically active by promoting the benefits of physical activity through sports and fitness programs. The Governor's Games offers 53 Olympic style sporting events across the state that provides an opportunity for competition, physical activities for all ages, skill level, and economic demographics. Some of the sporting events include: basketball, baseball, boxing, golf, karate, gymnastics, swimming, volleyball, weightlifting and track & field. The governor's council on Physical Fitness and Sports also hosts "Living Well in Louisiana," a program that allows Louisianans to track their fitness and nutrition levels online by forming teams of 2-10 people for adults and 10-30 for youth. These programs foster and encourage ways for Louisiana residents to become physically fit by getting them involved in competitive activities that require physical fitness. Health Standards enforces state licensing standards and federal certification regulations through licensing and certification surveys of health care providers. It reviews and investigates complaints made in connection with health care facilities and imposes civil monetary penalties on non-compliant health care providers. In addition, this activity coordinates the Minimum Data Set (MDS) and Outcome and Assessment Information Set (OASIS) data sets submitted by nursing homes and home health agencies and administers the certified nurse aide and direct service worker registries. Program Integrity performs Surveillance and Utilization Review (SURS), Provider Enrollment and Payment Error Rate Measurement (PERM).



- Financial and Procurement Services Contracts and Procurement Support performs administrative service activities for the department in accordance with the policies issued by the Division of Administration, Governor's Executive Orders, and internal departmental policies and procedures. Activities of Contracts and Procurement Support include the responsibility for the administration, management and provision of technical assistance in processing of personal, professional, consulting and social service contracts; procurement documents; building leases; property and fleet management functions; maintenance of moveable property inventory; telecommunications functions; and processes all ingoing and outgoing mail for DHH administration building. Fiscal Management performs accounting functions which includes depositing revenue into the State's Treasury, processing expenditures, preparing and issuing financial reports and maintenance of DHH's general ledger on the State's financial system. Health Economics prepares the Medicaid Monthly Financial Report, the Medicaid Annual Report, maintains a Medicaid expenditure forecasting model and databases with historical and current expenditures and health services utilization information. Planning & Budget administers and facilitates the operation of the budget process and performance accountability activities; provides technical assistance, analyzes budget requests, monitors the legislative process, conducts expenditure analysis; manages and monitors the department's performance accountability and strategic planning information by assisting agencies in integrating agency plans with budget requests, developing goals, objectives, performance measures, and reviewing quarterly performance progress reports.
- Legal Services The Bureau of Legal Services provides legal services, such as advice and counsel, litigation, administrative hearings, policy and contract review, recoupment of monies owed DHH, legislation, personnel and Civil Service, and special projects. Legal Services also assists the agency in statewide departmental operations by observing and participating in management discussions, day-to-day operations, conducting legal risk analysis, and providing representation to the various offices of the department.
- Information Technology DHH Information Technology (IT) develops, implements, and maintains the department's technology infrastructure. The IT activity also provides innovative and computer technologies the department employees and its customers need to support of the department's overall mission: to protect and promote health and to ensure access to medical, preventive, and rehabilitative services for all citizens of the State of Louisiana. By partnering with the offices of DHH and the citizens they support, IT provides and facilitates quality information technology solutions, support, information, guidance, and standards in order for DHH to accomplish its mission and goals. The IT staff fulfills these responsibilities through consistent staff training and development, and by exemplifying Ownership, Thoroughness, Communication and Closure (OTCC) in all aspects of their work.

	Prior Year Actuals ( 2011-2012	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation Y 2013-2014	ecommended Y 2013-2014	Total ecommended ver/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 47,697,801	\$	52,606,540	\$ 52,606,540	\$ 53,786,828	\$ 51,078,434	\$ (1,528,106)
State General Fund by:							
Total Interagency Transfers	17,996,830		28,955,834	28,955,834	29,020,611	28,712,067	(243,767)
Fees and Self-generated Revenues	46,084		2,950,000	2,950,000	1,950,000	1,950,000	(1,000,000)
Statutory Dedications	3,699,113		7,548,994	7,548,994	6,238,475	6,238,475	(1,310,519)

#### **Management and Finance Budget Summary**

# Management and Finance Budget Summary

		Prior Year Actuals 2011-2012	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation Y 2013-2014	ecommended Y 2013-2014	Total ecommended ver/(Under) EOB
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		5,053,263		13,644,579	13,644,579	13,644,579	13,644,579	0
<b>Total Means of Financing</b>	\$	74,493,091	\$	105,705,947	\$ 105,705,947	\$ 104,640,493	\$ 101,623,555	\$ (4,082,392)
Expenditures & Request:								
Personal Services	\$	29,189,663	\$	51,023,741	\$ 49,370,292	\$ 50,056,588	\$ 47,198,216	\$ (2,172,076)
Total Operating Expenses		3,746,293		6,153,026	6,153,027	6,268,704	6,135,527	(17,500)
Total Professional Services		2,540,012		7,640,126	7,640,126	7,740,500	7,208,364	(431,762)
Total Other Charges		39,000,838		40,708,054	42,361,502	40,424,701	41,081,448	(1,280,054)
Total Acq & Major Repairs		16,285		181,000	181,000	150,000	0	(181,000)
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	74,493,091	\$	105,705,947	\$ 105,705,947	\$ 104,640,493	\$ 101,623,555	\$ (4,082,392)
Authorized Full-Time Equiva	lents							
Classified		288		464	465	478	478	13
Unclassified		11		11	10	10	10	0
<b>Total FTEs</b>		299		475	475	488	488	13

# **Source of Funding**

The Management and Finance Program is funded from State General Fund, Interagency Transfers, Fees and Self-generated Revenues, Statutory Dedications, and Federal Funds. Interagency Transfer means of financing represents funds received from the Governors Office of Homeland Security for Emergency Preparedness for generators and hurricane and disaster preparedness and Medical Vendor Administration for the Council on Physical Fitness and program integrity, health standards, and survey and certification. Fees and Self-generated Revenues include Health Standards Licensing and miscellaneous receipts for Health Standards. The Statutory Dedications represent funding received from the Medical Assistance Program Fraud Detection Fund, the Nursing Home Residents' Trust Fund, and the Telecommunications for the Deaf Fund. (Per R.S. 39:36B. (8), see table below for a listing of expenditures out of each Statutory Dedication Fund.) The Federal Funds are derived from the Health and Human Services Hospital Preparedness Grant, Medicare Title XVIII, and the Technology Assistance Grant.



#### **Management and Finance Statutory Dedications**

Fund	rior Year Actuals 2011-2012	F	Enacted Y 2012-2013	B	ing Oper udget 12/01/12	ntinuation 2013-2014	ecommended Y 2013-2014	Total commended ver/(Under) EOB
Telecommunications for the Deaf Fund	\$ 2,167,714	\$	2,743,819	\$	2,743,819	\$ 1,938,475	\$ 1,938,475	\$ (805,344)
Nursing Home Residents' Trust Fund	0		253,381		253,381	300,000	300,000	46,619
Medical Assistance Program Fraud Detection	0		4,000,000		4,000,000	4,000,000	4,000,000	0
Louisiana Health Care Redesign Fund	819,959		551,794		551,794	0	0	(551,794)
Overcollections Fund	711,440		0		0	0	0	0

# Major Changes from Existing Operating Budget

G	eneral Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	52,606,540	\$	105,705,947	475	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
	(40,283)		(45,776)	0	Group Insurance Rate Adjustment for Active Employees
	(32,989)		(37,487)	0	Group Insurance Rate Adjustment for Retirees
	(23,677)		(26,906)	0	Group Insurance Base Adjustment
	(682,971)		(776,103)	0	Salary Base Adjustment
	(1,131,508)		(1,285,804)	0	Attrition Adjustment
	(60,333)		(181,000)	0	Non-Recurring Acquisitions & Major Repairs
	34,907		40,247	0	Risk Management
	(9,657)		(9,657)	0	Legislative Auditor Fees
	(158,342)		(179,936)	0	Rent in State-Owned Buildings
	2,530		2,875	0	Capitol Park Security
	3,726		4,234	0	Capitol Police
	(444)		(505)	0	UPS Fees
	64,482		73,275	0	Civil Service Fees
	(22,496)		(25,564)	0	Office of Computing Services Fees
	738,215		838,881	0	Administrative Law Judges
					Non-Statewide Major Financial Changes:
	551,794		0	0	Means of financing substitution replacing Louisiana Healthcare Redesign Fund with State General Fund (Direct) for Health Information Technology activities.
	805,344		0	0	Means of financing substitution replacing Telecommunications for the Deaf Fund with State General Fund (Direct) due to revenue collected by the fund declining over the last four years.
	0		(1,000,000)	0	Non Recurs funding for the Louisiana Rural Health Information Exchange (LaRHIX).



### Major Changes from Existing Operating Budget (Continued)

Ge	eneral Fund	Т	otal Amount	Table of Organization	Description
	297,000		297,000	0	Annualization of funding for Region 7 ñ (Shreveport) and Region 8 (Monroe) Local Governing Entities (LGEs). There is currently 6 months of funding in the budget.
					Funding for quality improvement initiatives in Louisiana's nursing homes to improve the quality of care and life of nursing home residents.
	0		93,238	0	
	(525,000)		(525,000)	0	Reduction to contracts and contractual services for the Birth Outcomes Initiative.
	(17,500)		(17,500)	0	Annualize mid-year reduction to Travel expenditures.
	(226,468)		(226,468)	0	Contract consolidations and reductions.
	0		0	13	13 T.O. positions are being transferred from the Office for Citizens with Developmental Disabilities to the Office of the Secretary. The positions are responsible for providing technology and consultation regarding health care reform, rules, regulations, guidance, research and technology support and innovation for DHH. The positions are currently funded via interagency transfer from the Office of the Secretary, so no additional funds will be required.
	(297,000)		(297,000)	0	Transfer of funding from the Office of the Secretary to the Acadiana Area Human Services District. SFY13 was the shadow year for the AAHSD. In SFY14, Acadiana will operate as a separate budget unit.
	(797,436)		(797,436)	0	Non-recur one-time funding for Special Legislative Projects (SLP).
\$	51,078,434	\$	101,623,555	488	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
\$	51,078,434	\$	101,623,555	488	Base Executive Budget FY 2013-2014
\$	51,078,434	\$	101,623,555	488	Grand Total Recommended

### **Professional Services**

Amount	Description
\$573,000	Provide legal representation and consultation to DHH in complex Medicaid litigation, including but not limited to: litigation by health care providers challenging rate reductions in the Medicaid program, litigation related to application of the Americans with Disabilities Act to the Medicaid program, bankruptcy proceedings involving Medicaid agencies and disallowances proposed by the Center for Medicare and Medicaid Services (CMS). Provide legal consultation to the Medicaid program regarding intergovernmental transfers, multi-state Medicaid coalitions and Medicaid pilot initiatives and waivers. Provide polygraph examinations, when appropriate, to assist in agency investigations of allegations of staff, provider or client misconduct. This tool is especially helpful when the patient is non verbal and there are no third party witnesses.
\$379,867	Provide policy, reasearch and health systems analysis services.
\$484,838	Programmers and Data Processing Consultants, Software applications - Fiscal Management contracts for upgrading and maintaining financial management subsystems. Healthcare reform contracts and Secretary's discretary funding, Governor's Council on Physical Fitness, Cost report Audits
\$2,357,579	Deaf Commission contracts
\$701,623	Birth outcomes initiative.
\$518,000	To combat fraud and Abuse and for a database contract to provide financial information of providers



### **Professional Services (Continued)**

Amount	Description
\$1,334,059	Case Management software for pre-pay and post-pay analytics and staffing
\$819,398	Contracts associated with the monitoring, surveying and licensing health care facilities.
\$40,000	Governor's Office on Physical Fitness venues
\$7,208,364	TOTAL PROFESSIONAL SERVICES

# **Other Charges**

Amount	Description
	Other Charges:
\$10,000,000	Generator program
\$20,000	Provides for expenditures associated with travel costs for national healthcare experts
\$891,000	Administration costs for Human Service Districts prior to them becoming separate budget units
\$4,909,982	Disaster preparation from the HHS Hospital Preparedness Grant
\$4,911,514	From GOHSEP for reimbursements associated with hurricane funding from FEMA. This is pass-through payments to Hospitals and Nursing Homes for Sheltering
\$1,460,949	HIT Funding
\$739,828	LATAN
\$51,779	Birth outcomes initiative
\$8,000	Fiscal managed contracts
\$2,903,531	For fraud and Abuse initiatives in Program Integrity
\$297,000	Northwest La Human Service District and Northeast Delta Human Service Authority
\$650,503	Other Charges travel for licensing, certification and surveys of facilities
\$26,844,086	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$7,080	Department of Public Safety for Capital Police
\$18,594	Division of Administration for Uniform Payroll Services
\$344,790	Department of Public Safety for Capitol Park Security
\$10,992	Division of Administration for Comprehensive Public Employees' Training Program (CPTP)
\$81,107	Department of Civil Service Fees
\$150,000	Division of Administration for Office of Computer Services
\$96,995	Division of Administration for the allocated cost of state mail operations
\$299,978	Office of Risk Management for insurance costs
\$864,486	Legislative Auditor's Office for the performance of financial and program compliance audits
\$2,771,216	Division of Administration for rent in the Bienville Building and Galvez Parking Garage
\$302,090	Division of Administration for rent in the Brandywine Building and Galvez Bldg
\$638,668	Division of Administration for Louisiana Equipment Acquisition Fund (LEAF) Payments
\$946,268	Office of Public Health and Office of Behavorial Health for Emergency Medical Services training and education in hospitals for disaster preparation from the HHS Hospital Preparedness grant
\$25,000	Executive Office for the Children's Cabinet per Act 833 of 1997
\$106,000	Department of Labor for Unemployment Compensation
\$49,809	Department of the Treasury for central banking services
\$260,000	Governor's council on physical fitness
\$565,303	Miscellaneous



# **Other Charges (Continued)**

Amount	Description
\$2,039,017	Division of Administrative Law
\$25,000	Division of Administration for State Printing Costs
\$1,668,506	Office of Telecommunication Management for telephone/communication services
\$465,000	Dept of Public Safety and Corrections - State Fire Marshall to inspect patient occupied facilities
\$250,000	Dept of Public Safety and Corrections - review/approve plan reviews
\$1,135,038	University of La at Lafayette for implementation of Behavioral Health Screening Tools and Application Support
\$1,116,425	University of New Orleans for Project Management and DHH Service Desk
\$14,237,362	SUB-TOTAL INTERAGENCY TRANSFERS
\$41,081,448	TOTAL OTHER CHARGES

# Acquisitions and Major Repairs

Amount	Description						
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.						

# **Performance Information**

1. (KEY) Through the Executive Administration and Program Support activity, to provide leadership, strategic and policy direction while maximizing resources and maintaining the highest level of government performance and accountability standards.

Children's Cabinet Link: Not applicable

Human Resource Policies Beneficial to Women and Families Link: Not applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not applicable



#### **Performance Indicators**

			Performance Indicator Values					
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014		
K Percentage of Office of the Secretary indicators meeting or exceeding targeted standards (LAPAS CODE - 10029)	75%	80%	75%	75%	75%	75%		
S Percentage of the department's employees receiving Performance Evaluations System (PES) evaluations by the due date (LAPAS CODE - 24100)	98%	Not Applicable	98%	98%	98%	98%		
K Percentage of executed FEMA heating, ventilating, and air conditioning (HVAC) contracts with funds disbursed to the grant recipients within 14 working days following the contract execution date (LAPAS CODE - 24101)	98%	100%	98%	98%	98%	98%		

2. (SUPPORTING)Through the Governor's Council on Physical Fitness & Sports, to offer competitive sporting events, workshops and conferences that will educate elementary age school children about the importance of physical fitness and work with non-profit health oriented organizations to educate all age groups in Louisiana about the value of staying physically active.

Children's Cabinet Link: Not applicable

Human Resource Policies Beneficial to Women and Families Link: Not applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not applicable

#### **Performance Indicators**

				Performance Indicator Values						
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014			
S	Number of participants in the Governorís Games and Living Well in Louisiana events (LAPAS CODE - 24106)	87,000	273,000	210,000	210,000	250,000	250,000			



3. (KEY) Through the Financial and Procurement Services activity, to promote efficient use of agency resources and provide support to all activities within the Office of the Secretary by ensuring fiscal responsibility and accountability, excellence in customer service, and promoting innovation in the use of technology.

Children's Cabinet Link: Not applicable

Human Resource Policies Beneficial to Women and Families Link: Not applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not applicable

#### **Performance Indicators**

			Performance Inc	licator Values		
L e v e Performance Indicator I Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of invoices paid within 90 days of receipt (LAPAS CODE - 24107)	99%	100%	99%	99%	99%	99%
K Percentage of budget related documents submitted in accordance with DOA and Legislative timelines (LAPAS CODE - 24108)	99%	100%	99%	99%	99%	99%
S Percentage of contracts under \$20,000 approved within 4 weeks of receipt (LAPAS CODE - 24109)	75%	80%	75%	75%	75%	75%
S Percentage of all Medicaid financial/forecast documents and requests submitted in accordance with executive management and legislative timelines (LAPAS CODE - 24110)	99%	100%	99%	99%	99%	99%

# 4. (KEY) Through the Bureau of Legal Services, to provide legal services to the various DHH agencies and programs.

Children's Cabinet Link: Not applicable

Human Resource Policies Beneficial to Women and Families Link: Not applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not applicable



#### **Performance Indicators**

	Performance Indicator Values								
L			Performance						
e	Yearend		Standard as	Existing	Performance At	Performance			
v	Performance	Actual Yearend	Initially	Performance	Continuation	At Executive			
e Performance Indicator	Standard	Performance	Appropriated	Standard	Budget Level	Budget Level			
l Name	FY 2011-2012	FY 2011-2012	FY 2012-2013	FY 2012-2013	FY 2013-2014	FY 2013-2014			
K Percentage of cases									
litigated successfully									
(LAPAS CODE - 10033)	85%	94%	85%	85%	85%	85%			

#### Management and Finance General Performance Information

	Performance Indicator Values									
Performance Indicator Name		rior Year Actual 2007-2008	]	Prior Year Actual FY 2008-2009		Prior Year Actual Y 2009-2010		Prior Year Actual Y 2010-2011	ctual A	
Number of cases litigated (LAPAS CODE - 12050)		993		991		1,152		1,158		1,131
Amount recovered (LAPAS CODE - 12051)	\$	7,739,866	\$	20,469,241	\$	6,297,324	\$	8,262,927	\$	12,102,052

#### 5. (KEY) Through the Information Technology activity, to reduce the cost of government Information Technology (IT) operations and enhance service delivery by providing technologies and a secure computing environment in accordance with industry standards.

Children's Cabinet Link: Not applicable

Human Resource Policies Beneficial to Women and Families Link: Not applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not applicable

#### **Performance Indicators**

	Performance Indicator Values									
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014			
K	Percentage of response to requests for IT assistance in less than 24 hours (LAPAS CODE - 24111)	95%	99%	95%	95%	95%	95%			



# 6. (KEY) Through the Health Standards activity, to perform at least 90% of required state licensing and at least 95% of complaint surveys of healthcare facilities and federally mandated certification of healthcare providers participating in Medicare and/or Medicaid.

Children's Budget Link: Not Applicable

#### **Performance Indicators**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of complaint investigations conducted within 30 days after receipt by the Health Standards section of Medical Vendor Administration (LAPAS CODE - 16533)	95.0%	97.0%	95.0%	95.0%	95.0%	95.0%
K Percentage of abuse complaint investigations conducted within two days after receipt by the Health Standards section of Medical Vendor Administration (LAPAS CODE - 16534)	97.0%	97.0%	97.0%	97.0%	97.0%	97.0%
K Percentage of licensing surveys conducted (LAPAS CODE - 16535)	80.0%	79.8%	80.0%	80.0%	80.0%	80.0%

#### Management and Finance General Performance Information

	Performance Indicator Values									
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012					
Total number of facilities (unduplicated) (LAPAS CODE - 12031)	7,896	8,181	7,985	8,402	8,045					
Number of licensing surveys conducted (LAPAS CODE - 16536)	1,959	1,846	1,842	1,541	1,411					
Number of certified facilities (LAPAS CODE - 12032)	5,988	5,628	5,800	5,982	6,024					
Number of licensed facilities (LAPAS CODE - 12033)	3,772	4,023	3,818	4,143	3,729					



#### Management and Finance General Performance Information (Continued)

	Performance Indicator Values									
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012					
Number of facilities out of compliance (LAPAS CODE - 10009)	820	927	937	669	707					
Number of facilities terminated (LAPAS CODE - 10011)	36	20	42	100	135					
Percentage of facilities out of compliance (LAPAS CODE - 10012)	10.4%	11.3%	11.7%	8.0%	8.8%					
Number of facilities sanctioned (LAPAS CODE - 10010)	307	405	304	791	395					



# 307\_A000 — Auxiliary Account

Program Authorization:R.S. 36:501, 504

#### **Program Description**

The mission of the Health Education Authority of Louisiana (HEAL) Auxiliary Account is to promote the medical and/or health educational activities of public and private entities and promotes health and welfare through encouraging and assisting in the provision of medical care and prompt and efficient health and health related services at reasonable cost by public and private institutions and organization in modern, well-equipped facilities, and strives to achieve superlative standards in health care and education.

The Health Education Authority of Louisiana (HEAL) Auxiliary Account has one activity: HEAL. This activity Plans, acquires and/or constructs facilities within a ten-mile radius of the Medical Center of Louisiana -New Orleans (formerly Charity Hospital) and provides for the financing, usually through revenue bonds, of such projects. The Authority is also responsible for the operations of a parking garage in the New Orleans medical complex. Through an exchange of information and data the institutions can plan their growth and future expansion. The master plan issued by HEAL has served as a blueprint for this development. At the request of a primary or participating institution, HEAL through tax exempt revenue bonds may finance the needs of these institutions.

HEAL has encouraged and looks for activities that will result in shared facilities such as a day care center, parking, centralized chilled water, steam and electricity plants. Other areas considered include laundry facilities, centralized warehouses, a student center, cafeteria, bookstores, and office buildings. Other non-revenue producing projects considered are medical libraries, a centralized computer center, maintenance depots and elevated walkways. HEAL currently operates a parking garage at the Charity Hospital and Medical Center of Louisiana at New Orleans.

	Prior Year Actuals FY 2011-2012	2	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommen Over/(Und EOB	
Means of Financing:								
State General Fund (Direct)	\$	0	\$ 0	\$ 0	\$ 0	\$ 0	\$	0
State General Fund by:								
Total Interagency Transfers		0	0	0	0	0		0
Fees and Self-generated Revenues	157,2	97	276,820	276,820	281,900	288,550	11	,730
Statutory Dedications		0	0	0	0	0		0
Interim Emergency Board		0	0	0	0	0		0
Federal Funds		1	0	0	0	0		0
Total Means of Financing	\$ 157,2	98	\$ 276,820	\$ 276,820	\$ 281,900	\$ 288,550	\$ 11	,730

# Auxiliary Account Budget Summary



# **Auxiliary Account Budget Summary**

	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB	
Expenditures & Request:							
Personal Services	\$ 136,210	\$ 157,004	\$ 157,004	\$ 160,959	\$ 172,689	\$ 15,685	
Total Operating Expenses	14,769	57,700	57,700	58,785	57,700	0	
Total Professional Services	0	60,000	60,000	60,000	56,045	(3,955)	
Total Other Charges	969	2,116	2,116	2,156	2,116	0	
Total Acq & Major Repairs	5,350	0	0	0	0	0	
Total Unallotted	0	0	0	0	0	0	
Total Expenditures & Request	\$ 157,298	\$ 276,820	\$ 276,820	\$ 281,900	\$ 288,550	\$ 11,730	
Authorized Full-Time Equiva	lents:						
Classified	2	2	2	2	2	0	
Unclassified	0	0	0	0	0	0	
Total FTEs	2	2	2	2	2	0	

# **Source of Funding**

The Auxiliary Account is funded with Fees and Self-generated Revenues from the operation of a parking garage at the Medical Center of Louisiana at New Orleans.

# Major Changes from Existing Operating Budget

Gener	al Fund	1	fotal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	0	\$	276,820	2	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
	0		2,855	0	Louisiana State Employees' Retirement System Rate Adjustment
	0		3,955	0	Louisiana State Employees' Retirement System Base Adjustment
	0		(173)	0	Group Insurance Rate Adjustment for Active Employees
	0		9,048	0	Salary Base Adjustment
					Non-Statewide Major Financial Changes:



# Major Changes from Existing Operating Budget (Continued)

Gene	eral Fund		Total Amount	Table of Organization	Description
	0		(3,955)	0	Retirement Funding from Other Line Items
\$	0	\$	288,550	2	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
\$	0	\$	288,550	2	Base Executive Budget FY 2013-2014
¢	0	¢	200.550	2	
\$	0	\$	288,550	2	Grand Total Recommended

# **Professional Services**

Amount	Description
\$56,045	Miscellaneous contracts associated with the management of the Health Education Authority of Louisiana (HEAL)
\$56,045	TOTAL PROFESSIONAL SERVICES

# **Other Charges**

Amount	Description
	Other Charges:
\$0	
\$0	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$2,116	Office of Telecommunication Management for telephone/communication services
\$2,116	SUB-TOTAL INTERAGENCY TRANSFERS
\$2,116	TOTAL OTHER CHARGES

# **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.



# **Performance Information**

#### 1. (SUPPORTING)Through the Auxiliary Account - Health Education Authority of Louisiana (HEAL) activity, to operate a parking garage at the Medical Center of Louisiana at New Orleans and promote medical education, research and health care.

Children's Cabinet Link: Not applicable

Human Resource Policies Beneficial to Women and Families Link: Not applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not applicable

#### **Performance Indicators**

		Performance Indicator Values													
L						P	erformance								
e			Yearend			S	Standard as Existing Performance At					Performance			
v	Performance			Actu	al Yearend		Initially	P	erformance	C	Continuation				
e	Performance Indicator	Standard			rformance		opropriated		Standard		udget Level	Budget Level			
1	Name	F	2011-2012	FY	2011-2012	FY	2012-2013	F	Y 2012-2013	F	Y 2013-2014	on At Executive el Budget Leve 14 FY 2013-201			
S	Amount of fees and revenue collected (LAPAS														
	CODE - 24114)	\$	249,114	\$	157,297	\$	259,854	\$	259,854	\$	290,381	\$	290,381		



# 09-309 — South Central Louisiana Human Services Authority



# **Agency Description**

The mission of the South Central Louisiana Human Services Authority (SCLHSA) is to increase public awareness of and to provide access for individuals to integrated behavioral health and developmental disability services while promoting wellness, recovery and independence through education and the choice of a broad range of programmatic and community resources.

The goals of the South Central Louisiana Human Services Authority are:

- I. Improve service outcomes by partnering with stakeholders to expand integrated service programs in the community.
- II. Increase staff accountability and fiscal integrity of the agency.
- III. Provide the infrastructure, information, and systems to help employees successfully complete their jobs.
- IV. Maintain CARF Accreditation by committing to quality improvement, focusing on the unique needs of each person we serve, and monitoring the results of services we provide.

The Louisiana State Legislature established the South Central Louisiana Human Services Authority (SCHLSA) in 2006 to provide administration, management and operation of mental health, addictive disorders, and developmental disabilities services to the residents of Assumption, Lafourche, St. Charles, St. James, St. John the Baptist, St, Mary, and Terrebonne parishes. Direct oversight of these services was previously provided through the Department of Health and Hospitals (DHH).

Governance of SCLHSA is conducted by a nine (9) member Board of Directors. The Board includes two residents from the parishes of Lafourche and Terrebonne and one resident from the other parishes of Assumption, St. Charles, St. James, St. John the Baptists and St. Mary. Each board member is appointed by the governing authority of each parish and must possess experience in the areas of mental health, addictive disorders, or developmental disabilities and represents parents consumers, advocacy groups, or serve as a professional in one of these areas.



		Prior Year Actuals 7 2011-2012	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation Y 2013-2014	Recommended FY 2013-2014		Total Recommended Over/(Under) EOB	
Means of Financing:										
State General Fund (Direct)	\$	16,949,695	\$	15,743,962	\$ 15,774,790	\$ 16,391,461	\$ 15,444,349	\$	(330,441)	
State General Fund by:										
Total Interagency Transfers		5,238,906		6,612,403	6,924,017	5,744,022	5,163,114		(1,760,903	
Fees and Self-generated Revenues		161,994		2,050,407	2,050,407	3,230,402	3,230,402		1,179,995	
Statutory Dedications		372,681		0	0	0	0		(	
Interim Emergency Board		0		0	0	0	0			
Federal Funds		49,054		186,292	186,292	186,292	186,292		(	
Total Means of Financing	\$	22,772,330	\$	24,593,064	\$ 24,935,506	\$ 25,552,177	\$ 24,024,157	\$	(911,349	
Expenditures & Request:										
South Central Louisiana Human Services Authority	\$	22,772,330	\$	24,593,064	\$ 24,935,506	\$ 25,552,177	\$ 24,024,157	\$	(911,349	
Total Expenditures & Request	\$	22,772,330	\$	24,593,064	\$ 24,935,506	\$ 25,552,177	\$ 24,024,157	\$	(911,349	
Authorized Full-Time Equiva	lents:	:								
Classified		0		0	0	0	0			
Unclassified		0		0	0	0	0			
<b>Total FTEs</b>		0		0	0	0	0		(	

# South Central Louisiana Human Services Authority Budget Summary



# **309\_1000 — South Central Louisiana Human Services Authority**

Program Authorization: RS 28:872; RS 28:912

#### **Program Description**

The mission of the South Central Louisiana Human Services Authority (SCLHSA) is to increase public awareness of and to provide access for individuals to integrated behavioral health and developmental disability services while promoting wellness, recovery and independence through education and the choice of a broad range of programmatic and community resources.

The goals of the South Central Louisiana Human Services Authority are:

- I. Improve service outcomes by partnering with stakeholders to expand integrated service programs in the community.
- II. Increase staff accountability and fiscal integrity of the agency.
- III. Provide the infrastructure, information, and systems to help employees successfully complete their jobs.
- IV. Maintain CARF Accreditation by committing to quality improvement, focusing on the unique needs of each person we serve, and monitoring the results of services we provide.

The South Central Louisiana Human Services Authority program includes the following activities:

- Behavioral Health Services SCLHSA provides assessment and treatment services using a person-centered approach to ensure that services are individualized and appropriate. The Assessment Center serves as the point of entry for all SCLHSA behavioral health services. Whether screening for service need, providing crisis stabilization, assessing for appropriate services, the clinic is focused on providing friendly, helpful and the most beneficial services to clients with behavioral health needs. Independent Assessments (IA), LON and LOCUS are provided in accordance with the Louisiana Behavioral Health Partnership on clients qualifying for 1915i wavier. Children and Adolescent Assessments are conducted in accordance with the Coordinated System of Care. SCLHSA Behavioral Health Assessments are conducted on clients requesting addictive disorders services and on children, adolescents and adults who do not meet the criteria for CSOC or 1915i waiver. Risk assessment, crisis stabilization and referrals are provided on clients with emergent behavioral health needs. As necessary, referrals to a higher level of care (hospitalization, partial hospitalization, inpatient treatment, and residential care services) are made to ensure the safe placement of clients with emergent needs. Referrals and linkage to appropriate community resources and agencies are provided for all persons seeking services regardless of eligibility criteria. Patients are assisted in finding and obtaining services from the agencies best suited to their individual needs and based on eligibility requirements.
- SCLHSA Treatment Centers help to guide clients in understanding their potential to heal themselves by collaborating with the client, family members and other individuals. This collaboration forms a supportive network enabling clients to make positive changes and manage their behavior in order to achieve their highest possible quality of life. Adult and youth outpatient services include individual and group counseling, marital and family counseling, crisis stabilization and case management, psychiatric assessment, psychosocial assessment, medication management, medication education and medication administration, as staffing permits. Cognitive behavioral techniques, play therapy and psychosocial skills training groups are based upon evidenced based practices. Telemedicine services may be provided in place of face to face psy-



chiatric services. Motivational techniques are used to engage persons with limited motivation to seek or accept available services. As needed and authorized, intensive outpatient treatment services are provided to adult clients with substance abuse disorders in most of the SCLHSA outpatient treatment clinics. Referrals to higher levels of care (partial hospitalization, inpatient treatment, and residential care services) will be coordinated as necessary to ensure the safe placement for persons in emergent situations.

- Developmental Disabilities –Developmental Disabilities core services consist of serving as the Single Point of Entry (SPOE) into the Developmental Disabilities (DD) Services System and providing support coordination services to individuals and their families through OCDD and other available community resources. Staff members assess the needs for support and services, develop individual plans of support, make applicable referrals, and provide ongoing coordination for the client's support plans. Targeted services are centered on Home and Community-Based Services Waiver programs and federal criteria which allow services to be provided in a home or community-based setting for the recipient who would otherwise require institutional care. The Family Support Program is designed to assist individuals whose needs exceed those normally used resources in the community, and other natural resources available. Individual and Family Supports include but are not limited to: respite care, personal assistance services, specialized clothing, such as adult briefs, dental and medical services not covered by other sources, equipment and supplies, communication services, crisis intervention, specialized utility costs, specialized nutrition, and family education. The Cash Subsidy Program is intended to assist families with children with severe or profound disabilities to offset the extraordinary costs of maintaining their child in their own home. The program provides a monthly stipend to families of children who have qualifying exceptionalities identified through their local educational authority.
- Administration SCLHSA Administration provides management and oversight of agency services to include fiscal, human resource, clinical, contract monitoring, information technology, community relations, compliance/risk services, medical staff/credentialing, quality improvement and special projects in Assumption, Lafourche, St. Charles, St. James, St. John the Baptist, St. Mary and Terrebonne parishes. SCLHSA has completely restructured its behavioral health settings to reflect treatment and assessment services in order to increase access and capacity for services to clients through the new Louisiana Behavioral Health Partnership. SCLHSA has also refined its fiscal processes to focus on staff accountability and integrity in the service and billing processes. Developmental Disabilities has implemented new initiatives to focus on client outreach services and increased funding opportunities for individuals. SCLHSA received a three year national accreditation from the Commission on Accreditation mandates that the agency maintain the goals and objectives that resulted in the accreditation process and review of agency policy and procedures in required annually by the agency and every three years by CARF surveyors.

Means of Financing:	Prior Year Actuals Y 2011-2012	F	Enacted 'Y 2012-2013	Existing Oper Budget s of 12/01/12	Continuation FY 2013-2014	ecommended Y 2013-2014	Total commended ver/(Under) EOB
State General Fund (Direct)	\$ 16,949,695	\$	15,743,962	\$ 15,774,790	\$ 16,391,461	\$ 15,444,349	\$ (330,441)
State General Fund by:							
Total Interagency Transfers	5,238,906		6,612,403	6,924,017	5,744,022	5,163,114	(1,760,903)

# South Central Louisiana Human Services Authority Budget Summary



		rior Year Actuals 2011-2012	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation FY 2013-2014	ecommended 'Y 2013-2014	Total ecommended Over/(Under) EOB
Fees and Self-generated Revenues		161,994		2,050,407	2,050,407	3,230,402	3,230,402	1,179,995
Statutory Dedications		372,681		0	_,,	0	0	0
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		49,054		186,292	186,292	186,292	186,292	0
Total Means of Financing	\$	22,772,330	\$	24,593,064	\$ 24,935,506	\$ 25,552,177	\$ 24,024,157	\$ (911,349)
-								
Expenditures & Request:								
Personal Services	\$	0	\$	0	\$ 0	\$ 0	\$ 0	\$ 0
Total Operating Expenses		1,716,662		3,507,219	3,150,333	3,231,434	3,050,112	(100,221)
Total Professional Services		0		0	0	0	0	0
Total Other Charges		20,881,411		21,085,845	21,754,345	22,316,128	20,974,045	(780,300)
Total Acq & Major Repairs		174,257		0	30,828	4,615	0	(30,828)
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	22,772,330	\$	24,593,064	\$ 24,935,506	\$ 25,552,177	\$ 24,024,157	\$ (911,349)
Authorized Full-Time Equiva	lents:							
Classified		0		0	0	0	0	0
Unclassified		0		0	0	0	0	0
<b>Total FTEs</b>		0		0	0	0	0	0

# South Central Louisiana Human Services Authority Budget Summary

# Source of Funding

This program is funded with State General Fund and Interagency Transfers. Interagency Transfers include: payments from the Office of Behavioral Health for community based treatment of mental illness and drug and alcohol abuse, payments from the Office of Citizens with Developmental Disabilities for the services to the mentally, physically and developmentally disabled.

# South Central Louisiana Human Services Authority Statutory Dedications

	Pı	rior Year		Ex	xisting Oper			R	Total ecommende	ed
Fund		Actuals 2011-2012	nacted 012-2013	as	Budget of 12/01/12	Continuation FY 2013-2014	ecommended Y 2013-2014	C	ver/(Under EOB	)
Overcollections Fund	\$	372,681	\$ 0	\$	0	\$ 0	\$ 0	\$		0



## Major Changes from Existing Operating Budget

G	eneral Fund	Т	otal Amount	Table of Organization	Description
\$	30,828	\$	342,442	<u> </u>	Mid-Year Adjustments (BA-7s):
		•	- 1		
\$	15,774,790	\$	24,935,506	0	Existing Oper Budget as of 12/01/12
			, ,		0 I 0
					Statewide Major Financial Changes:
\$	(13,007)	\$	(13,007)	0	Group Insurance Rate Adjustment for Active Employees
\$	(3,280)	\$	(3,280)	0	Group Insurance Rate Adjustment for Retirees
\$	660,504	\$	660,504	0	Salary Base Adjustment
\$	(242,019)	\$	(242,019)	0	Attrition Adjustment
\$	(300,679)	\$	(300,679)	0	Salary Funding from Other Line Items
\$	(30,828)	\$	(30,828)	0	Non-recurring Carryforwards
\$	(4,046)	\$	(4,046)	0	Risk Management
\$	782	\$	782	0	UPS Fees
\$	9,760	\$	9,760	0	Civil Service Fees
					Non-Statewide Major Financial Changes:
¢	(100.221)	¢	(100.221)	0	Annualize mid-year reduction - Savings achieved by reducing security contractual
\$ ¢	(100,221) (307,407)		(100,221) (307,407)	0	services. Contract consolidations and reductions.
\$	(307,407)	Э	(307,407)	0	Reduction in budget authority from the Office of Behavioral Health for the Temporary
\$	0	\$	(580,908)	0	Assistance for Needy Families (TANF) programs.
\$	15,444,349	\$	24,024,157	0	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
\$	15,444,349	\$	24,024,157	0	Base Executive Budget FY 2013-2014
\$	15,444,349	\$	24,024,157	0	Grand Total Recommended

# **Professional Services**

Amount	Description
	This program does not have funding for Professional Services for Fiscal Year 2013-2014.

# **Other Charges**

Amount	Description
	Other Charges:
\$11,748,857	Salaries and related benefits for Non T.O. FTE positions.



# **Other Charges (Continued)**

Amount	Description
\$8,904,965	Funding to support behavioral health programs, mental health and substance abuse and developmental disabilities services, a Crisis Response System, and Assertive Community Treatment services. Funding to support contracted services for behavioral health and developmental disabilities for treatment and various other supports that provide essential and enhanced community-based services. Contracts include, but are not limited to, crisis response system, intensive case management, individual and family support, supportive housing, vocational services, etc.
\$20,653,822	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$136,842	Payments to the Division of Administration - Office of Risk Management
\$32,426	Payments to the Department of Civil Service - Civil Service Fees
\$5,407	Payments to the Division of Administration - Uniform Payroll Services
\$145,548	Payments to the Division of Administration - Office of Telecommunications
\$320,223	SUB-TOTAL INTERAGENCY TRANSFERS
\$20,974,045	TOTAL OTHER CHARGES

# **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.

#### **Performance Information**

1. (KEY) Through the Behavioral Health Services activity, SCLHSA provides both screening, assessment, plan of care and level of need determination for children, adolescent, adult and senior populations as well as Treatment Services, including individual/group sessions, family/couple sessions, psychiatric evaluations, psychological testing, medication administration, medication management, crisis stabilization, gambling counseling, breath tests, urine screens and referrals to children, adolescents, adults and senior populations.

Children's Budget Link: Not Applicable

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

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



#### **Performance Indicators**

			Performance Ind	licator Values		
L e v e Performance Indicator I Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of successful completion of inpatient addictive disorder treatment programs. (LAPAS CODE - 24116)	75%	74%	75%	75%	75%	75%
K Percentage of adults and adolescents with an addictive disorder who successfully complete treatment (LAPAS CODE - 24510)	50%	73%	50%	50%	75%	75%
K Percentage of adults and adolescents with an addictive disorder who report improvement at discharge (LAPAS CODE - 24511)	75%	89%	75%	75%	85%	85%
K Number of crisis visits in all SCLHSA Mental Health Clinics (LAPAS CODE - 24123)	1,683	1,018	1,000	1,000	1,000	1,000
K Number of referrals to community resources in SCLHSA Crisis Response System (LAPAS CODE - 24124)	500	446	500	500	500	500
K Percentage of adults with depression who report improvement in disposition during and /or after treatment. (LAPAS CODE - 24513)	80%	58%	60%	60%	60%	60%
K Number of referrals received by SCLHSA outpatient centers from local stakeholders/ community behavioral health services (LAPAS CODE 24514)	500	8,863	500	500	7,000	7,000
CODE - 24514)	500	0,003	300	500	7,000	7,000

#### 2. (KEY) Through the Developmental Disabilities activity, to foster and facilitate independence for citizens with disabilities through the availability of home and community based services.

Children's Budget Link: Not applicable



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

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

**Performance Indicator Values** L Performance e Yearend Standard as Existing **Performance At** Performance Performance **Actual Yearend** Initially Performance Continuation At Executive Performance **Performance Indicator Budget Level Budget Level** Standard Appropriated Standard FY 2011-2012 FY 2011-2012 FY 2012-2013 FY 2012-2013 FY 2013-2014 FY 2013-2014 Name K Percentage of home and community based waiver assessments completed timely (LAPAS CODE -24118) 80% 54% 80% 80% 80% 80% K Percentage of eligibility determinations determined valid according to the Cash Subsidy promulgation (LAPAS CODE - 24512) 92% 95% 95% 95% 95% 95%

#### **Performance Indicators**

3. (KEY) Through the Administration activity, SCLHSA will continue to operational activity of the SCLHSA Central Office in relation to the Readiness Assessment Criteria and other regulatory/licensure processes for the transition of services and budget oversight for the Offices of Behavioral Health and Developmental Disabilities, SCLHSA will ensure that services will be provided to the citizens within Region 3.

Children's Budget Link: Not applicable

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

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



#### **Performance Indicators**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of appointments kept for assessments and ongoing client appointments (LAPAS CODE - 25060)	Not Available	Not Available	75%	75%	75%	75%
This is a new performance inc	licator for FY2011-2	2012. There is no pri	or year actual or yea	r end performance of	lata for FY2010-201	1.
K Percentage of SCLHSA clients who state they would continue to receive services at our clinics if given the choice to go elsewhere (LAPAS CODE - 25061)	Not Available	Not Available	90%	90%	90%	90%
This is a new performance ind	licator for FY2011-2	2012. There is no pri	or year actual or yea	r end performance of	lata for FY2010-201	1.
K Percentage of SCLHSA clients who state they would recommend the clinics to family and friends (LAPAS CODE - 25062)	Not Available	Not Available	90%	90%	90%	90%
This is a new performance in	licator for FY2011-2	2012. There is no pri	or year actual or yea	r end performance of	lata for FY2010-201	1.

#### South Central Louisiana Human Services Authority General Performance Information

	Performance Indicator Values							
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012			
Number of people receiving flexible family funds. (LAPAS CODE - 24120)	Not Available	Not Available	Not Available	152	Not Available			
The SCLHSA goal is to increase the number of individuals with developmental disabilities receiving individual and family support services receiving cash subsidy in Region 3 by 5% to contribute to maintaining themselves or their family members in the home.								
Total number of individuals served in the SCLHSA (Region 3) (LAPAS CODE - 24128)	Not Available	10,944	14,270	14,444	20,121			
The figure provided reflects data provided by the provided in the previous calendar year. As of Ju Services Authority. The data will be evaluated	ly 2010, these servic	es will be transferred	d under the auspices	of the South Central	Louisiana Human			
Total number of individuals served by outpatient mental health in SCLHSA (LAPAS CODE - 24129)	Not Available	5,785	7,507	7,808	7,815			
The figure provided reflects data provided by the	e Region 3 Offices A	Addictive Disorders,	Developmental Disa	bilities and Mental H	Health for services			

The figure provided reflects data provided by the Region 3 Offices Addictive Disorders, Developmental Disabilities and Mental Health for services provided in the previous calendar year. As of July 2010, these services will be transferred under the auspices of the South Central Louisiana Human Services Authority. The data will be evaluated by the SCLHSA to estimate the existing and continuation budget level standards.



	Performance Indicator Values					
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012	
Total number of individuals served by inpatient Addictive Disorders in SCLHSA (Region 3) (LAPAS CODE - 24130)	Not Available	1,155	1,218	1,072	1,209	
Total numbers of individuals served outpatient by Addictive Disorders in SCLHSA (Region 3) (LAPAS CODE - 24131)	Not Available	1,949	3,383	3,245	2,857	
The figure provided reflects data provided by the provided in the previous calendar year. As of Ju Services Authority. The data will be evaluated	ly 2010, these servic	es will be transferre	d under the auspices	of the South Central	Louisiana Human	
Total number of individuals receiving individual and family support services in SCLHSA (Region 3) (LAPAS CODE - 24132)	Not Available	155	181	187	179	
The figure provided reflects data provided by the provided in the previous calendar year. As of Ju Services Authority. The data will be evaluated	ly 2010, these servic	es will be transferre	d under the auspices	of the South Central	Louisiana Human	
The number of enrollees in prevention programs. (LAPAS CODE - 24115)	0	0	1,782	4,222	5,408	

#### South Central Louisiana Human Services Authority General Performance Information (Continued)



# 09-310 — Northeast Delta Human Services Authority

# **Agency Description**

The mission of the Northeast Delta Human Services Authority is to increase public awareness of and to provide access for individuals with behavioral health and developmental disabilities to integrated community based services while promoting wellness, recovery and independence through education and the choice of a broad range of programmatic and community resources.

The goals of the Northeast Delta Human Services Authority are:

- I. To provide behavioral health and developmental disabilities services that consumers, their families and communities want in a manner which provides them quick and convenient entry into services.
- II. To ensure that services provided are responsive to client concerns, integrated in service delivery methods, representative of best practice, and consistent with the goals of the Department of Health and Hospitals and its Program Offices.
- III. To promote healthy, safe lives for people by providing leadership in educating the community on the importance of prevention, early detection and intervention, and by facilitating coalition building to address localized community problems.

	Prior Year Actuals FY 2011-2012		Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total commended ver/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 0	\$	6 0	\$ 0	\$ <b>5</b> 0	\$ 0	\$ 0
State General Fund by:							
Total Interagency Transfers	C	)	0	0	0	11,543,165	11,543,165
Fees and Self-generated Revenues	C	)	0	0	0	0	0
Statutory Dedications	C	)	0	0	0	0	0
Interim Emergency Board	C	)	0	0	0	0	0
Federal Funds	C	)	0	0	0	0	0
Total Means of Financing	\$ 0	) \$	6 0	\$ 0	\$ 5 0	\$ 11,543,165	\$ 11,543,165
Expenditures & Request:							

# Northeast Delta Human Services Authority Budget Summary

	Prior Year Actuals FY 2011-201	2	Enacted FY 2012-201	3	Existing Op Budget as of 12/01/1		Continuation FY 2013-201			commended 7 2013-2014		Total commended ver/(Under) EOB
Northeast Delta Human	S	0	\$	0	\$	0	¢	0	\$	11 542 165	¢	11 542 165
Services Authority	\$	0	Ф	0	\$	0	\$	0	Э	11,543,165	\$	11,543,165
Total Expenditures & Request	\$	0	\$	0	\$	0	\$	0	\$	11,543,165	\$	11,543,165
Authorized Full-Time Equiva	lents:											
Classified		0		0		0		0		0		0
Unclassified		0		0		0		0		0		0
<b>Total FTEs</b>		0		0		0		0		0		0

# Northeast Delta Human Services Authority Budget Summary



# 310\_1000 — Northeast Delta Human Services Authority

#### **Program Description**

The mission of the Northeast Delta Human Services Authority is to increase public awareness of and to provide access for individuals with behavioral health and developmental disabilities to integrated community based services while promoting wellness, recovery and independence through education and the choice of a broad range of programmatic and community resources.

The goals of the Northeast Delta Human Services Authority are:

- I. To provide behavioral health and developmental disabilities services that consumers, their families and communities want in a manner which provides them quick and convenient entry into services.
- II. To ensure that services provided are responsive to client concerns, integrated in service delivery methods, representative of best practice, and consistent with the goals of the Department of Health and Hospitals and its Program Offices.
- III. To promote healthy, safe lives for people by providing leadership in educating the community on the importance of prevention, early detection and intervention, and by facilitating coalition building to address localized community problems.

The Northeast Delta Human Services Authority program includes the following activities:

Administration – DHH, its program offices and the Louisiana Legislature have created a statewide integrated human services delivery system with local accountability and management to provide behavioral health and developmental disabilities services. These local human service systems are referred to as local governmental entities (LGEs). LGEs feature practices such as a framework anchored in clear policy objectives, well-defined local roles and responsibilities, and measures to assure accountability of delivering quality services to consumers that assist in determining the relative efficiency and effectiveness of public systems. Act 373 of the 2008 Legislative Session, requires that DHH shall not contract with a new LGE until DHH, in consultation with the Human Services Interagency Council (HSIC), has determined and confirmed in writing to the governor that DHH is prepared to contract the provision of services to the LGE after the LGE has successfully completed the Readiness Assessment. The Northeast Delta Human Services Authority was created by Act 373 in the 2008 Legislative Session for the parishes of Jackson, Lincoln, Union, Morehouse, West Carroll, East Carroll, Ouachita, Richland, Madison, Caldwell, Franklin and Tensas. The Northeast Delta Human Services Authority will participate in the statewide initiative to implement an electronic health record to assist with continuous documentation efforts, scheduling of clients to maximize provider time, invoicing and billing procedures to improve collection efforts and standardization of forms/procedures.



- Developmental Disabilities Developmental Disabilities core services consist of serving as the Single Point of Entry (SPOE) into the Developmental Disabilities (DD) Services System and providing support coordination services to individuals and their families through DD and other available community resources. Staff members assess the needs for support and services, develop individual plans of support, make applicable referrals, and provide ongoing coordination for the client's support plans. Targeted services are centered on Home and Community-Based Services Waiver programs and Federal criteria which allow services to be provided in a home or community-based setting for the recipient who would otherwise require institutional care. The Family Support Program is designed to assist individuals whose needs exceed those normally used resources in the community, and other natural resources available. Individual and Family Supports include but are not limited to: respite care, personal assistance services, specialized clothing, such as adult briefs, dental and medical services not covered by other sources, equipment and supplies, communication services, crisis intervention, specialized utility costs, specialized nutrition, and family education. The Flexible Family Fund Program is intended to assist families with children with severe or profound disabilities to offset the extraordinary costs of maintaining their child in their own home. The program provides a monthly stipend to families of children who have qualifying exceptionalities identified through their local educational authority.
- Behavioral Health
- Mental Health The current budget for mental health services in the Northeast Delta Human Services Authority catchment area provides for outpatient clinic services for children over the age of six, adolescents, and adults. Core services include screening, assessment, crisis evaluation, individual, group and family counseling and medication management which includes administration, education and screening for people with co-occurring disorders. Contracted services include evidence-based practice Assertive Community Treatment and Intensive Case Management Services, as well as housing and employment assistance, assistance in application for SSI. Service delivery includes full participation in the Louisiana Behavioral Health Partnership and the Coordinated System of Care and works as a participant in the Coordinated Care Network. All Behavioral Health clinics in the Northeast Delta Human Services Authority will participate as Medicaid Application Centers for persons requesting services.
- Addictive Disorders Alcohol and drug abuse continues to be a major health problem in our state as well as in the Northeast Delta Human Services Authority catchment area. The resources available are not sufficient to meet the growing need for treatment and prevention services. Northeast Delta Human Services Authority falls into this category when considering the vast geography covered in the service area which limits inpatient service options. The same is true for outpatient services. The program has made significant strides to prioritize services to meet these crucial needs by encouraging and supporting the awareness and understanding of alcoholism and drug addiction amongst the citizens of our state. The basic premise of addictive disorder services is to develop ideas and programs that can help increase public awareness, treat adults and youth who need AD services and prevent the abuse of alcohol and drug addiction as well as compulsive gambling. The largest barrier to success for addictive disorder programs is the ability to maintain patient gains made in outpatient and inpatient treatment. Sometimes the impulse to abuse substance and/or to participate in dysfunctional behavior is too great and the gains from treatment can be wiped out in an instant. The need to provide education on prevention at an early age is key to deterring abuse and the subsequent need for treatment. AD and prevention service providers focus their attention on providing comprehensive, fully integrated prevention and treatment services. We actively seek the assistance of partnerships and collaborations to fully meet the needs of individuals, families and communities. The needs of the individuals, families and communities requiring addictive disorder services and the consequences they suffer are the impetus to incorporate addictive disorders practices in the health care debate. The goal remains to seamlessly integrate these practices into the comprehensive health care system without losing attention to the special needs of individuals, families, communities requiring substance abuse intervention.



	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	3	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommende Over/(Under EOB
Means of Financing:							
State General Fund (Direct)	\$ 0	\$	0 9	\$ 0	\$ 0	\$ 0	\$
State General Fund by:							
Total Interagency Transfers	0		0	0	0	11,543,165	11,543,16
Fees and Self-generated Revenues	0		0	0	0	0	
Statutory Dedications	0		0	0	0	0	
Interim Emergency Board	0		0	0	0	0	
Federal Funds	0		0	0	0	0	
Total Means of Financing	\$ 0	\$	0 9	\$ 0	\$ 0	\$ 11,543,165	\$ 11,543,16
Expenditures & Request:							
Personal Services	\$ 0	\$	0 5	\$ 0	\$ 0	\$ 0	\$
Total Operating Expenses	0		0	0	0	0	
Total Professional Services	0		0	0	0	0	
Total Other Charges	0		0	0	0	11,543,165	11,543,16
Total Acq & Major Repairs	0		0	0	0	0	
Total Unallotted	0		0	0	0	0	
Total Expenditures & Request	\$ 0	\$	0 9	\$ 0	\$ 0	\$ 11,543,165	\$ 11,543,16
Authorized Full-Time Equival	ents:						
Classified	0		0	0	0	0	
Unclassified	0		0	0	0	0	
Total FTEs	0		0	0	0	0	

# Northeast Delta Human Services Authority Budget Summary

# Major Changes from Existing Operating Budget

Genera	ıl Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	0	\$	0	0	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
					Non-Statewide Major Financial Changes:
	0		297,000	0	Interagency Transfer funding from the Office of the Secretary to aid in establishing the Northeast Delta Human Services Authority in FY14.



# Major Changes from Existing Operating Budget (Continued)

General Fund	Total Amount	Table of Organization	Description
0	8,607,657	0	Interagency Transfer funding from the Office of Behavioral Health to aid in establishing the Northeast Delta Human Services Authority in FY14. There are 31 NON T.O. FTE positions that will be transferred and 63 T.O. positions that will be transferred and converted to NON T.O. FTE positions as well.
0	2,638,508	0	Interagency Transfer funding from the Office for Citizens with Developmental Disabilities to aid in establishing the Northeast Delta Human Services Authority in FY14. There are 23 T.O. positions that will be transferred and converted to NON T.O. FTE positions as well.
\$ 0	\$ 11,543,165	0	Recommended FY 2013-2014
\$ 0	\$ 0	0	Less Supplementary Recommendation
\$ 0	\$ 11,543,165	0	Base Executive Budget FY 2013-2014
\$ 0	\$ 11,543,165	0	Grand Total Recommended

# **Professional Services**

Amount	Description
	This program does not have funding for Professional Services for Fiscal Year 2013-2014.

# **Other Charges**

Amount	Description
	Other Charges:
\$11,543,165	Costs of ongoing services that are currently provided through the Office of Behavioral Health and the Office for Citizens with Developmental Disabilities. The funds are from the Office of the Secretary, the Office of Behavioral Health, and the Office for Citizens with Developmental Disabilities.
\$11,543,165	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
	This program does not have funding for Interagency Transfers for Fiscal Year 2013-2014.
\$11,543,165	TOTAL OTHER CHARGES

# **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.



# **Performance Information**

#### 1. (KEY) Through administrative activity, Northeast Delta Human Services Authority will provide for the management and operational activities of services for addictive disorders, developmental disabilities and behavioral health.

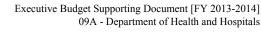
Children's Budget Link: Northeast Delta Human Services Authority services for children are related to the health policy outlined in the Children's Budget Link which mandates that all Louisiana children will have access to comprehensive healthcare services, and are linked via the Northeast Delta Human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

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

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of Northeast Delta Human Services Authority clients who state they would continue to receive services at our clinics if given the choice to go elsewhere (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of Northeast Delta Human Services Authority clients who state they would recommend the clinics to family and friends (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established

#### **Performance Indicators**



#### 2. (KEY) To extend quality mental health and Flexible Family Fund services to Children/Adolescents and Adults to the District target population, with client satisfaction feedback that meets threshold. And to provide addictive disorder prevention services to children, adolescents and their families and treatment services to adults including inpatient care.

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

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

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of adults served with MH services in all Northeast Delta Human Services Authority Behavioral Health clinics (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Number of children/ adolescents served with MH services in all Northeast Delta Human Services Authority. Behavioral Health clinics (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of adults receiving MH services who report that they would choose services in this agency if given a choice to receive services elsewhere (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of MH clients who would recommend services in this agency to others (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established

#### **Performance Indicators**



#### Performance Indicators (Continued)

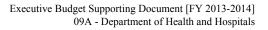
			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of MH cash subsidy slots utilized (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of successful completions (24-hour residential programs) - AD Program (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Primary Inpatient Adult: Percentage of individuals successfully completing the program -AD program (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Primary Inpatient Adolescent: Percentage of individuals successfully completing the program - AD Program (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established

# **3. (KEY)** Through the Developmental Disabilities activity, to foster and facilitate independence for citizens with disabilities through the availability of home and community based services

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

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

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).





			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of people receiving individual and family support services (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Number of people receiving flexible family fund services (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of eligibility determinations determined valid according to the Flexible Family Fund promulgation (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Number of persons receiving DD services per year (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established

#### **Performance Indicators**

#### Northeast Delta Human Services Authority General Performance Information

		Perfo	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012
Total number of individuals served in the Northeast Delta Human Services Authority (LAPAS CODE - New)	Not Applicable				
Total number of individuals served by outpatient mental health in Northeast Delta Human Services Authority (LAPAS CODE - New)	Not Applicable				
Total number of individuals served by inpatient Addictive Disorders in Northeast Delta Human Services Authority (LAPAS CODE - New)	Not Applicable				
Total numbers of individuals served by outpatient Addictive Disorders in Northwest Louisiana Human Services District (LAPAS CODE - New)	Not Applicable				
Total number of enrollees in prevention programs (LAPAS CODE - New)	Not Applicable				



# 09-320 — Office of Aging and Adult Services



# **Agency Description**

Act 465 of the 2006 regular session of the Louisiana Legislature established the Office of Aging and Adult Services (OAAS) within the Department of Health and Hospitals (DHH). OAAS is responsible for programs and functions of the state related to the protection and long-term care of the elderly and persons with adult onset disabilities. OAAS administers the Villa Feliciana Medical Complex, the protective services program, the long-term supports and services programs, as well as other related programs of the State.

The mission of the Office of Aging and Adult Services is to provide a system for long-term care services and supports whereby individuals who require long-term care can be assured a safe and healthy environment and quality services.

The goals of the Office of Aging and Adult Services are:

- I. To expand existing and to develop additional community-based services as an alternative to institutional care.
- II. To timely complete investigations of adult abuse, neglect, exploitation and extortion in the community.
- III. To administer and manage patient care programs in OAAS long-term/acute care and nursing home facilities in a manner that ensures compliance with applicable standards of care; and to promote policies that improve the quality and cost-effectiveness of privately owned nursing facilities.

The Office of Aging and Adult Services includes the following human resources policies that are helpful and beneficial to women and families: The majority of older adults and adults with disabilities who receive long term supports and services through OAAS programs are women, and women are the primary providers of elder care. Provision of Home and Community-based waiver services are of benefit in allowing family caregivers, the majority of whom are female, to support and maintain elderly family members, who are also majority female, in their own homes and in the community.

Twelve hour/varied shifts at agency facilities provide flexible hours that are helpful and beneficial to women and families.

Agency supports Act 1078 to include EEO, FMLA, and awareness of domestic violence and sexual harassment.

The Office of Aging and Adult Services has three programs: Administration Protection and Support, Villa Feliciana Medical Complex and Auxiliary Account.



For additional information, see:

Office of Aging and Adult Services

#### Centers for Medicare and Medicaid Services

Louisiana Health Finder

## Office of Aging and Adult Services Budget Summary

		Prior Year Actuals ( 2011-2012	F	Enacted Y 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	ecommended 'Y 2013-2014	Total commended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	9,135,296	\$	12,497,447	\$ 12,497,447	\$ 12,714,543	\$ 11,759,096	\$ (738,351)
State General Fund by:		, ,		, ,	, ,	, ,	, ,	( ) )
Total Interagency Transfers		31,861,926		37,311,521	37,318,315	38,945,484	38,000,335	682,020
Fees and Self-generated Revenues		1,326,585		1,100,439	1,100,439	1,076,194	1,167,437	66,998
Statutory Dedications		2,105,463		3,045,812	3,045,812	3,245,812	3,245,812	200,000
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		393,160		573,784	573,784	565,517	565,517	(8,267)
Total Means of Financing	\$	44,822,430	\$	54,529,003	\$ 54,535,797	\$ 56,547,550	\$ 54,738,197	\$ 202,400
Expenditures & Request:								
Administration Protection and Support	\$	25,902,967	\$	36,199,504	\$ 36,199,504	\$ 36,675,320	\$ 35,579,318	\$ (620,186)
Villa Feliciana Medical Complex		18,892,216		18,299,499	18,306,293	19,842,230	19,128,879	822,586
Auxiliary Account		27,247		30,000	30,000	30,000	30,000	0
Total Expenditures & Request	\$	44,822,430	\$	54,529,003	\$ 54,535,797	\$ 56,547,550	\$ 54,738,197	\$ 202,400
Authorized Full-Time Equiva	lents							
Classified		371		400	400	400	395	(5)
Unclassified		3		3	3	3	3	0
Total FTEs		374		403	403	403	398	(5)



# **320\_1000** — Administration Protection and Support

Program Authorization: Senate Bill No. 562/House Bill No. 638 of the 2006 Regular Session amended and reenacted Section 2, R.S. 36:251 (c)(1) and 258 (F) of the Constitution of Louisiana (1974) to establish the Office of Aging and Adult Services (OAAS) within the Department of Health and Hospitals (DHH). OAAS shall be responsible for the programs and functions of the state related to the protection and long-term care of the elderly and persons with adult onset disabilities. It shall administer, the Villa Feliciana Medical Complex, the protective services program, the long-term supports and services programs, and other related programs of the State.

#### **Program Description**

The mission of the Administration, Protection, and Support Program is to provide a system for long-term care services and supports whereby individuals who require long-term care can be assured a safe and healthy environment and quality services.

The goals of the Administration, Protection, and Support are:

- I. Develop a more balanced long-term care system which features a sustainable costeffective continuum of community-based services and facility-based services.
- II. Improve access and quality in long-term care programs.
- III. Ensure vulnerable adults are protected from abuse and neglect while living in community settings.
- IV. Provide specialize facility-based care to persons whose needs are difficult to meet in private facilities.

The Administration, Protection, and Support Program include five activities: Executive Administration, Long-Term Support and Services (LTSS), Permanent Supportive Housing (PSH), Traumatic Head and Spinal Cord Injury (THSCI) Trust Fund, and Protective Services.

- Executive Administration activity provides: Executive management, support, and direction to the Office
  of Aging and Adult Services (OAAS). OAAS operates DHH programs for the elderly and persons with
  adult-onset disabilities. These programs include Villa Feliciana Medical Complex (a 24-hour facility),
  Protective Services, Permanent Supportive Housing, and operation of several community-based long term
  care programs which expend over \$300 million in Medicaid funds. OAAS also performs medical certification for nursing home care totaling over \$800 million in Medicaid funds. The Executive Administration
  Activity is also responsible for providing programmatic expertise on aging and disability issues to DHH
  Executive Management, carrying out legislative directives, and directing implementation of long term
  reforms and program improvements.
- Long-Term Support and Services (LTSS) activity manages and operates: Community-based long term care programs for people with adult-onset disabilities, including but not limited to Medicaid Home and Community Based Services (HCBS) waivers, Medicaid personal care services, the Program of All-inclusive Care for the Elderly (PACE). This activity also operates nursing facility admissions, i.e., Medicaid certification for nursing facility care. This activity provides the state and regional office operations necessary to provide program planning, access, monitoring, quality assurance/improvement, and accountability for these programs as required under state and federal rules, statutes, and program requirements.



- Permanent Supportive Housing (PSH) activity provides: Supportive services to help people with disabilities – particularly those who are or who are at risk for institutionalization or homelessness -- have successful tenancies in mainstream affordable housing.
- Traumatic Head and Spinal Cord Injury (THSCI) activity allows: survivors of traumatic head and spinal cord injury to avoid unnecessary and costly institutionalization by providing resources or services that they are not otherwise eligible for through any other funding source. The Trust Fund promotes the health of eligible Louisiana citizens by providing services, such as evaluations, post-acute medical care, rehabilitation, maintenance therapies, remote in-home client monitoring systems, medications, and attendant care that prevent or delay the onset or progression of diseases and excess disability associated with such injuries.
- Protective Services activity assists and enables: Vulnerable adults who are unable to protect themselves to live free from harm due to abuse, neglect, exploitation, or extortion by investigating and intervening in allegations of abuse against adults who are unable to protect themselves.

		rior Year Actuals 2011-2012	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation Y 2013-2014	ecommended Y 2013-2014	Total commended ver/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	9,135,296	\$	12,497,447	\$ 12,497,447	\$ 12,714,543	\$ 11,759,096	\$ (738,351)
State General Fund by:								
Total Interagency Transfers		14,313,855		20,527,739	20,527,739	20,602,439	20,461,884	(65,855)
Fees and Self-generated Revenues		224,998		15,980	15,980	0	0	(15,980)
Statutory Dedications		2,105,463		3,045,812	3,045,812	3,245,812	3,245,812	200,000
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		123,355		112,526	112,526	112,526	112,526	0
Total Means of Financing	\$	25,902,967	\$	36,199,504	\$ 36,199,504	\$ 36,675,320	\$ 35,579,318	\$ (620,186)
Expenditures & Request:								
Personal Services	\$	12,085,417	\$	12,221,600	\$ 12,221,600	\$ 13,098,927	\$ 12,674,341	\$ 452,741
Total Operating Expenses		530,467		1,005,584	1,005,584	1,009,918	878,401	(127,183)
Total Professional Services		47,700		118,142	118,142	118,142	118,142	0
Total Other Charges		13,239,383		22,854,178	22,854,178	22,448,333	21,908,434	(945,744)
Total Acq & Major Repairs		0		0	0	0	0	0
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	25,902,967	\$	36,199,504	\$ 36,199,504	\$ 36,675,320	\$ 35,579,318	\$ (620,186)
Authorized Full-Time Equiva	lents:							
Classified		128		157	157	157	173	16
Unclassified		1		1	1	1	1	0
<b>Total FTEs</b>		129		158	158	158	174	16

# Administration Protection and Support Budget Summary



# **Source of Funding**

The Administration Protection and Support program is funded from State General Fund, Interagency Transfers, Statutory Dedications and Federal Funds. The Interagency Transfers are from the Office of Community Development for the Permanent Supportive Housing Program and Medicaid Vendor Administration for the Money Follows the Person Grant and other Medicaid functions and programs. The Statutory Dedications listed are the Traumatic Head and Spinal Cord Injury Trust Fund (R.S. 46:2633--2635) and the Nursing Home Residents' Trust Fund (R.S. 40:2009.11). (Per

R.S. 39:36B. (8), see table below for a listing of expenditures out of each Statutory Dedication Fund.) The Federal funds include the Louisiana Respite Grant.

#### **Administration Protection and Support Statutory Dedications**

Fund	rior Year Actuals 2011-2012	FY	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	ontinuation Y 2013-2014	ecommended Y 2013-2014	Total commended ver/(Under) EOB
Nursing Home Residents' Trust Fund	\$ 0	\$	100,000	\$ 100,000	\$ 300,000	\$ 300,000	\$ 200,000
Traumatic Head & Spinal Injury	1,840,867		2,945,812	2,945,812	2,945,812	2,945,812	0
Overcollections Fund	264,596		0	0	0	0	0

# Major Changes from Existing Operating Budget

Ge	eneral Fund	т	otal Amount	Table of Organization	Description
\$		\$	0	0	
Ψ	Ū	Ψ	0	0	
\$	12,497,447	\$	36,199,504	158	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
	(16,657)		(16,657)	0	Group Insurance Rate Adjustment for Active Employees
	(2,029)		(5,798)	0	Group Insurance Rate Adjustment for Retirees
	735,195		735,195	0	Salary Base Adjustment
	(199,115)		(199,115)	0	Attrition Adjustment
	(660,579)		(785,879)	0	Salary Funding from Other Line Items
	(20,623)		(20,623)	0	Rent in State-Owned Buildings
	2,782		2,782	0	Maintenance in State-Owned Buildings
	(2,888)		(2,888)	0	UPS Fees
	(5,533)		(5,533)	0	Civil Service Fees
	763		763	0	Office of Computing Services Fees
					Non-Statewide Major Financial Changes:
	0		0	16	Transferring 16 Vacant T.O. Positions in the Villa Feliciana Medical Complex Program to the Administration Protection and Support Program.
	(178,648)		(178,648)	0	Realignment of Other Pay.
	(253,984)		(253,984)	0	Annualize mid-year reduction by reducing 3 Non-TO Positions, 2 Non-TO Positions in Adult Protective Services and 1 Non-TO Position in Program Support.



# Major Changes from Existing Operating Budget (Continued)

Ge	eneral Fund	Т	otal Amount	Table of Organization	Description
	0		400,000	0	Medical Vendor Administration will provide 50% Federal Match for the Nursing Home Resident's Trust Fund.
	0		(15,980)	0	Streamlining Seals Grant in SFY13
	(9,852)		(9,852)	0	Annualize mid-year reduction by reducing One Student Worker Position in the Administration Program.
	(127,183)		(127,183)	0	Annualize mid-year reduction for Regional Office staff to participate in the Work-at- Home Program which will achieve savings for rental space in 6 regions and in operational services.
	0		(136,786)	0	Contract consolidations and reductions to reduce overhead and achieve agency efficiencies for SFY14.
\$	11,759,096	\$	35,579,318	174	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
\$	11,759,096	\$	35,579,318	174	Base Executive Budget FY 2013-2014
\$	11,759,096	\$	35,579,318	174	Grand Total Recommended

# **Professional Services**

Amount	Description
	Professional Services
\$98,142	Professional contracts needed for compliance with CMS requirements, contracts for implementing long term care reform. Contracts for psychiatry/psychology required for CMS quality assurance compliance.
\$20,000	Professional contracts to provide technical assistance for on-going monitoring of the resource allocation methodology and MDS-HC, software modifications and improved performance and efficiency of information systems
\$118,142	TOTAL PROFESSIONAL SERVICES

# **Other Charges**

Amount	Description
	Other Charges:
\$16,058,588	Permanent Supportive Housing Initiative- Under this program, housing developers who have received GO-Zone Low Income Housing Credits will build and set aside a percentage of affordable rental housing for elderly and adults with disabilities in the parishes which were affected by Hurricanes Katrina and Rita.
\$2,713,091	Traumatic Head and Spinal Cord Injury Trust Fund, under this program, services and supports will be available to individuals who have Traumatic Head and Spinal Cord Injuries.
\$600,000	Nursing Home Resident Trust Fund- Projects will be selected that focus on existing state and national metrics of quality in Louisiana's nursing facilities.
\$469,671	Independent Living Programs- Manages services for the state personal assistance program and community and family services program.



# **Other Charges (Continued)**

Amount	Description
\$42,542	LA Lifespan Respite Care Program is a statewide demonstration grant that has the goal to promote the provision and use of respite services by family members and other unpaid caregivers who support people of all ages who have chronic conditions and/or disabilities.
\$1,466,295	Money Follows the Person (MFP) Demonstration assists in the rebalancing of Louisiana's long-term support system and creates a system that allows individuals to have a choice of where they live and receive services.
\$21,350,187	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$266,456	Rent for Bienville building and garage
\$21,461	Civil Service Fees
\$3,708	Comprehensive Public Training Program (CPTP) Fees
\$121,636	LEAF acquisitions
\$54,644	Office of Risk Management Premium
\$9,591	Office of Computing Services
\$8,249	Legislative Auditor's Fees
\$7,511	Office of State Uniform Payroll
\$64,991	Office of Telecommunications Management
\$558,247	SUB-TOTAL INTERAGENCY TRANSFERS
\$21,908,434	TOTAL OTHER CHARGES

#### **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.

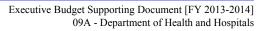
# **Performance Information**

1. (KEY) Through the Executive Administration activity, to ensure that OAAS operates in compliance with all legal requirements, that the Office accomplishes its goals and objectives to improve the quality of life and quality of care of persons needing long term care services in a sustainable way, reaching/exceeding appropriate national benchmarks by 2016.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable





#### **Performance Indicators**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of OAAS performance indicators that meet or exceed performance standard (LAPAS CODE - 24134)	75%	88%	75%	75%	80%	75%
K Administrative cost as percentage of service cost (LAPAS CODE - 24135)	1.00%	0.22%	1.00%	1.00%	1.00%	1.00%
S Percentage of in-house and contracted OAAS IT systems that improve on the federal Medicaid Information Technology Architecture (MITA) maturity scale (LAPAS						
CODE - 24136)	50%	0	50%	50%	50%	50%

#### 2. (KEY) Through the Elderly and Adults with Disabilities Long-Term Care activity, to optimize the use of community-based care while also decreasing reliance on more expensive institutional care to meet or exceed national averages for institutional versus community-based spending by 2016.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.

Other Link(s): (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable



#### **Performance Indicators**

			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of Medicaid spending for elderly and disabled adult long term care that goes towards community-based services rather than nursing homes (LAPAS CODE - 24137)	29%	24%	29%	29%	31%	26%
K Percentage of participants receiving long term care in the community rather than nursing homes (LAPAS CODE - 25059)	Not Applicable	Not Applicable	45%	45%	47%	47%
K Average expenditure per person for community- based long term care as percentage of the average expenditure per person for nursing home care (LAPAS CODE - 24138)	60%	42%	60%	60%	55%	55%
S Program operation cost as a percentage of service cost (LAPAS CODE - 24139)	2%	2%	2%	2%	2%	2%
S Percentage change in nursing facility utilization (LAPAS CODE - 24140)	Not Applicable	-13%	0	0	0	0
S Percentage change in nursing facility spending (LAPAS CODE - 24141)	6%	-9%	5%	5%	2%	2%

# 3. (KEY) Through the Elderly and Adults with Disabilities Long-Term Care activity, to expedite access to a flexible array of quality home- and community-based services.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable



			Performance In	dicator Values		
L e v e Performance Ind l Name	Yearend Performance dicator Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number on registry OAAS HCBS waiv (LAPAS CODE - 2	vers	32,192	28,000	28,000	58,909	52,000
K Percentage on regis for OAAS HCBS who are receiving Medicaid LTC (LA CODE - 24145)	vaivers other	31%	30%	30%	30%	30%
S Percentage of avail Healthcare Effectiv Data Information S (HEDIS) and Ager Research and Heal Quality (ARHQ) Prevention measur which Medicaid community-based programs perform to or better than the M nursing home prog (LAPAS CODE - 2	veness Set ncy for thcare es on the same Aedicaid ram	70%	80%	80%	80%	80%
S Number served in a OAAS HCBS prog (LAPAS CODE - 2	all grams	23,449	22,600	22,600	35,965	30,000

# 4. (KEY) Through the Elderly and Adults with Disabilities Long-Term Care activity, to facilitate timely access to nursing facilities for eligible applicants.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable



		Performance Indicator Values							
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014			
K Percentage Nursing Facilities Admissions applications determined within established timeframes for OAAS access systems (LAPAS CODE - 24143)	95%	100%	95%	95%	96%	96%			

#### 5. (KEY) Through the Permanent Supportive Housing activity, to stabilize and reduce acute and institutional care for 2,000 elders and adults with disabilities.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

		Performance Ind	licator Values		
Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
90%	98%	90%	90%	90%	90%
70/	250/	70/	70/	400/	40%
	Performance Standard FY 2011-2012	Performance Standard FY 2011-2012Actual Yearend Performance FY 2011-201290%98%	Yearend Performance Standard FY 2011-2012Actual Yearend Performance FY 2011-2012Performance Standard as Initially Appropriated FY 2012-201390%98%90%	Yearend Performance Standard FY 2011-2012Actual Yearend Performance FY 2012-2013Standard and Performance FY 2012-2013Existing Performance Standard FY 2012-201390%98%90%90%	Yearend Performance Standard FY 2011-2012Actual Yearend Performance FY 2012-2013Performance Performance Standard FY 2012-2013Performance Continuation Budget Level FY 2013-201490%98%90%90%90%

#### **Performance Indicators**



#### 6. (KEY) Through the Traumatic Head and Spinal Cord Injury Trust Fund activity, to maintain independence and improve quality of life for survivors of traumatic brain and/or spinal cord injury who receive services through the Trust Fund.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

			Performance Ind	licator Values		
L e v e Performance Indicator I Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of expenditures going to direct services (LAPAS CODE - 25158)	Not Applicable	Not Applicable	80%	80%	85%	85%
S Number of people served (THSCI) (LAPAS CODE - 3367)	554	639	550	550	720	720
S Number of people on waiting list for Trust Fund Assistance (LAPAS CODE - 8294)	290	262	482	482	330	330

#### Performance Indicators

# 7. (KEY) Through the Protective Services activity, to ensure that disabled adults are protected from abuse and neglect by completing investigations within timelines as established in DHH Policy for those investigations.

Children's Budget Link: This objective is linked to medical services for Medicaid eligible children funded under the Children's Budget.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by insuring the provision of healthcare services to women and families.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable



		Performance Indicator Values								
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014				
K Percentage of investigations completed within established timeframes (LAPAS CODE - 7995)	75%	83%	80%	80%	75%	75%				
K Number of clients served (LAPAS CODE - 7994)	1,700	2,812	2,800	2,800	6,800	6,800				

#### Administration Protection and Support General Performance Information

	Performance Indicator Values									
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012					
Number of cases assigned to investigators (statewide) (LAPAS CODE - 12052)	2,531	2,930	3,249	3,119	0					

#### 8. (KEY) Through the Protective Services activity, provide Protective Service training, community outreach and education on the dynamics of elderly abuse, thereby increasing public awareness to report suspected abuse, and investigate 3,000 reports of abuse by June 30, 2014.

Children's Budget Link: Not applicable

Human Resource Policies Beneficial to Women and Families Link: Not applicable

Other Links: Not applicable



			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of cases investigated which resulted in a successful resolution for the affected senior (LAPAS CODE - 23367)	90%	99%	90%	90%	90%	90%
K Percentage of high priority reports investigated within 8 working hours of receipt (LAPAS CODE - 14084)	96%	100%	96%	96%	96%	96%
S Number of reports received high priority (LAPAS CODE - 14083)	1,200	1,916	1,500	1,500	1,500	1,500

#### Administration Protection and Support General Performance Information

	Performance Indicator Values										
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012						
Number of reports received (LAPAS CODE - 350)	3,675	3,603	3,690	4,196	4,136						
Number of reports investigated (LAPAS CODE - 351)	3,449	3,414	3,481	3,891	4,136						
Number of cases closed (LAPAS CODE - 353)	3,123	3,835	3,383	4,001	4,167						



# 320\_3000 — Villa Feliciana Medical Complex

Program Authorization: R.S. 28:22.7, R.S. 40:2002.4, R.S. 40:2142

Senate Bill No. 562/House Bill No. 638 of the Regular Session, 2006, amended and reenacted Section 2, R.S. 36:251(C)(1) and 258(F) of The Constitution of Louisiana (1974) to establish the Office of Aging and Adult Services within the Department of Health and Hospitals. The Office of Aging and Adult Services shall be responsible for the programs and functions of the State related to the protection and long-term care of the elderly and persons with adult onset disabilities. It shall administer the residential state-operated nursing homes, the Villa Feliciana Medical Complex, the protection services program, the long-term supports and services programs, as well as other related programs of the State. R.S. 28:22.7(B) was amended and reenacted to transfer the Villa Feliciana Medical Complex to the Office of Aging and Adult Services.

#### **Program Description**

The Villa Feliciana Medical Complex Program is a state owned and operated Medicare and Medicaid licensed long-term care facility with a mission of providing specialized care and rehabilitative services to medically complex patients diagnosed with chronic diseases, disabilities, and terminal illnesses.

The goals of the Villa Feliciana Medical Complex Program are:

- I. Administer and manage patient care in a manner that ensures compliance with applicable standards of care.
- II. Provide quality health care services to patients through the identification of need and maximizing utilization of existing services.
- III. Provide leadership, program support and program development to efficiently use resources and to maintain facility services, including staffing and medical records, in compliance with Centers for Medicare & Medicaid Services (CMS), state licensing and other regulatory requirements.

Villa Feliciana Medical Complex Program activities include: administration, human resources, training, payroll, purchasing, accounting, warehouse, maintenance, security, transportation, central supply, switchboard, housekeeping, physician services, nursing services, radiology, recreation and beauty and barber.

	Prior Year Actuals 7 2011-2012	]	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total ecommended Over/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 0	\$	0	\$ 0	\$ 0	\$ 0	\$ 0
State General Fund by:							
Total Interagency Transfers	17,548,071		16,783,782	16,790,576	18,343,045	17,538,451	747,875

#### Villa Feliciana Medical Complex Budget Summary



		Prior Year Actuals 7 2011-2012	F	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	ecommended 'Y 2013-2014	Total decommended Dver/(Under) EOB
Fees and Self-generated Revenues		1,074,340		1,054,459	1,054,459	1,046,194	1,137,437	82,978
Statutory Dedications		0		0	0	0	0	0
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		269,805		461,258	461,258	452,991	452,991	(8,267)
Total Means of Financing	\$	18,892,216	\$	18,299,499	\$ 18,306,293	\$ 19,842,230	\$ 19,128,879	\$ 822,586
Expenditures & Request:								
Personal Services	\$	15,332,283	\$	14,238,568	\$ 14,238,568	\$ 15,412,516	\$ 14,621,390	\$ 382,822
Total Operating Expenses		1,840,250		2,053,585	2,053,585	2,516,664	2,594,439	540,854
Total Professional Services		153,550		290,000	290,000	290,000	290,000	(
Total Other Charges		1,487,140		1,533,336	1,533,336	1,623,050	1,623,050	89,714
Total Acq & Major Repairs		78,993		184,010	190,804	0	0	(190,804)
Total Unallotted		0		0	0	0	0	C
Total Expenditures & Request	\$	18,892,216	\$	18,299,499	\$ 18,306,293	\$ 19,842,230	\$ 19,128,879	\$ 822,586
Authorized Full-Time Equiva	lents							
Classified		243		243	243	243	222	(21)
Unclassified		2		2	2	2	2	(
Total FTEs		245		245	245	245	224	(21)

# Villa Feliciana Medical Complex Budget Summary

#### Source of Funding

The Villa Feliciana Medial Complex program is funded with Interagency Transfers, Fees and Self-generated Revenues and Title XVIII Federal Funds (Medicare). Interagency Transfers means of financing includes: (1) Title XIX reimbursement for services provided to Medicaid eligible patients received through the Department of Health and Hospitals and Medical Vendor Payments; (2) payment for patient services provided to Eastern Louisiana Mental Health System Forensic Division; and (3) payment for x-ray services provided to Eastern Louisiana Mental Health System Forensic Division and Louisiana War Veterans Home. Fees and Self-generated Revenues include: (1) payment from patients for services based on a sliding fee scale; (2) rent from the New Orleans Home for the Incurables (NOHI) (3) employee meal reimbursement; (4) telephone services and (5) miscellaneous income, such as funds received from individuals for copies of patient medical records. Federal Funds are Title XVIII for services provided to Medicare eligible patients.



# Major Changes from Existing Operating Budget

Gener	ral Fund	Total Amount	Table of Organization	Description
\$	0	\$ 6,794	0	Mid-Year Adjustments (BA-7s):
\$	0	\$ 18,306,293	245	Existing Oper Budget as of 12/01/12
				Statewide Major Financial Changes:
	0	1,945	0	Civil Service Training Series
	0	176,418	0	Louisiana State Employees' Retirement System Rate Adjustment
	0	260,026	0	Louisiana State Employees' Retirement System Base Adjustment
	0	(18,290)	0	Group Insurance Rate Adjustment for Active Employees
	0	(33,850)	0	Group Insurance Rate Adjustment for Retirees
	0	(57,106)	0	Salary Base Adjustment
	0	(304,231)	0	Attrition Adjustment
	0	0	(5)	Personnel Reductions
	0	(184,010)	0	Non-Recurring Acquisitions & Major Repairs
	0	(6,794)	0	Non-recurring Carryforwards
	0	98,124	0	Risk Management
	0	(3,070)	0	Legislative Auditor Fees
				Non-Statewide Major Financial Changes:
	0	1,044,135	0	An increase in Interagency Transfers (IAT) from Villa Feliciana Medical Complex because of increase in Medicaid Collections, resulting from the increased census in the current year which is expected to continue in SFY14.
	0	0	(16)	Transferring 16 Vacant T.O. Positions in the Villa Feliciana Medical Complex Program to the Administration Protection and Support Program.
	0	114,655	0	Eastern Louisiana Mental Health System is transferring funds to Villa Feliciana Medical Complex Facility to provide patient services and radiology services.
	0	(6,980)	0	Reducing Natural Gas and Gas Line Maintenance Cost.
	0	1,640	0	Providing Radiology Services and Laboratory Services to Louisiana War Veteran's Home.
	0	(260,026)	0	Retirement Funding from Other Line Items
\$	0	\$ 19,128,879	224	Recommended FY 2013-2014
\$	0	\$ 0	0	Less Supplementary Recommendation
\$	0	\$ 19,128,879	224	Base Executive Budget FY 2013-2014
\$	0	\$ 19,128,879	224	Grand Total Recommended



#### **Professional Services**

Amount	Description
	Professional Services
\$290,000	Medical and Dental - Villa Feliciana Medical Complex is an inclusive acute care/long term care hospital with a tuberculosis (TB) Ward. Services are contracted to provide patient care for ophthalmology, dental, psychiatric, medical doctor, radiology, speech therapy, medical records, infectious disease, and others.
\$290,000	TOTAL PROFESSIONAL SERVICES

#### **Other Charges**

Amount	Description
	Other Charges:
	This program does not have funding for Other Charges for Fiscal Year 2013-2014.
\$0	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$937,100	Office of Risk Management (ORM)
\$15,889	Uniform Payroll System (UPS)
\$3,071	Legislator Auditor Fees
\$57,270	Civil Service Fees
\$6,653	Comprehensive Public Training Program (CPTP) Fees
\$9,047	Office of Computing Services
\$78,020	East Louisiana Hospital - Utilities (Natural Gas)
\$460,000	Administrative Costs - Bed Tax
\$16,000	Leaf Third Party Leases
\$35,000	Office of Telecommunications Management (OTM) Fees
\$5,000	IAT Data Processing
\$1,623,050	SUB-TOTAL INTERAGENCY TRANSFERS
\$1,623,050	TOTAL OTHER CHARGES

#### **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.

#### **Performance Information**

1. (KEY) Through the Villa Feliciana Medical Complex activity, to provide high quality medical services and excellent residential outcomes in a cost effective manner.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: Villa Feliciana Medical Complex has implemented more flexible work hours that are helpful and beneficial to women and families.



Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

Explanatory Note: All of these areas are reflected by calculations that come from census, admissions, budget and total number of employees.

#### **Performance Indicators**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage compliance with CMS license and certification standards (LAPAS CODE - 8010)	98%	96%	98%	98%	95%	95%
K Average daily census (LAPAS CODE - 2292)	150	154	158	158	160	152
K Total clients served (LAPAS CODE - 10052)	230	226	235	235	230	200
K Occupancy rate (LAPAS CODE - 2288)	95%	96%	95%	95%	96%	94%
S Staff/client ratio (LAPAS CODE - 2287)	1.60	1.58	1.60	1.60	1.50	1.40

#### 2. (SUPPORTING)Through the Villa Feliciana Medical Complex activity, to provide management leadership and administrative support necessary for the delivery of patient care services and to provide for the efficient and effective use of resources in meeting all mandated regulatory requirements.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: Villa Feliciana Medical Complex has implemented more flexible work hours that are helpful and beneficial to women and families.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

Explanatory Note: All of these areas are reflected by calculations that come from census, admissions, budget and total number of employees.

#### **Performance Indicators**

						Pe	Performance Indicator Values						
L	L						Performance						
е		Y	earend			St	andard as		Existing	Perfo	ormance At	Perf	ormance
v		Perf	ormance	Actua	l Yearend		Initially		Performance	Cor	ntinuation	At E	xecutive
е	Performance Indicator	St	andard	Perf	ormance	Ар	propriated		Standard	Buc	lget Level	Bud	get Level
1	Name	FY 2	2011-2012	FY 2	011-2012	FY	2012-2013	]	FY 2012-2013	FY	2013-2014	FY 2	013-2014
S	Cost per client day												
	(LAPAS CODE - 2289)	\$	363	\$	335	\$	358	\$	358	\$	352	\$	347



		Perfo	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012
Number of staffed beds (LAPAS CODE - 11214)	195	195	155	155	160

#### Villa Feliciana Medical Complex General Performance Information



# 320\_4000 — Auxiliary Account

#### **Program Description**

The Patient Recreation Fund Account provides therapeutic activities to patients as approved by treatment teams.

# **Auxiliary Account Budget Summary**

	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB
Means of Financing:						
State General Fund (Direct)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
State General Fund by:						
Total Interagency Transfers	0	0	0	0	0	0
Fees and Self-generated Revenues	27,247	30,000	30,000	30,000	30,000	0
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	0	0	0	0	0	0
Total Means of Financing	\$ 27,247	\$ 30,000	\$ 30,000	\$ 30,000	\$ 30,000	\$ 0
Expenditures & Request:						
Personal Services	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Total Operating Expenses	0	0	0	0	0	0
Total Professional Services	0	0	0	0	0	0
Total Other Charges	27,247	30,000	30,000	30,000	30,000	0
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
Total Expenditures & Request	\$ 27,247	\$ 30,000	\$ 30,000	\$ 30,000	\$ 30,000	\$ 0
Authorized Full-Time Equiva	lents:					
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
Total FTEs	0	0	0	0	0	0

# Source of Funding

The Auxiliary Account is funded with Fees and Self-generated Revenues. These activities are funded by the sale of merchandise in the patient canteen.



		_			
Gener	al Fund		Fotal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	0	\$	30,000	0	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
					Non-Statewide Major Financial Changes:
\$	0	\$	30,000	0	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
\$	0	\$	30,000	0	Base Executive Budget FY 2013-2014
\$	0	\$	30,000	0	Grand Total Recommended

# Major Changes from Existing Operating Budget

#### **Professional Services**

Amount	Description
	This program does not have funding for Professional Services for Fiscal Year 2013-2014.

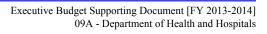
# **Other Charges**

Amount	Description
	Other Charges:
\$30,000	Sale of merchandise in the patient canteen, donations, and the sale of donated art work.
\$30,000	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
	This program does not have funding for Interagency Transfers for Fiscal Year 2013-2014.
\$0	SUB-TOTAL INTERAGENCY TRANSFERS
\$30,000	TOTAL OTHER CHARGES

# **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.







# 09-324 — Louisiana Emergency Response Network Board



# **Agency Description**

The mission of the Louisiana Emergency Response Network is to defend the public health, safety, and welfare by protecting the people of the State of Louisiana from unnecessary deaths and morbidity due to trauma and time-sensitive illness.

Louisiana will have a comprehensive and integrated trauma network that decreases trauma-related deaths and incidents of morbidity and mortality due to trauma in Louisiana by maximizing the integrated delivery of optimal resources for patients who ultimately need acute trauma care. The network will also address the daily demands of trauma care and form the basis for disaster preparedness.

The goal of the Louisiana Emergency Response Network is to:

- I. Decrease risk adjusted trauma-related deaths and incidents of morbidity and mortality due to trauma in Louisiana.
- II. Maximize the return on investment (ROI) of state dollars and supplement general fund dollars with alternative funding sources.
- III. Ensure that all citizens gain access to the statewide trauma network for both trauma and time sensitive related illnesses.
- IV. Establish and codify protocols that specify the role of LERN in Emergency Support Function 8 (ESF-8) activities.

Louisiana Emergency Response Network (LERN) remains dedicated to providing access services and connecting patients in need of time-sensitive trauma services to the definitive care resource per the LERN Protocol. The definitive care resource is determined by understanding the patient's clinical status and clinical needs and matching those needs to the identified medical resource. Hospitals report their resources via the ESF-8 Portal (Resource Management) on a real time basis. The LERN Communications Center continues to offer state of the art communications that directs the transport of traumatically injured patients to definitive care facilities within the "golden hour." This service is provided 24/7/365 across the entire State of Louisiana. The LERN Communications Center also serves an important role within ESF-8 (emergency preparedness and response) by implementing the EMSTAT/Resource Management tool and LERN's mass casualty notification and response protocols. The LERN Communication Center (LLC) has the additional responsibility of "information coordinator" and will serve as the primary coordinating entity for messaging and notifications regarding events and incidents as they occur statewide on at 24/7 basis. The LCC uses the designated ESF 8 systems to create event records and create notifications for the ESF 8 network.



The Louisiana Emergency Response Network includes the following human resources policies that are helpful and beneficial to women and children: the LERN Family and Medical Leave Policy (#8108-93) to provide up to 12 workweeks of "job-protected" paid or unpaid leave during any 12-month period to eligible employees (regardless of gender and other non-merit factors) for certain specified family and medical reasons; the LERN Sexual Harassment Policy and the DHH Equal Employment Opportunity Policy (#8116-77), in addition, flexibility in work schedules assists both women and their families; DHH Policy #8116-77 EEO/EEO Complaints Policy provides for equal opportunities for the recruitment, employment, training and promotion of all employees based solely on merit factors and prohibits the use of gender and other non-merit factors; LERN Accrual and Use of Leave for Classified Employees Policy to credit and grant leave in accordance with Civil Service Rules. Leave is administered as uniformly and equitably as possible without regard to gender and non-merit factors; a Time and Attendance Policy permitting the use of flexible time schedules for employees as approved by the supervisor and management; Affirmative Action Plan requires equal opportunities for the recruitment, employment, training and promotion of all employees based solely on merit factors.

As LERN continues to build a framework for an integrated trauma system, LERN works with hospital providers to assess/explore assets needed for Trauma Center verification and the process for ACS Trauma Center verification. There are currently up to 6 hospitals either in the application process or exploring Trauma Center verification. The vision of the LERN Board is to have at least 1 Level 2 or 3 verified trauma centers in each region of the State. Louisiana now has one Level 1 (New Orleans) verified trauma center and one Level 2 (Rapides in Alexandria) trauma center. There is a hospital in Region 2 that will undergo a verification survey by the American College of Surgeons – COT in June of 2013. With verified trauma centers, there is an increase in the level of care that supports a decrease in morbidity and mortality.

The Louisiana Emergency Response Network Board (LERN) has one program: Louisiana Emergency Response Network Board.

For additional information, see:

Department of Health and Hospitals

#### American College of Surgeons Committee on Trauma

#### Louisiana Emergency Response Network Board Budget Summary

	Prior Year Actuals 7 2011-2012	F	Enacted Y 2012-2013	isting Oper Budget of 12/01/12	Continuation TY 2013-2014	ecommended 'Y 2013-2014	Total commended ver/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 2,343,117	\$	2,933,373	\$ 2,957,141	\$ 2,975,861	\$ 1,758,479	\$ (1,198,662)
State General Fund by:							
Total Interagency Transfers	0		0	0	0	0	0
Fees and Self-generated Revenues	0		0	0	0	0	0
Statutory Dedications	28,411		0	0	0	0	0
Interim Emergency Board	0		0	0	0	0	0



# Louisiana Emergency Response Network Board Budget Summary

		Prior Year Actuals Y 2011-2012	F	Enacted 'Y 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total ecommended )ver/(Under) EOB
Federal Funds		0		0	0	0	0	0
<b>Total Means of Financing</b>	\$	2,371,528	\$	2,933,373	\$ 2,957,141	\$ 2,975,861	\$ 1,758,479	\$ (1,198,662)
Expenditures & Request:								
Louisiana Emergency Response Network Board	\$	2,371,528	\$	2,933,373	\$ 2,957,141	\$ 2,975,861	\$ 1,758,479	\$ (1,198,662)
Total Expenditures & Request	\$	2,371,528	\$	2,933,373	\$ 2,957,141	\$ 2,975,861	\$ 1,758,479	\$ (1,198,662)
Authorized Full-Time Equiva	lents	:						
Classified		7		7	7	7	5	(2)
Unclassified		0		0	0	0	2	2
Total FTEs		7		7	7	7	7	0



# 324\_1000 — Louisiana Emergency Response Network Board

Program Authorization: R.S. 40:2841 - 2846

#### **Program Description**

The mission of the Louisiana Emergency Response Network is to safeguard the public health, safety, and welfare of the people of the state of Louisiana against unnecessary trauma and time-sensitive related deaths and incidents of morbidity due to trauma.

The goals of the Louisiana Emergency Response Network are to:

- I. Decrease risk adjusted trauma-related deaths and incidents of morbidity and mortality due to trauma in Louisiana.
- II. Maximize the return on investment (ROI) of state dollars and supplement general fund dollars with alternative funding sources.
- III. Ensure that all citizens gain access to the statewide trauma network for both trauma and time sensitive related illnesses.
- IV. Establish and codify protocols that specify the role of LERN in Emergency Support Function 8 (ESF-8) activities.

Louisiana Emergency Response Network Board includes one activity: LERN Central Office and Call Center Operations.

	ior Year Actuals 2011-2012	F	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total commended ver/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 2,343,117	\$	2,933,373	\$ 2,957,141	\$ 2,975,861	\$ 1,758,479	\$ (1,198,662)
State General Fund by:							
Total Interagency Transfers	0		0	0	0	0	0
Fees and Self-generated Revenues	0		0	0	0	0	0
Statutory Dedications	28,411		0	0	0	0	0
Interim Emergency Board	0		0	0	0	0	0
Federal Funds	0		0	0	0	0	0
<b>Total Means of Financing</b>	\$ 2,371,528	\$	2,933,373	\$ 2,957,141	\$ 2,975,861	\$ 1,758,479	\$ (1,198,662)
Expenditures & Request:							
Personal Services	\$ 675,971	\$	854,042	\$ 854,462	\$ 814,497	\$ 789,643	\$ (64,819)

#### Louisiana Emergency Response Network Board Budget Summary



	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB
Total Operating Expenses	341,890	425,726	558,897	605,968	374,255	(184,642)
Total Professional Services	1,291,476	1,583,512	1,489,989	1,495,991	542,030	(947,959)
Total Other Charges	62,191	70,093	53,793	56,095	52,551	(1,242)
Total Acq & Major Repairs	0	0	0	3,310	0	0
Total Unallotted	0	0	0	0	0	0
Total Expenditures & Request	\$ 2,371,528	\$ 2,933,373	\$ 2,957,141	\$ 2,975,861	\$ 1,758,479	\$ (1,198,662)
Authorized Full-Time Equival	ents:					
Classified	7	7	7	7	5	(2)
Unclassified	0	0	0	0	2	2
Total FTEs	7	7	7	7	7	0

# Louisiana Emergency Response Network Board Budget Summary

# **Source of Funding**

The Louisiana Emergency Response Network Board program is funded with State General Fund.

#### Louisiana Emergency Response Network Board Statutory Dedications

Fund	A	ior Year Actuals 2011-2012	nacted 012-2013	isting Oper Budget of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total commend ver/(Unde EOB	
Overcollections Fund	\$	28,411	\$ 0	\$ 0	\$ 0	\$ 0	\$	0

# Major Changes from Existing Operating Budget

Ger	neral Fund	Т	otal Amount	Table of Organization	Description
\$	23,768	\$	23,768	0	Mid-Year Adjustments (BA-7s):
	,		,		
\$	2,957,141	\$	2,957,141	7	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
\$	(30,719)	\$	(30,719)	0	Louisiana State Employees' Retirement System Base Adjustment
\$	(732)	\$	(732)	0	Group Insurance Rate Adjustment for Active Employees
\$	(9,246)	\$	(9,246)	0	Group Insurance Base Adjustment
\$	(19,983)	\$	(19,983)	0	Salary Base Adjustment
\$	(16,572)	\$	(16,572)	0	Personnel Reductions
\$	(23,768)	\$	(23,768)	0	Non-recurring Carryforwards
\$	2,165	\$	2,165	0	Risk Management
\$	34	\$	34	0	UPS Fees



# Major Changes from Existing Operating Budget (Continued)

Ge	neral Fund	Т	otal Amount	Table of Organization	Description
\$	159	\$	159	0	Civil Service Fees
					Non-Statewide Major Financial Changes:
\$	(900,000)	\$	(900,000)	0	Leveraging of funds for LINCCA agreement between LCS and AMR, which LERN oversees
\$	(200,000)	\$	(200,000)	0	Reduction of staff hours from LERN Communications Center and elimination of Shreveport Call Center to provide centralized services in Baton Rouge
\$	1,758,479	\$	1,758,479	7	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
\$	1,758,479	\$	1,758,479	7	Base Executive Budget FY 2013-2014
\$	1,758,479	\$	1,758,479	7	Grand Total Recommended

#### **Professional Services**

Amount	Description
	Professional Services:
\$50,000	Legal - Contracts for attorneys
\$114,326	Management Consultant
\$158,120	Professional services for graphic design, data warehouse, strategic planning and a staffing contractor for management of daily operations state/regional
\$43,775	Medical Services; providing staffing for LERN communication centers, medical director and other doctors provide consultation related to trauma
\$366,221	Total Professional Services

### **Other Charges**

Amount	Description
	Other Charges
	This program does not have funding for Other Charges for Fiscal Year 2013-2014.
	Interagency Transfers:
\$10,160	Office of Risk Management
\$1,714	Civil Service Fees
\$196	Office of State Uniform Payroll
\$2,800	Office of State Mail Operations
\$41,122	Office of Telecommunications
\$55,992	SUB-TOTAL INTERAGENCY TRANSFERS



# Other Charges (Continued)

Amount	Description
\$55,992	TOTAL OTHER CHARGES

# **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.

# **Performance Information**

1. (KEY) Through the LERN Central Office and Communications Center Operations Activity, to continue the operational activity of the LERN Central Office and the LERN Communications Center located in Baton Rouge and Shreveport to encompass 100% of the citizens of Louisiana in directing the transport of traumatically injured patients to definitive care within sixty minutes of injury.

Children's Budget Link: Not Applicable

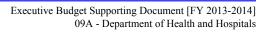
Human Resource Policies Beneficial to Women and Families Link: Not Applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

**Performance Indicators** 

			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of hospitals having emergency room services that participate in LERN (LAPAS CODE - 22965)	75%	82%	89%	89%	89%	89%
K Percentage of EMS agencies that participate in LERN (LAPAS CODE - 22328)	50%	60%	85%	85%	85%	85%
K Percentage of time where traumatically injured patients that were directed to an Emergency Department for definitive care did not require transfer to another facility for higher level resources (LAPAS CODE - 22329)	94%	95%	90%	90%	90%	90%







# 09-325 — Acadiana Area Human Services District

### Agency Description

The mission of the Acadiana Area Human Services District is to increase public awareness of and to provide access for individuals with behavioral health and developmental disabilities to integrated community based services while promoting wellness, recovery and independence through education and the choice of a broad range of programmatic and community resources.

The goals of the Acadiana Area Human Services District are to:

- I. Provide mental health, addictive disorders and developmental disabilities services that consumers, their families and communities want in a manner which provides them quick and convenient entry into services.
- II. Ensure that services provided are responsive to client concerns, integrated in service delivery methods, representative of best practice, and consistent with the goals of the Department of Health and Hospitals and its Program Offices.
- III. Promote healthy, safe lives for people by providing leadership in educating the community on the importance of prevention, early detection and intervention, and by facilitating coalition building to address localized community problems.

The Acadiana Area Human Services District focuses its treatment approach on the person and family in the provision of services and supports. The family is paramount to the treatment model and serves as the basis for individual and family treatment, recovery and wellness adaptation.

The Acadiana Area Human Services District is one program comprised of administrative, addictive disorders, developmental disabilities and mental health functions.

	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	xisting Oper Budget s of 12/01/12	Continuation 'Y 2013-2014	ecommended Y 2013-2014	Total ecommended wer/(Under) EOB
Means of Financing:						
State General Fund (Direct)	\$ 0	\$ 5 0	\$ 0	\$ 16,177,245	\$ 15,382,395	\$ 15,382,395
State General Fund by:						
Total Interagency Transfers	0	20,805,218	20,805,218	3,402,882	3,023,861	(17,781,357)
Fees and Self-generated Revenues	0	0	0	1,920,928	2,206,681	2,206,681
Statutory Dedications	0	0	0	0	0	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	0	0	0	34,660	23,601	23,601
Total Means of Financing	\$ 0	\$ \$ 20,805,218	\$ 20,805,218	\$ 21,535,715	\$ 20,636,538	\$ (168,680)

#### Acadiana Area Human Services District Budget Summary



	Prior Y Actu FY 2011	als	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation TY 2013-2014	ecommended Y 2013-2014	Total commended ver/(Under) EOB
Expenditures & Request:								
Acadiana Area Human Services District	\$	0	\$	20,805,218	\$ 20,805,218	\$ 21,535,715	\$ 20,636,538	\$ (168,680)
Total Expenditures & Request	\$	0	\$	20,805,218	\$ 20,805,218	\$ 21,535,715	\$ 20,636,538	\$ (168,680)
Authorized Full-Time Equiva	lents:							
Classified		0		0	0	0	0	0
Unclassified		0		0	0	0	0	0
Total FTEs		0		0	0	0	0	0



# 325\_1000 — Acadiana Area Human Services District

Program Authorization: Louisiana revised statutes (LSA-RS): R.S. 373.

#### **Program Description**

The mission of the Acadiana Area Human Services District is to increase public awareness of and to provide access for individuals with behavioral health and developmental disabilities to integrated community based services while promoting wellness, recovery and independence through education and the choice of a broad range of programmatic and community resources. The goals are the program are to:

- I. Provide mental health, addictive disorders and developmental disabilities services that consumers, their families and communities want in a manner which provides them quick and convenient entry into services.
- II. Ensure that services provided are responsive to client concerns, integrated in service delivery methods, representative of best practice, and consistent with the goals of the Department of Health and Hospitals and its Program Offices.
- III. Promote healthy, safe lives for people by providing leadership in educating the community on the importance of prevention, early detection and intervention, and by facilitating coalition building to address localized community problems.

The Acadiana Area Human Services District is one program comprised of administrative, addictive disorders, developmental disabilities and mental health functions.

- Administration: DHH, its program offices and the Louisiana Legislature have created a statewide integrated human services delivery system with local accountability and management to provide behavioral health and developmental disabilities services. The Acadiana Area Human Services District was created by Act 373 in the 2008 Legislative Session for the parishes of Acadia, Evangeline, Iberia, Lafayette, St. Landry, St. Martin and Vermilion.
- Addictive Disorders: Alcohol and drug abuse continues to be a major health problem in our state as well
  as in the Acadiana Area Human Services District catchment area. The basic premise of addictive disorder
  services is to develop ideas and programs that can help increase public awareness, treat adults and youth
  who need addictive disorder services and prevent the abuse of alcohol and drug addiction as well as compulsive gambling.
- Developmental Disabilities: Developmental Disabilities core services consist of serving as the Single Point of Entry (SPOE) into the Developmental Disabilities (DD) Services System and providing support coordination services to individuals and their families through DD and other available community resources. Targeted services are centered on Home and Community-Based Services Waiver, Family Support, and Cash Subsidy programs.
- Mental Health: Core services include screening, assessment, crisis evaluation, individual, group and family counseling, and medication management, which includes administration, education, and screening for people with co-occurring disorders. Service delivery includes full participation in the Louisiana Behavioral Health Partnership and the Coordinated System of Care and works as a participant in the Coordinated Care Network. All five Behavioral Health clinics in the Acadiana Area Human Services District participate as Medicaid Application Centers for persons requesting services.



	Prior Year Actuals FY 2011-2012		Enacted FY 2012-2013	Existing Oper Budget s of 12/01/12	Continuation FY 2013-2014	ecommended 'Y 2013-2014	Total ecommended over/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ (	)	\$ 0	\$ 0	\$ 16,177,245	\$ 15,382,395	\$ 15,382,395
State General Fund by:							
Total Interagency Transfers	(	)	20,805,218	20,805,218	3,402,882	3,023,861	(17,781,357)
Fees and Self-generated Revenues	(	)	0	0	1,920,928	2,206,681	2,206,681
Statutory Dedications	(	)	0	0	0	0	0
Interim Emergency Board	(	)	0	0	0	0	0
Federal Funds	(	)	0	0	34,660	23,601	23,601
Total Means of Financing	\$ (	)	\$ 20,805,218	\$ 20,805,218	\$ 21,535,715	\$ 20,636,538	\$ (168,680)
Expenditures & Request:							
Personal Services	\$ (	)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Total Operating Expenses	(	)	0	679,109	705,988	0	(679,109)
Total Professional Services	(	)	0	0	0	0	0
Total Other Charges	(	)	20,805,218	20,126,109	20,638,710	20,636,538	510,429
Total Acq& Major Repairs	(	)	0	0	191,017	0	0
Total Unallotted	(	)	0	0	0	0	0
Total Expenditures & Request	\$ (	)	\$ 20,805,218	\$ 20,805,218	\$ 21,535,715	\$ 20,636,538	\$ (168,680)
Authorized Full-Time Equiva	lents:						
Classified	(	)	0	0	0	0	0
Unclassified		)	0	0	0	0	0
Total FTEs	(	)	0	0	0	0	0

# Acadiana Area Human Services District Budget Summary

# Major Changes from Existing Operating Budget

Gene	eral Fund	To	otal Amount	Table of Organization	Description
\$	0	0 \$ 0		0	Mid-Year Adjustments (BA-7s):
\$	0 \$ 20,805,218		0	Existing Oper Budget as of 12/01/12	
					Statewide Major Financial Changes:
	(98,798)		(98,798)	0	Louisiana State Employees' Retirement System Base Adjustment
	(14,414)		(14,414)	0	Group Insurance Rate Adjustment for Active Employees



General Fund Total Amount Organization		Table of Organization	Description				
Ge		10		8	*		
	(4,847)		(4,847)	0	Group Insurance Rate Adjustment for Retirees		
	62,767		62,767	0	Salary Base Adjustment		
	(230,816)		(230,816)	0	Attrition Adjustment		
	172,251		172,251	0	Risk Management		
	4,506		4,506	0	UPS Fees		
	32,248		32,248	0	Civil Service Fees		
					Non-Statewide Major Financial Changes:		
	15,459,498		17,863,612	0	This adjustment places the revenue under the proper means of finance.		
	0		(17,230,195)	0	This agency first received an appropriation in the Governor's Executive Budget during the 2012 Regular Legislative Session. The funding was initially placed under Interagency Transfers to represent the funding they would receive from the Office of Behavioral Health, Office for Citizens with Developmental Disabilities, and the Office of the Secretary.		
	0		(724,994)	0	Reduction in budget authority from the Office of Behavioral Health for the Temporary Assistance for Needy Families (TANF) programs.		
\$	15,382,395	\$	20,636,538	0	Recommended FY 2013-2014		
\$	0	\$	0	0	Less Supplementary Recommendation		
\$	15,382,395	\$	20,636,538	0	Base Executive Budget FY 2013-2014		
\$	15,382,395	\$	20,636,538	0	Grand Total Recommended		

#### Major Changes from Existing Operating Budget (Continued)

Table of

# **Professional Services**

Amount	Description
	This program does not have funding for Professional Services for Fiscal Year 2013-2014.

# **Other Charges**

Amount	Description
	Other Charges:
\$12,077,636	Salaries and related benefits for Non T.O. FTE positions.
\$7,788,616	Funding to support mental health, substance abuse and developmental disabilities services
\$19,866,252	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$172,251	Payments to the Division of Administration - Office of Risk Management
\$32,248	Payments to the Department of Civil Service - Civil Service Fees
\$4,506	Payments to the Division of Administration - Uniform Payroll Services



# **Other Charges (Continued)**

Amount	Description
\$561,281	Misc Commodities and Services
\$770,286	SUB-TOTAL INTERAGENCY TRANSFERS
\$20,636,538	TOTAL OTHER CHARGES

# **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.

#### **Performance Information**

# 1. (KEY) Through the Addictive Disorders activity, to provide addictive disorder prevention services to children, adolescents and their families and treatment services to adults including inpatient care.

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

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

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).

Explanatory Note: The AAHSD is a new local governing entity pursuing transition of programmatic service functions from the Offices of Addictive Disorders, Developmental Disabilities and Mental Health in FY 2013/2014.



L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Ind Performance Standard as Initially Appropriated FY 2012-2013	licator Values Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K	Percentage of successful completions (24-hour residential programs) - AD Program (LAPAS CODE - 25040)	Not Applicable	Not Applicable	95%	95%	95%	95%
	FY 2012-2013: This is a new p The figure provided reflects da provided in the previous calend District. The data will be eval	ta provided by the l dar year. As of July	Region 4 Offices Add 2012, these service	s were transferred u	nder the auspices of	the Acadiana Area	Human Services
K	Primary Inpatient Adult: Percentage of individuals successfully completing the program - AD Program (LAPAS CODE - 25041)	Not Applicable	Not Applicable	85%	85%	85%	85%
	FY 2012-2013: This is a new The figure provided reflects da provided in the previous calend District. The data will be eval	ta provided by the l dar year. As of July	Region 4 Offices Add v 2012, these service	s were transferred u	nder the auspices of	the Acadiana Area	Human Services
K	Primary Inpatient Adolescent: Percentage of individuals successfully						

The figure provided reflects data provided by the Region 4 Offices Addictive Disorders, Developmental Disabilities and Mental Health for services provided in the previous calendar year. As of July 2012, these services were transferred under the auspices of the Acadiana Area Human Services District. The data will be evaluated by the Acadiana Area Human Services District to verify the accuracy of the prior year information provided.



#### Acadiana Area Human Services District General Performance Information

		Perfor	mance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012
otal number of individuals served in the cadiana Area Human Services District LAPAS CODE - 25043)	Not Available	Not Available	Not Available	9,450	11,13
FY 2012-2013: This is a new performance in The figure provided reflects data provided by provided in the previous calendar year. Data under the auspices of the Acadiana Area Hun verify the accuracy of the prior year informat	the Region 4 Offices A obtained from client s nan Services District.	atisfaction surveys,	FOMS. As of July 2	012, these services v	vere transferred
otal number of individuals served by utpatient mental health in Acadiana Area Iuman Services District (LAPAS CODE - 5044)	Not Available	Not Available	Not Available	6,663	6,51
FY 2012-2013: This is a new performance in The figure provided reflects data provided by provided in the previous calendar year. Data under the auspices of the Acadiana Area Hun verify the accuracy of the prior year informat	the Region 4 Offices A obtained from client s nan Services District.	atisfaction surveys,	FOMS. As of July 2	012, these services w	vere transferred
otal number of individuals served by inpatient addictive Disorders in Acadiana Area Human ervices District (LAPAS CODE - 25045)	Not Available	Not Available	Not Available	1,029	72
FY 2012-2013: This is a new performance in The figure provided reflects data provided by provided in the previous calendar year. Data under the auspices of the Acadiana Area Hun verify the accuracy of the prior year informat	the Region 4 Offices A obtained from client s nan Services District.	atisfaction surveys,	FOMS. As of July 2	012, these services w	vere transferred
otal numbers of individuals served by utpatient Addictive Disorders in Acadiana rea Human Services District (LAPAS CODE 25046)	Not Available	Not Available	Not Available	2,369	1,51
		Addictive Disorders	Developmental Disa	hilities and Mental F	
FY 2012-2013: This is a new performance in The figure provided reflects data provided by provided in the previous calendar year. Data under the auspices of the Acadiana Area Hun verify the accuracy of the prior year informat	obtained from client s nan Services District.	atisfaction surveys,	FOMS. As of July 2	012, these services w	vere transferred

under the auspices of the Acadiana Area Human Services District. The data will be evaluated by the Acadiana Area Human Services District to verify the accuracy of the prior year information provided.

#### 2. (KEY) Through the Developmental Disabilities activity, to foster and facilitate independence for citizens with disabilities through the availability of home and community based servcies.

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



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

Explanatory Note: The AAHSD is a new local governing entity pursuing transition of programmatic service functions from the Offices of Addictive Disorders, Developmental Disabilities and Mental Health in FY 2013/2014.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).

#### **Performance Indicators**

			Performance Ind	Performance Indicator Values					
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014			
K Number of people receiving individual and family support services (LAPAS CODE - 25048)	Not Applicable	Not Applicable	210	210	210	210			
FY 2012-2013: This is a new The figure provided reflects of July 2012, these services wer Acadiana Area Human Service	lata provided by the e transferred under t	Region 4 Developm he auspices of the A	cadiana Area Human	Services District.	1	2			
K Number of people									

receiving Flexible Family						
Funds (LAPAS CODE -						
25049)	Not Applicable	Not Applicable	209	209	209	209

FY 2012-2013: This is a new performance indicator.

The figure provided reflects data provided by the Region 4 Developmental Disabilities for services provided in the previous calendar year. As of July 2012, these services were transferred under the auspices of the Acadiana Area Human Services District. The data will be evaluated by the Acadiana Area Human Services District to verify the accuracy of the prior year information provided.



#### **Performance Indicators (Continued)**

Not Applicable

	Performance Indicator Values					
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of eligibility determinations determined valid according to the Flexible Family Fund promulgation (LAPAS CODE - 25050)	Not Applicable	Not Applicable	95%	95%	95%	95%
FY 2012-2013: This is a new The figure provided reflects of July 2012, these services wer Acadiana Area Human Service	lata provided by the e transferred under t	Region 4 Developme he auspices of the Ac	cadiana Area Human	Services District.	1	2
K Number of persons receiving DD services per year (LAPAS CODE -						

FY 2012-2013: This is a new performance indicator. The figure provided reflects data provided by the Region 4 Developmental Disabilities for services provided in the previous calendar year. As of July 2012, these services were transferred under the auspices of the Acadiana Area Human Services District. The data will be evaluated by the Acadiana Area Human Services District to verify the accuracy of the prior year information provided.

2,229

2,229

2,229

2,229

Not Applicable

#### 3. (KEY) Through the Mental Health activity, AAHSD will extend quality mental health and Cash Subsidy services to Children/Adolescents and Adults to the District target population, with client satisfication feedback that meets threshold.

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

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

Explanatory Note: The AAHSD is a new local governing entity pursuing transition of programmatic service functions from the Offices of Addictive Disorders, Developmental Disabilities and Mental Health in FY 2013/2014.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).



25051)



L e v e Performance Indicator Name	Performance Indicator Values						
	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Leve FY 2013-2014	
K Number of adults served with MH services in all Acadian Area Human Services District Behavioral Health clinics (LAPAS CODE - 25052)	Not Applicable	Not Applicable	5,700	5,700	5,700	5,70	
FY 2012-2013: This is a new The figure provided reflects da provided in the previous calen District. The data will be eva	ata provided by the dar year. As of Jul	Region 4 Offices Ade y 2012, these service	s were transferred ur	ider the auspices of	the Acadiana Area	Human Services	
K Number of children/ adolescents served with MH services in all Acadian Area Human Services District Behavioral Health clinics. (LAPAS CODE - 25053)	Not Applicable	Not Applicable	975	975	975	97	
FY 2012-2013: This is a new The figure provided reflects da provided in the previous calen District. The data will be eva	ata provided by the dar year. As of Jul	Region 4 Offices Ade y 2012, these service	s were transferred ur	nder the auspices of	the Acadiana Area	Human Services	
K Percentage of adults receiving MH services that report that they would choose services in this agency if given a choice to receive services elsewhere. (LAPAS CODE - 25054)	Not Applicable	Not Applicable	90%	90%	90%	909	
FY 2012-2013: This is a new The figure provided reflects da provided in the previous calen District. The data will be eva	performance indica ata provided by the ndar year. As of Jul	ator. Region 4 Offices Ad y 2012, these service	s were transferred ur	nder the auspices of	the Acadiana Area	alth for services	
K Percentage of MH clients who would recommend services in this agency to others. (LAPAS CODE - 25055)	Not Applicable	Not Applicable	90%	90%	90%	909	
FY 2012-2013: This is a new The figure provided reflects da provided in the previous calen District. The data will be eva	performance indica ata provided by the adar year. As of Jul	Region 4 Offices Ade y 2012, these service	s were transferred ur	nder the auspices of	the Acadiana Area	Human Services	
K Percentage of MH Flexible Family Fund slots utilized (LAPAS CODE - 25056)	Not Applicable	Not Applicable	94%	94%	94%	94%	
FY 2012-2013: This is a new The figure provided reflects day provided in the previous calen District. The data will be eva	ata provided by the ndar year. As of Jul	Region 4 Offices Ade y 2012, these service	s were transferred ur	nder the auspices of	the Acadiana Area	Human Services	



#### 4. (KEY) Through the administrative activity, AAHSD will provide for the management and operational activities of services for addictive disorders, developmental disabilities and behavioral health.

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

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

Explanatory Note: The AAHSD is a new local governing entity pursuing transition of programmatic service functions from the Offices of Addictive Disorders, Developmental Disabilities and Mental Health in FY 2013/2014.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).



	Performance Indicator Values					
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of Acadiana Area Human Services District clients who state they would continue to receive services at our clinics if given the choice to go elsewhere (LAPAS CODE - 25057)	Not Applicable	Not Applicable	90%	90%	90%	90%
FY 2012-2013: This is a new The figure provided reflects d provided in the previous caler under the auspices of the Aca verify the accuracy of the prior	ata provided by the l ndar year. Data obta diana Area Human S	Region 4 Offices Addined from client satis Services District. The services of	sfaction surveys, TO	MS. As of July 20	12, these services we	ere transferred
K Percentage of Acadiana Area Human Services District clients who state they would recommend the clinics to family and friends (LAPAS CODE -						

The figure provided reflects data provided by the Region 4 Offices Addictive Disorders, Developmental Disabilities and Mental Health for services provided in the previous calendar year. Data obtained from client satisfaction surveys, TOMS. As of July 2012, these services were transferred under the auspices of the Acadiana Area Human Services District. The data will be evaluated by the Acadiana Area Human Services District to verify the accuracy of the prior year information provided.



# 09-326 — Office of Public Health



# Agency Description

The mission of the Office of Public Health (OPH) is to:

- Promote health through education that emphasizes the importance of individual responsibility for health and wellness.
- Enforce regulations that protect the environment and to investigate health hazards in the community.
- Collect and distribute information vital to informed decision-making on matters related to individual, community, and environmental health.
- Provide for leadership for the prevention and control of disease, injury, and disability in the state.
- Provide assurance of essential preventive health care services for all citizens and a safety net for core public health services for the underserved.

The goals of the Office of Public Health are to:

- I. Reduce illness, disability and premature death.
- II. Elevate the health status of our population.
- III. Protect the quality of our physical environment.
- IV. Improve our social and health care environments.

The Office of Public Health is dedicated to the development, implementation and management of public health services for the citizens of Louisiana. The agency promotes the physical, mental and social health of infants, children, adolescents, women, families and communities through these services via health information/statistics, environmental health, chronic diseases/health promotion, preventive health, epidemiology/surveillance, and access to essential health care services.

The Office of Public Health has one appropriated program, the Public Health Services Program.

For additional information, see:

Office of Public Health

Centers for Disease Control and Prevention

Louisiana Health Finder



### Office of Public Health Budget Summary

		Prior Year Actuals Y 2011-2012	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation Y 2013-2014	ecommended Y 2013-2014	Total ecommended over/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	29,278,164	\$	34,840,392	\$ 34,840,392	\$ 50,002,730	\$ 35,976,007	\$ 1,135,615
State General Fund by:								
Total Interagency Transfers		19,623,983		23,166,988	23,166,988	23,224,264	17,748,281	(5,418,707)
Fees and Self-generated Revenues		24,050,764		25,239,561	25,239,561	22,475,552	26,400,000	1,160,439
Statutory Dedications		8,818,523		6,960,152	6,960,152	6,981,990	6,938,227	(21,925)
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		222,773,392		243,841,368	247,375,833	243,886,958	237,866,451	(9,509,382)
Total Means of Financing	\$	304,544,826	\$	334,048,461	\$ 337,582,926	\$ 346,571,494	\$ 324,928,966	\$ (12,653,960)
Expenditures & Request:								
Public Health Services	\$	304,544,826	\$	334,048,461	\$ 337,582,926	\$ 346,571,494	\$ 324,928,966	\$ (12,653,960)
Total Expenditures & Request	\$	304,544,826	\$	334,048,461	\$ 337,582,926	\$ 346,571,494	\$ 324,928,966	\$ (12,653,960)
Authorized Full-Time Equiva	lents	:						
Classified		1,443		1,343	1,343	1,343	1,134	(209)
Unclassified		20		20	20	20	14	(6)
Total FTEs		1,463		1,363	1,363	1,363	1,148	(215)



### 326\_2000 — Public Health Services

Program Authorization: R.S. 46:971-972; R.S. 17:2111-2112; R.S. 33:1563; R.S. 46; 2261-2267; R.S. 46:973-974; R.S. 40:31.33; U.S.C. 7019 (Maternal and Child Health Services Block Grant, Title V of the Social Security Act); Omnibus Budget Reconciliation Acts of 1981 and 1989; P.L. 101-239; Title XIX of the Social Security Act, as amended (42 CFR), R.S. 40:1299 thru 1299.5, Child Nutrition Act of 1966 as amended by Public Law 105-24, July 3, 1997, R.S. 46:447.1; Title V Maternal and Child Health; Section 502; Social Security Act Title XIX (P.L. 95-613); (P.L. 95-91); (P.L. 95-83); Title X, 42 U.S.C. 701:42 U.S.C. 3000. R.S. 40:5; Act 16; 42 U.S.C. 241(a), 243(b), 247(c); Health Omnibus Programs Extension (HOPE) Act; Title XXV; Public Law 100-607; Comprehensive AIDS Resources Emergency Act of 1990 (Title XXVI), R.S. 40:4,5; RS 17:170; 42 U.S.C. 2476 (Section 317 of the Public Health Act), R.S. 40:5; RS 40:1061-1068; RS 40:3.1; Public Law 105-17, 97', Individuals with Disabilities Education Act (IDEA); State Sanitary Code, Chapter II, 42 U.S.C., 247c (Public Health Service Act 318); Public Law 95-626, R.S. 40:4,5. 40:28-29; RS 40:17, R.S. 40: 5,7, 18; RS 40:1275 thru 1278; 42 U.S.C. 246, Louisiana State Sanitary Code, Chapters I, II, XII, XIV, XXIII, XXIV; R.S. 17:3051, R.S. 40:2195, 40:1300.1 - 40:1300.5.

### **Program Description**

The mission of the Public Health Services Program:

- Operate a centralized vital event registry and health data analysis office for the government and people of the state of Louisiana. To collect, transcribe, compile, analyze, report, preserve, amend, and issue vital records including birth, death, fetal death, abortion, marriage, and divorce certificates and operate the Louisiana Putative Father Registry, the Orleans Parish Marriage License Office, and with recording all adoptions, legitimatizations, and other judicial edicts that affect the state's vital records. To also maintain the state's health statistics repository and publishes the Vital Statistics Reports and the Louisiana Health Report Card.
- Provide for and assure educational, clinical, and preventive services to Louisiana citizens to promote reduced morbidity and mortality resulting from:
  - Chronic diseases;
  - Infectious/communicable diseases;
  - High risk conditions of infancy and childhood;
  - Accidental and unintentional injuries.
- Provide for the leadership, administrative oversight, and grants management for those programs related to the provision of preventive health services to the citizens of the state.
- Promote a reduction in infectious and chronic disease morbidity and mortality and a reduction in communicable/infectious disease through the promulgation, implementation and enforcement of the State Sanitary Code.

The goals of the Office of Public Health are to:

- I. Reduce illness, disability, and premature death
- II. Elevate the health status of our population
- III. Protect the quality of our physical environment



### IV. Improve our social and health care environments

The Public Health Services Program includes the following activities: Vital Records and Statistics, Maternal and Child Health (MCH), Immunization, Nutrition/Women Infants and Children (WIC), Communicable Diseases, Family Planning and Pharmacy, Injury Surveillance and Prevention, Emergency Medical Services, Community Preparedness, Laboratory Services, Primary Care and Community Health Access, Grants Administration, Sanitarian Services, Public Health Engineering, and the Section of Environmental Epidemiology and Toxicology.

### Public Health Services Budget Summary

		Prior Year Actuals Y 2011-2012	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation Y 2013-2014	ecommended Y 2013-2014	Total ecommended over/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	29,278,164	\$	34,840,392	\$ 34,840,392	\$ 50,002,730	\$ 35,976,007	\$ 1,135,615
State General Fund by:								
Total Interagency Transfers		19,623,983		23,166,988	23,166,988	23,224,264	17,748,281	(5,418,707)
Fees and Self-generated Revenues		24,050,764		25,239,561	25,239,561	22,475,552	26,400,000	1,160,439
Statutory Dedications		8,818,523		6,960,152	6,960,152	6,981,990	6,938,227	(21,925)
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		222,773,392		243,841,368	247,375,833	243,886,958	237,866,451	(9,509,382)
Total Means of Financing	\$	304,544,826	\$	334,048,461	\$ 337,582,926	\$ 346,571,494	\$ 324,928,966	\$ (12,653,960)
Expenditures & Request:								
Personal Services	\$	109,946,641	\$	110,686,366	\$ 110,686,366	\$ 110,435,118	\$ 103,365,036	\$ (7,321,330)
Total Operating Expenses		23,887,267		27,129,284	27,129,284	29,090,495	26,895,574	(233,710)
Total Professional Services		11,842,016		17,800,408	17,800,408	18,277,995	14,463,990	(3,336,418)
Total Other Charges		157,876,027		176,849,558	180,384,023	184,557,296	179,159,466	(1,224,557)
Total Acq & Major Repairs		992,875		1,582,845	1,582,845	4,210,590	1,044,900	(537,945)
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	304,544,826	\$	334,048,461	\$ 337,582,926	\$ 346,571,494	\$ 324,928,966	\$ (12,653,960)
Authorized Full-Time Equiva	lents	:						
Classified		1,443		1,343	1,343	1,343	1,134	(209)
Unclassified		20		20	20	20	14	(6)
Total FTEs		1,463		1,363	1,363	1,363	1,148	(215)



### **Source of Funding**

This program is funded with State General Fund, Interagency Transfers, Fees and Self-generated Revenues, Statutory Dedications and Federal Funds. Interagency Transfers include funds received from the Medical Vendor Program for medical services to Medicaid eligible patients; the Office of Management and Finance for providing emergency medical service training; the Department of Environmental Quality for coliform analysis. Fees and Self-generated Revenues are comprised of donated funds utilized for provision of child car safety seats on a loaned basis; patient fees or third party reimbursements received for medical services rendered; manufacturer's rebates received from infant formula purchases in the Women, Infants, and Children (WIC) Nutrition Program; local funds generated by parish mileage or contributions for parish health units; and allocation for drivers' license sales and fees for testing charged in the Emergency Medical Services activity. Federal sources of funding include funds for AIDS Prevention, Drugs, New Initiatives, and Reporting; a grant from the Center for Disease Control (CDC) to study behavioral risk factors; the USDA Commodity Supplemental Food and WIC Program grants; the Family Planning Title 10 Grant; the Healthy Futures Case Management Grant for at-risk pregnant women; the Immunization Grant for Children; a Laboratory Training Grant; the Maternal and Child Health Grant; the Preventive Health Grant; and the Sexually Transmitted Disease Control Grant. Statutory Dedications are from the Louisiana Fund (R.S.39:98.6.(8)), the Louisiana Health Care Redesign Fund (R.S.39:100.51), the Overcollections Fund (R.S.39:100.21), the Emergency Medical Technician Fund (R.S.40:1236.5) and the OverCollections Fund. (Per R.S. 39:36B. (8), see table below for a listing of expenditures out of each Statutory Dedication Fund.)

### **Public Health Services Statutory Dedications**

Fund	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB
Vital Records Conversion Fund	\$ 57,137	\$ 57,137	\$ 57,137	\$ 57,137	\$ 39,404	\$ (17,733)
Emergency Medical Technician Fund	11,674	13,192	13,192	13,192	9,000	(4,192)
Oyster Sanitation Fund	55,292	55,292	55,292	33,454	55,292	0
Overcollections Fund	1,260,317	0	0	21,838	0	0
Louisiana Fund	7,434,103	6,834,531	6,834,531	6,856,369	6,834,531	0

### Major Changes from Existing Operating Budget

Ge	eneral Fund	1	otal Amount	Table of Organization	Description		
\$	0	\$	3,534,465	0	Mid-Year Adjustments (BA-7s):		
\$	34,840,392	\$	337,582,926	1,363	Existing Oper Budget as of 12/01/12		
					Statewide Major Financial Changes:		
	(200,939)		(200,939)	0	Louisiana State Employees' Retirement System Base Adjustment		
	0		(123,790)	0	Group Insurance Rate Adjustment for Active Employees		
	0		(142,533)	0	Group Insurance Rate Adjustment for Retirees		
	0		(50,309)	0	Group Insurance Base Adjustment		
	0		5,197,829	0	Salary Base Adjustment		



### Major Changes from Existing Operating Budget (Continued)

General Fund	Total Amount	Table of Organization	Description
0	(2,923,696)	0	Attrition Adjustment
0	(9,487,620)	(154)	Personnel Reductions
0	1,044,900	0	Acquisitions & Major Repairs
(405,567)	(1,582,845)	0	Non-Recurring Acquisitions & Major Repairs
44,500	44,500	0	Risk Management
2,716,671	2,716,671	0	Rent in State-Owned Buildings
3,879	3,879	0	Maintenance in State-Owned Buildings
2,302	2,302	0	Capitol Police
(272)	(1,598)	0	UPS Fees
(10,372)	(10,372)	0	Civil Service Fees
14,316	14,316	0	State Treasury Fees
(4,751)	(27,947)	0	Office of Computing Services Fees
(63,087)	(63,087)	0	Administrative Law Judges
			Non-Statewide Major Financial Changes:
0	(1,518,556)	0	Annualize mid-year cost reduction due to the transition of the 1st Time Mothers Home Visit Program to Bayou Health.
(88,917)	(472,830)	(11)	The Vaccines for Children program is being transitioned to private providers.
(487,116)	(487,116)	(16)	Annualize mid-year reduction- Reduction of 16 vacant T.O. positions.
(1,200,000)	(1,200,000)	0	Annualize mid-year reduction- Central Office operational costs for School Based Health Clinics reduction
(204,074)	(204,074)	(2)	Annualize mid-year reduction- 2 vacant T.O. positions in Vital Records and 7 Westaff temporary employees reduction
(346,000)	(346,000)	0	Annualize mid-year reduction- Genetics contracts reduction
(102,678)	(102,678)	(1)	Annualize mid-year reduction- One Engineering staff position will be transferred from State General Fund to Federal Funds.
(416,090)	(416,090)	(11)	OPH is realigning its sexually transmitted disease (STD) treatment resources and will provide STD services in each PHU in alignment with disease prevalence
(793,935)	(793,935)	(8)	Closure of low volume Children's Special Health Services Clinics
0	(87)	0	Decrease in appropriated amount based on projected collections for Emergency Medical Technician Fund
(250,000)	(250,000)	(2)	Reduction in expenditures for Rural Health Grant Match
(85,000)	(85,000)	(2)	Annualize mid-year reduction- Savings achieved through attrition and reorganization and reduce 2 T.O.
(225,000)	(225,000)	(3)	Bureau of Emergency Management Services and Louisiana Emergency Response Network merger to streamline operations
(162,255)	(162,255)	(1)	Annualize mid-year reduction - Practice Management Unit Services and Community Health Support Services Reductions
4,200,000	0	0	Means of finance substitution replacing Fees and Self-generated Revenues and Federal Funds with State General Funds



### Major Changes from Existing Operating Budget (Continued)

Ge	eneral Fund	Т	otal Amount	Table of Organization	Description
	(800,000)		(800,000)	(4)	Reduction to Primary Care and Rural Health- Adolescent School Health Program
\$	35,976,007	\$	324,928,966	1,148	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
\$	35,976,007	\$	324,928,966	1,148	Base Executive Budget FY 2013-2014
φ	33,970,007	φ	524,928,900	1,140	Dase Executive Dudget F1 2013-2014
\$	35,976,007	\$	324,928,966	1,148	Grand Total Recommended

### **Professional Services**

Amount	Description
	Professional Services
\$59,500	Management and Consulting Services for the Oral Health Program to assess the oral health status of third grade children in Louisiana; provide guidance for the school based health dental sealant program.
\$81,920	Engineering & Architectural services for Operations and Support.
\$6,493,361	Medical & Dental Services for (but not limited to): Family Planning, TB, Maternity/STD, Preventive, WIC, Ophthalmology, Urology, Pediatrics etc. with private and institutional contractors.
\$6,201,039	Other professional services for (but not limited to): Hospital Coordinator, Interpreters, Immunization, Injury Prevention Coordinators, Infant Monitoring Reduction Initiative Program, Nurse Family Partnership program, Student Loan Repayment Program, Commercial Body Art and Tanning Facility Inspections, Statewide Breastfeeding Promotion, Special Agents for Burial Transit Permits, Plumbing variance and appeals, Training, Facility Inspections, Coordination of pesticide-related health complaint Investigation Services, Infant Coordinated Care and Follow-up services.
\$1,548,170	Teen Outreach Program to prevent Teen Pregnancy.
\$40,000	Legal services for public water system loans.
\$40,000	Medical Toxicology Services for Environmental Epidemiology and Toxicology.
\$14,463,990	TOTAL PROFESSIONAL SERVICES

### **Other Charges**

Amount	Description
	Other Charges:
\$20,911,540	Flow through contracts for AIDS Drug Assistance Program (ADAP).
\$43,000	Provision of foreign language interpretation through language line services.
\$157,428	EMS Examination and Oversight Services.
\$539,536	Genetic Disease Screening, Lead Prevention Laboratory Services and Medical Laboratory Services.
\$119,000	Contract to provide accounting and consulting services.
\$152,000	Contract to provide grant deliverables for the Performance Improvement Manager Federal Grant.



### **Other Charges (Continued)**

Amount	Description
\$7,299,945	Maternal & Child Health services for primary care, counseling, referral and social services for pregnant adolescents and adults; contracts for Nurse Family Partnership Nurse statewide to serve at risk populations.
\$95,430,950	WIC services for issuance of WIC food vouchers statewide.
\$9,457,293	Contracts with various providers statewide to provide WIC services to eligible clients, nutrition education, contracts for WIC financial assistance services and WIC outreach services.
\$4,825,000	Contract to distribute statewide Food for Families, Food for Seniors and the Commodity Supplemental Food Program.
\$668,192	Children's Special Health Services statewide for provision of hearing, vision, dental and orthodontist services; Physician Services for high risk pediatric patients statewide.
\$262,568	Family Planning Clinical Services; Sterilization Vouchers; Medicaid collections for Family Planning services; Family Planning Medical Director.
\$118,420	Tuberculosis Medical Services.
\$182,192	Provide outreach and screening services for Syphilis Elimination efforts.
\$30,000	Medicaid Billing for Immunization services statewide.
\$507,000	Moving costs associated with the relocation of the OPH Laboratory from Metairie to Baton Rouge.
\$387,592	Contract services for the upgrading of the Infectious Disease Reporting System (IDRS); lab data reporting of infectious diseases for the HIV/AIDS Program.
\$15,288,461	HIV/AIDS education, outreach, and prevention services.
\$20,000	Contract to provide pathology consultations to the Office of Public Health Laboratory as required by federal laboratory regulations.
\$907,430	Contract to sustain and build capacity for volunteer recruitment in advance of and during emergencies and disasters both natural and man-made disasters.
\$2,776,882	Support initiatives for tobacco cessation, treatment of chronic diseases, support for rural community hospitals and health centers statewide.
\$353,850	Contract to provide a statewide toll-free health information and service referral system targeted toward pregnant women, new mothers, teenagers & children.
\$150,000	Contract to provide statewide IT Technical support for all CDC mandated programs.
\$415,172	Contract to provide ongoing Public Health Automated Management Enabler (PHAME) enhancement and maintenance support.
\$412,912	Contracts with the LSU Health Sciences Centers to provide specialized Sickle Cell patient care.
\$537,751	Contract for ongoing maintenance and enhancements to the Health Alert Network System (HAN).
\$205,000	Contract to provide staffing support for special needs shelters during a declared emergency.
\$16,176	Contract to revise the Medical Special Needs Shelter and Strategic National Stockpile online training courses.
\$351,080	Contract services to enhance wellness policies, implement public relations and media campaign to promote health wellness goals.
\$491,380	Medical and Clerical Operation of the Delgado Clinic for the treatment of Sexually Transmitted Diseases.
\$317,359	Contract to provide and support maintenance for the Louisiana Electronic Events Registration System (LEERS) used to record electronic registration of vital events.
\$130,977	Molluscan Shellfish program technical support; Oyster Water analysis, beach monitoring, GIS mapping and field surveys, Beach Warning Sign maintenance at Fountainbleau State Park, Grand Isle State Park and Grand Isle Beach for The Beach Monitoring Program.
\$130,000	Contracts to provide consulting services to help make decisions to better leverage the Drinking Water Revolving Loan Fund Program; develop marketing materials for the Drinking Water Revolving Loan Program.
\$3,105,120	Contracts with various providers to support program services and grant deliverable to all programs statewide within the Office of Public Health.
\$166,701,206	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$307,467	Civil Service Fees.
\$16,006	Treasurer's Office.



### **Other Charges (Continued)**

Amount	Description
\$42,236	Comprehensive Public Training Program (DOA).
\$62,936	Uniform Payroll System (UPS).
\$187,715	Legislative Auditor's Fees.
\$24,188	Administrative Law Fees.
\$220,511	Office of Computing Services.
\$275,604	Louisiana Office of State Printing for printing of various educational documents, brochures, parish profiles, etc. for distribution to clients receiving health services and for sharing reports providing statistics and other pertinent health related data.
\$113,331	Dept. of Public Safety - Capital Area Police.
\$1,280,717	Office of Risk Management Premium.
\$144,841	Maintenance of state buildings.
\$4,798,768	Rental of state owned buildings.
\$2,626,946	Office of Telecommunications Management.
\$1,177,429	Capital Area Human Services Authority for Nurse Family Partnership Services.
\$65,665	Metropolitan Human Services District for Nurse Family Partnership Services.
\$35,000	University of New Orleans to hire student labor to assist the WIC Program.
\$4,000	Prison Enterprises for manufacturing of beach advisory signs for the Beach Monitoring Program.
\$200,000	Department of Health and Hospital Office of Information Technology.
\$805,930	Jefferson Parish Human Services Authority for Nurse Family Partnership Services.
\$68,670	LSU Coastal Studies Institute to prepare updated digital imagery for Louisiana Coastal Area.
\$300	State Fire Marshall.
\$12,458,260	SUB-TOTAL INTERAGENCY TRANSFERS

\$179,159,466 TOTAL OTHER CHARGES

### **Acquisitions and Major Repairs**

Amount	Description					
	Acquisitions and Major Repairs					
\$1,044,900	Funding for the replacement and repairs of obsolete, inoperable, or damaged equipment					
\$1,044,900	TOTAL ACQUISITIONS AND MAJOR REPAIRS					

### **Performance Information**

1. (KEY) Through the Vital records & Statistics activity, to process Louisiana vital event records and requests for emergency document services annually each year through June 30, 2016.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: Not Applicable



Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Department of Health and Hospitals, Roadmap for a Healthier Louisiana (2011 Business Plan)

### **Performance Indicators**

			Performance Ind	icator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of vital records processed annually (LAPAS CODE - 2528)	172,000	164,694	172,000	172,000	170,000	170,000
S Percentage of emergency document service requests filled within 24 hours (LAPAS CODE - 2549)	98%	99%	98%	98%	98%	98%
S Percent of mail requests filled within two weeks (LAPAS CODE - 2548)	85%	89%	90%	90%	90%	90%
S Percentage of records processed on a current flow basis within 30 days of receipt (LAPAS CODE - 13748)	80%	83%	85%	85%	90%	90%
S Percentage of walk-in customers served within 30 minutes (LAPAS CODE - 2547)	60%	94%	85%	85%	90%	90%

1. Vital Records are processed and accepted through either the OPH Vital Records Central Office or the parish health units throughout the state. The local offices forward records to the OPH Central Office where they are reviewed for accuracy and consistency with all of the other documents which are received by the Registry. Once reviewed, the records receive an official record number and the death, birth, and Orleans marriage certificates are available for sale through our numerous retail outlets. The number of vital records processed is derived from the offices records of all new vital events registered with them for the performance period. This includes statewide births, deaths, marriages, divorces, abortions, and fetal deaths.

2. The percentage of walk-in customers served within 30 minutes for Continuation in FY2012-13 is based on increased participation through LEERS and increased information available via CRS website.

### **Public Health Services General Performance Information**

	Performance Indicator Values						
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012		
Birth record intake (LAPAS CODE - 11227)	69,271	64,974	68,099	68,480	63,506		
Death record intake (LAPAS CODE - 11229)	43,838	41,109	42,657	41,918	43,745		
Marriage record intake (LAPAS CODE - 11231)	32,000	48,537	32,242	35,479	32,723		
Divorce record intake (LAPAS CODE - 11232)	19,479	15,955	14,769	13,410	15,723		
Abortion record intake (LAPAS CODE - 11234)	5,655	12,636	13,441	11,572	8,583		



Performance Indicator Values						
Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012		
629	434	435	426	414		
170,872	183,645	171,643	171,285	164,694		
494,535	563,131	536,207	538,276	511,395		
	Actual FY 2007-2008 629 170,872	Prior Year Actual FY 2007-2008Prior Year Actual FY 2008-2009629434170,872183,645	Prior Year Actual FY 2007-2008Prior Year Actual FY 2008-2009Prior Year Actual FY 2009-2010629434435170,872183,645171,643	Prior Year Actual FY 2007-2008Prior Year Actual FY 2008-2009Prior Year Actual FY 2009-2010Prior Year Actual FY 2010-2011629434435426170,872183,645171,643171,285		

#### **Public Health Services General Performance Information (Continued)**

### 2. (SUPPORTING)Through the EMS activity, to develop an adequate medical workforce by mobilizing partnerships, developing policies and plans, enforcing laws, regulations, and assuring a competent workforce each year through June 30, 2016.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: Not Applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

#### **Performance Indicators**

L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Ind Performance Standard as Initially Appropriated FY 2012-2013	licator Values Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
S Percent increase of EMS workforce in Louisiana (LAPAS CODE - 24154)	8%	9%	1%	1%	1%	1%
S Number of EMS personnel newly certified (LAPAS CODE - 24155)	3,500	3,706	1,000	1,000	1,000	1,000
S Number of EMS personnel re-certified (LAPAS CODE - 24156)	5,000	9,526	8,459	8,459	8,459	8,459
S Total number of EMS workforce (LAPAS CODE - 24157)	24,840	18,561	16,500	16,500	16,500	16,500

1. The number of total number of all active EMS personnel in the current year divided by the total number of active EMS personnel in the previous fiscal year. The total number of newly certified EMS personnel issued during current the current fiscal year. The total number of EMS personnel that applied and received re-certification in the current fiscal year. The certification is valid for a two year period. The total of EMS personnel issued a valid Louisiana EMS certification for the current fiscal year.

2. The current EMS personnel levels within the state of Louisiana have been at a stable level for several years. For SFY12, a slight decrease in the overall recertification numbers has been noted and may be attributed to the current economic downturn in the nation. Also, in the past year, several EMS agencies have ceased operation and this has had a minor impact on levels of certification within the state. For SFY13, the current economic downturn and revisions based on historical data have contributed to the decrease.



### 3. (SUPPORTING)Through the Community Preparedness activity to build healthy, resilient communities and enhance Louisianas state and local public health agencies capacities to prepare for, detect, and respond to chemical and biological terrorism and other communicable disease threats each year through June 30, 2016.

Children's Budget Link: Not Applicable.

Human Resource Policies Beneficial to Women and Families Link: Not Applicable.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable.

### **Performance Indicators**

				Performance Ind	licator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
S	Obtain a 43% Metropolitan Composite Mass Dispensing and Distribution Score (LAPAS CODE - 24158)	43%	100%	43%	43%	43%	43%
	1. This is a new performance i overall Metropolitan Compos						the minimum

2. The Centers for Disease Control and Prevention (CDC) has changed the way in which states are to be scored for the 2011-2012 funding year. The composite score is a score based on the State Technical Assistance Review (TAR) Score and Regional TAR Scores.

### 4. (SUPPORTING)The Injury Surveillance and Prevention activity will reduce the burden of injuries through their surveillance and prevention activities each year through June 30, 2016.

Children's Budget Link: Not Applicable.

Human Resource Policies Beneficial to Women and Families Link: Not Applicable.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable.



Yearend	Performance			
Performance Actual Yearend Performance Indicator Standard Performance Name FY 2011-2012 FY 2011-2012	Standard as I Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
Reduce injury mortality rate by 1% each year (LAPAS CODE - 24159)84%70%	6 79%	79%	79%	79%
Unintentional fall related Injury mortality rate among older adults (age 65 and older) reduced by 1% each year (LAPAS CODE - 24517) 20.9 27.	8 29.7	29.7	29.7	29.7

2. The value reported in the performance at continuation budget level FY 2012-2013 is updated with final 2008 injury mortality rates for all injury types and intent (78.7 injury deaths) per 100,000 Louisiana population and for unintentional fall-related injury mortality (29.7 per 100,000) information.

### 5. (KEY) Through the Maternal Child Health activity, to reduce infant & child mortality & incidence of preventable diseases by providing primary & preventive services to improve the health of pregnant women, infants, children, & adolescents. Assure comprehensive health care & subspecialty health care for children with special health care needs each year through June 30, 2016.

Children's Budget Link: Maternal and Child Health activities are linked via the Children's Cabinet and funded under the Children's Budget. Goal 1. To create a seamless system of care through the integration of services and resources. Goal 3. To achieve measurable improvements in the outcomes of all children in Louisiana.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by providing access and provision of primary and preventive health care services to women, infants and children.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Department of Health and Hospitals, Roadmap for a Healthier Louisiana (2011 Business Plan)

Explanatory Note: Not Applicable



			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Infant Mortality Rate (LAPAS CODE - 24160)	9.1	8.8	9.0	9.0	8.5	8.5
S Child Death Rate among children age 14 and younger due to motor vehicle crashes per 100,000 children (LAPAS CODE - 24161)	5.1	4.8	5.0	5.0	4.7	4.7
K Number of Nurse Family Partnership home visits (LAPAS CODE - 20139)	34,250	36,257	46,826	46,826	46,826	40,700

1. Infant Mortality Rate is deaths under 1 per 1000 live births. This is a global measure for nation, state, community health overall, pregnancy, and infant health. Number of deaths to children aged 14 years and younger caused by motor vehicle crashes divided by the total number of children in the State aged 14 years and younger. This includes all occupant, pedestrian, motorcycle, bicycle, etc. deaths caused by motor vehicles. The number of home visits provided to at-risk pregnant women and children is derived from monthly reports sent in from the regions to the NFP Program and from the COMPASS patient encounter billing system.

2. The target for 2013-2014 must be set at a level not already reached. For infant mortality, a rate of 9.1 was attained for 2007, requiring that the target be lowered to keep Louisiana striving to improve the infant mortality rate. As health measures do not change rapidly, a target of 9.0 per 1,000 is reasonable based on these criteria. Similarly, the child death rate among children age 14 and younger due to motor vehicle crashes (per 100,000 children) was 5.1 deaths in that age range in 2008. Therefore, striving for a lower rate in the subsequent year is warranted for Louisana. A target of 5.0 per 100,000 is reasonable based on these criteria.

3. The decrease in the 2013-2014 Number of NFP Home visits is due to staff positions being eliminated due to elimination of Medicaid funding for the program.

### **Public Health Services General Performance Information**

Performance Indicator Values						
Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012		
87.10%	86.90%	86.80%	87.50%	88.00%		
Not Applicable	Not Applicable	47%	50%	40%		
	Actual FY 2007-2008 87.10%	Prior Year Actual FY 2007-2008Prior Year Actual FY 2008-200987.10%86.90%	Prior Year Actual FY 2007-2008Prior Year Actual FY 2008-2009Prior Year Actual FY 2009-201087.10%86.90%86.80%	Prior Year Actual FY 2007-2008Prior Year Actual FY 2008-2009Prior Year Actual FY 2009-2010Prior Year 		

have a Medical Home that meets national medical home criteria.

### 6. (KEY) Through the immunization activity, to control or eliminate vaccine preventable diseases by providing vaccine to susceptible persons each year through June 30, 2016.

Children's Budget Link: Maternal and Child Health activities are linked via the Childrens Cabinet and funded under the Childrens Budget. Goal 1. To create a seamless system of care through the integration of services and resources. Goal 3. To achieve measurable improvements in the outcomes of all children in Louisiana.



Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by providing access to and provision of primary and preventive health care services to women, infants, children.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Department of Health and Hospitals, Roasdmap for a Healthier Louisiana (2011 Business Plan)

### Explanatory Note: Not Applicable

### **Performance Indicators**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of children 19 to 35 months of age up to date for 4 DTP, 3 Polio, 3 Hib, 3 HBV, 1 MMR and 1 VAR (LAPAS CODE - 24165)	75%	71%	75%	75%	75%	75%
K Percentage of kindergartners up to date with 4 DTP, 3 Polio, 3 HBV, 2 MMR, and 2 VAR (LAPAS CODE - 24166)	95%	96%	95%	95%	95%	95%
S Percentage of sixth graders, 11-12 years of age, up to date with 1 TdaP, 2 MMR, 2 VAR, 3 HBV, 1 MCV4 (LAPAS CODE - 24167)	60%	88%	75%	75%	88%	88%

1. DTaP = Diphtheria, Tetanus, Pertussis; VAR=Varicella; HBV=Hepatitis B, MMR = Measles, Mumps, Rubella.

2. National Immunization Survey The Office of Public Health collects data from the LINKS System- Louisiana Immunization Network for Kids Statewide, State Immunization Registry that is a federal Clinic Assessment Software Application (CASA) used to analyze immunization rates. The National Immunization Survey (NIS) is a CDC survey conducted by CDC to assess statewide immunization rates.

3. The data for % of 6th Graders immunized at continuation reflects the second year of the Sixth Grade school immunization requirement law implementation and assessment of this grade group. The data shows better compliance with the State Law as a result of the Immunization Program promoting adherence to the law to School Principals and Parish Superintendants. In addition, the Immunization Program works with pediatricians and family practitioners to ensure that all children 11-12 years of age receive their age appropriate vaccinations in a timely manner and prior to school entry.

7. (KEY) Through the Nutrition Services activity, to provide supplemental foods and nutritious commodities to eligible women, infants and children while serving as an adjunct to health care during critical times of growth and development and to senior citizens improving health status and preventing health problems in all population groups served through Nutrition Services Programs including coordination of obesity initiatives across state agencies and private organizations each year through June 30, 2016.

Children's Budget Link: Nutrition services activities are linked via the Childrens Cabinet and funded under the Childrens Budget. Goal 1. To create a seamless system of care through the integration of services and resources. Goal 3. To achieve measurable improvements in the outcomes of all children in Louisiana.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by providing access to and provision of primary and preventive health care services to women, infants, children.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

### **Performance Indicators**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of monthly WIC participants (LAPAS CODE - 2384)	152,020	147,047	148,000	148,000	150,000	150,000
S Number of monthly Commodity Supplemental Food Program participants served (LAPAS CODE - 24168)	68,520	68,022	68,085	68,085	68,085	68,085
S Number of collaborative initiatives addressing Obesity (LAPAS CODE - 24169)	12	23	12	12	12	12

1. The number of monthly WIC participants is a tabulation of the number of individuals receiving WIC benefits (food instruments) each month. This information is aggregated by the automated WIC management system (PHAME). The number of monthly CSFP participants served is a tabulation of the number of individuals receiving at least one food box during the reporting month. This information is aggregated by the Louisiana CSFP's sub-contractor Catholic Charities/PHILMAT Inc. and reported back to the State Agency. The number of collaborative initiatives addressing Obesity is a tabulation of the number of partnerships created to address Obesity. A collaboration is the work of 2 or more partners to promote an environment that supports opportunities for Louisiana residents to make healthy food choices and to be physically active in order to maintain a healthy weight. Collaborative initiatives are reported on at the quarterly meetings of the Louisiana Obesity Council.

### **Public Health Services General Performance Information**

	Performance Indicator Values						
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012		
Percentage of WIC eligible clients served (LAPAS CODE - 10857)	60.18%	63.91%	67.40%	65.90%	63.90%		
Number of WIC vendor fraud investigations (LAPAS CODE - 10858)	48.00	46.00	87.00	95.00	204.00		

### 8. (KEY) Through the Communicable Diseases activity, to prevent the spread of Communicable Diseases, including but not limited to, HIV/AIDS, tuberculosis (TB), gonorrhea, chlamydia, and syphilis, through screening, education, health promotion, outreach, surveillance, prevention, case management and treatment each year through June 30, 2016.

Children's Budget Link: Maternal and Child Health activities are linked via the Childrens Cabinet and funded under the Children's Budget. Goal 1. To create a seamless system of care through the integration of services and resources. Goal 3. To achieve measurable improvements in the outcomes of all children in Louisiana.



Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by providing access to and provision of primary and preventive health care services to women, infants, children.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

### **Performance Indicators**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of TB infected contacts who complete treatment (LAPAS CODE - 24170)	77%	52%	77%	77%	72%	72%
K Percentage of women in STD clinics with positive Chalymida tests who are treated within 14 days from the specimen collection (LAPAS CODE - 24171)	80%	65%	85%	85%	85%	85%
S Percentage of partners who test HIV positive who will be connected to appropriate medical care within 12 months of diagnosis (HIV Partner Services) (LAPAS CODE - 24173)	85%	90%	90%	90%	90%	90%
S Percentage of persons contacted through outreach who receive a referral who will be successfully connected to follow-up HIV prevention and care services (LAPAS CODE - 24174)	75%	85%	75%	75%	80%	80%
S Increase the proportion of newly diagnosed HIV patients linked to clinic care within 3 months of diagnosis (LAPAS CODE - 25039)	Not Applicable	Not Applicable	80%	80%	80%	80%

1. Percentage of TB infected contacts who complete treatment is calculated on a regional or statewide basis using the TB Control patient mangement software LATB.

2. Percentage of women in STD clinics with positive chalymidia tests who are treated within 14 days from the specimen collection has increased from 80% to 85% due to the actual year-end performance for FY10-11 and the STD/HIV Program's increased emphasis of ensuring that women who test positive for chalymidia are treated with 14 days.

3. Percentage of partners who test HIV positive who will be connected to appropriate medical care with 12 months of diagnosis has increased from 85% to 90% due to actual year-end performance for FY10-11 and several statewide initiatives and changes in procedures than have enhanced linkage to medical care for persons newly diagnosed with HIV.



### Public Health Services General Performance Information

		Perfo	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012
Percentage of persons newly enrolled in Louisiana AIDS Drug Assistance Program (ADAP) who will have at least one undectable viral load (i.e. <400 copies) within 12 months of enrollment (LAPAS CODE - 24172)	Not Applicable	Not Applicable	Not Applicable	87%	95%
Number of clients HIV tested and counseled at public counseling and testing sites (LAPAS CODE - 2325)	60,115	81,968	95,235	91,673	97,760
Number of HIV infected individuals provided medications through the AIDS Drug Assistance Program (LAPAS CODE - 17061)	3,105	3,401	3,710	2,608	2,533
Number of clients found to be HIV positive (LAPAS CODE - 11143)	593	768	975	971	1,011
Number of AIDS cases reported (LAPAS CODE - 11144)	719	833	888	825	763
Number of syphilis clients provided services and treatment (LAPAS CODE - 11082)	569	814	510	250	219
Number of gonorrhea clients provided services and treatment (LAPAS CODE - 2358)	6,988	6,289	7,159	4,952	2,161
Number of chlamydia clients provided services and treatment (LAPAS CODE - 2360)	11,830	11,785	13,565	10,951	6,083

### 9. (KEY) Through the Family Planning/Pharmacy activity, to assist individuals in determining the number and spacing of their children, through the provision of education, counseling, and medical services each year through June 30, 2016.

Children's Budget Link: Maternal and Child Health activities are linked via the Childrens Cabinet and funded under the Childrens Budget. Goal 1. To create a seamless system of care through the integration of services and resources. Goal 3. To achieve measurable improvements in the outcomes of all children in Louisiana.

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by providing access to and provision of primary and preventive health to women, infants, and children.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable



	Performance Indicator Values							
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014		
K Number of women in need of Family Planning services served (LAPAS CODE - 2395)	53,000	38,533	45,050	45,050	36,040	36,040		
The number of women served	is the total number	of women provided	services in publically	y funded family pla	nning clinics statewi	de. This is an		

The number of women served is the total number of women provided services in publically funded family planning clinics statewide. This is unduplicated direct count of women seen in these family planning clinics.

### Public Health Services General Performance Information

	Performance Indicator Values								
Performance Indicator Name	Prior Act FY 200	ual	A	or Year Actual 1008-2009		rior Year Actual 2009-2010		rior Year Actual 2010-2011	Prior Year Actual 7 2011-2012
Average cost of providing family planning services per person (LAPAS CODE - 11168)	\$	177.00	\$	177.00	\$	163.00	\$	226.40	\$ 197.00
Percentage of clients returning for follow up Family Planning visits (LAPAS CODE - 24175)	Not Ap	oplicable	Not	Applicable		56%		57%	47%

## 10. (KEY)Through the Laboratory activity, to assure timely testing and reporting of laboratory results of specimens to monitor for pollutants, contaminants in water, food, drugs, and environmental materials each year through June 30, 2016.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: This objective will support Act 1078 by providing access to and provision of primary and preventive health care services to women, infants, and children.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Department of Health and Hospitals, Roadmap for a Healthier Louisiana (2011 Business Plan)



	Performance Indicator Values						
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014	
K Number of lab tests/ specimens tested (LAPAS CODE - 17387)	275,000	271,636	225,000	225,000	200,000	200,000	
S Percentage of bioterrorism lab tests completed within 72 hours (LAPAS CODE - 15423)	100%	100%	100%	100%	100%	100%	
S Process at least 95% of all specimens accepted by the OPH laboratory for testing within their respective holding times (LAPAS CODE - 25038)	Not Applicable	Not Applicable	95%	95%	95%	95%	

1. The number of lab tests/specimens tested is the actual number of specimens collected and delivered to the La. State Police and tested by the State Public Health Lab. This indicator does not have a performance standard because was previously collected as a general indicator and these indicators do not have performance standards. This data is collected from the OPH Laboratory database Star LIMS. The percentage of bioterrorism lab tests completed within 72 hours is the actual number of specimens collected and delivered to the State Public Health Lab for confirmatory testing. This includes all confirmatory testing completed within 72 hours of receipt.

2. Process at Least 95% of all specimens is a new PI. The holding time is the time period that a specimen can be held by the laboratory without affecting the results of the test performed. This time period depends on how fragile the material being tested for and therefore varies from test to test.

### 11. (KEY)Through the Bureau of Primary Care and Rural Health, provide technical assistance to communities, Federally Qualified Health Centers, physician practices, rural health clinics and small rural hospitals in order to improve the health status of Louisiana residents in rural and underserved areas each year through June 30, 2016.

Children's Cabinet Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: Not Applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Department of Health and Hospitals, Roadmap for a Healthier Louisiana (2011 Business Plan)



			Performance Inc	dicator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
S Number of state partners, programs, and agencies that utilize the Behavioral Risk Factor Surveillance System survey results (LAPAS CODE - 24269)	13	25	23	23	40	40
K Number of healthcare providers receiving practice management technical assistance (LAPAS CODE - 24271)	300	562	375	375	205	205
K Number of parishes and/or areas analyzed and designated as Health Professional Shortage Areas by the Federal government (LAPAS CODE - 12218)	551	464	495	495	432	432
S Percentage of school districts reporting implementation of 100% tobacco-free school policies (LAPAS CODE - 24272)	58%	69%	70%	70%	100%	100%
K Number of students with access to School Based Health Center Assistance (LAPAS CODE - 24162)	58,000	66,811	67,000	67,000	58,000	58,000

### Public Health Services General Performance Information

	Performance Indicator Values					
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012	
Number of Adolescent School-Based Health Centers (LAPAS CODE - 2368)	62	60	65	65	65	
Average cost per visit to Adolescent School- Based Health Centers (LAPAS CODE - 10053)	\$ 60.00	\$ 61.00	\$ 62.50	\$ 55.00	\$ 61.00	
Number of patient visits to Adolescent School- Based Health Centers (LAPAS CODE - 13744)	134,810	141,930	138,836	150,428	127,703	



# 12. (KEY)Through the Grants Administration activity, to promote efficient use of agency resources in the administration and monitoring of the agency's grants while ensuring access to primary and preventive health services in underserved communities each year through June 30, 2016.

Children's Cabinet Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: Not Applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Department of Health and Hospitals, Roadmap for a Healthier Louisiana (2011 Business Plan)

**Performance Indicators** 

			Performance Inc	licator Values		
L e v e Performance Indicator I Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of National Health Services Corp providers practicing in Louisiana (LAPAS CODE - 12219)	112	182	144	144	132	132
S Number of new and existing health care practitioners recruited to work in rural and underserved areas (LAPAS CODE - 8004)	49	43	49	49	49	49
1. The Number of National He	alth Services Corp.	providers practicing	in Louisiana was fo	ormerly a general in	dicator.	

# 13. (SUPPORTING)Through the Environmental Epidemiology and Toxicology activity, to identify toxic chemicals in the environment; evaluate the extent of human exposure and the adverse health effects caused by them; make recommendations to prevent and reduce exposure to hazardous chemicals; promote a better public understanding of the health effects of chemicals in the environment each year through June 30, 2016.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: Not Applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable



	Performance Indicator Values							
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014		
S Number of health consults and technical assists (LAPAS CODE - 24198)	2,000	1,136	2,000	2,000	1,000	1,000		
S Number of emergency reports screened (LAPAS CODE - 24199)	10,000	8,455	10,000	10,000	9,000	9,000		

1. The number of Indoor Air Quality phone consults that result in public health information is a direct count of the Louisiana residents that call the Indoor Air Quality hotline. Water body assessments are completed when fish tissue data is received from the LA Department of Environmental Quality. A risk assessment is conducted to determine if an advisory is warranted and re-sampling recommendations are provided for each waterbody. Health consults and technical assists are assessment tools for evaluating individual exposures or hazardous waste site-related exposure. Reports include recommendations for reducing exposure. This number is derived from the total number of emergency reports received and screened from the Louisiana State Police, the National Response Center, the Poison Control Center, and other sources, and require some follow up action. This number is derived from the total number of emergency reports received and screened from the Louisiana State Police, the National Response Center, the Poison Control Center, and other sources, and require some follow up action.

2. A reduction in funding for Louisiana's Mercury Program has resulted in a reduction of the number of waterbodies being sampled for mercury. The Section of Environmental Epidemiology and Toxicology relies on sampling data from LDEQ in order to complete assessments.

### **Public Health Services General Performance Information**

	Performance Indicator Values					
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012	
Number of fishing/swimming advisories (LAPAS CODE - 11527)	50	57	57	0	57	
Percentage of OPH risk analysis completed in areas under consideration for fish advisories (LAPAS CODE - 11529)	100%	100%	100%	100%	100%	
Number of environmental exposure investigations (LAPAS CODE - 13747)	2,899	3,432	8,849	9,764	752	
Number of indoor air quality phone consults (LAPAS CODE - 24196)	Not Applicable	Not Applicable	Not Applicable	354	648	

### 14. (KEY)Through the Sanitarion Services activity, to protect public health through preventative measures which include education of the public, plans review, inspection, sampling, and enforcement activities each year through June 30, 2016.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: Not Applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable



	Performance Indicator Values							
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014		
K Yearly mortality count attributed to unsafe water, food and sewage (LAPAS CODE - 24201)	3	0	Not Applicable	Not Applicable	0	0		
K Percentage of permitted facilities in compliance quarterly due to inspections (LAPAS CODE - 24202)	90%	90%	90%	90%	90%	90%		
S Percentage of required samples in compliance (LAPAS CODE - 24203)	95%	95%	95%	95%	95%	95%		
S Percentage of sewerage systems properly installed (LAPAS CODE - 24204)	90%	93%	90%	90%	90%	90%		
S Number of plans reviewed (LAPAS CODE - 24205)	16,000	13,033	16,000	16,000	16,000	16,000		

1. Permitted facilities consist of those in the following programs: Commercial Seafood, Food and Drug Unit, Buildings and Premises, Retail Food and Milk and Dairy. Percentage is determined by the number of reinspections divided by the number of inspections performed per quarter. Yearly Mortality count attributed to unsafe water, food and sewage is determined on a yearly basis as confirmed through the OPH Infectious Disease Epidemiology Program. Public health epidemiologists track causes of death within the state. Percentage of facilities returned to compliance within 30 days after an emergency event is calculated by dividing the number of facilities not in compliance after 30 days by the number of facilities in the state. Number of plans reviewed is determined by the number of plans reviewed in the following programs: Commercial Seafood, Food and Drug, Onsite Wastewater, Buildings and Premises, Retail Food and Milk and Dairy.

2. The Percentage of required samples in compliance increase reflects a more accurate estimate.

3. The decrease in the Number of plans reviewed is attributed to the economy and current numbers documented for plans reviews.

### **Public Health Services General Performance Information**

	Performance Indicator Values						
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012		
Number of samples taken (LAPAS CODE - 24206)	Not Applicable	Not Applicable	36,400	25,491	20,720		
Percentage of required samples in compliance (LAPAS CODE - 24207)	Not Applicable	Not Applicable	98%	98%	95%		
Number of new sewage systems installed (LAPAS CODE - 24208)	Not Applicable	Not Applicable	11,250	10,840	9,889		
Number of existing sewage systems inspections (LAPAS CODE - 24209)	Not Applicable	Not Applicable	14,525	10,678	11,930		
Number of sewage system applications taken (LAPAS CODE - 24210)	Not Applicable	Not Applicable	14,080	13,792	11,314		



	Performance Indicator Values							
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012			
Number of food, water, sewage-borne illnesses reported (LAPAS CODE - 24211)	Not Applicable	Not Applicable	1	3	0			
Percentage of establishments/facilities in compliance (LAPAS CODE - 11886)	Not Applicable	Not Applicable	90%	99%	90%			
Number of inspections of permitted establishments/facilities (LAPAS CODE - 2485)	Not Applicable	Not Applicable	106,000	108,549	109,212			
Food related complaints received from the public (LAPAS CODE - 11215)	1,736	1,830	1,718	1,769	1,568			

### **Public Health Services General Performance Information (Continued)**

15. (KEY)Through the Public Health Engineering activity, to provide a regulatory framework which will assure that the public is not exposed to contaminated drinking water, or to raw sewage contact or inhalation, which can cause mass illness or deaths each year through June 30, 2016.

Children's Budget Link: This objective is linked to the Health Objective: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: Not Applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Department of Health and Hospitals, Roadmap for a Healthier Louisiana (2011 Business Plan)

#### **Performance Indicators**

Performance Indicator Values							
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014	
K Percentage of public water systems meeting bacteriological maximum contaminant level (MCL) compliance (LAPAS CODE - 2497)	95%	95%	95%	95%	90%	90%	





### **Performance Indicators (Continued)**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
S Percentage of public water systems meeting chemical MCL compliance (LAPAS CODE - 24518)	95%	96%	95%	95%	95%	95%
S Number of plans reviewed (LAPAS CODE - 24519)	1,000	1,777	1,000	1,000	1,300	1,300
S Percentage of plans reviewed within 60 days of receipt of submittal (LAPAS CODE - 25037)	Not Applicable	Not Applicable	90%	90%	85%	85%

1. The percentage of public water systems meeting bacteriological MCL compliance is calculated based on the number of public water systems that receive a bacteriological related violation during the quarter compared to the total number of public water systems. The percentage of public water systems meeting chemical MCL compliance is calculated based on the number of public water systems that are in exceedance of a chemicals MCL during the quarter compared to the total number of public water systems. The total number of engineering plans and specifications for public water systems, community sewage systems, State Owned Buildings, Public Swimming Pools, Schools, Funeral Homes, and Jails reviewed for compliance with the state sanitary code during the quarter.

### Public Health Services General Performance Information

		Perfor	mance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012
Percentage of Surface Water Public Water Systems monitored annually for chemical compliance (LAPAS CODE - 24520)	Not Applicable	Not Applicable	100%	100%	99%
Percentage of required onsite evaluations (sanitary surveys) conducted for public water systems (LAPAS CODE - 24521)	Not Applicable	Not Applicable	100%	100%	95%
Total number of CEU hours received by certified public water and community sewage operators from DHH approved training courses (LAPAS CODE - 24522)	Not Applicable	Not Applicable	82,275	104,889	94,509
Number of Louisiana public water systems inspections/surveys (LAPAS CODE - 11222)	492	534	1,056	170	864
Number of public water systems in Louisiana (LAPAS CODE - 11225)	1,501	1,449	1,422	1,406	1,382



16. (SUPPORTING)Through the Center for Environmental Health Services State Drinking Water Revolving Loan Fund, will Optimize the Environmental Protection Agency State Revolving Fund Capitalization Grant dollars available for assistance to drinking water initiatives and to evaluate the Stateís needs and allocate loan funds(through Agency 861) and other assistance for public health protection, to use funds efficiently and maintain fund's corpus for future public water systems loans each year through June 30, 2016.

Children's Budget Link: Not Applicable

Human Resource Policies Beneficial to Women and Families Link: Not Applicable

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Not Applicable

### **Performance Indicators**

			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
S Number of Louisiana public water systems provided financial and technical assistance (LAPAS CODE - 24523)	300	186	300	300	300	300

### Public Health Services General Performance Information

	Performance Indicator Values									
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012					
Number of low-interest loans made (LAPAS CODE - 24524)	Not Applicable	Not Applicable	59	3	7					
The is a new General Performance Indicator a	dded during the 2010	Strategic Planning p	process. The actual i	s simply a direct cou	int.					
Number of public water systems provided technical assistance (LAPAS CODE - 24525)	Not Applicable	Not Applicable	140	107	341					
Number of water systems provided capacity development technical assistance (LAPAS CODE - 24526)	Not Applicable	Not Applicable	80	80	173					





### 09-330 — Office of Behavioral Health



### **Agency Description**

The mission of the Office of Behavioral Health is to lead the effort to build and provide a comprehensive, integrated, person-centered system of prevention and treatment services that promote recovery and resilience for all citizens of Louisiana. OBH assures public behavioral health services are accessible, have a positive impact, are culturally and clinically competent and are delivered in partnership with all stakeholders.

The goals of the Office of Behavioral Health are:

- I. To serve children and adults with extensive behavioral health needs including mental health and/or addictive disorders by leading the transition to the Louisiana Behavioral Health Partnership (LBHP) and ensuring full compliance and quality/outcomes of services provided for the duration of its contract with the statewide managed care vendor.
- II. To assure that all Louisiana citizens with serious behavioral health challenges have access to needed forensic, residential, and other "safety net" services not provided by the LBHP and promote use of contemporary, evidence-informed treatment, support, and prevention services.
- III. To support the refinement and enhancement of a comprehensive system and associated service array for children, youth and families that appropriately addresses their behavioral health needs that is based on contemporary, best practice principles of care.

OBH oversees the management and quality of service delivery through the Louisiana Behavioral Health Partnership (LBHP). LBHP is a managed care program involving multiple agencies that have historically shared in the delivery of behavioral health services to the citizens of Louisiana. LBHP is operated by contract through Magellan of Louisiana, the statewide management organization selected to manage behavioral health services. The LBHP includes a comprehensive array of rehabilitative behavioral health services and a full continuum of care intended to meet the needs of both adults and children, including the Coordinated System of Care (for children at greatest risk of out-of-home placement). Louisiana is the only state to implement managed care for behavioral health services on a statewide basis.

Beginning October 1, 2012, the Southeast Louisiana State Hospital (SELH) campus in Mandeville started phasing down operations as patient bed capacity will move to several locations. Thirty-four intermediate beds will move to East Louisiana Mental Health System; 60 intermediate beds will move to Central Louisiana State Hospital (CLSH). In January, 2013, 32 adult acute beds and 50 child/youth beds were redistributed to private partners



The Office maintains memorandum of agreements with Jefferson Parish Human Services Authority (see 09-300), Florida Parishes Human Services Authority (see 09-301), the Capital Area Human Services District (see 09-302), the Metropolitan Human Services District (see 09-304), South Central Louisiana Human Services Authority (see 09-309), and the Acadiana Human Services District (see 09-325) Northeast Delta Louisiana Human Services Authority (see 09-310), Imperial Calcasieu Human Services Authority (see 09-375), Central Louisiana Human Services District (see 09-376), and Northwest Louisiana Human Services District (see 09-377) for mental health services within their respective parishes. All services are integrated within a statewide system of care.

The Office of Behavioral Health has four programs: Administration and Support, Behavioral Health Community, Hospital Based Treatment, and Auxiliary.

#### Total **Prior Year Existing Oper Recommended** Actuals Enacted Budget Continuation Recommended Over/(Under) FY 2011-2012 FY 2012-2013 as of 12/01/12 FY 2013-2014 FY 2013-2014 EOB **Means of Financing:** 147,660,418 \$ State General Fund (Direct) \$ 173,731,973 \$ 148,677,730 \$ 150,334,637 \$ 134,197,425 \$ (16,137,212) State General Fund by: Total Interagency Transfers 75,207,817 90,713,892 91,935,257 92,084,211 67,928,118 (24,007,139)Fees and Self-generated Revenues 2,843,172 32,993,896 32,993,896 29,661,165 26,476,688 (6,517,208) 5,655,827 Statutory Dedications 14,130,018 5,655,827 12,027,393 5,542,920 (6,484,473)0 0 0 Interim Emergency Board 0 0 Federal Funds 34,827,325 37,996,070 37,996,070 38,172,292 37,464,906 (531, 164)Total Means of Financing \$ 300,740,305 \$ 313,233,913 \$ 271,610,057 \$ (53,677,196) 316,037,415 \$ 325,287,253 \$ **Expenditures & Request:** \$ Administration and Support 8,506,154 \$ 7,204,673 \$ 7,204,673 \$ 7,511,212 \$ 7,118,038 \$ Behavioral Health Community 123,287,489 134,495,910 143,668,100 129,842,612 114,417,662 (29, 250, 438)Hospital Based Treatment 168,944,997 174,394,480 175,860,089 150,054,357 (24, 340, 123)174,316,832 Auxiliary Account 20,000 20,000 20,000 20,000 1,665 **Total Expenditures &** 325,287,253 \$ 300,740,305 \$ 313,233,913 \$ 271,610,057 \$ (53,677,196) 316,037,415 \$ Request \$ **Authorized Full-Time Equivalents:** Classified 2,403 1,987 1,987 1,785 1,375 Unclassified 49 44 44 44 24 **Total FTEs** 2,452 2,031 2,031 1,829 1,399

### Office of Behavioral Health Budget Summary



0

(86, 635)

0

(612)

(20)

(632)

### 330\_1000 — Administration and Support

Program Authorization: R.S. 36:258 C; R.S. 28:1-723

### **Program Description**

The mission of the Administration and Support Program is to provide of results-oriented managerial, fiscal and supportive functions necessary to advance state behavioral health care goals, adhere to state and federal funding requirements, monitor the Louisiana Behavioral Health Partnership (LBHP) operations and support the provision of services not in the scope of the Statewide Management Organization (SMO). Its mission is also to ensure that these functions are performed effectively and efficiently.

The goal of the Administration and Support Program are to:

- I. To assure that critical functions of the SMO are being performed within expected standards per contract stipulations. The critical functions include that members have access to and receive needed services, providers are timely reimbursed, and members are receiving the support needed to successfully navigate the LBHP system of care.
- I. To assure that Louisiana citizens with serious behavioral health challenges have access to "safety net" services not presently provided through the LBHP.

The Administration program has two activities:

Administration - oversees the managerial, fiscal and supportive functions necessary to advance state behavioral health care goals, while adhering to state and federal funding requirements.

Health Plan Management for LBHP - the system of care for Medicaid and non-Medicaid adults and children who are managed by Magellan Health Services. Components of Health Plan Management are Business Intelligence, Quality Management and Evaluation and Research.

	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB
Means of Financing:						
State General Fund (Direct)	\$ 4,039,287	\$ 5,198,654	\$ 5,198,654	\$ 5,505,193	\$ 5,112,019	\$ (86,635)
State General Fund by: Total Interagency Transfers	0	0	0	0	0	0
Fees and Self-generated Revenues	0	0	0	0	0	0
Statutory Dedications	4,400,994	77,735	77,735	77,735	77,735	0
Interim Emergency Board	0	0	0	0	0	0
Federal Funds	65,873	1,928,284	1,928,284	1,928,284	1,928,284	0

### Administration and Support Budget Summary



### Administration and Support Budget Summary

		Prior Year Actuals ¥ 2011-2012	F	Enacted 8Y 2012-2013	Existing Oper Budget as of 12/01/12	Continuation TY 2013-2014	Recommended FY 2013-2014	Total ecommended Over/(Under) EOB
Total Means of Financing	\$	8,506,154	\$	7,204,673	\$ 7,204,673	\$ 7,511,212	\$ 7,118,038	\$ (86,635)
Expenditures & Request:								
Personal Services	\$	6,384,264	\$	4,777,500	\$ 4,777,500	\$ 5,066,964	\$ 4,789,377	\$ 11,877
Total Operating Expenses		133,988		362,073	362,073	368,881	362,073	0
Total Professional Services		32,858		419,830	419,830	419,830	387,724	(32,106)
Total Other Charges		1,944,483		1,645,270	1,645,270	1,655,537	1,578,864	(66,406)
Total Acq & Major Repairs		10,561		0	0	0	0	0
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	8,506,154	\$	7,204,673	\$ 7,204,673	\$ 7,511,212	\$ 7,118,038	\$ (86,635)
Authorized Full-Time Equiva	lents	:						
Classified		42		41	41	41	41	0
Unclassified		3		3	3	3	3	0
<b>Total FTEs</b>		45		44	44	44	44	0

### Source of Funding

The Administration and Support Program is funded with State General Fund, and Federal Funds. Federal funds are derived from a Data Infrastructure Grant from The Center for Mental Health Services, and the Olmstead grant from the Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services. The Statutory Dedications listed are from the Tobacco Tax Health Care Fund and the Overcollections Fund. (Per R.S. 39:36B. (8), see table below for a listing of expenditures out of each Statutory Dedication Fund.)

### **Administration and Support Statutory Dedications**

Fund	А	ior Year ctuals 2011-2012	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation Y 2013-2014	ecommended Y 2013-2014	Total commended ver/(Under) EOB
Tobacco Tax Health Care Fund	\$	0	\$	77,735	\$ 77,735	\$ 77,735	\$ 77,735	\$ 0
Overcollections Fund		4,400,994		0	0	0	0	0



### Major Changes from Existing Operating Budget

	eneral Fund	T	otal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
_					
\$	5,198,654	\$	7,204,673	44	Existing Oper Budget as of 12/01/12
_					
					Statewide Major Financial Changes:
	(4,849)		(4,849)	0	Group Insurance Rate Adjustment for Active Employees
	(16,416)		(16,416)	0	Group Insurance Rate Adjustment for Retirees
	136,711		136,711	0	Salary Base Adjustment
	(93,047)		(93,047)	0	Attrition Adjustment
	(32,106)		(32,106)	0	Salary Funding from Other Line Items
	58,595		58,595	0	Risk Management
	(38,663)		(38,663)	0	Rent in State-Owned Buildings
	(10,235)		(10,235)	0	UPS Fees
	(69,282)		(69,282)	0	Civil Service Fees
	(17,343)		(17,343)	0	Office of Computing Services Fees
					Non-Statewide Major Financial Changes:
\$	5,112,019	\$	7,118,038	44	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
\$	5,112,019	\$	7,118,038	44	Base Executive Budget FY 2013-2014
	-, ,,-,		., .,		
\$	5,112,019	\$	7,118,038	44	Grand Total Recommended
Ψ	5,112,517	Ψ	,,110,050		

### **Professional Services**

Amount	Description
\$207.7 <b>2</b> 4	Provides technical assistance/consultation to OMH managers and field staff regarding planning and implementation of
\$387,724	research and evaluation projects or statistical analyses
\$387,724	TOTAL PROFESSIONAL SERVICES

### **Other Charges**

Amount	Description
	Other Charges:
\$447,507	Software maintenance for Essential Learing that is a professional development software tha allows training,, Medicaid and Medicare claims processing, application/web content maintenance.
\$96,000	Louisiana Mental Health Data Infrastructure grant



### **Other Charges (Continued)**

Amount	Description
\$543,507	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$21,982	Payments to the Division of Administration for Uniform Payroll Services
\$184,816	Payments to the Department of Civil Service - Civil Service Fees
\$648,880	Bienville Rental
\$179,679	Payments to the Office of Computing Services
\$1,035,357	SUB-TOTAL INTERAGENCY TRANSFERS
\$1,578,864	TOTAL OTHER CHARGES

### **Acquisitions and Major Repairs**

Amount	Description
\$0	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.

### **Performance Information**

1. (KEY) By focusing on enhancing individual outcomes, OBH through the State Management Organization (SMO) will improve the quality of care and behavioral health of Louisiana citizens and will assure that all members are adequately served through the LBHP as demonstrated by 100% achievement of deliverables of the contracted critical functions by FY 2014.

Children's Budget Link: Child/adolescent services are linked to the goals of the Children's Cabinet.

Human Resource Policies Beneficial to Women and Families Link: Linked to relevant Department of Health and Hospitals policies.

Other Links OBH Business Plan and RFP deliverables for the State Management Organization (SMO).

### Performance Indicators

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of clean claims processed within 30 days (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	95%	5%
S Average speed to answer calls to member services (in seconds) (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	29	29
K Percentage of abandoned calls (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	2.99%	2.99%



# 2. (KEY) OBH in conjunction with partnering state agencies (DCFS, OJJ and DOE) will establish an effective Coordinated System of Care that assures enrollment of 1,200 children during FY2014.

Children's Budget Link: Child/adolescent services are linked to the goals of the Children's Cabinet.

Human Resource Policies Beneficial to Women and Families Link: Linked to relevant Department of Health and Hospitals policies.

Other Links OBH Business Plan and RFP deliverables for the State Management Organization (SMO).

### **Performance Indicators**

			Performance Ind			
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of children enrolled in Phase 1 regions (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	1,200	1,200
K Number of CSoC implementing regions (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	7	7

### **3. (KEY)** To monitor provider network efficiency/sufficiency to ensure that service types and capacity meet system needs and that providers will meet accessibility standards. during FY 2014.

Children's Budget Link: Child/adolescent services are linked to the goals of the Children's Cabinet.

Human Resource Policies Beneficial to Women and Families Link: Linked to relevant Department of Health and Hospitals policies.

Other Links OBH Business Plan and RFP deliverables for the State Management Organization (SMO).



			Performance Indicator Values						
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014			
K Percentage of providers who meet the accessibility standards (urban/ rural) (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	85%	85%			
K Percentage of overall provider (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	85%	85%			
S Number of onsite audits completed (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	90	90			
S Number of trainings provided addressing competencies necessary to assure performance of core organizational processes. (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	72	72			



### **330\_2000 — Behavioral Health Community**

Program Authorization: R.S. 36:258 C; R.S. 28:1-723

### **Program Description**

The mission of the Behavioral Health Community Program is to monitor and/or provide a comprehensive system of contemporary, innovative, and evidence-informed treatment, support, and prevention services to Louisiana citizens with serious behavioral health challenges.

The goals of the Behavioral Health Community program are as follows:

- I. OBH, as a provider of treatment services, will focus on providing those services that are not available through the Louisiana Behavioral Health Partnership (LBHP). In this role, OBH will continue to serve as the "safety-net" provider for the behavioral health.
- I. OBH as a monitor of the Statewide Management Organization (SMO) will assure that the SMO meets all of the contractual requirements stipulated as they pertain to a comprehensive and coordinated service delivery system. OBH will use source data to independently verify that the SMO has developed a sufficient provider network; has properly credentialed providers; has offered training to build and maintain competence; and that the outcomes for members demonstrate effective treatment.

The community behavioral health activities include: mental health and addictive residential and non-residential community based services (including gambling programs); community based prevention services, and coordinated system of care.

	Prior Year Actuals FY 2011-2012		Enacted FY 2012-2013		Existing Oper Budget as of 12/01/12		Continuation FY 2013-2014		Recommended FY 2013-2014		Total Recommended Over/(Under) EOB	
Means of Financing:												
State General Fund (Direct)	\$ 76,741,673	\$	47,775,083	\$	49,354,342	\$	45,368,988	\$	40,978,235	\$	(8,376,107)	
State General Fund by:												
Total Interagency Transfers	5,178,452		18,184,436		19,405,801		19,093,742		11,821,187		(7,584,614)	
Fees and Self-generated Revenues	1,726,706		29,117,064		29,117,064		25,784,333		22,599,856		(6,517,208)	
Statutory Dedications	7,124,944		5,578,092		11,949,658		5,578,092		5,465,185		(6,484,473)	
Interim Emergency Board	0		0		0		0		0		0	
Federal Funds	32,515,714		33,841,235		33,841,235		34,017,457		33,553,199		(288,036)	
Total Means of Financing	\$ 123,287,489	\$	134,495,910	\$	143,668,100	\$	129,842,612	\$	114,417,662	\$	(29,250,438)	

### Behavioral Health Community Budget Summary



		Prior Year Actuals ¥ 2011-2012	F	Enacted Y 2012-2013		xisting Oper Budget s of 12/01/12		Continuation Y 2013-2014	ecommended TY 2013-2014		Total ecommended Over/(Under) EOB
Personal Services	\$	43,495,069	\$	29,199,984	\$	44,355,754	\$	18,983,683	\$ 8,044,626	\$	(36,311,128)
Total Operating Expenses		4,873,276		3,953,417		5,658,827		3,275,472	1,094,864		(4,563,963)
Total Professional Services		2,975,444		4,032,774		4,039,774		4,155,353	3,711,286		(328,488)
Total Other Charges		71,886,383		97,309,735		89,610,243		103,428,104	101,566,886		11,956,643
Total Acq & Major Repairs		57,317		0		3,502		0	0		(3,502)
Total Unallotted		0		0		0		0	0		0
Total Expenditures & Request	\$	123,287,489	\$	134,495,910	\$	143,668,100	\$	129,842,612	\$ 114,417,662	\$	(29,250,438)
Authorized Full-Time Equivalents:											
Classified		501		221		221		19	39		(182)
Unclassified		27		22		22		22	2		(20)
<b>Total FTEs</b>		528		243		243		41	41		(202)

#### **Behavioral Health Community Budget Summary**

#### **Source of Funding**

The Behavioral Health Community Program is funded with State General Fund, Interagency Transfers, Statutory Dedications and Federal Funds. Interagency Transfers are received from Department of Children and Family Services for Temporary Assistance for Needy Families (TANF) and for the Coordinated System of Care; Office of the Secretary for bioterrorism preparedness; Department of Education and Office of Juvenile Justice for the Coordinated System of Care. The Fees and Self-generated Revenues are from the collection of fees for services provided to clients who are not Medicaid eligible through the Statewide Management Organization (SMO)/ Magellan. Federal Funds are received from the Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services for the following grants: Community Mental Health Services (CMHS) Block; Project Assistance for Transition from Homelessness (PATH), and the Louisiana Partnership for Youth Suicide Prevention grant. The Statutory Dedications listed are from the Tobacco Tax Health Care Fund, Compulsive & Problem Gaming Fund, and the Overcollections Fund. (Per R.S. 39:36B. (8), see table below for a listing of expenditures out of each Statutory Dedication Fund.)

#### **Behavioral Health Community Statutory Dedications**

Fund	rior Year Actuals 2011-2012	F	Enacted ¥ 2012-2013	Existing Oper Budget is of 12/01/12	Continuation Y 2013-2014	commended Y 2013-2014	Total commended ver/(Under) EOB
Tobacco Tax Health Care Fund	\$ 3,200,552	\$	3,030,598	\$ 3,030,598	\$ 3,030,598	\$ 2,965,185	\$ (65,413)
Compulsive & Problem Gaming Fund	2,671,815		2,547,494	2,547,494	2,547,494	2,500,000	(47,494)
Overcollections Fund	1,252,577		0	6,371,566	0	0	(6,371,566)



#### Major Changes from Existing Operating Budget

		Table of						
	General Fund	fotal Amount	Organization	Description				
\$	1,664,107	\$ 9,257,038	0	Mid-Year Adjustments (BA-7s):				
_								
\$	49,354,342	\$ 143,668,100	243	Existing Oper Budget as of 12/01/12				
_								
				Statewide Major Financial Changes:				
	(5,294)	(5,294)	0	Group Insurance Rate Adjustment for Active Employees				
	(20,038)	(20,038)	0	Group Insurance Rate Adjustment for Retirees				
	(353,125)	(2,522,319)	0	Group Insurance Base Adjustment				
	(102,864)	(102,864)	0	Attrition Adjustment				
	(1,572,059)	(9,164,990)	0	Non-recurring Carryforwards				
	203,973	216,993	0	Risk Management				
				Non-Statewide Major Financial Changes:				
				Removes excess Fees and Self Generated Revenue budget authority associated with the privatization of W.O. Moss in FY 12. This adjustment annualized the privatization.				
	0	(2,844,621)	0					
	0	0	(202)	The Office of Behavioral Health (Regions 5, 6, 7 & 8) is entering into Interagency Transfer (IAT) agreements with the Imperial Calcasieu Human Services Authority (ICHSA), Central La Human Services District (CLHSD), Northwest La Human Services District (NLHSD), and the Northeast Delta Human Services Authority (NDHSA). As part of the agreement, the Office of Behavioral Health will be sending \$29,403,179 along with two-hundred two (202) positions that will be converted to Non T.O. FTE positions and ninety-seven (97) Non T.O. FTE positions.				
	(1,451,182)	(1,451,182)	0	Annualize mid-year reduction - Reduces contractual services.				
	(229,500)	(229,500)	0	Savings from maintenance that is no longer needed for property that DHH no longer occupies.				
	(753,001)	(7,192,368)	0	Annualize mid-year reduction - Elimination of the Early Childhood Supports and Services - Temporary Assistance for Needy Families (TANF) program as well as a reduction of Addictive Disorder TANF funds.				
	(11,399,409)	(13,529,029)	0	Removes funding from the Office of Behavioral Health to appropriate funds directly to the Acadiana Area Human Services District.				
	0	(112,907)	0	Adjustment to align with Revenue Estimating Conference (REC) projections per the 12/ 31/12 meeting. (Compulsive Gaming - (\$47,494); Tobacco Tax - (\$65,413))				
	(453,324)	(453,324)	0	Reduction and realignment of Access to Recovery Services				
	3,259,716	3,259,716	0	Funding for the administrative component of the Behavioral Health Partnership				
	4,500,000	4,500,000	0	Funding to provide services to the Office of Behavioral Health's non Medicaid population.				



#### Major Changes from Existing Operating Budget (Continued)

(	General Fund	]	Fotal Amount	Table of Organization	Description
	0		401,289	0	Aligns Interagency Budget authority with projections.
_					
\$	40,978,235	\$	114,417,662	41	Recommended FY 2013-2014
\$	0	\$	0	0	Loss Sumlementary Decommondation
Ф	0	Э	0	0	Less Supplementary Recommendation
\$	40,978,235	\$	114,417,662	41	Base Executive Budget FY 2013-2014
\$	40,978,235	\$	114,417,662	41	Grand Total Recommended

#### **Professional Services**

Amount	Description
\$2,841,654	Includes medical physician, psychiatrist and psychologist contracts.
\$869,632	Other service contracts as needed for telemedicine(psychiatric services via Tulane) and teen/youth suicide prevention/ education.
\$3,711,286	TOTAL PROFESSIONAL SERVICES

#### **Other Charges**

Amount	Description
	Other Charges:
\$5,196,509	Specialized Contracted Services include psychiatric and psychological, Mobile Crisis Response teams(Child & Adult), and transitional living.
\$3,513,829	Mental Health Block Grant contracts which include consumer advocacy and education, consumer support services, crisis response services, and family support services.
\$7,914,850	Permanent Supportive Housing
\$217,016	PATH - Projects for Assistance in Transition from Homelessness. Services for individuals who are severely mentally ill along with substance use disorders and /or co-occurring disorders.
\$5,402,336	Louisiana Behavioral Health Partnership includes on-going support services, quality management, and administrative expense.
\$1,971,660	Coordinated System of Care (CSOC)Provides for training and technical assistance on the implementation of wraparound in accordance with the standards established by the National Wraparound Initiative in the State of Louisiana. Provides support for (CSOC) implementation through systems level implementation technical assistance, workforce development and evaluation activities that facilitate continuous quality improvement.
\$496,828	Louisiana Partnership for Youth Suicide Prevention - grant targeted toward to reduce youth suicides rates and suicidal behavior in Louisiana, specifically in the Katrina and Rita hurricane impacted parishes.
\$1,127,720	Mental Health of Greater New Orleans - Provides outpatient psychiatric and psychological services at the Mid Town Algiers clinic in New Orleans. (Tulane and LSU)



#### **Other Charges (Continued)**

Amount	Description
\$8,757,772	Residential: Provides a therapeutic environment for citizens diagnosed with substance abuse disorders (chemical dependency, addiction, etc.) who are due to the severity of the disorder, cannot achieve recovery in a less restrictive environment. Services are provided to both adolescents and adults, including specialized programming to addicted pregnant women, women with dependent children. These services are either short-term (standard 28 day program or long-term (3-6 months) for the more chronic individuals. Regular: Provides non-acute and includes a planned and professionally implemented regime for person suffering from alcohol and/or other addiction problems. It operates twenty-four hours a day, seven days a week and provides medical and psychiatric care as warranted.
\$1,060,705	Community Based: Halfway House Services: Provide a structured, community-based supportive living environment for both adult and adolescent males and females after the completion of a formalized primary care treatment program. This component of care allows the client/patient an opportunity to continue to work toward recovery, as reflected by his/her individualized treatment plans; provides individuals and group counseling; 12 Steps AA/NA meetings and other self-help support group and personal growth services in a safe, drug-free setting that is supportive, and peer generated, while reintegrating into the community. The length of stay ranges from (2-6) months during which time the resident is either employed, seeking employment or enrolled in vocational/ educational activities.
\$179,704	Community Based: Recovery Homes: Provide a continuum of follow-up care for clients after the completion of treatment at a primary inpatient treatment center. The funds are for the start-up and management of the homes.
\$244,880	Provides for non-medical supervised support services to persons undergoing detoxification after a prolonged period of alcohol and/ or drug abuse where the forward motion of the addictive process can be halted and the individual can begin the screening and assessment for the development of an appropriate treatment plan. Services included are aftercare planning and referrals to appropriate components in the continuum of care. Each program has a specific number of inpatient beds assigned based on population. Services provided during the inpatient stay may include, in addition to the supervision of the detoxification process, group, individual and family counseling; introduction to a participation in self-help groups, and other information meeting and referral groups. These contractual programs provide over 36,000 patient days per year.
\$1,521,168	Outpatient treatment services provides an array of service to substance abusing individuals and their families at the community level that is least restrictive, less costly to access than formalized inpatient treatment services. These services are designed to bring the addictive process to remission and to support individual and family growth to sustain recovery. Standardized core services this component includes: Individual, family, group and couples counseling; intensive day treatment, medical services, educational services; drug screens; case management and aftercare services to both children/youth and adults statewide.
\$2,181,491	Prevention Services: The most cost effective approach for achieving success in the war against drugs is to lessen the demand for the substance. The aim of prevention contracts is to create a social environment in which substance abuse is unacceptable. Focus is on those at highest risk, which included youth in high crime and drug abuse areas, school dropouts and those experiencing difficulty in school, parents of those children, young adults and pregnant women. This task can be accomplished by assembling the resources of all the citizens of this date in a sustained and well-organized effort to alter the attitudes and behavior that encourages substance abuse. Prevention contracts are required for awareness and education to the effects of alcohol, tobacco, and other drugs of abuse, within the youth and general population of the State of Louisiana.
\$3,308,666	Access to Recovery - This program is to promote an increase to recovery access to those individuals suffering with addictive disorders by offering a freedom of choice electronic vouchers system.
\$2,500,000	Gambling - This program provides for a 24/7 helpline, a variety of awareness and prevention services, and a full array of treatment services statewide. These services are provided free of charge to Louisiana citizens, utilizing funds from the Compulsive and Problem Gambling Fund. Services.
\$686,795	TANF - These programs help address the needs of women including pregnant women and their dependent children through residential treatment services. They provide services for the women and their children including assessments, health screenings, individual, group and family sessions, psychiatric evaluations, GED programs as well as job readiness services.
\$46,281,929	SUB-TOTAL OTHER CHARGES
A1 1/2 221	Interagency Transfers:
\$1,468,901	Office of Risk Management (ORM)
\$1,725,326	Jefferson Parish Human Services Authority
\$4,675,317 \$5,097,121	Florida Parishes Human Services Authority Capital Area Human Services District
\$5,097,121 \$5,389,312	Capital Area Human Services District Metropolitan Human Services District
\$3,389,312 \$4,239,225	South Central Louisiana Human Services Authority
\$2,503,856	Acadiana Area Human Services Authority
\$8,607,657	Northeast Delta Human Services Authority - Initial startup funding



#### **Other Charges (Continued)**

Amount	Description					
\$5,810,419	Imperial Calcasieu Human Services Authority - Initial startup funding					
\$6,609,806	Central Louisiana Human Services District - Initial startup funding					
\$8,375,297	Northwest Louisiana Human Services District - Initial startup funding					
\$18,000	State Printing					
\$464,720	Telephone Services					
\$54,984,957	SUB-TOTAL INTERAGENCY TRANSFERS					
\$101,266,886	TOTAL OTHER CHARGES					

#### **Acquisitions and Major Repairs**

Amount	Description
\$0	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.

#### **Performance Information**

1. (KEY) OBH will ensure provision of services not covered under the Louisiana Behavioral Health Partnership at the same level of quality and effectiveness as the partnership so that members are receiving competent services in OBH clinics and by Access to Recovery (ATR) providers, as indicated by at least a 90% satisfaction response by members when surveyed about service access, quality, and outcomes.

Children's Budget Link: Child/adolescent services are linked to the goals of the Children's Cabinet.

Human Resource Policies Beneficial to Women and Families Link: Linked to relevant Department of Health and Hospitals policies.

Other Links OBH Business Plan and RFP deliverables for the State Management Organization (SMO).



#### **Performance Indicators**

			Performance Indicator Values					
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014		
K Percentage of members (adults) reporting positive satisfaction with access to clinic services (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	90%	90%		
K Percentage of members reporting positive satisfaction with quality of clinic services (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	90%	90%		
K Percentage of members reporting positive satisfaction with outcome of clinic services (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	90%	90%		
K Percentage of clients reporting positive satisfaction with ATR services (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	90%	90%		

#### Behavioral Health Community General Performance Information

	Performance Indicator Values								
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012				
Number of Community Mental Health Centers operated statewide (LAPAS CODE - 12235)	40	40	45	23	26				
Total admissions: Outpatient Gambling (LAPAS CODE - 3003)	402	551	603	570	336				
Number of services provided: Outpatient Gambling (LAPAS CODE - 3007)	56,572	8,531	12,979	12,944	7,604				
Total admissions: Inpatient Gambling (LAPAS CODE - 8218)	152	152	132	133	116				

2. (KEY) During FY 2013-2014, OBH, as a monitor of the State Management Organization (SMO) will assure that the SMO fulfills its obligations to the state and citizens of Louisiana by operating a system of high quality, readily accessible and cost effective services as indicated by maintaining an adequate provider network, filling 90% of provider gaps within 30 days of reporting and with a 90% of providers reporting satisfaction with the SMO response.

Children's Budget Link: Child/adolescent services are linked to the goals of the Children's Cabinet.



Human Resource Policies Beneficial to Women and Families Link: Linked to relevant Department of Health and Hospitals policies.

Other Links OBH Business Plan and RFP deliverables for the State Management Organization (SMO).

#### **Performance Indicators**

			Performance Ind			
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of provider gaps filled within 30 days of notice (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	90%	90%
K Percent of providers reporting satisfaction with SMOis (based on Survey) responses (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	90%	90%

# 3. (KEY) Through the Non-Residential (Prevention) services activity, will promote behavioral health wellness as indicated by only 20% percent of individuals served reporting use of alcohol, tobacco and other drugs during the last 30 days and by an annual tobacco non-compliance rate (tobacco sale rate to minors) of no more than 10%.

Children's Budget Link: Child/adolescent services are linked to the goals of the Children's Cabinet.

Human Resource Policies Beneficial to Women and Families Link: Linked to relevant Department of Health and Hospitals policies.

Other Links OBH Business Plan and RFP deliverables for the State Management Organization (SMO).



#### **Performance Indicators**

			Performance In	dicator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
S Number of individuals served by evidence-based prevention programs (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	44,900	44,900
K Percentage of individuals served, ages 12-17, who reported that they used alcohol, tobacco and marijuana during the last 30 days (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	20%	20%
S Cost per participant enrolled (LAPAS CODE - 3016)	\$ 85	\$ 52	\$ 52	\$ 52	\$ 52	\$ 52
K Annual tobacco non- compliance rate (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	10%	10%

#### Behavioral Health Community General Performance Information

		Performance Indicator Values								
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012					
Total number of participants enrolled (LAPAS CODE - 3014)	19,585	33,071	45,010	48,065	44,902					



#### **330\_3000 — Hospital Based Treatment**

Program Authorization: Executive Reorganization Act; R.S. 38:259 (c); Mental Health Law; R.S. 28:1 et. seq.

#### **Program Description**

The mission of the Hospital Based Treatment Program is to provide a comprehensive, integrated, evidence informed treatment and support services enabling persons to function at their optimal level thus promoting recovery.

The goals of the Hospital Based Treatment program are the following:

- I. To promote recovery through the efficient use of evidence informed care and successful transition to community based services.
- II. To provide for services to individuals involved with the court system in compliance with the consent decree ruling.

Hospital Based Treatment Services refer to the State Psychiatric Hospital Program(s) which provide an array of services to persons in need of acute, intermediate or long-term psychiatric inpatient care, including special treatment populations, such as those persons who are forensically involved, affected by substance abuse, or with developmental neuropsychiatric disorders. Programs are also specialized to meet the needs of children/ youth and adults. The state psychiatric hospitals are coordinated with community emergency services, treatments, and supports, and provide inpatient evaluation, diagnosis, treatment, and rehabilitation. Treatment services include individual, family, and group psychotherapy, recreational and occupational therapy, art and music therapy, work therapy, speech and hearing therapy, nutritional counseling, dental services, pastoral care services, and limited diagnostic medical services.

#### **Hospital Based Treatment Budget Summary**

	Prior Year Actuals Y 2011-2012	F	Enacted Y 2012-2013	Existing Oper Budget as of 12/01/12	Continuation Y 2013-2014	ecommended Y 2013-2014	Total ecommended Over/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 92,951,013	\$	95,703,993	\$ 95,781,641	\$ 96,786,237	\$ 88,107,171	\$ (7,674,470)
State General Fund by:							
Total Interagency Transfers	70,029,365		72,529,456	72,529,456	72,990,469	56,106,931	(16,422,525)
Fees and Self-generated Revenues	1,114,801		3,856,832	3,856,832	3,856,832	3,856,832	0
Statutory Dedications	2,604,080		0	0	0	0	0
Interim Emergency Board	0		0	0	0	0	0
Federal Funds	2,245,738		2,226,551	2,226,551	2,226,551	1,983,423	(243,128)
Total Means of Financing	\$ 168,944,997	\$	174,316,832	\$ 174,394,480	\$ 175,860,089	\$ 150,054,357	\$ (24,340,123)

Expenditures & Request:



		Prior Year Actuals Y 2011-2012	F	Enacted 'Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation 'Y 2013-2014	ecommended Y 2013-2014	Total ecommended over/(Under) EOB
Personal Services	\$	126,328,930	\$	124,086,631	\$ 124,211,890	\$ 124,246,096	\$ 95,445,612	\$ (28,766,278)
Total Operating Expenses		17,280,427		19,492,669	20,073,809	20,501,224	29,215,429	9,141,620
Total Professional Services		8,856,819		8,542,961	9,864,684	10,146,814	6,816,136	(3,048,548)
Total Other Charges		16,076,682		22,179,571	20,151,449	20,845,955	18,577,180	(1,574,269)
Total Acq&Major Repairs		402,139		15,000	92,648	120,000	0	(92,648)
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	168,944,997	\$	174,316,832	\$ 174,394,480	\$ 175,860,089	\$ 150,054,357	\$ (24,340,123)
Authorized Full-Time Equiva	lents	s:						
Classified		1,860		1,725	1,725	1,725	1,295	(430)
Unclassified		19		19	19	19	19	0
Total FTEs		1,879		1,744	1,744	1,744	1,314	(430)

#### **Hospital Based Treatment Budget Summary**

#### **Source of Funding**

The Hospital Based Treatment program is funded with State General Fund, Interagency Transfers, Fees and Self Generated funds, and Federal Funds. Interagency Transfers include Title XIX reimbursement for services provided to Medicaid eligible patients, and reimbursements from various state and local agencies for services received. Fees and Self-generated Revenues represent reimbursement for ineligible patients with insurance or personal payments based on a sliding fee scale and meals served to employees and visitors. Federal Funds are Title XVIII reimbursement for services provided to Medicare eligible patients and federal grants from the U.S. Department of Housing and Urban Development (HUD) for transitional and permanent housing and group homes. The Statutory Dedication listed is from the Overcollections Fund. (Per R.S. 39:36B. (8), see table below for a listing of expenditures out of each Statutory Dedication Fund.)

#### **Hospital Based Treatment Statutory Dedications**

Fund	ior Year Actuals 2011-2012	eted 12-2013	sting Oper Budget of 12/01/12	Continuation FY 2013-2014	ecommended Y 2013-2014	Total commende ver/(Under EOB	
Overcollections Fund	\$ 2,604,080	\$ 0	\$ 0	\$ 0	\$ 0	\$	0



G	eneral Fund	T	otal Amount	Table of Organization	Description
\$	(7,200)	\$	(7,200)	0	Mid-Year Adjustments (BA-7s):
\$	95,781,641	\$	174,394,480	1,744	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
\$	0	\$	689,019	0	Louisiana State Employees' Retirement System Rate Adjustment
\$	(57,660)	\$	(113,059)	0	Group Insurance Rate Adjustment for Active Employees
\$	(85,821)	\$	(168,276)	0	Group Insurance Rate Adjustment for Retirees
\$	(472,136)	\$	(814,028)	0	Group Insurance Base Adjustment
\$	(171,426)	\$	(295,562)	0	Group Insurance Base Adjustment for Retirees
\$	(591,386)	\$	(1,137,281)	0	Salary Base Adjustment
\$	(1,762,442)	\$	(3,596,821)	0	Attrition Adjustment
\$	(15,000)	\$	(15,000)	0	Non-Recurring Acquisitions & Major Repairs
\$	(84,848)	\$	(84,848)	0	Non-recurring Carryforwards
\$	728,460	\$	1,546,900	0	Risk Management
					Non-Statewide Major Financial Changes:
\$	(75,566)	\$	(330,561)	(35)	Reduces funding associated from the privatization of the food service program in FY2013
\$	(168,570)	\$	(168,570)	0	Savings from maintenance that is no longer needed for property that DHH no longer occupies.
\$	(2,922,359)	\$	(17,856,320)	(395)	State General Fund savings and Uncompensated Care Costs redistribution as a result of the redistribution and privatization of the beds previously operated by Southeast Louisiana State Hospital.
\$	(1,016,508)	\$	(1,016,508)	0	Reduces contractual services.
\$	(376,573)	\$	(376,573)	0	Reduction to pharmaceuticals as these will be leveraged through Medicaid
\$	(157,228)	\$	(157,228)	0	Reduction in food supplies
\$	(445,407)	\$	(445,407)	0	Reduction to contract due to underutilization of physician services
\$	88,107,171	\$	150,054,357	1,314	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
\$	88,107,171	\$	150,054,357	1,314	Base Executive Budget FY 2013-2014
\$	88,107,171	\$	150,054,357	1,314	Grand Total Recommended
φ	00,107,171	φ	150,054,557	1,514	

#### Major Changes from Existing Operating Budget

#### **Professional Services**

Amount		Description
\$2,500	Audiologist	



#### **Professional Services (Continued)**

Amount	Description
\$70,200	Chaplain servies as required by CMS
\$6,192	Clothes Closet/Food Pantry - patient services
\$15,200	Consultant for the Joint Commission & CMS process
\$8,010	Deaf interpreter services
\$58,563	Dental services
\$3,840	EEG Technician services
\$3,500	Electrocardiogram interpretation
\$4,800	Infection Control Consultant
\$3,000	Language interpreter - to assist with language barriers
\$15,000	Librarian - for educational program used by professional hospital staff
\$17,500	Neurological Services
\$150,000	Nursing Services
\$21,000	Ophthalmology
\$2,100	Pathologist
\$6,196,417	Psychiatry & Psychology Services (Tulane and LSU)
\$1,000	Medical Review of Patient Charts
\$39,448	Speech Therapists
\$197,866	Other Professional services /consultants
\$6,816,136	TOTAL PROFESSIONAL SERVICES

#### **Other Charges**

Amount	Description
	Other Charges:
\$26,400	Provide vocational rehabilitation for Community Home Residents at ELMHS through job coaching.
\$4,567,768	Group Homes in the community for severly/persistenly mentally ill
\$38,019	LSU Student Health Center and ELMHS will jointly direct a Doctoral Psychology Program.
\$9,585	To provide interpreter services to clients.
\$88,003	Consulting for compliation of cost and related reports
\$305,819	Patient Rehabilitation Labor Program
\$35,658	Fees to maintain licensure under Joint Commisson standard
\$5,071,252	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$316,000	Funds transferred between state agencies in exchange for commodities & services
\$44,983	DCI Prison Inmate Labor
\$7,807	Funds transferred between state agencies in exchange for printing services
\$11,624,778	ORM - Assessment for insurance coverage
\$20	Funds transferred between state agencies for postage
\$564,092	OTM - Provides telecommunication services
\$556,000	Villa - Medical Services
\$322,248	Funds transferred between state agencies for administrative indirect costs
\$70,000	Funds transferred for Legislative Auditors fees and other miscellaneous
\$13,505,928	SUB-TOTAL INTERAGENCY TRANSFERS



#### **Other Charges (Continued)**

Amount	Description	
\$18,577,180	TOTAL OTHER CHARGES	

#### **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.
\$0	TOTAL ACQUISITIONS AND MAJOR REPAIRS

#### **Performance Information**

1. (KEY) Through the Hospital-Based Treatment activity, the Office of Behavioral Health will improve behavioral health outcomes of inpatient care by maintaining 30 days readmission rate within the national norm and promote recovery by fostering successful transition to communitybased services as evidenced by a minimum of 90% of persons discharged will have their continuing care plans transmitted to the next level provider.

Human Resource Policies Beneficial to Women and Families Link: Linked to relevant Department of Health and Hospitals policies.

L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Ind Performance Standard as Initially Appropriated FY 2012-2013	licator Values Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of adults discharged from a state hospital and readmitted within 30 days of discharge (Statewide) (LAPAS CODE - 24230)	3.2%	1.5%	2.0%	1.4%	1.5%	1.5%
K Percentage of persons discharged with post discharge care plans transmitted to the next level provider (Statewide) (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	90%	90%

#### **Performance Indicators**

## 2. (SUPPORTING)Enabling persons to function at their optimal level with minimum environmental restrains, thus promoting recovery as demonstrated by maintaining a rate of the use of physical restraints below national norm.

Human Resource Policies Beneficial to Women and Families Link: Linked to relevant Department of Health and Hospitals policies.



Explanatory Note: This is a Joint Commission Performance Management Initiative. Data source is National Public Rates from the NASMPHD Research Institute (as reported by ORYX).

#### **Performance Indicators**

				Performance Indicator Values								
L				Performance								
e		Yearend		Standard as	Existing	Performance At	Performance					
v		Performance	Actual Yearend	Initially	Performance	Continuation	At Executive					
e	Performance Indicator	Standard	Performance	Appropriated	Standard	Budget Level	Budget Level					
1	Name	FY 2011-2012	FY 2011-2012	FY 2012-2013	FY 2012-2013	FY 2013-2014	FY 2013-2014					
S	Ratio of inpatient restraint hours to inpatient days (Statewide) (LAPAS											
	CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable							

### 3. (KEY) The Office of Behavioral Health-Psychiatric will maintain at least 90% compliance with the Federal Consent Decree.

Human Resource Policies Beneficial to Women and Families Link: Linked to relevant Department of Health and Hospitals policies.

Other Links Federal Consent Decree (Doc 185).

Explanatory Note: Competency refers to the issue of whether or not someone charged with a crime understands the court proceedings and whether or not they can participate in their own defense. Competency restoration is the process by which the hospital staff treats and/or educates the clients so that they meet requirements to be considered competent.

				Performance Indicator Values							
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014				
K	Percentage of compliance with Federal consent decree (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	90%	90%				

#### **Performance Indicators**



#### Hospital Based Treatment General Performance Information

	Performance Indicator Values											
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012							
Inpatient Care (Adults - Southeast Louisiana Hospital) - Total persons served (LAPAS CODE - 11970)	523	713	1,198	779	674							
Inpatient Care (Adults - Southeast Louisiana Hospital) - Average daily census (LAPAS CODE - 11974)	109	148	136	124	123							
Inpatient Care (Adolescents/Children - Southeast Louisiana Hospital) - Average daily occupancy rate (LAPAS CODE - 11996)	80.0%	92.1%	78.1%	97.0%	90.0%							
Inpatient Care (Adults - East Louisiana State Hospital) - Total persons served (LAPAS CODE - 11761)	457	451	411	459	332							
Inpatient Care (Adults - East Louisiana State Hospital) - Average daily census (LAPAS CODE - 11763)	291	297	268	194	134							
Inpatient Care (Adults - East Louisiana State Hospital) - Average length of stay in days (LAPAS CODE - 11766)	335	773	633	1,668	104							
Inpatient Care (Adults - East Louisiana State Hospital) - Average daily occupancy rate (LAPAS CODE - 11764)	100%	100%	93%	96%	99%							
Inpatient Care (Adults - Feliciana Forensic Facility) - Average daily census (LAPAS CODE - 11769)	234	235	235	235	254							
Inpatient Care (Adults - Feliciana Forensic Facility) - Average length of stay in days (LAPAS CODE - 11772)	1,232	819	1,128	438	767							
Inpatient Care (Adults - Feliciana Forensic Facility) - Average daily occupancy rate (LAPAS CODE - 11770)	100%	100%	100%	100%	100%							
Inpatient Care (Overall) - Average daily census (LAPAS CODE - 17030)	525	532	252	159	194							
Inpatient Care (Overall) - Average daily occupancy rate (LAPAS CODE - 17031)	100%	100%	97%	98%	100%							
Inpatient Care (Adults) - Total adults served (LAPAS CODE - 11467)	138	142	141	146	101							
Inpatient Care (Adults) - Average daily census (LAPAS CODE - 10124)	113.23	112.82	113.82	77.49	61.36							
Inpatient Care (Adults) - Average length of stay in days (LAPAS CODE - 10123)	281.92	290.01	294.64	193.73	223.36							
Inpatient Care (Adults) - Average daily occupancy rate (LAPAS CODE - 10125)	97.61%	97.26%	98.12%	100.00%	102.27%							
Inpatient Care (Adolescents/Children) - Total persons served (LAPAS CODE - 11505)	86	78	77	33	0							
Inpatient Care (Adolescents/Children) - Central Louisiana State Hospital - Average daily census (LAPAS CODE - 10130)	9.43	14.22	11.28	6.76	0							



#### Hospital Based Treatment General Performance Information (Continued)

	Performance Indicator Values											
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012							
Inpatient Care (Adolescents/Children) - Central Louisiana State Hospital - Average length of stay in days (LAPAS CODE - 10129)	40.15	66.54	53.45	74.79	0							
Inpatient Care (Adolescents/Children) - Central Louisiana State Hospital - Average daily occupancy rate (LAPAS CODE - 10131)	43.8%	72.0%	80.5%	56.4%	0							
Inpatient Care (Overall) - Average daily census (LAPAS CODE - 11430)	122.66	127.00	125.00	84.00	61.00							
Inpatient Care (Central Louisiana State Hospital Adult Adolescent/Children - Overall) - Average daily occupancy rate (LAPAS CODE - 8099)	89.2%	93.6%	96.2%	94.8%	102.3%							



#### 330\_A000 — Auxiliary Account

Program Authorization: Executive Reorganization Act; R.S. 38:259 (c); Mental Health Law; R.S. 28:1 et. seq.

#### **Program Description**

The Auxiliary program in the Office of Behavioral Health contains the following account:

• The Patient Recreation and Rehabilitation Home Fund Account - Provides therapeutic activities to patients as approved by the treatment teams.

#### **Auxiliary Account Budget Summary**

	Prior Year Actuals FY 2011-2012		Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12		Continuation FY 2013-2014		Recommended FY 2013-2014		Total Recommended Over/(Under) EOB	
Means of Financing:											
State General Fund (Direct)	\$	) \$	0	\$ 0	\$	S 0	\$	0	\$	1	
State General Fund by:											
Total Interagency Transfers	(	)	0	0		0		0			
Fees and Self-generated Revenues	1,66	5	20,000	20,000		20,000		20,000			
Statutory Dedications	(	)	0	0		0		0			
Interim Emergency Board		)	0	0		0		0			
Federal Funds	(	)	0	0		0		0			
Total Means of Financing	\$ 1,66	5\$	20,000	\$ 20,000	\$	5 20,000	\$	20,000	\$		
Expenditures & Request:											
Personal Services	\$	) \$	0	\$ 0	\$	6 0	\$	0	\$		
Total Operating Expenses	1,574	1	0	0		0		0			
Total Professional Services	(	)	0	0		0		0			
Total Other Charges	9	1	20,000	20,000		20,000		20,000			
Total Acq & Major Repairs		)	0	0		0		0			
Total Unallotted		)	0	0		0		0			
Total Expenditures & Request	\$ 1,66	5\$	20,000	\$ 20,000	\$	5 20,000	\$	20,000	\$		
Authorized Full-Time Equiva	lents:										
Classified		)	0	0		0		0			
Unclassified		)	0	0		0		0			
Total FTEs		)	0	0		0		0			



#### **Source of Funding**

The Auxiliary Account is funded from Fees and Self-generated Revenues. Self-generated Revenues are generated by the sale of patient's goods, fees from the annual symposium, and through donations and must be used for education purposes.

#### **Major Changes from Existing Operating Budget**

Genera	al Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	0	\$	20,000	0	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
					Non-Statewide Major Financial Changes:
\$	0	\$	20,000	0	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
\$	0	\$	20,000	0	Base Executive Budget FY 2013-2014
\$	0	\$	20,000	0	Grand Total Recommended

#### **Professional Services**

Amount	Description
	This program does not have funding for Professional Services for Fiscal Year 2013-2014.

#### **Other Charges**

Amount	Description									
	Other Charges:									
\$20,000	These funds are used to purchase equipment and items for group homes									
\$20,000	SUB-TOTAL OTHER CHARGES									
	Interagency Transfers:									
	This program does not have funding for Interagency Transfers for Fiscal Year 2013-2014.									
\$0	SUB-TOTAL INTERAGENCY TRANSFERS									
\$20,000	TOTAL OTHER CHARGES									



#### **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.



#### 09-340 — Office for Citizens w/Developmental Disabilities



#### **Agency Description**

Mission: The Office for Citizens with Developmental Disabilities (OCDD) is committed to quality services and supports, information, and opportunities for choice to people of Louisiana with developmental disabilities and their families.

The goals of the Office for Citizens with Developmental Disabilities are:

- I. To provide a Developmental Disabilities Services System which affords people with information about what services and supports are available and how to access the services.
- II. To provide a person-centered planning process consistent with a needs-based assessment that focuses on the person's goals and desires and addresses quality of life.
- III. To increase the capacity of the Developmental Disabilities Services System to provide opportunities for people to live, work, and learn in integrated community settings.
- IV. To increase the capacity of the Developmental Disabilities Services System to support people with complex behavioral, mental health, and/or medical needs in all service settings.
- V. To implement an integrated, full-scale data-driven quality enhancement system.
- VI. To rebalance the Developmental Disabilities Services System in an efficient and equitable manner such that the resources are allocated to enable people to live in the most integrated setting appropriate to their needs.

The Office for Citizens with Developmental Disabilities consists of four programs:

- Administration and General Support
- Community-Based Supports
- Pinecrest Supports and Services Center (includes Central Louisiana, North Lake, Northwest, and Greater New Orleans (GNO) Resource Centers)
- Auxiliary Account

Statement of Agency Strategies for Development and Implementation of Human Resource Policies that are helpful and Beneficial to Women and Families:

• OCDD's Affirmative Action Plan provides for equal opportunities for the recruitment, employment, training and promotion of all employees based solely on merit factors and prohibits the use of gender and other non-merit factors.



- OCDD follows the DHH Family and Medical Leave Policy to provide up to 12 workweeks of "job-protected" paid or unpaid leave during any 12-month period to eligible employees for certain specified family and medical reasons.
- OCDD follows the DHH Leave for Classified Employees Policy to credit and grant leave in accordance with Civil Service Rules and provisions of the DHH leave policy. Leave is administered as uniformly and equitable as possible with our regard to race, sex, age, religion, national origin, disability, veteran status, and any other non-merit factors.
- OCDD's Time and Attendance Policy permits the use of flexible time schedules for employees as approved by the supervisor and management.

For additional information, see:

Office for Citizens w/Developmental Disabilities

Federal Centers for Disease Control (CDC)

National Assoc.of State Develop.Disab.Services

#### Office for Citizens w/Developmental Disabilities Budget Summary

	Prior Year Actuals FY 2011-2012		F	Enacted FY 2012-2013		Existing Oper Budget as of 12/01/12		Continuation FY 2013-2014		Recommended FY 2013-2014		Total Recommended Over/(Under) EOB	
Means of Financing:													
State General Fund (Direct)	\$	33,906,078	\$	38,414,345	\$	38,414,345	\$	34,816,633	\$	29,764,271	\$	(8,650,074)	
State General Fund by:													
Total Interagency Transfers		170,766,861		134,190,266		134,490,597		141,530,539		114,648,319		(19,842,278)	
Fees and Self-generated Revenues		5,634,968		9,861,681		9,861,681		6,908,890		6,875,670		(2,986,011)	
Statutory Dedications		3,330,017		0		0		0		0		0	
Interim Emergency Board		0		0		0		0		0		0	
Federal Funds		9,665,904		6,762,550		6,854,534		6,377,619		6,376,792		(477,742)	
Total Means of Financing	\$	223,303,828	\$	189,228,842	\$	189,621,157	\$	189,633,681	\$	157,665,052	\$	(31,956,105)	
Expenditures & Request:													
Administration and General Support	\$	2,689,404	\$	2,791,918	\$	2,791,918	\$	3,150,337	\$	2,775,799	\$	(16,119)	
Community-Based		43,303,055		44,549,336		44,641,320		40,120,146		35,765,179		(8,876,141)	
Pinecrest Supports and Services Center		176,992,851		140,719,396		141,019,727		145,762,711		118,556,807		(22,462,920)	
Auxiliary Account		318,518		1,168,192		1,168,192		600,487		567,267		(600,925)	
Total Expenditures & Request	\$	223,303,828	\$	189,228,842	\$	189,621,157	\$	189,633,681	\$	157,665,052	\$	(31,956,105)	



	A	or Year ctuals 011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB
Authorized Full	-Time Equivalents:						
Classified		2,680	1,517	1,518	1,423	1,410	(108)
Unclassified		36	36	35	35	35	0
	<b>Total FTEs</b>	2,716	1,553	1,553	1,458	1,445	(108)

#### Office for Citizens w/Developmental Disabilities Budget Summary



#### **340\_1000** — Administration and General Support

Program Authorization: R.S. 28:451.1-455.2 and R.S. 28:821-824.

#### **Program Description**

The mission of the Administration and General Support Program is to provide effective and responsive leadership in the administration and enhancement of the Developmental Disabilities Services System in order for people with developmental disabilities to receive information, opportunities for choice, and quality supports and services.

The goal of the Administration and General Support Program is:

I. To provide system design, policy direction, and operational oversight to the Developmental Disabilities Services System in a manner which promotes personcenteredness, promising practices, accountability, cost-effectiveness, and consumer responsiveness.

The Administration and General Support Program includes one activity:

OCDD Central Office Administrative Services - This activity centralizes the management functions for the
Office for Citizens with Developmental Disabilities, including its Community Services Regional Offices
and Waiver Services, and provides direction and oversight to these offices in carrying out the legislative
mandates and programmatic responsibilities on behalf of people with developmental disabilities and their
families. Headquarters also manages the Office's human resources, fiscal, property, and information systems and provides leadership to state-operated Supports and Services Centers as they exercise their mandates under state law.

	Prior Year Actuals Y 2011-2012	F	Enacted 'Y 2012-2013	Existing Oper Budget as of 12/01/12	Continuation 'Y 2013-2014	ecommended 'Y 2013-2014	Total commended ver/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 2,622,767	\$	2,659,707	\$ 2,659,707	\$ 3,018,126	\$ 2,643,588	\$ (16,119)
State General Fund by:							
Total Interagency Transfers	9,142		132,211	132,211	132,211	132,211	0
Fees and Self-generated Revenues	0		0	0	0	0	0
Statutory Dedications	57,495		0	0	0	0	0
Interim Emergency Board	0		0	0	0	0	0
Federal Funds	0		0	0	0	0	0
Total Means of Financing	\$ 2,689,404	\$	2,791,918	\$ 2,791,918	\$ 3,150,337	\$ 2,775,799	\$ (16,119)

#### Administration and General Support Budget Summary



	Prior Year Actuals FY 2011-2012	I	Enacted FY 2012-2013	isting Oper Budget of 12/01/12	Continuation FY 2013-2014	ecommended 'Y 2013-2014	Total commended ver/(Under) EOB
Expenditures & Request:							
Personal Services	\$ 2,153,269	\$	2,027,340	\$ 2,027,340	\$ 2,415,507	\$ 2,042,353	\$ 15,013
Total Operating Expenses	34,714	ļ	73,589	73,589	74,973	73,589	0
Total Professional Services	(	)	0	0	0	0	0
Total Other Charges	501,421		690,989	690,989	659,857	659,857	(31,132)
Total Acq & Major Repairs	(	)	0	0	0	0	0
Total Unallotted	(	)	0	0	0	0	0
Total Expenditures & Request	\$ 2,689,404	\$	2,791,918	\$ 2,791,918	\$ 3,150,337	\$ 2,775,799	\$ (16,119)
Authorized Full-Time Equiva	lents:						
Classified	14	Ļ	13	13	13	13	0
Unclassified	1		1	1	1	1	0
<b>Total FTEs</b>	15	;	14	14	14	14	0

#### Administration and General Support Budget Summary

#### Source of Funding

The Administration and General Support Program is funded with State General Fund and Interagency Transfers.

#### Administration and General Support Statutory Dedications

Fund	rior Year Actuals 2011-2012	acted 12-2013	cisting Oper Budget of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total ecommended Over/(Under) EOB
Overcollections Fund	\$ 57,495	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

#### Major Changes from Existing Operating Budget

Gei	General Fund Total Amount		Table of Organization	Description	
\$	0	0 \$ 0		0	Mid-Year Adjustments (BA-7s):
\$	2,659,707	59,707 \$ 2,791,918 14		14	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
\$	(1,198)	\$	(1,198)	0	Group Insurance Rate Adjustment for Active Employees
\$	(12,384)	\$	(12,384)	0	Group Insurance Rate Adjustment for Retirees
\$	(5,363)	\$	(5,363)	0	Group Insurance Base Adjustment
\$	33,958	\$	33,958	0	Salary Base Adjustment



#### Major Changes from Existing Operating Budget (Continued)

Ge	eneral Fund	1	otal Amount	Table of Organization	Description						
\$	11,000	\$	11,000	0	Risk Management						
\$	(19,661)	\$	(19,661)	0	Rent in State-Owned Buildings						
\$	(18,428)	\$	(18,428)	0	Maintenance in State-Owned Buildings						
\$	3,886	\$	3,886	0	Capitol Police						
\$	(7,929)	\$	(7,929)	0	Office of Computing Services Fees						
					Non-Statewide Major Financial Changes:						
\$	2,643,588	\$	2,775,799	14	Recommended FY 2013-2014						
\$	0	\$	0	0	Less Supplementary Recommendation						
\$	2,643,588	\$	2,775,799	14	Base Executive Budget FY 2013-2014						
\$	2,643,588	\$	2,775,799	14	Grand Total Recommended						

#### **Professional Services**

Amount	Description
	This program does not have funding for Professional Services for Fiscal Year 2013-2014.

#### **Other Charges**

Amount	Description
	Other Charges
\$75,476	Self-Directed Services-Reimbursement for staff overhead cost incurred by participants of the New Opportunities Waiver Self-Direction Program. Overhead costs include finger printing, drug testing, employee training such as CPR, first aid, abuse and neglect as required by direct support worker standards.
\$75,476	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$27,800	Office of Telecommunications Management (OTM) Fees
\$40,434	Commodities and Services
\$2,289	Office of Computing Services
\$6,498	Capitol Police
\$302,418	Rent in State-Own Buildings
\$58,001	Maintenance in State-Own Buildings
\$146,941	Office of Risk Management (ORM)
\$584,381	SUB-TOTAL INTERAGENCY TRANSFERS
\$659,857	TOTAL OTHER CHARGES



#### **Acquisitions and Major Repairs**



#### **Performance Information**

#### 1. (KEY) To provide programmatic leadership and direction to Louisiana's Developmental Disabilities Services System in a manner that is responsive to citizen's needs and results in effective/efficient service delivery.

Children's Budget Link: Linked to home and community-based and individualized services for people with developmental disabilities, specifically: expansion of community living options for people who reside in supports and services centers; and increased flexibility and self-direction in state supports for people with developmental disabilities living with their families.

Human Resource Policies Beneficial to Women and Families Link: This objective supports Act 1078 by providing access to and provision of health care services to women, infants, and children.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Links to Louisiana Health Care Reform Act through activities/strategies in six broad focus areas: Providing Care to the Uninsured, Creating Access to Appropriate Health Care Resources, Improving and Restructuring the Long-Term Care in Louisiana, Improving Health Education and Awareness, Improving Administrative Delivery of Health Care, and Focusing on Performance Outcomes Using Evidence-Based Principles. Links to OCDD Business Plan through activities/strategies in three broad focus areas: Employment First for Citizens with Developmental Disabilities - Real Jobs, Real Wages; Sustainable Home and Community-Based Supports and Services - Moving from a Service Life to a Community Life; and Systems Rebalancing for People with Developmental Disabilities - Promoting Community, Affordability and Sustainability.



#### **Performance Indicators**

				Performance Ind	licator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
К	Percentage of New Opportunities Waiver (NOW) participants making progress toward or achieving personal goals (from quarterly quality review tool) (LAPAS CODE - 24643)	90%	100%	90%	90%	90%	90%
К	Percentage of Support Coordinator Supervisors achieving and/or maintaining certification(s) as determined by OCDD (LAPAS CODE - 24644)	70%	95%	70%	70%	70%	85%
S	Percentage of individuals enrolled in EarlySteps Program who receive the scheduled autism screening (LAPAS CODE - 24645)	50%	74%	50%	50%	50%	50%
K	Percentage of budgeted community funding expended (LAPAS CODE - 24647)	98%	98%	98%	98%	98%	98%
K	Number of years and months on Request for Services Registry until offered a New Opportunities Waiver (NOW) opportunity (LAPAS CODE - 24648)	8.5	7.8	7.5	7.5	7.5	7.5
К	Number of years and months on Request for Services Registry until offered a Children's Choice (CC) Waiver opportunity (LAPAS CODE - 24649)	7.5	7.3	6.5	6.5	6.5	6.5
K	Number of years and months on Request for Services Registry until offered a Supports Waiver (SW) opportunity (LAPAS CODE - 24650)	0.5	0.1	0.3	0.3	0.3	0.3
K	Number of individuals with developmental disabilities supported through HCBS Waivers (LAPAS CODE - 25034)	Not Applicable	Not Applicable	11,859	11,859	11,859	11,859



#### 2. (SUPPORTING)To provide administrative support functions to Louisiana's Developmental Disabilities Services System in a manner that is responsive to citizens' needs and results in effective/efficient service delivery.

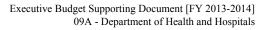
Children's Budget Link: Linked to home and community-based and individualized services for people with developmental disabilities, specifically: expansion of community living options for people who reside in supports and services centers; and increased flexibility and self-direction in state supports for people with developmental disabilities living with their families.

Human Resource Policies Beneficial to Women and Families Link: This objective supports Act 1078 by providing access to and provision of health care services to women, infants, and children.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Links to Louisiana Health Care Reform Act through activities/strategies in six broad focus areas: Providing Care to the Uninsured, Creating Access to Appropriate Health Care Resources, Improving and Restructuring the Long-Term Care in Louisiana, Improving Health Education and Awareness, Improving Administrative Delivery of Health Care, and Focusing on Performance Outcomes Using Evidence-Based Principles. Links to OCDD Business Plan through activities/strategies in three broad focus areas: Employment First for Citizens with Developmental Disabilities - Real Jobs, Real Wages; Sustainable Home and Community-Based Supports and Services - Moving from a Service Life to a Community Life; and Systems Rebalancing for People with Developmental Disabilities - Promoting Community, Affordability and Sustainability.

#### **Performance Indicators**

			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
S Percentage of months in the designated period that monthly expenditure reports were delivered accurately and timely (LAPAS CODE - 24653)	95%	100%	95%	95%	95%	95%





#### **Performance Indicators (Continued)**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
S Percentage of people surveyed reporting they had overall satisfaction with services received (LAPAS CODE - 22461)	90%	97%	93%	93%	90%	90%
S Percentage of people surveyed reporting that they had choice in the services they received (LAPAS CODE - 22462)	90%	83%	90%	90%	90%	90%
S Percentage of regional offices and human services districts/authorities receiving an annual validation visit (from review of report of validation visits) (LAPAS CODE - 24654)	95%	100%	95%	95%	95%	95%
S Percentage of months in the fiscal year that a monthly contract report was produced reflecting status of Office contracts (LAPAS CODE - 24655)	95%	100%	95%	95%	95%	95%

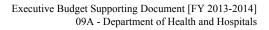


DEPARTMENT ID: 09 - DEPARTMENT OF HEALTH AND HOSPITALS AGENCY ID: 340 - Office For Citizens With Developmental Disabilities PROGRAM ID: Program 1000 - Administration PROGRAM ACTIVITY: OCDD Central Office Administrative Services

SOUTHERN STA	TE COMPARISON
Residential Placement	ls served in Out-of-Home nts in 1-6 Bed Settings 30, 2010)
STATE	% Served
Alabama	71.0%
Arkansas	98.0%
Florida	Not available
Georgia	90.0%
Kentucky	84.0%
Louisiana	73.0%
Maryland	95.0%
Mississippi	14.0%
North Carolina	Not available
Oklahoma	64.0%
South Carolina	66.0%
Tennessee	78.0%
Texas	80.0%
Virginia	60.0%
West Virginia	70.0%
AVERAGE	67.4%

GENERAL PERFORMANCE INFORMATION:

Source: Residential Services for Persons with Developmental Disabilities: Status and Trends Through 2010, from the Research and Training Center on Community Living College of Education and Human Development, University of Minnesota.



DEPARTMENT ID: 09 - DEPARTMENT OF HEALTH AND HOSPITALS AGENCY ID: 340 - Office For Citizens With Developmental Disabilities PROGRAM ID: Program 1000 - Administration PROGRAM ACTIVITY: OCDD Central Office Administrative Services

State Institution (16+) H	er Diem Rates
(June 30, 20	10)
STATE	PER DIEM
Alabama	\$577
Arkansas	Not available
Florida	\$501
Georgia	\$440
Kentucky	\$727
Louisiana	\$498
Maryland	\$496
Mississippi	\$254
North Carolina	\$458
Oklahoma	\$664
South Carolina	\$335
Tennessee	\$990
Texas	\$456
Virginia	\$535
West Virginia	Not available
AVERAGE	\$533

Source: Residential Services for Persons with Developmental Disabilities: Status and Trends Through 2010, from the Research and Training Center on Community Living College of Education and Human Development, University of Minnesota.



#### 340\_2000 — Community-Based

Program Authorization: R.S. 28:451.1-455.2 and R.S. 28:821 - 824.

#### **Program Description**

The mission of the Community-Based Support Program is to effectively and efficiently implement the Office's community-based programs in a manner that is responsive to people with developmental disabilities and their families and that promotes independence, participation, inclusion, and productivity at home and in the community.

The goals of the Community-Based Support Program are:

- I. To develop and manage in a fiscally responsible way the delivery of an array of community-based supports and services so that people with developmental disabilities achieve their person-centered or family-driven outcomes in the pursuit of quality of life, well-being, and meaningful relationship.
- II. To increase community capacity and competence in a manner consistent with evidencebased practice and national standards of care in order to meet the identified needs of people with developmental disabilities, including the capacity of families, government agencies, and community organizations and businesses, as well as the capacity of those providing specialized disability supports and services.

The Community-Based Support Program includes the following activities:

- OCDD Central Office Community Program Development and Management This activity provides statewide oversight and management of the delivery of individualized community-based supports and services, including Home and Community-Based Services (HCBS) waiver services, through assessment, information/choice, planning, and referral, in a manner which affords opportunities for people with developmental disabilities to achieve their personally defined outcomes and goals. Community-Based Services programs include, but are not limited to, Flexible Family Funds, Individual & Family Support, State-Funded Case Management, Pre-Admission Screening & Resident Review (PASRR), Intermediate Care Facility for individuals with Developmental Disabilities (ICF/DD) Certification, Single Point of Entry, Early Steps, and waivers (New Opportunities Waiver, Children's Choice Waiver, Supports Waiver, and Residential Options Waiver).
- OCDD Regional Office Community Programs and Management This activity provides regional level
  oversight and management of the delivery of individualized community-based supports and services,
  including Home and Community-Based Services (HCBS) waiver services, through assessment, information/choice, planning, and referral, in a manner which affords opportunities for people with developmental
  disabilities to achieve their personally defined outcomes and goals. Community-Based Services programs
  include, but are not limited to, Flexible Family Funds, Individual & Family Support, State-Funded Case
  Management, Pre-Admission Screening & Resident Review (PASRR), Intermediate Care Facility for individuals with Developmental Disabilities (ICF/DD) Certification, Single Point of Entry, Early Steps, and
  waivers (New Opportunities Waiver, Children's Choice Waiver, Supports Waiver, and Residential Options
  Waiver).



• Early Steps: Identifying and providing services to infants and toddlers with disabilities - This activity provides for Louisiana's early intervention system for children with disabilities and developmental delays ages birth to three and their families. Services provided through this program include: audiology, speechlanguage therapy, occupational therapy, physical therapy, special instruction, assistive technology, service coordination, medical evaluation, health services, nursing services, vision services, social work services, psychology services, family training, nutritional services, and transportation.

		Prior Year Actuals FY 2011-2012		Enacted FY 2012-2013		Existing Oper Budget as of 12/01/12		Continuation FY 2013-2014		Recommended FY 2013-2014		Total Recommended Over/(Under) EOB	
Means of Financing:													
State General Fund (Direct)	\$	27,683,541	\$	32,151,585	\$	32,151,585	\$	28,145,097	\$	23,810,134	\$	(8,341,451)	
State General Fund by:													
Total Interagency Transfers		1,154,160		2,461,504		2,461,504		2,408,406		2,389,229		(72,275	
Fees and Self-generated Revenues		1,816,747		3,463,518		3,463,518		3,189,024		3,189,024		(274,494	
Statutory Dedications		3,272,522		0		0		0		0		(	
Interim Emergency Board		0		0		0		0		0			
Federal Funds		9,376,085		6,472,729		6,564,713		6,377,619		6,376,792		(187,921	
Total Means of Financing	\$	43,303,055	\$	44,549,336	\$	44,641,320	\$	40,120,146	\$	35,765,179	\$	(8,876,141	
Expenditures & Request:													
Personal Services	\$	14,933,876	\$	12,373,219	\$	12,373,219	\$	5,339,604	\$	5,221,409	\$	(7,151,810	
Total Operating Expenses		761,237		1,025,422		1,025,422		704,425		685,147		(340,275	
Total Professional Services		3,409,002		3,772,228		3,772,228		3,843,146		3,697,348		(74,880	
Total Other Charges		24,186,444		27,378,467		27,470,451		30,232,971		26,161,275		(1,309,176	
Total Acq & Major Repairs		12,496		0		0		0		0			
Total Unallotted		0		0		0		0		0		(	
Total Expenditures & Request	\$	43,303,055	\$	44,549,336	\$	44,641,320	\$	40,120,146	\$	35,765,179	\$	(8,876,141	
Authorized Full-Time Equiva	lents												
Classified	ients.	180		144		145		50		53		(92	
Unclassified		2		2		145		1		1		()2	
Total FTEs		182		146		146		51		54		(92	

#### **Community-Based Budget Summary**



#### **Source of Funding**

The Community-Based Support Program is funded with State General Fund, Interagency Transfers, Federal Funds, and Fees and Self-generated Revenues. Interagency Transfers include Title XIX funds received from the Department of Health and Hospitals and Medical Vendor Payments, for services provided to Medicaid-eligible clients. The Federal Funds are Part C of the Individuals with Disabilities Education Improvement Act (IDEA). The Fees and Self-generated Revenues are derived from the sale of Lions Club license plates.

#### **Community-Based Statutory Dedications**

Fund	rior Year Actuals 2011-2012	cted 2-2013	В	ng Oper idget 12/01/12	Continuation FY 2013-2014	ecommended 'Y 2013-2014	Total commended ver/(Under) EOB
Community and Family Support System Fund	\$ 1,213,689	\$ 0	\$	0	\$ 0	\$ 0	\$ 0
New Opportunities Waiver (NOW) Fund	1,391,481	0		0	0	0	0
Overcollections Fund	667,352	0		0	0	0	0

#### Major Changes from Existing Operating Budget

Ge	eneral Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	91,984	0	Mid-Year Adjustments (BA-7s):
\$	32,151,585	\$	44,641,320	146	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
	980		980	0	Civil Service Training Series
	0		15,895	0	Louisiana State Employees' Retirement System Rate Adjustment
	0		35,180	0	Louisiana State Employees' Retirement System Base Adjustment
	0		439	0	Teachers Retirement System of Louisiana Rate Adjustment
	(4,357)		(5,515)	0	Group Insurance Rate Adjustment for Active Employees
	(500,912)		(634,066)	0	Group Insurance Base Adjustment
	53,264		53,264	0	Salary Base Adjustment
	(235,179)		(235,179)	0	Attrition Adjustment
	0		(50,234)	0	Salary Funding from Other Line Items
	0		(91,984)	0	Non-recurring Carryforwards
	(984)		(984)	0	UPS Fees
	(27,068)		(27,068)	0	Civil Service Fees
					Non-Statewide Major Financial Changes:
	(1,700,000)		(1,700,000)	0	Restructuring Early Steps.
	(170,280)		(170,280)	0	Annualize mid-year reduction savings in Family Flexible Funds due to an Eligibility Criteria Change.



#### Major Changes from Existing Operating Budget (Continued)

		- 	<u> </u>	
Ge	eneral Fund	Total Amount	Table of Organization	Description
	(1,306,847)	(1,306,847)	0	DHH will transfer services for all people currently enrolled in the Family Flexible Fund and the Individual and Family Supports Funds to a private entity Louisiana Clinic Services (LCS). LCS will continue to provide services to all people currently served through these programs, which offer home and community-based services to people who have developmental disabilities. DHH will monitor these contracts to ensure that services are provided and to generate state general fund savings.
	(648,767)	(648,767)	0	DHH will transfer services for all people currently enrolled in the Family Flexible Fund and the Individual and Family Supports Funds to a private entity Louisiana Clinic Services (LCS). LCS will continue to provide services to all people currently served through these programs, which offer home and community-based services to people who have developmental disabilities. DHH will monitor these contracts to ensure that services are provided and to generate state general fund savings.
	286,668	286,668	3	Transferring 3 TO Positions from the Pinecrest Supports and Services Center to Community Support to monitor residents with Developmental Disabilities in Privatized Facilities (North Lake Supports and Services Center and Northwest Supports and Services Center).
	(3,763,089)	(4,037,583)	0	Transferring funds from the Office for Citizens with Developmental Disabilities to the Acadiana Human Service District.
	0	0	(23)	OCDD is entering into an Interagency Transfer (IAT) Agreement with the Northeast Delta Human Services Authority, Region 8, to transfer 23 Positions that will be converted from T.O. FTE positions to Non T.O. FTE positions.
	0	0	(24)	OCDD is entering into an Interagency Transfer (IAT) Agreement with the Imperial Calcasieu Human Services Authority, Region 5, to transfer 24 Positions that will be converted from T.O. FTE positions to Non T.O. FTE positions.
	0	0	(22)	OCDD is entering into an Interagency Transfer (IAT) Agreement with the Central Louisiana Human Services District, Region 6, to transfer 22 Positions that will be converted from T.O. FTE positions to Non T.O. FTE positions.
	0	0	(26)	OCDD is entering into an Interagency Transfer (IAT) Agreement with the Northwest Louisiana Human Services District, Region 7, to transfer 26 Positions that will be converted from T.O. FTE positions to Non T.O. FTE positions.
	(74,880)	(74,880)	0	Contract consolidations and reductions to reduce overhead and achieve agency efficiencies for SFY14.
	(250,000)	(250,000)	0	Non-recur one-time funding for Special Legislative Projects (SLP).
	0	(35,180)	0	Retirement Funding from Other Line Items
¢	<b>22</b> 010 121	<b>•</b> • • • • • • • • • • • • • • • • • •		
\$	23,810,134	\$ 35,765,179	54	Recommended FY 2013-2014
\$	0	\$ 0	0	Less Supplementary Recommendation
\$	23,810,134	\$ 35,765,179	54	Base Executive Budget FY 2013-2014
\$	23,810,134	\$ 35,765,179	54	Grand Total Recommended

#### **Professional Services**

Amount	Description
	Professional Services



#### **Professional Services (Continued)**

Amount	Description
\$3,697,348	Various therapy services to community-support residents.
\$3,697,348	TOTAL PROFESSIONAL SERVICES

#### **Other Charges**

Amount	Description
	Other Charges:
\$11,567,193	Early Steps - Early Steps is Louisiana's Early Intervention Service System for infants and toddlers with disabilities (ages birth to three years) and their families, provided in nine regions of Louisiana. The program implements Part C of the Individuals with Disabilities Education Act (IDEA) under the Department of Health and Hospitals. Through Early Steps, the following services are provided: audiology, speech/language, occupational and physical therapy, special instruction, assistive technology devices and services, family support coordination, medical and health services, nursing services, nutrition, vision services, social work services, psychology services, family training and transportation.
\$184,215	New Opportunity Waiver (NOW) - OCDD is the NOW service provider for one-time transitional expenses used to assist people age 18 years or older who have chosen to move from public or private ICF/DD in a home or apartment of their own with NOW waiver services. Transitional expenses have a lifetime cap of \$3,000. Transitional expenses include funds for essential furnishing (e.g., bedroom/living room furniture, eating utensils, etc.). These expenses may also pay for preparing the home for occupancy (i.e., cleaning, pest control, etc.) and moving expenses.
\$2,698,859	Specialized Services - Services that provide funding to financially assist people diagnosed with an Autism Spectrum disorder and their families. Services that transition individuals from institutions who want to live in the community and promote a strategic approach to implement a system that provides person-centered, appropriate, needs based, quality of care and quality of life services and a quality management strategy that ensures the provision of and improvement of such services in both home and community-based settings and institutions through Money Follows the Person. Other specialized services include funding transferred from Department of Public Safety to Department of Health and Hospitals-Office for Citizens with Developmental Disabilities to Lions Club license plate sales for The Louisiana Lions League for Crippled Children in Leesville and The Louisiana Lions Eye Foundation in New Orleans.
\$310,382	Guardianship Services - Protects the legal and social independence of individuals with developmental disabilities. Provides for assigned guardians who make medical, financial and legal decisions for the individuals and who serve as spokes persons for individuals with developmental disabilities in order to protect legal rights when no family member is available to do so.
\$14,760,649	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$152,000	Office of Telecommunications Management (OTM) Fees
\$94,922	Governor's Office - State Interagency Coordinating Council for Early Steps
\$28,628	Civil Services Fees
\$6,909	UPS Fees
\$73,526	Office of State Buildings and Grounds
\$1,574	Printing
\$13,418	Unemployment Compensation
\$2,638,508	Northeast Delta Human Services Authority
\$2,505,729	Calcasieu Human Services Authority
\$2,364,873	Central Louisiana Human Services District
\$2,839,527	Northwest Louisiana Human Services District
\$237,695	Capital Area Human Services District
\$138,181	Jefferson Parish Human Services Authority
\$37,984	Metropolitan Human Services District
\$267,152	Florida Parishes Human Services Authority
\$11,400,626	SUB-TOTAL INTERAGENCY TRANSFERS
\$26,161,275	TOTAL OTHER CHARGES



## **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.

# **Performance Information**

#### 1. (KEY) To provide effective and efficient management, delivery, and expansion of waiver and statefunded community programs and to optimize the use of typical community resources in order to promote and maximize home and community life and prevent and reduce institutional care.

Children's Budget Link: Linked to home and community-based and individualized services for people with developmental disabilities, specifically: expansion of community living options for people who reside in supports and services centers; and increased flexibility and self-direction in state supports for people with developmental disabilities living with their families.

Human Resource Policies Beneficial to Women and Families Link: This objective supports Act 1078 by providing access to and provision of health care services to women, infants, and children.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Links to Louisiana Health Care Reform Act through activities/strategies in six broad focus areas: Providing Care to the Uninsured, Creating Access to Appropriate Health Care Resources, Improving and Restructuring the Long-Term Care in Louisiana, Improving Health Education and Awareness, Improving Administrative Delivery of Health Care, and Focusing on Performance Outcomes Using Evidence-Based Principles. Links to OCDD Business Plan through activities/strategies in three broad focus areas: Employment First for Citizens with Developmental Disabilities - Real Jobs, Real Wages; Sustainable Home and Community-Based Supports and Services - Moving from a Service Life to a Community Life; and Systems Rebalancing for People with Developmental Disabilities - Promoting Community, Affordability and Sustainability.



#### **Performance Indicators**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of available Residential Options Waiver (ROW) opportunities utilized (LAPAS CODE - 22479)	Not Applicable	Not Applicable	95%	95%	95%	95%
K Percentage of available Supports Waiver (SW) opportunities utilized (LAPAS CODE - 22478)	Not Applicable	Not Applicable	95%	95%	95%	95%
K Percentage of available Children's Choice (CC) waiver opportunities utilized (LAPAS CODE - 22476)	Not Applicable	Not Applicable	95%	95%	95%	95%
K Percentage of available New Opportunities Waiver (NOW) opportunities utilized (LAPAS CODE - 22477)	Not Applicable	Not Applicable	95%	95%	95%	95%
S Percentage of waiver participants who have been discharged from their waiver due to admission to a more restrictive setting (LAPAS CODE - 24660)	5%	5%	5%	5%	5%	5%
S Number of individuals participating in HCBS Waivers who utilize self- direction (LAPAS CODE - 25036)	0	Not Applicable	330	378	378	464
S Number of persons in individual integrated employment (LAPAS CODE - 25035)	Not Applicable	Not Applicable	225	225	225	225

4.1.5

	Performance Indicator Values									
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012					
Number of allocated New Opportunities Waiver (NOW) slots (LAPAS CODE - 7964)	6,542	8,682	8,682	8,832	8,832					
Number of allocated Children's Choice Waiver slots (LAPAS CODE - 12055)	1,000	1,050	1,050	1,475	1,475					
Number of allocated Supports Waiver slots (LAPAS CODE - 22240)	2,188	2,050	2,050	2,050	2,050					
Number of allocated Residential Options Waiver (ROW) slots (LAPAS CODE - 22265)	200	210	210	210	210					

#### **Community-Based General Performance Information**

2. (KEY) To provide supports to infants and toddlers with disabilities and their families in order to increase participation in family and community activities, to minimize the potential for developmental delay, to reduce educational costs by minimizing the need for special education/ related services after reaching school age, and to progress to the level of current national standards.

Children's Budget Link: Linked to home and community-based and individualized services for people with developmental disabilities, specifically: expansion of community living options for people who reside in supports and services centers; and increased flexibility and self-direction in state supports for people with developmental disabilities living with their families.

Human Resource Policies Beneficial to Women and Families Link: This objective supports Act 1078 by providing access to and provision of health care services to women, infants, and children.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Links to Louisiana Health Care Reform Act through activities/strategies in six broad focus areas: Providing Care to the Uninsured, Creating Access to Appropriate Health Care Resources, Improving and Restructuring the Long-Term Care in Louisiana, Improving Health Education and Awareness, Improving Administrative Delivery of Health Care, and Focusing on Performance Outcomes Using Evidence-Based Principles. Links to OCDD Business Plan through activities/strategies in three broad focus areas: Employment First for Citizens with Developmental Disabilities - Real Jobs, Real Wages; Sustainable Home and Community-Based Supports and Services - Moving from a Service Life to a Community Life; and Systems Rebalancing for People with Developmental Disabilities - Promoting Community, Affordability and Sustainability.



#### **Performance Indicators**

			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
S Percentage of EarlySteps providers that meet all training requirements (LAPAS CODE - 24662)	50%	82%	70%	70%	90%	90%
K Percentage of infants and toddlers in the state that are identified as eligible (LAPAS CODE - 24663)	2%	2%	2%	2%	3%	2%
S Percentage of Individual Family Services Plans developed within 45 days of referral (LAPAS CODE - 24664)	97%	98%	97%	97%	97%	97%
S Percentage of Individual Family Services Plans implemented within 30 days of parental consent on the Individual Family Services Plan (LAPAS CODE - 24665)	90%	94%	92%	92%	94%	94%
K Percentage of families referred for entry to developmental disability services (LAPAS CODE - 24666)	85%	97%	95%	95%	95%	95%

#### 3. (KEY) To provide criterion-based trainings each year through fiscal year 2016 to direct service provider and support coordination agencies, professionals, community organizations or businesses, individuals and their families, and other stakeholders in order to address identified problems or supports and services gaps, including self-advocacy and family empowerment outreach and information sessions.

Children's Budget Link: Linked to home and community-based and individualized services for people with developmental disabilities, specifically: expansion of community living options for people who reside in supports and services centers; and increased flexibility and self-direction in state supports for people with developmental disabilities living with their families.

Human Resource Policies Beneficial to Women and Families Link: This objective supports Act 1078 by providing access to and provision of health care services to women, infants, and children.



Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Links to Louisiana Health Care Reform Act through activities/strategies in six broad focus areas: Providing Care to the Uninsured, Creating Access to Appropriate Health Care Resources, Improving and Restructuring the Long-Term Care in Louisiana, Improving Health Education and Awareness, Improving Administrative Delivery of Health Care, and Focusing on Performance Outcomes Using Evidence-Based Principles. Links to OCDD Business Plan through activities/strategies in three broad focus areas: Employment First for Citizens with Developmental Disabilities - Real Jobs, Real Wages; Sustainable Home and Community-Based Supports and Services - Moving from a Service Life to a Community Life; and Systems Rebalancing for People with Developmental Disabilities - Promoting Community, Affordability and Sustainability.

			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of criterion-based trainings conducted (LAPAS CODE - 24667)	25	25	25	25	25	25
S Number of people who participate in training sessions (LAPAS CODE - 24668)	2,600	2,200	2,000	2,000	1,500	1,500
S Percentage of agencies that attend mandatory training (LAPAS CODE - 24669)	70%	70%	60%	60%	60%	60%



# **340\_6000** — Pinecrest Supports and Services Center

Program Authorization: R.S. 451.1 - 455.2 and R.S. 40:2180 - 2180.5

### **Program Description**

The mission of the Pinecrest Supports and Services Center Program is to support people with developmental disabilities with quality of life and the attainment of personal goals through community capacity building and the provision of direct services, specializing in people with complex medical and behavioral support needs and service areas where gaps exist.

The goals of the Pinecrest Supports and Services Center Program are:

- I. To provide and promote a growing and diverse range of community options and resources as well as specialized residential services.
- II. To provide services in a manner that is efficient, effective and supports choice and quality of life.

The Pinecrest Supports and Services Center Program include the following activities:

- Residential Services This activity manages the one state-operated supports and services center, which is part of Louisiana's continuum of developmental disability services, and implements plans for population downsizing. The remaining Pinecrest residents will continue to receive services at the Pinecrest center. Following Title XIX (Medicaid) regulations, the center's comprehensive services and supports are administered by direct support, professional, health care, support and administrative staff. This activity supports the effort to re-balance expenditures inclusive of emphasis on shifting from institutional to community services consistent with national norms.
- Community Resources/Resource Centers/Community Support Teams This activity directs and manages
  the Central Louisiana, North Lake, Northwest, and Greater New Orleans (GNO) Resource Centers, including the Community Support Teams and Psychologists, which provide training, consultation, and technical
  assistance to service and caregiver resources in the community (i.e., private support staff agencies, community homes, families, and schools) to meet the behavior and psychiatric support needs of individuals
  with disabilities in existing community settings and to avoid institutional placement. The activity uses public resources to expand private service capacity and assist the private sector in meeting higher, needed standards of care for people with disabilities.

	Prior Year Actuals FY 2011-2012		Enacted FY 2012-2013		Existing Oper Budget as of 12/01/12		Continuation FY 2013-2014		Recommended FY 2013-2014		Total Recommended Over/(Under) EOB	
Means of Financing:												
State General Fund (Direct)	\$	3,599,770	\$	3,603,053	\$	3,603,053	\$	3,653,410	\$	3,310,549	\$	(292,504)
State General Fund by:												
Total Interagency Transfers		169,603,559		131,596,551		131,896,882		138,989,922		112,126,879		(19,770,003)

#### **Pinecrest Supports and Services Center Budget Summary**

		Prior Year Actuals Y 2011-2012	F	Enacted Y 2012-2013	xisting Oper Budget s of 12/01/12	Continuation FY 2013-2014	tecommended TY 2013-2014	Total ecommended Over/(Under) EOB
Fees and Self-generated Revenues		3,499,703		5,229,971	5,229,971	3,119,379	3,119,379	(2,110,592)
Statutory Dedications		0		0	0	0	0	0
Interim Emergency Board		0		0	0	0	0	0
Federal Funds		289,819		289,821	289,821	0	0	(289,821)
Total Means of Financing	\$	176,992,851	\$	140,719,396	\$ 141,019,727	\$ 145,762,711	\$ 118,556,807	\$ (22,462,920)
Expenditures & Request:								
Personal Services	\$	137,812,743	\$	95,625,505	\$ 95,625,505	\$ 106,622,341	\$ 82,418,890	\$ (13,206,615)
Total Operating Expenses		15,082,918		18,488,799	18,488,799	16,025,339	15,366,231	(3,122,568)
Total Professional Services		3,307,748		3,006,418	3,006,418	3,085,786	3,006,418	0
Total Other Charges		20,042,922		22,528,710	22,528,710	20,029,245	17,765,268	(4,763,442)
Total Acq & Major Repairs		746,520		1,069,964	1,370,295	0	0	(1,370,295)
Total Unallotted		0		0	0	0	0	0
Total Expenditures & Request	\$	176,992,851	\$	140,719,396	\$ 141,019,727	\$ 145,762,711	\$ 118,556,807	\$ (22,462,920)
Authorized Full-Time Equiva	lents							
Classified		1,348		1,356	1,356	1,356	1,340	(16)
Unclassified		17		33	33	33	33	0
Total FTEs		1,365		1,389	1,389	1,389	1,373	(16)

# **Pinecrest Supports and Services Center Budget Summary**

# Source of Funding

The Pinecrest Supports and Services Center Program is funded with State General Fund, Interagency Transfers and Fees and Self-generated Revenue. Interagency Transfers include Title XIX funds received from the Department of Health and Hospitals and Medical Vendor Payments Program, as reimbursement for services to Medicaid-eligible residents. Fees and Self-generated Revenue includes reimbursements for employee meals and laundry and payments from residents for services based on a sliding fee scale.

# Major Changes from Existing Operating Budget

Ge	neral Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	300,331	0	Mid-Year Adjustments (BA-7s):
\$	3,603,053	\$	141,019,727	1,389	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
	0		66,661	0	Civil Service Training Series
	0		1,811,221	0	Louisiana State Employees' Retirement System Rate Adjustment
	0		8,831,218	0	Louisiana State Employees' Retirement System Base Adjustment



# Major Changes from Existing Operating Budget (Continued)

Gen	eral Fund	Total Am	ount	Table of Organization	Description
	0		6,070	0	Teachers Retirement System of Louisiana Rate Adjustment
	(5,836)	(110	5,722)	0	Group Insurance Rate Adjustment for Active Employees
	0	(10)	7,368)	0	Group Insurance Rate Adjustment for Retirees
	0	(13,28)	7,133)	0	Salary Base Adjustment
	0	(1,292	2,676)	0	Attrition Adjustment
	0	(1,069	9,964)	0	Non-Recurring Acquisitions & Major Repairs
	0	(300	),331)	0	Non-recurring Carryforwards
	0	1,38	8,389	0	Risk Management
	0	(10	5,914)	0	UPS Fees
	0	(153	3,385)	0	Civil Service Fees
					Non-Statewide Major Financial Changes:
	0	(90	5,330)	0	Reduction of the Maintenance Cost for the Pinecrest Supports and Services Center.
	0	(17	5,000)	0	Restructuring Resource Centers.
	(286,668)	(286	5,668)	(3)	Transferring 3 TO Positions from the Pinecrest Supports and Services Center to Community Support to monitor residents with Developmental Disabilities in Privatized Facilities (North Lake Supports and Services Center and Northwest Supports and Services Center).
	0		0	(13)	Transferring 13 TO Positions from the Pinecrest Supports and Services Center to the DHH Office of the Secretary.
	0	(289	9,821)	0	Streamlining the Foster Grandparents Program.
	0	(740	),646)	0	Savings from the privatization of the Pinecrest Supports and Services Center dietary program.
	0	(7,802	2,303)	0	Savings from the privatization of the North Lake Supports and Services Center and the Northwest Supports and Services Center.
	0	(8,83	1,218)	0	Retirement Funding from Other Line Items
\$	3,310,549	\$ 118,55	6,807	1,373	Recommended FY 2013-2014
\$	0	\$	0	0	Less Supplementary Recommendation
\$	3,310,549	\$ 118,55	6,807	1,373	Base Executive Budget FY 2013-2014
\$	3,310,549	\$ 118,55	6,807	1,373	Grand Total Recommended

# **Professional Services**

Amount	Description
	Professional Services
\$11,600	Management and consulting services for accreditation consulting and training.
\$12,957	Westaff Temporary Services
\$234,496	Medical & dental services contracts for the residents of the facility.



# **Professional Services (Continued)**

Amount	Description
\$219,687	Medical and dental contracts to include such professionals as dentists, dermatologists, gynecologists, neurologists, optometrists, physicians, psychiatrists, psychologists, radiologists, pharmacists, and other professionals as needed for the care of the residents.
\$149,530	Psychiatrist services for the Community Support Team and Resource Center.
\$43,802	Psychological services with emphasis on the development of functional assessments which lead to the creation of the Behavior Treatment Program.
\$95,894	Contracted health support services (sitters) for hospitalized clients when required by hospital or treating physician. These services will include, but are not limited to, bathing and providing other personal care, changing bed linens, assisting bedridden clients with turning, assisting with ambulation and maintaining a safe environment for the clients.
\$250,000	Resource center medical services
\$39,476	Nutritional services to provide on-going quality nutritional care to support health and interface with each person's daily routine and personal goals.
\$30,880	Other services as needed to serve the residents of the center and community.
\$1,463,188	Medical & dental services contracts including physician, psychological, psychiatric, dental, radiology, etc.
\$71,000	Accreditation Quality review
\$51,000	Direct care staff training
\$332,908	Other professional services including medical director, professional counseling, dietician services, etc.
\$3,006,418	TOTAL PROFESSIONAL SERVICES

# **Other Charges**

Amount	Description
	Other Charges:
\$2,600,496	Long-term care provider fees paid to the Department of Health and Hospitals based on the number of occupied beds.
\$396,330	Acadiana, North Lake, Northwest Maintenance Costs
\$542,855	Crisis management - Provides living arrangement for individuals when the demands are such that an alternative to current home living is necessary.
\$200,000	Client wages - Provides compensation to those clients who work performing jobs for the agency.
\$31,978	Recreational Outings for Indigent Consumers.
\$160,000	Consumer and Family Training- Provides training to consumer and families through medical resource center.
\$150,000	Health Support Services - Provides for sitters for facility hospitalized clients when required by hospital or treating physician. These services include providing personal care, assisting with ambulation and maintaining a safe environment for the clients.
\$51,266	Gary Melarine
\$65,852	Medical and other professional services and therapies.
\$300,000	Community Support Team (CST)
\$4,498,777	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
\$129,610	Office of Telecommunications Management (OTM) Fees
\$119,350	Uniform Payroll System (UPS) Fees
\$94,536	Department of Corrections work crews
\$11,959,821	Office of Risk Management (ORM)
\$550,647	Department of Education-Special School District #1
\$51,146	Department of Civil Service (CPTP Program)
\$2,967	Division of Administration-Statewide Mail Service
\$174,886	Unemployment Insurance and Closeout Cost
\$183,528	Department of Civil Service Fees



# Other Charges (Continued)

Amount	Description
\$13,266,491	SUB-TOTAL INTERAGENCY TRANSFERS
\$17,765,268	TOTAL OTHER CHARGES

# Acquisitions and Major Repairs

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.

# **Performance Information**

#### 1. (KEY) To increase capacity building activities for private community providers, creating private sector community infrastructure to meet the complex needs and support diversion of individuals from public residential services.

Children's Budget Link: Linked to home and community-based and individualized services for people with developmental disabilities, specifically: expansion of community living options for people who reside in supports and services centers; and increased flexibility and self-direction in state supports for people with developmental disabilities living with their families.

Human Resource Policies Beneficial to Women and Families Link: This objective supports Act 1078 by providing access to and provision of health care services to women, infants, and children.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Links to Louisiana Health Care Reform Act through activities/strategies in six broad focus areas: Providing Care to the Uninsured, Creating Access to Appropriate Health Care Resources, Improving and Restructuring the Long-Term Care in Louisiana, Improving Health Education and Awareness, Improving Administrative Delivery of Health Care, and Focusing on Performance Outcomes Using Evidence-Based Principles. Links to OCDD Business Plan through activities/strategies in three broad focus areas: Employment First for Citizens with Developmental Disabilities - Real Jobs, Real Wages; Sustainable Home and Community-Based Supports and Services - Moving from a Service Life to a Community Life; and Systems Rebalancing for People with Developmental Disabilities - Promoting Community, Affordability and Sustainability.



#### **Performance Indicators**

			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of individuals served by the Community Support Team (CSTs) and Community Psychologists remaining in the community (LAPAS CODE - 24259)	85%	100%	85%	85%	85%	90%
S Number of resource center training events (LAPAS CODE - 24692)	50	161	155	155	155	155
S Number of people who participate in training sessions (LAPAS CODE - 24693)	1,500	2,419	2,600	2,600	2,600	2,500
S Number of resource center technical assistance sessions (LAPAS CODE - 24694)	75	8	61	61	61	50
S Number of resource center consultations (LAPAS CODE - 24695)	125	188	236	236	236	200
S Percentage of customers that report satisfaction with resource center training offered (LAPAS CODE - 24696)	85%	95%	85%	85%	85%	90%

# 2. (KEY) To decrease reliance on public supports and services by transition of people who do not have complex medical/behavioral needs to private providers.

Children's Budget Link: Linked to home and community-based and individualized services for people with developmental disabilities, specifically: expansion of community living options for people who reside in supports and services centers; and increased flexibility and self-direction in state supports for people with developmental disabilities living with their families.

Human Resource Policies Beneficial to Women and Families Link: This objective supports Act 1078 by providing access to and provision of health care services to women, infants, and children.



Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Links to Louisiana Health Care Reform Act through activities/strategies in six broad focus areas: Providing Care to the Uninsured, Creating Access to Appropriate Health Care Resources, Improving and Restructuring the Long-Term Care in Louisiana, Improving Health Education and Awareness, Improving Administrative Delivery of Health Care, and Focusing on Performance Outcomes Using Evidence-Based Principles. Links to OCDD Business Plan through activities/strategies in three broad focus areas: Employment First for Citizens with Developmental Disabilities - Real Jobs, Real Wages; Sustainable Home and Community-Based Supports and Services - Moving from a Service Life to a Community Life; and Systems Rebalancing for People with Developmental Disabilities - Promoting Community, Affordability and Sustainability.

#### **Performance Indicators**

			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of people transitioned to private provider community options according to assessment/support team (LAPAS CODE - 22522)	52	48	30	30	25	25
K Number of re-admissions to center within one year of transition (LAPAS CODE - 24697)	3	3	3	3	3	5

#### 3. (KEY) To improve the quality of service delivery.

Children's Budget Link: Linked to home and community-based and individualized services for people with developmental disabilities, specifically: expansion of community living options for people who reside in supports and services centers; and increased flexibility and self-direction in state supports for people with developmental disabilities living with their families.

Human Resource Policies Beneficial to Women and Families Link: This objective supports Act 1078 by providing access to and provision of health care services to women, infants, and children.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Links to Louisiana Health Care Reform Act through activities/strategies in six broad focus areas: Providing Care to the Uninsured, Creating Access to Appropriate Health Care Resources, Improving and Restructuring the Long-Term Care in Louisiana, Improving Health Education and Awareness, Improving Administrative Delivery of Health Care, and Focusing on Performance Outcomes Using Evidence-Based Principles. Links to OCDD Business Plan through activities/strategies in three broad focus areas: Employment First for Citizens with Developmental Disabilities - Real Jobs, Real Wages; Sustainable Home and Community-Based Supports and Services - Moving from a Service Life to a Community Life; and Systems Rebalancing for People with Developmental Disabilities - Promoting Community, Affordability and Sustainability.



#### **Performance Indicators**

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of Conditions of Participation in compliance during Health Standard Reviews (LAPAS CODE - 22519)	Not Applicable	100%	Not Applicable	Not Applicable	100%	100%
S Percentage of individuals reporting satisfaction across the Partners in Quality (PIQ) assessed living situations (LAPAS CODE - 24699)	85%	93%	85%	85%	85%	85%
S Percentage of individuals reporting satisfaction across the Partners in Quality (PIQ) assessed work/day areas (LAPAS CODE - 24700)	85%	79%	85%	85%	85%	85%

# 4. (KEY) To increase the number of people participating in skill acquisition training activities in the community as recommended by their support teams.

Children's Budget Link: Linked to home and community-based and individualized services for people with developmental disabilities, specifically: expansion of community living options for people who reside in supports and services centers; and increased flexibility and self-direction in state supports for people with developmental disabilities living with their families.

Human Resource Policies Beneficial to Women and Families Link: This objective supports Act 1078 by providing access to and provision of health care services to women, infants, and children.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Links to Louisiana Health Care Reform Act through activities/strategies in six broad focus areas: Providing Care to the Uninsured, Creating Access to Appropriate Health Care Resources, Improving and Restructuring the Long-Term Care in Louisiana, Improving Health Education and Awareness, Improving Administrative Delivery of Health Care, and Focusing on Performance Outcomes Using Evidence-Based Principles. Links to OCDD Business Plan through activities/strategies in three broad focus areas: Employment First for Citizens with Developmental Disabilities - Real Jobs, Real Wages; Sustainable Home and Community-Based Supports and Services - Moving from a Service Life to a Community Life; and Systems Rebalancing for People with Developmental Disabilities - Promoting Community, Affordability and Sustainability.



			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of people meeting treatment/training objectives in the community according to assessment/support team recommendations (LAPAS CODE - 24701)	80%	91%	80%	80%	85%	85%

#### **Performance Indicators**

# 5. (KEY) To increase the number of people participating in community employment opportunities as recommended by their support teams.

Children's Budget Link: Linked to home and community-based and individualized services for people with developmental disabilities, specifically: expansion of community living options for people who reside in supports and services centers; and increased flexibility and self-direction in state supports for people with developmental disabilities living with their families.

Human Resource Policies Beneficial to Women and Families Link: This objective supports Act 1078 by providing access to and provision of health care services to women, infants, and children.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Links to Louisiana Health Care Reform Act through activities/strategies in six broad focus areas: Providing Care to the Uninsured, Creating Access to Appropriate Health Care Resources, Improving and Restructuring the Long-Term Care in Louisiana, Improving Health Education and Awareness, Improving Administrative Delivery of Health Care, and Focusing on Performance Outcomes Using Evidence-Based Principles. Links to OCDD Business Plan through activities/strategies in three broad focus areas: Employment First for Citizens with Developmental Disabilities - Real Jobs, Real Wages; Sustainable Home and Community-Based Supports and Services - Moving from a Service Life to a Community Life; and Systems Rebalancing for People with Developmental Disabilities - Promoting Community, Affordability and Sustainability.

				Performance Inc	dicator Values		
L e v e l	Performance Indicator Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
	Percentage of people participating in employment in the community according to assessment/support team recommendations (LAPAS	800/	7/0/	800/	900/	900/	900/
(	CODE - 24702)	80%	76%	80%	80%	80%	80%



#### 6. (KEY) To increase successful re-entry into traditional community settings for youth with developmental disabilities involved in the court system who require specialized therapeutic, psychiatric and behavioral supports.

Children's Budget Link: Linked to home and community-based and individualized services for people with developmental disabilities, specifically: expansion of community living options for people who reside in supports and services centers; and increased flexibility and self-direction in state supports for people with developmental disabilities living with their families.

Human Resource Policies Beneficial to Women and Families Link: This objective supports Act 1078 by providing access to and provision of health care services to women, infants, and children.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Links to Louisiana Health Care Reform Act through activities/strategies in six broad focus areas: Providing Care to the Uninsured, Creating Access to Appropriate Health Care Resources, Improving and Restructuring the Long-Term Care in Louisiana, Improving Health Education and Awareness, Improving Administrative Delivery of Health Care, and Focusing on Performance Outcomes Using Evidence-Based Principles. Links to OCDD Business Plan through activities/strategies in three broad focus areas: Employment First for Citizens with Developmental Disabilities - Real Jobs, Real Wages; Sustainable Home and Community-Based Supports and Services - Moving from a Service Life to a Community Life; and Systems Rebalancing for People with Developmental Disabilities - Promoting Community, Affordability and Sustainability.

			Performance Inc	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of youth discharged who do not return to therapeutic program within one year (LAPAS CODE - 24703)	65%	100%	65%	65%	65%	75%
K Percentage of youth discharged who are not incarcerated within one year of discharge (LAPAS CODE - 24704)	75%	100%	75%	75%	75%	75%



# 340\_A000 — Auxiliary Account

## **Program Description**

The mission of the Auxiliary Account is to support people with developmental disabilities with quality of life and the attainment of personal goals.

The goal of the Auxiliary Account is:

I. To provide individually determined supports and services to residents of supports and services centers through a growing and diverse range of community options and resources operated and/or provided by the center.

The Auxiliary Account includes the following activities:

• Auxiliary Services - This activity provides the funding mechanism to provide residents of the supports and services centers with paid work opportunities and/or therapeutic activities as recommended by their support teams.

	rior Year Actuals 2011-2012	I	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total ecommended over/(Under) EOB
Means of Financing:							
State General Fund (Direct)	\$ 0	\$	0	\$ 0	\$ 0	\$ 0	\$ 0
State General Fund by:							
Total Interagency Transfers	0		0	0	0	0	0
Fees and Self-generated Revenues	318,518		1,168,192	1,168,192	600,487	567,267	(600,925)
Statutory Dedications	0		0	0	0	0	0
Interim Emergency Board	0		0	0	0	0	0
Federal Funds	0		0	0	0	0	0
Total Means of Financing	\$ 318,518	\$	1,168,192	\$ 1,168,192	\$ 600,487	\$ 567,267	\$ (600,925)
Expenditures & Request:							
Personal Services	\$ 0	\$	177,903	\$ 177,903	\$ 213,236	\$ 194,349	\$ 16,446
Total Operating Expenses	0		0	0	0	0	0
Total Professional Services	0		0	0	0	0	0

# **Auxiliary Account Budget Summary**



# **Auxiliary Account Budget Summary**

	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB
Total Other Charges	318,518	990,289	990,289	387,251	372,918	(617,371)
Total Acq & Major Repairs	0	0	0	0	0	0
Total Unallotted	0	0	0	0	0	0
Total Expenditures & Request	\$ 318,518	\$ 1,168,192	\$ 1,168,192	\$ 600,487	\$ 567,267	\$ (600,925)
Authorized Full-Time Equival	ents:					
Classified	4	4	4	4	4	0
Unclassified	0	0	0	0	0	0
Total FTEs	4	4	4	4	4	0

# Source of Funding

The Auxiliary Account is funded with Fees and Self-generated Revenue. Fees and Self-generated Revenue is generated by the sale of merchandise in the patient canteen to finance the operation of the Patient Recreation Fund activities.

# Major Changes from Existing Operating Budget

Gener	al Fund	Total Amount	Table of Organization	Description
\$	0	\$ 0	0	Mid-Year Adjustments (BA-7s):
\$	0	\$ 1,168,192	4	Existing Oper Budget as of 12/01/12
				Statewide Major Financial Changes:
	0	2,757	0	Louisiana State Employees' Retirement System Rate Adjustment
	0	14,333	0	Louisiana State Employees' Retirement System Base Adjustment
	0	(644)	0	Group Insurance Rate Adjustment for Active Employees
				Non-Statewide Major Financial Changes:
	0	(603,038)	0	Savings from the privatization of the North Lake Supports and Services Center, Northwest Supports and Services Center and Acadiana Supports and Services Center.



# Major Changes from Existing Operating Budget (Continued)

Ge	neral Fund		Т	otal Amount	Table of Organization	Description
		0		(14,333)	0	Retirement Funding from Other Line Items
\$		0	\$	567,267	4	Recommended FY 2013-2014
\$		0	\$	0	0	Less Supplementary Recommendation
\$		0	\$	567,267	4	Base Executive Budget FY 2013-2014
\$		0	\$	567,267	4	Grand Total Recommended

#### **Professional Services**

Amount	Description
	This program does not have funding for Professional Services for Fiscal Year 2013-2014.

### **Other Charges**

Amount	Description
	Other Charges:
\$372,918	Auxiliary - Patient Recreation Fund provides therapeutic activities to patients, as approved by treatment teams.
\$372,918	SUB-TOTAL OTHER CHARGES

# **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.

# **Performance Information**

# 1. (KEY) To provide residents of supports and services centers with opportunities for paid work and/or therapeutic activities, as recommended by their support team.

Children's Budget Link: Linked to home and community-based and individualized services for people with developmental disabilities, specifically: expansion of community living options for people who reside in supports and services centers; and increased flexibility and self-direction in state supports for people with developmental disabilities living with their families.

Human Resource Policies Beneficial to Women and Families Link: This objective supports Act 1078 by providing access to and provision of health care services to women, infants, and children.

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Links to Louisiana Health Care Reform Act through activities/strategies in six broad focus areas: Providing Care to the Uninsured, Creating Access to Appropriate Health Care Resources, Improving and Restructuring the Long-Term Care in Louisiana, Improving Health Education and Awareness, Improving Administrative Delivery of Health Care, and Focusing on Performance Outcomes Using Evidence-Based Principles. Links to OCDD Business Plan through activities/strategies in three broad focus areas: Employment First for Citizens with Developmental Disabilities - Real Jobs, Real Wages; Sustainable Home and Community-Based Supports and Services - Moving from a Service Life to a Community Life; and Systems Rebalancing for People with Developmental Disabilities - Promoting Community, Affordability and Sustainability.

				Performance Inc	dicator Values		
L				Performance			
e		Yearend Performance	Actual Yearend	Standard as Initially	Existing Performance	Performance At Continuation	Performance At Executive
e	Performance Indicator	Standard	Performance	Appropriated	Standard	Budget Level	Budget Level
1	Name	FY 2011-2012	FY 2011-2012	FY 2012-2013	FY 2012-2013	FY 2013-2014	FY 2013-2014
K	Percentage of individuals						
	of supports and services						
	centers who have paid						
	work and/or therapeutic						
	activities as recommended by their support team						
	(LAPAS CODE - 24264)	100%	94%	100%	100%	100%	95%



# 09-375 — Imperial Calcasieu Human Services Authority

# Agency Description

The mission of the Imperial Calcasieu Human Services Authority is to increase public awareness of and to provide access for individuals with behavioral health and developmental disabilities to integrated community based services while promoting wellness, recovery and independence through education and the choice of a broad range of programmatic and community resources.

The goals of the Imperial Calcasieu Human Services Authority are:

- I. To provide behavioral health and developmental disabilities services that consumers, their families and communities want in a manner which provides them quick and convenient entry into services.
- II. To ensure that services provided are responsive to client concerns, integrated in service delivery methods, representative of best practice, and consistent with the goals of the Department of Health and Hospitals and its Program Offices.
- III. To promote healthy, safe lives for people by providing leadership in educating the community on the importance of prevention, early detection and intervention, and by facilitating coalition building to address localized community problems.

	A	ior Year Actuals 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12		Continuation FY 2013-2014		Recommended FY 2013-2014	Total commended ver/(Under) EOB
Means of Financing:									
State General Fund (Direct)	\$	0	\$ 0	\$ 6 0	3	\$ 0	\$	0	\$ 0
State General Fund by:									
Total Interagency Transfers		0	0	0		0		8,613,148	8,613,148
Fees and Self-generated Revenues		0	0	0		0		0	0
Statutory Dedications		0	0	0		0		0	0
Interim Emergency Board		0	0	0		0		0	0
Federal Funds		0	0	0		0		0	0
Total Means of Financing	\$	0	\$ 0	\$ 6 0	9	\$0	\$	8,613,148	\$ 8,613,148
Expenditures & Request:									
Imperial Calcasieu Human Services Authority	\$	0	\$ 0	\$ 5 0	9	\$0	ş	8,613,148	\$ 8,613,148
Total Expenditures & Request	\$	0	\$ 0	\$ 6 0	9	\$ 0	\$	8,613,148	\$ 8,613,148

# Imperial Calcasieu Human Services Authority Budget Summary



	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB
Authorized Full-Time Equi	valents:					
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
Total FTE	Es 0	0	0	0	0	0

# Imperial Calcasieu Human Services Authority Budget Summary



# **375\_1000 — Imperial Calcasieu Human Services Authority**

# **Program Description**

The mission of the Imperial Calcasieu Human Services Authority is to increase public awareness of and to provide access for individuals with behavioral health and developmental disabilities to integrated community based services while promoting wellness, recovery and independence through education and the choice of a broad range of programmatic and community resources.

The goals of the Imperial Calcasieu Human Services Authority are:

- I. To provide behavioral health and developmental disabilities services that consumers, their families and communities want in a manner which provides them quick and convenient entry into services.
- II. To ensure that services provided are responsive to client concerns, integrated in service delivery methods, representative of best practice, and consistent with the goals of the Department of Health and Hospitals and its Program Offices.
- III. To promote healthy, safe lives for people by providing leadership in educating the community on the importance of prevention, early detection and intervention, and by facilitating coalition building to address localized community problems.

The Imperial Calcasieu Human Services Authority program includes the following activities:

- Administration DHH, its program offices and the Louisiana Legislature have created a statewide integrated human services delivery system with local accountability and management to provide behavioral health and developmental disabilities services. These local human service systems are referred to as local governmental entities (LGEs). LGEs feature practices such as a framework anchored in clear policy objectives, well-defined local roles and responsibilities, and measures to assure accountability of delivering quality services to consumers that assist in determining the relative efficiency and effectiveness of public systems. Act 373 of the 2008 Legislative Session, requires that DHH shall not contract with a new LGE until DHH, in consultation with the Human Services Interagency Council (HSIC), has determined and confirmed in writing to the governor that DHH is prepared to contract the provision of services to the LGE after the LGE has successfully completed the Readiness Assessment. The Imperial Calcasieu Human Services Authority was created by Act 373 in the 2008 Legislative Session for the parishes of Beauregard, Allen, Calcasieu, Jefferson Davis and Cameron. The Imperial Calcasieu Human Services Authority will participate in the statewide initiative to implement an electronic health record to assist with continuous documentation efforts, scheduling of clients to maximize provider time, invoicing and billing procedures to improve collection efforts and standardization of forms/procedures.
- Behavioral Health Mental Health The current budget for mental health services in the Imperial Calcasieu Human Services Authority catchment area provides for outpatient clinic services for children over the age of six, adolescents, and adults. Core services include screening, assessment, crisis evaluation, individual, group and family counseling and medication management which includes administration, education and screening for people with co-occurring disorders. Contracted services include evidence-based prac-



tice Assertive Community Treatment and Intensive Case Management Services, as well as housing and employment assistance, assistance in application for SSI. Service delivery includes full participation in the Louisiana Behavioral Health Partnership and the Coordinated System of Care and works as a participant in the Coordinated Care Network. All Behavioral Health clinics in the Imperial Calcasieu Human Services Authority participate as Medicaid Application Centers for persons requesting services.

- Behavioral Health Addictive Disorders Alcohol and drug abuse continues to be a major health problem in our state as well as in the Imperial Calcasieu Human Services Authority catchment area. The resources available are not sufficient to meet the growing need for treatment and prevention services. Imperial Calcasieu Human Services Authority falls into this category when considering the vast geography covered in the service area which limits inpatient service options due to funding and providers. The same is true for outpatient services. The program has made significant strides to prioritize services to meet these crucial needs by encouraging and supporting the awareness and understanding of alcoholism and drug addiction amongst the citizens of our state. The basic premise of addictive disorder services is to develop ideas and programs that can help increase public awareness, treat adults and youth who need AD services and prevent the abuse of alcohol and drug addiction as well as compulsive gambling. The largest barrier to success for addictive disorder programs is the ability to maintain patient gains made in outpatient and inpatient treatment. Sometimes the impulse to abuse substance and/or to participate in dysfunctional behavior is too great and the gains from treatment can be wiped out in an instant. The need to provide education on prevention at an early age is key to deterring abuse and the subsequent need for treatment. AD and prevention service providers focus their attention on providing comprehensive, fully integrated prevention and treatment services. We actively seek the assistance of partnerships and collaborations to fully meet the needs of individuals, families and communities. The needs of the individuals, families and communities requiring addictive disorder services and the consequences they suffer are the impetus to incorporate addictive disorders practices in the health care debate. The goal remains to seamlessly integrate these practices into the comprehensive health care system without losing attention to the special needs of individuals, families, communities requiring substance abuse intervention.
- Developmental Disabilities The Offices of Developmental Disabilities core services consist of serving as the Single Point of Entry (SPOE) into the Developmental Disabilities (DD) Services System and providing support coordination services to individuals and their families through OCDD and other available community resources. Staff members assess the needs for support and services, develop individual plans of support, make applicable referrals, and provide ongoing coordination for the client's support plans. Targeted services are centered on Home and Community-Based Services Waiver programs and federal criteria which allow services to be provided in a home or community-based setting for the recipient who would otherwise require institutional care. The Family Support Program is designed to assist individuals whose needs exceed those normally used resources in the community, and other natural resources available. Individual and Family Supports include but are not limited to: respite care, personal assistance services, specialized clothing, such as adult briefs, dental and medical services not covered by other sources, equipment and supplies, communication services, crisis intervention, specialized utility costs, specialized nutrition, and family education. The Cash Subsidy Program is intended to assist families with children with severe or profound disabilities to offset the extraordinary costs of maintaining their child in their own home. The program provides a monthly stipend to families of children who have qualifying exceptionalities identified through their local educational authority.



					-			
	Prior Year Actuals FY 2011-2012	]	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014		Recommended FY 2013-2014	Total Recommende Over/(Under EOB
Means of Financing:								
State General Fund (Direct)	\$ 0	\$	0	\$ 0	\$ 0	ş	S 0	\$
State General Fund by:								
Total Interagency Transfers	0		0	0	0		8,613,148	8,613,14
Fees and Self-generated Revenues	0		0	0	0		0	
Statutory Dedications	0		0	0	0		0	
Interim Emergency Board	0		0	0	0		0	
Federal Funds	0		0	0	0		0	
Total Means of Financing	\$ 0	\$	0	\$ 0	\$ 0	\$	8,613,148	\$ 8,613,14
Expenditures & Request:								
Personal Services	\$ 0	\$	0	\$ 0	\$ 0	\$	6 0	\$
Total Operating Expenses	0		0	0	0		0	
Total Professional Services	0		0	0	0		0	
Total Other Charges	0		0	0	0		8,613,148	8,613,14
Total Acq&Major Repairs	0		0	0	0		0	
Total Unallotted	0		0	0	0		0	
Total Expenditures & Request	\$ 0	\$	0	\$ 0	\$ 0	\$	8,613,148	\$ 8,613,14
Authorized Full-Time Equiva	lents:							
Classified	0		0	0	0		0	
Unclassified	0		0	0	0		0	
<b>Total FTEs</b>	0		0	0	0		0	

# Imperial Calcasieu Human Services Authority Budget Summary

# Major Changes from Existing Operating Budget

Genera	ıl Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	0	\$	0	0	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
					Non-Statewide Major Financial Changes:
	0		297,000	0	Interagency Transfer funding from the Office of the Secretary to aid in establishing the Imperial Calcasieu Human Services Authority in FY14.



# Major Changes from Existing Operating Budget (Continued)

General Fund	l	Total Amount	Table of Organization	Description
	0	5,810,419	0	Interagency Transfer funding from the Office of Behavioral Health to aid in establishing the Imperial Calcasieu Human Services Authority in FY14. There are 8 NON T.O. FTE positions that will be transferred and 47 T.O. positions that will be transferred and converted to NON T.O. FTE positions as well.
	0	2,505,729	0	Interagency Transfer funding from the Office for Citizens with Developmental Disabilities to aid in establishing the Imperial Calcasieu Human Services Authority in FY14. There are 24 T.O. positions that will be transferred and converted to NON T.O. FTE positions as well.
\$	0	\$ 8,613,148	0	Recommended FY 2013-2014
\$	0	\$ 0	0	Less Supplementary Recommendation
\$	0	\$ 8,613,148	0	Base Executive Budget FY 2013-2014
\$	0	\$ 8,613,148	0	Grand Total Recommended

# **Professional Services**

Amount	Description
	This program does not have funding for Professional Services for Fiscal Year 2013-2014.

# **Other Charges**

Amount	Description
	Other Charges:
\$8,613,148	Costs of ongoing services that are currently provided through the Office of Behavioral Health and the Office for Citizens with Developmental Disabilities. The funds are from the Office of the Secretary, the Office of Behavioral Health, and the Office for Citizens with Developmental Disabilities.
\$8,613,148	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
	This program does not have funding for Interagency Transfers for Fiscal Year 2013-2014.
\$8,613,148	TOTAL OTHER CHARGES

# **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.



## **Performance Information**

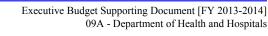
#### 1. (KEY) Through administrative activity, Imperial Calcasieu Human Services Authority will provide for the management and operational activities of services for addictive disorders, developmental disabilities and behavioral health.

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

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

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).

			Performance Ind	icator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of Imperial Calcasieu Human Services Authority clients who state they would continue to receive services at our clinics if given the choice to go elsewhere (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of Imperial Calcasieu Human Services Authority clients who state they would recommend the clinics to family and friends (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established



#### 2. (KEY) To extend quality mental health and Flexible Family Fund services to Children/Adolescents and Adults to the District target population, with client satisfaction feedback that meets threshold. And to provide addictive disorder prevention services to children, adolescents and their families and treatment services to adults including inpatient care.

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

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

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).

			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of adults served with MH services in all Imperial Calcasieu Human Services Authority Behavioral Health clinics (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Number of children/ adolescents served with MH services in all Imperial Calcasieu Human Services Authority. Behavioral Health clinics (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of adults receiving MH services who report that they would choose services in this agency if given a choice to receive services elsewhere. (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of MH clients who would recommend services in this agency to others (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established



			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of MH cash subsidy slots utilized (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of successful completions (24-hour residential programs) - AD Program (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Primary Inpatient Adult: Percentage of individuals successfully completing the program -AD program (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Primary Inpatient Adolescent: Percentage of individuals successfully completing the program - AD Program (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established

#### **Performance Indicators (Continued)**

# **3. (KEY)** Through the Developmental Disabilities activity, to foster and facilitate independence for citizens with disabilities through the availability of home and community based services.

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

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

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).



			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of people receiving individual and family support services (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Number of people receiving flexible family fund services (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of eligibility determinations determined valid according to the Flexible Family Fund promulgation (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Number of persons receiving DD services per year (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established

#### **Performance Indicators**

#### Imperial Calcasieu Human Services Authority General Performance Information

		Perfo	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012
Total number of individuals served in the Imperial Calcasieu Human Services Authority (LAPAS CODE - New)	Not Applicable				
Total number of individuals served by outpatient mental health in Imperial Calcasieu Human Services Authority (LAPAS CODE - New)	Not Applicable				
Total number of individuals served by inpatient Addictive Disorders in Imperial Calcasieu Human Services Authority (LAPAS CODE - New)	Not Applicable				
Total numbers of individuals served by outpatient Addictive Disorders in Imperial Calcasieu Human Services Authority (LAPAS CODE - New)	Not Applicable				
Total number of enrollees in prevention programs (LAPAS CODE - New)	Not Applicable				



# 09-376 — Central Louisiana Human Services District

# **Agency Description**

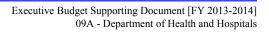
The mission of the Central Louisiana Human Service Authority is to increase public awareness of and to provide access for individuals with behavioral health and developmental disabilities to integrated community based services while promoting wellness, recovery and independence through education and the choice of a broad range of programmatic and community resources.

The goals of the Central Louisiana Human Services Authority are:

- I. To provide behavioral health and developmental disabilities services that consumers, their families and communities want in a manner which provides them quick and convenient entry into services.
- II. To ensure that services provided are responsive to client concerns, integrated in service delivery methods, representative of best practice, and consistent with the goals of the Department of Health and Hospitals and its Program Offices.
- III. To promote healthy, safe lives for people by providing leadership in educating the community on the importance of prevention, early detection and intervention, and by facilitating coalition building to address localized community problems.

	Prior Actu FY 201	als	F	Enacted Y 2012-2013	Existing Oper Budget as of 12/01/12		Continuation FY 2013-2014	Recommended FY 2013-2014	Total commended ver/(Under) EOB
Means of Financing:									
State General Fund (Direct)	\$	0	\$	0	\$ 0	\$	5 0	\$ 0	\$ 0
State General Fund by:									
Total Interagency Transfers		0		0	0		0	9,271,679	9,271,679
Fees and Self-generated Revenues		0		0	0		0	0	0
Statutory Dedications		0		0	0		0	0	0
Interim Emergency Board		0		0	0		0	0	0
Federal Funds		0		0	0		0	0	0
Total Means of Financing	\$	0	\$	0	\$ 0	\$	6 0	\$ 9,271,679	\$ 9,271,679
Expenditures & Request:									
Central Louisiana Human Services District	\$	0	\$	0	\$ 0	ş	5 0	\$ 9,271,679	\$ 9,271,679
Total Expenditures & Request	\$	0	\$	0	\$ 0	\$	5 0	\$ 9,271,679	\$ 9,271,679

# **Central Louisiana Human Services District Budget Summary**



	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB
Authorized Full-Time Equi	valents:					
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
Total FTE	Cs 0	0	0	0	0	0

# **Central Louisiana Human Services District Budget Summary**



# **376\_1000 — Central Louisiana Human Services District**

### **Program Description**

The mission of the Central Louisiana Human Service Authority is to increase public awareness of and to provide access for individuals with behavioral health and developmental disabilities to integrated community based services while promoting wellness, recovery and independence through education and the choice of a broad range of programmatic and community resources.

The goals of the Central Louisiana Human Services Authority are:

- I. To provide behavioral health and developmental disabilities services that consumers, their families and communities want in a manner which provides them quick and convenient entry into services.
- II. To ensure that services provided are responsive to client concerns, integrated in service delivery methods, representative of best practice, and consistent with the goals of the Department of Health and Hospitals and its Program Offices.
- III. To promote healthy, safe lives for people by providing leadership in educating the community on the importance of prevention, early detection and intervention, and by facilitating coalition building to address localized community problems.

The Imperial Central Louisiana Human Services Authority program includes the following activities:

Administration - DHH, its program offices and the Louisiana Legislature have created a statewide integrated human services delivery system with local accountability and management to provide behavioral health and developmental disabilities services. These local human service systems are referred to as local governmental entities (LGEs). LGEs feature practices such as a framework anchored in clear policy objectives, well-defined local roles and responsibilities, and measures to assure accountability of delivering quality services to consumers that assist in determining the relative efficiency and effectiveness of public systems. Act 373 of the 2008 Legislative Session, requires that DHH shall not contract with a new LGE until DHH, in consultation with the Human Services Interagency Council (HSIC), has determined and confirmed in writing to the governor that DHH is prepared to contract the provision of services to the LGE after the LGE has successfully completed the Readiness Assessment. The Central Louisiana Human Service Authority was created by Act 373 in the 2008 Legislative Session for the parishes of Grant, Winn, LaSalle, Catahoula, Concordia, Avoyelles, Rapides and Vernon. The Central Louisiana Human Service Authority will participate in the statewide initiative to implement an electronic health record to assist with continuous documentation efforts, scheduling of clients to maximize provider time, invoicing and billing procedures to improve collection efforts and standardization of forms/procedures. Central Louisiana Human Service Authority is seeking national accreditation with CARF for its behavioral clinics sites within the region.



- Behavioral Health Mental Health The current budget for mental health services in the Central Louisiana Human Service Authority catchment area provides for outpatient clinic services for children over the age of six, adolescents, and adults. Core services include screening, assessment, crisis evaluation, individual, group and family counseling and medication management which includes administration, education and screening for people with co-occurring disorders. Contracted services include evidence-based practice Assertive Community Treatment and Intensive Case Management Services, as well as housing and employment assistance, assistance in application for SSI. Service delivery includes full participation in the Louisiana Behavioral Health Partnership and the Coordinated System of Care and works as a participant in the Coordinated Care Network. All Behavioral Health clinics in the Central Louisiana Human Services District will participate as Medicaid Application Centers for persons requesting services.
- Behavioral Health Addictive Disorders Alcohol and drug abuse continues to be a major health problem in our state as well as in the Central Louisiana Human Service Authority catchment area. The resources available are not sufficient to meet the growing need for treatment and prevention services. Central Louisiana Human Service Authority falls into this category when considering the vast geography covered in the service area which limits inpatient service options. The same is true for outpatient services. The program has made significant strides to prioritize services to meet these crucial needs by encouraging and supporting the awareness and understanding of alcoholism and drug addiction amongst the citizens of our state. The basic premise of addictive disorder services is to develop ideas and programs that can help increase public awareness, treat adults and youth who need AD services and prevent the abuse of alcohol and drug addiction as well as compulsive gambling. The largest barrier to success for addictive disorder programs is the ability to maintain patient gains made in outpatient and inpatient treatment. Sometimes the impulse to abuse substance and/or to participate in dysfunctional behavior is too great and the gains from treatment can be wiped out in an instant. The need to provide education on prevention at an early age is key to deterring abuse and the subsequent need for treatment. AD and prevention service providers focus their attention on providing comprehensive, fully integrated prevention and treatment services. We actively seek the assistance of partnerships and collaborations to fully meet the needs of individuals, families and communities. The needs of the individuals, families and communities requiring addictive disorder services and the consequences they suffer are the impetus to incorporate addictive disorders practices in the health care debate. The goal remains to seamlessly integrate these practices into the comprehensive health care system without losing attention to the special needs of individuals, families, communities requiring substance abuse intervention.
- Developmental Disabilities Developmental Disabilities core services consist of serving as the Single Point of Entry (SPOE) into the Developmental Disabilities (DD) Services System and providing support coordination services to individuals and their families through DD and other available community resources. Staff members assess the needs for support and services, develop individual plans of support, make applicable referrals, and provide ongoing coordination for the client's support plans. Targeted services are centered on Home and Community-Based Services Waiver programs and Federal criteria which allow services to be provided in a home or community-based setting for the recipient who would otherwise require institutional care. The Family Support Program is designed to assist individuals whose needs exceed those normally used resources in the community, and other natural resources available. Individual and Family Supports include but are not limited to: respite care, personal assistance services, specialized clothing, such as adult briefs, dental and medical services not covered by other sources, equipment and supplies, communication services, crisis intervention, specialized utility costs, specialized nutrition, and family education. The Flexible Family Fund Program is intended to assist families with children with severe or profound disabilities to offset the extraordinary costs of maintaining their child in their own home. The program provides a monthly stipend to families of children who have qualifying exceptionalities identified through their local educational authority.



			-			
	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended TY 2013-2014	Total Recommender Over/(Under) EOB
Means of Financing:						
State General Fund (Direct)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ (
State General Fund by:						
Total Interagency Transfers	0	0	0	0	9,271,679	9,271,679
Fees and Self-generated Revenues	0	0	0	0	0	
Statutory Dedications	0	0	0	0	0	
Interim Emergency Board	0	0	0	0	0	(
Federal Funds	0	0	0	0	0	(
Total Means of Financing	\$ 0	\$ 0	\$ 0	\$ 0	\$ 9,271,679	\$ 9,271,679
Expenditures & Request:						
Personal Services	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ (
Total Operating Expenses	0	0	0	0	0	(
Total Professional Services	0	0	0	0	0	(
Total Other Charges	0	0	0	0	9,271,679	9,271,679
Total Acq&Major Repairs	0	0	0	0	0	(
Total Unallotted	0	0	0	0	0	(
Total Expenditures & Request	\$ 0	\$ 0	\$ 0	\$ 6 0	\$ 9,271,679	\$ 9,271,679
Authorized Full-Time Equiva	lents:					
Classified	0	0	0	0	0	(
Unclassified	0	0	0	0	0	
Total FTEs	0	0	0	0	0	(

# Central Louisiana Human Services District Budget Summary

# Major Changes from Existing Operating Budget

Gener	al Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	0	\$	0	0	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
					Non-Statewide Major Financial Changes:
	0		297,000	0	Interagency Transfer funding from the Office of the Secretary to aid in establishing the Central La Human Services District in FY14.



# Major Changes from Existing Operating Budget (Continued)

General Fund		Total Amount	Table of Organization	Description
	0	6,609,806	0	Interagency Transfer funding from the Office of Behavioral Health to aid in establishing the Central La Human Services District in FY14. There are 29 NON T.O. FTE positions that will be transferred and 35 T.O. positions that will be transferred and converted to NON T.O. FTE positions as well.
	0	2,364,873	0	Interagency Transfer funding from the Office for Citizens with Developmental Disabilities to aid in establishing the Central La Human Services District in FY14. There are 22 T.O. positions that will be transferred and converted to NON T.O. FTE positions as well.
\$	0	\$ 9,271,679	0	Recommended FY 2013-2014
\$	0	\$ 0	0	Less Supplementary Recommendation
\$	0	\$ 9,271,679	0	Base Executive Budget FY 2013-2014
\$	0	\$ 9,271,679	0	Grand Total Recommended

### **Professional Services**

Amount	Description
	This program does not have funding for Professional Services for Fiscal Year 2013-2014.

# **Other Charges**

Amount	Description
	Other Charges:
\$9,271,679	Costs of ongoing services that are currently provided through the Office of Behavioral Health and the Office for Citizens with Developmental Disabilities. The funds are from the Office of the Secretary, the Office of Behavioral Health, and the Office for Citizens with Developmental Disabilities.
\$9,271,679	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
	This program does not have funding for Interagency Transfers for Fiscal Year 2013-2014.
\$9,271,679	TOTAL OTHER CHARGES

# **Acquisitions and Major Repairs**

Amount	Description				
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.				



# **Performance Information**

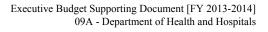
#### 1. (KEY) Through administrative activity, Central Louisiana Human Services District will provide for the management and operational activities of services for addictive disorders, developmental disabilities and behavioral health.

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

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

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).

Performance Indicator Values						
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of Central Louisiana Human Services District clients who state they would continue to receive services at our clinics if given the choice to go elsewhere (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of Central Louisiana Human Service Authority clients who state they would recommend the clinics to family and friends (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established





#### 2. (KEY) To extend quality mental health and Flexible Family Fund services to Children/Adolescents and Adults to the District target population, with client satisfaction feedback that meets threshold. And to provide addictive disorder prevention services to children, adolescents and their families and treatment services to adults including inpatient care.

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

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

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).

			Performance Ind	licator Values		
L e v e Performance Indicator I Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of adults served with MH services in all Central Louisiana Human Service Authority Behavioral Health clinics (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Number of children/ adolescents served with MH services in all Central Louisiana Human Services District Behavioral Health clinics (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of adults receiving MH services who report that they would choose services in this agency if given a choice to receive services elsewhere (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of MH clients who would recommend services in this agency to others (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable		

#### **Performance Indicators**



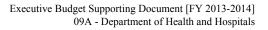
			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of MH cash subsidy slots utilized (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of successful completions (24-hour residential programs) - AD Program (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Primary Inpatient Adult: Percentage of individuals successfully completing the program -AD program (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Primary Inpatient Adolescent: Percentage of individuals successfully completing the program - AD Program (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established

# **3. (KEY)** Through the Developmental Disabilities activity, to foster and facilitate independence for citizens with disabilities through the availability of home and community based services.

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

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

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).





			Performance Ind	licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of people receiving individual and family support services (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Number of people receiving flexible family fund services (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of eligibility determinations determined valid according to the Flexible Family Fund promulgation (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Number of persons receiving DD services per year (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established

#### **Performance Indicators**

#### Central Louisiana Human Services District General Performance Information

		Perfo	rmance Indicator V	alues	
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012
Total number of individuals served in the Central Louisiana Human Service Authority (LAPAS CODE - New)	Not Applicable				
Total number of individuals served by outpatient mental health in Central Louisiana Human Service Authority (LAPAS CODE - New)	Not Applicable				
Total number of individuals served by inpatient Addictive Disorders in Central Louisiana Human Service Authority (LAPAS CODE - New)	Not Applicable				
Total numbers of individuals served by outpatient Addictive Disorders in Central Louisiana Human Service Authority (LAPAS CODE - New)	Not Applicable				
Total number of enrollees in prevention programs (LAPAS CODE - New)	Not Applicable				



## 09-377 — Northwest Louisiana Human Services District

## **Agency Description**

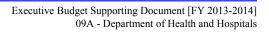
The mission of the Northwest Louisiana Human Services District is to increase public awareness of and to provide access for individuals with behavioral health and developmental disabilities to integrated community based services while promoting wellness, recovery and independence through education and the choice of a broad range of programmatic and community resources.

The goals of the Northwest Louisiana Human Services District are:

- I. To provide behavioral health and developmental disabilities services that consumers, their families and communities want in a manner which provides them quick and convenient entry into services.
- II. To ensure that services provided are responsive to client concerns, integrated in service delivery methods, representative of best practice, and consistent with the goals of the Department of Health and Hospitals and its Program Offices.
- III. To promote healthy, safe lives for people by providing leadership in educating the community on the importance of prevention, early detection and intervention, and by facilitating coalition building to address localized community problems.

	Prior Year Actuals FY 2011-20		Enacted FY 2012-2		Existin Bud as of 12	lget	Continuation Y 2013-2014	ecommended Y 2013-2014	Total commended ver/(Under) EOB
Means of Financing:									
State General Fund (Direct)	\$	0	\$	0	\$	0	\$ 0	\$ 0	\$ 0
State General Fund by:									
Total Interagency Transfers		0		0		0	0	11,511,824	11,511,824
Fees and Self-generated Revenues		0		0		0	0	0	0
Statutory Dedications		0		0		0	0	0	0
Interim Emergency Board		0		0		0	0	0	0
Federal Funds		0		0		0	0	0	0
Total Means of Financing	\$	0	\$	0	\$	0	\$ 0	\$ 11,511,824	\$ 11,511,824
Expenditures & Request:									
Northwest Louisiana Human Services District	\$	0	\$	0	\$	0	\$ 0	\$ 11,511,824	\$ 11,511,824
Total Expenditures & Request	\$	0	\$	0	\$	0	\$ 0	\$ 11,511,824	\$ 11,511,824

## Northwest Louisiana Human Services District Budget Summary



	Prior Year Actuals FY 2011-2012	Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12	Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommended Over/(Under) EOB
Authorized Full-Time Equi	valents:					
Classified	0	0	0	0	0	0
Unclassified	0	0	0	0	0	0
Total FTE	Es 0	0	0	0	0	0

## Northwest Louisiana Human Services District Budget Summary



## 377\_1000 — Northwest Louisiana Human Services District

## **Program Description**

The mission of the Northwest Louisiana Human Services District is to increase public awareness of and to provide access for individuals with behavioral health and developmental disabilities to integrated community based services while promoting wellness, recovery and independence through education and the choice of a broad range of programmatic and community resources.

The goals of the Northwest Louisiana Human Services District are:

- I. To provide behavioral health and developmental disabilities services that consumers, their families and communities want in a manner which provides them quick and convenient entry into services.
- II. To ensure that services provided are responsive to client concerns, integrated in service delivery methods, representative of best practice, and consistent with the goals of the Department of Health and Hospitals and its Program Offices.
- III. To promote healthy, safe lives for people by providing leadership in educating the community on the importance of prevention, early detection and intervention, and by facilitating coalition building to address localized community problems.

The Imperial Calcasieu Human Services Authority program includes the following activities:

- Administration DHH, its program offices and the Louisiana Legislature have created a statewide integrated human services delivery system with local accountability and management to provide behavioral health and developmental disabilities services. These local human service systems are referred to as local governmental entities (LGEs). LGEs feature practices such as a framework anchored in clear policy objectives, well-defined local roles and responsibilities, and measures to assure accountability of delivering quality services to consumers that assist in determining the relative efficiency and effectiveness of public systems. Act 373 of the 2008 Legislative Session, requires that DHH shall not contract with a new LGE until DHH, in consultation with the Human Services Interagency Council (HSIC), has determined and confirmed in writing to the governor that DHH is prepared to contract the provision of services to the LGE after the LGE has successfully completed the Readiness Assessment. The Northwest Louisiana Human Services District was created by Act 373 in the 2008 Legislative Session for the parishes of Caddo, Bossier, Webster, Claiborne, Bienville, Red River, Desoto, Sabine and Natchitoches. The Northwest Louisiana Human Services District will participate in the statewide initiative to implement an electronic health record to assist with continuous documentation efforts, scheduling of clients to maximize provider time, invoicing and billing procedures to improve collection efforts and standardization of forms/procedures.
- Behavioral Health Mental Health The current budget for mental health services in the Northwest Louisiana Human Services District catchment area provides for outpatient clinic services for children over the age of six, adolescents, and adults. Core services include screening, assessment, crisis evaluation, individual, group and family counseling and medication management which includes administration, education and screening for people with co-occurring disorders. Contracted services include evidence-based prac-



tice Assertive Community Treatment and Intensive Case Management Services, as well as housing and employment assistance, assistance in application for SSI. Service delivery includes full participation in the Louisiana Behavioral Health Partnership and the Coordinated System of Care and works as a participant in the Coordinated Care Network. All Behavioral Health clinics in the Northwest Louisiana Human Services District will participate as Medicaid Application Centers for persons requesting services.

- Behavioral Health Addictive Disorders Alcohol and drug abuse continues to be a major health problem in our state as well as in the Northwest Louisiana Human Services District catchment area. The resources available are not sufficient to meet the growing need for treatment and prevention services. Northwest Louisiana Human Services District falls into this category when considering the vast geography covered in the service area which limits inpatient service options. The same is true for outpatient services. The program has made significant strides to prioritize services to meet these crucial needs by encouraging and supporting the awareness and understanding of alcoholism and drug addiction amongst the citizens of our state. The basic premise of addictive disorder services is to develop ideas and programs that can help increase public awareness, treat adults and youth who need AD services and prevent the abuse of alcohol and drug addiction as well as compulsive gambling. The largest barrier to success for addictive disorder programs is the ability to maintain patient gains made in outpatient and inpatient treatment. Sometimes the impulse to abuse substance and/or to participate in dysfunctional behavior is too great and the gains from treatment can be wiped out in an instant. The need to provide education on prevention at an early age is key to deterring abuse and the subsequent need for treatment. AD and prevention service providers focus their attention on providing comprehensive, fully integrated prevention and treatment services. We actively seek the assistance of partnerships and collaborations to fully meet the needs of individuals, families and communities. The needs of the individuals, families and communities requiring addictive disorder services and the consequences they suffer are the impetus to incorporate addictive disorders practices in the health care debate. The goal remains to seamlessly integrate these practices into the comprehensive health care system without losing attention to the special needs of individuals, families, communities requiring substance abuse intervention.
- Developmental Disabilities Developmental Disabilities core services consist of serving as the Single Point of Entry (SPOE) into the Developmental Disabilities (DD) Services System and providing support coordination services to individuals and their families through DD and other available community resources. Staff members assess the needs for support and services, develop individual plans of support, make applicable referrals, and provide ongoing coordination for the client's support plans. Targeted services are centered on Home and Community-Based Services Waiver programs and Federal criteria which allow services to be provided in a home or community-based setting for the recipient who would otherwise require institutional care. The Family Support Program is designed to assist individuals whose needs exceed those normally used resources in the community, and other natural resources available. Individual and Family Supports include but are not limited to: respite care, personal assistance services, specialized clothing, such as adult briefs, dental and medical services not covered by other sources, equipment and supplies, communication services, crisis intervention, specialized utility costs, specialized nutrition, and family education. The Flexible Family Fund Program is intended to assist families with children with severe or profound disabilities to offset the extraordinary costs of maintaining their child in their own home. The program provides a monthly stipend to families of children who have qualifying exceptionalities identified through their local educational authority.



	Prior Year Actuals FY 2011-2012		Enacted FY 2012-2013	Existing Oper Budget as of 12/01/12		Continuation FY 2013-2014	Recommended FY 2013-2014	Total Recommender Over/(Under) EOB
Means of Financing:								
State General Fund (Direct)	\$	0	\$ 0	\$	0	\$ 0	\$ 0	\$
State General Fund by:								
Total Interagency Transfers		0	0		0	0	11,511,824	11,511,824
Fees and Self-generated Revenues		0	0		0	0	0	(
Statutory Dedications		0	0		0	0	0	(
Interim Emergency Board		0	0		0	0	0	
Federal Funds		0	0		0	0	0	(
Total Means of Financing	\$	0	\$ 0	\$	0	\$ 0	\$ 11,511,824	\$ 11,511,824
Expenditures & Request:								
Personal Services	\$	0	\$ 0	\$	0	\$ 0	\$ 0	\$
Total Operating Expenses		0	0		0	0	0	
Total Professional Services		0	0		0	0	0	
Total Other Charges		0	0		0	0	11,511,824	11,511,824
Total Acq&Major Repairs		0	0		0	0	0	
Total Unallotted		0	0		0	0	0	
Total Expenditures & Request	\$	0	\$ 0	\$	0	\$ 0	\$ 11,511,824	\$ 11,511,824
Authorized Full-Time Equiva	lents:							
Classified		0	0		0	0	0	(
Unclassified		0	0		0	0	0	
<b>Total FTEs</b>		0	0		0	0	0	(

## Northwest Louisiana Human Services District Budget Summary

## Major Changes from Existing Operating Budget

Genera	ıl Fund	Т	otal Amount	Table of Organization	Description
\$	0	\$	0	0	Mid-Year Adjustments (BA-7s):
\$	0	\$	0	0	Existing Oper Budget as of 12/01/12
					Statewide Major Financial Changes:
					Non-Statewide Major Financial Changes:
	0		297,000	0	Interagency Transfer funding from the Office of the Secretary to aid in establishing the Northwest La Human Services District in FY14.



## Major Changes from Existing Operating Budget (Continued)

General Fund		Total Amount	Table of Organization	Description
	0	8,375,297	0	Interagency Transfer funding from the Office of Behavioral Health to aid in establishing the Northwest La Human Services District in FY14. There are 57 NON T.O. FTE positions that will be transferred and 29 T.O. positions that will be transferred and converted to NON T.O. FTE positions as well.
	0	2,839,527	0	Interagency Transfer funding from the Office for Citizens with Developmental Disabilities to aid in establishing the Northwest La Human Services District in FY14. There are 26 T.O. positions that will be transferred and converted to NON T.O. FTE positions as well.
\$	0	\$ 11,511,824	0	Recommended FY 2013-2014
\$	0	\$ 0	0	Less Supplementary Recommendation
\$	0	\$ 11,511,824	0	Base Executive Budget FY 2013-2014
\$	0	\$ 11,511,824	0	Grand Total Recommended

## **Professional Services**

Amount	Description
	This program does not have funding for Professional Services for Fiscal Year 2013-2014.

## **Other Charges**

Amount	Description
	Other Charges:
\$11,511,824	Costs of ongoing services that are currently provided through the Office of Behavioral Health and the Office for Citizens with Developmental Disabilities. The funds are from the Office of the Secretary, the Office of Behavioral Health, and the Office for Citizens with Developmental Disabilities.
\$11,511,824	SUB-TOTAL OTHER CHARGES
	Interagency Transfers:
	This program does not have funding for Interagency Transfers for Fiscal Year 2013-2014.
\$11,511,824	TOTAL OTHER CHARGES

## **Acquisitions and Major Repairs**

Amount	Description
	This program does not have funding for Acquisitions and Major Repairs for Fiscal Year 2013-2014.



### **Performance Information**

#### 1. (KEY) Through administrative activity, Northwest Louisiana Human Services District will provide for the management and operational activities of services for addictive disorders, developmental disabilities and behavioral health.

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

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

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).

Performance Indicator Values						
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of Central Northwest Louisiana Human Services District clients who state they would continue to receive services at our clinics if given the choice to go elsewhere (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of Northwest Louisiana Human Services District clients who state they would recommend the clinics to family and friends (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established

#### **Performance Indicators**



#### 2. (KEY) To extend quality mental health and Flexible Family Fund services to Children/Adolescents and Adults to the District target population, with client satisfaction feedback that meets threshold. And to provide addictive disorder prevention services to children, adolescents and their families and treatment services to adults including inpatient care.

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

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

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).

Performance Indicator Values				licator Values		
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of adults served with MH services in all Northwest Louisiana Human Services District Behavioral Health clinics (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Number of children/ adolescents served with MH services in all Northwest Louisiana Human Services District Behavioral Health clinics (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of adults receiving MH services who report that they would choose services in this agency if given a choice to receive services elsewhere (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of MH clients who would recommend services in this agency to others (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established

#### Performance Indicators



	Performance Indicator Values					
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Percentage of MH cash subsidy slots utilized (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of successful completions (24-hour residential programs) - AD Program (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Primary Inpatient Adult: Percentage of individuals successfully completing the program -AD program (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Primary Inpatient Adolescent: Percentage of individuals successfully completing the program - AD Program (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established

#### **Performance Indicators (Continued)**

# **3. (KEY)** Through the Developmental Disabilities activity, to foster and facilitate independence for citizens with disabilities through the availability of home and community based services

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

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

Other Links (TANF, Tobacco Settlement, Workforce Development Commission, or Other): Healthy People 2010, The American Association of Intellectual and Developmental Disabilities (AAID), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP), Substance Abuse Mental Health Services Administration's Center for Substance Abuse Treatment (CSAT).



	Performance Indicator Values					
L e v e Performance Indicator l Name	Yearend Performance Standard FY 2011-2012	Actual Yearend Performance FY 2011-2012	Performance Standard as Initially Appropriated FY 2012-2013	Existing Performance Standard FY 2012-2013	Performance At Continuation Budget Level FY 2013-2014	Performance At Executive Budget Level FY 2013-2014
K Number of people receiving individual and family support services (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Number of people receiving flexible family fund services (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Percentage of eligibility determinations determined valid according to the Flexible Family Fund promulgation (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established
K Number of persons receiving DD services per year (LAPAS CODE - New)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	To Be Established

#### **Performance Indicators**

#### Northwest Louisiana Human Services District General Performance Information

	Performance Indicator Values				
Performance Indicator Name	Prior Year Actual FY 2007-2008	Prior Year Actual FY 2008-2009	Prior Year Actual FY 2009-2010	Prior Year Actual FY 2010-2011	Prior Year Actual FY 2011-2012
Total number of individuals served in the Northwest Louisiana Human Services District (LAPAS CODE - New)	Not Applicable				
Total number of individuals served by outpatient mental health in Northwest Louisiana Human Services District (LAPAS CODE - New)	Not Applicable				
Total number of individuals served by inpatient Addictive Disorders in Northwest Louisiana Human Services District (LAPAS CODE - New)	Not Applicable				
Total numbers of individuals served by outpatient Addictive Disorders in Northwest Louisiana Human Services District (LAPAS CODE - New)	Not Applicable				
Total number of enrollees in prevention programs (LAPAS CODE - New)	Not Applicable				

